

4 March 2024

Agenda Item: 6

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

**ADULT SOCIAL CARE AND PUBLIC HEALTH PERFORMANCE, RISKS AND
FINANCIAL POSITION – QUARTER 3 2023/24**

Purpose of the Report

1. To provide the Committee with a summary of Adult Social Care performance against performance themes.
2. 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.
3. To provide the Committee with a summary of Adult Social Care Vital Signs and key departmental risks.
4. To provide the Committee with a summary of the Adult Social Care and Public Health financial position as at the end of December 2023.

Information

Adult Social Care Performance Themes

A) Wellbeing and Independence

October - December 2023 Performance

Hospital Discharge

5. Performance for hospital discharge has slightly improved this quarter, in line with trajectory. It takes 5.6 days to discharge a person from when they are well enough to go home (November data). The performance measure is currently under review. System improvement plans are in place including a focus on Pathway 1 flow, Pathway 2 rehab beds and abandoned discharge. A deep dive is underway to review longer delays.

Safeguarding

6. In December 78.5% of people were asked their desired safeguarding outcomes, which is below the aspirational target of 100% but just below the national average of 81%. Of those people asked, 95% felt their outcomes were achieved, which is on target. In just over 82% of cases, it was considered that the risk was removed or reduced, which remains off track, as does the percentage of people lacking capacity being supported to be involved in their safeguarding enquiries. The new Mosaic adult safeguarding workflow is scheduled to go live in April and will improve understanding as to the reasons why these measures remain off track, as well as inform subsequent action plans.
7. Although work to reduce the amount of people who had an open safeguarding case for longer than three months – identified as a risk - was initially successful, with the number of people with enquiries open six months or over reducing from 276 in October 2022 to 37 in August 2023, that number has now begun to rise again and currently stands at 70. Offsetting that increase, the number of people with safeguarding enquiries open between three to six months has reduced from 146 in November to 94.

Deprivation of Liberty Safeguards (DoLS)

8. Performance against the department's statutory duty to complete 100% of DoLS assessments within timescales remains off track. There has, however, been a continued steady improvement in the percentage of completed DoLS assessments, with the number reaching 65.3% in November, compared with 56.6% in September.
9. The new external DoLS provider has agreed to a revised contractual 'call-off', limiting the number of assessments asked of them to improve the quality and timeliness of work submitted. They have also accepted financial penalties if work is submitted out of timescale. The first recruitment drive for more Council-employed Best Interest Assessor (BIAs) qualified social workers was successful, with all four candidates now in post. Alongside that, four agency staff have been recruited, although the priority continues to be recruitment on a permanent contractual basis, with the intention being to revisit the marketplace in early February.

Long-Term Reviews

10. At the end of December 2023, 77.1% of people who are 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%).
11. Performance is impacted by staffing vacancies currently in recruitment and new members of staff currently going through induction. Mosaic processes are also being reviewed where data is being skewed by reopened cases which show from their initial start date.
12. Strengths-based reviews are continuing to improve outcomes and reduce spend on statutory services where appropriate.

Stories of Difference

Quality Assurance Review – Fantastic feedback was received for Living Well Mansfield, on completion of a Care and Support Plan Annual Review. A cares for R, who also has paid carers a few times a week to support him. R had a recent review of his care and support and A wanted to share their experience.

“We’ve had visits before when we didn’t feel listened to, I sometimes felt like a stranger in my own home and that I was being judged. I was starting to get into debt because of the cost of R’s care and becoming unwell because of the stress of it, so had decided to cancel his care. Jo came to do a review of R’s care and she was like our ‘guardian angel’ sent from heaven to help us. She took the time to come and visit us at home, she listened to R asking him what he wanted to do instead of focusing on his disability. Jo also listened to me, she made me feel like a person, I didn’t feel judged, and she explained Disability Related Expenses to us, which we had not been told about before. I saw the light at the end of a dark tunnel, Jo helped us reduce the amount that R has to pay, and we kept the care, so R can continue to do the things he wants to, and I get a break, she was brilliant.”

B) Flexible and Integrated Care and Support

October – December 2023 Performance

Long Term Care

13. The number of older adults (over 65) in residential or nursing placements positively continues to gradually decrease, with 95 fewer people supported in care homes since August.
14. 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.

Stories of Difference

Ageing Well South - All Broxtowe, Gedling and Rushcliffe community teams are providing a link worker to the Memory cafes in their area monthly. The idea is to have a social care link worker who will attend the cafés to provide advice, guidance and support and be a point of contact. The feedback from the cafes so far has been really positive and they have been really pleased to have ASCH presence and support.

Carers

15. The Carers Strategy launch was held on 16 November and was well attended by carers, with positive feedback. Information gathered at the event is being utilised to support action plan development across the ICS. A series of workshops is planned for the new year to look at strategy implementation.

16. New services for carers commenced on 1 October and commissioners are working closely with providers to ensure services are delivered in line with the new specification and strategy aims.
17. 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. An evaluation of previous changes to adult carers assessments is also underway. A review of young carers assessments and direct payments is in its early stages as part of the Young Carers Steering Group – this has stalled slightly due to key staff being off at present.
18. Work 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 30 January.

Supported Accommodation

19. As of January 2024, there are 68 voids within supported accommodation, of which there are 36 voids where 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.
20. A range of factors generally account for a void being open for a period which exceeds 12 weeks, which include workforce issues, compatibility for shared services, quality suspensions and service location. An action plan is being followed to effectively manage the timescales and available resource, ensuring mitigation of financial investment (rental and shared care void), and maximising opportunities for use of accommodation.

Stories of Difference

Ashfield Day Service recycling projects have been working closely with volunteers from the Beacon project in Mansfield to help the homeless this winter. They started something that they call 'the crisp packet project' which involves collecting empty crisp packets, making sure they are clean and fusing them together using an iron to create a survival sheet. These sheets are ideal as they are lightweight, waterproof and warm and it's also a perfect way to recycle crisp packets as this can be difficult. Many people who access the day service take part in cutting, cleaning and drying crisp packets. Everyone who took part in this project worked hard and felt very proud of what they had achieved. This project is ongoing and the team and the staff at the Beacon project are very grateful and send their thanks for the donations.

C) Workforce

Internal workforce

21. The 2023 Learning and Celebration event was held over two days in November. Colleagues attended from across the department for the opportunity to hear keynote speakers, visit the market stalls and wellbeing area and take part in the world café table discussions. People with lived experience also attended the event to share their experiences, including a powerful performance from the Unanima Theatre Company. The level of engagement and enthusiasm from colleagues was evident throughout. Colleagues

learned a lot and were able to share and reinforce their knowledge. The event has given colleagues greater courage in challenging and advocating for themselves and the people they support.

22. The number of vacancies across the department remains high at 20.52% (December 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.
23. After an increase in recorded sickness absence in October (17.39 annual average FTE days lost /employee), Quarter 3 has seen a downward trajectory with the December rate standing at 14.03 FTE days. Muscular/ Skeletal, Op/Post Op Recovery and Stress/ Depression were the most common reasons for absence.
24. 86 agency workers were engaged through Reed in December, with a total of £330,659 agency spend that month.

External Workforce

25. Funding has been secured to commission Mental Health First Aider (MHFA) courses for External Care Providers, to enable them to have their own in-house qualified staff. MHFAs provide support and signposting for anyone experiencing poor mental health and play a vital role in reducing stigma and promoting positive mental health in the workplace. Courses will be held face to face in the North, Mid and South of the County from April-June 2023. Initial provider feedback has been extremely positive about the value that this training will bring.
26. Funding has also been secured to renew the accredited Medicines Management Training and to fund 1,000 licenses to support care homes. It is critical for topics such as medication management that care homes have best practice training to provide assurance to both care staff and system partners that staff within the home are competent to deliver medication for their residents. The training also provides a recognised qualification for the carer.
27. A bid has been submitted to The Rayne Foundation on behalf of the External Social Care Workforce, led by Nottinghamshire County Council in partnership with Nottingham City Council and the Integrated Care Board. The bid is centred around better careers for better care and the proposal is based on the work undertaken within the Strategic Adult Social Care External Workforce Planning Project.
28. The £300,000 that has been bid for will support the 3 identified priority areas from recent development work, which are: 1. Promoting recognition, respect and understanding, 2. Recruitment and Retention, 3. Development and Learning. The bid is through to the second stage of the process after being longlisted to the final 16 applications, out of 48. Updates to be made if successful in the next stage.
29. A recruitment survey was carried out between October and December with questions around providers' recruitment challenges. The findings will be analysed and used to determine future work.

Stories of Difference

Mencap Me Time, a day opportunity provider in Rushcliffe supporting adults with learning disability and autism, have very proudly updated that two individuals from Me Time achieved their level 1 and level 2 functional skills in maths after completing a difficult exam. Three other people are working towards this in the near future. Mencap Me Time report this is a big step for the group that reflects their creativeness and passion to offer the best opportunities possible for the people they support.

Public Health (PH) Performance against the Annual Delivery Plan, Corporate Vital Signs and Joint Health and Wellbeing Strategy

30. This section provides an overview of the impact of PH on improving population health outcomes for the residents of Nottinghamshire.
31. The information covers the period from 1 October to 31 December 2023 and PH commissioned services are predominantly performing well.

A) System

32. 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 1,391 flu vaccinations. 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. All staff were offered 'I've had my flu jab' stickers to wear on their lanyards to help promote flu vaccinations to other people they work with including both staff and residents.
33. As well as the clinics, PH has issued approximately 200 Boots vouchers to the same group of frontline workers.
34. 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. Most were frontline workers, again protecting them and the people they work with against infection and illness.

B) Place and Neighbourhood

Statutory Duties

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

35. The number of appointments across the three providers is down this quarter mainly due to seasonal variation. Capacity is still being affected by ongoing staff recruitment and retention issues and the recommissioning of sexual health services.

36. 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. PH is working across the sexual health system to take a long-term approach to increasing resident choice and access to contraception.
37. Action plans with service leads have been developed to increase activity levels. These actions involve changes to service delivery to increase capacity in order to ensure that levels of demand are met.
38. Sexual health services require intensive service redesign which the ongoing recommissioning of services will achieve. This will ensure that residents will have increased choice and access to a single service that covers Nottinghamshire and Nottingham, particularly for people most at risk of poorer sexual health outcomes.

Healthy Families Programme (HFP) (Nottinghamshire Healthcare NHS Foundation Trust)

39. The 0-19 Healthy Families Programme (HFP) continues 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.
40. The provider made visits to 1,738 babies (92.2%) within 14 days of birth which is an increase on the previous quarter and meets the target for this mandated review. Almost 9 in 10 babies received a 6-8 week review and 94.9% of children had their 12 month review before they were 15 months old. Almost all 2-2½ year reviews were completed within target timescales (98.6%). The service continues to perform well.
41. The Health Promotion Lead is working closely with West Notts College to support students completing their college qualifications. The students require real life opportunities to support their course work. Student volunteers have been creating digital resources for the Healthy Family Team to use in promotional materials. The volunteers offered to create Young People Infographics for future use with young people including for the website, leaflets, posters and videos.

Domestic Abuse Support Services (Nottinghamshire Women's Aid, Juno Women's Aid, Equation)

42. In Quarter 2 the Domestic Abuse Providers supported 1,236 survivors. 336 survivors were new referrals to domestic abuse support services in the County. This is an increase in survivors supported across the County in Quarter 1, with a small decrease in new referrals.
43. 1,026 survivors called the 24 helpline in Quarter 1 and Quarter 2, with most survivors aged 25 - 44 years old. 352 professionals also called the helpline to gain advice, when supporting survivors. There was a 17% increase in calls to the helpline between Quarter 1 and Quarter 2.
44. MARAC (Multi-Agency Risk Assessment Conference) referrals continue to be high. Equation have seen their high-risk MARAC referrals for male survivors double, when

compared with referral numbers in 2022/23 (8 referrals in 12 month period of 2022/23 and 8 referrals in 6 months of 2023/24).

45. There have been improvements in the working relationships between the Council's local substance use provider, Change Grow Live (CGL), and Nottinghamshire Women's Aid which has resulted in an increase in referrals to 11 in Quarter 1 and 5 in Quarter 2.

Stories of Difference

Notts Women's Aid have focused activity on providing Freedom Programmes differently, making the courses easier to attend and to reduce the waiting list. Commissioners provided with some additional funding to review the programmes available and offer additional courses to women. This has resulted in the waiting lists reducing by over 50% from 202 in Quarter 1 to 92 in Quarter 2.

Juno Women's Aid have secured £3million investment to purchase high quality housing to survivors of domestic abuse across the County. This will allow women and children to move out of refuge into properties owned by Juno, providing a key step to rebuilding their lives.

Strategic Priorities

Integrated Wellbeing Service (ABL - Your Health Notts (YHN))

46. Performance is showing continual improvement from Quarter 1 with 65% of clients quitting smoking at four weeks following setting a quit date.
47. The service has rolled out the provision of vapes as a quit aid alongside existing nicotine replacement therapy and this is anticipated to further increase the number of successful quit attempts over coming months.
48. The service has implemented a programme of new 'pop up' adult weight management groups that run within specific localities of high need on a six-week rotational basis. These groups will support weight loss outcomes within areas of higher deprivation. There has been a 6% increase in outcomes from people living in the most deprived communities across the whole Integrated Wellbeing Service.
49. Performance continues to be closely monitored and the provider has been required to submit a plan setting out actions to increase performance against all Key Performance Indicators by the end of the 2023/24 reporting period.
50. As part of a continued focus on reducing health inequalities, the provider is developing a pilot of stop smoking support for people experiencing homelessness and a pilot of health behaviour change support for people with severe mental illness which will both be rolled out from Quarter 4. People with severe mental illness have been involved in co-producing the delivery model for their pilot programme.

In January, **Your Health Notts** commenced a 6-week prenatal exercise and healthy eating during pregnancy group, delivered in partnership with the Polish Village Organisation in Newark. The feedback from participants has been positive and members of the group have made plans to continue meeting together with their babies after birth. Your Health Notts has provided funding to allow the Polish Village Organisation to continue running their sessions and supporting families. Plans are in place to replicate the programme in Mansfield in April.

In collaboration with Bassetlaw's Enhanced Health in Care Homes Team, Your Health Notts are piloting a project delivering physical activity within care homes to make the service more accessible to older-age adults. To date, Your Health Notts has delivered a 6-week programme of chair-based exercise to residents in four care homes across Bassetlaw. Following completion of the sessions, Your Health Notts are upskilling one member from each care home in a chair-based exercise qualification to enable them to continue to deliver.

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

51. The number of people who successfully completed drug and or alcohol treatment in this quarter was 257 and a further 1,518 people in treatment were showing substantial progress with reducing or stopping their illicit drug use and/or alcohol use.
52. Psychologist support has begun for all people in treatment increasing the psycho-social offer.
53. The number of people presenting for alcohol use and non-opiates are still high into treatment as well as an increase in people who are vulnerable and have multiple health and social care needs.

Buvidal detox case studies

Case Study 1

31 year old male client. Partner also in service until very recently – became pregnant and stopped all Opioid Substitution Treatment before giving birth. This was the client's main motivation to come off all OST himself. Working full time as a barber (self-employed) Client had mentioned this in a medical review, he was then signposted to me and I triaged him and took bloods. Client has been in service since 2018. Illicit drug of choice was heroin – smoked and cannabis. Client was on 14mg DSC Espranor and I discussed the possibility of a detox over a much shorter period of time utilising Buvidal over oral Espranor. Client opted for Buvidal and was given 4 x weekly injections starting at 32mg, 24mg, 16mg and finally 8mg. Client reported very mild withdrawal type symptoms over the first couple of weeks and then for his final 2 weeks of the detox didn't report any symptoms at all. Client has remained clean and off OST since end of Nov 2023. Client had previously tried both Espranor and Methadone at high doses but continued to use illicit drugs and not engage with appts etc. Gave clean Urine Drug Screening throughout treatment with Buvidal.

Case study 2

41 year old male client. Opted for a switch to Buvidal as was in full time employment. Aged 12 started using cannabis, started hanging around with older people and at 14 used heroin for the first time smoked until 15 when he injected in his arms for six months. At 16 he went to a young offender's prison for robbery and commercial burglary he did 18 months and was drug free for 18 months after he was released. He then relapsed on heroin for another year before he went back to prison for two and half years for robbery. He was released got into a fight and went back to prison to finish his licence off. Released from prison in 2003 and was drug free for 10 years - never been on methadone programme on treatment and probably had DFs in police custody. However, later remembered he was on Subx Rx and had the same worker as today- Michelle - this was about 15-18 years ago. 7 years ago, he started using heroin again. Was smoking daily since then. Came back to Worksop a year ago after the breakdown of his relationship and to be near his family. Currently, using heroin smoking £40-50 daily £20 in a morning and £20 at night but could be more at weekends. Client was seen and triaged by me and bloods were taken. Commenced on Buvidal weekly in Sep 22 and moved to equivalent monthly dose of 128mg. Remained stable and drug free other than occasional line of cocaine snorted on social occasions. Client opted for reduction in dose to 96mg in July 23 and then again in Sept 23 to 64mg– fully detoxed after final injection of 64mg 19/9/23. Telephone check in call arranged for 6 weeks after final injection – continues to do well and denied any withdrawal type symptoms.

Vital Signs and Departmental Risk across Adult Social Care

Vital signs development across adult social care statutory duties

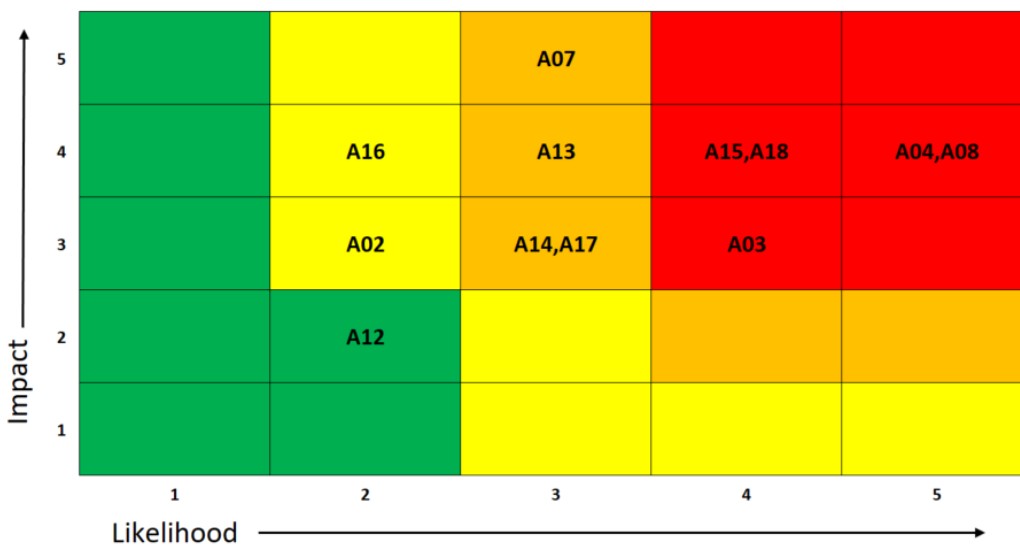
54. The overarching departmental vital signs identified within Adult Social Care and Health are statutory duties (including the Annual Delivery Plan), market sustainability and workforce.
55. For the department's **statutory duties** this includes care act assessments, reviews, Deprivation of Liberty Safeguards assessments, Mental Health Act referrals, and safeguarding enquiries. Work continues to ensure robust data and definitions are in place across these areas through operational dashboards and rollout of a regionally adopted prioritisation matrix.
56. Currently there is no agreed national definition of "people waiting", and therefore the department is unable to benchmark itself in any meaningful way with other councils. The Local Government Association in partnership with the Association of Directors of Adult Social Services (ADASS) have recognised this and a survey to gather intelligence across local authorities around waiting lists has recently been published, to help understand similarities and differences in how waiting lists are counted across the region and nationally.
57. In addition to this ADASS are working with IMPACT who are looking at four themes around waiting lists

- **Factors contributing to waiting lists in the East Midlands** such as staffing issues, the causes and impacts of increasing demand, systems and processes and other organisations
- **Impact on people and carers**, including financial impacts, difficulty coping, impacts on mental health, stress and frustration and decrease in independence.
- **Impact on staff**, including morale, stress and staff feeling they are not doing a good job
- **What is working well and what could be done differently?**

58. For **Market Sustainability** the home care market has decreased slightly over November and December but comparing the data of December 2022 the Council is delivering an increase of 4,598 hours (16.24%)
59. The current financial position with Nottingham City Council is having an initial impact on the provision of day services, with new people not being accepted from the County into some day services as the City has pulled out of the contract and the City offers a diverse range of day services.
60. 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.
61. External providers are contacting the department to request fee increases for the 2024/25 period, with many quoting changes to National Living Wage 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.

Other areas of departmental risk

62. The heat map below represents the current Adult Social Care and Public Health risks.



63. Further detail is given overleaf 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. 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	Data Quality framework under development and 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	The overall budget overspends and Strengths Based Approach savings at risk for AW	VH	Work continues with consultants Channel 3 to provide evidence that Technology Enabled Care at scale can be deployed with the expected benefits to outcomes and reduce the Medium Term Financial Strategy. Work also continues with Strategic Insight Unit on the methodology to calculate the Strength Based Approach savings in Ageing Well.
A18	Financial	ICB/ICS review of joint funded continuing healthcare, following financial constraints being enforced by NHS England.		Working with Integrated Care System (ICS) colleagues to raise awareness of impact of decisions, reduce unnecessary expenditure and negotiate potential changes to joint funding policy. Workstream started for joint commissioning and brokerage opportunities.

Financial Position as at 31 December 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
		<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	147,144	117,673	145,950	(1,194)	-0.81%
		<u>Communities and Public Health Committee</u>					
(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%

64. The overall **Adult Social Care and Public Health budget** is forecasting a **£2.14 million overspend** as at the end of December 2023.
65. **Integrated Strategic Commissioning** is forecasting a **net underspend** of **£0.77 million** after reserves, an increased underspend of £0.58 million since Period 8.
66. **Ageing Well** is forecasting an **underspend of £0.50 million**. Overspends across Long Term Care, Home Care and Direct Payments are offset by underspends on Short Term Care, additional client contributions, additional joint funding income, staffing underspends and anticipated savings.
67. 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 because of the recent expansion of the reablement teams.
68. **Living Well** is forecasting an **overspend of £5.37 million**, an increased overspend of £1.16m 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.
69. **Direct and Provider Services** is forecasting a decreased **underspend of £1.27 million**, a shift of £0.08 million since Period 8. Residential Services forecast a slightly increased overspend relating to increased agency use. Employment Services continue to forecast an underspend due to vacancies which have mostly been filled now. Day Services are forecasting a decreased underspend due to holding staffing vacancies ahead of service changes. The Service Director is forecasting a balanced budget.
70. **Public Health** is forecast to **underspend by £0.64 million**, this is the same as at Period 8. This is due to savings on sexual health and health checks and Public Health Nursing 0-19 Slippage.

Benefits Realisation of Service Improvement Programme and Risks

Ageing Well

Strengths Based Approach

71. This saving is at risk due to challenges with the methodology of tracking the impact on activity in the service. This risk has been escalated and work is underway to resolve this.
72. There is a continued emphasis on reducing Short Term Care and Long Term Care placement numbers, with primary focus on Bassetlaw as an outlier and also Group Exploration Development sessions with the South Nottinghamshire Place Based Partnership. The Strategic Insight Unit is devising a Cashable Benefits Realisation Framework and exploring additional areas of work for development and performance improvement.

Reablement

73. The number of referrals from hospitals to the Maximising Independence Service (MIS) increased in Quarter 3, as did subsequent reablement completions. The service is forecasting an underachievement of savings in 2023/24, however this is being closely monitored as it is subject to change. The team is working with hospital teams on daily Pathway 1 waits meetings to maximise Reablement capacity and to avoid delayed discharge. There is ongoing recruitment to increase capacity in the team.
74. At the end of Quarter 3, the MIS is close to being on track to complete a period of reablement with 622 people from a community referral source in 2023/24 and waiting times for enablement have reduced to an average of four weeks.
75. The 2023/24 savings target for community reablement for this year alone will be achieved. The service is expanding to take some of the Home First contract internally, there is ongoing work to align the service with Notts Health Care Trust's equivalent Pathway 1 teams and new internal operational processes are being embedded to maximise resources within the existing staffing pool. These developments will give more scope for achieving savings in 2024/25 and 2025/26.

Adult Care Financial Services

76. The saving linked to Appointeeships and Deputyships in 2023/24 is at risk, however, it is anticipated to be delivered in 2024/25. This is due to a delay in recruiting to posts following a restructure.

Strategic Commissioning

Technology Enabled Care

77. There continues to be greater use made of Technology Enabled Care (TEC) including closer involvement of the TEC team in service reviews along with increased referrals and use of TEC across community teams. TEC is also being used to reduce overnight 'sleep in' care cover where appropriate.

78. Seven 'Lilli' devices were deployed at QMC during a busy December to provide better assessment information to right size care and avoid residential admission. A further 16 people have been identified and are due have the equipment installed.

Direct Payments

79. At end of Quarter 3 there is an under-delivery of £64,000 forecast, however this saving is likely to be made in early 2024/25 if not within 2023/24.
80. Each month the shortfall is reducing as the Direct Payments Personal Assistant (DPPA) team continue to deliver new Personal Assistant (PA) packages and negotiate competitive hourly rates with providers. Work recently started to convert Direct Payment agency packages to DP PA packages and the rollout of the Brokerage model may yield significant additional savings in Quarter 4.
81. A communications campaign with social care teams carried out in Quarter 3 should lead to an increased number of referrals for new packages into the DPPA team for Quarter 4.

Living Well

Strength Based Approach

82. Steady progress continues in the four workstreams with positive movement seen towards the cashable benefits target. However, this saving is now forecast to under-deliver by £500,000 in 2023/24 and so the status has changed to experiencing obstacles. This change is due to there being insufficient time left to achieve the benefits from the remaining workstreams on this project.
83. The savings at risk can be off-set by over-delivery of other Living Well savings which are monitored through routine budget forecasts. The challenge with the methodology of tracking impact of service activity also applies to this saving.
84. Mitigations for Strengths Based Approach savings:
- Scoping and planning is in progress in relation to the reduction of 'sleep-in' services with the Housing with Support team. Processes relating to existing void inefficiencies are being reviewed to increase efficiency.
 - A programme of work has started to identify people in residential care who can move to supported living. This was delayed due to staff sickness, but is now progressing well.
 - Significant supported living developments due to be completed 2024/25 will contribute towards benefits realisation.
 - Work efforts are being concentrated around the achievement of cashable benefits: maximising resources and processes in these areas.

- The Strengths Based Approach Team Manager is moving forward work on practice issues which will have a positive effect on the overall SBA programme of work.

Preparing for Adulthood

85. This project is now reporting on target, after previously reporting at risk. Some supported living developments over the next 1-3 years will be focused on this cohort. The service is working hard with colleagues in Children and Families Services to align cultures around promoting independence. A pressure bid has been submitted to increase resources in the Preparing For Adulthood team.

Other Benefits Realisation projects

86. Savings of £2.439m have been achieved against **Shared Lives, Day Opportunities, package uplifts** and **Residential Services**. This exceeds the target set for the year by more than £500,000.

Public Health Financial Position

87. 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 £44.57m.
88. As of the budget monitoring period ended 31 December 2023, a Public Health underspend of £0.64m is projected, which would be added to the Public Health reserves at the end of the financial year.
89. As of the latest budget monitoring period (Period 9, ended 31 December 2023), the uncommitted reserves balance is projected to stand at £9.61m by 31 March 2024.
90. Throughout the financial year, work has been undertaken to identify priorities for further investment during the Medium Term Financial Strategy (MTFS) period. Some of these, including proposals increasing 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.
91. In the recent budget setting cycle for 2024/25, Public Health 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 and young people’s speech and language therapy and support for survivors of historic sexual abuse.

RECOMMENDATION/S

That the Adult Social Care and Public Health Committee considers and comments on:

- 1) the summary of Adult Social Care performance against performance themes.
- 2) the summary of Public Health performance against the Annual Delivery Plan, Corporate Vital Signs and Joint Health and Wellbeing Strategy
- 3) the summary of Adult Social Care Vital Signs and key departmental risks
- 4) the financial position of Adult Social Care and Public Health, as at the end of December 2023.

Councillor Matt Barney
Cabinet Member for Adult Social Care

Councillor Scott Carlton
Cabinet Member for Communities and Public Health

For any enquiries about this report please contact:

Adults:

Helen Neville
Service Improvement Development Manager
Service Improvement, Quality and Practice
T: 0115 9773044
E: helen.neville@nottsc.gov.uk

Public Health:

Nathalie Birkett
Group Manager, Contracts and Performance
Public Health
T: 0115 9772890
E: nathalie.birkett@nottsc.gov.uk

AS0011