

# **Adult Social Care and Public Health Committee**

**Monday, 12 November 2018 at 10:30**

**County Hall, West Bridgford, Nottingham, NG2 7QP**

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## **AGENDA**

- |    |  |         |
|----|--|---------|
| 1  | Minutes of the last meeting held on 08 October 2018  | 3 - 10  |
| 2  | Apologies for Absence  |         |
| 3  | Declarations of Interests by Members and Officers:- (see note below)<br>(a) Disclosable Pecuniary Interests<br>(b) Private Interests (pecuniary and non-pecuniary) |         |
| 4  | Sector-Led Improvement 2018 - Self-assessment and Regional Challenge   | 11 - 18 |
| 5  | Extension of Contracts for Support to the East Midlands Improvement Programme in Adult Social Care   | 19 - 24 |
| 6  | Proposals for Allocation of Additional National Funding for Adult Social Care  | 25 - 28 |
| 7  | Adult Social Care and Health - Changes to the Staffing Establishment   | 29 - 38 |
| 8  | Your Nottinghamshire, Your Future - Departmental Strategy Six Month Review of Progress (April to September 2018)   | 39 - 50 |
| 9  | Adult Social Care and Public Health Events, Activities and Communications  | 51 - 56 |
| 10 | Adult Social Care Strategy Team Briefing Toolkit and Employee Video  | 57 - 62 |

**Notes**

- (1) Councillors are advised to contact their Research Officer for details of any Group Meetings which are planned for this meeting.
- (2) Members of the public wishing to inspect "Background Papers" referred to in the reports on the agenda or Schedule 12A of the Local Government Act should contact:-

Customer Services Centre 0300 500 80 80

- (3) Persons making a declaration of interest should have regard to the Code of Conduct and the Council's Procedure Rules. Those declaring must indicate the nature of their interest and the reasons for the declaration.

Councillors or Officers requiring clarification on whether to make a declaration of interest are invited to contact Sara Allmond (Tel. 0115 977 3794) or a colleague in Democratic Services prior to the meeting.

- (4) Councillors are reminded that Committee and Sub-Committee papers, with the exception of those which contain Exempt or Confidential Information, may be recycled.
- (5) This agenda and its associated reports are available to view online via an online calendar - <http://www.nottinghamshire.gov.uk/dms/Meetings.aspx>

Meeting ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

Date 8 October 2018 (commencing at 10.30 am)

**Membership**

Persons absent are marked with an 'A'

**COUNCILLORS**

Stuart Wallace (Chairman)  
Tony Harper (Vice-Chairman)  
Steve Vickers (Vice-Chairman)

Joyce Bosnjak  
Boyd Elliott  
Sybil Fielding  
**A** David Martin

Francis Purdue-Horan  
Andy Sissons  
Muriel Weisz  
Yvonne Woodhead

**OTHER COUNCILLORS IN ATTENDANCE**

Maureen Dobson

**OFFICERS IN ATTENDANCE**

Sarah Ashton, Democratic Services Officer, Chief Executive's  
David Pearson, Corporate Director, Adult Social Care & Health  
Jonathan Gribbin, Director of Public Health, Adult Social Care & Health  
John Wilcox, Senior Public Health & Commissioning Manager, Adult Social Care & Health  
Paul Johnson, Service Director, Strategic Commissioning Adult Access & Safeguarding, Adult Social Care & Health  
Ainsley MacDonnell, Service Director, Adult Social Care & Health  
Nathalie Birkett, Group Manager PH Commissioning, Adult Social Care & Health  
Jennie Kensington, Senior Executive Officer, Adult Social Care & Health  
Jane North, Programme Director – Transformation, Adult Social Care & Health  
Paul McKay, Service Director – South Nottinghamshire & Public Protection, Adult Social Care & Health  
Rebecca Atkinson, Senior Public Health and Commissioning Manager, Adult Social Care & Health  
Sarah Quilty, Senior Public Health and Commissioning Manager, Adult Social Care & Health  
Maggie Pape, Commissioning Officer (carers), Adult Social Care & Health

**OTHERS IN ATTENDANCE**

Aaron Bohannon – Everyone Health Ltd  
Laraine Wright – Everyone Health Ltd

## **1. MINUTES OF THE LAST MEETING**

The minutes of the meeting of Adult Social Care and Public Health Committee held on 10 September 2018 were confirmed and signed by the Chair.

## **2. APOLOGIES FOR ABSENCE**

None

## **3. DECLARATIONS OF INTEREST BY MEMBERS AND OFFICERS**

None.

## **4. PROGRESS WITH PUBLIC HEALTH COMMISSIONED SERVICES: OBESITY PREVENTION AND WEIGHT MANAGEMENT SERVICE**

Councillor Tony Harper and John Wilcox introduced the report and Aaron Bohannon outlined the work carried out by Everyone Health Ltd. John and Aaron responded to questions.

### **RESOLVED 2018/078**

- 1) That a more in-depth report be submitted to the Health Scrutiny Committee. And their findings to be reported back to the Committee at a later date.
- 2) That the publicity of the services to help improve awareness and uptake be approved.

## **5. PUBLIC HEALTH PERFORMANCE AND QUALITY REPORT FOR CONTRACTS FUNDED WITH RING-FENCED PUBLIC HEALTH GRANT APRIL TO JULY 2018**

Councillor Tony Harper and Nathalie Birkett introduced the report, Nathalie and Jonathan Gribbin responded to questions.

### **RESOLVED 2018/079**

That the performance of services commissioned using the public health grant continue to be scrutinised by the Committee and a report to be brought to the Committee in 6 months.

## **6. INTEGRATED WELLBEING SERVICE**

Councillor Stuart Wallace introduced the report and Jonathan Gribbin responded to questions. Jonathan confirmed that a follow on report would be brought to the Committee in February 2019.

### **RESOLVED 2018/080**

- 1) That the rationale, scope, model and funding of an Integrated Wellbeing Service was understood by the Committee.
- 2) That the service model, funding allocation, procurement approach and recommended contract duration. That permission be given to proceed with procurement. That Contract(s) to be awarded to the preferred provider(s) in August 2019 with a target launch date of 1 April 2020 be approved.

## **7. SUBSTANCE MISUSE SERVICE**

Councillor Tony Harper and Jonathan Gribbin introduced the report. Jonathan and Sarah Quilty responded to questions.

### **RESOLVED 2018/081**

That the:

- 1) Commissioning of an all age substance misuse service for Nottinghamshire be approved.
- 2) Initial contract duration of four years along with options to extend it subsequently, if required, up to a total of 8 years be approved.
- 3) Procurement for an all age substance misuse service via a competitive dialogue approach be undertaken, and that the Committee will be informed once contracts are let.

## **8. PROGRESS REPORT ON IMPROVING LIVES PORTFOLIO**

Councillor Steve Vickers and Jane North introduced the report. Jane and Ainsley MacDonald responded to questions.

### **RESOLVED 2018/082**

- 1) That the Committee receive an update report in the next three to six months, and that this be added to the work programme was agreed.
- 2) That the proposed increased savings target for the Transitions/Preparing for Adulthood project by £50,000 to a total of £100,000 for 2019/20 and by £50,000 to a total of £100,000 for 2020/21 be approved
- 3) That the establishment of 1 FTE Project Manager (Band D) post and 1 FTE Programme Officer (Band B) post from 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2022 be approved.
- 4) That the permanent establishment of a 1 FTE temporary Strategic Commissioning Officer (Band C) be agreed.

## **9. NOTTINGHAMSHIRE INTEGRATED ACCELERATOR PILOT AND INTEGRATED CARE TEAMS PROJECT**

Councillor Steve Vickers and Jane North introduced the report and responded to questions.

### **RESOLVED 2018/083**

- 1) That the proposed implementation of the NHS England Integrated Accelerator be approved.
- 2) That the Committee receive a follow up report in six months on the progress being made to deliver the Integrated Accelerator pilot and the Integration Care Teams project was agreed.
- 3) That the strategy to publish the findings of the Nottingham Trent University and PeopleToo report be approved.
- 4) That the disestablishment of 17 social care posts currently dedicated to Integrated Care Teams be approve.

## **10.CHANGES TO THE WAY THE COUNCIL CIRCULATES INDIVIDUAL CONTRIBUTIONS TO THE COST OF CARE AND SUPPORT**

Councillor Stuart Wallace introduced the report and Paul Johnson and David Pearson responded to questions.

The motion was put to the meeting and after a show of hands the Chairman declared it was carried.

The requisite number of Members requested a recorded vote and it was ascertained that the following 6 Members voted '**For**' the motion:

Boyd Elliott  
Tony Harper  
Francis Purdue-Horan

Andy Sissons  
Steve Vickers  
Stuart Wallace

The following 4 Members voted '**Against**' the motion:

Joyce Bosnjak  
Sybil Fielding

Muriel Weisz  
Yvonne Woodhead

The Chairman declared that the motion was carried and it was:

### **RESOLVED 2018/084**

That a report be taken to Policy Committee to seek approval for the Council to adopt in full the national Department of Health Guidance to Councils, with reference to the benefits they can take into account and the minimum Income guarantee levels that

can be applied when determining the amount people can be asked to contribute to their care costs be approved.

## **11. NOTTINGHAMSHIRE CARERS STRATEGY AND REVISED CARERS SUPPORT OFFER**

Councillor Stuart Wallace and Paul Johnson introduced the report. Margaret Pape responded to questions.

### **RESOLVED 2018/085**

- 1) That the Nottinghamshire Carers Strategy 2018-2020 be taken to Policy Committee for approval, be approved.
- 2) That the revised carers support offer for April 2019 be approved
- 3) That the procurement of new carers information, advice and support services for carers be in place for April 2019 be approved.
- 4) That the following posts to the Better Care Fund Steering Group be approved:
  - 2 temporary FTE Community Care Officer (Grade 5) posts until April 2020
  - 1 FTE Commissioning Officer (Band C) post until April 2020
  - 0.6 FTE temporary Commissioning Manager (Band E) post until April 2020.

## **12. ADULT SOCIAL CARE AND HEALTH – CHANGES TO THE STAFFING ESTABLISHMENT**

Councillor Steve Vickers and Jennie Kensington introduced the report.

### **RESOLVED 2018/086**

That the following changes to the staffing establishment in Adult Social Care and Health be approved:

- 1) Extension of the posts listed in the table below to support the operational needs and requirements of the Council:

<b>Post title</b>	<b>Number/type of posts (full-time equivalent)</b>	<b>Extension date</b>
Principal Occupational Therapist (Band D)	1 FTE	March 2020
Occupational Therapist (Band B)	1 FTE	March 2020
Commissioning Manager (Band E)	1 FTE	September 2019
Better Care Fund Programme Co-ordinator (Band A)	1 FTE	March 2020
Project Manager, ICT integration (Band D)	1 FTE	March 2020

Employee Support Service Assistant (Grade 2)	3.24 FTE	March 2020
Business Support Officer – Social Worker recruitment (Grade 3)	0.5 FTE	March 2019

- 2) Conversion of 1 FTE Community Care Officer (Grade 5) post, currently in the Bassetlaw Short Term Independence Service (STIS) structure, to 2 part-time (18.5 hours) Community Care Officer (Grade 5) posts to enable the transfer of one of these posts to the Newark STIS structure.
- 3) Establishment of 2 FTE temporary Social Worker (Band B) posts for 12 months in Newark Older Adults District Teams from 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020, each with an annual travel budget of £1,300.
- 4) Disestablishment of 1 permanent FTE Peripatetic Social Worker (Band B) post, currently in the Transformation Team structure, and establishment of a permanent 0.8 FTE Project Manager (Band D) post.

### **13. ADULT SOCIAL CARE AND PUBLIC HEALTH EVENTS, ACTIVITIES AND COMMUNICATIONS**

Councillor Stuart Wallace and Paul McKay introduced the report and responded to questions.

#### **RESOLVED 2018/087**

That the plan of events, activities and publicity as set out in the report be approved.

### **14. QUALITY AUDITING AND MONITORING ACTIVITY – CARE HOME AND COMMUNITY PROVIDER CONTRACT TERMINATION/SUSPENSIONS**

Councillor Tony Harper introduced the report.

#### **RESOLVED 2018/088**

- 1) That there are no further actions required at this time in relation to the issues contained in the report.
- 2) That the Committee continues to receive updates regarding the continued monitor and the actions/issues contained within the report.

### **15. WORK PROGRAMME**

Councillor Stuart Wallace introduced the report.

#### **RESOLVED 2018/089**

That the work programme be accepted with no amendments at this time.



## **16. EXCLUSION OF THE PUBLIC**

### **RESOLVED 2018/090**

That the public be excluded for the remainder of the meeting on the grounds that the discussions are likely to involve disclosure of exempt information described in paragraph 3 of Schedule 12A of the Local Government Act 1972 and the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

## **17. EXEMPT APPENDIX TO ITEM 14: QUALITY AND MARKET MANAGEMENT TEAM QUALITY AUDITING AND MONITORING ACTIVITY – CARE HOME AND COMMUNITY CARE PROVIDER CONTRACT TERMINATION/SUSPENSIONS**

### **RESOLVED: 2018/091**

That the information in the exempt appendix be noted.

The meeting closed at 1.00 pm.

**CHAIR**



**12<sup>th</sup> November 2018****Agenda Item: 4****REPORT OF SERVICE DIRECTOR, NORTH NOTTINGHAMSHIRE AND  
DIRECT SERVICES****SECTOR-LED IMPROVEMENT 2018 – SELF-ASSESSMENT AND REGIONAL  
CHALLENGE****Purpose of the Report**

1. The report updates the Committee on the annual self-assessment and the outcome of the local challenge which took place in August 2018. The report also informs Committee about the regional peer challenge event with other East Midlands councils which took place in September 2018.

**Information**

2. As part of a regional sector led improvement process the department is required to complete a self-assessment template on an annual basis which challenges the Council to consider, review and rate its performance across nine areas. These are:
  - Ensuring people have a positive experience
  - Keeping people safe
  - Optimising asset-based social work practice, and promoting choice and control
  - Responding well to initial requests for support
  - Prevention, early intervention and building community capacity
  - Supporting carers
  - Helping people to stay well and independent – adults aged 18-64 years
  - Helping people to stay well and independent – adults over 65 years
  - Helping people to experience a seamless service.
3. As part of this year's self-assessment the department was also asked to gather specific evidence on the effectiveness of the Council's reablement services, which was provided as a "special study" outlining the services and approaches for older and younger adults in order to share learning with other councils in the region about 'what works'.
4. This year's self-assessment was completed in June with input from a range of staff across the department who provided examples of achievements and developments in their areas over the last year. A copy of the self-assessment is available to Members on request.

5. The self-assessment covers the department's performance and activities during the period from April 2017 to April 2018. For this period the department rated its performance as 3 (out of 4) – which equates to good performance – in all of the areas listed above, with the exception of 'responding well to initial requests for support' where performance was rated as 4 (outstanding). These are the same ratings awarded in last year's self-assessment.

### **Examples of achievements and areas for improvement**

6. This section summarises some of the achievements that the department included in the self-assessment as well as areas identified for attention and improvement.
7. **Ensuring people have a positive experience:** 95% of respondents who took part in a survey about the Short-Term Assessment and Reablement service (START) described it as 'excellent'. The development of the Delivering Excellent Practice programme – led by the Principal Social Worker and Principal Occupational Therapist with the aim of supporting and improving frontline practice – was highlighted, and had also been positively recognised during the Peer Review that took place in March.
8. The number of people who use services reporting they have had as much contact as they would like has reduced slightly in 2017/18 to 41%, from 44% the year before, and 362 complaints were received in 2017/18 compared to 322 complaints in the previous year. Common topics included complaints about care and support providers, financial assessment and charging, assessment and review processes and decisions.
9. The Council continues to transform services to meet demand and to manage financial pressures, therefore the small reductions in satisfaction levels against last year's indicators, and the increase in recorded complaints, are seen as symptomatic of the Council's journey to manage the needs and expectations of local residents.
10. **Keeping people safe:** During 2017/18 there has been a small increase in safeguarding service users who were satisfied that their outcomes had been fully achieved. There has also been an increase in the proportion of individuals asked about their 'desired outcomes' during the safeguarding process (from 70.8% in 2016/17 to 75.8% in 2017/18). The use of advocates for adults involved in safeguarding enquiries, where this is relevant, has improved - from 72.4% to 81.6% meaning that those individuals who have difficulty in engaging with the safeguarding process are supported to do so.
11. There had been a small reduction in the national performance measures relating to the proportion of people who use services who feel safe, down from 69% to 66%.
12. **Optimising asset-based social work practice, and promoting choice and control:** Performance data showed that the Council continued to successfully promote and provide choice and control for all service users, with a slight dip in the proportion of service users receiving a direct payment from 46% to 44%. The number of reviews of service users receiving long term support for more than 12 months increased from 6,374 in 2016/17 to 7,331 in 2017/18; evidence of the impact of the ongoing work to embed the Adult Social Care Strategy which aims to keep support under review and ensure that it remains appropriate to the person's identified needs. The self-assessment also highlighted the department as an early adopter of integrated personal commissioning with a significant

increase in the number of personal health budgets, and illustrated the progress and successes of the Notts Enabling Service.

13. **Responding well to initial requests for support:** As experienced in 2016/17, there had been a further increase in the number of requests for support from new people per 100,000 population, from 4,380 to 4,453 in 2017/18. The proportion of people who use services and carers who find it easy to find information about services had risen from 68% to 73%; however the proportion of requests where the outcome was signposting to universal services, or where no service was required, has reduced from 61.6% to 55%. The self-assessment showed that the Council has been able to maintain its performance level in promoting independence through use of short term options to reduce the ongoing level of need, although there continues to be a strong level of demand for long term care support.
14. In the period covered by the self-assessment the Adult Social Care Strategy has been updated and approved by Policy Committee, having been produced with input from frontline staff, service users and carers. The introduction and implementation of the three tier model was also highlighted in the self-assessment. This offers a new way of delivering social care whereby staff have a conversation with an individual to identify the reason for their initial phone call and to see what short term solution or community resource will be available to meet that need. The idea behind the model is for the worker to support the individual to help themselves and find a suitable resolution as early in the process as possible.
15. **Prevention, early intervention and building community capacity:** A number of positive examples of initiatives were mentioned in the self-assessment. These included Mental Health Crisis Link which provides an extension to community based mental health support with dedicated workers embedded within the Crisis Resolution and Home Treatment teams at three mental health acute hospital sites in Nottinghamshire. They work alongside clinical staff to address non-clinical issues, such as problems with private landlords, debt, or dealing with the Department for Work and Pensions, which can cause additional and avoidable stress during a mental health crisis. Also highlighted was the integration of the Co-production team into the Notts Enabling Service, bringing capacity to generate new community based opportunities for all adults as well as young people in transition; and the extension of the falls prevention project.
16. **Supporting carers:** The number of carers supported per 100,000 of the population reduced slightly in 2017/18. This reflected reduced numbers of carers offered formal assessment or reviews, as service provision focused more on offering carers timely information, advice and support on first contact to meet needs at an earlier stage, and this preventative and early intervention work is not captured in this particular performance data.
17. Over a period of two years, consultation with carers has taken place to identify what they value and how they want services to develop in future with the outcome of a new joint commissioning strategy for carers. There has also been work in partnership with Inspire community learning to offer a range of training sessions for carers, including health and wellbeing workshops, assisting carers in coping with the pressures of caring, as well as trialling taster sessions for other community learning and a trial of moving and handling training. These have been well-received and will continue into 2018/19.
18. **Helping people to stay well and independent – adults aged 18-64 years:** Work to promote people's independence continues despite a difficult financial climate. In keeping

with the Adult Social Care Strategy, emphasis has been placed on investment in and promotion of enablement type services, such as Community Living Networks - where people move from supported living into independent tenancies with low level community-based support across a number of properties in close proximity.

19. Despite this work, the rate of new admissions to residential and nursing care increased slightly in 2017/18 and the proportion of adults with learning disabilities supported to live in their own home or with their family decreased slightly. The increase in residential admissions reflects the difficulties in securing new supported living capacity. With regard to the proportion of adults with learning disabilities in paid employment there was a slight increase over the last year.
20. There have also been improvements to the transitions experience for young people and their families, including a named link worker in the Transitions Team for all special needs schools, and all new referrals to the team routed through the Notts Enabling Service to ensure that opportunities for independence are maximised. In addition the Council has approved investment at Brooke Farm, which will increase the number and range of employment opportunities available.
21. **Helping people to stay well and independent – adults aged 65+ years:** The Council continues to successfully implement its programme of developing alternatives to long term residential care. This is reflected in performance which shows that the number of permanent admissions of older people to residential and nursing home care per 100,000 population has reduced since last year's return. The number of older people accessing long term support has also reduced.
22. The self-assessment highlighted the approval of the new Housing with Care Strategy, and also referenced the continuing success of the Connect services, which supported in the region of 4,000 older people to access resources in their local communities and maintain their independence during 2017/18. It also referred to the Home First Response Service, which is a countywide short term rapid response home care service which supports people who have social care needs in their own home for up to seven days. The service is often used to support people on their return home from hospital. It has a reablement and enablement approach to service delivery, and also provides a crisis response for carers.
23. **Helping people to experience a seamless service:** The Council continues to offer a highly successful reablement service, and the proportion of older adults offered reablement services following discharge from hospital increased to 1.8% in 2017/18, compared to 1.3% in the previous year. The rate of Delayed Transfers of Care has continued to reduce steadily over the year, and the Council's performance in this area is regularly reported to the Committee. Benchmarking shows that the Council continues to perform very well on a national basis. This work has been supported by integrated discharge teams, discharge to assess models, ensuring sufficient staffing capacity in hospital social work teams and the development of the Home First Response Service. This work continues to require a high level of oversight, resources and attention to ensure that this good performance is maintained.
24. Other achievements highlighted in this section of the self-assessment were that Nottingham and Nottinghamshire and the South Yorkshire and Bassetlaw Sustainability and Transformation Partnerships were announced by NHS England as accelerator sites to

develop Integrated Care Systems in recognition of their progress to date. It also referenced the evaluation undertaken by Nottingham Trent University and PeopleToo of the benefits of Social Workers working in integrated care teams; this was the first of its kind in the country and has led to the development of a strategic vision for wider integration across frontline teams, as well as attracting considerable national attention.

## **Sustainability and Risks**

25. The self-assessment also requires the department to reflect on current risks in relation to the areas of leadership and governance, adverse events, system leadership and partnership working, workforce, the quality and sustainability of commissioned services, use of resources and culture and challenge.
26. In terms of assessing the perceived level of risk, the department identified all those listed in **paragraph 25** above, as moderate risk with the one exception of high risk being the use of resources, as the Council continues to operate in a challenging national environment, with considerable pressures on the Adult Social Care and Health budget.

## **Local Challenge**

27. The self-assessment and performance information form the basis of a local challenge session undertaken by an independent social care consultant. This took place in August 2018 and involved members of the Senior Leadership Team.
28. The key areas were highlighted as areas of strength:
  - the Personal Assistant (PA) directory on the Notts Help Yourself website
  - New Ways of Working and the increased use of clinics
  - Mental Health Crisis Link as an extension to community based mental health support
  - Age Friendly Nottinghamshire project
  - data sharing across health and social care boundaries
  - Total Mobile and scheduling system to increase service and worker capacity.
29. A key area for development was identified in relation to the disappointing satisfaction and quality of life scores in the 2016/17 carer survey falling below the provisional regional average.

## **Peer Challenge Summit**

30. Further to this, a regional peer challenge event took place in September involving all the Directors of Adult Social Care and other senior management colleagues from across the East Midlands, where all self-assessment submissions and performance data were shared in order to scrutinise the performance of the region as a whole, offer friendly challenge and support, validate the regional risk register and mitigating actions and agree priorities for the Regional SLI programme for the year ahead.
31. The key headlines from the regional event were as follows:
  - managing demand remains a challenge

- budget pressures through increased complexity of need, particularly for learning disability and mental health
- fee inflation, linked to the impact of the National Living Wage, recruitment and retention issues in domiciliary care, fragility of the care home sector and competition from self-funders
- reliance on the Better Care Fund to 'plug the gap' in funding
- it was noted that in most East Midlands councils, there is strong corporate commitment to Adult Social Care.

## **Next Steps**

32. In order to share more widely the range and breadth of developments, progress and support to service users over the last year, a summary version of the self-assessment is being produced. This will be shared with staff, partners and Members to promote the work and performance in Adult Social Care and Health.

## **Other Options Considered**

33. There are no other options considered as the report is providing a summary of the work undertaken to produce the annual self-assessment and the outcome of the local and regional challenges that are linked to this.

## **Reason/s for Recommendation/s**

34. The report provides the Committee with an overview of the work undertaken and the outcomes of the annual sector-led improvement process within Adult Social Care and Health and provides an opportunity for the Committee to consider any further actions it requires.

## **Statutory and Policy Implications**

35. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **Data Protection and Information Governance**

36. There are no implications in relation to this work and report.

## **Financial Implications**

37. There are no specific financial implications relating to the sector-led improvement process.



## **Implications for Service Users**

38. The outcomes of the self-assessment and the local and regional challenge meetings are used to consider areas where the Council's performance can be improved, with a view to improving the care and support received by people who need adult social care services.

## **RECOMMENDATION/S**

- 1) That Committee reviews the outcome of the sector-led improvement process for the period April 2017 to April 2018 and considers any actions it requires in relation to the content of the report.

**Ainsley MacDonnell**

**Service Director, North Nottinghamshire and Direct Services**

**For any enquiries about this report please contact:**

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## **Constitutional Comments (LM 17/10/18)**

39. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report. Members will need to consider whether there are any actions they wish to take in relation to the issues contained within the report.

## **Financial Comments (DM 19/10/18)**

40. As stated in paragraph 37 there are no financial implications arising from this 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.

None.

## **Electoral Division(s) and Member(s) Affected**

All.

ASCPH598 final



12 November 2018

Agenda Item: 5

## **REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND HEALTH**

### **EXTENSION OF CONTRACTS FOR SUPPORT TO THE EAST MIDLANDS IMPROVEMENT PROGRAMME IN ADULT SOCIAL CARE**

#### **Purpose of the Report**

1. The purpose of the report is to request a 12 months extension for the two fixed term posts of East Midlands Improvement Programme Manager (Care and Health) (Band F, 22 hours per week) and Business Support Administrator (Grade 4, 37 hours per week), until 31<sup>st</sup> March 2020.

#### **Information**

2. Nottinghamshire County Council hosts the regional Improvement Programme for Care and Health in the East Midlands, with funding primarily from the Department of Health and Social Care. The Corporate Director oversees this work on behalf of the East Midlands Second Tier Councils.
3. The regional Improvement Programme Manager post provides coordination and oversight of regional improvement programmes such as the Sector-Led Improvement Programme, Workforce Development, and the Learning Disability and Transforming Care Programme.
4. The past year has been characterised by a Sector Led Improvement Programme with a strong analysis and challenge process combined with peer reviews and focus on priorities for action. This has been combined with bespoke activity to support individual authorities that had particular challenges, for example Delayed Transfers of Care, Use of Resources, or the Better Care Fund.
5. As such, regional resources have been significantly directed to support these two approaches and improve collective understanding of risk and, where possible, how to mitigate that risk. This approach is considered to have considerable merit with tangible benefits in consequence.
6. Work has taken place this year to strengthen the regional structure. The networks have been reviewed and rationalised to ensure that they are appropriately positioned and supported to deliver the regional objectives.

7. Priority was given to working towards integration with health and housing. A successful event was held in July which brought together colleagues from across the three disciplines. The conference led to housing and the development of regional housing approaches and a strategy becoming one of the regional objectives for the forthcoming year.
8. The region has continued to support authorities both individually and collectively around delayed transfers of care. The region's annual report on delayed transfers of care was positively received and shared nationally. Two High Impact Change Management events have been held in the region this year to support this work – Trusted Assessment and Patient Choice. The events were well attended and received. The focus of this work has moved further towards prevention, prompting the renaming of the network to Admissions Avoidance and Discharges network.
9. A regional cross-cutting action plan has been established. The plan links the work of the Workforce, Market Shaping and Commissioning, and Admissions Avoidance and Discharges networks. The plan is aimed at supporting authorities collectively and individually to develop workforce plans and strategies that increase the resilience and capacity of the social care workforce both internally and externally. It focuses on the identification and development of the skills required to ensure that there is a sufficiency of an appropriately skilled and trained workforce which can be sustained into the future and retention.
10. The annual Sector Led Improvement Peer Challenge Summit took place in September and brought together analysis and conclusions from the self-assessment and peer review work that had taken place in the region in the previous year. Part of the process included good practice examples from across the region with a digital theme and has resulted in the region identifying the development of digital solutions as another of its priorities for the forthcoming year.
11. The networks continue to provide a forum for colleagues to share ideas and issues and to showcase good practice examples for joint learning. Networks such as the Learning Disability and Transforming Care, Carers Leads, Mental Health Leads and Personalisation have undergone a refresh and have aligned their work plans to national and regional priorities.
12. The region has drawn on the expertise of national ADASS (Association of Directors of Adult Social Services) colleagues to support it in meeting its objectives. A workshop held in October brought together Directors, Assistant Directors, finance and performance colleagues from across the region to consider the Effective and Sustainable Use of Resources. Drawing on John Bolton's six steps to managing demand, John Jackson led the workshop focussing on managing demand into the future.
13. Safeguarding continues to be a priority area. The East Midlands Safeguarding Adults Network provides a valuable focus for authorities to come together, explore common issues and provide opportunities to learn from each other.
14. Following on from the success of last year, the Principal Social Workers Network held a conference in October for over 140 delegates focussing on strengths based

approaches to social work and prioritising the service user voice. The conference was over-subscribed and plans were put in place to formally disseminate the learning from the day to colleagues through the Principal Social Workers network.

### **Other Options Considered**

15. This essential cross-regional improvement and development work continues to be needed to put local authorities in a strong position to respond to the challenges facing Adult Social Care. The regional work provides significant opportunities for learning and the sharing of best practice as well as efficiencies in service delivery.
16. Nationally the Local Government Association working closely with the Association of Directors of Adult Social Services and the Department of Health and Social Care has continued to work very effectively with the regions in delivering a Care and Health Improvement Programme. It recognises and values the importance of regional structures in delivering national programmes and priorities e.g. Delayed Transfers of Care.
17. If the posts are to be discontinued then this work would come to an end together with the loss of regional expertise and regional networks. The benefit to the posts being based at Nottinghamshire County Council is that the Council is alerted early on to any national and regional developments as well as enabling Nottinghamshire's good practice to be more readily showcased across the region. If the current arrangement is ended then another local authority would need to be identified to host these posts and the current post holders transferred to another authority.

### **Reason/s for Recommendation/s**

18. The Care and Health Improvement Programme, which includes Sector-Led Improvement, Transforming Care, and the Delayed Transfers of Care Improvement Programmes, represents major challenges for local authorities. The work undertaken by these regional posts is essential in order to assist with the successful implementation of change across the East Midlands based on sharing of good practice and scope for efficiencies in delivery.

### **Statutory and Policy Implications**

19. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment 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**

20. These posts are externally funded from the remains of legacy funding from the Joint Improvement Programme, together with Care and Health Improvement Programme funding via the Local Government Association and Department of Health and Social

Care. The region was allocated £85,100 for 2018/19 to support learning networks and other regional activity. In previous years further funding has been made available over the winter period to address winter pressures. However if this additional funding is not forthcoming there are still sufficient funds to resource the regional programme for 2019/20.

### **Human Resources Implications**

21. It is proposed that Nottinghamshire County Council continues to host these posts, and that the Corporate Director, Adult Social Care and Health, together with Branch Chair of the Association of Directors of Adult Social Services, will provide oversight of the work of the post-holders.

### **RECOMMENDATION**

- 1) That the posts of the East Midlands Improvement Programme Manager (Care and Health) (Band F, 22 hours per week) and Business Support Administrator (Grade 4, 37 hours per week) be extended until 31<sup>st</sup> March 2020.

**David Pearson**

**Corporate Director, Adult Social Care and Health**

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### **Constitutional Comments (LM 25/10/18)**

22. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report.

### **Financial Comments (DG 25/10/18)**

23. The financial implications are contained within paragraph 20 of this report.

### **HR Comments (SJJ 22/10/18)**

24. The fixed term contracts of the current post holders will be extended in accordance with the recommendation.

### **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.

Extension of Contracts for Support to the East Midlands Improvement Programme in Adult Social Care – report to Adult Social Care and Public Health Committee on 22<sup>nd</sup> March 2018.

**Electoral Division(s) and Member(s) Affected**

All.

ASCPH596 final





12<sup>th</sup> November 2018

Agenda Item: 6

## **REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND HEALTH**

### **PROPOSALS FOR ALLOCATION OF ADDITIONAL NATIONAL FUNDING FOR ADULT SOCIAL CARE**

#### **Purpose of the Report**

1. The report presents how the Council intends to spend the additional temporary funding for adult social care that was announced by the Secretary of State for Health and Social Care on 2<sup>nd</sup> October, in line with the associated conditions, and requests approval from the Committee for the specific expenditure and establishment of posts where required.

#### **Information**

2. The extra funding of £240 million is aimed at reducing delayed transfers of care and will be allocated to councils based on the adult social care relative needs formula. This will mean an allocation of £3.527 million for Nottinghamshire. The requirement is for the money to be used within this financial year so it is available only for use up to the end of March 2019.
3. Further detail about how councils are expected to use the funding became available on 17<sup>th</sup> October. It is to be focussed on reducing delayed transfers of care, helping to reduce extended lengths of stay in hospital, improving weekend discharge arrangements so that patients are assessed and discharged earlier, and speeding up the process of assessing and agreeing what social care is needed for patients in hospitals.
4. The requirement is for the totality of the funding to be spent on providing adult social care services, in addition to funding already planned; and that proposals for allocating the funding are discussed with local NHS partners, including local acute hospital trusts. There is an expectation by the Department of Health and Social Care that health and local authorities will monitor improvements in the areas mentioned above through local jointly agreed monitoring.
5. The Council will be required to submit a return to the Department of Health and Social Care to show the additional volumes of care and support that the additional funding will purchase.

6. Urgent work is being undertaken within the department to produce and evaluate proposals for allocation of the funding that will meet the criteria and are realistic and achievable in terms of the timescale available.
7. In response to the criteria set by the Government, the department has identified a number of priority areas for use of the funding. These are listed below:
  - increased social care staffing to enable effective hospital discharge planning, including provision of seven day services and support for people with mental health needs leaving hospital
  - increased intermediate care to provide short-term care to support people to remain at home or when leaving hospital. This support can also be used to avoid admission to hospital where appropriate
  - expansion of Reablement provision – a range of short-term services are focused on supporting people to regain their skills and confidence, and helping them to live as independently as possible.
  - ensuring adequate brokerage services – this helps people to arrange care and support services quickly and efficiently, and is available to self-funders and people who are eligible for social care from the Council
  - expansion of capacity in the County's available community-based care provision, such as home care and prevention services
  - intervention that helps the independent sector to increase the availability of adult social care – support will be directed to maximising the capacity of home care and prevention services through recruitment, retention and training of care staff
  - ensuring there is equity of care and support provision across the County.
8. Since the original announcement and the letter confirming the conditions for use of the additional funding, the department has been undertaking urgent work on allocation of this funding to enable capacity and effective performance in conjunction with health partners in the local Clinical Commissioning Groups and relevant Hospital Trusts, to fit in with the deadlines for the November meeting of the Committee.
9. An addendum to this report with the proposals and associated costs will be circulated to Committee members in the lead up to the meeting on 12<sup>th</sup> November.

### **Other Options Considered**

10. There are no other options for consideration.

### **Reason/s for Recommendation/s**

11. Approval is required from the Committee for the proposals for allocation of the additional funding for adult social care that has been made available by the Government. The

addendum to this report will provide the detail on how the Council suggests the funding should be spent in order to meet the required criteria and to support the provision of social care.

## **Statutory and Policy Implications**

12. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **Data Protection and Information Governance**

13. The data protection and information governance requirements will be considered on a case by case basis and Data Protection Impact Assessments will be completed wherever necessary.

## **Financial Implications**

14. The financial implications will be included in the addendum to this report.

## **Human Resources Implications**

15. Any specific HR implications will be identified in the addendum to this report.

## **Implications in relation to the NHS Constitution**

16. The proposals are to be discussed with key partners in health, and wider public service partners as required.

## **Implications for Service Users**

17. The proposals are put forward with a view to improving the service and support received by citizens of Nottinghamshire across the winter period.

## **RECOMMENDATION/S**

- 1) That Committee approves the proposals to be presented in the addendum to this report for the allocation of the temporary additional funding to support adult social care.

**David Pearson CBE**  
**Corporate Director, Adult Social Care and Health**

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**Constitutional Comments (LM 30/10/18)**

18. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report.

**Financial Comments (AGW 30/10/18)**

19. The financial implications are contained in paragraph 14 of this report.

**HR Comments (SJJ 31/10/18)**

20. HR comments will be provided once any specific HR implications are identified in the addendum.

**Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

None.

**Electoral Division(s) and Member(s) Affected**

All.

ASCPH601 final

**12<sup>th</sup> November 2018****Agenda Item: 7****REPORT OF THE DEPUTY CORPORATE DIRECTOR, ADULT SOCIAL CARE  
AND HEALTH****ADULT SOCIAL CARE AND HEALTH – CHANGES TO THE STAFFING  
ESTABLISHMENT****Purpose of the Report**

1. The report seeks approval for changes required to the staffing establishment in Adult Social Care and Health to meet the statutory and operational requirements of the Council.

**Information**

2. The posts in the report, covered in **paragraphs 3 to 31**, are required to meet operational needs and requirements, and to achieve projected savings. The report includes a range of posts that are supporting different departmental priorities and responsibilities; these have been grouped as far as possible. Unless stated otherwise within the report, the posts will be funded by departmental reserves.

**Assessment and Care Management teams**

3. An extension is requested for 1 FTE Community Care Officer post (Grade 5 £33,395 p.a) and 1 FTE Social Worker (Band B £46,925 p.a) post based in the hospital teams in the south of the County. The posts are based in the Integrated Discharge Team within Queen's Medical Centre, working alongside health colleagues to facilitate timely discharges from hospital, supporting the Home First/Discharge to Assess model and seven day working. These two posts have been hosted by the Council and funded by the local Clinical Commissioning Group to the end of March 2019. The funding for these posts will be provided by the Council from April 2019 to the end of March 2020.
4. The Committee is asked to approve the establishment of 2 FTE temporary Community Care Officer (Grade 5) posts to support timely hospital discharge and flow of people through the additional short term services that system partners have put in place to be prepared to manage winter pressures in mid-Nottinghamshire. From mid-November, subject to Committee approval, these posts will be required until the end of April 2019 in order to also cover the Easter Bank Holiday at a cost of £30,926.
5. An extension is requested for 1 FTE Social Worker (Band B £46,925 p.a) post and 1 FTE Community Care Officer (Grade 5 £33,595 p.a) post within the Asperger's Team, until the

end of March 2020. These posts were originally agreed by Committee in November 2017 for one year due to the high numbers of people waiting for assessments and associated complaints about this. Whilst the current national financial context means that much of the Council's Adult Social Care funding is of a temporary nature, the department would like to signal the need and intent to make these posts permanent when funding is available.

6. New ways of working have been implemented in the Asperger's Team over the last year. This includes making referrals of people with much less complex needs routinely into the Nottinghamshire Enabling Service, who can then start working with people to increase their independence prior to an assessment. This has, however, only partially managed to reduce the waiting list, because the number of actual referrals continues to increase over and above the original predictions, with an additional rise in referrals of 23.1% against original projected figures for 2017/18.
7. In addition, in order to maximise the potential for independence of people with Asperger's, this requires regular goal focused support planning and review from the team over a period of time, the average being a year. The additional capacity in the team is therefore required to avoid people having to wait for their assessment and also to ensure that staff have time to undertake best practice in support planning to promote people's independence and reduce ongoing reliance on services.

### **Nottinghamshire Enabling Service – changes to the staffing establishment**

8. The Nottinghamshire Enabling Service (NES) offers working-age adults a focused period of enablement to improve skills, confidence and independence. This short term intervention is either instead of or before longer term support is considered. This service has helped improve outcomes for individuals to live happy and independent lives, as well as reducing the cost and level of ongoing care required.
9. The decision to create an enablement service for adults aged 18-64 years was influenced by a number of factors. The updated Adult Social Care Strategy (approved in December 2017) focuses on promoting independence and independent living is a core component of the wellbeing duty under the Care Act. Whilst a reablement/enablement service has been available for some years in older adults, there was no equivalent service in younger adults. Hence, NES supports the Council in meeting its statutory responsibilities and delivering on the ambitions of the Adult Social Care Strategy.
10. The Institute of Public Care (IPC) have advised that local authorities should aim to provide enablement to 90% of younger adults with a newly acquired physical disability and 37% of people with learning disabilities. Current levels of enablement in the Council is below these suggested levels. The IPC advice is supported by the Newton diagnostic in Nottinghamshire, which found 37% of people with learning disabilities would have benefited from enablement but did not have access. The intention is to increase the opportunities for enablement to enable a larger number of younger adults to benefit.
11. The Notts Enabling Service works with individuals to increase their independence and reduce their reliance on social care services for up to 12 weeks in any of the following areas:
  - developing or learning new skills at home, for example preparing food/domestic tasks
  - preparing for and connecting with opportunities for voluntary/paid work

- using the internet/apps etc. to support communication/self-care/using Assistive Technology
- travel training and support to access the community - finding places to go and how to travel independently
- building links with other people to support and promote opportunities to meet people and make connections to promote wellbeing
- keeping safe - support with building confidence and skills
- supporting the person to connect with other services of interest or value to the individual.

This is illustrated by the case study below:

*A young man with autism & ADHD (Attention Deficit Hyperactivity Disorder) was referred to NES as he was struggling at college and was being considered for day services to meet his needs. It was established on discussion that he was unhappy at college and preferred to work outside. He also had limited social opportunities. A Promoting Independence Worker worked with him to increase his confidence with travelling independently on public transport. He connected him with a cycling group and a gardening project where he made new friends and enjoyed his weekly time there. A Community Independence Worker for Transitions also helped him to start a Duke of Edinburgh Award. His confidence and independence has grown so much so that he is now about to start full time paid work as a brick layer.*

12. The NES has demonstrated good outcomes with 79.31% of younger adults who received reablement/enablement did not require any other services following this (this data included Mental Health, Adult Deaf and Visual Impairment Service and NES data).
13. The NES team also provides savings to the Council through achieving better outcomes. These include:
  - supporting the delivery of agreed savings - the team is directly delivering £1.146 million between 2018/2019 and 2020/2021 and is supporting delivery of a number of other savings project across Adult Social Care totalling £4.867 million
  - managing demand for services going forward - since its establishment the team is reducing the number of new services users coming into the service with a 37% reduction in learning disability assessments, as people's needs are being met by a short term intervention provided by the team
  - providing long term savings over the course of an individual's life by keeping them independent for longer with a reduced need for formal services. This is particularly significant considering that the average time someone aged 18-64 years receives services is currently 22 years.
14. In order to continue this positive work it is requested that the following posts be extended for 12 months until 31<sup>st</sup> March 2020:
  - 8 FTE Promoting Independence Workers – Grade 3 (£24,595 per person p.a)
  - 1 FTE Community Independence Worker - Grade 3 (£24,595 p.a)
  - 1 FTE Team Leader - Band A (£40,818 p.a)
  - 1 FTE Team Manager - Band D (£57,268 p.a)



- 1.5 FTE Business Support - Grade 3 (total cost of £35,994 p.a).

These posts are in addition to those already funded from either permanent budget or the Improved Better Care Fund.

### **Transformation Team Posts**

15. This report seeks approval to establish a 1 FTE Strategic Development Assistant (Grade 5) post on a temporary basis until the end of March 2019. This would enable the team to retain an intern who has been placed with the team by Leonard Cheshire, a disability charity which supports young disabled adults into the workforce. The extension at a cost of £8,500 would be paid for by the existing staffing budget and would require no additional funding.
16. The Strategic Development Assistant post is supporting the wider change programme, specifically looking at the use of data to inform and improve operational decision making. Using existing funding for the Strategic Development Assistant would allow the post to be extended until the end of the financial year.
17. In March 2018 the evaluation of the Integrated Care Teams by Nottingham Trent University (NTU) and PeopleToo was reported to the Committee. This evaluation found multi-disciplinary working across health and social care achieves better outcomes for service users and realises savings for social care, but this was dependent on the right conditions for integration being in place.
18. At the March meeting of the Committee it was agreed to appoint a Project Manager to implement a best practice model for integration across the County based on the findings from the report. A Project Manager was appointed in June 2018 on a fixed term contract until March 2019.
19. The work will need to continue beyond March 2019 across the seven Clinical Commissioning Groups to ensure a full roll out of the programme across the whole of the County. The proposal is for this work to be continued at the lower level of Programme Officer (Band B) for nine months from April 2019 to December 2019. The extended Programme Officer resource will also ensure that a robust benefits analysis is in place and can closely monitor the impact, benefits, and future savings and resource requirements for Integrated Care Teams.
20. It is anticipated the benefits of fully embedding the best practice model are cost savings and improved outcomes through:
  - a) a reduction in hospital admissions
  - b) a reduction in admissions to residential and nursing care
  - c) greater use of lower level services that helped maintain service users' wellbeing and independence, enabling them to remain at home
  - d) increased number of service users remaining at home with lower cost packages of care.
21. The cost of 1 FTE Programme Officer (Band B) post for nine months is £35,193.



## **Adult Access Service**

22. The Committee is asked to approve the extension of 1 FTE Advanced Social Work Practitioner (Band C £53,384 p.a), 1 FTE Social Worker (Band B £46,925 p.a) and 1.5 FTE Community Care Officer (Grade 5 £50,393 p.a) posts to the end of March 2020. These posts continue to support the transformational three tier approach to early resolution, acting as the first point of support and resolution. With the growth of the team, as agreed by the Committee in March 2018, to support the further roll out of this work, there remains a need both for continued management oversight and CCO staff, to support the benefits realisation of the project. New posts within the team have been recruited to until the end of March 2020. Therefore, the extension of these posts will enable a consistent approach to be adopted throughout the whole period, providing an opportunity to consider future resources, both in the Adult Access Service and duty points around the department.
23. There has been a significant increase in referrals into the service however, the success of these posts is already shown by the increased resolution rate at an early point of contact in the Adult Access Service, which has ultimately led to a reduction in the need for a care and support assessment from the district teams. This is identified as one of the key performance indicators to demonstrate the success of the approach.

## **Commissioning Officer and Data Technician/Finance Assistant posts - Continuing Health Care**

24. The Committee is asked to approve the extension of 1 FTE Commissioning Officer (Band C £53,384 p.a) and 1 FTE Data Technician/Finance Assistant (Grade 4 £28,445 p.a) posts to March 2020. These posts are critical in ensuring that continuing healthcare (CHC) is accessible to all service users who may be eligible through robust application of the national guidance, and where funding is agreed that processes between health and the Council are systematic and efficient. This includes exploring joint initiatives aiming to deliver efficiencies through more strategic, cost effective commissioning.
25. Extension of the posts will support the Council to maximise income where it is appropriate to do so and to avoid funding service users who should be eligible for CHC. The posts have been instrumental in recovering £500,000 in income owing to the Council, as well as securing £300,000 annualised future income. These amounts were secured over the year to July 2014.

## **Community Care Officers to support a range of projects**

26. As the Committee will be aware there is considerable work taking place across the department with younger adults. There are established projects based around promoting independence in supported living and outreach services, which includes reviews of care and support packages with a focus on reviewing sleep in support and using assistive technology, and whole service reviews where the support of everyone in a service is reviewed as a whole.
27. The department is also supporting people to move from residential care to supported living where it is appropriate to do so, as well as supporting people to move from supported living to general needs housing, through developments such as the establishment of Community Living Networks across the County. The department is also working on an accommodation

strategy for younger adults which will be subject to approval by this Committee in due course.

28. There are still considerable savings expected to be realised by these projects. Although the project has exceeded its savings targets, the need for sensitivity when working with service users and carers and culture change work needed within providers and with colleagues in locality teams necessitates an approach that requires time. Experience gained by the Community Care Officers (CCO) and Advanced Social Work Practitioner (ASWP) to date equips them to continue to develop these areas of work.
29. The Committee is asked to approve the extension of 8 FTE Community Care Officer (Grade 5 total cost is £268,759 p.a) posts and 1 FTE ASWP (Band C £53,384 p.a) post until the end of March 2020 with a view to them being used flexibly across all of the above transformation projects, and others as required.

### **Shared Lives Scheme - Placement Co-ordinator**

30. The Shared Lives Scheme is a highly successful way of helping vulnerable people to live with families, and live ordinary lives in the community. It is different to other types of care arrangements and demonstrates positive outcomes for people who use it and carers that support them. Approval is requested for the establishment of a 1 FTE Shared Lives Placement Coordinator (Grade 5) post on a temporary basis until end of March 2019 to support the recruitment and assessment of carer households, to ensure a continued supply of new carers to provide stable and reliable placements.
31. The post would be at a cost of £16,772 including on-costs. The funding for this would be met from underspend in the current staffing budget within Direct Services.

### **Other Options Considered**

32. The temporary posts requiring extension could be removed at the current end dates. The Shared Lives Scheme could continue to put carer applications on a waiting list for assessment. This would not be the preferred option as delays in assessment can mean losing potential carers through lengthy wait times.

### **Reason/s for Recommendation/s**

33. As the Committee is aware a considerable proportion of the department's budget is based on temporary national funding and the requirements attached to this funding have required the department to create and extend temporary posts in order to meet national conditions, to effect the necessary transformation and integration of services with health and to continue to meet the statutory duties of the Council. The department undertakes a rigorous review of all temporary posts on a regular basis to ensure that the posts submitted to Committee for approval are still required.
34. The addition of the temporary Shared Lives Placement Coordinator post will support the assessment of carers and reduce the length of time between application and carer approval.

## **Statutory and Policy Implications**

35. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **Data Protection and Information Governance**

36. The data protection and information governance requirements are being considered on a case by case basis and Data Protection Impact Assessments will be completed wherever necessary.

## **Financial Implications**

37. The following posts extensions and establishment will be funded by departmental reserves:
- extension of 1 FTE Community Care Officer post to the end of March 2020 (Grade 5 - £33,595 p.a)
  - extension of 1 FTE Social Worker to the end of March 2020 (Band B - £46,925 p.a)
  - establishment of 2 FTE temporary Community Care Officers (Grade 5 – total cost of £30,926 to the end of April 2019)
  - extension of 1 FTE Social Worker to the end of March 2020 (Band B - £46,925 p.a)
  - extension of 1 FTE Community Care Officer to the end of March 2020 (Grade 5 - £33,595 p.a)
  - extension of 8 FTE Promoting Independence Workers to the end of March 2020 (Grade 3 - £24,595 per person p.a)
  - extension of 1 FTE Community Independence Worker to the end of March 2020 (Grade 3 - £24,595 p.a)
  - extension of 1 FTE Team Leader to the end of March 2020 (Band A - £40,818 p.a)
  - extension of 1 FTE Team Manager to the end of March 2020 (Band D - £57,268 p.a)
  - extension of 1.5 FTE Business Support to the end of March 2020 (Grade 3 – total cost of £35,994 p.a)
  - extension of 1 FTE Programme Officer to the end of December 2019 (Band B - £35,193)

- extension of 1 FTE Advanced Social Work Practitioner to the end of March 2020 (Band C - £53,384 p.a)
- extension of 1 FTE Social Worker to the end of March 2020 (Band B - £46,925 p.a)
- extension of 1.5 FTE Community Care Officers to the end of March 2020 (Grade 5 - total cost of £50,393 p.a)
- extension of 1 FTE Commissioning Officer to the end of March 2020 (Band C - £53,384 p.a)
- extension of 1 FTE Data Technician/Finance Assistant to end of March 2020 (Grade 4 - £28,445 p.a)
- extension of 8 FTE Community Care Officers to end of March 2020 (Grade 5 – total cost of £268,759 p.a)
- extension of 1 FTE Advanced Social Work Practitioner to end of March 2020 (Band C - £53,384 p.a)

38. The following post will be funded from current staffing underspend within Direct Services

- establishment of 1 FTE Shared Lives Placement Coordinator to the end of March 2019 (Grade 5 – total cost of £16,797)

39. The following post will be funded from existing staffing budget in the transformation team:

- establishment of 1 FTE Strategic Development Assistant (Grade 5) post until the end of March 2019 at a total cost £8,500.

### Human Resources Implications

40. Any specific HR implications are identified in the body of the report.

## RECOMMENDATION/S

That Committee approves the following changes to the staffing establishment in Adult Social Care and Health:

- 1) extension of the posts listed in the table below to support the operational needs and requirements of the Council, and to help achieve planned savings:

Post title	Number of posts (full-time equivalent)	Extension date
Social Worker (Band B)	3 FTE	March 2020
Community Care Officer (Grade 5)	11.5 FTE	March 2020
Advanced Social Work Practitioner (Band C)	2 FTE	March 2020
Commissioning Officer (CHC) (Band C)	1 FTE	March 2020

Data Technician/Finance Assistant (CHC) (Grade 4)	1 FTE	March 2020
Notts Enabling Service		
• Promoting Independence Worker (Grade 3)	8 FTE	March 2020
• Community Independence Worker (Grade 3)	1 FTE	March 2020
• Team Leader (Band A)	1 FTE	March 2020
• Team Manager (Band D)	1 FTE	March 2020
• Business Support Officer (Grade 3)	1.5 FTE	March 2020
• Programme Officer (Band B)	1 FTE	December 2019

- 2) establishment of 2 FTE Community Care Officer (Grade 5) posts to support winter pressures in Mid-Nottinghamshire until the end of April 2019
- 3) establishment of 1 FTE Strategic Development Assistant (Grade 5) post until the end of March 2019
- 4) establishment of a temporary 1 FTE Shared Lives Placement Co-ordinator (Grade 5) post until the end of March 2019.

**Paul McKay**

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#### **Constitutional Comments (LM 25/10/18)**

41. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report.

#### **Financial Comments (OC 01/11/18)**

42. The financial implications are contained within paragraphs 37 to 39 of the report.

#### **HR Comments (SJJ 22/10/18)**

43. Staff currently employed in the temporary posts will have their contracts extended and the recruitment to the new temporary posts will be achieved by following the agreed employment policies and procedures of the Council and those appointed will be employed on fixed term contract.

## **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.

County Asperger's Team - report to Adult Social Care and Public Health Committee on 13<sup>th</sup> November 2017

Evaluation of the impact of social care staff embedded within Integrated Care Teams – report to Adult Social Care and Public Health Committee on 12 March 2018

## **Electoral Division(s) and Member(s) Affected**

All.

ASCPH597 final

**12 November 2018****Agenda Item: 8****REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND  
HEALTH****YOUR NOTTINGHAMSHIRE, YOUR FUTURE – DEPARTMENTAL STRATEGY  
SIX MONTH REVIEW OF PROGRESS (APRIL – SEPTEMBER 2018)****Purpose of the Report**

1. This report provides the Committee with an overview of performance against the Adult Social Care and Public Health Departmental Strategy at the end of quarter 2 of the year 2018-19.

**Information**

2. The Council Plan - Your Nottinghamshire, Your Future - sets out the strategic ambition for the future of Nottinghamshire and the Council. It is focused on the future of Nottinghamshire as a prosperous place where people want to live, work, visit and invest.
3. The Council Plan is the core component of the Council's Planning and Performance Framework. The Framework sets out that delivery of the Council Plan will be through four Departmental Strategies detailing the activity and key measures to achieve the Council's strategic ambition. The first four Departmental Strategies – for Adults, Children's, Place and Resources - were developed during 2017 and agreed by Policy Committee in January 2018.
4. The Planning and Performance Framework also sets out how the Council will plan and manage its performance. The approach and format for reporting this was agreed by the Improvement and Change Sub-Committee on 12 March 2018. As part of that approach Members agreed that progress against the four departmental strategies will be reported to committee every six months.

**Review of progress from April – September 2018**

5. The Dashboard set out at **Appendix 1** provides an overview of performance for the key activities and measures set out at part 3 of the Adult Social Care and Public Health Departmental Strategy. The Dashboard is focused on the 12 Council Plan commitments and covers the first six months of April – September 2018
6. During this period the Council has continued to operate in a challenging financial landscape with ongoing change to local authority funding coupled with many Council services experiencing continued increases in demand.



7. Progress has been made against the Adult Social Care and Public Health Departmental Strategy, with the actions contributing across the range of Council Plan Commitments. Highlights include:

**Commitment 4 - Nottinghamshire has a thriving jobs market**

*Success means: More people are in higher paid and skilled jobs and more apprenticeships available for people of all ages*

The Adult Social Care Workforce Plan for 2018-20 was approved at Committee in September 2018. One of the key priorities within this is to focus on recruitment and retention of core roles, ensure effective leadership and succession planning in relation to an ageing workforce and career pathways, and this will improve the range of apprenticeships and work experience available in the Department. There have been two interns from the Change 100 programme in the department and both have secured fixed term contracts with the Adult Social Care and Health department. Change 100 brings together the UK's top employers and talented disabled students and graduates to offer three months of paid work experience. One of the interns has commented that:

*'the Change100 internship has been a great experience. I have had the chance to learn about many aspects of Adult Social Care and the Council. My skills have improved and I have benefitted from the guidance of more experienced colleagues.'*

Public Health provides placements for consultants, doctors and local students. The Public Health division contributed to the development of a national apprenticeship framework for Public Health practitioners. The full apprenticeship standard was submitted on 26 September. Once the framework is approved, the division will examine arising vacancies for suitability to be offered as apprenticeships. This work supports the ambition for Nottinghamshire to be a great place to fulfil your ambition.

**Commitment 8 – people live independently for as long as possible**

*Success means: People will have the opportunity to live independently in their local community*

Despite a difficult financial climate, there has been good progress in promoting independence approaches to support the delivery of the Adult Social Care Strategy. The report shows nearly 1,800 older people received short term services to help them recover, recuperate and maximise independence after an illness or crisis. This is an increase of 800 people since the last period (April – June 2018). This reflects the increased investment in short term support including the Home First Response Service. This is a short term rapid response service for people who need social care support to remain or return home. It helps people get home from hospital quickly and support someone at home in crisis and are at risk of admission to a hospital or care home. There has also been an expansion of assessment beds as part of new Extra Care Schemes. This enables people who are not able to return home to have a period of further assessment in the community and maximise their independence. Lastly, there has been additional investment in the reablement service, which provides therapeutic short term support to enable people to achieve their independence goals. The majority of people who complete a period of reablement need no long term home care in the short or medium term. This work supports the Council's



ambition to support people's well-being and independence and avoid the use of long term costly services, where they are not required.

### **Commitment 8 – people live independently for as long as possible**

*Success means: Number of people who receive financial or benefits advice*

The report shows over 2,000 people were supported to access financial or benefits advice to enable them to live independent lives and plan for the future. The total value of benefits claimed for this period is over £2.5m. This work ensures carers and disabled people are claiming benefits they are entitled to and it brings in income into the Council where people pay a contribution towards their care and support needs.

### **Commitment 9 - People can access the right care and support**

*Success means: Services improve as a result of a better integration of health and social care*

The report highlights the work of the Council with health service colleagues to provide more seamless services, with people at the centre of the care and support provided. Progress in this area is reflected in the very low rates of delayed transfers of care attributable to social care demonstrating the benefits to service users of this approach. In August Nottinghamshire was the 6<sup>th</sup> best performing council (out of 151 local authorities) in the country for delayed transfers of care. In March 2018 Nottinghamshire was announced as one of three sites to pilot a proactive and joined up approach to assessment and support planning for people with health and social care needs, and offering more integrated personal budgets for health and social care funding. The aim of this work is to ensure people receive better and more joined up care across health and social care boundaries. In July 2018, Mansfield Older Adults social care staff and managers co-located with health colleagues into the Warsop Primary Care Centre and Bull Farm Primary Care Centre. This was the outcome of an external evaluation regarding how to achieve the best health and social care outcomes. This development will help to shape co-location and alignment of teams in other parts of the County.

#### **Case Study: Personalisation**

*John is in his twenties and had been in and out of hospital due to regular fluctuation/deterioration in his mental state. He experienced problems with severe self-neglect, isolating himself, and poor self-image. He wanted to make friends and “be like other people” – he used his personal health budget to employ a personal assistant (PA) who would help him to engage in social activities. The PA supported him to access some voluntary work at a livery stable, and this led to the offer of a part time job. He is currently employed there without the support of his PA.*

8. Further progress is expected to be made against the actions in the Departmental Strategy over the remaining six months of the year. Particular attention will be given to any commitment where delivery of an action has not yet been matched by a change in the measure of success linked to it. This will include:

### **Commitment 7 - People live in vibrant and supportive communities**

*Success means: Older people are treated with dignity and their independence is respected and our most vulnerable residents will be protected and kept safe from harm*

As set out in the **Appendix 1** significant work is underway to identify and learn from good and excellent practice to ensure that where people experience abuse and neglect, the Council provides support that is responsive to their needs and personalised. This work is yet to be reflected in the related measure for the percentage of safeguarding services users who were satisfied that their outcomes were fully achieved and additional focus will be placed on this in the coming months.

9. The Committee is invited to consider the progress reported in **Appendix 1** and any further information that it might require. An update on the Core Data Set of performance measures for the Adult Social Care and Health department will be provided at the end of quarter 3 (October – December) and a year-end position on the Departmental Strategy at the end of quarter 4 (January – March).

### **Other Options Considered**

10. The matters set out in the report are intended to provide effective and proportionate performance management reporting to the Department and the Committee. This approach was agreed by the Improvement and Change Sub-Committee in March 2018 and no other options were considered.

### **Reason/s for Recommendation/s**

11. The Council's Constitution requires each Committee to review performance in relation to the services provided on a regular basis. The recommendation contributes to this requirement.

### **Statutory and Policy Implications**

12. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment 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**

13. There are no financial implications arising directly from this report.

### **RECOMMENDATION/S**

- 1) That the Committee considers the performance issues outlined in the report and whether any additional information or actions are required in relation to them.

**David Pearson**  
**Corporate Director, Adult Social Care and Health**

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**Constitutional Comments (SLB 16/10/18)**

14. Adult Social Care and Public Health Committee is the appropriate body to consider the content of the report. If Committee resolves that any actions are required it must be satisfied that such actions are within the Committee's terms of reference.

**Financial Comments (DG 19/10/18)**

15. The financial implications are contained within paragraph 13 of this 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.

Departmental Strategies – report to Policy Committee on 24 January 2018

Adult Social Care Workforce Plan 2018-2020 – report to Adult Social Care and Public Health Committee on 10 September 2018

**Electoral Division(s) and Member(s) Affected**

All.

ASCPH599 final



# Your Nottinghamshire Your Future Council Plan

## Adult Social Care and Public Health Department

### Our commitments measuring our success

#### Priority 1 - A great place to bring up your family

##### Commitment 1 - Families prosper and achieve their potential

Success means	Council Plan Key Measures of Success	Latest	Target	Good is	Previous	National Average
Young people will have improved physical and mental health	The proportion of children in Notts who are covered by the Healthy Child Programme (mandated checks undertaken within timescale)	Q4 2017. new birth visit: 84%, 6-8 week review: 85%, 1 year review by 15 months: 90.8%, 2 year review: 79.2%	95% (mandated checks undertaken within timescale)	High	84% 2017/18 (mandated checks undertaken within timescale)	Q4 2017. new birth visit: 88.5%, 6-8 week review: 84.9%, 1 year review by 15 months: 82.1%, 2 year review: 76.4%

##### Commitment 2 - Children are kept safe from harm

Children at risk are appropriately identified, supported and protected	Number of children and young people supported in Domestic Violence services	156 (Q1 2018/19)	622 (indicative target)	High	510 to end Q4 2017/18	NA
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##### Commitment 3 - Children and Young People go to good schools

Vulnerable children are less likely to miss education	The proportion of children in Notts from less advantaged backgrounds who achieve a good level of development at the end of reception.	48.2% (2016/17)	Increase	High	48.2% (2016/17)	56% (2016/17)
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#### Priority 2 - A great place to fulfil your ambition

##### Commitment 4 - Nottinghamshire has a thriving jobs market

Success means	Council Plan Key Measures of Success	Latest	Target	Good is	Previous	National Average
More people are in higher paid and skilled jobs	Number of people supported by the Council in apprenticeships and placements related to social care and public health	43	N/A	Maintain at same level	N/A	NA
More apprenticeships available for people of all ages	Number of adults with disabilities supported into employment by the Council	328	N/A	High	324	N/A

##### Commitment 5 - Nottinghamshire is a great place to live, work, visit and relax

People live in communities supported by good housing and infrastructure	The fraction of deaths in adults attributable to air pollution	5.7% (2016)	Reduce	Low	–	5.3% (2016)
	Proportion of adults with learning disabilities who live in their own home or with their family	74.80%	76.0%	High	74.2%	75.4%

##### Commitment 6 - People are healthier

Healthy life expectancy increases	Average number of years people live in good health (male/female)	61.7 (male) 62.4 (female) 2014-16	Increase	High	61.7 (male) 62.4 (female) 2014-16	63.3 (male) 63.9 (female) 2014-16
Life expectancy rises fastest in those areas where outcomes have previously been poor	Reduction in the proportion of adults who smoke, are overweight, or who are physically inactive	Smoking prevalence 15.1% (2017) Overweight adults 64.4% (2016/17) Physically inactive adults 23.2% (2016/17)	Reduce	Low	Smoking prevalence 15.7% (2016) Overweight adults 64.4% (2016/17) Physically inactive adults 23.2% (2016/17)	Smoking prevalence 14.9% (2017) Overweight adults 61.3% (2016/17) Phys inactive adults 22.2% (2016/17)
	Proportion of eligible population who are offered / invited an NHS Health Check	Cumulative offered a health check: 57.7%  Cumulative uptake (percentage of those who have been offered, who have received a health check) 58.8%  (2014/15 Q1 – 2018/19 Q1)	66% (invites) 66% (uptake) (Targets as from 2018/19)	High	Cumulative offered a health check: 56.4%  Cumulative uptake (percentage of those who have been offered, who have received a health check) 56.7%  (2014/15 Q1 – 2017/18 Q1)	Cumulative offered a health check: 76.7%  Cumulative uptake (percentage of those who have been offered, who have received a health check) 48.3%  (2014/15 Q1 – 2018/19 Q1)



Priority 3 - A great place to enjoy later life						
Commitment 7 - People live in vibrant and supportive communities						
Success means	Council Plan Key Measures of Success	Latest	Target	Good is	Previous	National Average
Older people are treated with dignity and their independence is respected	Number of adults referred/linked to community resources to promote independence and social inclusion	1276	N/A	High	N/A	N/A
Our most vulnerable residents will be protected and kept safe from harm	% of safeguarding services users who were satisfied that their outcomes were fully achieved	70.90%	80%	High	N/A	N/A
Commitment 8 - People live independently for as long as possible						
Carers receive the support they need	Number of carers given advice and information	3329	n/a	n/a	1922	n/a
People will have the opportunity to live independently in their local community	Number of carers who are supported	1996	n/a	n/a	1012	n/a
	Number of people who receive financial or benefits advice	1681 (through Adult Access team); 606 (Adult Care Financial Services)		High	N/A	N/A
	Number of people who receive short term services to recover, recuperate and maximise independence	1856	n/a	High	1052	n/a
Better access to financial advice so that older people can make more informed decisions						
Commitment 9 - People can access the right care and support						
People's needs are met in a quick and responsive way	Qualitative feedback from surveys of people who use the Notts Help Yourself (NHY) website and receive advice, guidance and signposting from the Customer Service Centre (CSC)	125,661 people used NHY in the period - average increase of 18% in last 3 months. Between April and July 2018, 685 customers were surveyed on the advice and guidance / signposting they were provided by the CSC, including use of Notts Help Yourself. Only 11 cases reported that the advice and guidance had not been helpful. This resulted in processes being amended and feedback provided to the relevant advisor to consider for next time. The survey process is to be reviewed to identify a more effective way of collecting this feedback.				
Services improve as a result of a better integration of health and social care	Proportion of people whose needs are resolved at the first point of contact	75.00%	n/a	High	N/A	n/a
	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services (effectiveness of the service)	82.40%	80.0%	High	80.6%	82.70%
	Average daily rate of delayed transfers of care attributable to social care	0	0.7	Low	0.1	n/a
	Qualitative feedback from Accountable Officers of local CCGs / ACS (Annual)	This measure to be reviewed in the light of emerging ICS and changing CCG structures		n/a	High	n/a



## Your Nottinghamshire Your Future Council Plan

### Adult Social Care and Public Health Department

#### Key activities that support delivery of the council plan

##### Priority 1 - A great place to bring up your family

###### Commitment 1 - Families prosper and achieve their potential

Success means	Activities to progress the outcome	Progress
Young people will have improved physical and mental health	We will lead the commissioning of services to promote healthy lifestyles and address ill-health amongst all children, young people and families	The Healthy Families Programme for 0-19's contract commenced on 1st April 2017. The contract is now in Year 2 of service delivery. The model of service is based around 20 locally based Healthy Family Teams across Nottinghamshire aligned to children's centre boundaries, and supporting children, young people and families. The Healthy Families Programme delivers the Department of Health's Healthy Child Programme and each family receives a schedule of universal checkpoint reviews, including a programme of screening tests, developmental reviews and information and guidance to support parenting and healthy choices, to ensure that children and families achieve optimum health and wellbeing. The workforce is configured to provide the highest level of support in areas of greatest need.

###### Commitment 2 - Children are kept safe from harm

Children at risk are appropriately identified, supported and protected	We will lead the commissioning of services to promote healthy lifestyles and address ill-health amongst all children, young people and families	The Healthy Families Programme for 0-19's contract commenced on 1st April 2017. One of the key roles of the Healthy Families Programme is to identify children and young people with specific needs and risks and provide targeted support. Key stakeholders for the service include children's social care, early help unit, MASH and the Family Service. Children are identified, supported and protected using a multi-agency 'team around the child' approach
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###### Commitment 3 - Children and Young People go to good schools

Vulnerable children are less likely to miss education	We will commission a Healthy Families Programme to support school readiness, secure improved emotional and physical health of school age children, and contribute to reducing the number of young people not in education, employment or training due to unplanned pregnancy.	A Healthy Families Programme for 0-19's was commissioned and the contract commenced on 1st April 2017. The range of activity includes: <ul style="list-style-type: none"> <li>• Level one interventions for emotional and mental health issues including depression, low mood, self-harm, anxiety, risk-taking behaviour, and anger management, working closely with schools and families</li> <li>• Support around healthy relationships, contraception and sexual health, including pregnancy testing and chlamydia screening</li> </ul> In addition, bookable Healthy Child sessions for parents/carers of primary school age children provide further access to one to one support; drop-in sessions for young people are established in or near each secondary school.
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##### Priority 2 - A great place to fulfil your ambition

###### Commitment 4 - Nottinghamshire has a thriving jobs market

Success means	Council Plan Key Measures of Success	Progress
More people are in higher paid and skilled jobs	We will promote careers in social care and public health for young people, through apprenticeships and placements	The Adult Social Care Workforce Plan for 2018-20 was approved at committee in September 2018. One of the key priorities within this is to focus on recruitment and retention of core roles, ensure effective leadership and succession planning in relation to an ageing workforce and career pathways, and this will involve improvement in the number and range of apprenticeships and range of work experience available in the Department. There have been 2 interns from the Change 100 programme in the department and both have secured fixed term contracts with the Adult Social Care and Health department. Change 100 brings together the UK's top employers and talented disabled students and graduates to offer three months of paid work experience. Public Health provides placements as part of rotational training programmes for Public Health Consultants and for doctors. In the period April-Sept the division hosted two FY2 doctors, three Public Health Registrars, and two GPs on a fellowship placement. Public Health also provides shorter work experience placements for local students. From July to September it provided part-time placements for three students on the Masters in Public Health course at Nottingham University. There was also one short term work experience placement for a local graduate interested in a career in Public Health analysis. The Public Health division continued to contribute to development of a national apprenticeship framework for Public Health practitioners. The full apprenticeship standard was submitted on 26 September. Once the framework is approved, the division will examine arising vacancies for suitability to be offered as apprenticeships.
More apprenticeships available for people of all ages	We will work with partners and the wider community to improve the number of adults with disabilities in meaningful employment	The Council has approved considerable investment from the capital programme to support the redevelopment of the County Horticulture service which provides employment and training opportunities for people with disabilities. This will involve some rationalisation of the existing service model, but expansion plans at the main Brooke Farm site will increase the number and range of work experience opportunities available. The Council's I-Work Team continues to support more people into employment on a year on year basis. The NES team for younger adults with disabilities works with individuals to increase their independence and reduce their reliance on social care services for up to 12 weeks; this includes preparing for and connecting people with opportunities for voluntary and paid work, and there have been a number of success stories with regard to this.

###### Commitment 5 - Nottinghamshire is a great place to live, work, visit and relax

People live in communities supported by good housing and infrastructure	We will work with partners to develop housing, built environment, and transport which supports healthy lifestyles and reduces exposure to poor air quality.	NCC Public Health and Planning are updating the county's Health & Wellbeing Board-endorsed spatial planning and health framework in line with local and national policy changes. This is due to be completed in December 2018. During Q2 Public Health provided advice on 7 Neighbourhood Plans, 1 Development Brief and 1 Local Plan. The commissioned Obesity Prevention and Weight Management Service is supporting the Travel Choices workplace travel planning initiative in Newark & Sherwood and provided health & wellbeing support in the first business worked with during Q2. NCC Public Health-led refresh of the County & City air quality strategy commenced in Q2, which aims to have a refreshed document for consultation by January 2019.
	We will work with partners to develop housing that will meet the needs of an ageing population and increasing numbers of people with disabilities.	The Housing with Care Strategy for older adults was approved by Policy Committee in June 2018. Work continues with partners to seek appropriate opportunities to develop more schemes across the county. For younger adults work is well underway to develop a younger adults' accommodation strategy, which will be presented to committee for approval in due course. The department has recently secured £25k (funded by the Improved Better Care Fund) to enable a consultant to work on a countywide housing strategy, concentrating on supported accommodation but also looking at how the wider housing market can contribute to meet the needs of vulnerable adults and how disabled facilities grants may be better utilised across the county to keep people living in the community.

###### Commitment 6 - People are healthier



<p>Healthy life expectancy increases</p> <p>Life expectancy rises fastest in those areas where outcomes have previously been poor</p>	<p>We will commission services which provide support for residents seeking a healthier life-style including reducing their exposure to substance misuse, tobacco, excess weight and low physical activity, and sexually transmitted infections.</p>	<p>Previously commissioned, separate services are currently in place to address substance misuse, tobacco, excess weight and low physical activity, and sexual health. Performance is reported quarterly to the Adult Social Care and Public Health Committee. Many of these services are due to expire in March 2020.</p> <p>Public and stakeholder consultation on proposals for new services took place over the Summer of 2018. The results informed the development of detailed proposals for future services: an Integrated Wellbeing Service and a separate Substance Misuse service. The Integrated Wellbeing Service will support residents to address lifestyle risk factors relating to overweight, poor diet, physical activity, smoking and alcohol, and improve mental wellbeing. This approach will be applied proportionate to need with focus on the communities with the poorest health. The Substance Misuse service will be delivered separately as an all-age service to blur the age of transition from young people's into adults' services. ASC&amp;PH Committee approved the procurement of these two separate services in October 2018.</p> <p>Sexual health services are mid-contract and deliver an integrated service across Nottinghamshire, which means people can access contraceptive services at the same time and place as testing and treatment for sexually transmitted infections. In response to need, a new on-line testing service for chlamydia was commissioned from November 2017. During the first half of 2018/19, the rate of use of this service increased.</p>
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### Priority 3 - A great place to enjoy later life

#### Commitment 7 - People live in vibrant and supportive communities

Success means	Council Plan Key Measures of Success	Progress
Older people are treated with dignity and their independence is respected	We will work with people to connect them to their community and local networks in order to remain as independent as possible.	The Connect services are aimed at older people and people with long term conditions to provide early interventions to promote good self-care and continued self-management. The service is provided by three external organisations, who each cover one part of the county. They provide brief interventions and up to three months' support to improve health management; promote independence; address the impacts of social isolation; support people to live in safe and suitable accommodation; and improve economic well-being. Feedback shows that the most common achieved outcome is around income maximisation, with the people in Mid Notts alone supported to access over £20,000 in additional weekly benefits, the equivalent of over £1 million per year during 2017/18. The service also works closely with the Council's Falls Prevention project to identify individuals at risk of falls and advise and support on actions to reduce this risk. From April 2018 all three of the providers have been working with the hospital discharge teams to deliver community-based support focussed on reducing commissioned interventions post-discharge.
Our most vulnerable residents will be protected and kept safe from harm		<b>Connect case study:</b> <i>Mrs L was 65 years old and living alone. She had severe Rheumatoid Arthritis, COPD, late stage Emphysema, and was on the waiting list for a lung transplant operation. Due to her poor health and limited mobility Mrs L was struggling with everyday living tasks, using her bathroom and moving around her home safely, and she needed small maintenance jobs doing, but in addition, Mrs L's family lived in Australia and she didn't speak with them, concerned about the cost of calls. This was having further negative impact on how she was feeling. As well as being supported to access equipment through an OT assessment, acquiring a Lifeline and being given a list of local trusted traders from which she was able to arrange home repairs herself, her Connect worker showed Mrs L how to use her iPad to communicate with her family in Australia free of charge and to become active on Facebook. As a result, she now has regular contact with family and friends. Mrs L now speaks to her daughter and grandchildren at least 3 times a week. She has found and connected with old friends via Facebook and is socialising more. Mrs L reported feeling safer, more independent and able to cope with her future health needs. Her mood was lifting and she felt positive about the future.</i>
	We will work with people to ensure they feel safe in their homes and communities. Where people experience abuse and neglect, we will provide support that is responsive to their needs and personalised	The department continues to undertake a regular audit three times a year whereby peers review the safeguarding practice of their colleagues and provide feedback. This allows the department to identify good and excellent practice which can be shared as well highlighting areas that require attention and improvement, such as increasing the number of people who felt their outcomes had been fully met as above. There has been an increase in the number of advocates involved in safeguarding enquiries where this is relevant, meaning those individuals who have difficulty in engaging with the safeguarding process are supported to do so.

#### Commitment 8 - People live independently for as long as possible

Carers receive the support they need	We will provide support for carers	Following considerable consultation work with carers, partners and the Council's workforce to identify what carers value and how they would like to see services develop in the future, a new Carers' Strategy has been produced to cover the period 2018-2020. It has also informed development of a revised carers support offer, to be implemented by April 2019. This will include changes to the Council's assessment and support planning process as well as its commissioned information, advice and support services.
People will have the opportunity to live independently in their local community		
Better access to financial advice so that older people can make more informed decisions	We will provide information, advice and guidance to support people to live independently	Up to end of August a total of £2.4m in benefits has been achieved as a result of support from the Council's benefits advice staff in the Adult Access Service. The Adult Care Financial Service teams have supported people to claim £6,000 per week in eligible benefits. Following a review of the Independent Financial Information and Advice Service delivered by Age UK Nottingham and Nottinghamshire, a decision was taken to bring the sign-posting and support function in-house, utilising more effectively the existing skills and capacity held within the Customer Service Centre, the Benefits Advice Team and NottsHelpYourself. From June 2018 the Customer Services Centre began providing information regarding the importance of receiving independent financial information and advice directly to people contacting the Council. Between July and Sept 2018 50 self-funders received advice and were directed to independent financial advisers and other sources of information and advice.

#### Commitment 9 - People can access the right care and support

People's needs are met in a quick and responsive way	We will provide good quality advice, information and support to people with disabilities and long term health conditions to enable them to lead productive and independent lives for as long as possible	The department continues to roll-out the implementation of the three tier model, which is a new way of delivering social care whereby staff have a conversation with an individual to identify the reason for their initial phone call and to see what short term solution or community resource will be available to meet that need. The idea behind the model is for the worker to support the individual to help themselves and find a suitable resolution as early in the process as possible. In addition social care clinics are operating across all 7 districts for older adults and the majority of youngers adults with the aim of providing a response to people as quickly as possible after they contact the Council. The Notts Help Yourself website is well-used and an upgrade is planned for early in 2019. This will also respond to issues raised about ease of access to information that is required.
Services improve as a result of a better integration of health and social care	We will provide intensive support at times of crisis and care needs will be reviewed once the immediate crisis has passed.	The department's Home First Response Service is a countywide short term rapid response home care service which supports people who have social care needs in their own home for up to seven days. There are two parts to the service: hospital discharge and community crisis, which is for people who are at home but at risk of being unnecessarily admitted to hospital or short term care due to a short term crisis, including carers' crisis. The service has a reablement and enablement approach to service delivery. Within this period 729 people have been supported by this service. This is in addition to the support provided by the Council's Short-term Assessment and Reablement Teams; one of these teams has just received a nomination at the Great British Care Awards for the East Midlands. The department continues to undertake regular reviews of people's care needs to ensure they are receiving the appropriate level of support and that capacity in care and support services is maximised; during this period 3039 reviews have been completed.
	We will work with the health service colleagues to provide more seamless services (where there is a benefit), with people at the centre of the care and support provided.	Nottinghamshire has continued with its good performance in relation to delayed transfers of care from hospitals across the county. In July we were 11th best performing council (out of 151 local authorities) in the country. In March 2018 Nottinghamshire was announced as one of three sites to pilot a proactive and joined up approach to assessment and support planning for people with health and social care needs, and offering more integrated personal budgets for health and social care funding. The aim of this work is to ensure people receive better and more joined up care across health and social care boundaries. In July 2018, Mansfield Older Adults social care staff and managers co-located with health colleagues into the Warsop Primary Care Centre and Bull Farm Primary Care Centre - this was the outcome of an external evaluation regarding how to achieve the best health and social care outcomes. This development will help to shape co-location and alignment of teams in other parts of the county.



	<p>We will provide statutory specialist advice to NHS commissioners and co-ordinate joint strategic needs assessment across health and social care.</p>	<p>Advice has been provided in the development of the strategy and framework for action for the ICS prevention workstream. Clinical and cost effectiveness advice has been provided to CCGs to support prioritisation and commissioning work.</p> <p>The demography chapter of the JSNA has been refreshed and published. The updated substance misuse JSNA chapter is complete and will be presented for approval at the Health and Wellbeing Board in November. Five chapters of the JSNA - covering cancer, self-harm, autism, learning disability and sexual health - are in the final stages and are planned to be presented for approval at Health and Wellbeing Board in January 2019.</p>
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12 November 2018

Agenda Item: 9

## **REPORT OF THE DEPUTY CORPORATE DIRECTOR FOR ADULT SOCIAL CARE AND HEALTH**

### **ADULT SOCIAL CARE AND PUBLIC HEALTH - EVENTS, ACTIVITIES AND COMMUNICATIONS**

#### **Purpose of the Report**

1. To seek Committee approval to proceed with a range of events and activities within adult social care and public health and undertake promotional work to publicise activities as described in the report.

#### **Information**

2. Over the course of the year, the range of public events, publicity and promotional activities that may be undertaken by adult social care and public health are wide ranging and there are a variety of reasons for doing so, for example:
  - promotion of services to give information to people in need of social care and public health services and their carers
  - encouraging interest in recruitment campaigns for staff, carers and volunteers
  - engagement of communities with services in their locality
  - generation of income through public events.
3. Over the next quarter, adult social care and public health would like to undertake the events and activities detailed in **paragraphs 4 - 14**.

#### **Cancer signs and symptoms social marketing awareness campaigns**

4. Public Health (PH) has a key role in preventing people from 'contracting' cancer. PH endeavours to reduce the number of new cancers through a range of initiatives. These span health protection approaches such as tobacco control and workplace health support to health promotion initiatives, through to the provision of 'healthy' lifestyle service support to individuals.
5. In addition to this, PH is also able to provide a preventive service through health promotion campaigns. Targeted and tailored messaging is key to engaging with vulnerable disadvantaged communities, who remain with high exposure to key risks. Research referenced in the National Cancer Strategy (Independent Cancer Taskforce, 2015) shows people in the UK have more limited understanding of the signs and symptoms of cancer

and a greater reluctance to act on these than people from other western countries. This awareness raising is important as generally an early diagnosis of cancer facilitates better cancer outcomes. Responding to this research, Cancer Research UK and PH England (PHE) have developed a national social marketing brand, 'Be Clear on Cancer'. 'Be Clear' aims both to improve an individual's knowledge of the signs and symptoms of cancer, as well as to address identified issues among the at risk population around embarrassment and reluctance to 'trouble the doctor'.

### **Nottinghamshire Cancer Awareness Campaigns**

6. The Public Health division within Nottinghamshire County Council proposes to run local campaigns to complement 'Be Clear'. These campaigns should extend the reach of the national campaigns and will enable local clinicians, patients and carers to be involved in presenting their stories. PHE releases three or four 'Be Clear' campaigns a year. In addition many of the main types of cancer tumour have awareness raising weeks or months. The aim will be to address each of the national PHE campaigns and other campaigns in response to local interests and health need. This promotional cancer awareness work is embedded in the work of the Nottingham and Nottinghamshire Sustainability and Transformation Partnership Cancer Programme Board.
7. The campaigns will include the distribution of relevant information packs to partner agencies including GP surgeries, libraries and third sector organisations. This will be augmented with the Council's communications direct to the public, including press releases, internet postings, social media engagement and digital screen displays. The core materials adopted will be those produced by PHE or leading national cancer charities. The PHE resources are market-tested to engage effectively with defined disadvantaged populations. Local materials will be incorporated as appropriate and a service impact evaluation will be prepared following each campaign.

### **Winter Warmth Campaign 2018-19**

8. In Nottinghamshire there were 454 more deaths in the winter months than in the average over the adjacent non-winter months in 2015/16. These 454 deaths represent an excess of nearly 20% (18.1%) on top of the average number of deaths over the non-winter months. The number of excess winter deaths is closely linked to the severity of the weather over the winter period. Those known to be most vulnerable are older residents (in particular, those aged 85 years and over and those with chronic health conditions such as chronic renal disease, coronary heart disease, diabetes and Chronic Obstructive Pulmonary Disease).
9. There are a range of services in Nottinghamshire, such as Warm Homes on Prescription (WHOP) and the Nottinghamshire Healthy Housing Service (<https://nottenergy.com/our-services/healthy-housing/>) which support vulnerable residents to 'keep warm in winter' and improve home energy efficiency. Working alongside these partners, work will be undertaken to provide additional promotion of these services over the winter period and seek to ensure higher take up by vulnerable residents in the County in order to minimise excess winter deaths and cold-related ill health.
10. Proposed activities over the period November to February will include:
  - developing a communication statement for the Council's communications team

- advertising the campaign on the Council's intranet, website and social media
- circulating to stakeholders to promote through their own activities and communication channels
- supporting the advertising of local affordable warmth events, where appropriate, through the Council's social media.

### **Launch of the Health for Kids website: an interactive health & wellbeing website aimed at 5-11 year olds for Nottinghamshire**

11. Following the success of the Health for Teens website, the first Young People's Health & Wellbeing focussed website for Nottinghamshire launched previously in January 2017, Health for Kids is due to be launched in December 2018. The interactive website, funded by Public Health, provides information to young people aged 5 – 11 years for their emotional and physical health and wellbeing.
12. Health for Kids is an exciting development and offers a mix of clinically assured interactive content, with a striking design co-designed with children and young people. The website aims to be a one stop shop for young people to seek universal health information that is safe and from a trusted source, via quality assured content that is fit for the smartphone generation. Children will be able to browse through the 'four worlds' of staying healthy, illness, feelings and getting help. Each 'world' is populated with different health areas for children to learn about their health.
13. Public Health is the local commissioning lead with the Youth Service managing the website.
14. A campaign to promote the launch would include internal and external distribution via workforce health links and the Council's communications, intranet and social media, with wider circulation of information to partner organisations e.g. Clinical Commissioning Groups/ GPs, community health and mental health services, third sector organisations, children's centres and universal health services as well as all County primary schools and libraries. All marketing approaches would consider service staff, parents/carers and young people whom the website is aimed at. There will be branded artwork available to use to create relevant resources to promote the site. As a result there are financial implications linked to this, however they are contained within the existing budget.

### **Other Options Considered**

15. To not undertake events, activities and publicity relevant to adult social care and public health would result in lack of awareness or understanding of services available and lack of engagement with local communities.

### **Reason/s for Recommendation/s**

16. To ensure that people in need of adult social care and public health services and their carers are aware of the range of services on offer; encourage engagement with local communities, increase income generation and highlight and share good practice.
17. To enable the Local Authority to contribute to the overarching aims and outcomes of cancer health population awareness campaigns as described in **paragraphs 4 - 7** above.

## Statutory and Policy Implications

18. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment 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

19. Costs associated with distribution of materials for the Cancer Health Awareness Public Health promotion initiatives described in **paragraphs 4 - 7** and the Winter Warmth activities described in **paragraphs 8 - 10** will be met from the service budget.
20. Costs associated with production of promotional materials for the launch of the Health for Kids website described in **paragraphs 11 - 14** will be met from within the service budget.

## Human Resources Implications

21. There are no human resource implications.

## Implications in relation to the NHS Constitution

22. The Public Health communications outlined above support the ethos of the NHS constitution to *"...improve our health and wellbeing, supporting us to keep mentally and physically well, to get better when we are ill and, when we cannot fully recover, to stay as well as we can to the end of our lives"*.

## Public Sector Equality Duty implications

23. The aim of the Cancer Awareness campaigns described above supports the principles of reducing stigma and discrimination.
24. The Winter Warmth promotional activities will be of particular benefit to older people and to people with long term health conditions, as set out in **paragraph 8** above.

## RECOMMENDATION/S

- 1) That Committee approves the plan of events, activities and publicity set out in the report.

**Paul McKay**

**Deputy Corporate Director, Adult Social Care and Health**

**For any enquiries about this report please contact:**

Paul McKay

Deputy Corporate Director, Adult Social Care and Health

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### **Constitutional Comments (SLB 09/10/18)**

25. Adult Social Care and Public Health Committee is the appropriate body to consider the content of this report.

### **Financial Comments (DG 10/10/18)**

26. The financial implications are contained within paragraphs 19 and 20 of this 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.

None.

### **Electoral Division(s) and Member(s) Affected**

All.

ASCPH593 final





12<sup>th</sup> November 2018

Agenda Item: 10

## **REPORT OF THE TRANSFORMATION DIRECTOR, ADULT SOCIAL CARE AND HEALTH**

### **ADULT SOCIAL CARE STRATEGY TEAM BRIEFING TOOLKIT AND EMPLOYEE VIDEO**

#### **Purpose of the Report**

1. The purpose of this report is to:
  - a) provide an overview of the County Council's adult social care strategy team briefing toolkit and employee video prior to a viewing within the Committee meeting
  - b) seek approval for the toolkit launch and the sharing of the video with relevant stakeholders in wider meetings in order to promote the work of the Council's Adult Social Care and Public Health department.

#### **Information**

2. To support the Adult Social Care and Public Health Departmental Strategy, an updated Adult Social Care Strategy 'Supporting Adults in Nottinghamshire' was approved by Policy Committee on 20<sup>th</sup> December 2017.
3. It sets out the guiding principles for delivery of adult social care in Nottinghamshire to ensure it is effective, can meet the needs of people now and in the future, and is fully compliant with the Care Act 2014.
4. The updated Strategy focuses on promoting people's independence and wellbeing through three key stages:
  - 1) Helping people to help themselves
  - 2) Helping people when they need it
  - 3) Supporting people to maximise their independence and keeping their progress under review.
5. To fully embed the strategy's guiding principles across social care teams, an interactive resource for team managers and teams has been created.

6. The intention is to provide managers and staff with an internal briefing tool that can guide team discussions about the Adult Social Care Strategy and how it is / can be translated into practice.

### **Team Briefing Toolkit and Employee Video**

7. The combined resource will provide teams with an opportunity to:
- gain a better understanding about the Strategy's focus on promoting independence and wellbeing and what that means for them
  - be clear about why the Council needs to work differently in difficult financial times so that people can live the best life they can and achieve the outcomes that matter to them
  - see some real examples of positive practice that are already making a difference to people
  - connect their hearts and minds to the Strategy and help them feel valued by the organisation.
8. The Toolkit contains:
- an interactive team briefing presentation that can be used by teams or individuals
  - a short complementary video showing real examples of people's positive experiences of the Council's adult social care services.
9. The Toolkit can be used flexibly:
- as a refresher; to ensure that teams are update
  - as a guide for discussion and reflection within meetings or supervisions
  - included in new starter inductions or employees return to work
  - as information for people who are not familiar with the Strategy and local care context.
10. The video shows:
- positive but realistic examples of promoting independence and wellbeing
  - good outcomes for service users, carers and families as result of the positive relationships built with people
  - how adult social care is being collectively transformed
11. Video production:
- the intention of the video is to highlight a focus on promoting independence and wellbeing as opposed to describing adult social care functions

- the video was commissioned by the Adult Social Care and Health department's Extended Leadership Team and approved by the Committee on 9<sup>th</sup> July 2018
  - the information has been developed with contributions from social care managers and staff, service users and carers
  - the film deliberately includes aerial footage of some of Nottinghamshire's well known county wide landmarks:
    - The Ranges, former Linby colliery site
    - Brinsley Headstocks and Nature Reserve
    - Poppy Fields Housing Complex, Mansfield.
12. The toolkit and video have been designed to allow all staff to have an opportunity to access the information and participate in the exercises. It is accessible to people with visual and auditory impairments.
13. Toolkit launch:
- a communication plan is in place to ensure all managers and relevant working groups are aware of the combined resource and its purpose in advance of the launch to teams and employees.
  - between 3<sup>rd</sup> September and 8<sup>th</sup> November 2018 the video was shared with:
    - the Leader of the Council
    - the Chairman of the Adult Social Care and Public Health Committee
    - Corporate Leadership Team
    - Adult Social Care Joint Consultative and Negotiating Panel.
  - on 10<sup>th</sup> September 2018, both the toolkit and video were shared with the Adult Social Care and Health department's Extended Leadership Team.
  - subject to approval of the communication plan, group managers will launch the resource and accompanying guidance materials in a targeted approach to team managers from 14<sup>th</sup> November 2018.
  - this will include an endorsement from the Adult Social Care and Health department's Senior Leadership Team to commend a proactive use across teams and working groups. Supporting information will also be included in the departmental online weekly bulletin and monthly Team Talk publication.
  - the combined resource will also be available to external partners and organisations to promote the Council's Adult Social Care and Health department.

### **Other Options Considered**

14. Given the importance of the Adult Social Care Strategy it was determined that a less structured approach would not guarantee consistency in messaging across

teams, would not reach staff with sufficient impact and have no reliable method of measuring the impact on practice and performance.

### **Reason/s for Recommendation/s**

15. This approach is the most effective way of ensuring the Adult Social Care Strategy is embedded in practice consistently across adult social care teams and underpins the delivery of the Adult Social Care and Public Health Departmental Strategy. It allows for an evaluation of the impact of the Strategy on staff practice.

### **Statutory and Policy Implications**

16. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment 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**

17. There are no financial implications arising from this report.

## **RECOMMENDATION/S**

That Members:

- 1) consider whether there are any further actions it requires in relation to the information on the Adult Social Care Strategy team briefing toolkit and employee video.
- 2) approve the launch of the toolkit and the sharing of the video with relevant stakeholders in wider meetings in order to promote the work of the Council's Adult Social Care and Public Health department.

**Jane North**  
**Transformation Director**  
**Adult Social Care and Public Health**

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### **Constitutional Comments (LM 17/10/18)**

18. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report.

### **Financial Comments (OC 18/10/18)**

19. The financial implication is contained within the paragraph 17 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.

Updated Adult Social Care Strategy – report to Policy Committee on 20 December 2017

Adult Social Care and Public Health – events, activities and communications – report to Adult Social Care and Public Health Committee on 9 July 2018

### **Electoral Division(s) and Member(s) Affected**

All.

ASCPH595 final



**REPORT OF SERVICE DIRECTOR, CUSTOMERS, GOVERNANCE &  
EMPLOYEES****WORK PROGRAMME****Purpose of the Report**

1. To consider the Committee's work programme.

**Information**

2. The County Council requires each committee to maintain a work programme. The work programme will assist the management of the committee's agenda, the scheduling of the committee's business and forward planning. The work programme will be updated and reviewed at each pre-agenda meeting and committee meeting. Any member of the committee is able to suggest items for possible inclusion.
3. The attached work programme has been drafted in consultation with the Chair and Vice-Chair, and includes items which can be anticipated at the present time. Other items will be added to the programme as they are identified.
4. As part of the transparency introduced by the revised committee arrangements in 2012, committees are expected to review day to day operational decisions made by officers using their delegated powers. It is anticipated that the committee will wish to commission periodic reports on such decisions. The committee is therefore requested to identify activities on which it would like to receive reports for inclusion in the work programme.

**Other Options Considered**

5. None

**Reason/s for Recommendation/s**

6. To assist the committee in preparing its work programme.

**Statutory and Policy Implications**

7. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and

the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **RECOMMENDATION/S**

That the committee considers whether any amendments are required to the work programme.

**Marjorie Toward**  
**Service Director, Customers, Governance & Employees**

For any enquiries about this report please contact: Sara Allmond – [sara.allmond@nottsc.gov.uk](mailto:sara.allmond@nottsc.gov.uk)

### **Constitutional Comments (HD)**

8. The Committee has authority to consider the matters set out in this report by virtue of its terms of reference.

### **Financial Comments (NS)**

9. There are no direct financial implications arising from the contents of this report. Any future reports to Committee on operational activities and officer working groups, will contain relevant financial information and comments.

### **Background Papers and Published Documents**

- None

### **Electoral Division(s) and Member(s) Affected**

- All



## **ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE – WORK PROGRAMME 2018-19**

<b>Report Title</b>	<b>Brief Summary of Agenda Item</b>	<b>Lead Officer</b>	<b>Report Author</b>
<b>10 December 2018</b>			
Progress update on social care and health integration partnerships in south Nottinghamshire	Update on progress in the South Notts partnership.	Deputy Director	Louise Hemment
Transforming the Council's Reablement Service	Progress update on plans to transform the reablement service to increase capacity and support more efficient and effective working.	Service Director, Mid-Nottinghamshire	Rebecca Croxson
Performance Update for Adult Social Care and Health	Quarterly update report on the performance of Adult Social Care and Public Health.	Deputy Corporate Director	Matthew Garrard
Progress report on implementation of older people's home based care and support services	Progress report on implementation of the new contracts for these services.	Service Director, Strategic Commissioning, Access and Safeguarding	Cherry Dunk/ Jane Cashmore
Younger Adults' Accommodation Strategy, and development of Community Living Networks	To share progress on this Strategy and provide an update on development of Community Living Networks and seek approval from Committee.	Service Director, North Nottinghamshire and Direct Services	Jenni French/Mark Jennison-Boyle
Outcomes of the consultation on Protection of Property and Pets policy	Feedback on the outcomes of the consultation and recommendations for progression.	Deputy Director	Paul McKay/Ellie Davies/Halima Wilson
Adult Social Care and Health – budget overview and update	Regular update report to committee on progress with savings projects within the department	Transformation Programme Director	Stacey Roe/Kath Sargent

Report Title	Brief Summary of Agenda Item	Lead Officer	Report Author
Prevention, person and community centred approaches in STP		Director of Public Health/ Transformation Programme Director	Jane North/Jonathan Gribbin
Public Health Outcomes Framework: Performance in Nottinghamshire	To provide assurance to Councillors regarding performance relative to Public Health Outcomes Framework	Director of Public Health	David Gilding
Public Health Services Performance and Quality Report for Funded Contracts	Regular performance report on services funded with ring fenced Public Health Grant (quarterly)	Consultant in Public Health	Nathalie Birkett
Proposals for use of Public Health reserves	To seek approval for short term activities to be funded via PH reserves	Director of Public Health	Kay Massingham
<b>7 January 2019</b>			
Direct Payments Support Services		Service Director, Strategic Commissioning, Access and Safeguarding	Laura Chambers
Deprivation of Liberty Safeguards Strategy		Service Director, Mid-Nottinghamshire	Annie Greer
Supported Employment Services	Report in response to a request from the Committee for an overview report on supported employment	Service Director, North Nottinghamshire and Direct Services	Jane McKay / Naomi Russell
National Children and Adult Services Conference 2018	Report back on attendance at conference.	Corporate Director, Adult Social Care and Health	David Pearson
Quality auditing and monitoring activity - care home and community provider contract suspensions	Regular report on contract suspensions and auditing activity, and to include update on progress with implementation of new home based care contracts.	Service Director, Strategic Commissioning, Access and Safeguarding	Cherry Dunk
Commissioning intentions: Single homelessness support service	To seek approval to proposed commissioning intentions for this service	Consultant in Public Health	Dawn Jenkin / Susan March

Report Title	Brief Summary of Agenda Item	Lead Officer	Report Author
<b>4 February 2019</b>			
Nottingham and Notts Mental Health Strategy	Report outlining the work to progress a new MH Strategy.	Service Director, Strategic Commissioning, Access and Safeguarding	
Update on Chlamydia Screening for 15-24 year olds in Nottinghamshire	Update on progress made towards improving the detection rate, how this has been done and information, including the evaluation undertaken, about the online testing service.	Director of Public Health	Gill Oliver/Matthew Osborne/Daniel Flecknoe
<b>4 March 2019</b>			
Performance Update for Adult Social Care and Health	Quarterly update report on the performance of Adult Social Care and Public Health.	Deputy Corporate Director	Celia Morris/ Matthew Garrard
Progress report on savings and efficiencies	Regular update report to committee on progress with savings projects within the department	Transformation Programme Director	Ellie Davies
Recommissioning of Domestic Violence and Abuse Services	To seek approval to proposed commissioning intentions for this service	Consultant in Public Health	Gill Oliver
<b>1 April 2019</b>			
Public Health Services Performance and Quality Report for Funded Contracts	Regular performance report on services funded with ring fenced Public Health Grant (quarterly)	Consultant in Public Health	Nathalie Birkett
Quality auditing and monitoring activity - care home and community provider contract suspensions	Regular report on contract suspensions and auditing activity.	Service Director, Strategic Commissioning, Access and Safeguarding	Cherry Dunk
Progress on self-assessment and support planning	Update on the introduction and implementation of self-assessment and support planning for people who need services.	Transformation Programme Director	Asche Jacobs/Suzanne Kerwin
<b>13 May 2019</b>			
Adult Social Care and Public Health	Update on performance relating to the department's contribution to commitments in the	Transformation Programme Director/Director of Public	Jennie Kennington/Kay Massingham

Report Title	Brief Summary of Agenda Item	Lead Officer	Report Author
Departmental Strategy - Performance report	Council's Strategic Plan	Health	
<b>10 June 2019</b>			
Single Homelessness support service - procurement	To seek approval to tender for the single homelessness support service	Consultant in Public Health	Dawn Jenkin / Susan March
Performance Update for Adult Social Care and Health	Quarterly update report on the performance of Adult Social Care and Public Health.	Deputy Corporate Director	Celia Morris/ Matthew Garrard
Progress report on savings and efficiencies	Regular update report to committee on progress with savings projects within the department	Transformation Programme Director	Ellie Davies
<b>8 July 2019</b>			
Public Health Services Performance and Quality Report for Funded Contracts	Regular performance report on services funded with ring fenced Public Health Grant (quarterly)	Consultant in Public Health	Nathalie Birkett
Quality auditing and monitoring activity - care home and community provider contract suspensions	Regular report on contract suspensions and auditing activity.	Service Director, Strategic Commissioning, Access and Safeguarding	Cherry Dunk