

20 September 2021

Agenda Item: 6

**REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND
HEALTH**
**ADULT SOCIAL CARE PERFORMANCE AND FINANCIAL POSITION UPDATE
FOR QUARTER 1 2021/22**
Purpose of the Report

1. The purpose of the report is to provide:
 - a) an update on the financial position of Adult Social Care at the end of July 2021.
 - b) a summary of performance for Adult Social Care for quarter 1 (1st April – 30th June 2021).

Information
Current Financial Position

2. As at the end of July 2021, the Adult Social Care & Public Health Department is forecasting to underspend by £0.21m in this financial year. This is equivalent to 0.1% of the net annual budget.

| Department | Annual Budget £ 000 | Actual to Period 4 £ 000 | Year-End Forecast £ 000 | Latest Forecast Variance £ 000 |
|---|------------------------|-----------------------------|----------------------------|-----------------------------------|
| <u>ASCH Committee</u> | | | | |
| Strategic Commissioning and Integration | (32,821) | (52,563) | (32,754) | 67 |
| Living Well and Direct Services | 128,906 | 52,556 | 128,969 | 63 |
| Ageing Well and Maximising Independence | 122,389 | 44,802 | 122,014 | (375) |
| Public Health | 1,379 | (8,334) | 1,167 | (212) |
| Forecast prior to use of reserves | 219,853 | 36,461 | 219,395 | (458) |
| Transfer to / (from) reserves (SCI) | (4,337) | (34) | (4,303) | 34 |
| Transfer to / (from) reserves (Living Well) | - | - | - | - |
| Transfer to / (from) reserves (Ageing Well) | - | - | - | - |
| Transfer to / (from) reserves (Public Health) | (1,379) | (35) | (1,167) | 212 |
| Subtotal | (5,716) | (69) | (5,470) | 246 |
| Net Department Total | 214,137 | 36,392 | 213,926 | (211) |

3. This forecast is against the revised net budget of £214.14m. The budget has been adjusted by £5.0m to reflect that spending in some areas is lower than initially predicted due to ongoing fluctuations in the level of service and the funding available from other sources.
4. The forecast includes a net use of reserves of £5.47m. There is an anticipated use of reserves of £1.17m for Public Health, £3.47m for Section 256 and £0.83m Pooled Budget reserves.

Transformation and Service Improvement

5. In the 2021/22 financial year, the department had agreed savings of £4.514m.
6. £0.714m has already been delivered with a further £3.08m expected to be delivered during this financial year.
7. As a result of the ongoing response to the pandemic, the delivery of the remaining £0.724m of these savings is expected to slip into 2022/23.

Core Metrics for Adult Social Care and Health

8. As detailed in the quarter 4 report to Committee, the department has co-produced some core metrics with the workforce to help describe what good looks like and how we are performing against that. The areas covered by the core metrics are:
 - **Quality of Life:** the support and services provided to people enhances their quality of life
 - **Positive Contributions:** people are supported to enjoy meaningful lives and are able to make positive contributions to their families, networks, and communities
 - **Independence:** people are supported to live as independently as possible and to exercise control over their lives and support
 - **Use of Resources:** we work with partners to ensure resources are managed effectively, efficiently, and consistently across the department and the wider system to achieve good outcomes for people.
9. **Appendix A** contains I and We statements which have been produced to help make the core metrics more real to people.

Summary of Quarter 1 2021/22 Performance

10. Performance to quarter 1 for 2021/22 is attached as **Appendices B** and **C** of this report. **Appendix C** introduces some of the newly available core metrics that have been developed as described in **paragraph 8**. These two sets of performance outcomes will be reported together from quarter 2 and added to over time.
11. A report about Adult Social Care Covid Recovery was presented to the Adult Social Care & Public Health Committee in July 2021, setting out the impact that delayed and new demand due to Covid 19 has had. This included significant increases in demand for Safeguarding referrals, Occupational Therapy and Care Act assessments, as well as delays to recovery and service improvement work which was also impacted due to the department's priority being on managing the pandemic. The combination of these factors

has also affected the department's performance indicators. Committee approved the temporary resources set out in the Adult Social Care Covid Recovery report that were required to manage the surge in demand, support the recovery plan and accelerate workstreams within the social care service improvement plan.

- 12. Filling the temporary posts was always going to be challenging in the current climate. This is now in progress using both tried and tested methods, such as the department's own Supply Register and the corporate agency staff provider, as well as more innovative ways to source the capacity required. Staff are gradually being sourced; some are already starting in posts with more scheduled to start after the school holidays end. It is, however, too early for this to have had an impact on the performance indicators. A further report on Adult Social Care Covid Recovery will be presented at Committee on 20 September.
- 13. Alongside managing the delayed and new demand due to Covid 19, work on the department's programme of cultural change has continued during quarter 1. This is described in **paragraphs 14 to 19**.

Strengths Based Approach and Simplifying Processes

- 14. As part of the department's activity to support staff to work in a strengths-based way and to simplify our processes so that the workforce can spend more time with the people they support, teams across the department have volunteered to be sites of innovation. The sites of innovation are thinking about, developing and putting into practice better ways of working. Across the department, four innovation sites are currently running. Some of the early feedback shows that many more people we support are having the issues that they contact us about resolved much earlier following their contact with the department. The feedback the innovation sites received from some people that they had worked with is very positive. There were no negatives apart from one person feeling a little overwhelmed with taking in a lot of information very quickly, which has been addressed.
- 15. These are some of the things that people have told us:

| | | | |
|---|--|---------------------------------------|--|
| The importance of mutual support and listening to each other | Daily huddles mean no more hunting for a Manager! | The language we use matters | Conversations are everyday and extraordinary |
| Champions without being 'Champions' – finding out our interests, skills and knowledge | Get involved in different kinds of work | Power dynamics can shift | I thought I was working in a strengths-based way before I started working this way |
| We've had a genuine say in the development of the Mosaic conversation records | Three Conversation records support proportionate recording | We are learning about our communities | We are working more collaboratively |

More innovation sites are due to start in September.

Impact of Owning and Driving Performance

16. Owning and Driving Performance is a key element of the department's cultural change programme. Owning and Driving Performance culture is about managers and staff taking responsibility for driving their own performance and wellbeing and enabling everyone to model the behaviours they expect to see in others in their own practice.
17. The focus for the first wave of Owning and Driving Performance has been on our managers and supervisors who have taken part in virtual workshops which included input on the key elements of good performance; giving and receiving feedback; effective listening; the GROW (Goal, Reality, Options and Wrap Up) model and coaching 'in time'; understanding people's motivation and the impact on team performance; and managing conflict and 'crunchy conversations'.
18. The feedback received so far from colleagues who have undertaken wave one of the five waves of the programme has been overwhelmingly positive. These are some examples of how people have been using Owning and Driving Performance in practice:

In our team meeting this morning we used the 1-word exercise (*where people use one word to describe how they are feeling*) as an introduction exercise and it was a really nice way to open the meeting. It gave us an insight into how people were feeling and allowed us to address/discuss some of these before officially starting the meeting. It was an easy way to introduce a form of the mood elevator to the meeting and help people reflect on how they are feeling and behaving. The Managers had also worked in a positive feedback session into the agenda at the end so as a team we could collectively talk about what had worked well since the last meeting. Both of these exercises helped created a positive and productive environment for the meeting.

I've also added ODP to the agenda for 1:1 sessions with my own team managers, asking for an example of where they have had a success using one of the tools from ODP at each supervision - this is helping myself and managers to be 'consciously competent' on our own journey.

19. This is the beginning of the journey. Each service area has been undertaking review sessions to reflect on what they have learned so far and how they want to take Owning and Driving Performance forward in their areas of service; the next wave will involve more customised work with teams.

Other Options Considered

20. Due to the nature of the report no other options have been considered.

Reasons for Recommendations

21. This report is provided as part of the Committee's constitutional requirement to consider performance of areas within its terms of reference on a quarterly basis.

Statutory and Policy Implications

22. 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

23. As at the end of July 2021, the Adult Social Care & Public Health Department is forecasting to underspend by £0.46m before reserves and £0.21m after accounting for reserve movements as described in **paragraphs 2 - 4**. This is equivalent to 0.1% of the net annual budget.

RECOMMENDATION

- 1) That Committee considers whether there are any further actions it requires in relation to the finance and performance information for the period 1st April to 30th June 2021.

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Constitutional Comments (ELP 09/09/21)

24. The recommendations fall within the delegation to Adult Social Care and Public Health Committee by virtue of its frame of reference.

Financial Comments (KAS 06/09/21)

25. As at period 4, the department is forecasting an underspend of £0.46m before reserves and £0.21m after accounting for reserve movements as described in **paragraphs 2 - 4**.
26. This forecast is after the budget has been adjusted by £5.0m to reflect that spending in some areas is lower than initially predicted due to ongoing fluctuations in the level of service and the funding available from other sources.

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.

[Adults and Health Recovery from Covid - report to Adult Social Care and Public Health Committee on 26th July 2021](#)

[Update on Adults and Health Recovery from Covid - report to Adult Social Care and Public Health Committee on 20th September 2021](#)

Electoral Divisions and Members Affected

All.

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