

# HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

24 JANUARY 2017

## ATTENDANCE OF THE PORTFOLIO HOLDER FOR ADULT SERVICES

Report presented by	Councillor David Brake, Portfolio Holder Adult Services
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### Summary

This report provides the Health and Adult Social Care Overview and Scrutiny Committee with a synopsis of the areas that the Portfolio Holder for Adult Services is responsible for which fall within the remit of this Committee.

### 1. Background

1.1 The areas within the terms of reference of this Overview and Scrutiny Committee and covered by the Portfolio Holder for Adult Services are:

- Adults' Mental Health
- Better Care Fund
- Community care
- Health
- Independent Safeguarding and Review Service
- Older people
- Partnership Commissioning (Adults)
- Public Health – Lead Member, including Health and Wellbeing Board, commissioning of treatment services for drugs and alcohol
- Services for people with learning and physical disabilities
- Telecare/Telemedicare

## **2. Adults' Mental Health**

- 2.1 The Medway Mental Health Social Work Service supports various projects and events to highlight Mental Health and Wellbeing, with the aim being to share, gain a better understanding of and where possible, reduce the stigma associated with mental health.
- 2.2 Support has been given to a number of events throughout 2016 facilitated by the Adult Mental Health Social Work Service.
- 2.3 In May 2016, in conjunction with the World Mental Health Awareness week, the Medway Mental Health Social work team hosted a picnic in the park; This again was supported, which was a very successful event and well attended day.
- 2.4 There is a positive approach by Councilors, in attending several meetings with the Mental Health Service in order to meet the staff and to gain a better understanding and awareness of the service provided to vulnerable adults that have complex and enduring mental illness who predominantly live in Medway. As well as direct involvement with the Mental Health Outreach team, the feedback was very positive.
- 2.5 In December 2016 the CSOT team, with help from Council colleagues and other venues, collected donations of food items and gifts which were then distributed to the main food bank for Christmas. This was extremely successful and the support was very much appreciated.

## **3. Better Care Fund**

- 3.1 The Better Care Fund (BCF) has during 2016/17, facilitated the creation of two new significant jointly funded services; the Medway Integrated Community Equipment Service (MICES) and Home First.
- 3.2 MICES became operational in July 2016 and brings together the original services under a new cohesive central provider. The purpose of bringing the service together under one provider was to gather a better understanding of the activity the service both supported and generated; the data was not robust under the previous arrangements. The secondary purpose was to make the service responsive enough to react to changes across the health and social care economy, especially at times of high demand, e.g. winter.
- 3.3 The second major initiative has been the introduction of the Intermediate Care and Reablement Service which is known as Home First. The purpose of Home First is to ensure that everyone is assessed for their future health and social care needs outside of a hospital environment. This change is important because national good practice demonstrates that someone copes much more effectively in a home environment rather than the artificial setting of a hospital. This means that a much more accurate assessment of someone's needs can be gathered once they are home. The Home First initiative provides a service to those people who can go directly home from hospital

and have their assessment at home, as well as those who require a little more help in a residential (bedded) setting before eventually returning home.

- 3.4 The planning template for BCF 2017/19 – 2018/19 is expected at the end of January. This year, as last, there will be a joint assurance process between NHS England and ADASS.

#### 4. **Community Care**

- 4.1 The creation of a transformational strategy to change the way Adult Social Care services are delivered in Medway, as well as delivering savings against the current cost of services, was approved at Cabinet on 12 July 2016. The Adult Social Care Strategy “Getting Better Together” has six key themes: Prevention, Participation and Partnerships, Personalisation, Integration, Innovation and Safeguarding. This links directly to the Council’s strategic priorities outlined in the Council Plan.<sup>1</sup>
- 4.2 The Council provides community care services in a range of ways. These can be summarised as the provision of information, assessment of social care needs, planning of care and support, commissioning or directly providing care for individuals to meet their assessed needs, monitoring and reviewing the quality of care provided, and taking appropriate steps to protect individuals and their property.
- 4.3 The aims of Adult Social Care services are:
- To enable people to live as independent a life as possible in their own home or in a home environment in their own community.
  - To provide the right amount of care and support to help achieve the maximum independence possible and in undertaking essential living skills and helping individuals to fulfil their full potential.
  - To give individuals a greater say in how they live their lives and the services they need to help them to do so.
- 4.4 Demands for Adult Social Care and Support Services remain high and based on demographic trends there will be a rising demand in the coming years.
- 4.5 The Intake Team, which acts as a single point of entry for all new social care clients, received 2671 new referrals in 2014/15, of these 2037 were for individuals over 65 and 634 were for adults under 65. Of the 2037 adults over 65,901 of these were offered a package of short rehabilitation and independence support through our re-ablement pathway.

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<sup>1</sup> <http://www.medway.gov.uk/pdf/Medway%20Adult%20Social%20Care%20Strategy%202016.pdf>

## 5. **Health**

- 5.1 Work continues closely with other agencies and officers in the Council to ensure that we support closer integration between health and social care services that are delivered in the right place and right time. Wherever possible, we will want to deliver care and support to people in their own home. This approach is essential to the plans delivered through our Better Care Fund arrangements, where the CCG and the Council are pooling resources to deliver better services at better value.
- 5.2. Medway Health and Wellbeing Board continues to ensure that, at a strategic level, we progress the integration of our services so that we improve the health and well being of our citizens and support them to maintain independence.

## 6. **Independent Safeguarding and Review Service**

- 6.1 The Care Act 2014 places Safeguarding Adults on a statutory footing, defining the responsibilities of Local Authorities and key partners.
- 6.2 The Care Act “Care and Support Statutory Guidance” defines Safeguarding Adults as follows:

“Safeguarding means protecting an adult’s right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult’s wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.”

- 6.3 Section 42 of The Care Act outlines that the Local Authority has a duty to make enquiries, or cause others to do so, if an adult -
- Has needs for care and support (whether or not the Local Authority is meeting any of those needs) and;
  - Is experiencing, or at risk of, abuse or neglect; and
  - As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.
- 6.4 The Care Act also places a duty on local authorities to establish a Safeguarding Adults Board (SAB). Medway Council’s duty is met through a joint SAB with Kent County Council, The Kent and Medway Safeguarding Adults Board (KMSAB). The KMSAB appointed an Independent Chair, Deborah Stuart-Angus, in December 2015.
- 6.4.1 The KMSAB has a three year strategic plan spanning 2015-2018 and is supported by KMSAB Annual Plans.

- 6.5 The KMSAB Annual Report 2015-16 was validated at the KMSAB on 14 September 2016.
- 6.5.1 The number of Safeguarding Adult Concerns recorded in Medway in 2015-16 increased by 53% from 2014-15 and the number of cases progressing to a Safeguarding Enquiry rose by 9.8%. *Please note, the number of concerns relates to the number recorded on our Adult Social Care computer system. While this is likely to be attributed to an increased awareness of Safeguarding Adults, there has been increased compliance with recording on our computer system, which may also account for an increase in the number being recorded.*
- 6.5.2 After closure, the highest proportion of cases in Medway where action had been taken resulted in the risk being removed, followed by the risk being reduced, the risk remaining and then cases where no action was taken. Further analysis of the cases where the risk remains and where no action was taken will be undertaken.
- 6.5.3 The highest percentage of the total number of cases concluded were unsubstantiated (31%), followed by substantiated (24%), not determined/inconclusive (20.7%), partly substantiated (15.1%) and investigation ceased at the request of the individual (9.2%).
- 6.5.4 Further analysis will take place to strive to reduce the number of cases concluded as “not determined/inconclusive”. It is hoped this will be achieved through strengthening investigatory skills and applying evidence informed practice to determine outcomes based on the balance of probability. Furthermore, analysis of cases concluded as “investigation ceased at the request of the individual” has commenced, to ensure the concepts of Making Safeguarding Personal, undue pressure and levels of capacity underpin decision making.
- 6.6 Medway Council’s key achievements detailed in the KMSAB Annual Report are as follows –
- The Adult Social Care computer system, local policies and procedures are Care Act 2014 compliant and have been revised in accordance with the six key principles of Safeguarding Adults.
  - Making Safeguarding Personal is a key concept of Safeguarding Adults. A “Safeguarding and You” booklet, practitioner guidance and an end of Safeguarding questionnaire to capture the adult’s views on the Safeguarding Enquiry have been embedded into practice. The data from the questionnaires will be used to continuously improve local Safeguarding Adults policy, procedures and practice.
  - To ensure the delivery of the KMSAB’s strategic objectives, along with strategic objectives pertinent to Medway; improve multi agency collaborative working, enhance engagement with adults in Medway and alignment with other local strategic forums, a Medway Safeguarding Adults Executive Group (MSAEG) has been established.

- Deprivation of Liberty Safeguard (DoLS) applications have increased by 43% from 2014-15 and the DoLS team is applying the Association of Directors of Adult Social Services risk management guidance to prioritise cases. A task and finish group is reviewing the DoLS team, systems and processes to optimise efficiency.
- The Care Quality Commission (CQC) published Medway Foundation Trust's Inspection Report, outlining the need for the Trust to review its safeguarding model and activity related to The Mental Capacity Act 2005 and DoLS.
- Engagement between the Trust and executive leads in Medway has demonstrated a clear ambition to strengthen safeguarding arrangements - key partners continue to work together to achieve this.
- Information sharing related to Quality in Care and Safeguarding concerns between key partners is being developed, to ensure appropriate preventative and responsive action is taken to optimise the quality of care provided and minimise the risk of safeguarding concerns.

6.7 An Association of Directors of Adult Social Services (ADASS) Safeguarding Adults Peer Review was undertaken in December 2016. The final report is pending but the initial feedback was positive with the following areas identified as strengths and areas for improvement.

#### 6.7.1 Areas for development –

- Strengthen local governance arrangements and cross organisational working.
- Policy and procedures.
- Medway residents to be more involved with Safeguarding Adults development activity.
- Develop stronger links between Business Intelligence and Public Health.
- Improve communication related to changes in the Local Authority.
- Enhance clinical governance of the commissioned of services with a clinical function, e.g. substance misuse.

#### 6.7.2 Strengths –

- Political leadership with a strong and visible champion.
- Positive impact of MSAEG on the local agenda.
- Support provided to the local NHS Trust to meet its statutory Safeguarding Adults duties.
- A comprehensive and ambitious training matrix.
- Strong Business and Intelligence Unit to analyse, interpret and challenge.
- Good links with Public Health.

## 7. Older People

- 7.1 Two teams support people over the age of 65 with long term social care needs, split geographically into the West and East team. These teams are located at Gun Wharf and have a long and strong history of integrated working with colleagues from Medway Community Healthcare.
- 7.2 The teams support approximately 1800 service users, their families and carers, providing long term personalised outcome focused support. The aim is to help people maintain independence at home for as long as possible. This is achieved by a range of practical assistance to both service users and their carers and it is pleasing to note the continued success in this area. Reviews of care and support are carried out on a regular basis with a focus on promoting and maintaining independence.
- 7.3 As well as providing the Social Work function to ensure that people's care and support needs are met, they have responsibility for safeguarding vulnerable people who have experienced or who are at risk of neglect or abuse. As mentioned in section six of this report, the safeguarding remit expanded with the introduction of the Care Act and the teams have fully embraced these changes.
- 7.4 The demographic changes mean that there is increased pressure on services for older people, both in terms of the numbers of referrals and the impact on the budget. The Head of Service works closely with finance colleagues to ensure that the budget is monitored and kept under control.
- 7.5 The major facilitator to ensuring that resources are managed effectively is the work undertaken by the Intake team. This team ensures that all adults new to social care services are considered for prevention and enablement services.
- 7.6 By providing the right amount of care and support they ensure that people achieve the maximum possible independence and are able to achieve their full potential, reducing pressure on social care services and improving quality of life. Importantly, the team have demonstrated that the increased independence is sustainable, with very few people being re-referred to the team.
- 7.7 A review of the three Extra Care Housing schemes in Medway has commenced. This will enhance the services provided in those units, further increasing the options for older people to live independently as long as possible and reducing the need for a move into a care home. However, if people are no longer able to live in their own homes, social workers provide much needed supported to individuals and their families to identify a suitable placement and to facilitate the move.
- 7.8 A key element of adult social care is the provision of integrated discharge planning for individuals who have had a period of hospitalisation. This is provided through the Integrated Discharge Team [IDT] based at Medway Maritime Hospital.

- 7.9 Medway Council has 16 staff employed as part of this multi-disciplinary team. It is responsible for effective discharge planning for patients with complex needs who require significant provision of reablement or support services in order to be able to return to their own home or to another care environment. Whilst there have been challenges maintaining a stable workforce within this team, this has significantly improved in recent months. The team is responsible for working with staff within the hospital to identify people who have “Delayed Transfers of Care” and to ensure active care planning to affect their timely discharge.
- 7.10 Over the last three months, there has been significant work between the hospital and the Council staff to devise more effective ways of identifying patients to target for discharge planning, and arrangements are now in place to ensure better monitoring of progress of these plans for individual patients. This remains a high priority for the older people’s service and we are participating with colleagues from other health and care provider organisations to look for further improvements in these discharge pathways.

## 8. **Partnership Commissioning (Adults)**

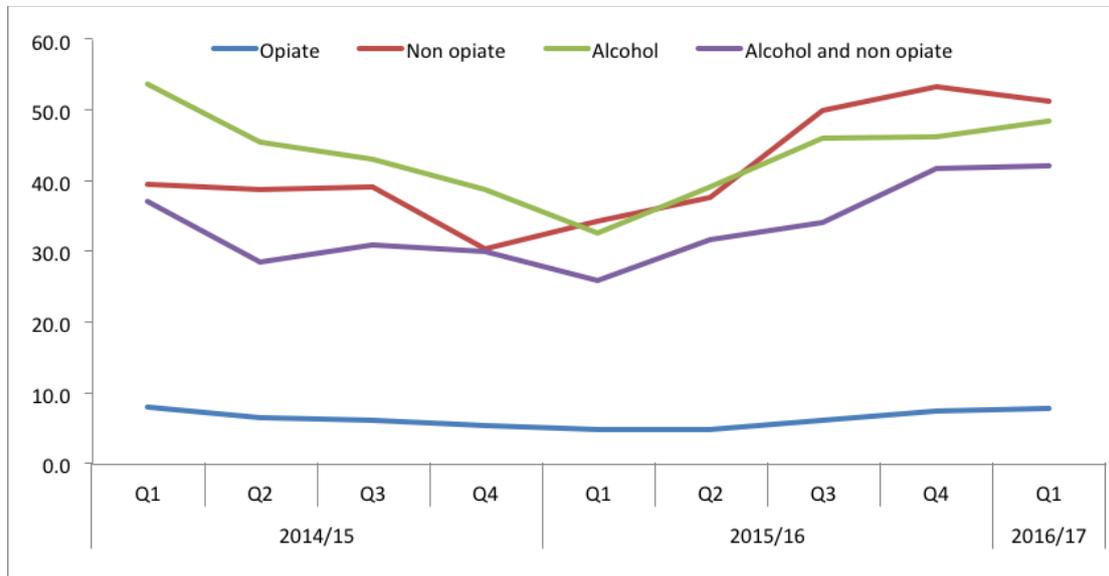
During September 2016 the restructure of Partnership Commissioning was completed. This involved the splitting of services for children and adults’ where up to this point these had been joined under one Head of Service. A new Head of Adults’ Partnership Commissioning and Better Care Fund was recruited from within the existing Heads of Service and took up post from 1 October 2016. A restructured team was then recruited, again from within existing staff, and the restructured team was in place from 1 November.

The priorities of the Adults’ Partnership Commissioning Team are embedded within the Getting Better Together Strategy and as the team remain match-funded by Medway Clinical Commissioning Group, supporting the aspirations of the Medway Model.

## 9. **Public Health – Commissioning of treatment services for drug and alcohol misuse**

- 9.1 Medway Council commissions drug and alcohol misuse treatment services from Turning Point. The contract, currently worth £2.3m annually following a re-tender, is due to expire in July 2018. Drug and alcohol services are not mandatory under the terms of the Public Health Grant and council public health obligations of the 2012 Health and Social Care Act.
- 9.2 Turning Point currently delivers medical and psychosocial treatment and support to adults who are using substances problematically, and to their family members/significant others. The service also delivers harm minimisation interventions and works with community stakeholders to raise awareness of substance misuse.
- 9.3 Currently, there are nearly 1,200 people in treatment for substance misuse in Medway (of whom about half are opiate users) and some 25% of these are parents. The figure below shows the number of people successfully

completing treatment for substance misuse. Following discussions with the provider in the latter part of 2014/15 because of deteriorating performance, an improvement plan was put in place. This has led to a sustained improvement in performance.



9.4 Performance for successful treatment completions for alcohol misusers is 9% higher than the national average (48.6% locally), and opiate users were successfully completing treatment at a rate of 8% in Quarter 1 this year. This performance is close to that of comparator local authorities.

9.5 We continue to see an above-average proportion of adults re-presenting for treatment after a period of non problematic use (26.9% against a national average of 14%). Turning Point is focusing on developing access to resources that support recovery after treatment completion by promoting relationships with a range of community-based projects and initiatives alongside enhancing access to peer mentor resources. We shall be keeping this aspect under review.

9.6 We plan to undertake a detailed needs analysis of drug and alcohol misuse in Medway in 2017 to inform any changes required in our current service provision. In most areas, alcohol misuse is a substantially greater health and crime issue than drug misuse. (This especially applies to opiate use, which, increasingly, is a problem with an older-aged group of long-term users; younger drug users increasingly take cannabis and/or novel psychoactive substances ('club drugs') and do so more recreationally than continuously.)

## 10. Services for people with learning and physical disabilities

10.1 The Disability Service consists of three teams offering assessment and support: Disability 0-25 which works with children and young adults with disability up to the age of 25, Disability 25+ and Occupational Therapy (children & adults). These teams are now well established and are located at Gun Wharf.

- 10.2 The Disability 0-25 team supports approximately 550 children & young people of whom 111 were young adults between the ages of 18 and 24. The Disability 25+ team supports 1400 adults who have a range of community or residential services and the Occupational Therapy service has an active caseload of 958.
- 10.3 The challenge within the Disability Service is the current budget pressure for which the Heads of Service are working closely with commissioning and finance colleagues to implement a recovery plan. There is a significant demand for these services and the cost of providing care and support to enable individuals with complex needs to live independent lives within the community or within residential services is costly.
- 10.4 A positive development this year has been the reestablishment of the Learning Disability Partnership board. This has been well received by existing Service Users and Carers. The board is reviewing its terms of reference and will become a key focus for Service User engagement. Likewise, the Physical Disability Partnership Board remains a key vehicle for engaging with Users, Carers and partner organisations. This board benefits from having Tracy Crouch MP as Chair and she is able to support the work undertaken by this board.

## 11. **Telecare/Technology Enabled Care Services (TECS)**

- 11.1 The Council and Health partners are committed to delivering a local digital roadmap, which is a key part of the Kent and Medway Sustainability Transformation Plan. Technology enhanced care services (TECS) form an important part of that.
- 11.2 From the Council's perspective, this is consistent with the vision in our Council Plan to 'use the best digital innovation to meet people's needs.' The Council's transformation programme recognises the centrality of digital technology in improving outcomes for residents and reducing our costs.
- 11.3 The programme focuses on a number of strands where digital technology can improve services:
- Customer service and making services and information accessible online.
  - Automating paper based processes to improve our speed of response and cut costs.
  - Giving our staff the best tools to do their jobs, for example mobile technology for social workers.
  - Enhanced information sharing between partner agencies and residents to provide the best service.
  - Using the benefits of technology as a core part of service delivery.
  - Making the best use of data to predict residents' needs and develop more preventative services.

- 11.4 An example of this would be that since the instigation of Home First, within which telecare is a component part, of the 1000 plus people discharged under the Home First scheme since the trial began in April 2016, around 200 have been supported with telecare. This would include providing people with lifelines and key safes to support their safe discharge home.
- 11.5 Approximately 92% of those who were provided with telecare through Home First during the initial reablement period decided to keep the service, paying for it privately after the initial “free” period.
- 11.6 There has been a slight increase of around 20% compared to the use of telecare during the same period in 2015, although the data has not been statistically verified. What we already know about Home First is that it has reduced pressure on the Acute (hospital) system, got people home earlier than they would have done under traditional discharge pathways and delivered efficiencies across the health and social care system.

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**Appendices**

None.

**Background documents**

None.