

Leicester
City Council

MEETING OF THE ADULT SOCIAL CARE SCRUTINY COMMISSION

DATE: TUESDAY, 19 MARCH 2019

TIME: 5:30 pm

PLACE: Meeting Room G.01, Ground Floor, City Hall, 115 Charles Street, Leicester, LE1 1FZ

Members of the Committee

Councillor Cleaver (Chair)

Councillor Joshi (Vice-Chair)

Councillors Aldred, Chaplin, Osman, Thalukdar and Unsworth

One unallocated non-group place

Standing Invitee (Non-voting)

Representative of Healthwatch Leicester

Members of the Committee are invited to attend the above meeting to consider the items of business listed overleaf.

For Monitoring Officer

Officer contacts:

Angie Smith (Democratic Support Officer),

Tel: 0116 454 6354, e-mail: angie.smith@leicester.gov.uk

Leicester City Council, Granby Wing, 3 Floor, CityHall, 115 Charles Street, Leicester, LE1 1FZ

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Further information

If you have any queries about any of the above or the business to be discussed, please contact:

Angie Smith, Democratic Support Officer on 0116 454 6354. Alternatively, email angie.smith@leicester.gov.uk, or call in at City Hall.

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PUBLIC SESSION

AGENDA

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1. APOLOGIES FOR ABSENCE

2. DECLARATIONS OF INTEREST

Members are asked to declare any interests they may have in the business to be discussed.

3. MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting of the Adult Social Care Scrutiny Commission held on 22nd January 2019 have been circulated and the Commission is asked to confirm them as a correct record.

4. PETITIONS

The Monitoring Officer to report on any petitions received.

5. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The Monitoring Officer to report on any questions, representations or statements of case.

6. INDEPENDENT LIVING SUPPORT (ILS) SUPPORTED HOUSING SERVICE: UPDATE

The Assistant City Mayor, Adult Social Care and Wellbeing, will provide for information an update on Independent Living Support – Supported Housing Service.

**7. ADULT SOCIAL CARE ANNUAL OPERATING PLAN
2018/19: UPDATE**

The Strategic Director for Social Care and Education will deliver a presentation to provide the Scrutiny Commission with an update on the Adult Social Care Annual Operating Plan 2018/19.

8. OUTCOME OF TEST OF ASSURANCE - BRIEFING [Appendix A](#)

The Strategic Director for Social Care and Education submits a report which summarises the process and outcome of the Local Authority Test of Assurance undertaken by the Local Government Association (LGA) in November 2018. The Scrutiny Commission is recommended to note the outcome of the Test of Assurance and pass any comments to the Strategic Director for Social Care and Education.

**9. END OF LIFE CARE: EXECUTIVE RESPONSE TO
SCRUTINY** [Appendix B](#)

The Strategic Director for Social Care and Education submits a report for noting to the Scrutiny Commission which provides the Executive response to the Adult Social Care Scrutiny Commission's task group report presented at the meeting of the Commission on 16th October 2018.

10. PREVENTION, FALLS, FIRE AND HOME SAFETY

The Strategic Director for Social Care and Education has sent invitations to the Clinical Commissioning Group, Age UK and Fire Service to attend the meeting to come and speak about what they can do, with regards to prevention, falls, fire and home safety.

**11. LEICESTER AGEING TOGETHER: PROGRESS,
OUTCOME AND LEARNING UPDATE** [Appendix C](#)

The Strategic Director for Social Care and Education submits a report for noting to the Commission which provides an update on the outcomes of the Leicester Ageing Together programme.

**12. UPDATE ON LEARNING DISABILITIES STRATEGY
AND EMPLOYMENT OPPORTUNITIES**

The Strategic Director of Social Care and Education will provide a verbal update for information to the Scrutiny Commission on the Learning Disabilities Strategy and Employment Opportunities.

**13. ASC INTEGRATED PERFORMANCE REPORT -
QUARTER 3, 2018/19** [Appendix D](#)

The Strategic Director for Social Care and Education submits a report to the Commission which brings together information on various dimensions of adult

social care (ASC) performance. The Commission is requested to note the areas of positive achievement and areas for improvement.

**14. ADULT AND SOCIAL CARE SCRUTINY COMMISSION [Appendix E](#)
WORK PROGRAMME**

The current work programme for the Commission is attached. The Commission is asked to consider this and make comments and/or amendments as it considers necessary.

15. ANY OTHER URGENT BUSINESS

Outcome of Test of Assurance - Briefing

Audit and Risk Committee	6 March 2019
CYP & Schools Scrutiny Commission	7 March 2019
Adult Social Care Scrutiny Commission	19 March 2019

Useful information

- Ward(s) affected: All
- Report author: Jane Pierce, Snr Project Manager
- Author contact details: 0116 454 6123
- Report version number plus Code No from Report Tracking Database:

1. Purpose

This report summarises the process and outcome of the Local Authority Test of Assurance undertaken by the Local Government Association (LGA) in November 2018.

2. Background

In June 2018, adults social care and children's services combined to form a new Social Care and Education Department, under the operational leadership of the Strategic Director Steven Forbes. Lead Member portfolios for Children's and Young Peoples and Adult Social Care remained unchanged.

The Strategic Director role for the new department holds responsibility for both the statutory Director of Children's Services (DCS) and the statutory Director of Adult Social Services (DASS). The remit and responsibilities for both these statutory posts are set out in guidance by Government and summarised in Appendix A attached.

Where a local authority has combined the DCS functions with other officer responsibilities, government guidance states that in such circumstances:

'local authorities should undertake a local test of assurance so that the focus on outcomes for children and young people will not be weakened or diluted as a result of adding other such responsibilities.'

The Test of Assurance is generally undertaken some months after the combining of the two functions to be assured of the local authority and leadership's capacity to support the combined adults and children's social care responsibilities. The test checks that:

- the combined departmental structure works well,
- statutory duties are met relating to the roles of the Director of Children's Services (DCS) and the Director of Adult's Social Services (DASS),
- leadership and partnerships are operating well,
- effective governance arrangements and delivery mechanisms are in place
- staff have a shared and common purpose

Leicester City Council requested the Local Government Association to undertake this Test of Assurance. Two LGA advisors were appointed to undertake the Test of Assurance. They were Edwina Grant OBE (Senior Children's Improvement Adviser) and Sandie Keene, CBE (Consultant on Adult Services). Both are experienced leaders within children's and adults social care.

Prior to their 2-day visit, two advisors from the LGA reviewed the key documents submitted (see Appendix B). During the 2-day visit, they met with key professionals and practitioners (see Appendix C) in Leicester City.

Their areas of focus were:

- Leadership and Governance
- Performance and Outcomes
- Commissioning and quality
- National priorities and partnerships
- Resource and workforce management
- Culture and Change

3. Outcome

The LGA review team provided a feedback session on the last day where they described a positive outcome. They were clear that the Test of Assurance was met. Both Advisors commented positively on the morale of staff that they had met across the department and of a positive, delivery focused culture. Appendix D contains a copy of the confirmation letter from LGA.

As can be seen from the PowerPoint slide in Appendix E, the LGA review team identified several strengths and some areas for development.

The LGA review team concluded that the integration of Adults and Childrens Services was being approached in a measured and systematic way to give a good foundation for further development. The LGA also observed that the service is rapidly developing, and arrangements would need to be kept under regular review.

The areas for development were highlighted by LGA as:

- Resolve the future shape of Adults and Childrens Safeguarding Boards
- Further develop existing strategies for SEND and Transitions
- Continue to integrate case management systems to improve efficiency
- Build on existing cross council preventative approaches e.g. housing, transport, social value and community engagement
- Develop a deeper understanding of future demand and contingencies for market failure

4. Next steps

Leadership will continue to build on the good foundation created and act across the Council with respect to the areas for development identified by the LGA. It is not intended to create a separate action plan to follow-up on sustaining any of the strengths or areas for development identified through this Test of Assurance process. Any recommendations will be adopted within the existing departmental improvement and action planning processes. These will be predominately:

- The Departmental Annual Operating Plan for 2019/20
- Children's Services Improvement Plan (relating to last Ofsted inspection of 2017)
- Departmental and divisional quality audit systems and reporting formats (through to respective Lead Members and Scrutiny Commissions)
- Service level improvement plans

Consideration will be given by the two Lead Members and the Departmental Leadership Team to undertaking an internal review of the areas undertaken by the Test of Assurance in the quarter after the full year of departmental operating – i.e. around September 2019.

5. Recommendations

To note the outcome of the Test of Assurance and pass any comments to the Strategic Director for Social Care and Education.

Appendix A

Statutory Responsibilities of the DASS and DCS

Local authorities are bound by over 299 statutory duties which cover or have an impact on vulnerable children young people and adults, adults social care, education, safeguarding and children's services.

Statutory guidance on the role of the Director of Adult Social Services (DASS) was issued in 2006. The guidance covers responsibilities in relation to: -

- a. Accountability for assessing local needs and ensuring availability and delivery of a full range of adult social services
- b. Professional leadership, including workforce planning;
- c. Leading the implementation of standards
- d. Managing cultural change
- e. Promoting local access and ownership and driving partnership working;
- f. Delivering an integrated whole systems approach to supporting communities
- g. Promoting social inclusion and wellbeing

Statutory guidance on the role of the Director of Children's Services (DCS) was issued in 2013. The guidance covers responsibilities and over 200 statutory duties in relation to the DCS and Lead member of Children's Services (LMCS).

The guidance covers, for example, responsibilities in relation to:

- a. Work together to provide strong strategic local leadership and development of the education and children's services sector and support a smooth transition from children's to adults' services.
- b. Provide a clear and unambiguous line of local accountability
- c. Discharge and are responsible for the education and children's social services functions of the LA.
- d. Have responsibility for children and young people receiving education or social care services in their area and all children looked after by the local authority or in custody wherever placed.
- e. Ensure that the safety, educational, social and emotional needs of children and young people are central to the local vision.

The DCS has professional and operational responsibility. The LMCS has political responsibility

The following legislation shapes the role of the DCS and the DASS:

DCS:	DASS:
<ul style="list-style-type: none">• Children Act 1989; 2004• Children & Social Work Act 2017• Responsibilities for DCS and LMCS 2013• Extending Personal Adviser support to all care leavers to age 25 (2018)• Statutory Framework for Early Years foundation stage (2018 update)• Schools: Statutory guidance (2017 update)• Working Together to safeguard children 2018• Equality Act 2010	<ul style="list-style-type: none">• The Care Act 2014• The Mental Capacity Act (2005) and Deprivation of Liberty Safeguards• The Mental Health Act 2007• The Human Rights Act 1998• The Domestic Violence, Crime and Victims Act 2004 and subsequent legislation relating to Domestic Violence Protection Notices and Orders, the criminal offence of Coercive and Controlling Behaviour, Modern Slavery and Forced Marriages.

Appendix B

Documents provided to LGA

Documents are coded: S –Social Care & Education/corporate/partnership/ C - Children’s / A – Adults

Item/Area	Document description/Reference&Name/Comment
Local Account	A1- ASC Local Account 2016-17 C1 - Self Evaluation 2018 Leicester City 18April 2018 vf
Market position	A2 - ASC Market Position Statement 2017-18
Health and Wellbeing Strategy	S1 - Leicester City Joint Health and Wellbeing Strategy 2018-23 Link to Leicester Health and wellbeing surveys S2 - JICB-HWBsurvey2018 3.0 (Draft H&WB survey not for wider circulation) C20- Healthy Workplace survey for adults and children’s social care & early help
Integration plans	A5 - BCT Next Steps A19 - BCF_Plan_Refresh_18_19_Narrative – final A20 - Leicester City Better Care Fund 2017-19
M/T Financial plan	S3 LCC Budget 2018-19 - 2020-21
External reviews	A8 - Domiciliary Care Service CQC Report A9 - Integrated Crisis Response Service CQC Report A11 - Integrating Health and Social Services A13 - Leicester EM ADASS Peer Review Feedback - April 2018 A14 - Leicester SAB Peer Review Feedback A16 - LLR TCP Peer Review Feedback A18 - Shared Lives Service CQC Report C2 - Leicester City Challenge KLOES and Record of Challenge Conversation - Feb 2018 C3 - Leicester SC Annual Conversation Letter 220618 C4 - Local Area Review outcome letter C5 - Leicester Written Statement of Action - Final Version C10 - LSCB YOS HIMP Training Inspection Feedback 200918 C11 - SC038961- Childrens home inspection C12 - SC039001- Childrens home inspection C13 - SC039025 - Childrens home inspection C14 - SC039038- Childrens home inspection C15 - SC039056- Childrens home inspection
Risk Register	A6- LCC Risk Register ASCC A7 - LCC Risk Register ASC&S C6 - CSC Early Help - Caroline Tote C7 - RiskRegisterLearning&Inclusion0918
Safeguarding Board Annual reports	A17 - LSAB Annual Report 2017-18 C17 - Draft LSCB Annual Report 2017-2018 v0.8
Housing strategies	Link to Leicester City’s Homelessness Strategy A15 - LLR TCP Accommodation Strategy
Workforce plan	S5 - July 16 Leicester City Council Workforce Strategy A4 - ASC Workforce Action Plan 2016-19 Update C16 - Education and Childrens Services Workforce Strategy 2017 - 2020
Prevention planning/strategies	C9 - Leicester’s-early-help-strategy 2016-19 A21 - Independent Living Strategy A22 - Carers Strategy A23 - Dementia Strategy C19 – Draft Transitions Strategy and Delivery Plan
Other	S4 - Social Care and Education Governance flowchart S6 - Structure charts for SCE, Childrens and Adults services A3 - ASC Monthly Activity and Business Processes Tracking Report A10 - Integrated Performance Report - Q1 2018-19 C8 - 1808 Childrens Services Performance Book v05 C18 - Q1 QA Quarterly report – children’s S7 – Coproduction briefing July 18 S8 – Embedding coproduction in Commissioning

Appendix C**Professionals interviewed by the LGA**

Title	Name
City Mayor	Sir Peter Soulsby
Chief Operating Officer	Andy Keeling
Deputy City Mayor and Lead Member Children, young people and education	Cllr Sarah Russell
Assistant City Mayor and Lead Member for Adult Social Care & Wellbeing	Cllr Vi Dempster
Scrutiny Commission Chair	Cllr Virginia Cleaver
Strategic Director Social Care and Education	Steven Forbes
Director Adults Social Care and Safeguarding	Ruth Lake
Director Adults Social Care and Commissioning	Tracie Rees
Director Children Social Care & Early Help	Caroline Tote
Director of Nursing and Quality (Leicester City CCG)	Chris West
T/Detective Superintendent – Serious Crime Head of Public Protection	Matt Ditcher
Director of Commissioning (CCG)	Mel Thwaites
Director of Finance	Alison Greenhill
Principal Social Workers Principal Occupational Therapist	Kate Wells (Children) Jo Dyke (Adults) Miral Joshi (OT)
Chair of Leicester Safeguarding Children Board	Jenny Myers
Chair of Leicester Safeguarding Adults Board	Robert Lake
Head of Adults	Ranjan Ravat
Head of SEND	Joe Dawson
Head of Looked After Children	David Thrussell
Group of ASYEs and Frontline practitioners	Bhavini Pankhania; Leona Robinson; Poonam Jansari; Shazia Akram; Melissa Potts; Nyasha Motiwa; Claire Wiltshire; Inderjit Kullar; Chris Ball
Group of Managers for Commissioning, market management and provider quality	Tracie Rees; Kate Galoppi; Sue Welford; Mark Pierce (CCG);
Director of Public Health Consultant in Public Health	Ruth Tennant Ivan Browne
Social Work Team Manager Group	Gemma Euden; Phil Hazledine; Zarirun Asan; Gina Needham; Luke Dickinson; James Tingley; Leanda Cank



Sir Peter Soulsby
City Mayor Leicester City Council
By e mail

2 November 2018

Dear Sir Peter

Letter Following Test of Assurance

We are writing following the test of assurance conducted by the Local Government Association on 24 October and 1 November 2018.

The test of assurance, conducted by peers, follows the decision of Leicester City Council to bring together services for adults and children and is designed to test that there is sufficiency in capacity to deliver services.

The assurance test took place over two days and reviewed management arrangements, supporting resources, operational arrangements and took account of the views of some key partners. Staff consultation took place at a number of levels and leading politicians took part in the discussions. 50 written documents were reviewed and we conducted 20 on site meetings.

The test of assurance conclusion is that *on the basis of submitted documentation, interviews and reflections on interviews, the Local Government Association review team considers that the assurance test is met.*

Leicester City Council have approached the integration of Adults and Children's Services with a measured and systematic approach which has given a good foundation for further development. This is a rapidly developing service and its arrangements will need to be kept under regular review.

In the course of our discussions we also identified a number of strengths and areas of development that we shared with you in our final feedback. We hope you found those suggestions useful.

Thank you for the efficient way in which you organised the arrangements for the test of assurance. We wish you well in your future development.

Yours sincerely

Sandie Keene CBE Consultant on Adult Services to the Local Government Association.

Edwina Grant OBE Senior Children's Services Adviser Local Government Association.



Leicester City Childrens and Adults Social Care Test of Assurance

Edwina Grant
Sandie Keene

24 Oct /1 Nov 2018

www.local.gov.uk



Test of Assurance areas of search and process

- Management arrangements
 - Discharge of Adult and Childrens functions
 - The development of efficient and sustainable social care system and market with effective financial performance
 - Trend analysis and future resource planning
 - Safeguarding and Mental Capacity Act decision making
 - Breadth of responsibilities to individuals
 - Involvement and experience of people in receipt of services
 - Safeguarding systems, leadership and practice challenge with early help
 - Adequacy of partnerships
-
- submission of 50 documents
 - 20 on site meetings - partners and staff, excellent support and hospitality

Test of Assurance - conclusion

On the basis of submitted documentation, interviews and reflections on interviews, the Local Government Association review team considers that the assurance test is met.

Leicester City Council have approached the integration of Adults and Childrens Services with a measured and systematic approach which has given a good foundation for further development. This is a rapidly developing service and its arrangements will need to be kept under regular review.

Quotes

- 'Morale is higher than its been for years'
 - 'The guiding principles are a golden thread which unite us to perform with a purpose'
 - 'I feel safe and secure at work'
 - 'This is the happiest period of my working life' (a partner)
 - 'Savings targets are equally horrible for everyone'
 - 'I feel listened to and held to account'
 - 'We can cope but we are at our limits'
-

Leadership and Governance- strengths

- Strong and engaged Political leadership
 - Effective, visible, credible leadership from Steven
 - Clear vision and direction of travel
 - Measured approach to integration and change
 - Clear governance framework
 - Unifying principles widely owned and supported
 - Area of strength in management teams
 - Assurance processes adopted by Ofsted well understood
 - Good use of regional support network
-

Finance and resources- strengths

- Clear approach to financial planning and delivery
 - Adult services delivery of savings and redesign of services
 - Stable resourcing in Childrens services through Ofsted journey
 - Growing understanding of pressures and profiling of future need
 - Staff ownership of the financial position and their role
-

Commissioning- strengths

- Positive joint learning and initiatives between Adults and Childrens services
 - Increasing focus on commissioning for outcomes and review
 - Excellent integrated approaches with Clinical Commissioning Group and Health partners achieving good outcomes
 - Good provider and market awareness
 - Effective reprovision of services and use of Better Care Fund
 - Management grip on current operational issues
-

Practice - strengths

- Good performance and quality audit arrangements
 - Practice standards and governance Boards are evident
 - Good partnership work at various levels
 - Staffing stability, workforce planning and high morale
 - Numerous positive examples of alignments and opportunities of service integration
 - Staff responding to reduced resources in teams in creative ways
 - Growing narrative about 'the way we do things round here'
 - Positive workforce development/apprenticeships
-

Culture- strengths

- Strong commitment to the Council and City
 - Learning and development culture
 - The senior management models integration of teams to the staff
 - Member presence is welcomed and understood
 - Staff are aware of the drive towards stability
 - Increasingly outward looking to partners and the region
 - Understanding of diversity and inclusion
-

Big Picture - Areas for development

- The future shape of Adults and Childrens Safeguarding Boards needs to be resolved
 - Existing strategies for SEND and Transitions need further development
 - Continue to integrate case management systems to improve efficiency
 - Build on existing cross council preventative approaches eg housing, transport, social value and community engagement
 - Develop a deeper understanding of future demand and contingencies for market failure
-

Day to day- future work

- Understanding of the impact of poverty in the community and impact on staff
 - Ensure equity in supervision management and safe working practices
 - Maximising effectiveness with good access to IT equipment and phones
 - Extending opportunities for integration throughout the whole service (front line staff)
-
-

Executive Response to Scrutiny

Once the Scrutiny Review Lead has presented to the Executive, the following will go to the next appropriate scrutiny meeting as part of that response.

End of Life Care: A Review Report of the Adult Social Care Scrutiny Commission, October 2018

Response to Recommendations

15

Scrutiny Recommendation	Executive Decision	Progress/Action	Timescales
The Assistant Mayor for Adult Social Care and the Executive are asked to consider the following recommendations:			
Assurances are sought that social care practitioners dealing with people at end of life are skilled in having conversations about end of life with either the person involved and/or their family from an early stage.	The Executive endorsed the recommendation	<p>Discussions about end of life care and preparation are undertaken with serviced users, where relevant to their life and health circumstances. Where service users do not have mental capacity to determine decision about their end of life care discussions will be had with Court of Protection appointed Deputies for personal welfare if appointed or through formal 'best interest' decision making meeting/s.</p> <p>These conversations are undertaken at differing points including (i) at the point of planning for long term care via both the assessment process in determining eligibility for statutory social care (under the Care Act) and</p>	Audit by 10/19 – reporting back to Scrutiny by 03/20.

Appendix B

Scrutiny Recommendation	Executive Decision	Progress/Action	Timescales
		<p>establishing a care plan for meeting needs and (ii) by care provider organisations (e.g. care homes) in their planning for day to day care. Social care staff will also liaise with NHS staff in discussing and planning for end of life care and decision making. In 2019/20 Social Care and Education will undertake a focused case file / records audit as part of the ongoing QA process to determine that appropriate discussions and plans are being discussed re end of life care. This will be reported back to ASC Scrutiny in the year 2019/20. The Director for Adult Social Care and Commissioning will lead the review.</p>	
<p>Assurances are sought that the different needs, which should include cultural backgrounds and other demographic information for the individual, are considered when talking to patients and families about end of life pathways in the social care setting.</p>	<p>The Executive endorsed the recommendation</p>	<p>Refer to above, this will be included in the case file / records audit.</p>	<p>As above.</p>

Scrutiny Recommendation	Executive Decision	Progress/Action	Timescales
The ICRS team protocols are reviewed to ensure their out of hours procedures are well equipped to deal with end of life.	The Executive endorsed the recommendation	Director for Adult Social Care and Safeguarding and Head of Service for Independent Living (in which ICRS is managed) will undertake review in first quarter of 2019/20	Review in Q1 2019/20, reporting back to ASC Scrutiny by 03/20
The Health and Wellbeing Scrutiny Commission are asked to consider the following recommendations:			
Consider looking at how the how the Derby and Derbyshire Out of Hours End of Life care service operates with the ASC Department and NHS Services. Where possible best practice from this model should be embedded in Leicester, Leicestershire and Rutland end of life protocols.	The Executive endorsed the recommendation	Recommendation will be passported to incoming Chair of Health Scrutiny in 2019/20 for their consideration as part of the Scrutiny Commissions workplan in 2019/20.	By 07/19
Consider looking into end of life care by NHS services and ensure that early conversations are being had with patients and their families.	The Executive endorsed the recommendation	Recommendation will be passported to incoming Chair of Health Scrutiny in 2019/20 for their consideration as part of the Scrutiny Commissions workplan in 2019/20.	By 07/19

Appendix C



Meeting Leicester City Council, Adult Social Care Scrutiny Commission
Date
Agenda item
Title Leicester Ageing Together – Programme Update

Purpose

1. To update on the outcomes of the Leicester Ageing Together programme.

Background

The Programme

2. The Leicester Ageing Together partnership, hosted by Vista, is reaching the end of its four year, £5million National Lottery Community Fund (formerly Big Lottery) funded programme testing ways to reduce social isolation and loneliness amongst people aged 50+ in Leicester.
3. 16 partners have been funded to provide a range of different activities, groups and services, selected by older people themselves (See Appendix 1). These were based primarily in the wards of Belgrave, Thurncourt, Spinney Hills, Wycliffe and Evington as they were identified as having some of the highest percentages of people with recognised risk factors for isolation.
4. Leicester Ageing Together's vision has been:
 - a) for older people to be less isolated;
 - b) to be actively involved in their communities with their views and participation valued more highly;
 - c) for older people to be more engaged in the design and delivery of services that help reduce their isolation;
 - d) to ensure services are better planned, co-ordinated and delivered; and,

e) to provide better evidence to influence the services that help reduce isolation for older people in the future.

Outputs and outcomes to date

5. The programme has supported over 6,000 older people in Leicester, recruited over 1,300 volunteers through a workforce development programme, and has funded over £1.5million of local jobs.
6. Success has been measured against a set of national and local outcome measures. Ecorys are gathering information and learning from across all 14 national programmes. Locally, we have engaged several researchers, including De Montfort and Nottingham Universities, to help us measure the achievements of different aspects of the programme.
7. Recent evaluation of LAT, undertaken over four years by the Institute of Mental Health and Nottingham University has concluded that:

“the LAT programme has been effective in reaching out to engage with the most vulnerable within its communities. Beneficiaries entered the programme with higher levels of social isolation and loneliness and lower levels of well-being than those in the wider Ageing Better programme...

“The beneficiaries of the LAT programme have shown significant reductions in the levels of loneliness and social isolation, as well as increases in well-being, social participation and social contact.”

8. We are continuing to learn from our work and will continue to share this learning with our wider partners in both statutory, voluntary and the private sector.

Legacy and Sustainability

9. We are now exploring what has changed or is changing as a result of Leicester Ageing Together as well as looking at the elements of the programme that we have found work and that we or others may want to continue. Some of these are captured in the leaflet attached as Appendix 2.
10. Our overall objective now is to:

- build legacy and sustain the involvement of older people in the design and delivery of solutions that address social isolation and loneliness in Leicester, and,
- identify, stimulate and promote sustainable models that can create a more socially engaged, active older population within our city

We have identified four key themes within this work:

- i. *To develop reciprocal support and Community Businesses* – we have developed a more sustainable model for supporting communities to support themselves using Asset Based Community Development (ABCD) and a volunteering scheme which incorporates elements of timebanking: Give & Take.

We are delighted to have secured a Social Value contract with the City Council to support our community development work.

- ii. *To support the development of Community Learning opportunities for older people to increase community contribution* – we are working with a small partnership of organisations interested in life long learning and are looking at how we can develop a programme of learning that supports older people to contribute their time and skill as volunteers and help sustain vibrant communities.
- iii. *To think Mental Wellbeing* – we are keen to use a tool we have developed during the programme to support people with the transitions that take place in later life, to prevent loss of confidence and the loneliness that can result, to support people to look after themselves.
- iv. *To think Age friendly* – during the life of the programme, people have told us about some of the issues they face in fully engaging within their community. We are keen to support the city to become more aware of these and to work together to find solutions.

Ruth Rigby
Programme Lead

Appendix 1: The status of funded projects as at March 2019

Partner Organisation	Project	Details
Action on Hearing Loss	<i>Information & Support</i>	The Deaf Friends Group continues to meet, the hearing aid clinic is now run by volunteers
Age UK	<i>Anything Goes</i>	These social groups are all continuing and are now run by group members
	<i>Befriending & Mentoring</i>	This project is continuing with additional support from the National Lottery Community Fund
	<i>Loneliness Prescriptions</i>	This project is continuing with additional support from the National Lottery Community Fund
	<i>Men in Sheds</i>	This skills-sharing project has now ended
Alzheimer's Society	<i>Singing for the Brain</i>	This project continues with a small charge levied for attendance
	<i>CrISP</i>	This advice project has now ended
Beauty & Utility Arts	<i>Crafting relationships</i>	This crafts project has now ended
CIO	<i>Activities for older South Asians</i>	Day Centre, Lunch clubs, Welfare advice and social activities for South Asians
Focus	<i>Roots & Shoots</i>	This Intergenerational gardening project has now ended although the allotment and other projects are still in place, run by volunteers
Highfields Community Association	<i>Activities for BME Communities</i>	Regular social sessions - arts, information, learning activities
Learning for the 4th Age	<i>Social Prescriptions</i>	This arts project has now ended
Living Streets	<i>Walking Group & Community Street Audit</i>	This walking group has now finished and audits have been completed
PYCA	<i>Social Engagements Programme</i>	Training & Learning and Relaxation & Exercise sessions. Open days
Papworth Trust	<i>Neighbourhood Guardians</i>	This project continues with support from Give & Take volunteers
	<i>Neighbourhood Task Squad</i>	This project has now ended, elements are now undertaken by DMU Local
RVS	<i>Home from Hospital</i>	This service is now funded through the CCG

WEA	<i>Older & Wiser</i>	These courses remain available with charges payable by those that can afford it The Thurncourt pop in café is now a community-led social enterprise
WISCP	<i>Advocacy</i>	For African Caribbean elders
	<i>Befriending</i>	for African Caribbean elders - regular visits to home to reduce isolation
	<i>Older & Bolder</i>	for African Caribbean elders - training & educational opportunities
	<i>Carers Club Mango Tree Men's Group</i>	For specific groups of African Caribbean elders
Vista	<i>Community Connectors</i>	Asset based work supporting local people to develop their own community-led services
	<i>Leicester Ageing Together Core Team</i>	Responsible for programme management
CiTAL	<i>Benefits advice</i>	This project has now ended. Advice is now being provided in some settings by DMU law students
Mosaic	<i>IT training</i>	This project has now ended although IT training is available through WEA

Appendix 2

24

Leicester Ageing Together (LAT)

LAT is a partnership of 17 national charities and small community organisations working collaboratively in 5 ethnically diverse and deprived Leicester wards: Evington, Spinney Hills, Wycliffe, Thurncourt and Belgrave.

We are one of 14 partnerships funded across England by the National Lottery Community Fund, working to ensure that older people's active involvement in their communities is valued, and that they are involved in the co-production of services that reduce loneliness and social isolation.

Find out more

www.leicesterageingtogether.org.uk

📞 0116 249 8850

✉ hello@leicesterageingtogether.org.uk

🐦 @LeicesterAT

📘 Leicester Ageing Together

March 2019



Leicester Ageing
Together



Ageing Better

Leicester Ageing Together (LAT) is developing creative ways for people aged over 50 to be actively involved in their local communities, helping to combat social isolation and loneliness.

Since October 2015 we have:



reached 6,004 people



activated 1,438 volunteers



funded >£1.5m local jobs

What Works

Our data shows that through involvement with LAT, older people's loneliness and social isolation has reduced and their wellbeing has improved. We have worked with more frail, isolated and ethnically diverse people than across the national Ageing Better Programme.

Source: Thomson et al, *Final LAT Evaluation Report*, University of Nottingham, March 2019

We continue to share LAT learning locally and nationally through events and online, to build the evidence base and shape policy and services.



"...And then you start to get your confidence back because you are mixing with people. Things that are good inside your head, that you've used in the past, start to wake up..."

LAT Participant 'C'

What next?

Older people will lead LAT activities:



Transport Toolkit and Portal



Community Connectors and Give & Take volunteer buddies



Community Explorers investigating 'what matters' in age-friendly communities



Community Learning opportunities



LAT Older People's Mental Wellbeing Jigsaw

Appendix D

Adult Social Care

Scrutiny Commission

ASC Integrated Performance Report

Quarter 3 - 2018/19

Date: 19th March 2019

Lead Director: Steven Forbes

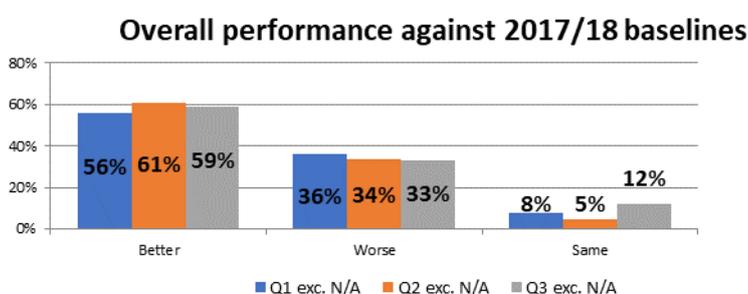


Useful information

- Ward(s) affected: All
- Report author: Adam Archer
- Author contact details: 454 4133
- Report version: 1

1. Summary

- 1.1 This report brings together information on various dimensions of adult social care (ASC) performance for the second quarter of 2018/19. The intention of this approach to reporting is to enable our performance to be seen ‘in the round’, providing a holistic view of our business. Our model draws on best practice, for example, incorporating features of a Balanced Scorecard.
- 1.2 The report contains information on our *inputs* (e.g. Finance and Workforce), the efficiency and effectiveness of our *business processes*, the volume and quality of our *outputs*, and not least, the *outcomes* we deliver for our service users and the wider community of Leicester.
- 1.3 The overall position at this stage of the year remains broadly positive, although the rate of improvement is less than reported previously. This is not unexpected given the impressive rate of improvement over recent years at the same time as we have seen resources reduced. For those measures where data is available (no workforce data – see section 2.12), 59.2% are showing improvement from the baseline position (mostly 2017/18 outturn); 33.5% of measures are not performing as well as the baseline position; and 11.6% of measures are unchanged. This overall rate of improvement is better than that reported at the end of Q1 but is slightly poorer than Q2 and both the same period (Q3) and year-end in 2017/18. It is not possible to make a judgement on 11.6% of measures as they are either new measures without a baseline position, measures for which accurate data is not yet available, or they provide management information rather than a reflection of departmental performance. Assuming there has not been a significant deterioration in workforce performance our Q3 position is likely to be understated.



2. Recommendation

- 2.1 The Scrutiny Commission is requested to note the areas of positive achievement and areas for improvement as highlighted in this report.

3. Report

3.1 Delivering ASC Strategic Priorities for 2018/19

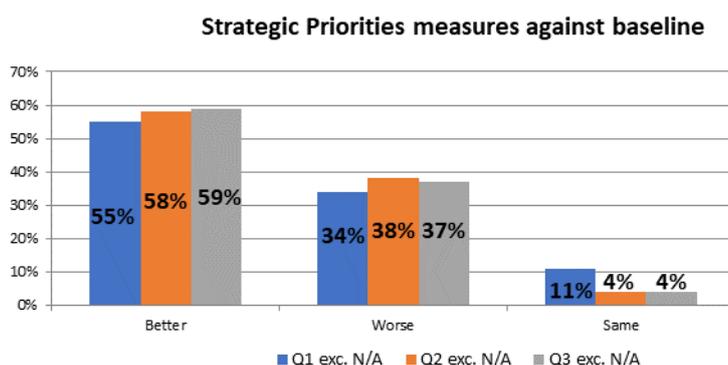
3.1.1 Our strategic Priorities for 2018/19 are unchanged from 2017/18, they are:

SP1.	We will work with partners to protect adults who need care and support from harm and abuse.
SP2.	We will embed a strength-based, preventative model of support, to promote wellbeing, self-care and independence.
SP3.	We will improve the opportunities for those of working age to live independently in a home of their own and continue to reduce our reliance on the use of residential care.
SP4.	We will improve our offer to older people, supporting more of them to remain at home and to continue to reduce our reliance on the use of residential care.
SP5.	We will continue the work with children’s social care, education (SEN) and health partners to improve our support for young people and their families in transition into adulthood.
SP6.	We will improve the customer experience by increasing our understanding of the impact and benefit of what we do. We will use this knowledge to innovate and improve the way we work and commission services.

3.1.2 As in previous years, we have set out what we need to do to deliver on these priorities in our Annual Operating Plan and made some revisions to the KPIs designed to measure whether we have been effective in doing so.

3.1.3 Summary:

Overall performance against those KPIs aligned to the department’s strategic priorities suggest that progress on our priorities continues to be made, and that having a small number of clear and visible priorities has been effective. Overall, 27 of our measures have shown improvement from our 2017/18 baseline, with 17 showing deterioration. This is a slight improvement on position to that reported at the end of Q2, but poorer than the 2017/18 out-turn. Performance is strong across priorities four and five, mixed for priorities one, two and six, and weak for priority three.



3.1.4 Achievements:

User satisfaction levels derived from the national ASC user survey, our local survey (at assessment) and questions asked in the supported self-assessment (at re-assessment) are positive. Critically here, over 73% of service users said that their quality of life had improved very much or completely as a consequence of our support and services. 6 of the 7 ASCOF measures derived from the national ASC user survey showed improvement from the 2016/17 baseline. Performance against the new measures reflecting our priority around Transitions are increasingly positive.

3.1.5 Concerns:

Performance against the new measures to reflect the new safeguarding priority has dipped since

Q2. Performance in priority three (promoting independence in the working age population) has stabilized this quarter, but only one measure is showing an improvement from our baseline.

3.2 Keeping People Safe

- 3.2.1 The Care Act 2014 sets out our statutory duties and responsibilities for safeguarding, including the requirement to undertake Enquiries under section 42 of the Act in order to safeguard people.
- 3.2.2 During Q3 2018/19, 111 individuals were involved in a safeguarding enquiry started in that period. Of these, 45 were aged 18 to 64, with 66 aged 65 years or over. 72 of those involved were female and 39 were male. 75 were 'White', 14 'Asian' and 6 were 'Black.'
- 3.2.3 55 individuals who were involved in an enquiry have a recorded Primary Support Reason. 50.9% of these individuals (28 people out of 55) have 'physical support' as their Primary Support Reason, with 'learning disabilities' and 'mental health support' the next most common.
- 3.2.4 Using figures for all completed enquiries in Quarter 3, the most commonly recorded category of abuse for concluded enquiries was "neglect" (70), followed by "physical abuse" (41), and then "emotional abuse" (27). The most common location of risk was in care homes, with a total of 58, of these, 49 were residential homes and 9 in nursing homes. The next most common abuse location recorded was the person's own home, 42 instances.
- 3.2.5 Quarter 3 performance:

Measure	Q3 2018/19
Percentage of cases where action to make safe took place within 24 hours following the decision that the threshold has been met	77.3% of enquiries begun within 24 hours of threshold decision being made
Number of alerts progressing to a Safeguarding enquiry	Alerts received in the quarter = 564
Completion of safeguarding enquiries within 28 days target	Threshold met in 196 cases, of which 113 progressed to an enquiry
Percentage of people who had their safeguarding outcomes partially or fully met.	46.5% of safeguarding enquiries were completed within 28 days.

3.3 Managing our Resources: Budget

- 3.3.1 The department is forecasting to spend £104m as per the budget.
- 3.3.2 Year to date there has been a net increase of 45 long term service users, 0.9% of the 5,068 users at the beginning of the year. The growth was predominantly in the over 65, elderly cohort, with no net increase in either adult mental health or learning disability related service users
- 3.3.3 The forecast rate of increase in need of existing service users is 5.5%, adding £5.6m to in year costs. This is comparable with 2017/18 but significantly is the first year that the rate of change of this increase has slowed. The equivalent rates in the previous 3 years were 2.5%, 3.4% and 5.3%. Whilst far too early to draw any firm conclusions this slow- down would be in line with our expectations that there is a limit to the density of care packages that existing service users

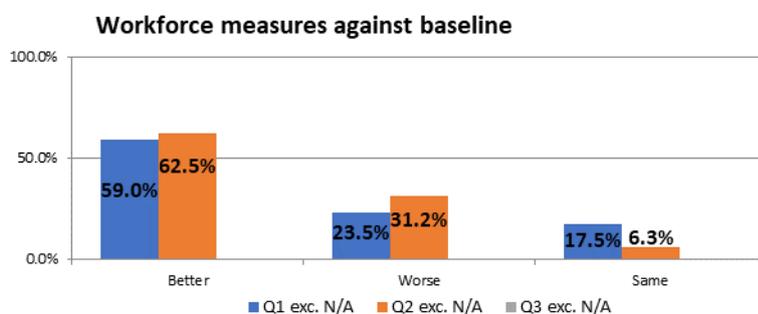
require.

- 3.3.4 We are still working with the CCG to review the re-assessments of joint funded packages of care that they have undertaken this year. The full year impact will be felt in 2019/20 and is still estimated at up to £2m.
- 3.3.5 Whilst it is difficult to provide a definitive outturn position, the impact of a slowdown in client cost growth and early achievement of savings implies that we are to make savings on the current year's budget.

3.4 Managing Our Resources: Our Workforce

3.4.1 Summary:

Workforce data for Q3 was not available by the deadline for submission of this report due to a combination of staffing and systems issues.



3.5 National Comparators - ASCOF

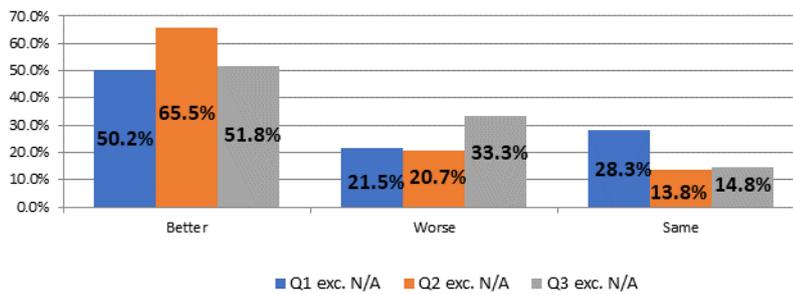
- 3.5.1 The national performance framework for ASC focusses on user and carer outcomes (sometimes using proxy measures). Submission of data for the ASCOF is mandatory and allows for both benchmarking and local trend analysis. ASCOF complements the national NHS and Public Health outcome frameworks. The following analysis includes ASCOF measures derived from the user survey as full results were not previously available. Details of our ASCOF performance including 2017/18 national benchmarking can be seen in Appendix 2 of this report.

3.5.2 Summary:

In this report we are able to include provisional ASCOF scores from the 2018/19 statutory carers survey (Survey of Carers in England). These scores are calculated on the basis of our data submission to NHS digital and are subject to change. It should also be noted that we had a very poor response rate to this year's survey and as such there is a high margin of error. This response rate cannot be explained and as yet we don't know if this reflects a national trend. Notwithstanding the issue of reliability, the data suggests a downturn from the very positive results from the 2016/17 survey. Four of the five ASCOF scores are likely to be lower than 2016/17. Of these two are lower than the scores from 2014/15 and two higher.

This year, we continue to have some data quality issues outside of our control: the proportion of older people provided with reablement following discharge from hospital (2Bii) is still calculated using 2015 live discharge data as current data cannot be shared with local authorities; and the measures based on the new Mental Health dataset (1F and 1H) continue to raise concerns over the quality of data reported by our secondary mental health providers.

ASCOF measures against baseline



3.5.2 Achievements:

From the data for Q3 of 2018/19 there are some areas of strong performance. Performance against measures relating to self-directed support (1Cia, 1Cib, 1Ciia and 1Ciib) remains strong. The outcomes of short-term services, reablement and enablement (2D) continue to improve, have exceeded the 2017/18 benchmark and are now over 10 percentage points higher than at the end of 2016/17. Linked to this, the proportion of older people at home 91 days after hospital discharge (2Bi) has improved for the third consecutive quarter. The three measures for Delayed Transfers of Care (2Ci, 2Cii and 2Ciii) are all showing improvement.

3.5.3 Concerns:

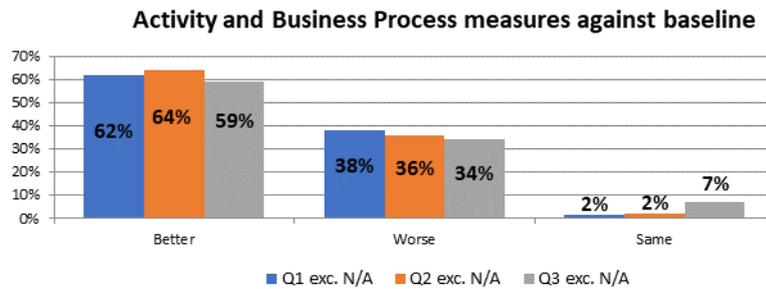
Notwithstanding the data issues referred to in the summary, there are signs that performance against a few of our key measures are bucking the overall improvement trend. Despite rigorous controls being in place, permanent admissions to residential care for 18-64 year olds (2Ai) are markedly higher than in Q3 last year. Similarly, performance against both learning disability measures (1E and 1G) continues to fail to match historic performance.

3.6 Activity and Business Processes

3.6.1 We have identified almost 60 indicators to help us understand the level of activity undertaken in the department and the effectiveness and efficiency of the business processes we use to manage that activity. The use of these indicators will also support the overall approach to managing workflow and workloads within services and teams.

3.6.2 Summary:

Overall performance remains positive, with 59% of measures where a judgement can be made showing improvement from our 2017/18 baseline. However, this rate of improvement is lower than in Quarters 1 and 2 and for the same period last year. Having said that, the number of measures where performance is below the baseline has decreased quarter on quarter. Where appropriate, targets for 2018/19 have been included for activity and business process measures.



3.6.3 Achievements:

We can continue to be confident that we are managing demand through the provision of information, advice and guidance (including signposting to universal services) and one-off or short-term interventions. While the total number of contacts at the ‘front door’ continues to increase, fewer new contacts are progressing to a new case and fewer assessments are being undertaken with a reduction in those with assessed as having eligible needs. Fewer new contacts are moving into long-term support with more people being ‘deflected’ or provided with low level or short-term support. We have also made progress in addressing areas of previous poor performance such as the timely completion of reviews.

3.6.4 Concerns:

While not impacting on the improved demand management described above, it is worth noting that the number of “new clients” as defined for SALT purposes was nearly 1,753 higher at the end of Q3 than at the same period last year (11,709 compared to 9,956).

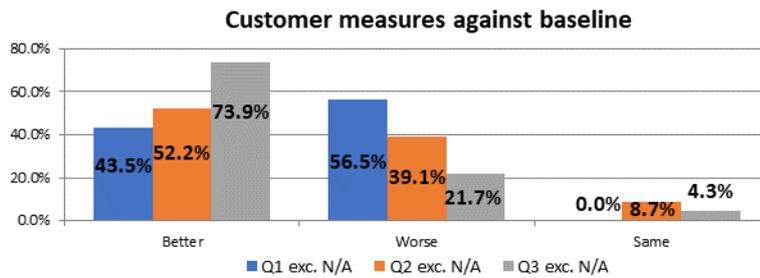
The number of service users in residential and nursing care has remained stable over recent years with no evidence to suggest our continued efforts to reduce admissions or move service users into alternative provision are proving impacting on this pressure. The number of cases allocated to a worker for more than 100 and 250 days respectively has decreased from Q2, but remains higher than at Q1. Although the number of service users in receipt of domiciliary care has decreased, the number of hours of care commissioned has increased.

3.7 **Customer Service**

3.7.1 We have identified 25 indicators to help us understand our customers’ experience of dealing with us and the extent to which they are satisfied with our support and services. The following analysis includes ASCOF measures derived from the user survey based on the published data from NHS digital in October 2018.

3.7.2 Summary:

Performance on 17 of our customer measures is showing improvement from our 2017/18 baseline, with 5 showing a decline. This is a marked improvement from Q1, when for the first time in over two years the number of measures showing a decline in performance outnumbered those showing improvement in any of our baskets of indicators.



3.7.3 Achievements:

The final results from the 2017/18 national ASC user survey are positive: the overall quality of life score climbed from 18.5 to 18.7, our highest score since the introduction of the survey; the proportion of people who use services who have control over their daily life increased from 76.2% to 78.1%, again our highest ever score; and, the proportion of people who use services who find it easy to find information about services climbed from 67.4% to 70.5%.

The local survey conducted following all reviews enables us to measure whether services have met the needs identified in the initial assessment and whether the service user’s quality of life has improved as a result of their care package. Results in the third quarter of 2018/19 continue to be higher than at the end of 2016/17 and 2017/18.

Results for all responses to our survey of people having received an assessment have shown significant improvement from Q1. The results from Q1 were themselves a modest improvement from Q4 in 2017/18 when results unexpectedly plummeted. All but one of these measures have now exceeded our 2017/18 full-year baseline.

3.7.4 Concerns:

We have seen an increase in the number of complaints received (not necessarily upheld) for two of the three categories used in this report.

4. **Financial, legal and other implications**

4.1 Financial implications

The financial implications of this report are covered specifically in section 3.3 of the report.

Martin Judson, Head of Finance, Ext 37 4101

4.2 Legal implications

There are no direct legal implications arising from the contents of this report at this stage.

Pretty Patel, Head of Law, Social Care & Safeguarding, Tel 0116 454 1457.

4.3 Climate Change and Carbon Reduction implications

There are no direct climate change implications associated with this report.

Aidan Davis, Sustainability Officer, Ext: 37 2284

4.4 Equalities Implications

From an equalities perspective, the six strategic priorities are in keeping with our Public Sector Equality Duty, the second aim of which is to promote equality of opportunity, and the information related to the outcomes delivered for service users and the wider community. The outcomes demonstrate that ASC does enhance individual quality of life that addresses health and socio-economic inequalities, experienced by many adults across the city. In terms of the PSED's first aim, elimination of discrimination, it would be useful for outcomes to be considered by protected characteristics as well, given the diversity of the city and how this translates into equalities (as set out in the adults JSNA).

Sukhi Biring, Equalities Officer (Ext. 374175)

4.5 Other Implications: None

5. **Background information and other papers:** None

6. **Summary of appendices:** Appendix 1: 2018/19 Quarter Two: Key Data
Appendix 2: 2018/19 Quarter Two: ASCOF

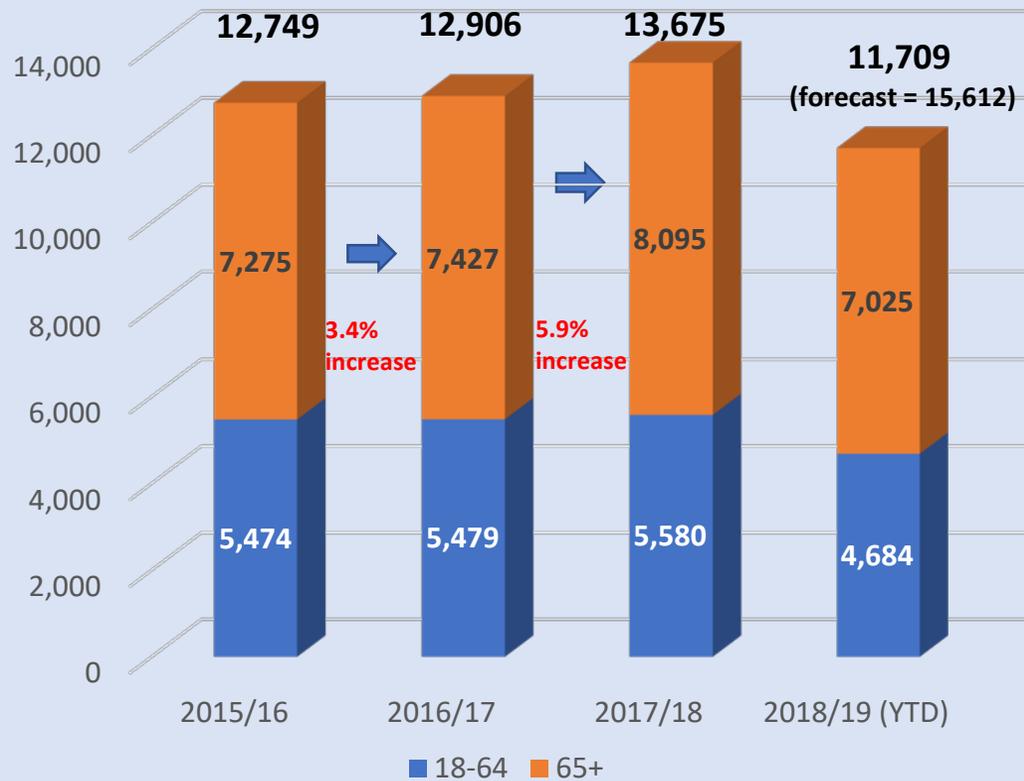
Adult Social Care

Key Data

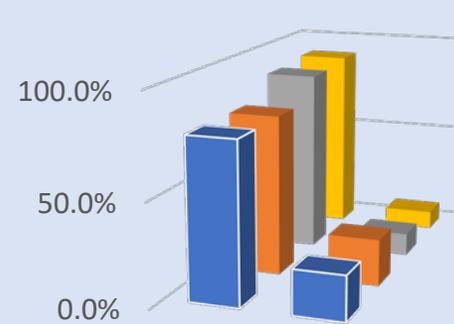
2018/19 – Quarter 3

Understanding demand

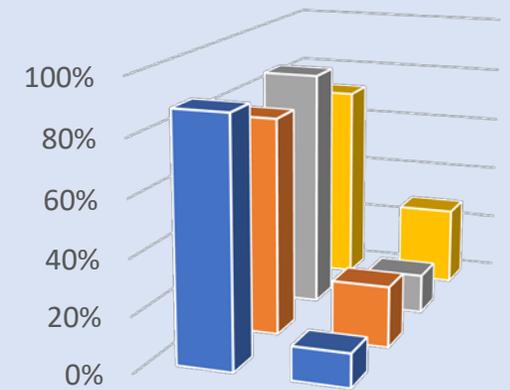
Requests for support



... for those leading to formal assessments



	Completed within 28 days	Not completed within 28 days
■ 2015/16	78.2%	21.8%
■ 2016/17	78.3%	22.7%
■ 2017/18	89.1%	10.9%
■ 2018/19 - Q3	91.1%	8.9%



	Eligible for support	Not eligible for support
■ 2015/16	88%	12%
■ 2016/17	78%	22%
■ 2017/18	86%	14%
■ 2018/19 - Q3	72%	28%

Meeting needs appropriately

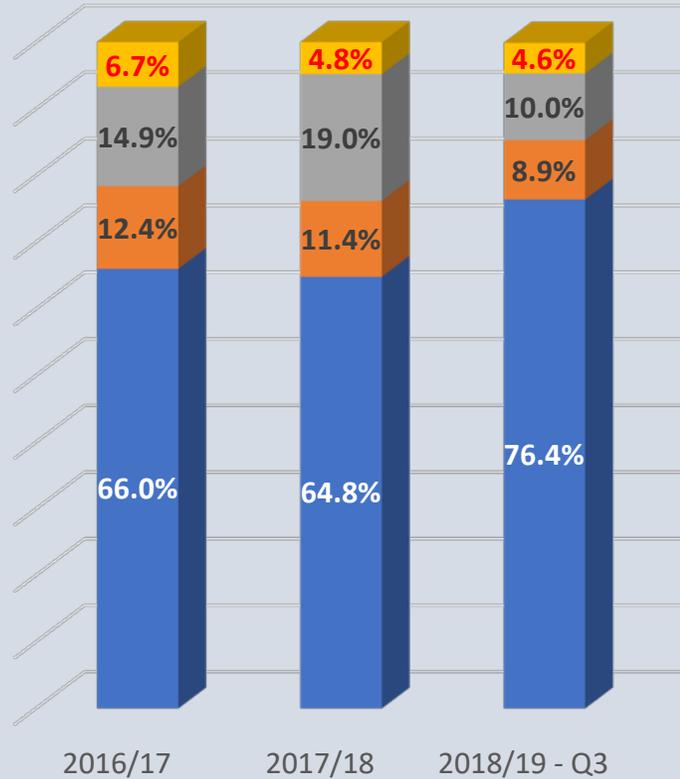
During 2017/18 and 2018/19 (YTD), following a request for support clients received:

39



Compared to 2016/17

LTS - 31% decrease



- Long-term support
- Other short-term support
- Short-term services to maximise independence
- No services / information, Advice and Guidance

Following short-term support to maximise independence for new clients ...

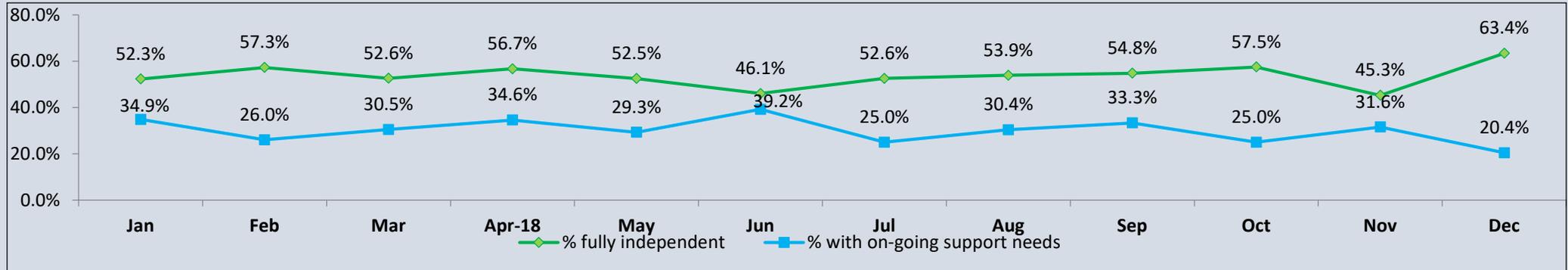
LTS - 14.8% decrease



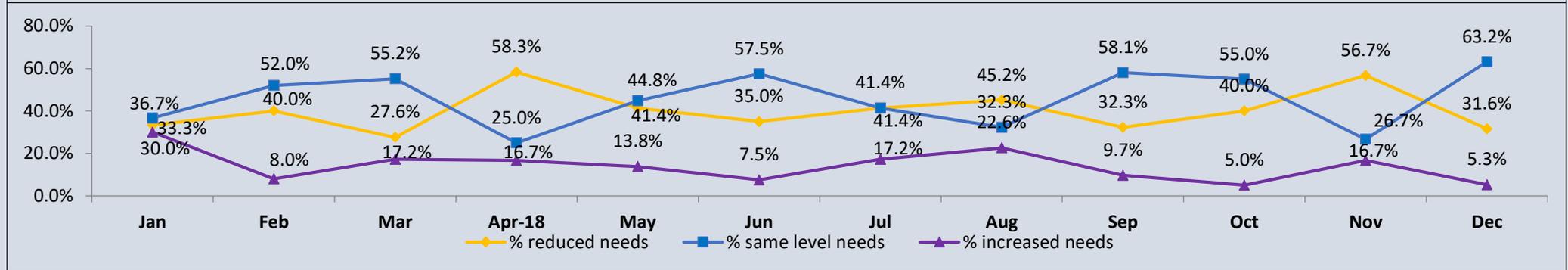
- Long-term support
- Fully independent or one-off support

Preventative services

Outcomes of preventative services (January '18 – December '18)

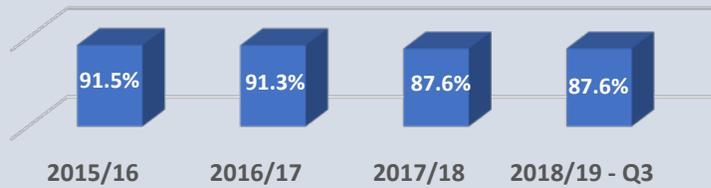


Outcomes for those with on-going support needs (January '18 – December '18)



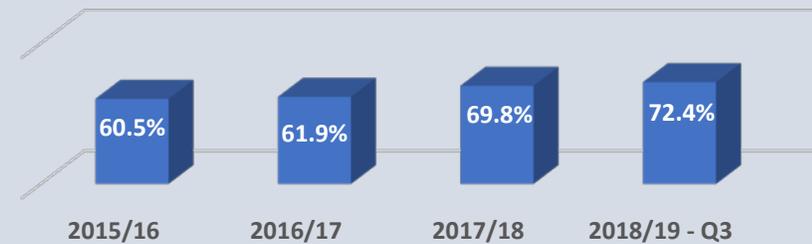
Adult Social Care Outcomes Framework measures:

2B(i) Outcomes for older people receiving reablement following a hospital discharge



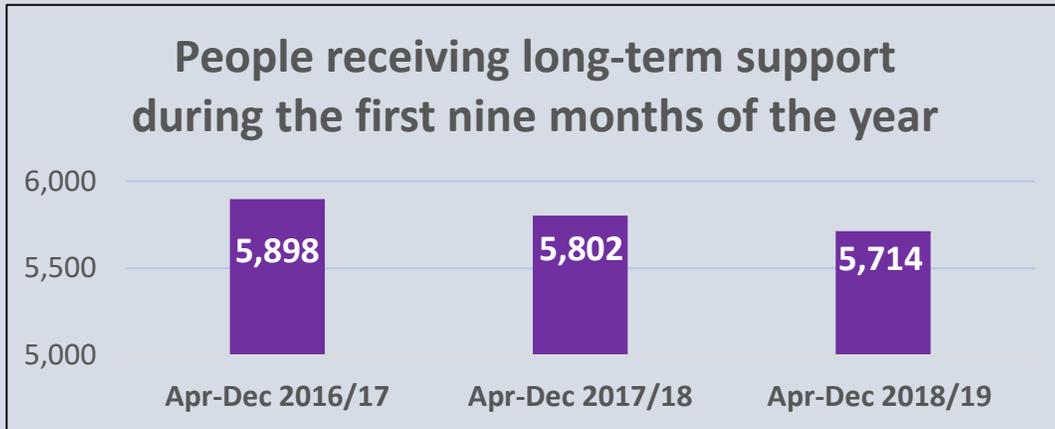
■ Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services.

2D: The outcomes of short-term services



■ Percentage of those that received a short term service during the year where the sequel was either no ongoing support or support of a lower level

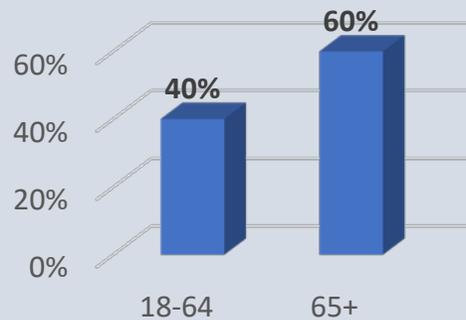
Long-term support



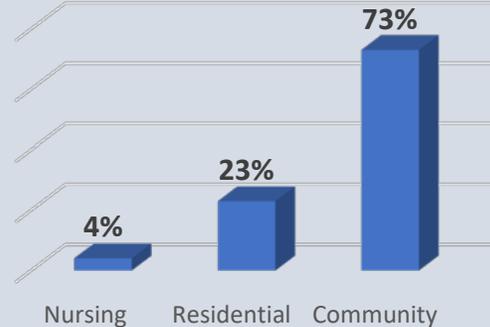
41

For Q3 2018/19:

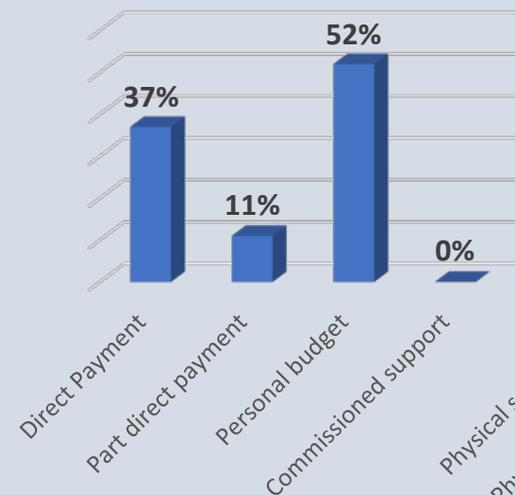
Age profile



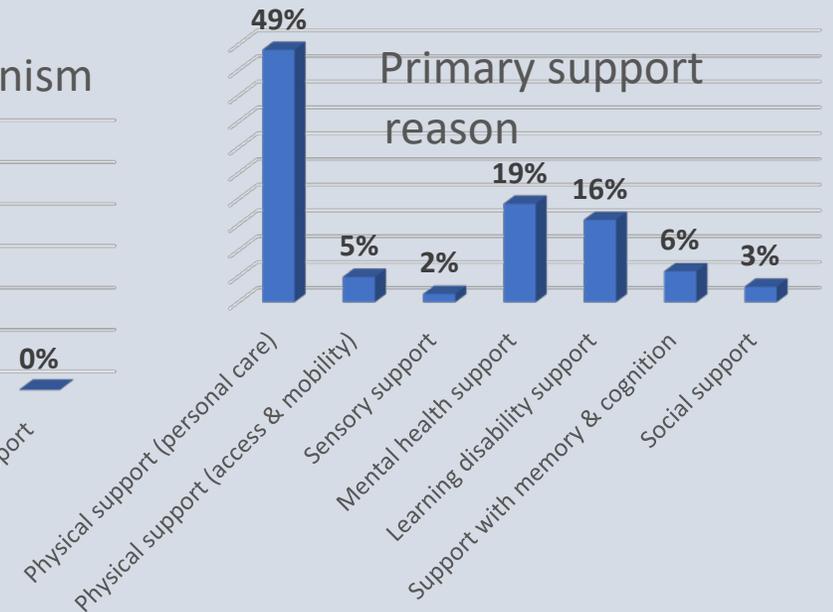
Support setting



Delivery mechanism



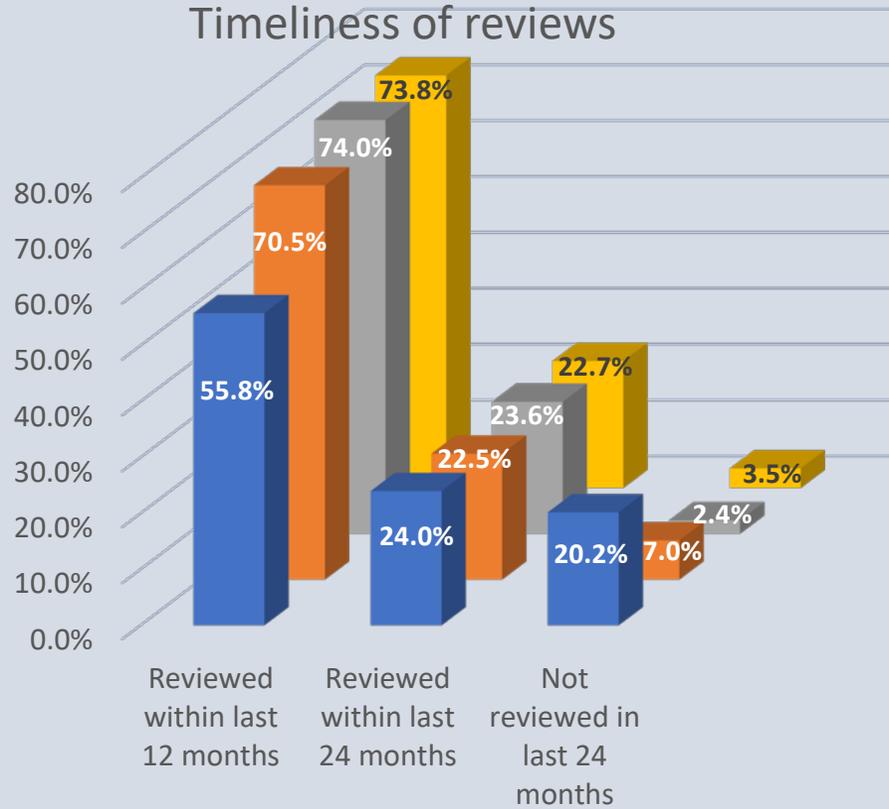
Primary support reason



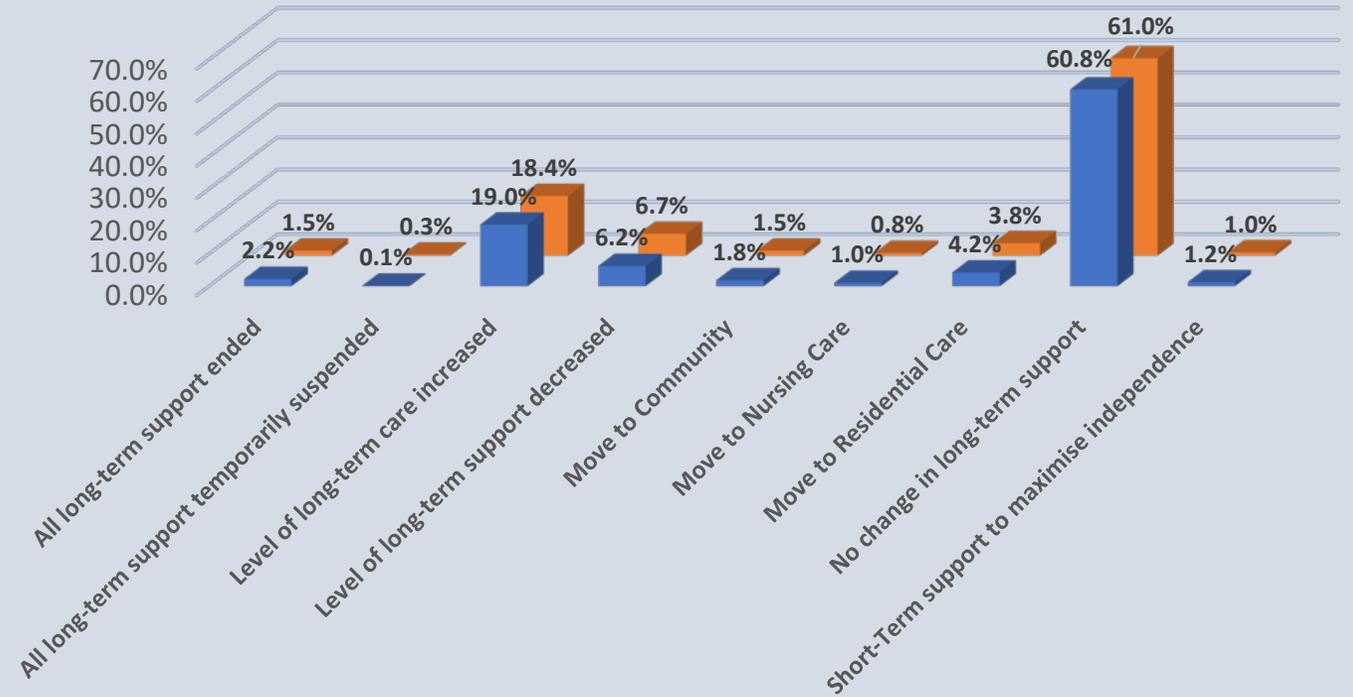
Reviewing needs

42

Timeliness of reviews



Outcome of reviews

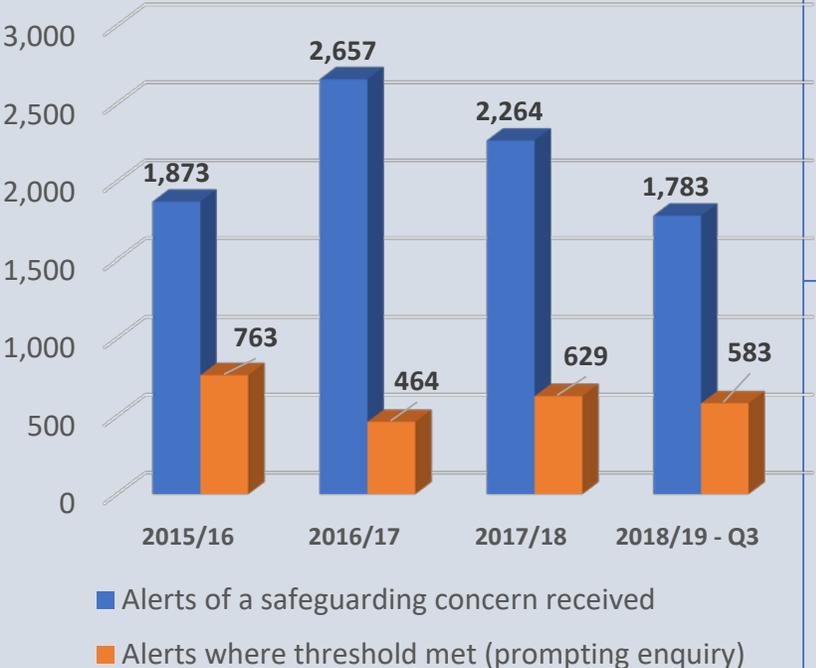


■ 2015/16 ■ 2016/17 ■ 2017/18 ■ 2018/19 - Q3

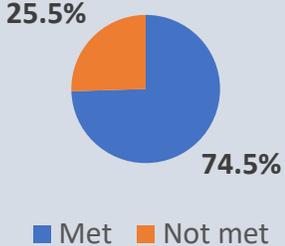
■ 2017/18 ■ 2018/19 Q3

Safeguarding

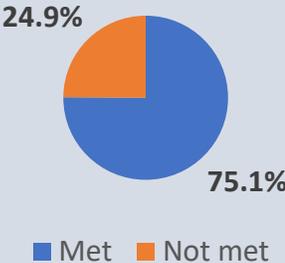
Alerts and Enquiries



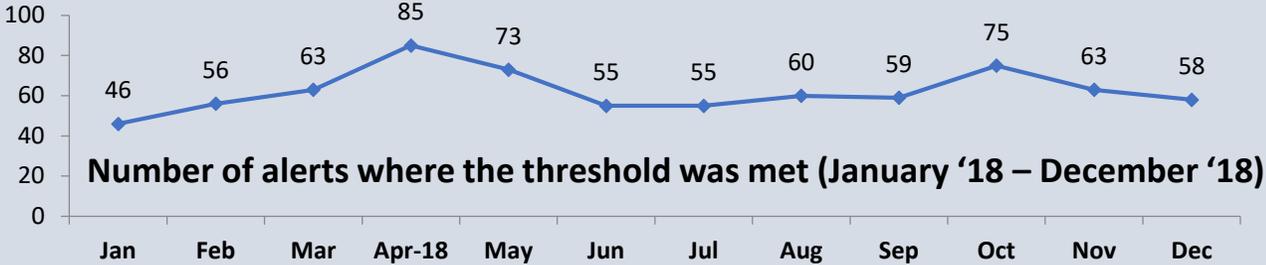
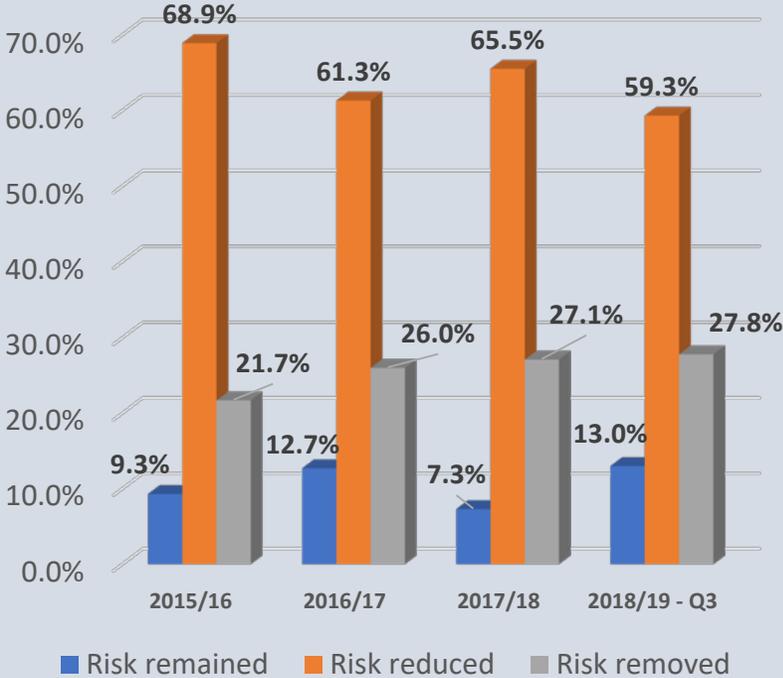
Threshold decisions made within 7 days of receipt of alert (2018/19 - Q3)



Action to make safe taken within 24 hours of threshold decision (2018/19 - Q3)



Outcomes

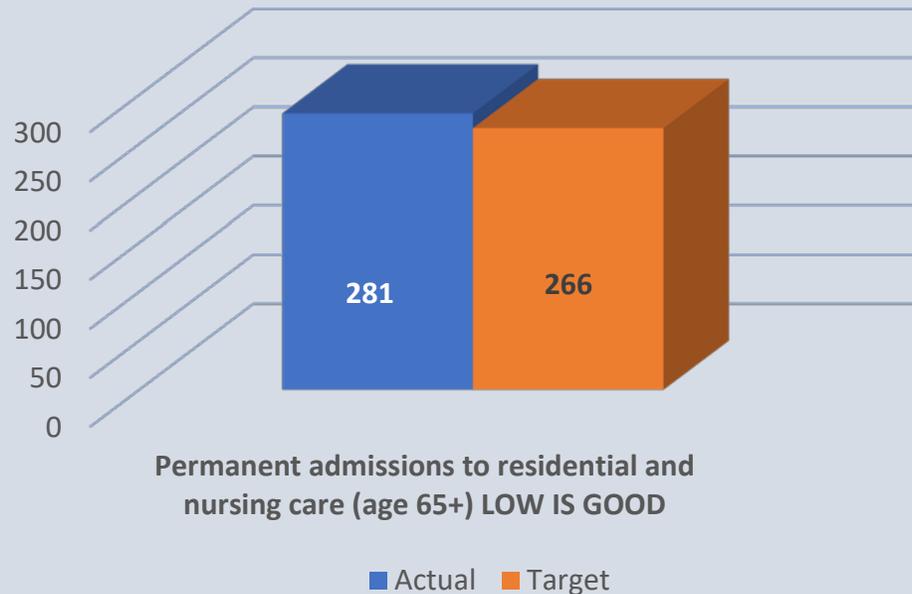


Better Care Fund (Health and Social Care integration)

Better Care Fund national metrics - see also '91 days' measure on slide 4

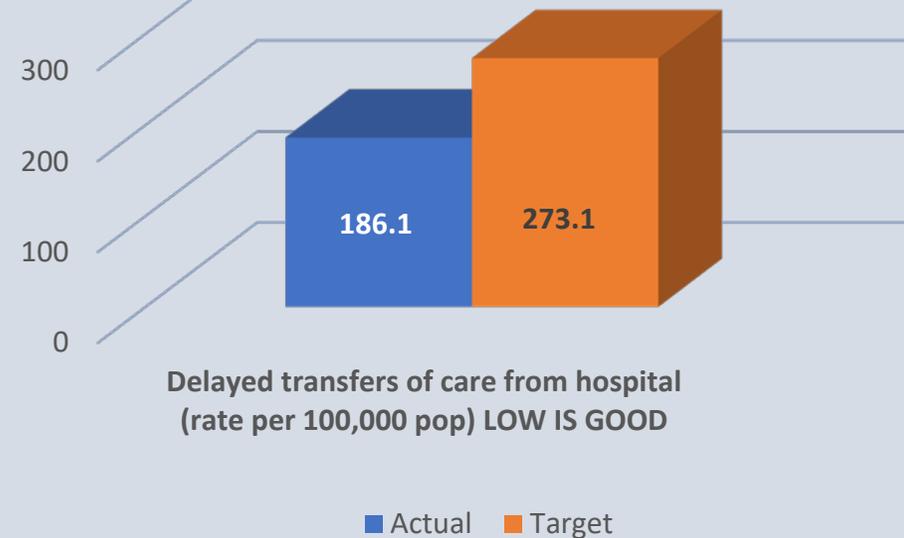
44

Permanent admissions to residential and nursing care (65+) – 2017/18



Permanent admissions to residential and nursing care (age 65+) LOW IS GOOD

Delayed Transfers of Care – 2017/18



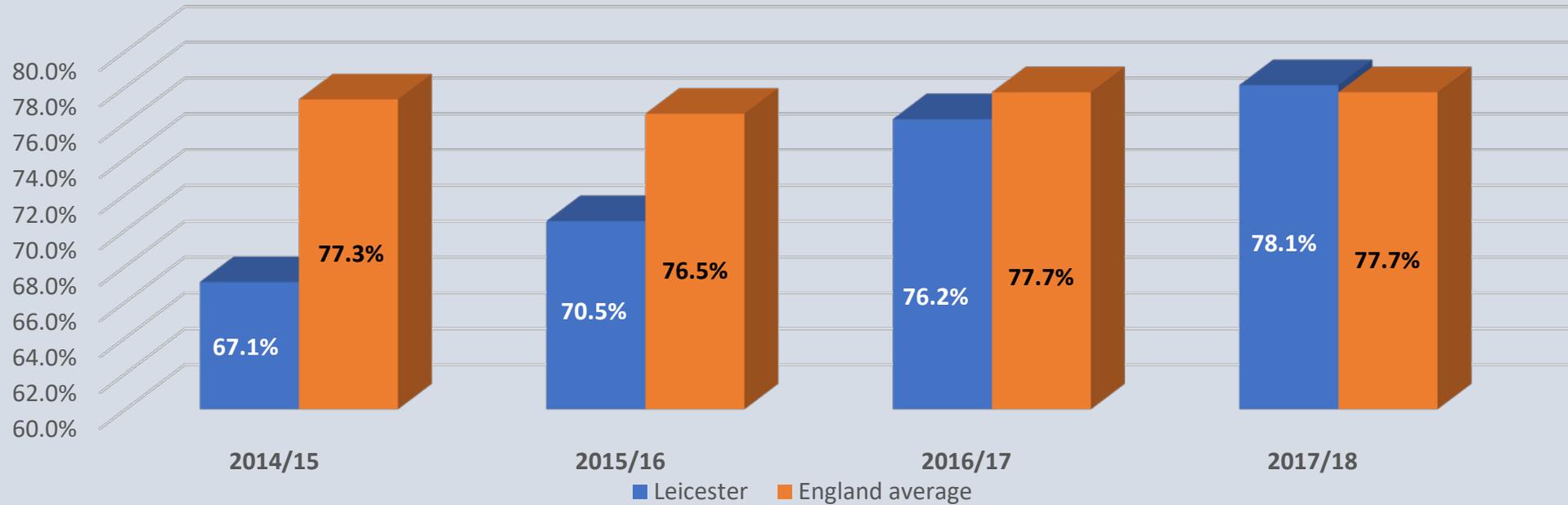
Delayed transfers of care from hospital (rate per 100,000 pop) LOW IS GOOD

Permanent admissions to residential and nursing care (65+)				
2014/5	2015/16	2016/17	2017/18	2018/19 (Q3)
287	258	282	281	192 (forecast = 256)

Delayed Transfers of Care - ASCOF definition				
2014/5	2015/16	2016/17	2017/18	2018/19 (Q2)
13.0	6.0	8.9	8.8	5.2

Choice and control

Proportion of people who use services who have control over their daily life
(ASCOF measure – 1B)

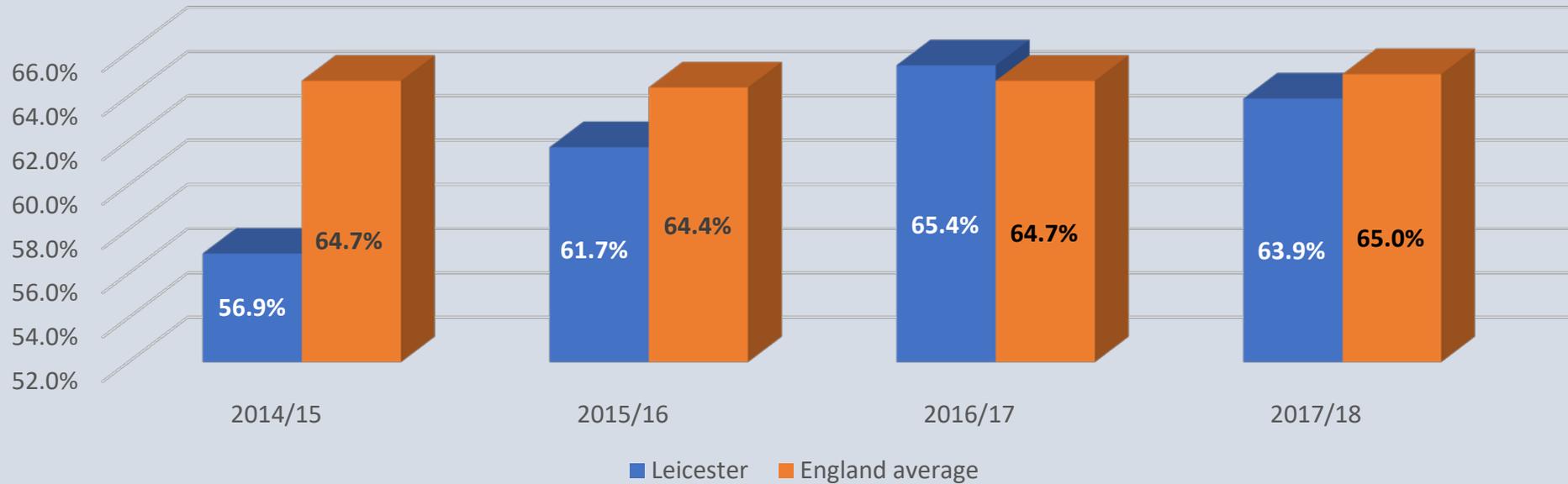


45

England ranking			
146/150	138/150	100/150	72/150

Customer satisfaction

Overall satisfaction of people who use services with their care and support
(ASCOF measure – 3A)



England ranking			
139/150	104/150	64/150	80/150

Adult Social Care Performance: 2018/19 Q3

Adult Social Care Outcome Framework

Indicator	2017/18 (baseline)	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Proposed Target	Rating	Comments
		England Average	England Ranking	England Rank DoT						
1A: Social care-related quality of life.	18.7	19.1	=116/150	 Up from = 126/150	N/A	N/A	N/A	18.9	From 2016/17 	18/19 user survey results available May '19
1B: Proportion of people who use services who have control over their daily life.	78.1%	77.7%	= 72/150	 Up from 100/150	N/A	N/A	N/A	80%	From 2016/17 	18/19 user survey results available May '19
1Cia: Service Users aged 18 or over receiving self-directed support as at snapshot date.	100% (3,533/3,533)	89.7%	=1/152	 Up from = 26/152	100% (3,640/3,640)	100% (3,655/3,655)	100% (3,606/3,606)	100%		
1Cib: Carers receiving self-directed support in the year.	100%	83.4%	=1/152		100% (85/85)	100% (90/90)	100% (94/94)	100%		
1Cia: Service Users aged 18 or over receiving direct payments as at snapshot date.	50.9% (1,800/3,533)	28.5%	5/152	 Up from 7/150	49.3% (1,796/3,640)	49.0% (1,791/3,655)	49.1% (1,769/1,769)	50%		
1Cib: Carers receiving direct payments for support direct to carer.	100%	74.0%	=1/152		100% (85/85)	100% (90/90)	100% (94/94)	100%		

Indicator	2017/18	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Proposed Target	Rating	Comments	
		England Average	England Ranking	England Rank DoT							
1D: Carer reported quality of life.	2016/17 7.2	2016/17 7.7	2016/17 130/151	2016/17 	N/A	N/A	6.9	7.4		Provisional data	
1E: Proportion of adults with a learning disability in paid employment.	4.5% (35/774)	6.0%	=81/151	 Up from 85/151	4.4% (33/750)	4.4% (35/775)	4.4% (35/785)	5%			
1F: Proportion of adults in contact with secondary mental health services in paid employment.	1.0%	7.0%	=146/150	N/A No data published in 2016/17	>1.0%	>1%	>1%	TBC		Data only up to August (no rating against target) DATA QUALITY ISSUES	
1G: Proportion of adults with a learning disability who live in their own home or with their family.	74.9% (580/774)	77.2	105/151	 Down from 97/152	72.9% (547/750)	73.3% (568/775)	73.9% (580/785)	75%			
1H: Proportion of adults in contact with secondary mental health services who live independently, with or without support.	30%	57%	137/152	N/A No data published in 2016/17	18%	3%	38%	TBC		Data only up to August (no rating against target) DATA QUALITY ISSUES	
1I: Proportion of people who use services and their carers who reported that they had as much social contact as they would like.	Users	43.0%	46.0%	110/150	 Up from 148/150	N/A	N/A	N/A	44%	From 2016/17 	18/19 user survey results available May '19
		Carers	2016/17 31.0%	2016/17 35.5%	2016/17 105/151	2016/17 	N/A	N/A	27.6%	32%	
1J: Adjusted Social care-related quality of life – impact of Adult Social Care services.	0.404		0.405	84/150	 Up from 133/150	N/A	N/A	N/A	0.407	From 2016/17 	

Indicator	2017/18	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Proposed Target	Rating	Comments	
		England Average	England Ranking	England Rank DoT							
2Ai: Adults aged 18-64 whose long-term support needs are met by admission to residential and nursing care homes, per 100,000 pop (Low is good)	14.5 33 admissions	14.0	= 96/152	 Up from =121/150	4.81 11 admissions	9.20 21 admissions	13.4 30 admissions	35 admissions		Cumulative measure: Position at Q3 2017/18 – 24 admissions Forecast based on 3Qs = 40 admissions / 17.52 per 100,000	
2Aii: Older people aged 65+ whose long-term support needs are met by admission to residential / nursing care per 100,000 pop (Low is good).	703.0 281 admissions	585.6	110/152	 Down from 99/152	139.63 58 admissions	281.68 117 admissions	462.24 192 admissions	254 admissions		Cumulative measure: Position at Q3 2017/18 – 196 admissions Forecast based on 3Qs = 256 admissions (BCF target)	
2Bi: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services.	Statutory	87.6% (162/185)	82.9	= 47/150	 Down from =22/152	N/A	N/A	N/A	92%	N/A	Statutory measure counts Oct – Dec discharges (BCF Target)
	Local	85.4% (695/814)	N/A	N/A	N/A	86.0% (172/200)	86.5% (346/400)	87.6% (496/566)	90%		Local measure counts full year
2Bii: Proportion of older people (65 and over) offered reablement services following discharge from hospital.	Statutory	2.8% (185/6,496)	2.9%	= 82/152	 Down from 64/152	N/A	N/A	N/A	3.1%	N/A	Statutory counts Oct – Dec discharges
	Local	3.2% (814 in reablement)	N/A	N/A	N/A	3.3% (200 in reablement)	3.3% (400 in reablement)	3.0% (566 in reablement)	3.5%		Rate calculated using 2015 live hospital discharge data as a proxy due to this data no longer being made available to local authorities.
2Ci: Average number of delayed transfers of care (Total) per 100,000 pop. (Low is good)	8.7	12.3	= 62/152	 Down from 46/152	5.0	5.2	5.4	7.8			

Indicator	2017/18	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Proposed Target	Rating	Comments
		England Average	England Ranking	England Rank DoT						
2Cii: Average number of delayed transfers of care attributable to Social Care per 100,000 pop. (Low is good)	0.6	4.3	=16/152	N/A New measure for 2017/18	0.2	0.2	0.2	0.4		
2Ciii: Average number of delayed transfers of care jointly attributable to NHS and Social Care per 100,000 pop. (Low is good)	1.9	0.9	142/152	 Down from 47/152	0.9	0.7	0.6	0.8		
2D: The outcomes of short-term services (reablement) – sequel to service	69.8%	77.8	106/152	 Up from 127/152	68.3%	71.7%	72.4%	71.5%		
3A: Overall satisfaction of people who use services with their care and support.	63.9%	65.0%	80/150	 Down from 64/150	N/A	N/A	N/A	65.2%	From 2016/17 	18/19 user survey results available May '19
3B: Overall satisfaction of carers with social services.	2016/17 43.5%	2016/17 39%	2016/17 24/151	2016/17 	N/A	N/A	38.2%	43.5%		Provisional data
3C: Proportion of carers who report that they have been included or consulted in discussion about the person they care for.	2016/17 70.7%	2016/17 70.6%	2016/17 70/151	2016/17 	N/A	N/A	75.0%	72%		Provisional data

Indicator		2017/18	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Proposed Target	N/A	Comments
			England Average	England Ranking	England Rank DoT						
3D: The proportion of service users and carers who find it easy to find information about services.	Users	70.5%	73.2%	= 109/150	 Up from 142/150	N/A	N/A	N/A	72%		From 2016/17 18/19 user survey results available May '19
	Carers	2016/17 57.3%	2016/17 64.2%	2016/17 134/151	2016/17 	N/A	N/A	55.6%	59.5%		<i>Provisional data</i>
4A: The proportion of service users who feel safe.		66.1%	69.9%	120/150	 Up from 125/150	N/A	N/A	N/A	67%		From 2016/17 18/19 user survey results available May '19
4B: The proportion of people who use services who say that those services have made them feel safe and secure.		86.7%	86.3%	= 78/150	 Up from 139/150	N/A	N/A	N/A	86.5%		From 2016/17 18/19 user survey results available May '19

Including historic survey-based measures (i.e. last known DoT):

Improvement from baseline - 14 	No significant change from baseline - 4 	Deterioration from baseline - 9 	N/A - No data on which to make a judgement on performance - 2 
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Adult Social Care Scrutiny Commission

Draft Work Programme 2018 – 2019

Meeting Date	Topic	Actions Arising	Progress
19 th June 2018	1) ASC Annual Operating Plan 2018/2019 2) Better Care Fund (BCF) 2017/2018: Update 3) ASC Procurement Plan 2018/2019 4) ASC Spending Review 4 – Floating Support 5) Work Programme	2) AGREED: <ul style="list-style-type: none"> • Update to come to Scrutiny on work with NHS, Over 85s and End of Life services • Update to come on nursing care home delays (inc. the Trusted Assessor Process) • Information on work to develop communications (Due to strengths based approach potentially changing format and presentation of data). 3) AGREED: <ul style="list-style-type: none"> • Procurement briefings will be held on the Disabled Persons Support Services and Advocacy Services. 4) AGREED: <ul style="list-style-type: none"> • Preferred option. 	3) Both procurement briefings have now been held.

Meeting Date	Topic	Actions Arising	Progress
28 th August 2018	<p>1) Delivering Good Social Work Practice report and presentation, to include:</p> <ul style="list-style-type: none"> • Healthy Workplace Survey • MyTime Peer Review • Peer Review • Annual Social Work (SW) 'Healthcheck' <p>2) Strengths and Assets Based Approach: Update</p> <p>3) Carers Strategy: Outcome of consultation and emerging action plan – Briefing report. (2)</p> <p>4) Outcome of VCS Phase 1 – Verbal Update</p> <p>5) Disability Related Expenditure (DRE) Consultation – Verbal Update</p> <p>6) Work Programme</p>	<p>1) AGREED:</p> <ul style="list-style-type: none"> • The Learning and Development Manager be invited to a future meeting • Report on professional development opportunities be brought to Commission in six months (Feb/March) • Information on bank staff numbers be provided to Members • Information on improved sickness levels to be provided at a future meeting • Report on how social workers were supported be provided at an appropriate time. <p>2) AGREED:</p> <ul style="list-style-type: none"> • That the Department 'tap into' gardening projects and allotments across the city, and map information • A report be compiled on the approach of what made it a corporate concern, to go to the Executive, and feedback of the response to go to OSC. <p>3) AGREED:</p> <ul style="list-style-type: none"> • Update report following amendment of the strategy – due to young and parent carer concerns • Update report on the strategy KPIs and successes be brought to Scrutiny six months after confirmation of the strategy • Update to be brought to a pre-meeting, which Members of the CYPS Scrutiny Commission would be invited to attend • Demographic breakdown of the 230 responders to be provided to the Commission. <p>4) AGREED:</p> <ul style="list-style-type: none"> • Training on Welfare Rights updates be organised as part of the MDP • Full report on all contracts discussed with EIAs attached be brought to next meeting. <p>5) AGREED:</p> <ul style="list-style-type: none"> • A full report and EIA would be brought to a future meeting. 	<p>1) The Learning and Development Manager will be invited to January's meeting.</p> <p>4) Full reports with attached EIAs brought to Scrutiny 25th Sept</p> <p>5) Both full report and EIA coming to Scrutiny 4th Dec.</p>

Meeting Date	Topic	Actions Arising	Progress
		6) AGREED: <ul style="list-style-type: none"> • Task group meetings on the ASC Green Paper would be arranged ahead of its publication. 	
25 th Sept 2018 (Special)	1) VCS Review Phase 1: Carers' Support, Lunch Clubs and Visual & Dual Sensory Support 2) VCS Review Phase 2: Advocacy, Stroke Support and Disabled People's Support Service	1) AND 2) AGREED: <ul style="list-style-type: none"> • Continue to reassure people where services being changed, particularly those who are vulnerable • That those accessing more than one of the services be adequately supported during the phased implementation of the new proposals • A further update with monitoring information be brought back to a future meeting of the ASC Scrutiny Commission, on progress. 	

Meeting Date	Topic	Actions Arising	Progress
16 th Oct 2018	1) Call-In of Executive Decisions 2) Dementia Strategy: Outcome of consultation and emerging action plan 3) Dementia Action Alliance: Update 4) Autism Self-Assessment 5) Domiciliary Care Reprocurement: Update 6) Outcome of Government consultation of the Local Housing Allowance (LHA) – Verbal update 7) Performance Outturn 2017/2018 8) End of Life Task Group Review	1) AGREED: <ul style="list-style-type: none"> • That the call-in be withdrawn. 2) AGREED: <ul style="list-style-type: none"> • The action plans for the Dementia Strategy be brought to a future Commission meeting • The links to website information on dementia be provided to Members • An invitation be extended to Members of the Commission to front a campaign for the promotion of dementia awareness. 4) AGREED: <ul style="list-style-type: none"> • Information on the success of the last ‘Autism Hour’ initiative be provided to the Chair • The links to website information on autism be provided to Members • Officers to append summary information (background, relevant weblinks or books) that Members could access for further information • A tag line sentence for the people of Leicester to raise awareness of autism be developed and brought back to a future meeting of the Commission. 5) AGREED: <ul style="list-style-type: none"> • Information on the reasons for non-compliant providers to be provided to Members of the Commission. 6) AGREED: <ul style="list-style-type: none"> • Information on Adult Social Care plans and schemes would be brought back to a future meeting of the Commission. 8) AGREED: <ul style="list-style-type: none"> • The report be endorsed by the Commission and presented at Overview Select Committee • The Department look at Living Wills. 	2) Links to website information on dementia now provided to Members. 6) Coming to Scrutiny 4 th December 8) Went to OSC 1 st Nov, due to go to CMB 29 th Nov.

Meeting Date	Topic	Actions Arising	Progress
4 th Dec 2018	1) Quarter 1 Performance 2) Extra Care Housing Update 3) Outcome of Disability Related Expenditure (DRE) Consultation 4) Consultation for Accommodation Based Support 5) Outcome of Sheltered Housing Consultation 6) Outcome of consultation for Acquired Brain Injury (ABI) Outreach 7) Outcome of consultation for the Disabled Persons Support Service (DPSS) 8) Proposal to create a Service User Participation Service	1) AGREED: <ul style="list-style-type: none"> • That information about safeguarding be made available in community centres, on the Council’s website and circulated to Ward Councillors • Report on the new Brokerage Team to be brought to ASC in around six months’ time. 2) AGREED: <ul style="list-style-type: none"> • The Housing Scrutiny Commission be requested to ask the new Housing Company whether some of their properties would have a higher spec for Extra Care and for the Strategic Director to talk to the Director of City Development and Neighbourhoods about reviewing design specifications, to ensure they are fully wheelchair accessible • That a further update be brought to a future ASC meeting. 3) AGREED: <ul style="list-style-type: none"> • That the Commission support Option 3: to reduce the standard level of DRE from £20 to £10. 4) AGREED: <ul style="list-style-type: none"> • Department to provide a response to comments received from Norton Housing and Support, expressing concerns of inaccuracy • That a further report be brought back to ASC after the consultation period has ended, before any decision is made • Accompanying EIA be sent to Members once complete. 5) and 6) AGREED: <ul style="list-style-type: none"> • The Commission support the proposal to end the Sheltered Housing Support Funding to Registered Social Landlords • The Commission support the proposal to withdraw funding for the ABI outreach service • The Commission be kept informed on plans to ensure that language and access needs are fully considered within ASC spending reviews. 7) and 8) AGREED:	4) Response is attached to minutes.

28/02/19

Meeting Date	Topic	Actions Arising	Progress
		<ul style="list-style-type: none">• The Commission support proposals to end the DPSS contract• The Commission support proposals to procure a new participation service• Update on the new participation service be brought back to ASC in October 2019, with a more detailed report following in April 2020. <p>9) AGREED:</p> <ul style="list-style-type: none">• That an additional meeting of the Commission be arranged to discuss the Government Green Paper• That Members be given sight of relevant consultation documents prior to them being put into the public domain, and for those consultation documents to be sent to GPs' surgeries.	

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Meeting Date	Topic	Actions Arising	Progress
22 nd Jan 2019	<ul style="list-style-type: none"> 1) Annual Budget 2) Learning and Development Manager – Presentation 3) Quarter Two Performance Report 4) Refresh of the Learning Disabilities Strategy 2019: Progress Update 	<p>1. AGREED: that a letter be written to the Secretary of State for Health and Social Care, and the three M.P.s for Leicester to highlight the seriousness of the situation regarding funding for Adult Social Care and the lack of clarity of monetary allocation beyond 2019 /20.</p> <p>2. AGREED: an update be brought back to the Commission in a year.</p> <p>4. AGREED request that the consultation findings be brought to the Commission in the new municipal year.</p> <p>5. that an email be sent from the Commission to all staff in Adult Social Care to thank them for their hard work and dedication towards ensuring that people’s experience of using the service are improving</p> <p>7. The Chair stated that an additional meeting of the Commission had been arranged for 19 March 2019 to consider the Green Paper, but as yet there was no information as to when that would be published.</p> <p>The Strategic Director requested that the outcome of the Adult Social Care Test and Assurance of the Department be added to the work programme for the next meeting.</p>	

Meeting Date	Topic	Actions Arising	Progress
19 th March 2019	<ol style="list-style-type: none"> 1) Independent Living Support (ILS) Supported Housing Service: Consultation findings 2) Adult Social Care Annual Operating Plan 2018/19: Detailed update 3) Test of Assurance 4) End of Life – Executive Response 5) Slips, Trips and Falls Prevention 6) Loneliness and Isolation 7) Safeguarding Efforts 		

Forward Plan/Suggested Items

Topic	Detail	Proposed Date
Green Paper Task Group Response: Sustainable Funding for Social Care	Once the Green Paper has been published, Task Group work can commence.	TBC
Delivering Good Social Work Practice: Support for Social Workers (Report)	Requested in August meeting.	TBC
Delivering Good Social Work Practice: Professional Development Opportunities (Update)	Requested in August meeting.	January/March 2019
Carers Strategy: Update	An update on the amended Carers strategy to come to Scrutiny once complete, followed by an update report in 6 months with details of KPIs outlined under each strategic priority	October/December 2018
NHSE Over 85s and End of Life (Update)	Requested in June meeting. Annual update.	June 2019
Nursing Care Home Delays inc. Trusted Assessor Process (Update)	Requested in June meeting.	TBC
ASC Spending Review 4 – Floating Support: Equality Impact Assessment	Requested in June meeting.	TBC

