## NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

## SOCIAL SERVICES, HEALTH AND HOUSING

## **CABINET BOARD**

## 15 September 2016

## URGENT REPORT OF THE HEAD OF ADULT SOCIAL SERVICES

## - A. JARRETT

#### MATTER FOR DECISION

#### WARDS AFFECTED: ALL

#### <u>COMMUNITY CARE –</u> BUSINESS PLAN 2016/17

#### 1. Purpose of Report

To obtain approval for the Community Care Business Plan 2016/17.

#### 2. Executive Summary & Background

Community Care in Neath Port Talbot has made significant changes over the past three years in line with a modernisation programme that has also contributed significant savings to the Council's forward financial planning. Whilst there remain a number of change programs in relation to direct service provision such as in Home Care, Residential Care and Day Opportunities they do not fall within the scope of this plan. In 2016/17 the social work teams need a period of consolidation and review in order that they are best positioned to meet future challenges.

## 3. Financial Impact

There is no direct financial impact.

#### 4. Equality Impact Assessment

A Screening Assessment has been undertaken to assist the Council in discharging its Public Sector Equality Duty under the Equality Act 2010. After completing the assessment it has been determined that this strategy does not require an Equality Impact Assessment. The main reason for this is that the Strategic Plan refers to a set of priorities which, where necessary, will have their own EIA assessments.

#### 5. Workforce Impacts

There are no workforce impacts associated with this report.

#### 6. Legal Impacts

There are no legal impacts associated with this report.

#### 7. Risk Management

Without a Business Plan there is a risk that the service will not focus on its priorities in 2016/17.

#### 8. Consultation

There is no requirement under the Constitution for external consultation on this item.

#### 9. **Recommendation**

That the Community Care Business Plan 2016/17 be approved by the Social Services, Health and Housing Cabinet Board.

#### 10. Reason for Proposed Decision

To provide strategic direction for the Community Care programme of improvements.

## 11. Implementation of Decision

The decision is proposed for implementation after the three day call in period.

## 12. Appendices

The Community Care Business Plan 2016/17

#### 13. List of Background Papers

Not applicable

# 14. Officer Contract

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## Community Care Business Plan 2016-17

## INTRODUCTION

This year has seen significant strategic and operational changes within the Community Care Services of Neath and Port Talbot.

Strategic change has been necessary to meet the Council's new duties as set out in the Social Services and Wellbeing (Wales) Act which came into force in April 2016. Change has also been necessary to meet the very real challenges of supporting increasing needs and increasing standards at a time of reducing budgets. Significant operational change has also been necessary to respond to changes within the management team. Over the year a number of senior staff have moved on from the Council to take on senior management jobs within other Councils or retire. Claire Marchant, Head of Community Care Services, for example, moved to become the new Chief Officer for Social Care, Safeguarding and Health in Monmouthshire.

This business plan covers the period 1<sup>st</sup> April 2016 to 31<sup>st</sup> March 2017. The services and functions within the scope of the Plan are as follows:

- The Afan, Neath and Complex Disability Teams
- North and South Mental Health Teams
- The Gateway and CRT
- The Safeguarding and Review Team
- The Direct Payments Team

The Council continues to be committed to three integrally linked long term strategic change programmes. These have, and will provide the framework through which Neath and Port Talbot Council can continue to provide high quality Community Care Services.

1. Improving Outcomes, Improving Lives Programme. This major programme covers the internal transformation of community services that is required to meet increasing demand at a time of reducing budgets. The programme is ongoing and is charged with improving services and reducing budgets by thinking again about how and where services are delivered. Embedded in the project is also an ambitious project to increase the number of people receiving Direct payments in the county.

- Integrating Community Services Programme this programme brings together key health and social services delivered by both Neath Port Talbot County Borough Council and Abertawe Bro Morgannwg University Health Board. This programme is ongoing and has delivered the full integration of intermediate care services in Neath Port Talbot in the form of the Common Access Point (Community Gateway) and Community Reablement Team (CRT).
- 3. The Western Bay Health and Social Care Partnership. Neath Port Talbot County Borough Council together with Abertawe Bro Morgannwg University Health Board, Bridgend County Borough Council, and the City & County of Swansea are working together to provide a strategic mechanism for co-ordinating a programme covering frailty and dementia, learning disabilities, contracting and procurement, mental health, youth offending and regional adoption services

## COMMUNITY AND CORPORATE OBJECTIVES

The Single Integrated Plan for the Neath Port Talbot Area was prepared by the Local Service Board in 2013/14 and adopted by full Council. The vision contained within the Single Integrated Plan is "Creating a Neath Port Talbot where everyone has an equal chance to be healthier, happier, safer and prosperous"

The way the Council contributes to the delivery of the Single Integrated Plan is set out in the Corporate Improvement Plan. There are six improvement objectives for 2015/18:

- Safer, Brighter Futures Improve outcomes for children in need and children looked after by improving the performance of the Council's Children and Young People Services Department
- Better Schools and Brighter Prospects Raise educational standards and attainment for all young people
- Improving Outcomes, Improving Lives Maximise the number of adults who are able to live independently with or without support within the home of their choice within their community
- Prosperity for All Support and invest in our town centres and communities to promote economic growth, regeneration and sustainability, maximise job opportunities and improve access to employment
- Reduce, reuse and recycle Increase the percentage of waste recycled and composted
- Better, simpler, cheaper improve customer/citizen access to services and functions provided by the Council or on behalf of the Council and to improve the efficiency of those services and functions

The delivery of the six improvement objectives is based on our key principles of equality; sustainability; promoting the Welsh Language and culture; engaging with citizens; and partnership working. The service will contribute to the delivery of these objectives as described further in this plan.

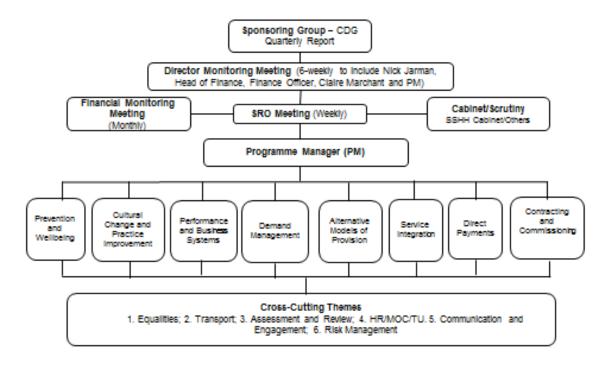
#### SERVICE PURPOSE, VISION AND VALUES

The following section of the report gives an overview of the operational delivery of community care services in NPT.

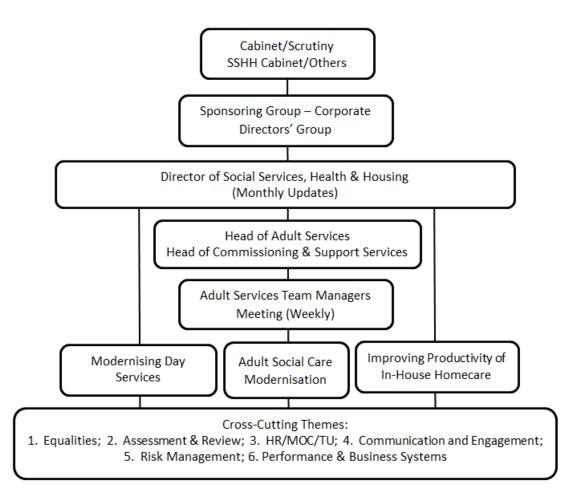
The Programme Structure has been amended as follows:

• Following the appointment of Andrew Jarrett to Interim Head of Adult Services, the Programme Structure was reviewed and determined to be over-complicated in the number of closely inter-linked projects that contributed to the bottom line savings target. Therefore, the programme has been streamlined, with a number of projects now amalgamated into the single project, Adult Social Care Modernisation.

Original Structure (as at April 2015):



**Revised Structure (from April 2016):** 



- The Adult Social Care Modernisation Project combines the savings of the previous projects with a bottom line FFP Target of £2.05m.
- Savings under the Adult Social Care Modernisation Project will be recorded via a Tactical Panel process which will account for all approved and non-approved expenditure requests for social care. The Tactical Panel adopts a phased approach across the client groups. Phase 1 (Q1 16/17) focuses primarily on Complex Needs and Mental Health (Low Volume/High Cost). Phase 2 (Q3 16/17 onwards) will take into

account any lessons learned during Phase 1 to ensure successful roll-out across Community Networks (High Volume/Low Cost).

- The Tactical Panel will feed back into two overarching project groups:
  - Finance Systems Monitors the overall savings achievements & uses budget feedback to inform decision making
  - Resources Ensures best use of existing resources (particularly in-house), avoiding more costly external options wherever possible

#### **Community Gateway**

The Community Gateway is the front door to community care for anybody living in Neath and Port Talbot for both The Council and the Abertawe Bro Morgannwg Local Health Board. This team responds to the vast majority of requests for support from service users, carers, family members or others who had identified someone who potentially may need to access our services. Members of the public, GPs and other health and social services professionals can refer into the Neath Port Talbot Gateway.

The Community Gateway provides an information advice and assistance and multi-disciplinary assessment and triage into a full range of health and social care services. It mainly, though by no means exclusively deals with frail older people. The service aims to ensure that people requiring help will know how to contact us and will receive a consistent, equitable and timely response to their enquiries. Public information continues to be reviewed and developed, in print, online and in other formats. There is an Emergency Duty Team (EDT) which responds to emergencies out of hours.

Neath and Port Talbot CBC continues to invest in a third sector brokerage role, provided by the British Red Cross is integrated into the Gateway service. The broker is able to connect citizens to local voluntary services within the community as a way of meeting needs mitigating the need for statutory service and promoting wellbeing and resilience.

## **Care Management and Review services**

NPT has a range of services to:

- Identify eligible need,
- Set up and manage care packages,
- Review care packages.

Assessment and care management services across Neath Port Talbot aim to achieve the following outcomes:

- a) A personalised approach to assessment;
- b) Outcome focused care plans which safeguard, promote and maximise independence, potential and recognise changing needs over time through the process of review;
- c) Ensure a strong relationship between the social worker, as the micro commissioner of services, and strategic commissioning, service review and development.

A major review of social work systems and practice was concluded in 2014/15. This work as continued in 2015/16 though the Improved Outcomes, Improving Lives programme.

This new model of social work promotes good relationships and strengths based dialogue with people. This is so that our staff who are responsible for managing care can understand and communicate what skills and resources are available to service users to help them achieve their goals.

During 2015/16 we have reviewed the Quality Assurance Panel and put in place new arrangements to ensure our assessment, care management and reviews are of the required standard, and we have put in place mechanisms to dive through improvements to these functions. This is vitally important to ensure the Council meets is obligations under the new act.

#### **Intermediate Services**

Intermediate services sit between health and social care. A range of intermediate services have been developed by Neath Port Talbot and Abertawe Bro Morgannwg Local Health Board (ABMU) to:

- Support older people, particularly the frail elderly, to maintain their independence and remain in their own home.
- Avoid unnecessary hospital admissions, or inappropriate admission to residential care, as well as preventing delayed discharges from hospital.

There is a fully integrated intermediate care service in Neath Port Talbot. The service now forms part of the Community Resource Team which comprises community reablement, community occupational therapy, sensory support and nurse practitioner led clinical teams. These teams prevent hospital admissions and facilitate earlier discharge through a 4-6 week reablement programme for people who normally live independently at home but who may for a variety of reasons have lost confidence or physical ability. The service enables service users to remain in their own homes for as long as possible.

The Welsh Governments Intermediate Care Fund in 2014/15 funded a pilot where low level adaptations to service user's homes could be allocated by the Community Gateway. It also enabled us to invest in step down housing from NPT homes to ensure that no-one experiencing a delay in a major adaptation (e.g. due to planning permission) will wait in hospital or a care home. This was successfully evaluated and has continued without grant funding into 2015/16 and will be maintained in 2016/17.

#### **Disability Care Management**

Disability care management services for people with high levels of health and social care are provided through a County Borough wide disability team. This team is co-located with the local learning disability health team. The team deal with higher cost placements and people who have more complex or multiple needs. Often these people have a learning disability

Alongside social work staff, the disability team also includes community nurses, occupational and physiotherapy staff.

#### **Transitions**

Transition is the process through which young people with a social care need move into adult services. This is an important time as the legal framework for delivering care shifts from children services to adult services. A transition protocol has been developed during 2015/16 and become operational in 2015/16. A multi-agency tracking and planning group is ensuring that there is no delay in allocation of adult social workers and this is supporting improved multi-agency working. A consultant social worker for with responsibility for transition is now in place.

## **Community Mental Health Teams (CMHTs)**

Community Mental Health Teams (CMHTs) support people living in the community who have complex or serious mental health problems. NPT CBC has two Mental Health Teams covering different areas of the Borough. Both teams offer a full assessment, care management and review service to all people under 65 with severe and enduring mental illnesses and are integrated teams with health colleagues

#### Carers

The Social Services and Well-being (Wales) Act 2014 has a big impact on the way in which local authorities provide services for carers. Under the Act, carers (someone, of any age, who provides unpaid care and support

to a relative, friend or neighbour who needs care and support) will no longer need to be providing 'a substantial amount of care on a regular basis' to be able to have an assessment. NPT CBC has a duty under the Act to undertake a carer's assessment where it appears they have needs for support.

Separate carers' assessments are offered to all and carers are strongly encouraged to have their needs assessed as well as being fully involved in the assessment and care planning of the person they care for. There is now very effective working with the third sector with the Carer's Service commissioned to undertake carer's assessments on behalf of the Council, giving another option to people who would prefer not to have their assessment undertaken by a social worker. There is also a carer's worker embedded in the Community Reablment Team and this is proving hugely effective at providing timely assessment and support at a time when often the person they care for is newly diagnosed or has a condition which is exacerbating.

#### Principles 1 and 2 – Delivery of Priorities in 2015/16 and Priorities to be delivered in 2016-2017

#### Improving Outcomes, Improving Lives Programme

At the heart of our internal change programme is the IOIL programme. This is a wide ranging programme of change that cuts across every aspect of how we deliver high quality adult services in Neath and Port Talbot. The following describes the various interlinked projects that make up the IOIL programme:

## **Cultural Change and Practice Training**

Neath and Port Talbot Community Care services has a stable and highly valued cohort of front line social workers and their importance to the safe and efficient delivery of social services over the last few years cannot be underestimated. We however identified in 2014/15 that with a radical remodelling of Social Services, and the introduction of the game changing Social Services and Wellbeing (Wales) Act, we had to invest in a training programme for all frontline staff. We recognised that our social workers are now required to think and act differently when assessing, planning and reviewing care.

We therefore set out in the financial year of 2015/16 to embark on an intensive programme of training to enable front line social work staff to achieve a constant level knowledge, skills and understanding of the practices and processes required to help meet the aims and objectives of the IOIL programme and the Act. We are pleased to report that all social work staff from across all the teams were offered and completed the training. The training comprised of 6 theme based sessions, 3 of which focused on practice and 3 on culture and behaviour change. The principles embedded into the sessions included the testing and challenge of

assumptions; using real live cases to develop solutions; creating solutions through peer support and reflective practice and contextualising 'new ways of working' into the broader change requirements of the IOIL transformation programme.

In the year 2016/17 we will continue to focus on embedding the cultural and practice change. A clear focus for which will be ongoing support to front line staff to implementation of the Act in areas such as The National Well-being Outcomes Framework.

We will also review the long term effectiveness of the service wide training programme.

#### **Performance and Business Systems**

NPT continues to invest in the design, development and production of a robust monthly performance dashboard which reflects performance against key operational indicators. Like all authorities in Wales our business systems will have to reflect the new duties as set out in the Social Services and Wellbeing Act.

There has however been an extra dimension to this work in NPT as we seek to ensure that the business systems can support a radically remodelled Adult Social Services. In 2015/16 we had to work hard to ensure that our business systems give our management the right tools to support the safe and effective management of adult social services as we move to a new model of care. This work is set to continue in 2016/17.

#### **Prevention and Wellbeing**

To comply with the Social Services and Wellbeing (Wales) Act 2014 the Council has a new set of legal duties to improve service users' independence and wellbeing. Over many years the Council has worked towards these general principles but the Act creates a defined step change in 4 key areas

- Voice and control NPT is now required to put the individual and their needs, at the centre of their care, and giving them a voice in, and control over reaching the outcomes that help them achieve well-being.
- Prevention and early intervention NPT is now required to increase preventative services within the community to minimise the escalation of needs.
- Wellbeing NPT is now required to support people to achieve their own wellbeing and measuring the success of care and support.
- Co-production NPT is now required to encourage individuals to become more involved in the design and delivery of services.

The prevention and wellbeing project has been focused on meeting these duties by creating a set of tools, systems and processes to be used across the community care service. The objective of these tools systems and processes is to reduce inappropriate demand and ensure that packages of care are fair, whilst increasing service user independence, choice and control.

In practical terms this means

- Significantly increasing the proportion of people who contact us for support who we are then able to signpost to resources in their community. NPT will increasing sign post service users to support provider by those within the community.
- Increasing the proportion of people who access our reablement services and who then do not go on to have a long term care package.
- Significantly increasing the proportion of people who have access to direct payments.
- Increasing the use of assistive technology

We also are required to improve

- How we set and agree outcomes in care plans to ensure that where possible service users can regain as much independence as possible
- How we review the achievement of those outcomes and build on individual and collective successes.

Neath and Port Talbot are doing these things because we know that they are the right things to do. They have been a foundational component of our strategic planning over the last few years but we are now required to do them by law.

A good example of how we are investing in prevention and wellbeing is the three new Local Area Coordinators posts we have appointed to. Local Area Coordinators help older people, disabled people, people with mental health problems, and their families and carers to build relationships within their community in three ways:

- Building the individuals vision for a good life
- Helping the individual stay strong and connected
- Enabling the individual to feel safer and become more confident

The services provided by local area coordinators can be accessed by people who do not meet the threshold for other forms of social care.

Over the last year two key indicators demonstrate that early intervention and prevention is already having a significant impact.

- Weekly cost of external domiciliary care has continued to reduce
- Referrals to Telecare have increased

In 2016/17 we expect to see a further increase in the numbers of people who are supported within their community rather than accessing formal social care. This is a key element of the Act and something we are investing heavily in.

#### Pathways to Independence

Over the last 3 years we have been working with stakeholders to ensure that service users receiving higher cost packages have fair and proportionate services to meet their needs. This project is called *Pathways to Independence* because it is our objective to ensure all our service users have the maximum independence. We also recognise gaining independence can take time for some service users as they require decreasing levels of care. Over many years a lack of previous robust needs assessments, case reviews and quality assurance has resulted in service overprovision relative to service user need. This has increased costs for the Local Authority but has also caused a dependency culture where care needs remain static despite significant investment by the authority.

In 2015/16 existing cases were reviewed on through a number of separate projects to determine current needs, and reduce or increase service provision where appropriate. This work as now become 'business-as-usual' and will be embedded in the teams. The overall approach will however remain a vital element of how the Council can best manage its resources at an incredibly difficult time.

Over the last year NPT has seen a very sudden and dramatic increase in new cases of people with significant mental ill health who are accessing our services. This is a very significant challenge for us; as such a significant increase was not and could not have been predicted. Given a general trend of reducing budgets an increase of this scale will have a profound impact on our budgets for many years. This increase is as a result of several factors but it looks as if changes to service provision in health have resulted in an increase in people with significant mental ill health living in the community. We are continuing to work with other partners to understand and manage this demand pressure.

#### Key performance indicators

There are a number of performance indicators that we use to judge the overall performance of the service. The following gives an overview of the three key ones:

#### 1. DToC

The rate of DToC (Delayed Transfers of Care for Social Care reasons) has slightly increased over the 2015/2016 period from the previous 12 months. DToC figures are important because they demonstrate potential barriers that are in place to enable our health colleagues to discharge patients with social care needs from acute hospital settings. During 2014/15 the rate was 3.21 compared with a rate of 4.36 during 2015/16. Over many years NPT has seen a decrease in this rate - for example in 2011/12 the rate was 9.81. We expect to maintain a relatively low level of DToC taking account of the changes to direct services and will continue to monitor this rate closely.

#### 2. Carers assessment

The rate of carers' assessment uptake has stayed about the same having significantly increased over the preceding years. In 2013/14 20% of identified carers received a carer's assessment. In 2014/15 this rose to 40% and has stayed at this rate in 2015/16. We recognise that that the new act places extra duties on NPT to respond to the needs of carers and are expecting to see a significant increase over the coming years.

#### 3. Review

The percentage of service users whose needs were reviewed has again reduced to 72.7% from 78% in 2014/15. This is an area that we know we need to improve upon and we expect to see a significant increase over the next 3 years.

# Mandatory Corporate Measures Table

Mandatory Corporate Measures (2016- 2017)	2014-2015 Performance (if available)	2015-2016 Performance (if available)	2016-2017 Performance Target
<ul><li>CM01 Number of transactional services:</li><li>a) Fully web enabled</li><li>b) Partially Web enabled</li></ul>	N/A	N/A	N/A
<b>CM02</b> % of revenue expenditure within budget	Budget 51,173780 Actual 50,267,144 Underspend 1.8%	Budget 49,679,141 Actual 49,467,366 Underspend 0.4%	Budget 47,584,580
CM03 Amount of FFP savings at risk	Nil	Nil	£1.3m – Reduction of placement costs. To date not fully achieved, work is ongoing.
<b>CM04</b> Average FTE (full time equivalent) days lost due to sickness	TBC	TBC	
<b>CM05</b> % (no.) of staff performance appraisals to be completed during 2016- 2017	TBC	TBC	
<b>CM06</b> Number of employees who left due to unplanned departures	TBC	TBC	
<b>CM07</b> Total number of complaints: Internal / External	44	23	TBC

<b>CM08</b> Total number of compliments: Internal / External	11	11	TBC
<b>CM09 %</b> (no.) of services measuring customer satisfaction			

#### **Principle 3 – Workforce Planning**

#### What are the key workforce challenges for this service?

We will continue to build on the priorities of workforce stability, good social work practice and excellent performance management.

#### What actions are we going to take to address these challenges?

We continue to be committed to ensuring that we have a stable, experienced and well trained staff group. We will maintain stability by continuing to follow good people management and leadership practices such as timely recruitment, good induction, regular supervision, performance management, maximising attendance, minimising the use of agency workers, succession planning, effective two way communication between staff and managers and partnership working with the Council's recognised Trade Unions.

We will maintain a targeted and systematic approach to achieving continuous improvement in quality and practice and to comply with current legislation. We will continue to promote a workforce culture that is supportive, that rewards success and achievements and is focussed on the outcomes of the people0 we work with. Capability, disciplinary and grievance issues will be promptly and appropriately dealt with.