

Council – 9 January 2017

Portfolio Brief – Social Care Councillor Diane Coughlan

1. Overview

Adult Social Care continues to be challenged nationally due to the reduction in funding to councils over the last few years. A recent ADASS study shows 74% of councils will be overspent on their ASC budgets this year and that the overspend has trebled to £450m in the last year or more.

The Financial Settlement enables councils to raise the precept from 2% to 3% for two years. In Walsall the 1% rise equates to about £1m, this will not even begin to address the issue of the massive underfunding.

A long term funding solution is required nationally to sustain the most vulnerable in our society.

2. The Sustainability and Transformation Plan

In December 2015, the NHS shared their plans of a new approach to help ensure that health and care services are built around the needs of local populations. To do this, every health and care system in England will produce a multi-year

Sustainability and Transformation Plan (STP), showing how local services will evolve and become sustainable over the next five years – ultimately delivering the Five Year Forward View vision of better health, better patient care and improved NHS efficiency.

Cabinet has noted the development of the Black Country Sustainability and Transformation Plan and the Walsall Together Programme, which is the local delivery of the STP. Cabinet will receive further reports in due course.

3. Walsall Together Programme

The Healthy Walsall Partnership Board was established in 2015 as a partnership between Walsall CCG, Walsall Healthcare NHS Trust, Walsall Council and Dudley and Walsall Mental Health Partnership NHS Trust. The Partnership has progressed to improve the health of the people of Walsall through the establishment of an integrated health and social care system for the borough, and is now called Walsall Together. It was agreed that the focus of the work would be building joint teams between GP's, social care, mental health and community health staff. The Board provides collective leadership to developing strategic plans to build a sustainable health and social care system for all the people of Walsall.

4. The Budget

As at end of November 2016, the initial forecast position for Adult Social Care is an over spend of £6.147m. After the net use of reserves (£0.400m) and implementation of the identified action plan totalling (£0.091m) this would result in an overall forecast over spend of £5.657m at year end, a decrease of (0.160m).

The decrease is small at present, but significant for two reasons:

- a) Adult Social Care is absorbing more demand – about 100 more people are being supported – comparing September 2015 to September 2016.
- b) The unit costs of care are coming down:

The management team have been looking at the comparisons with our neighbours for the costs and allocations of care, and have identified that in the past in Walsall, people have been over-prescribed care, and also some types of care costs are very high.

To address these issues, cases are being reviewed in detail at panels to ensure that the Care Act is applied fairly and equitably for all clients. This has seen a recent flat-lining of care costs over the last 3 months. However, this does not remove the ongoing pressure of unachieved savings and the current identified pressures.

Work is ongoing to ensure that care charges are collected more effectively. An interim charge is to be introduced so that we will begin to collect charges as soon as care is delivered. This will ensure we collect what is owed as soon as possible and that service users are not being allowed to accrue massive debts.

The team are also embarking on the developmental stages of phase three of Mosaic in order to add the financial elements of the system to the care record.

We are working to improve the ease of the financial assessment and way we charge people who make a contribution towards their care. This enables people to decide what care they require, based on what they will pay, and will stop large bills and debts being accrued.

5. **Staffing**

In the 2016/17 year the Directorate will complete a re-structure reducing management layers by three tiers. This creates a new management structure, delivering financial and organisational efficiencies.

Part of the change has seen the appointment of a permanent Executive Team, creating the much needed stability to the directorate.

Appointment to Group Manager roles is complete and, in February 2017, Team Manager and Advanced Practitioner restructure will follow on revised job descriptions that focuses their accountability on practice improvement, financial and performance management, staff development, and compliance with the Care Act.

Absence levels have improved dramatically, reducing costs in this area by a rolling average of 23% and saving over £150,000.

The new model for Adult Social Care sees our teams working within localities, clustered around GP practices, working alongside partner services. Workers will hold case responsibility for a known caseload making it easier to maintain continuity and respond to changes in needs for service users.

6. **Local Services Responsibilities**

In recent months there has been some good partnership work supporting citizens who hoard. Neighbourhood Community Officers are working with partners to support people who need an assessment and action plan to help to reduce the risk either to themselves or for health and safety (including the risk of fire) reasons. Often people self neglect or are subject to eviction if this isn't tackled effectively.

There has been some excellent work within the community by Goscote Greenacres who have well and truly linked with local organisations and local people by allowing continued access to allotment plots on site. The gardeners work with a team of volunteers to grow and sell fruit and vegetables to the local community. There is also a vibrant fishing club at Goscote too.

We have redesigned our front of house duty system. This has worked well, with a significant reduction of people awaiting an initial assessment, and all cases now responded to quickly.

7. **Integrated Intermediate – Health and Adult Social Care**

Our services are primarily tasked with supporting people in avoiding unnecessary hospital admission, expediting timely hospital discharge and rehabilitating people through recovery to return home with a variety of levels of independency.

The Services are made up of the Integrated Discharge Team within the Manor Hospital, Community Reablement Team and Hollybank House. The aim is to both avert hospital admission and facilitate discharge.

The services have performed well overall despite significant pressures particularly in hospital discharge where local and Out of Borough hospitals are under considerable and prolonged pressure.

The Integrated Discharge Team commenced the year as the most improved performer of 14 local Councils with 6 months sustained improvement in Delayed Transfers of Care leaping 27 places in the ADASS monitoring. Significant increases in patient admissions, market capacity pressures and staffing capacity have curtailed such improvement on the lead into winter.

The Reablement Service has continued to perform well, despite regularly working beyond its staffing capacity. The service has increased capacity by 100 hours this year.

Hollybank House offers a more intense level of bed based rehabilitation for its 21 service users. The service has an average stay of 23 days, which makes it a good performer.

Both services were inspected by The Care Quality Commission in July 16 and rated as *“good across all 5 key areas, Safe / Effective / Caring / Responsive and Well-led”*.

8. **Better Care Fund – Highlights and Successes**

The Better Care Fund is a joint approach between health and care to create joint services and a pot of money that is pooled between the agencies to focus on those who are most in need. We are looking to further enhance this in 2017/18 through maximising the use of technology, family and community support networks and related services (such as housing and voluntary sector) that lead to a general improvement in population health and a reduction in health inequalities for our Walsall population.

9. **Mental Health**

There are several developments in train in mental health services: transforming outpatients, inpatients, out of area rehabilitation, integration for mental health in primary care settings and improving access to mental health. In our plans to improve access to specific primary care services for anxiety and depression, rates are improving alongside shorter waiting times and improved recovery rates. A dedicated community based eating disorder service (under 18's) will be implemented in January 2017.

10. **Money Home Job**

The Money Home Job service has reduced in size significantly over the last two years and will continue to do so in the coming four years. Although there are now significantly less staff working within the service, customers are receiving their Housing Benefit much faster than before, with our performance being consistently better in the last nine months than in the previous three years.

Next year we will build on that success by streamlining the housing, welfare rights and crisis support services. The new structure will cost significantly less but continue to meet the needs of our most vulnerable residents. We will reduce duplication and improve efficiency by combining the 3 existing teams to 1. The number of management posts will reduce and front-line officers will be supported to develop new skills that more closely align to the needs of our residents. Changes in shift patterns, roles and responsibilities will not only promote greater flexibility in service delivery, but also assist our staff to get a better work-life balance. We will invest in improving our website and introducing web-based self-help tools to support more residents to access the information they need to be able to solve their own problems.

Work has already commenced to give homeless people living on the streets more help. In response to the increasing number of people in need, for the first time the night shelter at the Glebe Centre has been open regardless of the weather, for a complete month covering Christmas and into the new-year. This is an example of how the Council can work collaboratively with the voluntary sector to deliver improved value for money and better support for the most vulnerable in society. Individuals accessing the shelter will be given intensive support during the month to help them to secure accommodation and help get them off the streets.

We also intend to crack down on rogue landlords with more staff now focusing on helping to support local people who find themselves in difficulty due to poor quality accommodation and landlords who flout their obligations. Walsall requires a balance of different types of accommodation. Sadly this balance can be disturbed by increasing numbers of inappropriate accommodation. We intend to build on our success in the recent ruling regarding Providence Chapel in Willenhall to ensure that appropriate controls are in place to prevent inappropriate development.

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29 December 2016