## Public Document Pack

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29 February 2024

Dear Member,

## Health and Adult Social Care Scrutiny Committee - Wednesday, 6 March 2024

Please find enclosed the following documents for consideration at the meeting of the Health and Adult Social Care Scrutiny Committee on Wednesday, 6 March 2024 which were unavailable when the agenda was published.

#### Agenda No Item

- 6. University Hospitals Sussex NHS Foundation Trust: Report by the Care Quality Commission – Cover Report and Presentation (Pages 3 - 30)
- 7. Update on the delivery of the two-year improvement programme 2023-25 to assist the delivery of the Adult Social Care Strategy 2022-25 and preparation for Care Quality Commission Assurance of Adult Social Care – Appendix A (Pages 31 - 68)

Yours sincerely

Tony Kershaw Director of Law and Assurance

#### To all members of the Health and Adult Social Care Scrutiny Committee

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#### Health and Adult Social Care Scrutiny Committee

#### 6 March 2024

## University Hospitals Sussex NHS Foundation Trust: Report by the Care Quality Commission

#### **Report by Director of Law and Assurance**

#### Summary

University Hospitals Sussex NHS Foundation Trust (UHS) was created on 1 April 2021 through the merger of Western Sussex Hospitals and Brighton and Sussex University Hospitals NHS Trusts. The Trust has recently received the publication of the report relating to the latest Care Quality Commission (CQC) visit to its main acute sites, in August 2023. The report announced new individual ratings for each of the four hospitals, after inspecting the Surgery and Medicine divisions, but this will not change the overall organisational CQC rating. The CQC is now rating St Richard's, Worthing and Princess Royal hospitals as "Requires Improvement". For St Richard's and Worthing, that is a drop from the previous "Outstanding" ratings. In addition the Royal Sussex County Hospital is also rated as "Requires Improvement" (having previously been classified as Inadequate). The presentation (Appendix A) updates the Committee on the findings of the inspection and sets out the actions put in place to address these.

#### **Focus for scrutiny**

The focus for scrutiny is to seek assurance that actions are being put in place to address areas of concern raised by the CQC.

Key lines of enquiry include:

- 1) The effectiveness and resilience of measures taken to improve services
- 2) Whether any further improvements are planned or required
- 3) The impact on service users and their families/carers as appropriate
- 4) To identify whether any further scrutiny of this matter could add value

The Chairman will summarise the output of the debate for consideration by the Committee, with conclusions to be shared with University Hospitals Sussex NHS Foundation Trust.

#### Details

The background and context to this item for scrutiny are set out in the attached report. There are no resource or risk implications directly affecting West Sussex County Council, as this is a report by the NHS, relating to NHS services.

#### **Tony Kershaw**

Director of Law and Assurance

**Contact Officer:** Rachel Allan, Senior Advisor Democratic Services, tel: 0330 222 8966 or e-mail: <u>rachel.allan@westsussex.gov.uk</u>

Appendix A: Presentation by University Hospitals Sussex NHS Foundation Trust

#### Background papers

None



NHS Foundation Trust

# West Sussex HASC

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Dr George Findlay | Chief Executive Officer March 2024



- Pressures
- Progress
- ► RSCH performance
- Page 6
- ► CQC
- Improvement programmes
- ► Challenges
- Investments

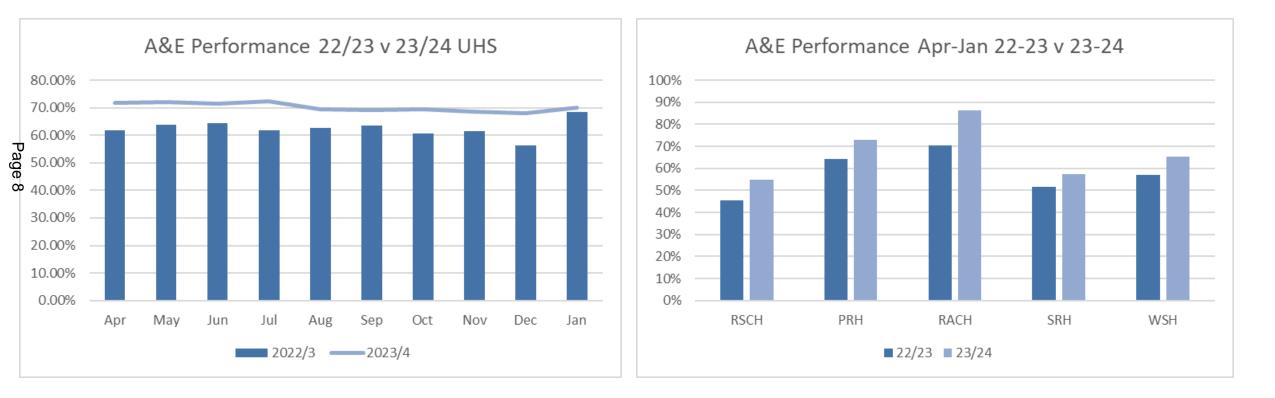


## **Pressures**

- Too many patients continue to wait too long for both elective and emergency care
- This is both a national issue and a leading priority for University Hospitals Sussex
- We are now beginning to make sustained progress in reducing waiting times
- Exceptional hard work of colleagues new ways of working and longer hours
- ► The last two months have been incredibly challenging toughest of the winter so far
- Multitude of issues high demand for services, high acuity, and difficulties discharging patients

# **Progress: emergency care**

## Improvements in our four-hour performance



70% of patients treated, admitted or discharged within four hours in January.



NHS

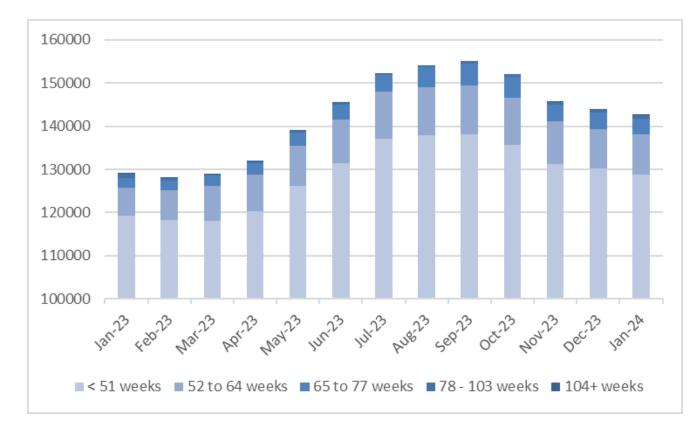
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**University Hospitals Sussex** 



# **Progress: elective care**

## Improvements in our waiting list

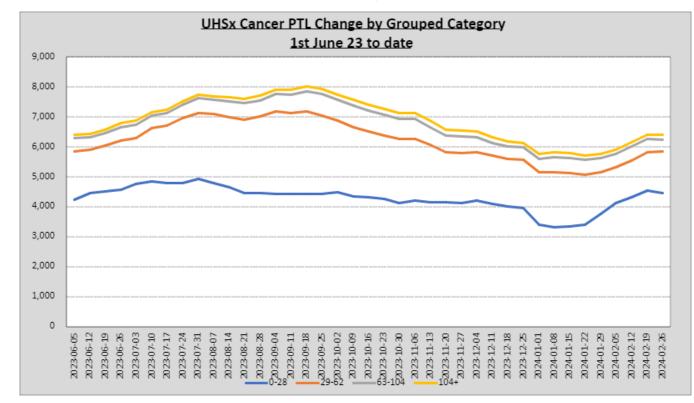


Total waiting list reduced by 11,000 patients in 11 weeks leading up to Christmas – reduction sustained into 2024, despite two long periods of industrial action and significant winter pressures



## **Progress: cancer care**

## Improvements in our waiting lists



Total waiting list has reduced materially since September.

# **Regulatory compliance and assurance**

Since UHSussex was created in April 2021, we have had numerous inspections from the CQC. RSCH has received eight inspections.

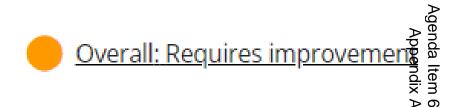
The most recent inspection of our hospitals was in August 2023, looking at Surgery and Medicine at our main hospital sites.

The CQC published four new hospital reports last month, with each hospital now rated as "Requires Improvement" overall.



University Hospitals Susses

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# **New reports published February 2023 - themes**

While each report is distinct and relates to an individual hospital, there are some common themes. For example:

| Working well                                      | Requires improvement                                     |  |  |
|---|--|--|--|
| Compassion and kindness, privacy and dignity      | Pressures on access and responsiveness,                  |  |  |
| Teams work well together                          | especially regarding cancer care                         |  |  |
| Staff involved people and met their needs         | Not always getting the basics right, from                |  |  |
| Staff supported people to live healthier lives    | consistency of reporting to secure storage of notes etc. |  |  |
| Local leaders were visible, skilled and effective | Visibility of senior leadership                          |  |  |

We are currently preparing our formal response to present to the CQC on 4 April 2024.



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**University Hospitals Sussex** 

# University Hospitals Sussex NHS Foundation Trust Princess Royal Hospital

### **Inspection report**

Lewes Road Haywards Heath RH16 4EX Tel: 01444441881

Date of inspection visit: 1 to 3 August 2023 Date of publication: N/A (DRAFT)

### Ratings

## Overall rating for this location

Are services safe?

Are services effective?

Are services caring?

Are services responsive to people's needs?

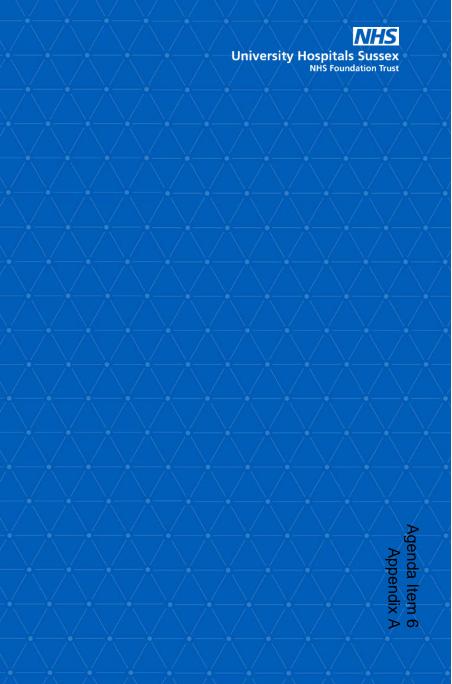
Are services well-led?

#### Requires Improvement 🔴

Requires Improvement Good Good

Requires Improvement 🧲

Requires Improvement



# University Hospitals Sussex NHS Foundation Trust St Richard's Hospital

#### Inspection report

St Richards Hospital Spitalfield Lane Chichester PO19 6SE Tel: 01243788122 www.westernsussexhospitals.nhs.uk

Date of inspection visit: 1 to 3 August 2023 Date of publication: N/A (DRAFT)

### Ratings

Page 14

## Overall rating for this location

Are services safe? Are services effective?

Are services caring?

Are services responsive to people's needs?

Are services well-led?

#### Requires Improvement 🧲

Requires Improvement

Outstanding 🏠

Good (

Requires Improvement 🥚

Requires Improvement 🥚

|  |  | University Hospitals Sussex<br>NHS Foundation Trues<br>Poundation Trues   |      |
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# University Hospitals Sussex NHS Foundation Trust Worthing Hospital

### **Inspection report**

Lyndhurst Road Worthing BN11 2DH Tel: 01903205111 www.westernsussexhospitals.nhs.uk

Date of inspection visit: 1 to 3 August 2023 Date of publication: N/A (DRAFT)

## Ratings

Page

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## Overall rating for this location

| Are services safe?                         |  |
|--|--|
| Are services effective?                    |  |
| Are services caring?                       |  |
| Are services responsive to people's needs? |  |
| Are services well-led?                     |  |

#### Requires Improvement 🔴

Requires Improvement

Requires Improvement 🥚

Outstanding 🏠

Requires Improvement 🧲

Requires Improvement



# University Hospitals Sussex NHS Foundation Trust Royal Sussex County Hospital

### **Inspection report**

Eastern Road Brighton BN2 5BE Tel: 01273696955 www.bsuh.nhs.uk

Date of inspection visit: 1 to 3 August 2023 Date of publication: N/A (DRAFT)

## Ratings

Page 16

## Overall rating for this location

Are services safe? Are services effective? Are services caring?

Are services responsive to people's needs?

Are services well-led?

#### Requires Improvement 🔴

Requires Improvement

Requires Improvement 🥚

Outstanding 🏠

Requires Improvement 🥚

Requires Improvement 🥚

| University Hospitals Sussex<br>NHS Foundation Trops<br>Ppendix A<br>A<br>6 |
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# New Surgery ratings

|         |                           | Overall                 | Safe                    | Effective               | Caring | Responsive             | Well-led                |  |  |            |  |
|---------|---------------------------|-------------------------|-------------------------|-------------------------|--------|------------------------|-------------------------|--|--|------------|--|
|         | Princess<br>Royal         | Requires<br>Improvement | Requires<br>Improvement | Good                    | Good   | Inadequate             | Requires<br>Improvement |  |  |            |  |
| Page 17 | St<br>Richard's           | Requires<br>Improvement | Requires<br>Improvement | Requires<br>Improvement | Good   | <b>Inadequate</b>      | Requires<br>Improvement |  |  |            |  |
|         | Royal<br>Sussex<br>County | Requires<br>Improvement | Requires<br>Improvement | Requires<br>Improvement | Good   | <b>O</b><br>Inadequate | Requires<br>Improvement |  |  |            |  |
|         | Worthing                  | Requires<br>Improvement | Requires<br>Improvement | Requires<br>Improvement | Good   | <b>O</b><br>Inadequate | Requires<br>Improvement |  |  | Appendix A |  |

# **New Medicine ratings**

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### NHS

University Hospitals Sussex NHS Foundation Trust

# Agenda Item Appendix A

|                           | Overall                 | Safe                    | Effective               | Caring | Responsive              | Well-led                | X A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A<br>A |
|---------------------------|-------------------------|-------------------------|-------------------------|--------|-------------------------|-------------------------|---|
| Royal<br>Sussex<br>County | Requires<br>Improvement | Requires<br>Improvement | Requires<br>Improvement | Good   | Requires<br>Improvement | Requires<br>Improvement |   |
| Worthing                  | Requires<br>Improvement | Requires<br>Improvement | Requires<br>Improvement | Good   | Requires<br>Improvement | Requires<br>Improvement |   |

# **Must Do actions required**

- Overall, the reports include 72 required actions related to our four main hospitals, plus 13 'should do' actions.
  - All hospital specific improvement actions will be implemented Trust-wide.
  - Taken as a whole, there are around 29 broad themes to be addressed.
- We are currently preparing our formal response to present to the CQC on 4 April 2024.
- All actions will be incorporated into our comprehensive and executive led Quality and Safety Improvement Programme (QSIP).

# Making improvements through QSIP



### Key deliverables in each workstream:-

| Improving Quality Governance, Risk Well-Led<br>Management & Assurance   |   | Improving Access to Surgery  | Improving Safety Culture  |  |  |
|---|---|--|---|--|--|
| <ul> <li>The standards that need to be delivered</li> <li>The policies that support this</li> <li>The measurement of how well we are doing</li> <li>How we need to improve our gaps</li> <li>The provision of assurance</li> <li>CQC must and should dos</li> </ul> | Overseeing the delivery<br>of well-led<br>improvements, based<br>on CQC requirements<br>and best-practice | <ul> <li>Focus supporting divisions with<br/>onward improvements, many initiated<br/>through the Improving General<br/>Surgery corporate project</li> <li>Right-sizing theatre capacity across<br/>the Trust</li> <li>Ensure the provision of surgery is<br/>maximised across the Trust</li> </ul> | <ul> <li>Improve safety culture in the Trust, ensuring that relevant training is embedded</li> <li>Delivery of a framework tool to help effectively measure safety culture</li> <li>Enhance the effectiveness of reporting and feedback, and embed an open, learning culture</li> </ul> |  |  |

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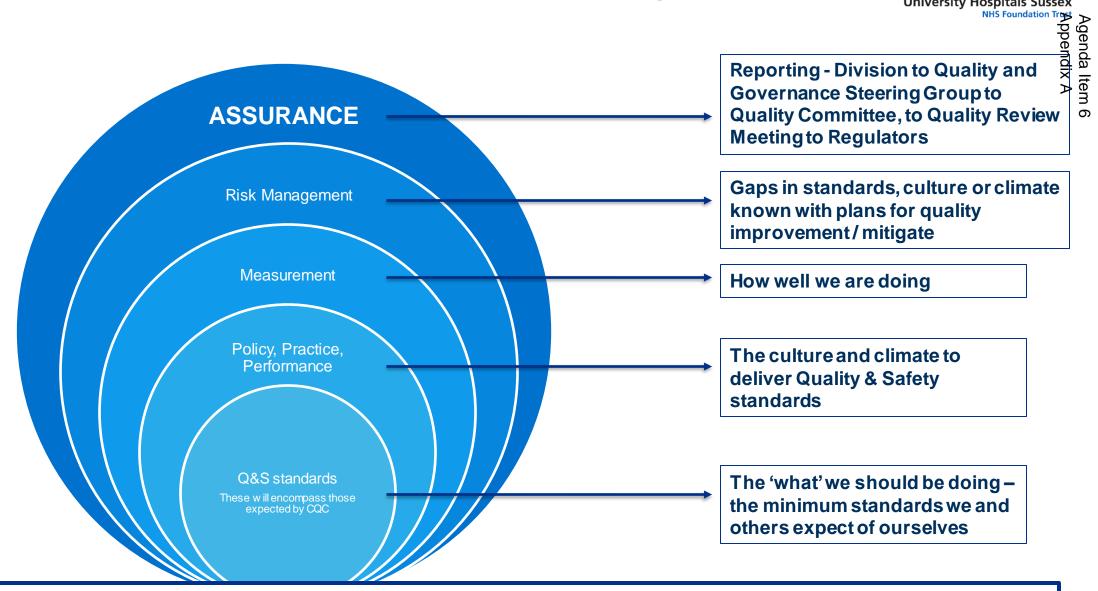
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**University Hospitals Sussex** 

# **QSIP – Top-Level Programme Plan**

| Oct-Nov 23  |                                      |   | Dec  | : 23  | Jan 24 –<br>Sep 24  | Oct 24 –<br>Mar 25   |
|---|--------------------------------------|---|--|---|---|--|
| Scoping & design of programme. Project<br>Charters agreed |                                      |   |  | lines and agree<br>t trajectories   | Improvements  | Sustain &<br>Monitor   |
| Explore and<br>agree<br>programme<br>deliverables         | Establish<br>programme<br>governance | Identify and<br>release<br>resources to<br>support<br>programme | Programme<br>scorecard<br>created, from<br>workstream<br>KPIs, to<br>enable<br>tracking of<br>improvement<br>metrics against<br>agreed targets | Ensure<br>enabling<br>workstreams<br>are engaged<br>across the<br>programme | Delivery of<br>improvements<br>according to<br>workstream<br>priorities | To ensure<br>improvements<br>have been<br>maintained;<br>establish BAU<br>and ensure<br>sustainable<br>processes in<br>place |

# **QSIP** – how we ensure this becomes our BAU



OUTCOME: the creation of ward-to-board evidence bank that provides necessary assurance to all parties at the touch of a button



## **QSIP** supports broader Patient First strategy



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# **Patient First objectives**





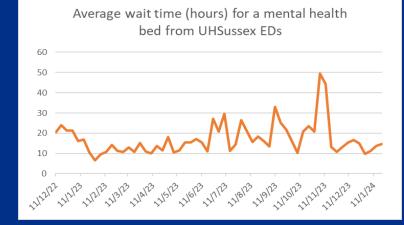




# **Support**

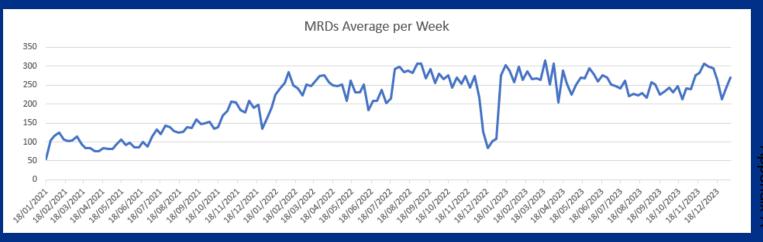
## **Ongoing support**

- Remaining in Oversight level 3
- Developing emergency improvement plans
- Investing in developing Acute Floor at RSCH
- Chief Culture and Organisational Development Officer



## **Further support**

- MFD patients
- Apr 21: 100/day
- Dec 23: 300/day
- Biggest rise in pathway 2



# **Operation Bramber update**

Sussex Police are looking into possible cases of medical negligence – primarily connected to general surgery and neurosurgery at RSCH – between 2015 and 2021.

We are fully supportive of this action and are helping officers in any way we can, but we are not directly involved in their work and cannot directly discuss their inquiry.

We know how difficult this is for patients and their families and doing what we can to support them within the restrictions imposed upon us.

Intense and sometimes misleading media coverage is adding further complexity to a difficult situation and undermining confidence in the safety of our services.

Our data and due diligence, national benchmarking and external reviews show services are safe.



# **Investing in our hospitals**

Louisa Martindale Building new home to more than 30 wards and departments at RSCH.

New Southlands Community Diagnostic Centre open - treated 14,000 patients in first three months.

£50m Acute Floor Reconfiguration programme underway to improve A&E at RSCH.

New Acute Stroke Centre plans approved for St Richard's Hospital.

Revised planning application for new £150m Sussex Cancer Centre being submitted soon.

New restaurants for public and staff opening this summer at Worthing and St Richard's.



# **Summary**

- Performance beginning to improve
- But multiple challenges persist
- Staff working exceptionally hard
- ► We must support them and recognise their achievements



# Thank you

University Hospitals Sussex NHS Foundation Trust

Thank you for your support

Any questions?



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## **Care Quality Commission Self-Assessment Report**

This self-assessment will be updated quarterly

West Sussex County Council Adult Services Care Quality Commission Self-Assessment Report

**Contents: Overview and Summary Theme 1: Working with People Theme 2: Providing Support** Theme 3: Ensuring Safety within the System **Theme 4: Leadership** Download PDF 🔒 <u>Print full report</u> **Overview and Theme 1: Working Theme 2 Providing** with People **Support Summary Theme 3: Ensuring Theme 4: Leadership Safety within the System** 

## **Overview and Summary**

West Sussex West Sussex is a county of 769 square miles in the Southeast of England, bordered by Hampshire, Surrey, Brighton & Hove, and East Sussex. The county has a two-tier system of government, comprising West Sussex County Council (the council) and five district and two borough councils, these are respectively, Adur, Arun, Chichester, Horsham, Mid Sussex, and Crawley and Worthing. It has a high concentration of coastal communities, as well as an extensive rural area, with over half of the land area being designated as protected countryside, including a large swath of the South Downs National Park, which cuts across the county.

The county has a significant London commuter population, located in Mid Sussex and Horsham. As well as its large rural and coastal presence, the location of Gatwick International Airport within the county boundaries is a noticeable draw for people looking to reside and/or work in West Sussex.

From the latest population estimates the county's population is around 892,400, an increase of 9.2% over the last 10 years. West Sussex has seen a higher percentage increase in total population than seen at a national (England) and regional level. The largest increases in population have been in the older age groups, including a rise of 18% in the 65+ age group. The population aged 65 years and over make up 23% of the total population of the county, an increase from the 21% seen ten years previously, and is a larger proportion than seen nationally (18.6%). Arun has the highest proportion of 65 years + at 29%, compared to Crawley, the lowest at 13.4%. The population in West Sussex is projected to increase by a further 6.5% from 2018 to 2028 with larger increases projected in the 65+ age group (21%) and the 85+ age group (19%).

Whilst the economy of West Sussex is seen as generally successful, productivity remains at lower than the national average with a lot of employment in lower value sectors, while skills levels are high in some areas they lag in others, and there are pockets of deprivation, particularly in the coastal areas and in Crawley with some areas ranking in the 10% most deprived areas in England.

Residents generally have a longer life expectancy when compared with England with a life expectancy for men at 80.8 years and 84.2 years for women (2016-18). However, this masks considerable inequality and differences between geographical areas and population groups. There are considerable differences between the life expectancy of the overall population and people with mental health needs and those with disabilities, including learning disabilities. Source: <u>West Sussex Joint Strategic Needs Assessment</u>.

West Sussex has an adult population (aged 18 years and over) of 715,100 which makes up 80% of the total population, a slightly higher proportion than the national and regional average. The council's Adults Services supports 1.2% of the adult population, of which the majority (59%) are older people. This number is forecast to increase by over five hundred in the next five years. Around 60% of people needing care in a care home are able to fund the costs of their care themselves from savings, investments, benefits, pension and other income, these are known as self-funders.

#### **Our Corporate Plan**

Developed from the Council's reset plan in 2020/21, <u>'Our Council Plan 2021-2025</u>' sets out the council's priorities over the next four years and the outcomes we want to achieve for people who live and work in West Sussex. Our focus is on four priorities, which are:

- Keeping people safe from vulnerable situations
- A sustainable and prosperous economy
- Helping people and communities to fulfil their potential
- Making the best use of resources

These priorities are underpinned by a cross-cutting theme of protecting the environment.

#### **Our Local Account**

Our Local Account is published on an annual basis and reports on the performance of our adult social care services. This provides information on our successes, challenges, areas where improvements are underway and how well we have been performing against local and national priorities. The report includes an annual contribution from the Customer and Carer Group and the Chair of our Minorities Health and Social Care Group.

#### **Our Budget and Performance**

Our budget for adult social care in 2024/25 is approximately £263m, which has risen by 28% over the last five y Agendas Item 7 enabled fee uplifts to be paid to providers which have recognised the impact of the National Living Wage. Around 95% of this relates to the cost of funding the social care needs of approximately 8,500 residents who meet the national eligibility criteria in the Care Act. The Council has also committed £8m of additional funding to deliver a programme of improvement within the adult social care directorate, which will build on the significant work to date.

Adult Services performance is monitored through the council's quarterly Performance and Resources Report, which is considered by County Council Scrutiny Committees and final oversight by the Cabinet. There are 9 corporate Key Performance Indicators (KPIs) for Adults Services which help us to analyse and assess our performance in specific areas. Some of these measures are taken from the Adult Social Care Outcomes Framework (ASCOF). Measures from the ASCOF 2022/23 enable us to better reflect our performance, identify where our gaps are and continue to focus our improvement. Overall satisfaction of people who use services with their care and support in West Sussex is 67.7%, against an England average of 64.4%.

#### 'The life you want to lead'- our Adult Social Care Strategy 2022-25

In 2021 we co-designed our 3-year <u>Adult Social Care Strategy</u> with customers, family and friend carers, Council staff and partners including the Voluntary and Community Sector (VCSE). Through a series of focus groups, 1:1 interviews, workshops and a survey; plus oversight from a 'Sounding Board' made up of local partners; over a thousand people were part of the process to build a strategy that reflects their voice and what they want adult social to look and feel like to them. The strategy sets out five priorities:

- Relationships and connections
- Home
- Empowerment
- Addressing gaps
- Inclusion and tackling inequalities

The priorities set out in the strategy drive the way we deliver services in West Sussex and are the guiding principles and areas for action behind our improvement journey.

Our ambition is to be a well performing council with adult social care services that are person-centred and meet the needs of our population. However, we recognise we are still on a journey of improvement and have been making strong progress over the past two years. In 2021/22, we put in place the foundation for a successful adult social care service:

- Adult Social Care Strategy 2022-25 co-designed with local people and partners and focused on the priorities of adult social care customers and carers
- Programme Management Office (PMO) new PMO established to design and deliver the improvement programme
- Governance new governance established to shape and provide oversight of financial savings and wider improvement work
- Partnerships new VCSE Collaboration Board established to oversee the delivery of the new adult social care strategy in partnership with the VCSE. We continue to be a lead partner in developing our West Sussex place-based health and care partnership with the NHS, as part of Sussex Integrated Care System, as well as the continued development of district-based Local Community Networks.
- Our population population needs analysis undertaken to better understand current and future demand for adult social care services
- Service-specific reviews a review of the commissioning functions for all people services undertaken (adult social care, children's social care, public health and communities) to shape the service required in the future.

In 2022/23, we built on these foundations to begin delivering changes to the way we structure and deliver our services, to reflect what people told us in our Adult Social Care Strategy:

- Adult social care market developed a new Market Sustainability Plan for the older people care market
- **Commissioning** following the review of commissioning we have:
  - $\circ$  restructured the adult services commissioning team, including new Leadership and reprofiled roles for staff
  - Joint commissioning
    - reviewed our Section 75 agreement and contracts with the NHS to identify where services could be delivered better; and
    - reviewed current intermediate care pathways to support care in the community and out of hospital
  - Collaboration established a new commissioning forum across 'people services' to work together on commissioning projects and support business infrastructure. This includes a new workforce development programme for over 100 members of staff, launching in 2024
- **Operational services** delivered a new protocol and pathway for young people to transition from children's services to adult services
- **Business infrastructure** undertaken an extensive mapping exercise to look at 'as-is' pathways for customers on their journey through our services, to identify where further improvements need to be made.

We have chosen the areas we are most proud of across the themes below as a result of analysis of our Care Act 2014 compliance or

#### Page 33

those areas where we have made good progress over the past two years. Our areas of development have been chosen from a Agenda do analysis undertaken above, feedback from staff, feedback from complaints or because the work is key to delivering our Adult Social Care Strategy.

Last updated: 21 February 2024

### **Staff Views**

As part of our self-assessment process, in June 2023 we invited all staff in the service to share their views on how we are performing in relation to the CQC quality statements. In total, 219 staff responded and some of the findings from the survey are included throughout our self-assessment.

We have experienced a high turnover of senior leadership over the last five years which is acknowledged in the narrative used by staff and partners reflecting on previous relationships and behaviours and its impact upon the service. There is a recognition that the current leadership is enabling ongoing culture change in part through the appointment of an experienced permanent Director and the creation of new Assistant Director roles. Structures have also been realigned to ensure we have clear lines of accountability and that officers across the directorate sit within the relevant specialist area.

Further to this, the development of the strategy has given us valuable insight on customer experience, what is important for them and what they want from their care going forward, which has enabled us to develop our annual Adults and Health Business Plan, to set out how we will deliver the priorities in our strategy and achieve the outcomes in Our Council Plan.

Our business plan sets out our key activities, including those as part of our improvement programme, as illustrated in the diagram above. The improvement programme is being overseen by a newly created Assistant Director of Improvement & Assurance and this oversight will ensure that we remain on track and keep the pace needed on our improvement journey.

Overarching activities including co-production; assurance and improvement; managing our budget; and equality, diversity, and inclusion form part of all these activities, which are grouped as follows:

#### Practice

We continue to embed a strength-based approach to practice through a broad range of development initiatives supported by the implementation of a Resource Allocation System (RAS) and carrying out our duties under the Care Act 2014. Dedicated review teams will continue to ensure that our strategic objectives are being fulfilled.

New protocols for the transition pathway have been jointly developed in conjunction with colleagues in Education and Children's Social Care and work is underway to embed these new ways of working into operational practice.

#### **Service Improvement**

Having the time to understand and map our current services and customer journey has been crucial and has identified areas for improvement. Business analysis completed to date and the voices of local people who developed the adult social care strategy, will inform our approach to co-designing care pathways with customers, carers and staff, utilising the co-production toolkit we have previously developed which has been adopted as best practice.

#### Commissioning

As a core enabler to excellent adult social care services, we have revised our commissioning team structure, which continues to be embedded, including staff skills development. Work will focus on the development of new commissioning strategies and more modern, cost-effective models of commissioning such as individual service funds, as well as building on the Market Sustainability Plan and continuing to shape, manage, and support the care market. Existing S75 agreements continue to be reviewed in partnership with our health colleagues, to ensure the arrangements will deliver the best outcomes for our customers.

#### Workforce

Our workforce plan will evolve to meet the challenges we face. We work with our partners to develop innovative plans for attracting, developing, and retaining the skills and talent we need. Our plan outlines our approach to ensuring our workforce best supports the delivery of our adult social care strategy. Through embedding a strengths-based approach we create a supportive and trusting working environment that empowers our workforce to meet expectations and deliver services in the way our customers need. We are investing in a programme to develop our leaders and in particular our wider commissioning workforce.

# Working in Partnership (Health)

The West Sussex Health and Care Partnership brings together key local health and care partner organisations including NHS Trusts, Primary Care, and Public Health to work collaboratively at 'Place' to deliver the objectives of the Joint Health and Wellbeing Strategy, the Adult Social Care Strategy, and the Sussex-wide Integrated Care Strategy, Improving Lives Together, through a placebased focus on the Shared Delivery Plan.

This supports the delivery of our locally agreed plans and programmes of transformation for the recovery, stabilisation and future sustainability of our health and care system. We work together as a system to ensure a focus on population health and prevention, and deliver high quality, joined-up care, and improved health outcomes, through integrated operational models such as Local Community Networks that enable this for the population in West Sussex. The four priority areas for the Integrated Care System (ICS) delivery plan are:

- Long-term improvement priorities
- Immediate improvement priorities
- Continuous improvement areas
- Health and Wellbeing strategies and place-based partnerships

Locally in West Sussex we have continued to have a focus on developing a community-led approach to health and wellbeing, continuing to support our district and borough-level Local Community Networks. These are an important foundation for the development of 'Integrated Community Teams' which are the Sussex ICS design for neighbourhood care models.

Our Place-based Health and Care Partnership has continued to develop, with the three purposes of tackling health inequality, integrating services, and delivering transformation together. We have developed two key programmes of work for Adult Social Care to deliver in Partnership with the NHS:

- Improving Hospital Discharge
- Improving Intermediate Care Services.

Both programmes have been developed as priorities based upon local evidence as well as feedback from peer-review processes.

# **Overarching Activities**

## **Co-production and Working in Partnership**

We are committed to realising the service's vision for coproduction and involvement through a staff survey it was fed back the service should focus more on involving people with lived experience and be more proactive and inclusive in engaging these groups, understanding their experiences, and working with them to improve services. Therefore, underpinning our improvement programme and part of our governance is a new Design Panel, made up of customers, carers, staff and other stakeholders. The Design Panel has been part of developing principles for our improvement journey over the next two years and will be involved in the changes we make to services. This will be one of the cornerstones of the programme of improvement, as we will be involving people before we make changes.

The VCSE Collaboration Board, Chaired by a member of the VCSE, has been in place since 2022 and is attended by the Director of Adult Services and other senior staff. The board has supported the establishment of a new co-production Practitioner Group comprising staff and stakeholders, and a senior leader customer and carer engagement forum established in 2023. These groups have been able to shape improvement projects over the past two years, meaning we have customer and carer voices in the development of improvement work. Also in place is our county-wide stakeholder network, involving VCSE organisations, the NHS, district, borough and parish councils and other partners with whom we engage and exchange information.

## **Managing our Budget**

As set out in Our Council Plan 2021-2025, we will make the best use of our available resources, achieving value for money and delivering cost effective services. When deciding how to deploy our resources, or working with partners to deliver our collective ambitions, we use the priorities expressed in both our council plan and the Adult Social Care Strategy to help guide our decisions, using data and information that is available on our residents' needs to deliver the right things efficiently and effectively.

## **Equality, Diversity and Inclusion**

As a service we ensure that we deliver the County Council's Diversity and Inclusion policy which sets out the Council's commitment to deliver fair and inclusive services for all West Sussex communities. Decisions taken include an assessment of any equality implications of proposals and how, if necessary, these will be mitigated for people with characteristics whose interests are protected by law. Our long-standing Customer and Carer Group, Minorities Health and Social Care Group and Learning Disability and Autism Partnership Boards meet regularly and serve as critical friends to the service.

## **Spotlight: Co-Production**

Adult social care staff and customers held a Directly Provided Services Co -Production event last year in support of people and organisations working together to share influence, skills, and experience to design, deliver and monitor care services and projects. This event provided an opportunity to showcase and celebrate many of the social care co -production projects during 2022, as well as facilitate networking and future planning, including the newly designed co -production toolkit for staff to utilise

Information about the event has been shared widely throughout the council, encouraging all staff to utilise the co-production toolkit to help them to think through what co-production would mean for their work. This is a live document which will be amended as we do and learn more. We continue to work towards embedding a co-production approach across more of our activities, a recent example being the development of a set of design principles for our improvement programme. In 2022, we co-designed our financial assessment customer information booklets with members of the Customer and Carer Group and our VCSE colleagues. This comprised informal interviews, workshop sessions and meeting discussions.

## **Working with People**

In the overview and summary section above, we have described how our front-line services have been on a major change journey since Covid-19. In this section we include examples which demonstrate that change, either in terms of the at or the how. We have also focused on areas which are key to the next stage in our improvement journey

#### What we are most proud of

- The development of our mental health service offer provided by adult social care to deliver a progressive service that is aiming to be a centre of excellence
- Our Prevention Assessment Teams are ensuring people who might otherwise not be eligible for adult social care have access to multi-disciplinary, community centred support, advice and guidance, at an early stage in their journey
- The development of our extra care model to increase choice and control by providing customers with housing that enables independence

#### **Areas for Improvement**

- Continued development of our strengths-based approach to practice, streamlining and embedding customer feedback into the customer journey ensuring a person centred-approach.
- Focus on managing demand for assessments, review, and deprivation of liberty safeguards (DoLS) requests
- Further work on improving our hospital discharge process

"We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them".

#### **Assessing Needs**

Assessment has been a major focus for us with an increase in demand and complexity, particularly as a result of the Covid-19 pandemic, which has been experienced nationally. Activity has been multi-faceted, but at a high level has been centred around implementing a new workflow and assessment tool and developing our strengths-based practice model, to focus on a person-centred journey rather than a system led one, with a focus on supporting those customers already in receipt of care and support. 71% of staff (73% of frontline staff) agreed that the service maximised the effectiveness of people's care and support by assessing and reviewing their health, care, wellbeing, and communication needs with them. Staff commented on the effect on customers and carers of delays caused by demand pressures and workforce shortages. They also emphasised the impact of this situation on their practice, such as delivering a strength-based approach, and their wellbeing.

#### **Supporting Carers**

Carers Support West Sussex (CSWS) holds the carers register for the council and currently have over 31,279 active carers registered for the service. CSWS has recently been awarded a five year contract to continue to provide services to the County's carers showing the councils ongoing commitment to support this group. A recent letter from the Minister of State for Social Care has recognised Carers Support West Sussex as a model of good practice and it is our ambition to continue build on this positive work. The Council's Carers Strategy, places carers and caring at the heart of the Council's strategic ambition. During stakeholder consultations in respect of the strategy the need for better carer training for the workforce was identified as a priority. Since then, a new Young Carer Awareness Course has been produced and is on our Learning and Development Gateway which is available both internally and to outside organisations. It is proposed to use Department of Health and Social Care (DHSC) Accelerating Reform Fund monies

to provide a new overarching programme of digital / technology-enabled services which addresses local strategic priorities for Ages de the addresses local strategic priorities for Ages de the addresses local strategic priorities for Sussex This will be done through two projects delivered across the footprint of the Sussex ICS and will consist of the following:

- Develop a digital carers pathway, from identification to support: Digitised Carers Services; E-Carers Cards provide identification, "passports", access to discounts and link to contingency plans with links into Carers Centre websites, localised offers and potential links with the NHS Shared Care Record, on-line carer self-assessment tools and automated solutions for keeping in touch with carers over the course of their caring journey.
- Develop the use of Mainstream Technology for carers including building on the current East Sussex County Council "Alexa" pilot with clients and Carers Support West Sussex Carer Equipment Service. As mainstream' technology is now more affordable and more present in people's homes than ever before, there is a need to explore its scope for supporting carers and the independence of the people they care for.

### Strength-based practice - ensuring person-centred support for all customers

As part of embedding a strength-based approach to practice, we launched revised guidance, systems, and processes from April 2023. The implementation of this approach to practice and the use of reflective forums across all operational areas, has produced examples of good customer journeys and change stories.

Work has involved a whole service training and development programme from workshops and surgeries to specific sessions as part of induction, Assessed and Supported Year in employment for newly qualified social workers (AYSE), international recruits and Continuing Professional Development (CPD) programmes.

Waiting lists in West Sussex reflect the national position and includes those waiting for assessment, a service, and waiting for a review, including people waiting for assessment and service in hospital discharge pathways and DoLs backlogs The Government Market Sustainability and Improvement Fund (MSIF) has allocated £5m to West Sussex County Council, a proportion of this will be directed towards the management of waiting times. We have introduced a risk-based RAG (Red, Amber, Green) rating approach to ensure people with urgent needs receive timely assessment and support and prioritisation is based on risk and safeguarding. This has led to much slower increases in the size of waiting lists overall, and in some teams, for example, people waiting for an Occupational Therapy (OT) assessment, a reduction. Our performance in a number of review areas has improved and is monitored through our wider Performance and Resources Report, which is updated quarterly and published on our website.

When responding to requests for assessment, if a customer is in crisis, then teams are generally able to respond immediately or within 24 – 48hrs as appropriate, to mitigate any immediate issues. All referrals are prioritised on receipt, as either urgent, normal or low. Customers waiting are frequently reviewed and reprioritised if their circumstances change, to ensure that those people with the most pressing needs are responded to in as timely a way as possible.

To address staff capacity and reduce current waiting times for assessments, the senior leadership team has agreed that staff pause work in relation to non-critical training, which is not considered necessary to maintain service safety; do not undertake green assessments, although these will be reviewed regularly and reprioritised if circumstances change (as highlighted above); and cease all review activity, unless there are safeguarding concerns, change of need or request for re-assessment. Waiting times and mitigations are being regularly monitored by the senior leadership team.

We have also allocated specific investment to directly support strength-based practice within a dedicated Review Team, including additional management and senior practitioners, a service oversight group, themed and whole pathway audits, reflective practice and peer discussion sessions. Staff are very positive about this approach and compliments have been received from customers in relation to the outcomes achieved by this team. It is noted that the strength-based approach has also enabled savings to be made to budgets, as community assets are being used and customers are choosing to utilise their personal strengths and those of their networks, to meet their needs.

## **Learning Vignette**

S has a progressive condition and has a care package that included three daily hour-long care calls. At their review in June, S and their partner said that the care package did not fully meet their needs and they found it intrusive. The social worker put S's partner in touch with local social prescribers who supported them to get out in the local community and join a local bridge club. A referral was made for a device that could locate them if they had a fall. This meant they could go for lunch in town and walk the dog. The social worker then arranged for an occupational therapist to visit. The occupational therapist worked with the couple to enable S to be moved by their partner without the need for complex equipment or support from carers. The process was guided by the outcomes S and their partner wanted to achieve and was based on building their capabilities and strengths. As the changes were working well S wanted to reduce the number of daily care calls, and this was trialled. The occupational therapist supported them during this period and explained additional options for better accessibility and safety within their home. Owing to the success of the trial, the couple decided to stop the care and support they had been receiving as they could

now manage these tasks themselves. Their quality of life has significantly improved, and they no longer require funded care support from the council.

### **Charging for care and support**

In response to a rise in complaints relating to charging for care, a review was carried out. The review resulted in several changes:

- Co-designed information booklets with customers to provide information about the financial assessments process and who to contact. The information booklet has been produced and is available from our website <u>Financial assessment West Sussex</u> <u>County Council</u>
- A review of internal processes and use of IT was undertaken and changed to speed up the annual assessment of charges to provide information in a timely way. We now use a batch update tool in Mosaic (the ASC case management system) for the annual re assessment programme and this year over 80 % of customers will have an updated re assessment with a notification in advance and then a breakdown of their new contribution to their care within four weeks of the new financial year.
- Extra capacity into the Welfare Benefit Assessment service to address demand for financial assessments and reviews of residential charges. Additional capacity in the financial assessment team to reduce waiting lists for a financial assessment or review is in place. New customers who provide all the information required upon request are financially assessed within 20 working days. There is currently no waiting list. The additional capacity remains until March 2025.

The impact of these changes is monitored on a weekly basis by experienced officers from both the Finance and Adult Services teams. There are weekly and monthly reviews of the position and a monthly joint review with Adult Services

An Adults' Services and Finance Task and Finish Group (TFG) has been established to ensure the council's approach to charging for social care continues to comply with the Care Act, financial regulations and other significant learning, for example Local Government Ombudsman findings. The TFG will review the current policy to ensure its approach is compliant, that there is appropriate coordination and consistency between policy, practice, and public information, and to continue to develop the equality impact assessment. The group will make recommendations for actions to update the policy, as required.

### Paying for care and support

The ability for customers to choose how they pay for any support they receive is important to us. ASCOF data for 2022/23 shows that 22.5% of people are receiving Direct Payments, which is slightly lower than the England average of 26.2%. However, our ambition is to improve this performance and increase the levels of those in receipt of Direct Payments. Customers have raised that our direct payments approach is complicated with inconsistencies across services in relation to how the Direct Payment pathway has been implemented. Part of our focus has been on reviewing the arrangements for people already in receipt of direct payments. In addition, a focused project for Direct Payments, as part of our improvement programme will start towards the end of 2023/24.

To support a more flexible approach for customers in paying for their care, we have decided to investigate the use of Individual Service Funds (ISFs) as a first stage in finding new ways to join up customers with a developing market and increasing the range of more flexible options available from the very outset of someone wanting to access care and support.

We have conducted extensive research into the use of ISFs across the country and agreed to develop pilots to evaluate success. We are attracted by the potential for innovation both in achieving outcomes for customers and the new relationships with providers that this would entail. Following the research, we co-produced with market providers an ISF model which will be delivered during the pilots. We are currently engaged in detailed preparations for pilots which we envisage will commence this year.

# Joined up, effective and coordinated services

## **Mental Health**

Our adult services mental health offer has been through a period of rapid change over the last two years. Following a joint review with health partners, the Section 75 provider-to-provider staff secondment agreement ceased in April 2021. This was due to concerns that compliance with social care legislation and practice was not being prioritised as expected.

A significant improvement programme was undertaken during 2020 and resulted in the creation of a new service model, underpinned by solid social work practice. This has resulted in both a robust mental health social work service with a significant increase in Care Act assessments being carried out, and an approach which encourages effective partnership working, innovation and excellence.

ASCOF data for 2022/23 shows that people in contact with secondary mental health services living independently with or without support is 47% in West Sussex against the England average of 20.3%. People in contact with secondary mental health services in employment in West Sussex is 17% against an England average of 5.5%.

The mental health service is challenged in terms of a shortage of Approved Mental Health Professionals (AMHPs) workforce, which is reflected nationally. However, we have implemented twenty-four hour, seven day a week hub-and-spoke model in response to the difficulties experienced managing the increase in demand for Mental Health Act assessments. This has enabled us to better manage the workload, respond to risks and optimise existing resources. We have developed a recruitment and retention action plan to ensure we have sufficient AMHPs to meet the needs of the population, in both the short and long term.

The mental health service secured some additional funding which we have used to support the acute general hospitals by providing an onsite A&E Advanced Mental Health Practitioners. They are based at the hospital during peak times to ensure timely assessment under the Mental Health Act (MHA) where this is indicated. Part of the role of the Advanced Practitioners is to provide to advice and guidance to health partners, diverting assessments where appropriate and signposting to other services using a least restrictive and strength-based approach.

Strategic work has been undertaken to ensure that the mental health needs of the population are given an equal priority in terms of system-wide investment. This resulted in funding being agreed from the Hospital Discharge Grant to develop a mental health discharge hub, jointly with the local mental health trust. The Mental Health Social Worker Discharge Team (MHSWDT) was set up in 2022 and provides a service covering the entire county of West Sussex. Where a West Sussex resident is in an out of county hospital, we will support the discharge for that patient and liaise with the other Local Authority.

The MHSWDT discharge hub enables:

- Timely and effective assessment and discharge supported by a team of staff who are solely dedicated to support mental health hospital discharge, daily touchpoint calls with NHS partners to ensure clear communication, sharing of information and joint decision making.
- Better relationships built through the multi-disciplinary approach which improves outcomes for patients.

The challenges for the MHSWDT are ongoing funding and the care market's capacity to provide suitable services to meet the needs of our customers including developing new services to meet demand.

We were recently invited by DHSC to discuss the A&E Advanced Practitioner pilot and the MHSWDT pilot with civil servant colleagues who are very interested in our model and we received excellent feedback.

We have led a joint international recruitment project in partnership with colleagues from Sussex Partnership NHS Trust to fill vacancies across mental health teams in the council and the mental health trust. This has been very successful and has helped both organisations to fill much needed roles.

## **Hospital Discharge**

Our work on hospital discharge has ensured fewer people stay in hospital longer than they need to. In 22/23 we supported over 4000 customer discharges from hospital. Our approach stems from a cross-system partnership working evidenced from staff feedback from leadership to frontline operations, well aligned to other services such as the jointly commissioned and delivered Home First service. Home First supported 150 people to be discharged from hospital between March and June 2023, 80% of whom remained in

their own homes after the service ceased. However, we know there is more work to do in this area and it has been identified as an area of improvement.

In West Sussex, discharge from general acute hospitals is managed via the discharge hubs to manage <u>discharge pathways</u> with clear plans once people no longer meet the criteria to reside in hospital. Progress towards discharge is managed via daily "touchpoint calls" and system wide meetings. Social workers are involved with discharges from both acute and community beds and take a lead in moving people on from Pathway 1 (intermediate care and reablement services provided in own home).

We have implemented a permanent brokerage and sourcing team to ensure sufficient capacity and focus is given to patients being discharged from hospital requiring care and support. This team is proving highly effective in managing referrals, making best use of our resources by accessing appropriate care and support for people at the right time.

A national improvement programme is in place across Sussex via the 'Discharge frontrunner' scheme to deliver rapid and sustainable improvements across hospital discharge pathways. Progress is monitored through weekly operational meetings with senior managers, weekly executive place-based meetings and the monthly ICS Sussex-wide Delivery Board. We are developing system wide action plans to respond to recommendations that came out of a wide ranging Peer Review exercise in Autumn 2023, and within adult social care we are drafting up an improvement plan focusing on hospital discharge activity.

#### Reablement

Reablement services are designed to support people to regain or retain as much independence as possible, either after they leave hospital or prior to implementing a long-term service. We value these services highly and therefore have developed a model of bedbased reablement, to support with hospital discharge. These beds are funded by the Better Care Fund and enable people to be discharged from hospital, to a placement, where they can continue their recovery, supported by twenty-four hour carers who deliver an individually tailored reablement plan devised by our occupational therapists. In West Sussex between April 2022 and March 2023, 205 individuals were discharged to reablement placement services, of which 61% of people returned home following their stay.

#### **Community reablement service**

We commission a reablement service for people in their own homes. This is a time-limited service, provided free of charge while people are receiving focused reablement support. The aim of the service is to support people to manage activities of daily living as independently as possible. In 2022/23 1,766 people were provided with reablement at home. Of these, 1,200 were able to care from themselves. Of the remaining 566, 82% were able to reduce their care and support at home by at least 10%.

The outcome of this intervention may be that the person is fully independent again, or that they require a reduced level of care following the reablement intervention to manage their daily life. The service is person-centred, customers work together with therapists and the reablement provider to identify goals that are important to them, and equipment, adaptations and technology may be considered to support independence, as well as functional skill development.

"We support people to manage their health and wellbeing so they can maximise their independence, choice and control. We support them to live healthier lives and where possible reduce future needs for health and support".

#### Supporting people to live healthier lives

We work in close partnership with the Communities directorate, Public Health and the VCSE and other partner agencies to increase the range of options open to people to support their wellbeing as well as reaching people earlier in their lives to prevent escalation of needs.

We have had success in increasing the reach, visibility, and accessibility of our information and advice offer. Feedback from our customers ranks us 27th nationally for ease of access to information about our services, however further effort in this area remains a key priority and part of our current improvement programme. There is a focus to move from a simple, information-based service to one which provides alternative ways people can access and receive support earlier, and more ways to engage and interact with our information offer. Central to this is the on-going development of our 'front door.'

The West Sussex Connect to Support website offers advice and guidance on ways to live healthy, safe, and independent lives and signposting to local community activities and care services. It also has a specific area where people can find the right equipment to support them at home. This service has seen year on year increases in use.

Our Wellbeing service supports people to find local wellbeing information and services. We have six wellbeing hubs across the county where people can get advice and support on a wide range of issues, for example how to make small changes to improve their

health and wellbeing, including how to stop smoking, how to become more active or how to make meals healthier. Agenda Item 7

ASCOF data for 2022/23 shows that people who use our services and carers, who found it easy to find information about services was 71.4% against the England average of 67.2%.

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## Joined up, effective and coordinated services cont'd

### **Prevention Assessment Team (PAT)**

Prevention Assessment Teams are an area that we have highlighted as being most proud of. 71% of staff agreed that people could get information and advice about their health, care and support and how they can be as well as possible – physically, mentally and emotionally, citing PAT as proactive and collaborative. The PATs are multi- agency, multi-disciplinary teams delivering preventative services across our county. The team includes health advisors (qualified health professionals) employed by the local community health trust, social care workers and support workers from the voluntary sector who can advise over the telephone or visit people in their home. The objective of the teams is to improve quality of life, promote health and wellbeing and prevent, reduce, and delay the development of more complex needs. The service is for adults and older people who might not be eligible for other statutory services and who have unmet physical, psychological, social, functional or environmental needs.

In partnership with our communities directorate, East Sussex County Council, and the University of Leeds, we are piloting the development of a volunteer Life Transitions digital app. The app and volunteer service adds value by concentrating on the psychosocial dynamics of preparing for and experiencing change, and building resilience, adaptability, and self-efficacy.

## Spotlight: Extra Care - increasing care and support

Over the past year, in partnership with Arun District Council, Mid Sussex District Council, Eldon Housing Association and Housing 21, there have been two new Extra Care Housing Services open in East Grinstead and Eastergate. The developments have provided an additional one hundred and eight units of Extra Care Housing to adults in West Sussex, of these twenty-nine are shared equity and seventy-eight affordable rents. Work is ongoing to develop further Extra Care Schemes across the county.

These developments are possible because of our investment in a dedicated extra care lead who straddles the operational and commissioning arena, working closely with local planners, developers, landlords and care providers. We have also invested in a dedicated team of operational staff, who lead on assessing, reviewing and supporting people living in extra care. This ensures a timely response to issues and concerns and provides a consistency of approach and management of risk, which offers assurance to providers, thus enabling people to remain living in their extra care home, for as long as possible.

We have expanded our focus from the national older person model to all age provision, recognising the benefits that extra care can bring to people's lives. This approach has already provided new opportunities for people who would have otherwise been limited in their care options. It has had success in delivering outcome focused services with people at the heart of care planning and delivery. We have successfully utilised extra care as a step down from residential care settings, as well as a step up from care in a person's own home.

We utilise creative approaches to ensure the extra care schemes are firmly rooted in local communities, by encouraging access to the schemes for local community groups and supporting people to engage with external community activities.

"We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this".

#### **Equality, Diversity and Inclusion**

As highlighted in our Adult Social Care Strategy, diversity and inclusion are priority areas for us, but we recognise that we are on a journey to be able to fully realise our ambition in this area and move from an Equality Act compliance focus, to one which embodies inclusion and truly person-centred services and support. It is a key focus in our improvement programme and one of the key principles we consider when looking at service design.

We have developed a strong approach to co-production which acts as a building block for work in this area. This aspect of our

approach is described in more detail in the Summary section above. We have been working with partners to create a more complete Age sected if by Dott population group and place-based Integrated Care Board (ICB) data. We have set up a dedicated service wide equality, diversity and inclusion group which is chaired by the Director of Adults and Health. This group engages with several different customer engagement groups for example, our Partnership Boards.

There are regular EDI (equality, diversity, and inclusion) thematic practice focus sessions for frontline staff and managers, focused on improving practice. In 2023 we rolled out reflective EDI sessions across adult social care. These are held monthly by all Service Managers and Team Managers and are cascaded across teams. The Director of Adults and Health also chairs an Adult Services EDI Advisory Group which meets monthly. Feedback from staff about these sessions has been extremely positive. Identified actions are fed back to the leadership team to be included in future planning cycles.

Staff survey feedback identified feelings that the service should focus more on celebrating diversity, understanding and acknowledging the experiences and inequalities of diverse customer groups and staff, and explaining how the service is working to address those inequalities. Staff also fed back that there were some positive accounts of individual practice and and team approaches, but a lack of resources, community services, and culturally competent services impacted the provision of person-centred support for people from diverse communities.

Whilst we complete Equality Impact Assessments these are not always taken into our broader learning or service design. Broadening their use, scope and associated learning is a focus within our improvement programme. Inclusion is a design principle for all elements of the improvement programme and ensures that we regularly review the impact of service developments as they progress throughout a customer's journey, not just as they begin it.

We want to build on examples of effective and/or innovative practice, both locally and nationally. Notable successes for us have been the development of our Changing Futures programme a pan Sussex Department for Levelling Up, Housing and Communities (DLUHC) funded project aiming to support people with the most complex needs. We want to take the learning from the Changing Futures into our own wider improvement programme.

Aligning to the corporate and directorate action plans, both our <u>Executive Leadership Team (ELT) and our Directorate Leadership</u> <u>Team</u> (DLT) regularly receive data about our performance in this area. An important element of this will be customer experience to improve our person-centred approach.

### **Technology to support effective practice**

We already have several successful initiatives in place, for example our Technology Enabled Care (TEC) service which offer a range of ways for people to remain safe and independent, as well as a bed booking service that provides real-time information about all aspects of bed management across all our contracted partners.

In the coming year we will focus on the following digital based initiatives:

- The development of portals to support earlier and more flexible access to information, raising concerns and self-assessment in order to give people greater control
- Working with partners to deliver integrated care records
- As part of the development of wider corporate digital initiatives, we plan to explore more opportunities to integrate digital and technology, including Artificial Intelligence, into practice, considering customer feedback and the challenges of digital access and poverty within some of our communities, and the need to work closely with partners.

## **Providing Support**

Our aim is to support people eligible for adult social care services with person-centred support. We work closely with adult social care providers to ensure there is a high-quality and sustainable offer for people, with choice and control around their care. ASCOF 2022/23 data indicates that in West Sussex 76.9% of people who use services have control over their daily lives against an England average of 77.2%.

#### What we are most proud of

- Our focus on quality provision and sustainability of the care market
- Our work in partnership with key stakeholders
- Our support to the provider workforce through the Great Care Employer

#### Areas of Improvement for 2023-2025

- Development of commissioning strategies and market position statements
- Embedding outcome-based commissioning achieved through co-production of services
- Ensure that commissioned services address inequalities through pro-active approaches.

### **Key Activity**

Our approaches to commissioning services are set out in our <u>Market Sustainability Plan</u>. We have built on this further through the development of a new Commissioning Strategy which will be supplemented by specific Market Position Statements which are currently being drafted. We will focus on strength-based approaches to support independence, build community connections and help people to live in their own home. We aim to do this by:

- supporting the capacity of providers to cater for people with dementia and more complex care.
- reduced reliance on traditional forms of standard residential care.
- increased use of community-based provision including extra care and supported living.
- initiatives which assist in addressing workforce challenges and
- providing infrastructure support to the council's future work with the market.

"We understand the diverse health and care needs of people and our local communities, so care is joined up, flexible and supports choice and continuity".

#### **Our commissioning service**

As part of stabilising our service, a new Commissioning Leadership Team consisting of an Assistant Director and three Heads of Service is now in place, leading to the completion of a wider re-organisation across commissioning teams to create a more adaptable structure with flexible roles enabling individual key skills and strengths to be utilised across the service. We are now moving into a period of development to standardise and improve how services are commissioned and managed. The development work is focused on ensuring that the foundations are in place to enable continuous improvement in how services are commissioned with a focus on structures, people, skills, strategies, and planning. Alongside the structure and role changes we are investing in a development programme for all commissioning staff, to ensure that they have the skills and abilities to deliver excellent services for our residents.

#### Our approach to commissioning

The priorities in our Adult Social Care Strategy set the foundations for decision making, where we need to prioritise areas for

improvement and how we spend money. It aligns with other strategies such as the <u>Carers Strategy</u>, <u>Dementia Strategy</u> and the Changing Futures Programme and informs future iterations of joint health and social care priorities in West Sussex.

The commitments set out in our Strategy will also set the context for the development of a strategic commissioning framework that will deliver a new Commissioning Strategy as well as a range of market position statements and supporting strategies such as carers, dementia, and workforce. In parallel with these planned strategies, we are also focusing on ensuring we have clear operational policies in place including a new market-wide quality assurance framework; a formalised approach to contract management and business planning that will enable us to be clear in what we are trying to accomplish and the methods by which we achieve them.

Expanding on the development of these fundamental and enabling resources, we recognise there are areas that we want to improve in how we provide support to people and have created a commissioning development plan to focus this work. One of the key objectives of this piece of work is ensuring our commissioning standards are applied regularly across all activities to ensure that examples of current good practice are delivered more widely.

## Person-centred and outcomes based services

All contracts for services have stated requirements around person centred approaches but we are not currently confident that all services are truly delivered in this way across our provider market. We want to develop approaches around procurement, oversight and monitoring contractual compliance that gives greater assurance that services are consistently delivered as intended and putting the person at the centre of services.

#### Addressing inequalities through proactive approaches

We want to better understand how inclusion and diversity are reflected in service design and delivery phases, in particular removing barriers to service access. We want to improve our understanding about local communities and ensure that solutions and services are developed to consider the needs of all residents and communities of West Sussex and improve customer outcomes. Our partnership work with the NHS, district and borough councils, and the VCSE to develop Local Community Networks have created a strong partnership connection with communities to bring insight and deliver change at a neighbourhood level, allowing us to focus on our most affected communities.

We will ensure that co-production, with customers and providers, is embedded throughout all parts of the commissioning cycle in all areas of our business. We have therefore identified commissioning 'champions' to support commissioners with this aim and will be seeking to ensure that all our commissioning embeds the approach that we can evidence now in several areas.

The County has in place a <u>Social Value Framework</u> which commits us to consider in any procurement how a contracted service will improve the social, environmental, and economic wellbeing of a relevant area. This approach focusses on outcomes and effecting long-term change in the community. Examples of delivering social value being delivered through our commissioning could include initiatives such as:

- Active recruitment of staff from under-represented groups and people facing greater social or economic barriers.
- Opportunities for young adults, students and or apprenticeships
- Making facilities available to groups that would otherwise struggle to access them.
- Offering support and careers information to schools and colleges.
- Offering volunteering opportunities to individuals seeking employment experience.

#### Greater use of data and insight to inform services

Data and intelligence have been used effectively in recent decisions including the Market Sustainability Plan to support our understanding of challenges in certain care markets and the recent improvements in our Community Reablement Service but we want more widespread and consistent approaches. We will ensure greater use of the Joint Strategic Needs Assessment and will be focused on analysis and research to support the development of our market position statements.

"We understand our duty to collaborate and work in partnership, so that our services work seamlessly for people. We share information and learning with partners and collaborate for improvement"

#### **Our Market**

We know that the social care marketplace in West Sussex is pressured and there is not always sufficiency in all service provisions to meet levels of current demand. This is most acutely being experienced in services for people with learning disabilities, autism and mental health issues. Our strategic ambition is to support a greater proportion of people at 'home' rather than a residential-based service. To support this, we have begun the delivery of a programme of work called market development commissioning, with increased resource investment, which is looking at working in partnership with service providers to examine the current mix of services and explore opportunities to develop existing services or create new ones. Through market development a number of providers are working in partnership with the Council to look at existing models of service, whilst reviewing the individual needs of customers. Whilst this is still in the early stages, the outcomes are positive. One provider has reduced the need for additional night staff through implementation of Technology Enabled Care and this has resulted in a less intrusive service for customers.

We also provide residential, day care and Shared Lives opportunities through our Directly Provided Services (DPS). It is planned to Agende Attended Ting Reform Fund monies to expand the Shared Lives Carers Scheme across Sussex. A review of the DPS is planned to ensure that we are effectively using our resources and addressing gaps in service provision. We will be looking at recommissioning our Supported Living Framework to address shortfalls and gaps in current commissioning arrangements to support the market to develop the services that are required.

In January 2024 the council launched a tender to change the way in which Day Opportunities are experienced in West Sussex. The new service will be outcome focused, and providers are being asked to demonstrate the value of the service and the extent to which support is accessible to diverse communities across the county, improve the lives of people by providing safe, accessible services that support people to stay mentally and physically well.

The services that are commissioned under this contract will have demonstrated that they are able to deliver a responsive and strength-based support offer focused on individual need and deliver a diverse range of support options to meet the varied needs of people. There is a focus on promoting independence and enabling people who use the service to increase their levels of social inclusion. The new offer will incorporate what is available to support people in the communities they are part of, and providers will develop and maintain effective working relationships with, families/carers, partner services, commissioners and the communities they are part of.

The market for older people's services is more stable in comparison and we are more able to secure appropriate services for people in a timely manner. For example, the numbers of older people waiting for a non-residential service to be sourced has fallen 67%, from ninety six on 11th August 2022 to thirty two on 10th August 2023, with providers responding well to requests. This is not to say that there are not challenges in specific geographical areas, particularly the remote rural locations of the county, and for specific service types such as dementia nursing placements or placements for those with the most complex needs.

We hold a large, long-term contract for the operation and management of 12 council care homes with Shaw Healthcare which provide five hundred and ninety beds and have commenced a programme of work to review this provision in light of current demand, market supply and our strategic direction. This is a crucial contract for managing our demand as 22% of all older people with eligible social care needs that are funded by the council in a residential or nursing home are supported within these services (Aug 23).

The contract has a 30-year term and has been in place for eighteen years. The requirements at the outset of the contract were very different to what is needed now and what we will need in the future. Changes have been made over the years to adapt the services, including changing bed types to meet nursing and dementia needs and the cessation of day services within these properties which had low levels of utilisation.

In line with our strategic intention to focus on access to activities and opportunities in the local community and strengths-based approaches. We are currently working on options for the services for the next phase of the contract as well as corporately identifying the wider aspects of the contract which require focus, such as the property management given these are council owned assets.

Our approach to fees and annual uplifts over the last two years have supported services considered to be of strategic need, market development and in response to market pressures and learning from the <u>Cost of Care exercise</u> and <u>Market Sustainability Plan</u> (MSP). A task and finish group was established last year to ensure partnership working with the market to strengthen this further in our decision- making process for 2024/25. We also recognise that more is needed in this regard and alongside future approaches to uplifts, we will be recommissioning our Care and Support at Home services in the future and developing a new Care Homes Framework with the impact on the market being a central consideration on commissioning decisions. In some circumstances, particularly when new residential placements are made, payments to providers are currently happening with a delay. There are a number of reasons which explain this, most of which relate to processing issues. A programme of action is being put into place to address this. It includes the introduction of a provider portal and process improvements aimed at giving greater visibility to areas of potential risk and increasing the efficiency of existing arrangements.

# **Quality of provision**

Our proportion of home care services rated 'Outstanding' or 'Good' by CQC is higher than the England average at 90% compared to 88%, although our care homes market is slightly under the England average at 75% 'Outstanding' and 'Good', compared to 85% for England. Our structures and work programmes support good practice and a focus on continuous improvement in quality across our services. We have five learning disability care homes, four are rated Good, one is Requires Improvement which has an action plan in place to improve against the areas CQC highlighted for attention. We have one older people with dementia service that also has a Good rating. Our Shared Lives Scheme is Good overall and holds an Outstanding rating in 'Caring'.

Our recently restructured Quality Assurance and Market Support (QAMS) team provides both proactive support to the market to develop, and reactive support when providers are struggling in terms of quality concerns or risk of provider failure. This is achieved through various methods including sharing good practice, building resilience through contingency planning, individual action planning and providing expert advice and guidance. An example of the proactive work supported through this team, and in close partnership with our active West Sussex Providers in Care Forum (WSPiC) is highlighted in the spotlight on the Great Care Employer scheme. This has enabled us to understand the care provider challenges and work together to find solutions, encouraged engagement, enabled feedback, and provided a platform to trial innovative solutions, such as a trusted assessor in hospitals.

Through a mix of financial investment and support, the market in West Sussex is becoming resilient and developing and growing to meet the needs of residents across West Sussex. There are however some areas where we are aware more needs to be done to develop the market to be able to respond to both current and future need, particularly, for example, in the lifelong services and mental health areas of the business. Investment has been made to create a dedicated post to focus on working with providers to stimulate development of new and innovative schemes for people with learning disabilities and mental health needs. This is in the early stages but is starting to show potential. Short term investment has been allocated from hospital discharge system funding, to enable rapid implementation of new schemes to support timely discharge from mental health in-patient units.

### **Working in Partnership**

We work in close partnership with providers across the county, including a six weekly strategic provider forum chaired by the Director of Adults and Health and with attendance from the Assistant Director and Heads of Service in Commissioning, senior leaders from the ICS and senior representatives from integral adult social care providers within West Sussex. This forum has a strategic focus, provides an opportunity for update and information sharing but also has a focus on shared challenges such as funding, workforce and Covid-19 and with an emphasis on working together to consider solutions. There are also ongoing forums with specialist providers, such as the Learning Disability Partnership Board. Regular newsletters are also shared with the market, which during the pandemic was daily in frequency.

We are an active partner in the ICS and work daily with the ICB. We have active S75 agreements and commission on behalf of the health and social care system where it is beneficial to the system and to customers and operate on a pooled budget for learning disabilities and mental health services, with joint arrangements for TEC and community equipment services.

We also work actively in partnership with our district and borough council colleagues on housing solutions, supported housing, homelessness support, disabled facilities grants and the development of extra care. We take the lead and host the 'Changing Futures' programme on behalf of the other local authorities in Sussex. This enables a focus on people experiencing multiple disadvantages to ensure access to safe effective solutions through greater co-ordination between commissioning organisations and re-imagining care pathways.

We engage with VCSE providers through forums and task groups; however, we want to undertake further collaboration with the VCSE so that we can work together to ensure a variety of quality solutions to support the strengths-based approach for customers through access to the community and a range of alternative solutions. This will include how community assets and the VCSE can support an approach to prevention, in conjunction with the council's Communities and Public Health directorates.

## Innovation and good practice

We have lots of examples of innovation and good practice, including the hosting of the 'Changing Futures' programme for the pan-Sussex local authorities focused on multiple disadvantage; our technology enabled care offer; and the development of a hospital discharge care service through a discharge to assess model focused on home first. We want to ensure that we continue our focus on innovation and best practice by testing and trialling opportunities, including ISFs and personal assistants, to tackle our capacity and

#### market challenges. Agenda Item 7

Our Hospital Discharge Peer Review in Spring 2022 led by the Local Government Association (LGA) highlighted to us the opportunity to improve system efficiency and outcomes for people in short-term reablement by integrating intermediate care services with the NHS. We launched our Integrated Intermediate Care Programme through our place-based Health and Care Partnership later in 2022 with the goal of implementing a new joined-up care model by 2024.

We have an ambitious vision for growth and development in extra care. Our innovative and dynamic approach developed over recent years, has drawn interest from neighbouring authorities and we will build on our existing offer to expand this provision to meet future levels of need and demand, to provide a viable, sustainable, and outcomes-focused solution for residents of West Sussex.

There is a well-established offer and a clear commitment to solutions and support for carers, with a clear strategic focus on supporting unpaid carers, which includes short break services, information and advice and assessments delivered through our partners in Carers Support West Sussex.

## **Provider workforce**

The sufficiency of supply in the marketplace is impacted by the workforce challenges being faced by the social care market in West Sussex. Whilst we have already taken steps to support these challenges including investment in WSiPC, development of Proud to Care, creation of the Great Carer Employer Scheme, support for international recruitment and the expansion of our Quality Assurance and Market Support team, we know more is needed to address current and future gaps in workforce. We are looking at developing a care workforce strategy with our partners and stakeholders to identify new actions and to provide greater oversight of our market support activities through various forums.

## Spotlight: Great Care Employer Scheme

During our Market Sustainability Plan discussions, providers identified that recruitment and retention was one of the key sustainability risks to the local (and national) care market. This prompted the development of the Great Care Employer Scheme which was co-produced with WSPiC and through a task and finish group of market providers with input and support from the Quality Assurance and Market Support team.

The scheme enables providers to highlight which of 40+ individual 'offers' of good practice that they as employers can offer to prospective job seekers, split across four themes of pay and benefits; job security and flexibility; learning and development; and supported and valued.

This raises the profile of good practice providers, supports recruitment and retention, and challenges providers to look at their own offer and match that of other local providers. Ten providers are already signed up and using the scheme which is being actively promoted and recent discussions with the Department of Work and Pensions has confirmed that it will be a useful tool for job coaches. The scheme has been recognised as good practice by both Skills for Care and NHS England.

## Ensuring safety within the system

Keeping the people we support safe is our biggest priority. Our governance, systems and processes ensure our safeguarding responsibilities under the Care Act 2014 are fulfilled and that people feel safe with the care they receive. This was particularly clear in the engagement to develop our Adult Social Care Strategy and features prominently in 'The life you want to lead'. 76% of staff agreed that Adults' Services works with people to understand what being safe means to them and it works with its partners to develop the best way to achieve this. ASCOF 2022/23 data puts West Sussex broadly in line with the England average for people who use services who say they have made them feel safe and secure, with a figure of 85.7% (England average 87.1%). The service concentrates on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect, it makes sure it shares concerns quickly and appropriately.

#### What are we most proud of

- Our multi-agency Safeguarding Adults Board
- Our pan-Sussex threshold guidance that provides a consistent approach to a safeguarding enquiry (section 42) decision making used by the Safeguarding Adults Hub
- Our system response to provider issues and service

#### Areas of improvement for 2023-2025

- A refresh of our pathway for commissioned services relating to quality concerns.
- Transitions from children to adult services
- Embedding customer feedback into formal safeguarding processes

"We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care including when people move between different services".

## **Safeguarding adults board**

The West Sussex Safeguarding Adults Board (WSSAB) was established in 2011 and is the statutory board that co-ordinates safeguarding adults work in West Sussex. It has always been independently chaired, which brings trust and rigour. The WSSAB sets out its expectations of members via its constitution and is responsible for developing and publishing its <u>strategic plan</u> setting out how as a partnership we will meet our safeguarding objectives. The WSSAB has five subgroups that deliver on its <u>annual business plan</u> and board priorities. The subgroups are:

- Safeguarding Adult Reviews (SARs).
- Quality and Performance
- Learning and Policy
- Quality Assurance and Safeguarding Information Group (QASIG)
- Multi-agency Risk Management (MARM)

The Board also publishes an annual report detailing how effective the WSSAB's work has been. The most recent annual report can be accessed <u>here</u>. To support learning the WSSAB commissions a Safeguarding Adult Review (SAR) for any case which meets the criteria (as outlined in the <u>Pan Sussex SAR Policy</u>).

To share learning widely and effectively from our reviews, all are published with accompanying <u>learning briefings and podcasts</u>, which are created by the Learning and Policy subgroup. Other benefits of the approach have included the willingness of a customer for whom a SAR was conducted becoming a lay member of the Board which will provide significant benefit in better understanding the lived experiences of people in receipt of services.

Recently the WSSAB has recognised a repeating theme in cases of self-neglect and have begun working with colleagues across Sussex, who have reported similar feedback from cases. WSSAB has commissioned a thematic review and has invited Brighton & Hove and East Sussex boards to participate.

#### Safeguarding duties under the Care Act

Following a Peer Review in 2018 that highlighted safeguarding as an area for development, a review was undertaken of our safeguarding approach. The outcome of the review was the creation of a Safeguarding Adults' Hub (SAH). The SAH is co located with our Children's Multi- Agency Safeguarding Hub (MASH) which includes officers from Sussex Police who work closely with the SAH.

The SAH receives all safeguarding contact via a portal and provides consistency of decision making. Decision making is underpinned by a <u>pan-sussex threshold guidance document</u>, which is designed to support professionals, partners, and providers, working with adults who have care and support needs to develop the identification and reporting of safeguarding concerns. It provides a framework for multi-agency partners to manage risk and to assist in differentiating between quality issues and safeguarding. Partners across the County are supportive of the threshold guidance.

The SAH provides a professional line where the team are available for consultation, clarification, and support for professionals in making a safeguarding referral. This is valued by agencies who are encouraged to utilise the service. Staff were positive about the safeguarding hub team who were considered to be helpful and responsive, with clear policies and processes in place.

The SAH has an internal performance measure that tracks the timeliness of decision making where matters are to be reviewed within five working days. Compliance with this measure is consistently good. The SAH has positive working relationships with statutory services, care providers and wider partners, this enables initial enquiries to be carried out effectively applying the principles of safeguarding, keeping the person at the centre of the investigation, and gathering appropriate information to inform decision making. Such is the value placed in the SAH, we are working to enhance services by employing a jointly funded nurse position from the NHS and are currently at the point of advertising the role.

Safeguarding enquiries are undertaken by operational teams. This promotes and enhances 'Making Safeguarding Personal' (MSP) by involving professionals who may already know the person or are familiar with the context of where the person lives and the local community. The community teams are also engaged in activities designed to ensure they are aware of emerging risks and any trends in criminal activity ensuring they can consider preventative work to minimise risks, whilst fulfilling our Care Act responsibilities and enhancing strengths-based assessments accordingly. Although questionnaires at the end of the safeguarding process are sent out the response rate is low and the feedback is not as embedded back into practice as we would like. Therefore, we are planning to review how the voices of people with lived experience of the safeguarding process are captured and how this feedback informs practice.

In addition, we are focussing on MSP as part of our audit cycle both through the WSSAB and internally in ASC. PAGENDER ITEM 7 been encouraged to consider MSP through their own mechanisms to enable a partnership picture to emerge and be reported to the WSSAB, this was addressed through the WSSAB Challenge Events and actions for improvement will be put in place for all those participating in them.

The SAH also provides for the identification of themes and patterns in safeguarding and allows for early intervention and focus to be placed on matters arising through engagement with other services, both internal and external. For example, close working relationships with Sussex Police ensures that when joint working is required or further enquiry into potential criminal activity is necessary, this is expediated in a timely way. Similarly, having a single point for safeguarding referrals ensures that repeat submissions in relation to a provider or emerging themes regarding a provider can be easily identified and passed to the Safeguarding Enquires Team who manage provider concerns and delegated enquires.

#### Managing provider concerns, failures and service disruption

The council has developed a strong strategic and operational response to managing provider concerns and failure. This was following a large-scale provider concern and police led investigation in 2018, which highlighted a lack of oversight and information sharing. There are also good links with our Resilience and Emergencies Team who provide support during a provider failure process.

In 2019 we strengthened the approach and support to providers. Our overarching <u>operational provider concerns</u> process was refreshed with a new <u>Strategic provider concerns</u> group established when risk remained, and the associated risks cannot be sufficiently managed at the operational level. This group consists of senior leaders from across the safeguarding partnership include senior representative from Adult Services, Health, Sussex Police and includes commissioners, communications and representation from legal departments when required. The route of escalation is usually via the Quality Assurance and Safeguarding Information Group.

The Quality Assurance and Safeguarding Information Group was set up via the WSSAB to develop and maintain a single picture of the quality and safety of the local care market. The group meets monthly, co-chaired by representatives from the council and the ICB. The membership responds and takes preventative actions to known, potential and emerging risks in the provider market. It is attended by statutory partners and senior leads across the partnership.

To support these developments the Safeguarding Enquiries Team was established as a specialist operational response to work directly with individuals, providers, partners (contracts team, CQC, health, Sussex Police etc.) in the pursuit of understanding and reducing any risks through safeguarding planning, involving advocacy services (for example, <u>POhWER</u>, <u>Mind</u>) where necessary, and developing improvement plans. The benefits of the approach are scrutiny, intelligence gathering and support at various levels within the West Sussex care and support market. The team also oversees any delegated enquiries so that they have oversight of any increase in safeguarding or emerging themes.

## Performance

In 2022/23, there were 9265 safeguarding contacts made which is an increase of 9% from the previous year. Of these 1,791 safeguarding concerns were initiated (13.9%). The number of concerns initiated each month ranged between 90 to 168. Of the concerns initiated, 1,172 met the criteria and proceeded to a safeguarding enquiry (Section:42 enquiry). The conversion rate equates to 70% of those triaged as safeguarding go on to require a formal section 42 investigation. Of the concluded enquiries, concerns regarding neglect and acts of omission accounted for 532 adults, financial abuse for 185 adults, and physical abuse for 184 adults. Together, these three categories total 901 Adults. These have remained the top three categories of abuse for the last four years.

We have recognised that there are a number of referrals into the safeguarding pathway that relate to quality concerns of commissioned care. To support this work, a task and finish group has been set up to identify areas for further improvement in this regard.

Concerns in relation to care homes remains the most prevalent location for abuse, followed by people's own homes. This is different to the national picture; however, the gap is closing as a result of a concerted effort to support providers.

In terms of the impact on risk for enquiries concluded, there were 511 adults where action was taken to reduce risk. There were 305 adults where the risk was removed, and 69 Adults where actions were taken, and the risk remained.

A quality risk report is presented at the WSSAB with detailed quarterly performance. In addition, ASCOF data and performance is shared at our Safeguarding Steering Group (SSG). The Assistant Director Safeguarding, Planning and Performance co-chairs the SSG with the Director of Adults and Health. The agenda has recently been refreshed to ensure a service-wide safeguarding approach with performance reports being scrutinised in relation to section 42 enquiries and provider concerns. The WSSAB Business Manager attends the SSG to update on SARs and resultant learning.

#### Quality and practice improvement Agenda Item 7

The WSSAB has undertaken several multi-agency audits as part of its work programme. The aim of these audits was to evaluate and reflect on practice; learn from experience; inform multi-agency practice development; and strengthen multi-agency working. Action plans have been developed and learning from these can be found <u>here</u>.

All audit actions plans are overseen by a Quality & Practice subgroup. The Adults' Quality Assurance Lead participates in the action planning meetings and ensures that application of the learning can be quickly and effectively embedded into the Adult Services. An additional step has been introduced by the WSSAB that timetables a further review of learning activity and surveys all participating partners to establish the difference the learning has made.

In addition to audits being undertaken at a local and partnership level we have introduced a learning review process. This process is used when the circumstances do not meet the criteria for a formal SAR but would benefit from a more focused look at practice.

Serious Incident Reviews and Learning Reviews offer us the opportunity to study in detail the background, decisions and actions taken that lead to circumstances in which the customer had a poor health and wellbeing outcome. This analysis enables us to understand where improvements can be made at systems level. Actions plans are developed, and these are monitored by the Quality Assurance Lead.

The Learning Disability Mortality Reviews (LeDeR) process is linked into our Quality Assurance process. Action plans are developed through the review mechanism, implemented, and monitored as required via our Quality Assurance Management Board. This process evidences our approach to learning and partnership working, as highlighted in the quote below:

"WSCC is seen within the Sussex LeDeR stakeholder group as a leading example of quality improvement, creating their own quality improvement process from the information gained from the LeDeR Reviews, applying learning and actions to their organisation transparently and effectively with consistent and professional communication between teams".

- Sussex ICB Learning from Lives and Death Reviewer

"We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately".

## **Safe Systems**

The Multi Agency Risk Management (MARM) subgroup of the WSSAB includes representation from partners and the VCSE. It considers and advises on cases where individuals are not engaging with agencies, or they are putting themselves or others at significant risk by refusing services. This is a monthly forum and it enables agencies to seek advice and support when managing the highest risk and most complex and challenging cases through robust communication and information sharing.

WSSAB have a collaborative agreement with the Health & Wellbeing Board, Community Safety Partnership (CSP) and the Childrens Partnership. The current focus is on areas relating to domestic abuse, County Lines, Modern Slavery and learning from Domestic Homicide Reviews (DHRs) where there is an adult with Care and Support needs. This enables clear sight and consideration of priorities and collaboration regarding learning, any system changes as well as scrutiny and accountability in relation to outcomes and objectives.

We are engaged with partners, agencies, and organisations across the system to ensure the safety of residents in West Sussex is one of our corporate priorities. This can be demonstrated through our membership of the West Sussex Channel Panel Prevent, MARAC (Multi Agency Risk Assessment Conference for domestic abuse, Partnership TTCG (Police Tactical Group with focus on the Strategic Intelligence Assessment), Locality and District and Borough liaison groups and the Domestic Homicide Review Panel as well as activities in Public Health regarding prevention and health inequalities.

## Transitions

Our transition arrangements form part of our improvement programme, with a steering group co-chaired by the Director of Adults and Health (DASS) and Director of Children, Young People and Learning. Staff have fed back that the transition process needed more clarity and a continuing focus on ensuring a seamless and joined-up experience for people who use the services and their families, helping them understand the differences between eligibility between Children's and Adults' Services, and manage their expectations. To address this, we have designed and implemented two joint new protocols and new ways of working to identify young people, without lifelong conditions or disabilities, who are likely to have eligible social care needs at age eighteen, using automated prompts and dashboards. We have also introduced age fifteen plus specialist workers within the Children with Disabilities service who will prepare a young person for adulthood alongside our adult social care team.

We lead a multi-agency transitions panel, designed to improve the transition to adulthood for young people aged seventeen and a half who are presenting with high levels of risk and vulnerability and have complex and sometimes challenging needs; including children with autism, children presenting with mental health needs, children in need, children looked after and care leavers. Any young person who is eligible for s117 Mental Health Act is referred to the transition panel to ensure their legal rights continue to be recognised when they become an adult. The panel provides a forum for partners to share information, preventing young people falling through the gaps, to ensure that informed decisions can be made about the presenting risks and needs and how best to assess and mitigate these. We believe this is an example of good partnership working between colleagues in children's social care, education, safeguarding, health, and mental health services.

This is highly regarded by referrers and panel members due to the contribution it makes to ensuring young people are safely guided through this phase in their life, as highlighted in the quote below.

"From a Designated Nurse for Children in Care and Care Leavers point of view, the transition panel has enabled me to support the local authority in navigating the health arena which can be complex and linking them in with the right health practitioner to ultimately support the young person as they turn 18 – for example, liaising with safeguarding teams in acute Trusts where A&E alerts have been added for vulnerable young people at high risk of harm/ being exploited, linking in PAs in to physiotherapists, our Named GPs and Designated Doctor for Children in Care have been able to support GPs with health requests where there are concerns regarding significant self-neglect and liaising with our West Sussex Police Exploitation Team who are able to review their information and actions as the young person turns 18 in order to support them."

- Sussex ICB Leaving Care Safeguarding Lead

In addition, the <u>WSSAB Seventeen and a Half Safeguarding Protocol</u> has been developed where there is safeguarding concern for a young person who is approaching their eighteenth birthday. This protocol sets out the arrangements for young people aged seventeen and a half to twenty-five years, whose circumstances may mean that Safeguarding Adults' procedures would apply when they are eighteen. A holistic approach is adopted to understand the circumstances of young people and, the vulnerabilities and risks they may have, including the impact of previous abuse. Referrals and contacts are made with the SAH to ensure the criteria is applied consistently.

## Spotlight: Safety in our provider market

The Quality Assurance and Safeguarding Information Group (QASIG) is a sub-group of the WSSAB which has been developed over the last three years to effectively monitor, report and evaluate intelligence across partner organisations with regards to safeguarding and quality concerns. It meets monthly with co-chairs of the Local Authority and ICB. There is a strong collaboration and commitment between members, which includes a range of health and social care leads (including commissioners), CQC, Police and Healthwatch. The sub-group plays a key role in prevention by improving the safety of services through early information sharing and multi-agency intervention and in doing so also enables the group to develop and maintain a single picture of the quality and safety of the local care market. The work and intervention of this group can initiate action and support through joint visits, escalate to safeguarding provider concerns and/or contract monitoring and, involvement of CQC procedures where appropriate. It additionally monitors low and high reporting of safeguarding concerns

resulting in further information being sourced from and support being given to individual providers (for example, by way of **Children State**, **Division** of learning resources) and has oversight of those organisations who are within the provider concern framework with active enquiries. This group has been effective at supporting the provider market with both quality and safeguarding issues which, in turn, has created more effective safety measures in the partnership system, a contribution to lowering home closures in West Sussex and better outcomes and experience for care home residents. WSSAB's QASIG has been of interest to other SABs nationally and we have shared our information and Terms of Reference to support them.

## Leadership

Within the previous three themes we have described the direction of travel and specific activity for our improvement journey. Underpinning this is the progress we have made to put in place new leadership and governance to drive our services forward and continue our journey to provide high-quality adult social care across the county.

#### What are we most proud of

- Our strategic direction and improvement programme supported by political and executive leaders
- Our internal governance structures, roles, and responsibilities
- Our quality framework and collaborative audits of case files

#### Areas of improvement for 2023-2025

- Further development of and embedding performance and financial management frameworks at all levels
- Effective use of high-level outcomes, inequalities, and insight data
- Delivery of leadership development programme and workforce development strategy

#### Adult social care leadership

Our senior leadership team is strong, visible, and stable with clear roles, responsibilities, and accountabilities, supported by the leadership of the Chief Executive and our lead councillor; the Cabinet Member for Adult Services. Our extended leadership team includes Heads of Service, who take responsibility for leading service improvement and financial accountability. The extended leadership team come together regularly as a group to discuss issues such as strategic business planning as part of the Council's overall business planning cycle. Each Head of Service has their own service plan to deliver the directorates agreed strategic priorities and they have a responsibility to ensure that these are reflected in team plans and performance conversations with individual members of staff within their service areas.

Our leadership team is engaged with the South East (SE) Association of Directors of Adult Social Services (ADASS) networks, with our Director of Adults and Health co-chairing the SE region. Our Head of mental health co-chairs the Mental Health Network and our Principal Social Worker co-chairs the Principal Social Worker Network.

"We have clear responsibilities, roles, systems and accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes and we share this securely with others when appropriate".

#### **Political and cross council leadership**

Political leaders are regularly briefed on the service, through the Director of Adults and Health weekly portfolio lead meetings and monthly briefings with the Leader. Regular reports are taken to the Council's Executive Leadership team meetings (ELT) and informal meetings of the Cabinet in relation to areas of strategic decision making and operational pressures. Scrutiny Committees, including the <u>Health and Adult Social Care Scrutiny Committee</u> (which is responsible for the overview of the Adults' Services portfolio) consider and provide challenge to performance, budget and risk through the Performance and Resources quarterly report, which is then overseen and endorsed by <u>Cabinet</u>.

Corporate support can also be evidenced by the additional investment of £28.4m (of which £14.1m is for inflation) to the Adult Services budget (an increase of 12%) in 2023/24, accounting for demographic and market pressures, as well as significant corporate funding to support the Adults Services improvement programme.

#### Agenda Item 7 Governance arrangements

Governance is well established at a senior level across the directorate. Meetings focussed on finance, risk, performance, and improvement have been established. These meetings include senior leaders, the extended leadership team and key business partners. The responsibility of each meeting is clear and understood across the directorate.

The Department Leadership Team (DLT) routinely discuss and assess risk. Significant risks are managed by ELT and Cabinet via the Corporate Risk Register (CRR) and owned by the Director of Adults and Health with mitigations commonly owned by Assistant Directors within the service. There is a clear route for escalating directorate risks to the CRR and de-escalation back to the directorate.

Recently introduced bi-monthly strategic DLT sessions allow senior leaders to focus on the delivery of the Adult Social Care Strategy and longer-term strategic ambitions. A tool to track the delivery and impact of the 'we will' statements included in the Adult Social Care Strategy is being developed. The Director of Public Health will be part of these sessions moving forward to ensure we can work in partnership on our strategic intentions for the directorate.

The Performance, Quality and Practice Board (PQPB) provides oversight of our strengthened Performance and Quality Assurance function and practice oversight to ensure these are embedded across the service and that the appropriate governance is in place. Our Customer Relations Team ensure a consistent approach to complaints management and challenge Adults' Services for learning and actions, so the complaint has as much value as possible and organisational lessons can be learned. The main themes of complaints relate to charging for care and financial assessments, followed by complaints about the assessment process. Charging for care and financial assessments are the main areas of focus by The Local Government Ombudsman (LGO). This information is presented to the board and themes are linked to learning reviews, including those identified via our SARs and audit outcomes, when identified. Podcasts, thematic briefings and learning are shared across the service.

The PQPB enables senior leaders within the directorate to review performance in respect of Our Council Plan KPIs (Key Performance Indicators), with data and narrative collectively agreed before inclusion as part of corporate reporting. This also provides an opportunity to review our internal performance measures as listed in our business plan and to take forward any actions needed.

The Adults Portfolio Board - Improvement and Assurance has been established with clear terms of reference to manage and track the delivery of our Improvement Programme. The programme consists of key workstreams, with oversight of both projects and core business identified through meetings with our Heads of Service. Our newly formed Design panel and co-produced guiding principles will ensure the experience of our customers, staff and partners remain at the centre of our improvement journey. This is following a review of our governance arrangements and re-prioritisation of our Improvement Programme 2023-25.

The Strategic Finance and Commissioning Board provides oversight and accountability for the budget and has allowed senior leaders to track the delivery of agreed efficiencies, securing just over £7m of efficiencies in 2022/23, to ensure that the directorate delivered a balanced budget. The creation of a savings dashboard provides the Board with oversight and opportunity to discuss mitigations if there are risks in delivery.

## **Partnership working**

### Across the council

Since December 2022, the Peoples Commissioning Forum, with senior leadership representation from Adults' Services; Children, Young People and Learning; Public Health and Communities, has been established and meets monthly. The purpose of the forum is to enable effective, early dialogue between colleagues across directorates to improve strategic planning and provide a clear pipeline view of strategic commissioning across these four parts of the organisation. The forum has approved and commenced a corporatewide training programme centred on excellent commissioning skills which forms a key component of our improvement programme to deliver sustainable services.

#### **System partners**

We are a leading partner, along with other council directorates such as Children's Services and Public Health, in the development of the West Sussex Place-based Health and Care Partnership, part of the Sussex ICS. Now in its 3rd year, the Health and Care Partnership, which is co-chaired by the DASS, brings together local NHS organisations with local government to lead on collaborative working. This means that the commitments in our strategy have an interdependency with NHS objectives and are embedded within a shared place-based plan.

We work as an active partner in the Sussex ICS, as a member of the NHS Sussex Board and the Sussex Health and Care Assembly. Our officers and members have leading roles in projects such as population health management and health inequality and are involved in the development of indicators and measures for an ICS outcomes framework.

Staff have emphasised the importance of closer working with the NHS to address potential overlap and complexity in the system that could arise from health and care operating with different models. The need to improve communication and information sharing were also emphasised.

#### Co-production and collaboration with the voluntary and community sector (VCSE)

Co-production is at the heart of the Adult Social Care Strategy 2022/25 and work continues to embed a co-production approach across the directorate. Long standing groups such as the Customer and Carer Group, the Minorities Health & Social Care Group and Learning Disabilities and Autism Partnership Boards are key routes for co-production. In addition, productive relations are strengthening with the VCSE through the VCSE Collaboration Board, which was established as part of the Adult Social Care Strategy development. A co-production practitioners' group to engage staff and partners through projects and programmes has also been established. A forum chaired by the Director of Adults and Health with key adult social care providers has been developed to ensure ongoing dialogue and work in partnership to support a challenged provider market in West Sussex.

"We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research."

#### Workforce engagement

The leadership team is engaging with staff through regular service-wide newsletters, staff surveys, including the corporate Pulse survey, messaging from the Director and Assistant Directors and holding virtual and in person question and answer session briefings with staff, with attendance ranging from fifty – one hundred colleagues per session (four sessions held quarterly). This was reflected positively in the staff survey in terms of visibility of the Director and senior leadership team.

A conference for two hundred and fifty members of staff to share learning and for the workforce to reflect on their own wellbeing was held in April 2023. Customer and family and friend carers also attended and were involved in the development of the overall agenda and one of the workshops. A further staff conference is planned for April this year.

### Agenda Item 7

"The conference was excellent. It had a level of authenticity, honesty and openess I've not previously seen at this type of event. The keynote speaker was amazing, really thought-provoking and a slightly different take on resilience to that we normally see. It was great to have experts by experience in the room as their input, feedback and work we can do together to make things better is so, so valuable - ultimately this is what we do our jobs for, to serve others and we all need a reminder of what it can be like on the other side of the fence and the small things that can make a huge difference. Becky and Alan as always had people and staff at the forefront of everything they spoke about, they were honest and authentic, and no sugar-coating! I appreciate that and know others do too. Life in Adults' feels so different under their leadership."

- 2023 staff conference attendee

Leadership and management events take place quarterly across the whole council, bringing together leaders and sharing good practice across the services. Quarterly recognition programmes include the council-wide employee <u>Living our Values</u> awards, with forty-one nominations for individuals and five team nominations for colleagues in the Directorate since April 2022.

Employee surveys are held across the directorate and allow us to gather important feedback from the workforce. As a result of feedback we are holding sessions each year to update staff on key areas of business. Where targets as part of the People Framework Key Performance Indicator questions are unmet, work is underway to address and improve these. The survey data for these questions is as follows:

| My ideas and opinions are valued and<br>are used to help shape the way we<br>work and our future planning                              | 69%<br>Goal*: 75.0% (-6%) |
|--|---------------------------|
| l have regular meaningful<br>conversations with my manager about<br>my performance, wellbeing and<br>support needs                     | 77%<br>Goal*: 80.0% (-3%) |
| I have good opportunities to develop<br>my skills and knowledge in line with<br>my role and my aspirations                             | 77%<br>Goal*: 73.0% (+4%) |
| l am treated with dignity and respect<br>by my work colleagues   | 88%<br>Goal*: 88.0% (+0%) |
| l am part of a supportive team where<br>we regularly reflect on our successes<br>and challenges enabling us to<br>continuously improve | 80%<br>Goal*: 80.0% (+0%) |

\*Goal refers to target performance in Our Council Plan 2021-25

Themes such as staff pay and communication have been highlighted in staff survey responses. As a result:

- We have invested an additional £2m within the adult social care budget to fund an increase in pay and reward for our qualified staffing group. We are currently reviewing our offer as a council in relation to alternatively qualified practitioner roles.
- The leadership team will continue to engage with staff and improve on methods of engagement moving forward.

Gathering feedback from our staff is important. We hold exit interviews with staff leaving the council to ensure that any learning can be applied to improve the experience of our workforce.

#### **Quality framework and collaborative audits**

Our <u>Quality Assurance Framework</u> sets out how the leadership team ensure a culture of performance and continuous improvement, which identifies the things we do well, celebrates success and, where required, takes action to improve. This helps to embed confidence that we are setting and maintaining high standards throughout Adults' Services.

A robust governance structure is in place to support the delivery of continuous improvement and to ensure that a culture of learning exists. This is underpinned by staff performance conversations and team meetings. This enables everyone to play their part in

improving the quality of services provided and supporting the best possible outcomes for those with social care needs.

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An audit framework has been in place since October 2021 and is currently under review. Audits are undertaken collaboratively between the supervising practitioner and the person being audited. This provides scope for practice learning and reflection and for practitioners to be able to identify development opportunities. This work is coordinated and scrutinised by the Quality Assurance Management Board and thematic audits will be scheduled where data and feedback highlight the need for more detailed scrutiny.

Key learning identified through audits, the serious incident reviews learning process and through other quality assurance processes has included:

- Management of risk
- Self-neglect
- Application of the Mental Capacity Act
- Consideration of the person's culture

This learning has been included in the review and renewal of practice guidance, development of new audit processes, including the audits of new system processes, and the dissemination of learning bulletins throughout the service. The learning bulletins can also be found <u>here.</u>

# Performance

We are working to improve and further strengthen our performance and financial management frameworks across the directorate. The development of this is part of our improvement programme to ensure we have visibility and assurance on the delivery of Care Act duties, risks to delivery, quality and sustainability, and people's care and support experiences and outcomes at all levels within the directorate.

A new ASC Performance Dashboard (PowerBI) has been designed to show the customer journey and outcomes in line with the agreed business processes, providing managers with information on 'open' or 'work in progress,' timeliness and completed work concentrating on contact and assessment pathways. Phase 2 of this project will focus on reviews and safeguarding pathways. This work will improve data quality, access to live performance management and case data, and ultimately improve confidence in performance data both internally and externally. In addition, through our Practice and Systems Programme we will amend our financial authorisation process to make this more robust and transparent. This will improve our oversight and ability to forecast budget trends.

Set out below is our performance for 2022-23 and the comparison with the Adult Social Care Outcomes Framework (ASCOF) England average. Figures for 2021-22 are given in brackets.

We use this data to identify positive performance and areas for improvement.

Commentary on actions underway is added to those measures where our scores indicate improvement is necessary:

|  | West<br>Sussex   | England          |
|--|------------------|------------------|
| People who use services who have control over their daily lives                          | 76.9%<br>(76.8%) | 77.2%<br>(76.8%) |
| People receiving self-directed support.  | 100%<br>(100%)   | 93.5%<br>(94.5%) |
| Carers receiving self-directed support.  | 100%<br>(100%)   | 89.3%<br>(89.3%) |
| People receiving direct payments.<br>(See note 1)  | 22.5%<br>(28.8%) | 26.2%<br>(26.7%) |
| Carers receiving direct payments.  | 100%<br>(100%)   | 76.8%<br>(77.6%) |
| People with a learning disability in paid<br>employment.<br>(See note 2)                 | 2.8%<br>(1.1%)   | 4.8%<br>(4.8%)   |
| People in contact with secondary mental health services in employment.                   | 17% (17%)        | 5.5% (6%)        |
| People with a learning disability in stable<br>accommodation - their own or with family. | 57.6%<br>(56.3%) | 80.5%<br>(78.8%) |
| (See note 3)   |                  |                  |

| People in contact with secondary mental health  | 47.0%       | 20.3%                                   |
|---|-------------|---|
| services living independently with or without   | (53%)       | (26%)                                   |
| support.  |             |   |
|   |             |   |
|   |             |   |
| People who use services with as much social     | 44.1%       | 44.4%                                   |
| contact as they would like.                     | (39%)       | (40.6%)                                 |
|   | ()          | (                                       |
| Long-term support needs of younger adults (18-  | 18.5 (13.1) | 14.6                                    |
| 64) met by admission to residential and nursing |             | (13.9)                                  |
| care homes (per 100,000 population).            |             |   |
| Long-term support needs of older adults (aged   | 538.2       | 560.8                                   |
| 65+) met by admission to residential and        | (473.2)     | (538.5)                                 |
| nursing care homes (per 100,00 population).     | (170.2)     | (300.3)                                 |
|   |             |   |
| Older people still at home 91 days after        | 58.9%       | 82.3%                                   |
| discharge from hospital into reablement         | (60.1%)     | (81.8%)                                 |
| services.                                       |             |   |
| Older people receiving reablement services      | 1.0%        | 2.9%                                    |
| after leaving hospital.                         | (0.7%)      | (2.8%)                                  |
|   |             |   |
| (See note 4)                                    |             |   |
| Overall satisfaction of people who use services | 67.7%       | 64.4%                                   |
| with their care and support.                    | (69%)       | (63.9%)                                 |
|   |             |   |
| Proportion of people who use services and       | 71.4%       | 67.2%                                   |
| carers who found it easy to find information    | (70.3%)     | (64.6%)                                 |
| about services                                  |             |   |
| Proportion of people who use services who say   | 85.7%       | 87.1%                                   |
| that those services have made them feel safe    | (88.6%)     | (85.6%)                                 |
| and secure                                      | ,/          | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|   |             |   |

**Note 1 -** We are working to increase the number of people receiving direct payments and the uptake of pre-paid cards (a more efficient way to make payments for both the person and the County Council) as part of our two-year Improvement Programme 2023-25).

**Note 2** -Supporting people into employment remains a priority for us and work is underway to address this measure. We work with <u>Supported</u> <u>Employment West Sussex</u> which is a partnership initiative in which Aldingbourne Trust WorkAid and Workability from Impact Initiatives have joined together to provide this type of employment support. Creating more long-term paid employment opportunities is also an ambition in the <u>Sussex Integrated Care Strategy. Improving Lives Together</u>.

**Note 3 -** Our Supported Living Service is designed to help people with a wide range of needs to retain their independence by being supported in their own home and where independent living is not possible, in places that feel like home. We are holding regular market engagement events to address the insufficient supply of supported living options, particularly the accommodation needs of young people transitioning from Children's to Adults' Services and for people with complex needs.

**Note 4** - We are working towards an improved model of short-term support (intermediate care) to provide a joint NHS and social care reablement service to support people to be discharged from hospital. We have developed a model of bed-based reablement so that people can continue their recovery following a hospital stay at a placement supported by 24 hour carers. We also commission a reablement service for people in their own homes which is time-limited and provided free of charge while people are receiving this focused support.

## Data quality, intelligence, and insights

A three-stage plan of collaborative work with our corporate performance colleagues has been established to improve the quality and accessibility of our data to meet the needs of the business (both strategic and operational), as well as ensuring that we are best placed to meet the objectives of the National Data Roadmap and the move towards Client Level Data. Included within the scope of the project is a requirement to provide real-time data (through Microsoft PowerBI) to all aspects of the service and the care pathway within Mosaic.

The availability and usage of data has improved in recent years, but we want to go further and hone how data and understanding current and future demand, inequalities and gaps in supply and wider demographic and societal changes can improve the services and outcomes for our residents. Effective use of data intelligence and analytical insight is an area we would like to continue to improve so that decisions on future direction are evidence-based. This is a part of the work identified for 2024.

#### Leadership and workforce development

An overarching council adult social care workforce strategy outlining our ambitions for our workforce has been developed. A programme to develop our leaders is also being created to ensure that managers have the skills, knowledge, tools, and confidence to manage through challenging times, keep themselves and their teams focused, well, future-fit and delivering great outcomes. In conjunction with this, leadership teams are embarking on a programme of culture change focusing on engagement, adaptability, resilience, and learning and development across the staff group. We are developing this throughout 2024.

We are proud of our workforce and have a considerable range of learning and development opportunities on offer to staff in all roles and grades via the WSCC Learning Management system including access to a range of apprenticeships to further skills and enable career development. We have a rolling programme of apprenticeships into Occupational Therapy and Social Worker regulated roles. We have recently reviewed and updated learning and development pathways for all operational roles and grades from unregulated staff through to managers. We are continuing to build career pathway maps to enable broader career development conversations and opportunities.

Professional CPD programmes and support are delivered from within our Quality Practice & Service Development Team, including for newly qualified social workers and occupational therapists, those progressing to senior professional level and social worker and occupational therapy apprenticeships. We work closely in partnership with Chichester and Brighton Universities in the design and delivery of courses and programmes at qualifying and post qualifying levels.

#### Assessed and supported year in employment (ASYE)

We have a strong practice development offer and a skilled professional workforce. Our ASYE programme, Post Qualifying (PQ) CPD and apprenticeships provide our regulated workforce with the knowledge, skills, and confidence to deliver high quality social care in line with the Care Act. It is a key component in supporting attraction, retention and progression across the council. We currently have twenty- four social worker apprentices and eight occupational therapist apprentices.

## Spotlight: International recruitment

We commenced our first international recruitment project in January 2022, led by our Assistant Director of Operations. Working in partnership with Tripod/Frontier (a specialist recruitment agency) we set an ambitious objective of making ten offers of employment to international social workers by the end of March 2021 (Phase one).

Utilising a government workforce grant we developed a recruitment campaign guided by the NHS ethical list with a focus on training, progression and wellbeing. Our Principal Social Worker developed an internal induction and training programme including individualised welcome packs with information about West Sussex, the UK and links to relevant community services, which the candidates had indicated were of interest to them.

In addition, we also developed a progression and competency process and commissioned external training from Chinara Enterprises which included coaching sessions to support recruits with the significant life change and specific training to ensure they were well equipped to practice social work in the context of the UK.

We were able to achieve our objective of ten social workers and have since recruited eight occupational therapist of the social workers and have since recruited eight occupational therapist of the social workers and have since recruited eight occupational therapist of the social workers and have since recruited eight occupational therapist of the social workers and have since recruited eight occupational therapist of the social workers and have since recruited eight occupational therapist of the social workers and have since recruited eight occupational therapist of the social workers and have since recruited eight occupational therapist of the social workers and have since recruited eight occupational the social workers and have some have commenced their CPD portfolio to move to senior roles. Several have expressed an interest in training to be AMHPs. We continue to provide aftercare and support to enable the staff and their families to integrate into the council and the UK.

Phase three, which commenced in January 2023, is a joint project with Sussex Partnership NHS Foundation Trust Mental Health provider, utilising the hospital discharge grant, to successfully recruit thirty social workers between the organisations and ten occupational therapists for Sussex Partnership Trust. Phase three candidates are starting to arrive in the UK now and we have utilised a buddy scheme to link them with previous arrivals.

Due to the success of our project, we have presented our approach to ADASS and worked with Oxfordshire County Council to develop an international recruitment tool kit which will be used across the southeast region. We continue to utilise our knowledge to support other authorities.

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