

Public Document Pack

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5 January 2021

Health and Adult Social Care Scrutiny Committee

A virtual meeting of the Committee will be held at **10.30 am** on **Wednesday, 13 January 2021**.

Note: In accordance with regulations in response to the current public health emergency, this meeting will be held virtually with members in remote attendance. Public access is via webcasting.

The meeting will be available to watch live via the Internet at this address:

<http://www.westsussex.public-i.tv/core/portal/home>

Tony Kershaw

Director of Law and Assurance

Agenda

10.30 am 1. **Declarations of Interest**

Members and officers must declare any pecuniary or personal interest in any business on the agenda. They should also make declarations at any stage such an interest becomes apparent during the meeting. Consideration should be given to leaving the meeting if the nature of the interest warrants it. If in doubt please contact Democratic Services before the meeting.

10.31 am 2. **Urgent Matters**

Items not on the agenda which the Chairman of the meeting is of the opinion should be considered as a matter of urgency by reason of special circumstances, including cases where the Committee needs to be informed of budgetary or performance issues affecting matters within its terms of reference, which have emerged since the publication of the agenda.

10.32 am 3. **Minutes of the last meeting of the Committee** (Pages 5 - 10)

The Committee is asked to agree the minutes of the meeting held on 11 November 2020 (attached, cream paper).

- 10.34 am 4. **Responses to Recommendations**
- The Committee is asked to note the response to recommendations made at the 11 November 2020 meeting from West Sussex Clinical Commissioning Group – to follow.
- 10.35 am 5. **Adults and Health - Service Planning Overview** (Pages 11 - 32)
- Key areas for Committee discussion include: -
- Suggested key performance indicators for the Adults and Health directorate as part of the wider West Sussex Reset Plan
 - Areas to be explored relating to Adults and Health portfolio budget savings, including next steps and Committee involvement
 - Reflections from the Covid-19 pandemic to include work with the care and domiciliary care market in West Sussex
 - Planned areas for adult social care improvement and integrated working with the NHS
- 12.05 pm 6. **Appointment to Business Planning Group**
- The Committee to appoint one of its members to the Business Planning Group to fill the minority party vacancy.
- 12.06 pm 7. **Possible Items for Future Scrutiny**
- Members are asked to consider the attached Forward Plan of Key Decisions extract in addition to the Committee's work programme and suggest any items which they believe to be of relevance to the business of the Committee, and suitable for scrutiny.
- (a) **Forward Plan of Key Decisions** (Pages 33 - 44)
- (b) **Work Programme** (Pages 45 - 46)
- Items suggested can also include, issues raised with them by constituents arising from central government initiatives etc. If any member puts forward such an item, the Committee's role at this meeting is just to assess, briefly, whether to refer the matter to its Business Planning Group to consider in detail.
- 12.26 pm 8. **Requests for Call-in**
- There have been no requests for call-in to the Committee and within its constitutional remit since the date of the last meeting. The Director of Law and Assurance will report any requests since the publication of the agenda papers.

12.27 pm 9. **Date of Next Meeting**

The next meeting of the Committee will be held virtually on 24 February 2021 at 10.30 am. Probable agenda items include:

- Proposals to Improve Mental Health Services in West Sussex
- Responses to recommendations from the Covid-19 Preparedness and Restoration, Recovery Planning in West Sussex Task and Finish Group
- Children and Young People's Emotional Health and Wellbeing - Foundations for our Future and learning from Covid-19 – Joint Session with Children and Young People's Scrutiny Committee and West Sussex Youth Cabinet

Any member wishing to place an item on the agenda for the meeting must notify the Director of Law and Assurance by 9 February 2021.

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

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Health and Adult Social Care Scrutiny Committee

11 November 2020 – At a virtual meeting of the Committee.

Present:

Cllr Turner (Chairman), Cllr Walsh, Cllr Arculus, Cllr Atkins, Cllr Boram, Cllr Bridges, Cllr A Jones, Cllr M Jones, Cllr Markwell, Cllr O'Kelly, Cllr Pendleton, Katrina Broadhill, Cllr Bangert, Cllr Bennett, Cllr Bob Burgess, Cllr Karen Harman, Cllr Peacock and Cllr Loader

Apologies were received from Cllr Wickremaratchi and Cllr McDonald

Also in attendance: Cllr A Jupp

12. Declarations of Interest

12.1 In accordance with the code of conduct, the following personal interest was declared: -

12.2 Cllr Turner in respect of item 5, Primary Care Restoration and Future Planning in West Sussex as a pharmacist.

13. Urgent Matters

13.1 The Chairman reported that since the publication of the agenda there had been three new appointments to the Committee.

13.2 Resolved – that the Committee notes the appointments of Cllr Joss Loader (representing Adur District Council) and Cllr Bob Burgess (representing Crawley Borough Council) to the Committee and the appointment of Cllr Sean McDonald to fill the Conservative substitute vacancy.

14. Minutes of the last meeting of the Committee

14.1 Resolved – that the minutes of the meeting held on 9 September 2020 are approved as a correct record and are signed by the Chairman.

15. Responses to Recommendations

15.1 Resolved – that the Committee notes the responses to recommendations made at its 9 September 2020 meeting.

16. Primary Care Restoration and Future Planning in West Sussex

16.1 The Committee considered a presentation and reports by West Sussex Clinical Commissioning Group and reports by Healthwatch West Sussex (copies appended to the signed minutes). The presentation was introduced in four parts – Restoration and Recovery, Digital Access, Workforce and Estates.

16.2 Sarah Henley – Director of Primary Care introduced the section on Restoration and Recovery highlighting the following: -

- No West Sussex GP practices were in special measures despite the pressures of the pandemic
- The Clinical Commissioning Group (CCG) was supporting GP practices to return to normal and keeping them resilient whilst responding to the second wave of the pandemic
- The reinstatement of non-essential services that had stopped during the first few months of the pandemic, had begun in August
- 30 workstreams with five key objectives were outlined in the presentation
- The most vulnerable people in the county had been identified for prioritisation during the pandemic

16.3 Hugo Luck – Deputy Director of Primary Care added the following: -

- The CCG's winter plan would focus on resilience and those most at risk
- It would also focus on getting patients to the right care at the right time, freeing up A&E as much as possible backed up by a system-wide communications campaign

16.4 Laura Robertson – Associate Director of Communications and Engagement told the Committee that the system-wide communications campaign is being carried out in conjunction with partners across the whole of Sussex and work was taking place with community groups to help spread the word, especially to those without computer access.

16.1 Summary of responses to committee members' questions and comments: -

- The target for flu vaccinations was 75%, so far 72% of over 65s had been vaccinated and 30% to 40% of other groups (43% of 2 to 3 year olds) with more vaccination supplies for the under 65s coming soon
- The aim was to vaccinate as many people as possible against flu as soon as possible, to lessen potential delays in Covid vaccinations if people couldn't have both close together
- It was suggested that information on Covid could be handed out to people receiving vaccinations
- Venues for Covid vaccinations would be chosen which did not disrupt other primary care services
- Elderly people living alone may be on the highly vulnerable list – GPs would decide if they needed home visits
- The elderly was a priority group with appropriate care plans in place where needed
- GPs were to get funding for a frailty service for care homes that would start on 1 December
- Enhanced help for care homes had begun in October
- There was a query on the number of patients waiting to catch-up on services – **ACTION:** Pennie Ford to supply the figures
- The effectiveness of the communications campaign would be measured by digital access, a baseline survey and regular meetings

with Healthwatch and voluntary groups to understand feedback from the public on key messages and approach

- The immunisation programme for children had continued during the pandemic and was up to date
- Screening for cervical cancer was deferred at the beginning of the pandemic, but was now up to date
- There had been access problems to some cancer services during the first phase of the pandemic – Queen Victoria Hospital, East Grinstead, had acted as a regional cancer centre and work was going on to increase capacity but the need for increased cleaning was slowing some services
- Health checks for those with learning disabilities and mental health issues were at normal levels for the time of year

16.2 Resolved – That the Committee welcomes the work of the West Sussex Clinical Commissioning Group and GPs in West Sussex to restore primary care services but asks that:

- i. Those who are vulnerable at home are prioritised and are supported by community services
- ii. Primary Care restoration is not impacted by the potential mass vaccination programme relating to Covid-19, requesting a system response across the Sussex Health and Care Partnership
- iii. There is continuous monitoring of the communications campaign, especially relating to flu and routine vaccinations

16.3 Hugo Luck – Deputy Director of Primary Care introduced the section on Digital Access highlighting the following: -

- The pandemic has changed the way primary care sees patients although face to face appointments still took place where appropriate
- What has worked well will be continued
- Alternatives and additional assistance will be given to those without digital access
- Locally commissioned services are largely paper based, so people have been employed to convert records to digital which should improve the offer to patients

16.4 Summary of responses to committee members' questions and comments: -

- The new ways of interacting with GP surgeries get people to the right person quicker – for many they have been popular and supported people to access help more easily, however it is recognised there are challenges for some less digitally abled
- There was helpful information on surgery websites about new ways of working which should be as digitally inclusive as possible
- There was a move towards fixed appointment times, but keeping to time depended on the length of phone calls, which were taking longer than face to face consultations

- Patients were asked for times when they could be contacted, but 20% of the time they were not available when they said

16.5 Resolved - That the Committee wholeheartedly supports the recommendations contained in the joint report from Healthwatch West Sussex and the West Sussex Clinical Commissioning Group.

16.6 Howard Duff – Primary Care Workforce Lead, introduced the section on Workforce highlighting the following: -

- Staffing levels in Sussex were good compared to the figure for England overall
- A large majority of staff were female and many staff were aged between 50 and 59 meaning a large number of staff would retire around the same time
- GPs needed more support staff for patient care
- Staff in new roles that were created through the Additional Roles Reimbursement Scheme would require training
- Mental Health practitioners and paramedics could not be recruited under the scheme until April 2021

16.7 Summary of responses to committee members' questions and comments: -

- Committee members would be interested to know the breakdown of role by age – **ACTION:** Howard Duff to provide these figures
- The few physician associates could carry out GP work except some diagnostics and prescribing medicines
- The CCG was waiting on NHS England to clarify the role of mental health practitioners, when this was known the Primary Care Networks would decide where they should be located
- Healthcare jobs were promoted in schools and colleges
- Recruitment to permanent posts had improved, but was still challenging
- The primary care network looked at population growth in October and the CCG had plans to expand services in areas where housing was increasing, but it was difficult to predict what the future populations of these areas would be

16.8 Resolved – That the Committee supports planning in relation to workforce and asks:

- i. That there is positive communication with the public setting out the wider group of staff who can provide primary care services, rather than just GPs and highlights the importance of forward planning with the voluntary sector in its support to primary care
- ii. For assurance that the development of a robust plan, in relation to recruitment of mental health practitioners, is in place
- iii. That the importance of connecting with schools/colleges in relation to careers in healthcare to allow students to make the relevant subject choices

16.13 Simon Clavell-Bate – Head of Estates West Sussex, introduced the section on Estates highlighting the following: -

- The CCG meets with district and borough councils on a regular basis and works with them on their infrastructure delivery plans to assess the impact on the NHS in terms of services and premises
- The CCG also works with Primary Care Networks on where services are needed
- Complications can arise when land has multiple owners
- The CCG was working well with councils that decided how to spend section 106 and the Community Infrastructure Levy money

16.14 Summary of responses to committee members' questions and comments: -

- Meetings were taking place about new developments in Bognor Regis, Pagham and Bersted, but there were challenges around the sites identified in Littlehampton and Shoreham due to multiple landowners
- Communication about access to primary care in relation to new developments could be improved
- Primary Care Networks would decide if frailty hubs should be virtual or physical – there was a preference for physical

16.15 Resolved - That the Committee: -

- i. Asks for a clear communication strategy, working with partners to ensure that West Sussex residents understand primary care planning, in relation to housing developments and demographic changes
- ii. Stresses the importance of, where possible, co-location of services in hubs within Primary Care Networks

17. Covid-19 Preparedness and Restoration, Recovery Planning in West Sussex Task and Finish Group Report

17.1 Before considering the Task and Finish Group's report the Chairman invited Dr Tony Hill, Interim Director of Public Health, to give an update on the Covid-19 situation in West Sussex: -

- The average number of cases in West Sussex was 100 per 100,000, lower than both the average for South East England (130.5 per 100,000) and the whole of England (243.3 per 100,000)
- Figures ranged from 73.1 per 100,000 in Adur to 129 per 100,000 in Crawley
- Around 20% of people with Covid were over 60, around another 20% were between 18 and 25
- Positive test results ranged from 2.9% in Worthing and 5.9% in Crawley – in some parts of the country the rate was 10%
- The rate of increase was doubling every 21 days in West Sussex
- Local test and trace should begin on 26 November and run in conjunction with the national system

- The local system would contact people that the national system could not reach after 48 hours – these people would then be contacted by the national system
- West Sussex was not included in the first tranche of mass testing as it was not one of the worst affected areas
- Vaccinating the UK population would take time – as not enough doses were available so people would be prioritised based on need
- University students would be offered tests before returning home for Christmas

17.2 Amanda Jupp, Cabinet Member for Adults & Health, told the Committee that: -

- Wide ranging communication about the vaccination was being planned
- The Council was working closely with care homes about plans for vaccinations and visits

17.3 The Committee considered a report by the Chairman of the Task & Finish Group on Covid-19 Preparedness and Restoration, Recovery Planning in West Sussex.

17.4 Resolved – That the Committee agrees that the recommendations of the Task & Finish Group be shared with the Cabinet Member for Adults and Health (Chairman of West Sussex Health and Wellbeing Board) and the West Sussex Clinical Commissioning Group Executive Managing Director.

18. Forward Plan of Key Decisions

18.1 Resolved – That the Committee agrees that a briefing on the proposed decision on extension of contracts for the provision of Specialist Health Services for people with learning disabilities and autism in West Sussex, should come to the next meeting of the Business Planning Group.

19. Work Programme Planning and Possible Items for Future Scrutiny

19.1 Resolved – That the Committee notes its draft work programme.

20. Date of Next Meeting

20.1 The next meeting of the Committee will take place on 13 January 2021.

Health and Adult Social Care Scrutiny Committee

13 January 2021

Adults and Health - Service Planning Overview

Report by Keith Hinkley, Executive Director of Adults and Health (DASS)

Electoral division(s): N/A

Summary

The purpose of this agenda item is for Members to consider a set of different but linked areas of business. It includes a chance to reflect on the work of the Adult Social Care service throughout the Covid-19 pandemic and what has changed. It also covers what is planned as key areas of development and improvement as well as saving plans, all in the context of the Council's Reset Plan and current and future financial challenges.

Key areas for discussion include, proposed key performance indicators (KPIs) for the Adults and Health part of the Reset Plan; areas to be explored relating to Adults and Health portfolio budget savings, including scrutiny; reflections from the Covid-19 pandemic to include work with the care and domiciliary care market in West Sussex and planned areas for service improvement and for integrated working with the NHS.

Resources in relation to the West Sussex Reset Plan and Adults and Health, are included in Appendix 1 to this report. This includes the proposed requirement to make strategic savings, which are set out below, and achieve additional efficiency savings as part of business as usual.

Focus for Scrutiny

Areas to consider are:

1. In relation to the key performance indicators developed as part of the West Sussex Reset Plan:
 - Do the proposed KPIs sufficiently reflect the service priorities and enable Members to measure service performance?
 - How will Members ensure they can use performance information to recognise issues or areas of concern in a timely manner?
 - Do they meet the principles identified for effective performance management (see paragraph 1.2)?
 - What support do you as scrutiny members need to assist you in scrutinising the outcomes of the Reset Plan?
2. To identify any factors that the Committee recommends should be included as part of any consultation process undertaken in relation to Adults and

Health budget savings, to ensure the impact of the proposals on residents and stakeholders is sufficiently captured.

3. What has worked well and less well throughout the Covid-19 pandemic and what learning can be taken forward, to include the County Council's work with the care and domiciliary care market (Appendix 5).
4. The proposed milestones and timetable for the development of an Adults and Health Plan 2021/22 to ensure that the Committee can influence developments as they progress (paragraphs 1.12-13).
5. To confirm what further scrutiny the Committee would wish to undertake in relation to Adults and Health budget savings proposals as they are developed, as well as any other work planned for areas of improvement.

Proposal

1 Background and context

West Sussex Reset Plan

- 1.1 The latest version of the West Sussex Reset Plan was presented to County Council in December 2020 for approval. The Plan has been developed through engagement with officers and partners building on the framework approved by County Council in July. The views and additional ideas of all Members were sought at a session on 12 November 2020 and have been included within the latest version of the Plan.
- 1.2 The Performance and Finance Scrutiny Committee in December 2020 was asked to consider the expectations and principles which should drive scrutiny of corporate performance and how scrutiny committees can be supported in that task and in their contribution to setting performance measures. The committee recommended some over-arching principles to be followed; that KPIs needed to be SMART (specific, measurable, achievable, realistic, timely), include value for money type indicators to link to financial management, allow benchmarking information for comparison with key statistical neighbours and trend analysis to track progress.
- 1.3 During January each of the service scrutiny committees will focus attention on the priorities and outcomes specific to their area of council business and consider how scrutiny of performance may best be achieved in order to inform the proposals for KPIs. These measures will be included in the final plan which will be presented alongside the budget for approval at County Council in February 2021, with details at Appendices 2 and 3. This Committee may of course seek additional performance information to cover a broader range of measures relating to areas of business it may focus on, which could be considered in the context of the Adults and Health Plan for 2021/22. The attached KPIs are to be included in the corporate plan and so should give a broad indication of performance rather than anything more detailed the Committee may draw upon from time to time. Members should note paragraph 1.13 below.

West Sussex County Council Budget – Proposed savings within the Adults and Health portfolio

- 1.4 At its meeting on 24 November 2020, the Cabinet agreed to progress a number of savings proposals for further consideration, which included the following that fall within the Adults and Health cabinet portfolio:
- Review of in-house residential services
 - Review of Shaw day services
 - Review of lifelong day services
 - Public Health Grant: Social care support contracts and reduction in wellbeing programme
- 1.5 Attached at Appendix 4 is further detail about each area of savings. As each of the proposed savings requires a significant change to the support provided by West Sussex County Council there will be a need to undertake a consultation exercise and complete an equality impact assessment. The intention is that the consultation process will take place over 12 weeks and give all of those affected by the potential changes and broader stakeholders an opportunity to give their views. These will then be collated for consideration by Cabinet before final decisions are made about the savings proposals. The outcome of the consultation will also help inform the equality impact assessment which again will be considered by Cabinet as part of the decision-making process.
- 1.6 The Committee may wish to consider forming a Scrutiny Task and Finish Group between publication of the Cabinet papers and the Cabinet meeting to consider the final proposals following consultation and completion of the equality impact assessment. This would enable the views of the Committee to be taken into account by Cabinet when the savings proposals are being considered.
- 1.7 In addition to the strategic savings proposed Adults and Health will continue the development of re-ablement services, Technology Enabled Care Services and alternatives to residential or nursing care, for example, extra care housing, supported living and the Shared Lives Scheme. This will help maximise the independence of people needing Council support and therefore reduce the costs of ongoing care and achieve business as usual efficiencies. As more detailed proposals emerge there will be opportunities for scrutiny.

Reflections from the Covid-19 pandemic to include work with the care and domiciliary care market in West Sussex

- 1.8 The Covid-19 pandemic has been the most significant challenge faced by NHS, Public Health and social care. The rapid response by all agencies to the challenges has seen the development of new ways of working and learning that will have an ongoing impact on Adults and Health and its partnerships. Details are set out at Appendix 5, covering the following key elements:
- Support to those who are homeless
 - Support to the care market
 - Financial support to the care market

- Hospital Discharge and Combined Placement Sourcing Team Building capacity to meet demand
- Services to adults
- Flexible workforce
- Mental Health
- Working with partners

1.9 The development of new ways of working and learning from the Covid-19 pandemic response will be integrated into the Adults and Health Plan for 2021/22.

Planned areas for Adult Social Care improvement and integrated working with health partners.

1.10 The Committee will be aware of the Local Government Association (LGA) Peer Review in 2018 and the Adults and Health response. Set out in Appendix 6 is an update on progress which covers:

- LGA Peer Review outcome
- Adults and Health Development Plan, including demand management
- Housing and Accommodation, including extra care Market shaping, development and relationships
- Mental Health Services
- Improving Hospital Flow
- Practice and Quality
- Lifelong Services
- Business Infrastructure Development

1.11 There is ongoing work in all the areas highlighted and it is again the intention that the next steps for the department are integrated into the Adults and Health Plan for 2021/22.

1.12 The department will develop an Adults and Health Plan for 2021/ 22 within the framework established by the West Sussex Reset Plan. The Adults and Health Plan will incorporate the priorities, objectives and KPIs set for the department by the West Sussex Reset Plan. Further detail will be included on the specific work to be undertaken by Adults and Health, including:

- Demand management and effective use of resources
- Quality and Practice
- Whole system working and outcomes
- Development of new services in line with Council priorities
- KPIs reflecting the work to be undertaken and outcomes planned
- Work during 2021/22 to review agreed areas of the departments work to help form proposals for the 2022/23 plan and beyond

1.13 The Committee may wish to reflect on the KPIs it views as important so that these can be considered by Adults and Health as the Plan is being drawn together. In coming to a view it is important to note that KPIs that can be benchmarked against other local authorities, through the Adult Social Care Outcomes Framework and South East Association Directors of Adult Social Services Performance Framework, would enable the Committee to form a

view about the Council's relative performance. For information, Appendix 7 has details of these performance measures.

- 1.14 The Committee will be aware that the NHS is consulting on proposals to re-organise. There is a local commitment from partners to use the opportunities presented by the further development of Integrated Care Systems and a West Sussex based Integrated Care Partnership, alongside joint commissioning arrangements, to develop an integration plan for West Sussex that identifies:
- Shared vision and objectives for integrated health and social care
 - Priorities and plans for 2021/22 and beyond that deliver improved outcomes for West Sussex residents
 - Review of pooled and aligned budget arrangements
 - An agreed approach to shared governance, that takes full account of local democratic accountability
- 1.15 Given the current challenges of managing the Covid-19 pandemic it is planned to take the outcome of this work to the June meeting of the Health and Wellbeing Board. The Committee may wish to consider receiving a report on this work prior to the presentation of joint proposals to the Health and Wellbeing Board.

2 Consultation, engagement and advice

- 2.1 The report identifies areas where the Committee may wish to agree views that it wishes taken into consideration as the West Sussex Reset Plan, Adults and Health KPIs, savings consultations and development of the Adults and Health Plan are taken forward.

3 Details

- 3.1 As this is an overview report for the Health and Adult Social Care Scrutiny Committee the Equality, Human Rights, Social Value, Sustainability, and Crime and Disorder Reduction Assessments will be addressed as part of the overall Reset Plan, or individual key decisions reports and within individual projects and work streams.

Keith Hinkley

Executive Director of Adults and Health (DASS)

Contact Officer: Helena Cox, Senior Advisor, Democratic Services 0330 222 2533 helena.cox@westsussex.gov.uk

Appendices

- Appendix 1 Adults and Health Medium Term Financial Plan
 Appendix 2 Draft Reset Plan as at December 2020 – to follow
 Appendix 3 KPIs specific to the committee's portfolio area of responsibility – to follow
 Appendix 4 Adults and Health Strategic Savings 2021/22

Agenda Item 5

Appendix 5 Learning from managing the Covid-19 pandemic

Appendix 6 Adults and Health progress

Appendix 7 Adults and Health KPIs (additional to reset plan KPIs) - to follow

Background papers - None

Adults and Health proposed budget savings, per Cabinet 24 November

	2021/22 £000s	2022/23 £000s
Strategic budget options		
1. Review of in-house residential services	640	
2. Review of Shaw day services	250	
3. Review of Lifelong Services day services	1,120	1,120
4. Public Health Grant	370	88
Total	2,380	1,208
Business as usual options		
1. Non-residential customers to remain at home with reduced package	890	2,610
2. Redirecting residential customers to home-based care		2,020
3. Increase supply and use of shared lives carers	448	
4. Supported Living - transfer of customers from residential provision	1,059	
5. Increase number of customers supported by live-in care	106	
6. Reduce use of single person services for customers where shared services may be suitable	114	
7. Public Health - use of uncommitted Public Health Grant/other changes within existing contracts	840	
8. Absorption of demand growth for adult social care from older people through demand management	4,361	
Total	7,818	4,630
Grand Total	10,198	5,838

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1. Review of in-house residential services £640,000

Proposal:

- 1.1 In 2018 the 'Choices for the Future' transformation programme for in-house services was approved by the Adults Cabinet Member. Within the programme there was a commitment to review the in-house residential services. The County Council is developing an accommodation strategy, and this will be an ideal opportunity for the in-house service to be part of this piece of work. There are significantly fewer referrals being made to older peoples residential services due to initiatives like Home First. It is anticipated there could be opportunities to redevelop some sites into extra care housing or release for a capital receipt.
- 1.2 Marjorie Cobby House in Selsey is a resource centre that works primarily with St Richards Hospital, providing Discharge to Assess (D2A) and interim beds. Since the introduction of Home First and the increase of capacity in the Community Rehabilitation Services (CRS) there has been a change in referral patterns into the service. It is anticipated there will be a need for a small provision of D2A beds in the Western area, which could be purchased in the external market and closer to the acute setting. The cost for replacing eight beds is approximately £320K, which would be funded from the gross saving to deliver a net benefit of £640k. Marjorie Cobby House is not a long stay resource so impacts for families and people using the service is minimised if closure is agreed, following consultation, that will include staff.

2. Review of Shaw day services - £250,000

Proposal:

- 2.1 Shaw Day Services are provided at six of the twelve care homes that are operated by Shaw Healthcare as part of a block contract on behalf the County Council. Before Covid-19 pandemic closed the services on the 25th March 2020, 92 people were registered to attend the six services which were operating at an average of 45% attendance against capacity. This meant that the County Council was paying for places that were not being used. Since March operational staff report that now only 50 people are either able to, or want to return to the same day service provision meaning that demand has significantly reduced further.
- 2.2 A review of the services was already in train as part of a previous savings plan relating to a Cabinet Member decision taken in May 2018 (AH02 18/19). It is proposed to extend this to assess whether all the Shaw Healthcare day services are required, whether they provide the best use of public money, and if not, what should change in order to deliver better outcomes for people.

3. Review of Lifelong Services day services - £2,240,000

Proposal:

- 3.1 The County Council has a clear strategic intent to reduce dependence on building based day services for people with learning disabilities and to ensure that people, wherever possible, are able to access local community provision. There is a renewed focus on enabling independence and increasing employment opportunities. There is an intention to significantly reduce the spend on building based services to create the savings. This will be phased in part due to the reduced use of day provision during Covid-19 and the emergence of new ways of offering support, the opportunities afforded by the re-procurement of services at the end of the current contract in March 2022 and continued development of the Council provided day services. Initial discussions have been held with contracted day services about a new model and there will be further consultation with all stakeholders including customers and family carers.

4. Public Health Grant - £508,000

Help at Home - £408,000 (£270,000 in 2021/22) for all social support contracts

Proposal:

- 4.1 The Help at Home contract has provided a subsidised home support service to people since 2013. It provides help to vulnerable older people who do not meet the Care Act eligibility threshold with basic household tasks, i.e. cleaning, shopping etc. Customers are provided with up to a maximum of 1-2 hours per week at a subsidised hourly rate. The service had 677 customers prior to COVID-19, but this has significantly decreased following the pandemic. The existing customer base is static in nature meaning that many customers have remained in the service on a long-term basis.
- 4.2 The model is not aligned with the current model of community led support for adults and as part of the current WSCC Social Support Recommissioning Programme, and therefore it is proposed this service is decommissioned. The current proposed plans for decommissioning aim to minimise risk to service users, minimise additional demand for adult social care. It is proposed that a tapered withdrawal of the service would be accompanied by ongoing assessment of service user needs and integration with community support. It is proposed that a tapered withdrawal of the service would be accompanied by ongoing assessment of service user needs and integration with community support.

5. Reduction in Wellbeing Programme - £100,000

Proposal:

- 5.1 The West Sussex Wellbeing Programme is the partnership between public health in West Sussex County Council and District and Borough Councils. With a total budget of £2,116,000, it is the main, large scale prevention programme in the county and the contact point for adults to access a wide range of support via self-referral or following signposting from a front line professional. It takes forward a number of commitments set out in the Joint Health and Wellbeing Strategy. Most of the activity within the programme is concentrated on tackling overweight and obesity in adults of all ages. The programme has been significantly disrupted during COVID-19 and will take time to recover, it is expected to underspend this financial year. There are aspects of the business plans which have ceased or not started due to COVID-19 which could be halted permanently to achieve the savings. For example, NHS health checks have not been taking place during the pandemic so additional resource for them is underspent. If agreed Public Health intend to develop proposals about how best to achieve this saving in order to minimise the adverse impacts on the health of the local population, on reducing inequalities and on the strength of the partnership.

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COVID-19 Response

1. Support to those who are homeless:

- 1.1 At the peak of the lockdown 246 people were accommodated in a variety of locations across the county and given three meals a day and food parcels. Mental health and substance misuse services have also been offered where applicable.
- 1.2 To date more permanent accommodation has been offered to all those who wanted to accept; emergency accommodation continues to be provided to others whilst they await suitable offers of housing that becomes available.
- 1.3 As a result, at the end of October there were 64 rough sleepers in West Sussex with accommodation and support continued to be offered to those that wished to engage with services. (It should be noted that this number varies from week to week).
- 1.4 The County Council continues to support the rough sleeping charities with additional infection control funding to enable them to offer appropriate accommodation to those that require it and keep the rough sleeping population as safe as possible.

2. Support to the care market:

- 2.1 In addition to providing a 'business as usual' service, Adults Services has provided significant additional support to care providers during Covid-19. This has included:
 - Covid-19 specific guidance and information,
 - Daily provider newsletters,
 - Virtual provider forums,
 - A redesigned, rescoped and repurposed on-line Provider Zone with a telephone support line,
 - Intensive support for any care provider identified as 'at risk' of failure or with Covid-19 outbreaks.
 - Encourage providers to support safe visiting in care homes (making use of Round 2 Infection Control Funds
 - Crisis support to care settings when they have been affected by COVID
 - The care home multi agency Incident Management Team meets weekly reviewing all providers experiencing pressures, with outbreaks or where the system has concerns.

3. Financial Support to the care market:

- 3.1 The directorate has distributed the majority of the £23.46m Adult Social Care Infection Control Fund grants received from Government. This is across the full range of social care providers including supported living, extra care housing and home-based care and homelessness. Before Government stepped in with support through the Infection Control Fund the County Council committed at risk £8.83m to support the sector.
- 3.2 Additionally, the County Council has provided a financial package of support to care providers. This has included, for care services supporting customers funded by the County Council, a 20% uplift for domiciliary care, a 10% uplift to other care providers over a 3-month period, upfront payments to day centres for people with learning disabilities and swifter payments to support cash flow. This was followed by a further cross-market uplift of 5% in payments to care providers for an additional three months.

4. Hospital discharge and Combined Placement Sourcing Team (CPST):

- 4.1 We have developed our Hospital Discharge and Placements arrangements in partnership with health colleagues and are supporting people coming out of Hospital 8am – 8pm, 7 days a week.
- 4.2 The CPST is multi agency including CHC and the community NHS provider and supports the discharge of all customers from acute hospitals including self-funders. There is a Home First model in place with integrated therapy and care hours, and assessment of people in their interim placement is largely done within 6 weeks and many people are able to move to their long-term placement in this time. The CPST has to date received 6,811 referrals and facilitated 4,568 discharges.
- 4.3 This approach has resulted in the average length of time someone waits in a bed after they are medically ready for discharge, being reduced from 15 days to an average of 4 days (Western Sussex Hospitals NHS Foundation Trust) and from 10 to 4 days (Surrey and Sussex Healthcare NHS Trust). This has reduced hospital bed days and the risk of people becoming more dependent by waiting in a bed, allowing them to return home much sooner.
- 4.4 The CPST has available information on all care settings with restrictions and Public Health England notifications of outbreaks alongside effective tracking systems to ensure market information is readily available and can be monitored. A hospital discharge dashboard contains rich data and is reviewed in detail twice weekly. The dashboard has been refined over time and is an iterative and growing tool incorporating effective tracking of discharges and onward journeys at an individual, aggregated and financial level.

- 4.5 Assessment of people in their interim placement is largely done within 6 weeks and many people are able to move to their long-term placement in this time.
- 4.6 There is clear agreement between the West Sussex Clinical Commissioning Group (CCG) and local authority on the leadership of the commissioning and contracting of additional capacity to meet winter demand and the enhanced provision required for the hospital discharge pathways. This is reflected in a variation to the longstanding joint commissioning Section 75 agreement.
- 4.7 The success of the arrangement means that the County Council and the CCG are looking to make CPST a permanent feature so that the benefits it has delivered will endure beyond the pandemic.

5. Building capacity to meet demand:

- 5.1 Our commissioning and contracting teams have responded quickly to secure additional capacity and support in the light of demand increases due to Covid-19 and the winter period more generally. This includes securing additional domiciliary care rounds, additional Homefirst hours and working in partnership with the CCG to secure bed capacity. This includes the establishment of designated accommodation for people leaving hospital who are Covid-19 positive and need a period of isolation before their onward move to a care setting.

6. Services for Adults:

- 6.1 Where services have had to close due to Covid-19, the wellbeing of service users remains a priority and alternative contact and support is being provided where possible. Adult social care worked to re-open services that are critical for residents, including in-house and independent sector day services supporting adults with learning disabilities, which are now operating at above 50% capacity
- 6.2 In other areas of the business face to face contacts have been prioritised in accordance with government guidance, and our services have remained up and running.

7. Flexible Workforce:

- 7.1 Staff at all levels across Adults & Health have worked incredibly flexibly throughout the Covid-19 pandemic and continue to do so.
- 7.2 At the start of the pandemic, staff in social care volunteered to change their working patterns to provide social care support 8am – 8pm, 7 days a week. Community Social Work and Occupational Therapy teams were also reorganised to focus on supporting the requirement for rapid hospital discharges. Staff were redeployed to other teams such as the Combined Placement Sourcing Team and the Community Hub.

- 7.3 Staff have also adjusted to new ways of working, for example social care assessments and support took place virtually over telephone calls or video calls for customers that were shielding.
- 7.4 Adults Services has utilised a range of initiatives to ensure that management support is available to staff that require it and contact with all staff is maintained. The physical and emotional wellbeing of staff is being monitored by managers and regularly promoted.

8. Mental Health:

There has been effective multi agency working to support mental health hospital discharges including the establishment and growing of an innovative Discharge to Assess Model (cited in the recent NHSE guidance on hospital discharge from acute mental health hospitals). This is a model developed jointly with the acute Trust and CVS providers which supports both hospital discharge and admission avoidance. The Council has proactively participated in regular and extensive multi agency discharge events (MADE) which has resulted in an overall reduction in out of area placements but it is also acknowledged that Covid-19 has led to a significant surge in presentations of people with mental ill health which has meant a small increase in DTOC and some challenges about move on from A&E when people present acutely ill. Without the strong system working it is felt that this situation could have been significantly more concerning.

9. Working with partners:

There are clear governance and escalation routes and enhanced partnership relationships. The following (and other touchpoints) are in place and can be stepped up or down according to need; West Sussex silver meetings twice a week, weekly adult social care cell meetings reviewing internal and operational pressures, daily OPEX, twice weekly capacity oversight groups, weekly care home incident management meetings, place based and Sussex wide care home groups.

The role of the community and voluntary sector in supporting to keep people well at home and effective hospital discharge home is understood and opportunities explored further. For example, the role of the Take Home and Settle and Home from Hospital services are being promoted.

Healthwatch provide regular insights into information gathered from residents to inform delivery of services and highlight concerns.

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1. **Background and Context: Local Government Association (LGA) Peer Review**

1.1 The LGA peer review of adult services in May 2018, produced a report which was critical of a range of elements of adult service performance including; standards, safeguarding, service strategies, and partner relationships. The peer review set the Council the challenge to key priorities including to:

- Implement a hundred day plan to address the core basics and ensure capacity and capability is in the right place including integrated health and social care responsibilities
- Engage with communities and people who use services to ensure that your delivery of the spirit of the Care Act and the customer journey is focused on delivery of a responsive, effective and asset based service
- In the immediate future reach out and get a clear commitment to establishing a joint vision for health and social care focused on the needs and outcomes for the population
- Consider a properly resourced transformation function that provides oversight and drives large scale transformation

1.2 To respond to the peer review recommendations, the service developed an [Adult Social Care Vision and Strategy for 2019-21](#) and the immediate and most pressing challenges were addressed to make the service safe and legally compliant, for example, the Safeguarding Adults Board is Care Act compliant; Deprivation of Liberty Safeguards (DoLS) assessments are now risk managed; a safeguarding adults' hub is now successfully in place; social work recruitment has improved and there is much better availability of data to support performance management.

1.3 In addition to the above, a great deal of work to overcome operational pressures was carried out by the teams to bring down waiting lists to manageable, safe levels and to change the way that they work focusing on strengths based, collaborative working with colleagues and partners.

2. **Adults and Health Development Plan**

2.1 Building upon the developments post the peer review, foundations from the improvement programme and the opportunities identified by the Newton diagnostic, a consolidated Adults and Health development plan has been sharpened and reconciled against the budget challenges. Below is a summary of the workstreams and their progress to date:

2.2 **Demand Management:**

2.2.1 To reduce the level of social care intervention, the Council's aim is for prevention to be at the forefront of all social care activity within a strength's based, risk enabled, tech aware environment. To facilitate this aim, we have:

- 2.2.2 Established a monthly Prevention Steering Group to provide oversight and co-ordination of all prevention related activity including:
- Accommodation and care strategy (see below) including ambitious targets for extra care housing
 - Assistive technology strategy (across all cohorts)
 - Community equipment service development and re-procurement
 - Disabled facilities grant steering group
 - Prevention culture and practice
- 2.2.3 A full and comprehensive strategy will be further developed, co-produced with residents and stakeholders across health, housing and the voluntary sector.
- 2.2.4 A range of operational activities will be progressed in support of the prevention strategy including:
- increasing the capacity and performance of the reablement offer for West Sussex;
 - the embedding of a strengths-based model of social work practice where risk is well understood, and technology employed to assist independence;
 - continued joint working with the Communities Directorate
 - enhancing support to carers, both formal and informal

2.3 Housing and Accommodation:

- 2.3.1 The intention is that the County Council takes a strategic leadership role in ensuring access to housing and accommodation-based support for those who need it, including those who are at risk of homelessness. A Memorandum of Understanding setting out the strategic relationship between Health, Districts and Boroughs and partners has been co-produced and signed up to by all.
- 2.3.2 On 20th October 2020, a multi-agency virtual housing conference was hosted and facilitated by WSCC.

2.4 Market shaping, development and relationships:

- 2.4.1 A key element of the ongoing work of the commissioning function in Adults' Services has been to support, shape and develop the care market. A strategic provider forum has been put in place incorporating providers across a range of sectors who can come together, and both inform and be informed about market pressures and issues and the county council's strategic intent.
- 2.4.2 We have a robust infrastructure via contracts and commissioning teams and the Care and Business Support (CABS) team to engage with providers we both contract with and those we don't. This has strengthened our relationships with the care home and domiciliary care sectors with whom we have traditionally had mixed levels of engagement

- 2.4.3 A market position statement has been issued regarding people with learning disabilities and autism and the re-procurement of the supported living framework due in 2021 sets out clearly the wish to support people to live in accommodation that is most enabling and least restrictive. In particular there are plans in place to enhance the West Sussex Extra Care Housing offer.
- 2.4.4 The Council and partners submitted their Winter Plan for 2021/21 to NHS England (NHSE) on 1 October. NHSE declared it an “exemplar plan that should be shared as good practice” and the best in the South East region as there were good schemes for winter in place, a practice of continuous improvement, a data driven approach, comprehensive detailed plans for care homes support with clear strategic oversight.
- 2.4.5 There are clear and robust Quality and Provider Concerns pathways in place to allow the County Council to identify and respond to any emerging resilience or quality issues and to track resolution to these.

2.5 Mental Health Services:

- 2.5.1 This work is in place to ensure delivery of a safe and compliant service which meets the statutory duties for social care needs of the West Sussex population of adults with mental health needs. Rapid progress has been made and approval gained by all parties to:
- a. Return social workers previously seconded to Sussex Partnership Foundation Trust to the direct line management through the County Council. They will continue to work in an integrated way with the practitioners in the mental health Trust but with greater clarity of roles and responsibilities and accountability for Care Act requirements.
 - b. Develop a more resilient and robust Approved Mental Health Professional (AMHP) Service

2.6 Improving hospital flow

- 2.6.1 We have put in place clear pathways for an enhanced discharge to assess model which builds on previous infrastructure and responds to the government’s signal that this is the strategic way forward. This includes establishing a placement and sourcing team and streamlined discharge processes. Our primary focus is, wherever possible, to enable people to go home with support and as such the Homefirst offer of care hours alongside clinical oversight has been, and continues to, grow.

2.7 Practice and quality:

- 2.7.1 The focus of this workstream is on the development of a strong audit, quality assurance and core standards framework to underpin quality across adults’ services, work alongside operational staff and strengthen management grip. A set of Core Standards for operational delivery of adult social care services has been developed and is in the process of

detailed implementation. Safeguarding roles and functions have been strengthened.

2.8 Lifelong services:

2.8.1 A key focus for people with disabilities and autism is ensuring they are, wherever possible, enabled into voluntary or paid work, live as independently as possible, access positive community based opportunities and that their needs are prevented from escalating. This includes reframing of all types of placement and support including in house and day provision critical to achieving long term outcomes is ensuring effective transitions from children to adult services.

2.9 Business Infrastructure:

2.9.1 In addition to the above, there are some further ongoing / emerging workstreams including:

- the development of an IT strategy to provide a framework within which to work;
- a full programme of systems development to support the development plan activities and to ensure the Mosaic system is fit for purpose;
- the requirements of the government's recently issued hospital discharge guidance, the full implications of which we are still working through;
- a range of enabling activity covering workforce, commissioning, performance management and budget management.



Forward Plan of Key Decisions

The County Council must give at least 28 days' notice of all key decisions to be taken by councillors or officers. The Plan describes these proposals and the month in which the decisions are to be taken over a four-month period. Decisions are categorised according to the [West Sussex Plan](#) priorities of:

- **Best Start in Life** (those concerning children, young people and schools)
- **A Prosperous Place** (the local economy, infrastructure, highways and transport)
- **A Safe, Strong and Sustainable Place** (Fire & Rescue, Environmental and Community services)
- **Independence in Later Life** (services for older people or work with health partners)
- **A Council that Works for the Community** (finances, assets and internal Council services)

The most important decisions will be taken by the Cabinet. In accordance with regulations in response to the current public health emergency, Cabinet meetings will be held virtually with councillors in remote attendance. Public access will be via webcasting and the meetings will be available to watch online via our [webcasting website](#). The [schedule of monthly Cabinet meetings](#) is available on the website. The Forward Plan is updated regularly and key decisions can be taken on any day in the month if they are not taken at Cabinet meetings. The [Plan](#) is available on the. [Published decisions](#) are also available via the website.

A key decision is one which:

- Involves expenditure or savings of £500,000 or more (except treasury management); and/or
- Will have a significant effect on communities in two or more electoral divisions in terms of how services are provided.

The following information is provided for each entry in the Forward Plan:

Decision	A summary of the proposal.
Decision By	Who will take the decision - if the Cabinet, it will be taken at a Cabinet meeting in public.
West Sussex Plan priority	Which of the five priorities in the West Sussex Plan the proposal affects.
Date added	The date the proposed decision was added to the Forward Plan.
Month	The decision will be taken on any working day in the month stated. If a Cabinet decision, it will be taken at the Cabinet meeting scheduled in that month.
Consultation/ Representations	How views and representations about the proposal will be considered or the proposal scrutinised, including dates of Scrutiny Committee meetings.
Background Documents	The documents containing more information about the proposal and how to obtain them (via links on the website version of the Forward Plan). Hard copies are available on request from the decision contact.
Author	The contact details of the decision report author
Contact	Who in Democratic Services you can contact about the entry

Finance, assets, performance and risk management

Each month the Cabinet Member for Finance reviews the Council's budget position and may take adjustment decisions. A similar monthly review of Council property and assets is carried out and may lead to decisions about them. These are noted in the Forward Plan as 'rolling decisions'.

Each month the Cabinet will consider the Council's performance against its planned outcomes and in connection with a register of corporate risk. Areas of particular significance may be considered at the scheduled Cabinet meetings.

Significant proposals for the management of the Council's budget and spending plans will be dealt with at a scheduled Cabinet meeting and shown in the Plan as strategic budget options.

For questions contact Helena Cox on 033 022 22533, email helena.cox@westsussex.gov.uk.

Published: 4 January 2021

Forward Plan Summary

Summary of all forthcoming executive decisions in West Sussex Plan priority order

Decision Maker	Subject Matter	Date
Interim Director of Public Health	Healthy Child Programme Contract Extension	January 2021
Executive Director Adults and Health	Extension of contracts for the provision of Specialist Health Services for people with learning disabilities and autism in West Sussex	January 2021
Interim Director of Public Health	Contract Variation for Provision of a Health, Wellbeing and Recovery Service	January 2021
Executive Director Adults and Health	Housing Related Support	January 2021
Executive Director Adults and Health	Award of Extra Care Housing Contracts	January 2021
Executive Director Adults and Health	Health and Social Care Seasonal Pressures - Contract Award	January 2021
Cabinet Member for Adults and Health	Residential Care and Support Services Block Contracts Procurement	January 2021
Executive Director Adults and Health	Discharge to Assess with Reablement	January 2021
Executive Director Adults and Health	Community Reablement Service capacity increase - contract variation	January 2021
Executive Director Adults and Health	Award of Block Contracts for Residential Care and Support Services	February 2021

Interim Director of Public Health

Healthy Child Programme Contract Extension	
<p>The Health and Social Care Act 2012 sets out the statutory responsibility for West Sussex County Council to deliver and commission public health services for children and young people aged 5-19 years. On 1 October, 2015 the Council became responsible for statutory children's public health services. West Sussex County Council, Public Health, currently commission the Healthy Child Programme with Sussex Community NHS Foundation Trust (SCFT). This is a national programme delivering pre-school and school age services by Health visitors and School nurses to deliver Public Health outcomes (0-19 years of age, 25 years of age for Young People with Special Educational Needs).</p> <p>The contract is 5 years plus an option to extend for a further period of up to 2 years (5-year contract expires March 2022). On 20 July 2020 the WSCC Public Health Board recommended an extension of one year plus one year. The original publication online in Official Journal of the European Union – (OJEU) and contract contained the extension period which the Council now wishes to exercise.</p> <p>West Sussex County Council's Commercial Panel met on 6, November 2020 and endorsed the recommendation of an initial one-year extension 2022/2023. The Interim Director, Public Health will be asked to approve the initial one year contract extension 2022/2023.</p>	
Decision by	Tony Hill - Interim Director of Public Health
West Sussex Plan priority	Best Start In Life
Date added	4 December 2020
Month	January 2021
Consultation/ Representations	Representations concerning this proposed decision can be made to the Interim Director Public Health via the officer contact, by the beginning of the month in which the decision is due to be taken.
Background Documents (via website)	None
Author	Fiona Mackison Tel: 0330 22 27049
Contact	Erica Keegan Tel: 033 022 26050

A Strong, Safe and Sustainable Place

Executive Director Adults and Health

Extension of contracts for the provision of Specialist Health Services for people with learning disabilities and autism in West Sussex

West Sussex County Council is the lead commissioner for the Learning Disability Pooled Budget and currently contracts for specialist health provisions for adults with LD and autism. The providers of the services are Sussex Partnership Foundation NHS Trust (SPFT) and Sussex Community Foundation Trust (SCFT).

The combined value of the two contracts is £3,805,017 per annum. The contracts were let on a 3 year term, commencing 1st July 2018. The original OJEU notice and contract contain the option to extend for a further period of up to 4 years.

A decision is required to invoke the provision under clause 2.4 of the contracts between WSCC and SPFT and SCFT, to apply an extension for a period of four years until 30.6.2025, following the expiry of the initial 3 years of the current contract on 30.6.2021. The total contract value over the recommended four year extension period is therefore £15, 220, 068.

Taking up the full four year extension will allow the County Council and its health partners to:

- Work to deliver the service developments and improvements as identified
- Maximise opportunities to share best practice and achieve scale and partnership efficiencies, by continuing to work with the current providers that deliver services across Sussex and who work strategically with key system partners such as Sussex CCG's, the Sussex Health and Care Partnership and NHSE.
- Make best use of resources, including WSCC staff resources (in particular commissioning and contracting staff) that are temporarily diverted to manage the additional pressures and challenges presented by Covid 19

Decision by	Keith Hinkley - Executive Director Adults and Health
West Sussex Plan priority	A Strong, Safe and Sustainable Place
Date added	22 October 2020
Month	January 2021
Consultation/ Representations	Representations concerning this decision should be made to the Executive Director Adults and Health (DASS) via the officer contact by the beginning of the month in which the decision is due to be taken.
Background Documents (via website)	None
Author	Alison Nuttall Tel: 033 022 25936
Contact	Erica Keegan Tel: 033 022 26050

Interim Director of Public Health

Contract Variation for Provision of a Health, Wellbeing and Recovery Service

A variation to the contract for the Provision of a Health and Wellbeing Recovery Service for Children, Young People and Adults who use Alcohol and /or Drugs is required to include the three services described below, for the period 1 April 2021 to 9 May 2023. The Total value of the current contract (5+2 years) is £35,998,201 and the contract variation is less than 10% of the total contract value, £630,000.

High level services improve support and outcomes for children of alcohol dependent parents and reduces parental conflict in these families. This group experiences greater likelihood of poor school attendance and engagement; physical and emotional difficulties in later life including greater risk of substance misuse and parental conflict. These services include;

1. Support for Children of alcohol and drug dependent parents; and
2. The 'Growing Families' Service; a team of front-line workers, working across the multi-agency early help system, to support children and families from pre-birth, early years and school age.

Misuse of alcohol and/or drugs often goes hand in hand with mental health issues. Local audits and service reports demonstrate that significant mental health difficulties are experienced by high level numbers on a substance misuse service caseload. This service includes;

3. Specialist support for adults with co-occurring substance misuse and mental health difficulties

The investment will increase capacity and the out-reach function to respond to the needs of people more effectively with co-occurring conditions.

The proposal for the variation is for a countywide model with a strong focus on outreach, assertive engagement and multiagency working. Interventions will be evidence based as specified in the National Institute for Healthcare and Excellence (NICE) guidelines.

The Interim Director of Public Health will be asked to approve the contract variation for provision of this Health, Wellbeing and Recovery Service.

Decision by	Tony Hill - Interim Director of Public Health
West Sussex Plan priority	A Strong, Safe and Sustainable Place
Date added	10 December 2020
Month	January 2021
Consultation/ Representations	Representations can be made, via the officer contact, by the beginning of the month in which the decision is due to be taken.
Background Documents (via website)	None
Author	Moir Jones Tel: 033 022 28694
Contact	Erica Keegan Tel: 033 022 26050

Executive Director Adults and Health

Housing Related Support	
<p>In December 2018 the decision was made (report ref: AH11 18/19) to reduce expenditure on Housing Related Support to £2.3million by 2020/21. The reduction was to be implemented over the financial year 2019/20, allowing time to remodel services and explore impact mitigation with providers, District & Borough Councils and other partner organisations, ensuring that services are still able to meet the needs of vulnerable people.</p> <p>In accordance with the Key Decision taken on 14 August 2020 (Report ref: OKD26 (20/21) a procurement exercise is being undertaken to replace the contracts for 3 Housing Related Support Services which expire on 31st March 2021 and contribute to the fulfilment of West Sussex County Council objectives for Best start in life, a Strong, Safe And Sustainable Place and Independence for Later Life.</p> <p>The Executive Director Adults and Health will be asked to award the contract(s) to the successful bidder in January 2021 to commence on 1 April 2021. The contract (s) will have an initial term of 2 years with the option to extend for up to a further 2 years.</p>	
Decision by	Keith Hinkley - Executive Director Adults and Health
West Sussex Plan priority	A Strong, Safe and Sustainable Place
Date added	23 December 2020
Month	January 2021
Consultation/ Representations	<p>The Council has worked with its District and Borough Council partners as part of a task and finish group led by the Chief Executive of Crawley Borough Council and consisting of nominated officers across the partnerships. This task and finish group has worked to design the services in each area and agree the joint funding and contract management of these services. This is documented in a collaboration agreement drawn up between all parties (see Background Paper). West Sussex County Council's Finance and Legal Services teams have also been consulted in the drafting of the collaborative agreement.</p> <p>Representations concerning this proposed decision can be made to the Executive Director Adults and Health via the officer contact, by the beginning of the month in which the decision is due to be taken.</p>
Background Documents (via website)	Collaboration Agreement August 2020
Author	Sarah L Leppard Tel: 0330 022 23774
Contact	Erica Keegan Tel:033 22 26050

Independence in Later Life

Executive Director Adults and Health

Award of Extra Care Housing Contracts	
<p>Following the decision (Report Ref: AH03 20/21) to approve the commencement of a procurement for care provision for two new extra care schemes at Monaveen and Lingfield Lodge and to delegate authority for the award of contract and any subsequent awards within the agreed Dynamic Purchasing System (DPS) Framework to the Executive Director of Adults and Health, the Executive Director Adults and Health is requested to award the care contracts for Lingfield Lodge Extra Care Housing Scheme (anticipated start date April 2021) and Monaveen Extra Care Housing Scheme (anticipated start date March 2021). These contracts will have a fixed end date of 30 September 2025. The start dates are anticipated as these schemes are currently being built.</p>	
Decision by	Keith Hinkley - Executive Director Adults and Health
West Sussex Plan priority	Independence in Later Life
Date added	22 October 2020
Month	January 2021
Consultation/Representations	<p>Consultation with stakeholders across the council, Arun District Council, Mid Sussex District Council, Housing 21 and Eldon Housing association.</p> <p>Representations concerning this proposed decision can be made to the Executive Director Adults and Health, via the author or officer contact, by the beginning of the month in which the decision is due to be taken.</p>
Background Documents (via website)	None
Author	Carrie Anderson Tel: 0330 022 22996
Contact	Erica Keegan Tel: 033 022 26050

Executive Director Adults and Health

Health and Social Care Seasonal Pressures - Contract Award
<p>The County Council along with its health partners, are jointly developing plans to respond to health and social care seasonal pressures for the period between October 2020 and March 2021. The seasonal pressure plan will potentially include the development and provision of both home care and residential based services as well as</p>

other services that support hospital discharge or services that enable people to remain independent.

The health and social care system face increased pressures during this period, particularly in the winter months, that place increased demands on services. Seasonal pressure plans are designed to improve discharges from hospital, avoid admission to hospital or increase the flow across health and social care and access to services.

As a separate key decision process the Cabinet Member for Adults and Health will be asked to approve the procurement of a number of services required for home and residential care. As part of the approval the Cabinet Member will be asked to delegate authority to the Executive Director Adults and Health to award the contracts.

Following this delegation of authority the Executive Director Adults and Health will be asked to approve award of contracts for services to deliver the seasonal pressures plan.

Decision by	Keith Hinkley - Executive Director Adults and Health
West Sussex Plan priority	Independence in Later Life
Date added	26 August 2020
Month	January 2021
Consultation/ Representations	Cabinet Member for Adults and Health Director of Law and Assurance Director of Finance and Support Services Representations concerning this proposed decision can be made to the Executive Director Adults and Health via the officer contact, by the beginning of the month in which the decision is due to be taken
Background Documents (via website)	None
Author	Juliette Garrett Tel: 033 022 223748
Contact	Erica Keegan Tel: 033 022 26050

Cabinet Member for Adults and Health

Residential Care and Support Services Block Contracts Procurement
<p>The County Council commissions a range of services to provide care and support to people with assessed eligible social care needs on a residential basis. The majority of these arrangements are made on an individual spot purchase basis to a high number of providers. The Council is facing increasing challenges in securing adequate provision of suitable services across the county.</p> <p>To provide an assurance of capacity, a number of block contracts shall be proposed to be developed to secure residential based care and support services in key locations across West Sussex to respond to local demand. The development of block contracts will also support service providers by providing an assurance of income whilst allowing the Council to seek financial best value.</p>

The Cabinet Member for Adults and Health will be asked to approve the plan for residential based care and support services and the procurement of a number of services. The Cabinet Member will also be asked to delegate the authority for award of contracts to the Interim Executive Director Adults and Health.	
Decision by	Cllr A Jupp - Cabinet Member for Adults and Health
West Sussex Plan priority	Independence in Later Life
Date added	26 August 2020
Month	January 2021
Consultation/ Representations	Interim Executive Director Adults and Health Director of Law and Assurance Director of Finance and Support Services Representations concerning this proposed decision can be made to the Cabinet Member for Adults and Health via the officer contact, by the beginning of the month in which the decision is due to be taken.
Background Documents (via website)	None
Author	Juliette Garrett Tel: 033 022 223748
Contact	Erica Keegan Tel: 033 022 26050

Executive Director Adults and Health

Discharge to Assess with Reablement
<p>Discharge to Assess with Reablement services are designed for hospital patients who are medically fit for discharge, but unable to immediately return home; it is a model recognised by NHS England as facilitating earlier discharge and/or reducing the number and length of delays in discharge from hospital for older people. There is a focus on these services of reablement which supports people to relearn skills with the aim of supporting people to be able to return home and avoid long term admission to residential care.</p> <p>The key objectives delivered through Discharge to Assess are:</p> <ul style="list-style-type: none"> • Reduction of delays and enablement of timely discharges from hospital; • Reduced level of dependency for as many people as possible by reabling them to increase their independence; • Ensuring that long-term decisions concerning people's care needs are not made in an acute hospital setting. <p>Contracts for the provision of Discharge to Assess with Reablement services were awarded in 2018, for an initial fixed term of 2-years with options to extend to a maximum of 5-years, through an EU Procurement exercise conducted following approval of Cabinet Decision AH0117-18. The initial extended contract term comes to an end on 31st March 2021. The Executive Director Adults and Health will be asked to approve the proposed plans for the future of these contracts.</p>

Decision by	Keith Hinkley - Executive Director Adults and Health
West Sussex Plan priority	Independence in Later Life
Date added	4 December 2020
Month	January 2021
Consultation/ Representations	Representations concerning this proposed decision can be made to the Executive Director Adults and Health via the officer contact, by the beginning of the month in which the decision is due to be taken.
Background Documents (via website)	None
Author	Juliette Garrett Tel: 033 022 223748
Contact	Erica Keegan Tel: 033 022 26050

Executive Director Adults and Health

Community Reablement Service capacity increase - contract variation	
<p>West Sussex County Council has a contract with Essex Cares Limited (ECL) for the provision of Community Reablement Services. Reablement is the term to describe services, to support residents following a change in ability, most likely due to a medical condition or episode. A Community Reablement Service (CRS) is essential to prevent people requiring longer term support, enabling people to retain/regain independence and remain at home.</p> <p>The existing service expires on 30th November 2022. It is proposed that the capacity of the existing service is increased from April 2021 for the remainder of the contract period to enable more West Sussex residents to access the benefits provided by the service.</p> <p>The Executive Director Adults and Health will be asked to approve a contract variation to the existing contract in order to facilitate a change in Community Reablement Service capacity with the desired increase adhering to legal and procurement guidelines.</p>	
Decision by	Keith Hinkley - Executive Director Adults and Health
West Sussex Plan priority	Independence in Later Life
Date added	4 December 2020
Month	January 2021
Consultation/ Representations	Representation can be made via the officer contact in the month prior to that in which the decision is to be made.

Background Documents (via website)	None
Author	Jane Walker Tel: 033 022 27927
Contact	Erica Keegan Tel: 033 022 25060

Executive Director Adults and Health

Award of Block Contracts for Residential Care and Support Services	
<p>The Council commissions a range of services to provide care and support to people with assessed eligible social care needs on a residential basis. The majority of these arrangements are made on an individual spot purchase basis to a high number of providers. The Council is facing increasing challenges in securing adequate provision of suitable services across the county.</p> <p>To provide an assurance of capacity, a number of block contracts shall be proposed to be developed to secure residential based care and support services in key locations across West Sussex to respond to local demand. The development of block contracts will also support service providers by providing an assurance of income whilst allowing the Council to seek financial best value.</p> <p>As a separate key decision process the Cabinet Member for Adults and Health will be asked to approve the commencement of a procurement of residential based care and support services. As part of the approval the Cabinet Member will be asked to delegate authority to the Interim Executive Director Adults and Health to award the contracts.</p> <p>Following receipt of this approval from the Cabinet Member the Executive Director Adults and Health will be asked to approve the award of contracts for residential based care and support services.</p>	
Decision by	Keith Hinkley - Executive Director Adults and Health
West Sussex Plan priority	Independence in Later Life
Date added	26 August 2020
Month	February 2021
Consultation/ Representations	<p>Cabinet Member for Adults and Health Director of Law and Assurance Director of Finance and Support Services</p> <p>Representations concerning this proposed decision can be made to the Executive Director Adults and Health via the officer contact, by the beginning of the month in which the decision is due to be taken.</p>
Background Documents (via website)	None
Author	Juliette Garrett Tel: 033 022 223748
Contact	Erica Keegan Tel: 033 022 26050

Health and Adult Social Care Scrutiny Committee Work Programme 2020/21

Topic (including focus for scrutiny & focus)	Priorities		
	Corporate or Service Priority	Performance Outcome or Budget	Timing
Committee Meetings			
Adults Services Improvement (Inquiry Day) <ul style="list-style-type: none"> A themed meeting to assess improvement plans for adult social care, to include progress on prevention and relationships with the care and domiciliary care markets in light of Covid-19. 	Service	Outcomes	Jan 21
Proposals to Improve Mental Health Services in West Sussex <ul style="list-style-type: none"> Health scrutiny (NHS service change proposal): To consider the outcome of public consultation on proposals by CCGs and the Sussex Partnership NHS Foundation Trust. 	-	Outcomes	Feb 21
Mental Health <ul style="list-style-type: none"> CYPSSC and HASC: Special meeting with the West Sussex Youth Cabinet, to review emotional health and wellbeing support for children and young people. 	-	Performance and outcomes	Feb 21
Responses to recommendations from the Covid-19 Preparedness and Restoration, Recovery Planning in West Sussex Task and Finish Group <ul style="list-style-type: none"> To consider the responses from the Cabinet Member for Adults & Health and West Sussex Clinical Commissioning Group 			Feb 21
Shaw Healthcare Contract <ul style="list-style-type: none"> To review performance against planned outcomes for main contract for the provision of residential care and consider the impact of the contract variation one year on. 	Service	Performance	Jun 21
Supported Living <ul style="list-style-type: none"> Pre-decision scrutiny: To examine service plans for supported living services when developed for re-procurement, if likely to alter provision and to ensure best outcomes. 	Service	Outcomes	TBC
Long Covid <ul style="list-style-type: none"> To investigate the impact/treatment of long Covid 	Service	Outcomes	Post May 21
Dentistry <ul style="list-style-type: none"> To review dental services in West Sussex 	Service	Outcomes	Post May 21
Joint HOSC			
Clinically Effective Commissioning <ul style="list-style-type: none"> To consider any proposals from West Sussex Clinical Commissioning Groups, in relation to 	-	Outcomes	TBC

Topic (including focus for scrutiny & focus)	Priorities		
	Corporate or Service Priority	Performance Outcome or Budget	Timing
ongoing work to ensure that commissioning arrangements are both clinically and cost effective (further to HASC 29/9/17).			
Task and Finish Groups (TFGs)			
Business Planning Group			
Dementia Strategy <ul style="list-style-type: none"> To consider whether future scrutiny is required 			Mar 21
Work Programme Planning To consider updates from the services and stakeholders and consider whether any issues should be subject to formal scrutiny by HASC.			
Shaw Healthcare Contract Update prior to any formal scrutiny by the Committee (scheduled for June 2021)		Performance	TBC
Business Planning Group TO MONITOR			
Low Vision Services To consider the outcome of the consultation and confirm whether the item should be subject to further formal scrutiny by HASC.	-	Outcome	TBC following a Joint Strategic Needs Assessment of services
Brook House Report In response to a query from Mrs Smith, BPG agreed to wait for the outcome of a public inquiry before deciding what scrutiny, if any, was required by HASC.	-	Outcome	TBC – following the announcement of a public inquiry