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# Adult Services Care Quality Commission Self-Assessment Report

August 2023

This self-assessment will be  
updated quarterly





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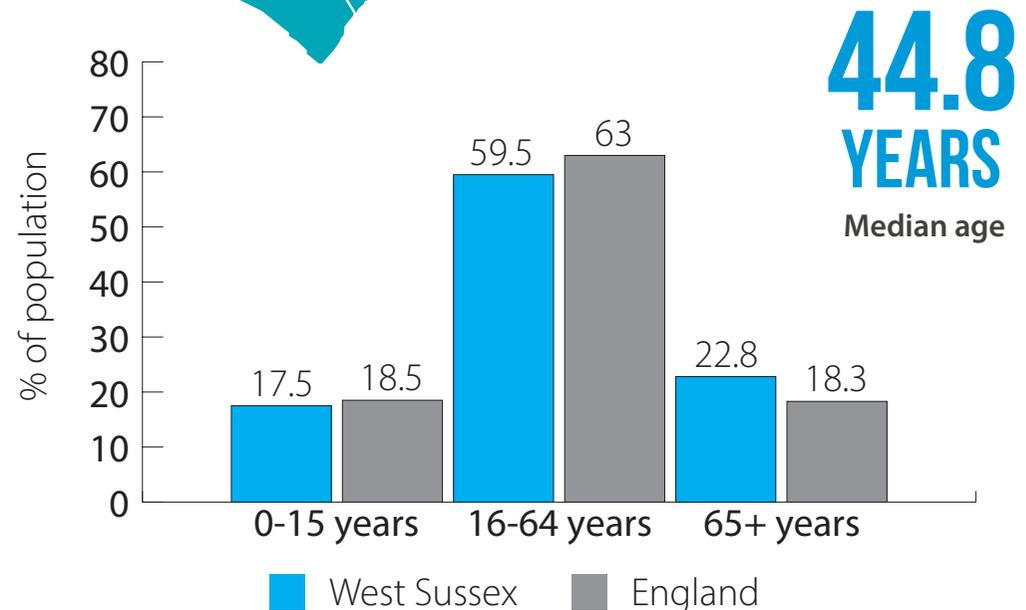
# Section A: Overview and Summary

## About us – the county of 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.

The county's population is approximately 882,700 and has increased by 9.4% over the last 10 years. This is broadly in line with increases seen at a national and regional level, with the largest increase of over 20.8%, in the 65+ age group. The population in West Sussex is projected to increase by a further 8% from 2018 to 2028 with larger increases projected in the 65+ age group (23%) and notably in the 85+ age group (28%).



**882,700**Density of people per km<sup>2</sup>**9.4%**

Overall

**7.48%**

Under 15 years

**6%**

16-64 years

**20.8%**

65 years or over

**8,515**

Births (2021 ONS)

Fertility rate of 1.65

**9,954**

Deaths (2021 ONS)

of which 2,585 deaths of  
people aged under 75**375,000**Households with at least  
one resident in West Sussex

- 111,300 people live alone, including 57,400 people aged 66 years or over
- 20,500 lone parent households with dependent children

**14,800**People live in communal  
establishments

Overall, people enjoy a good quality of life and have a longer life expectancy when compared with England; life expectancy for men is 80.8 years and 84.2 years for women (2016-18). However, this masks considerable inequality and differences between geographical areas and population groups. Some neighbourhoods in Arun and Crawley rank amongst the poorest 10% in England, and 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: [West Sussex Joint Strategic Needs Assessment](#)

West Sussex has an adult population of 699,330. 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 per cent of people needing care in a care home (known as self-funders) are able to fund the costs of their care themselves from savings, investments, benefits, pension and other income.

## Our Corporate Plan

Developed from the County Council’s reset plan in 2020/21, [‘Our Council Plan 2021-2025’](#) 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 tackling climate change.

## Overview of Adult Social Care key activity

**£242m**

The net budget for Adult Social Care in 2023/24

The County Council’s total net expenditure budget for 2023/24 is £709m

**30,000**

Carers registered for support in conjunction with Carers Support West Sussex

**8,200**

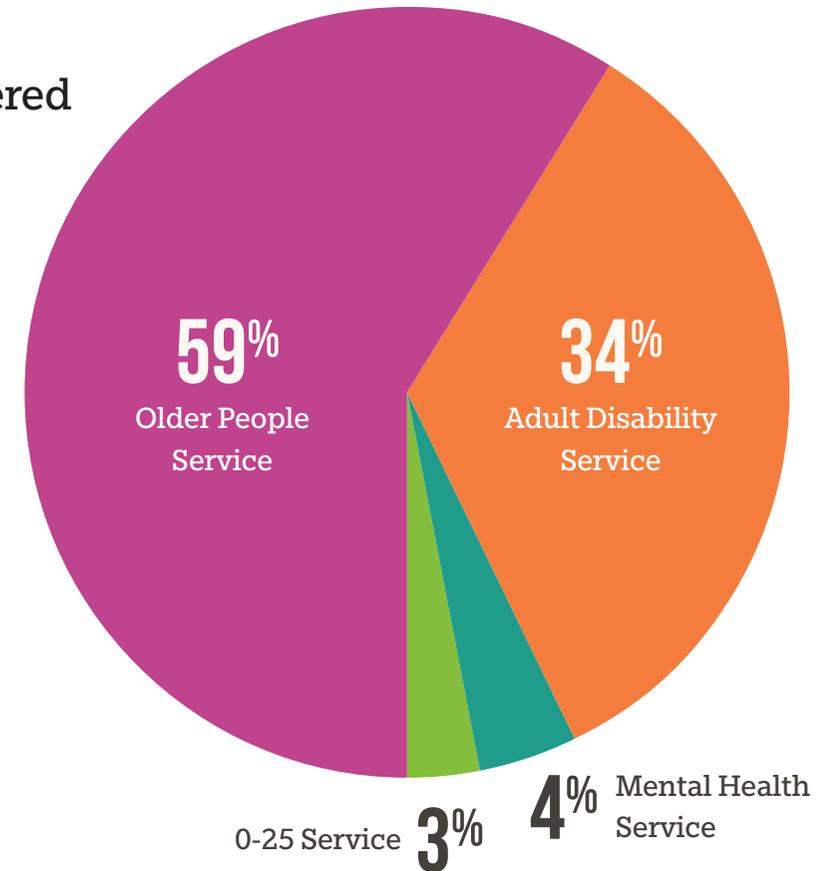
Adults receiving a service\* monthly

\*Residential (Residential & Nursing) and Non-Residential (Council Managed Budget, Direct Payments and ‘Other’)

**10,845**

People being supported with long term services

## Support offered by Service



## 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

The Council's net budget for adult social care in 2023/24 is approximately £242m, which has risen by 24% over the last five years. 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 over the next two years, which will build on the significant work to date.

## Our Strategy: The life you want to lead 2022-25

[Our strategy](#) sets out five priorities to guide the future development of adult social care services within the context of Our Council Plan. People across West Sussex helped design our strategy, which sets out a series of 'we will' statements based on what people have told us is important to them. Co-designing the strategy involved working with people with social care needs, family and friend carers, our staff and voluntary and community sector colleagues. The priorities set out in the strategy are our guiding light in how our service is delivered.



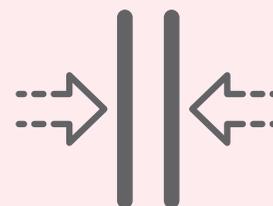
**Relationships and connections**



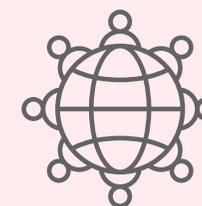
**Home**



**Empowerment**

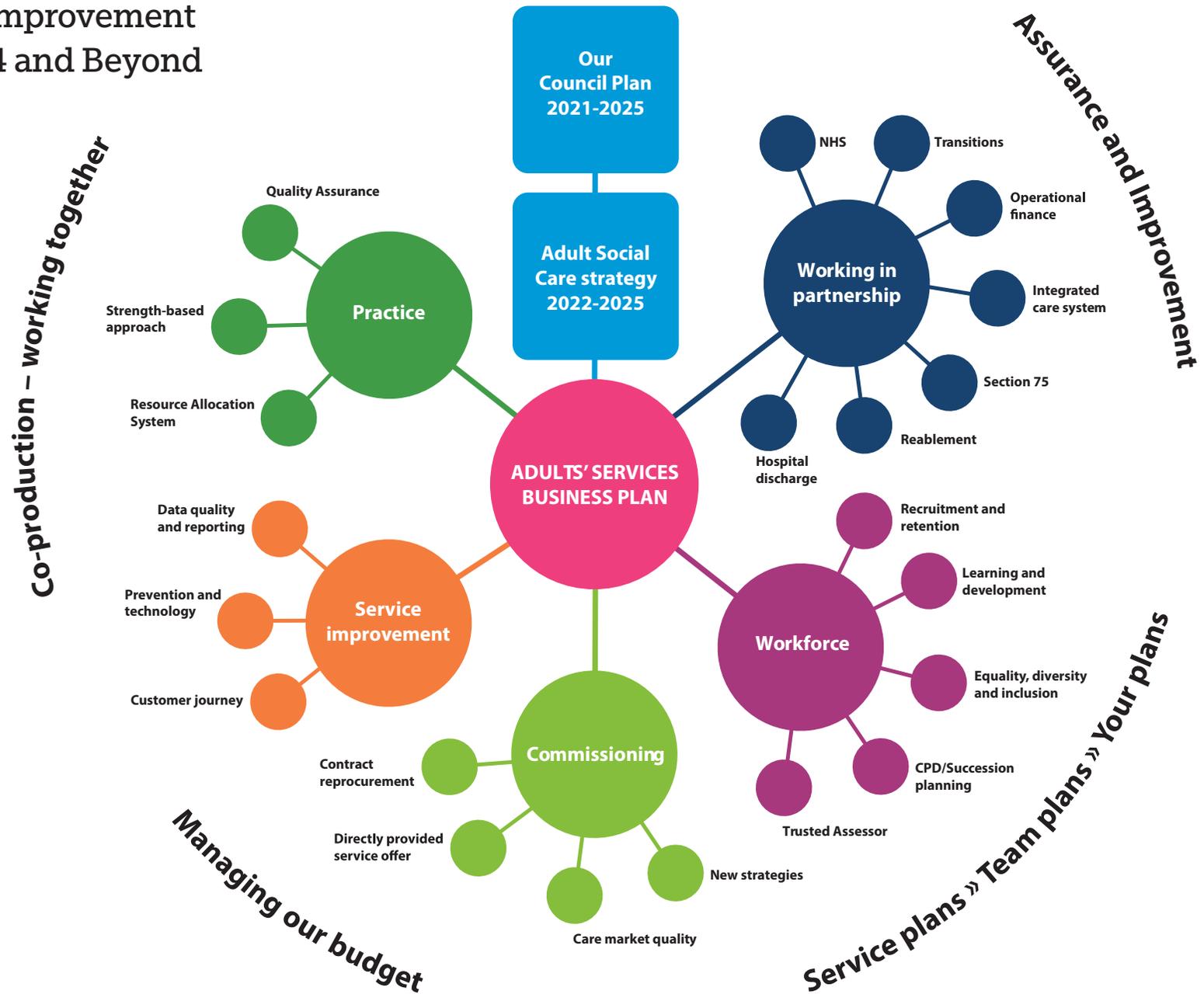


**Addressing gaps**



**Inclusion and tackling inequalities**

# Our Priorities and Improvement Journey for 2023/24 and Beyond



Our ambition is to be a well performing council. However, we recognise we are on a journey of improvement.

We have chosen the areas we are most proud of across the themes below as a result of analysis of our care act compliance or those areas where we have made good progress. Our areas of development have been chosen as a result of feedback from complaints or because the work is key to delivering our adult social care strategy.

We have experienced a high turnover of senior leadership over the last five years. As a result, the focus has been to stabilise, which we have now done 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' Service 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 below. 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 the Adults' 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. In addition, we are also supporting our provider market in the development of a joint care workforce strategy.

## 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 place-based 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 ICS delivery plan are:



## Overarching Activities

### Co-production and Working in Partnership

We are committed to realising the service's vision for co-production and involvement. This will be one of the cornerstones of the programme of improvement guided by the creation of a set of design principles with customers, carers, staff and other stakeholders against which proposed service improvements will be measured.

We have a Voluntary and Community Sector Collaborative Board attended by the Director of Adults, a Co-production Practitioner Group comprising staff and stakeholders, and a senior leader customer and carer engagement forum to be established later in 2023. Also in place is our county-wide stakeholder network, involving voluntary and community sector 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. The long-standing Adults' Services, Customer and Carer Group, the Minorities Health and Social Care Group and the 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 aimed 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 codesigned our financial assessment customer information booklets with members of the Adults' Services Customer & Carer Group and our voluntary and community sector colleagues. This comprised informal interviews, workshop sessions and meeting discussions.



# Theme 1: 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 what or the how. We have also focussed 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 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.

## Areas for improvement 2023-2025

- Further development of our strengths-based approach to practice Streamlining and embedding customer feedback into the customer journey
- Focus on managing demand for assessments, reviews, and deprivation of liberty safeguards (DoLS) requests
- Further work on our hospital discharge process.

## Key Activity (2022-2023)

# 23,910

**New Requests for support**

6190 people aged 18-64

17,720 people aged over 65

1150 received short term care to maximise independence

# 10,845

**Supporting Adults with long term services**

# 44.2%

**Users of adult services and their carers that are reviewed and/or assessed in the last 12 months**

# 22.5%

**Adults purchasing their service using a direct payment**

# 58%

**Adults with a learning disability living in settled accommodation**

# 81.7%

**Adults that did not receive long-term support after a period of reablement support**

## Maximising the effectiveness of people's care and treatment

### 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.

### Supporting Carers

Carers Support West Sussex holds the carer's register for the Council and currently have over 31,279 active carers registered for the service. 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 accessible both internally and to outside organisations.

## Strengths 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. Work has involved a whole service training and development programme from workshops and surgeries to specific sessions as part of induction, ASYE, international recruits and CPD (Continual Professional Development) programmes.

Waiting lists in West Sussex reflect the national position and includes those waiting for assessment, waiting for a service, and waiting for a review, including people waiting for assessment and service in hospital discharge pathways. 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 OT (Occupational Therapy) assessment, a reduction (LINK).

We have also allocated specific investment to directly support strengths-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 utilised and customers are choosing to utilise their personal strengths and those of their networks, to meet their needs.

## Case study spotlight

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-design information leaflets with customers to provide information about process and who to contact
- 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
- Extra capacity into the Welfare Benefit Assessment service to address demand for financial assessments and reviews of residential charges. The waiting list for a financial assessment or review is reducing. The additional capacity to support reducing this remains in place.

The impact of these changes is monitored on a weekly basis by experienced officers from both the finance and ASC teams.

## Paying for care and support

The ability for customers to choose how they pay for any support they receive is important to us. Currently our performance for direct payments is at the median level in comparison to other local authorities. 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. A part of our focus has been on reviewing the arrangements for people already in receipt of direct payments. In addition, focussed project for Direct Payments, as part of our improvement programme and work will start on this area towards the end of 23/24.

To support a more flexible approach for customers in paying for their care, we have decided to investigate the use of ISFs (Individual Service Funds) 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 in the new year.

## Joined up, effective and coordinated services

### Mental health

Our 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 was 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.

The mental health service is challenged in terms of the AMHP (Approved Mental Health Professionals) 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.

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 and for the Council to lead on a joint international recruitment campaign to fill forty vacancies across mental health teams in the Council and the Trust.

## 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. However, we know there is more work to do in this area and has been identified as an area of improvement.

In West Sussex, discharge from general acute hospitals is managed via the discharge hubs where the Trusted Assessor model is utilised to manage national discharges pathways with clear discharge 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 one.

The NHS has provided a contribution towards the funding of a permanent brokerage and sourcing team, hosted by the Council, to ensure sufficient capacity and focus is given to patients being discharged from hospital requiring care and support.

A national improvement programme is in place across Sussex via the Front Runner 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.

## 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 bed-based 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 2021 and March 2022, 195 individuals were discharged to the services of which 58% of people returned home following their stay and 51% required a reduced package of care as a result.

## 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, and the aim of the service is to support people to manage activities of daily living as independently as possible.

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 with their daily life. The service is person centred, people work together with therapists and the 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.

## Supporting people to live healthier lives

We work in close partnership with the Communities directorate, Public Health and the voluntary and community sector and other partner agencies to increase the range of options open to people to support their wellbeing as well as reaching people earlier.

Feedback from our customers ranks us twenty seven nationally for ease of access to information about our services.

We have had success in increasing the reach, visibility, and accessibility of our information and advice offer but further effort in this area remains a key priority for us and a part of our current improvement programme. There is a focus to move the service from a simple information based one to other ways in which people can receive support earlier, and more ways to engage and interact with our information offer. Central to this is the through the on-going development of our 'front door.'

Our 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.

## Prevention assessment teams (PAT)

Prevention Assessment Teams are an area that we have highlighted as being most proud of. These teams 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 team 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 and 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 choice and control

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 rent. 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 that 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 as a step down from residential care settings, as well as a step up from care in their own home.

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

## 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 data set, cut by both population group (link) and place-based data ICB data.

We have set up a dedicated service wide equality, diversity and inclusion group which is chaired by our Director. This group engages with several different customer engagement groups for a, for example our Partnerships 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 these are cascaded across teams. 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.

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 has been included as a design principle for all elements of the improvement programme. Inclusion in this design context 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 this programme into our own wider improvement programme.

Aligning to the corporate and directorate action plans, both our Executive Leadership Team (ELT) and our Directorate Leadership Team (DLT) regularly receive data about our performance in this area. Important in this for us will be customer experience.

## 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.

In the coming year we have a focus on three 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
- A bed booking service which will provide real-time information about all aspects of bed management across all our contracted partners.
- 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.

## Theme 2: Providing Support

In the section we describe our approach to developing and sustaining an adult social care market in terms of opportunity and choice but also the infrastructure to support it, in particular workforce and quality assurance.

### 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 Scheme.

### 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.

### Our key activity

**90%**

Home care services rated outstanding or good by CQC

**75%**

Care home provision is rated outstanding or good (Cf. 85% England)

**728**

Extra care accommodation across 16 sites

**8%**

Average council fee uplift to the provider market 2022/23

Our approaches to commissioning services are set out in our [Market Sustainability Plan](#). 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.

## Our commissioning services

As part of stabilising our service, a new 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 more 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 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, as our guiding light sets 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 Carers Strategy 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 wish 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 more regularly across all our activities to ensure that examples of current good practice are delivered wider.

## 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 pro-active 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 Voluntary Sector 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.

## Greater use of data and insight to inform services

Data and intelligence has 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.

## 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 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 TEC, this has resulted in a less intrusive service for customers. Four customers have been moved to less intense services and out of residential care setting with a further four customers due to move by the end of the year.

We also provide residential, day care and shared lives opportunities through our Directly Provided Services (DPS). 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 re-commissioning our Supported Living Framework to address shortfalls and gaps in current commissioning arrangements to support the market to develop the services that are required.

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 people 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 most complex needs.

We hold a large, long-term contract for the operation and management of 12 council care homes with Shaw Healthcare that provides five hundred and ninety beds and have commenced a programme of work to review this provision in light with current demand, market supply and our strategic direction. This is a crucial contract for managing our demand as twenty two percent 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 are very different to what we need now and 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 [Cost of Care exercise](#) and [Market Sustainability Plan](#) (MSP). This year a task and finish group has also been established 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.

## 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% for England, although our Care Homes market is slightly under those reported across England 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.

Our recently restructured Quality Assurance and Market Support (QAMS) team provide 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.

We have directed investment to our provider forum partner WSPiC to enable a development officer post to be funded to work closely with the Council to provide support to the market. 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 this mix of financial investment and market support the market in West Sussex is supported to be resilient, develop and grow and 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 our Director and with attendance from Assistant Director and Heads of Service in Commissioning, senior leaders from the ICS and senior representatives from across 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 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 Integrated Care System and work daily with the Integrated Care Board (ICB). We have active Section 75 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 and with joint arrangements for Technology Enabled Care and Community Equipment Services.

We also work actively in partnerships with our district and borough council partners 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 VCS providers through forums and task groups; however, we want to undertake further work with the VCS to ensure 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 VCS 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 for example, 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 individual service funds and personal assistants, to tackle our capacity and market challenges.

Our Hospital Discharge Peer Review in Spring 2022 led by the 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

Overarching 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 West Sussex Partners in Care, 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 MSP 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 West Sussex Partners in Care (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.

# Theme 3: Ensuring Safety Within the System

In this section we are focusing on safety in terms of our safeguarding responsibilities under the Care Act and our wider responsibilities of keeping people safe across West Sussex.

## What we are most proud of

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

## Areas of improvement for 2023 - 2025

- A refresh of our quality pathway
- Transitions from children to adult services
- Embedding feedback into safeguarding processes.

## Key Activity (2022-2023)

**9,265**

Total safeguarding contacts (2022/23)

up 9% from previous year (8906)

1759 triaged as safeguarding concerns.

**92%**

Concerns reported via our professional portal

**88.6%**

People who say services have made them feel safe and secure (2021-22)

**70.1%**

(550) concerns have progressed to an enquiry

**91.7%**

(937) of enquiries where action taken to mitigate risk, saw that risk reduced or removed

**87.3%**

(985) of adults asked what outcomes they wanted as part of a safeguarding enquiry

## 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 our [strategic plan](#) setting out how as a partnership we will meet our safeguarding objectives. The WSSAB has five subgroups that deliver on its [annual business plan](#) 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 SAB's work has been. The most recent annual report can be accessed [here](#). To support learning the WSSAB commissions a Safeguarding Adult Review (SAR) for any case which meets the criteria (as outlined in the [Pan Sussex SAR Policy](#)).

To share learning widely and effectively from our reviews, all are published with accompanying [learning briefings and podcasts](#), which are created by the WSSAB Learning and Policy subgroup. Other benefits of the approach used 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 reported similar feedback from cases there. WSSAB has commissioned a thematic review and have 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 hub receives all safeguarding contact via a portal and provides consistency of decision making. Decisions making is underpinned by a [pan-sussex threshold guidance document](#), 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. 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 us consistently good. The SAH has positive working relationships with statutory services, care providers and wider partners, this enables initial enquiries to be carried out in an effective way 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 Health 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 strength-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.

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 also 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, located in operations who manage provider concerns and delegated enquires.

## Managing provider concerns, failures and service disruption

West Sussex have 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. crisis.

In 2019 we strengthened the approach and support to providers. Our overarching [operational provider concerns](#) process was refreshed with a new [Strategic provider concerns](#) 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, 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 Safeguarding Adults Board to develop and maintain a single picture of the quality and safety of the local care market. The group meets monthly, co-chaired by a representative from WSCC and the Integrated Care Board. 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, Police etc) in the pursuit of understanding and reducing any risks through safeguarding planning, involving advocacy services (e.g., [POhWER](#), [Mind](#)) 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 enquires team also oversee any delegated enquiries so that 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 (s.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. 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. The Assistant Director Safeguarding, Planning and Performance co-chairs the Safeguarding Steering Group (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, Provider Concerns. The WSSAB business Manager attends the Safeguarding Steering Group to update on SARs and resultant learning.

## Quality and practice improvement

The WSSAB have undertaken several multi-agency audits as part of their 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 [here](#).

All audit actions plans are overseen by Quality & Practice subgroup of the board. 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 social care. 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 Safeguarding Adults review but would benefit from a more focussed 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 our 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.

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.

## Safe systems

The Multi Agency Risk Management (MARM) subgroup of the WSSAB includes representation from partners and the voluntary and statutory sector. 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 forum is a monthly forum and enables agencies to seek advice and support when managing the highest risk, 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 (DHR's) 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 for example of Channel Panel (PREVENT), MARAC (Multi Agency Risk Assessment Conference) (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. 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 MHA 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, and 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, 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, [WSSAB Seventeen and a Half Safeguarding Protocol](#) 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 to 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 Safeguarding Adults Hub 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 Safeguarding Adults Board which has been developed over the last three years to maintain oversight over the provider market within West Sussex. It meets monthly and has developed a strong partnership where agencies e.g., WSCC, NHS, CQC, commissioners and Healthwatch share intelligence in relation to providers.

Areas of focus include low reporting of safeguarding and quality issues over a twelve-month period, high reporting of safeguarding concerns over a three-month period and providers who are within the provider concern framework with active enquiries. The approach enables partners to develop and maintain a single picture of the quality and safety of the local care market. Partners may initiate action and support through joint visits, escalating to safeguarding provider concerns, contract monitoring and involvement of CQC procedures where appropriate.

# Theme 4: Leadership

Within the previous three themes we have described the direction of travel and specific activity for our improvement journey. In this section we describe how the improvement programme fits within the wider corporate context and our role in leading adult social care across the county.

## What we are 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

## 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 our lead councillor. 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 have a responsibility to ensure that these are reflected in team plans and individual performance conversations with individual members of staff, within their service areas.

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

## 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 Councils Executive Leadership team meetings (ELT) and informal meetings of the Cabinet (Cabinet Briefing) in relation to areas of strategic decision making and operational pressures. Scrutiny Committees consider and provide challenge to performance, budget and risk through the Performance and Resources quarterly report, which is overseen and endorsed by Cabinet. [Committee details - Health and Adult Social Care Scrutiny Committee \(moderngov.co.uk\)](#)

Corporate support can also be evidenced by the additional investment of £28.4m (of which £14.1m is for inflation) to the Adults 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.

## 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 ASC risks are managed by ELT and Cabinet via the Corporate Risk Register (CRR) and owned by the DASS (Directors of Adult Social Services), with mitigations commonly owned by Assistant Directors with the service. There is a clear route for escalating directorate risks to the CRR and de-escalation back to the directorate. [Adult services risk register](#)

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 direction for the directorate.

[The Performance, Quality and Practice Board](#) (PQPB) provides oversight of our strengthened Performance, 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 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 safeguarding adults' reviews and audits outcomes when identified. Podcasts, learning briefings on themes and learning are shared across the service.

## Directorate Leadership Team (DLT)

Oversight and review of:

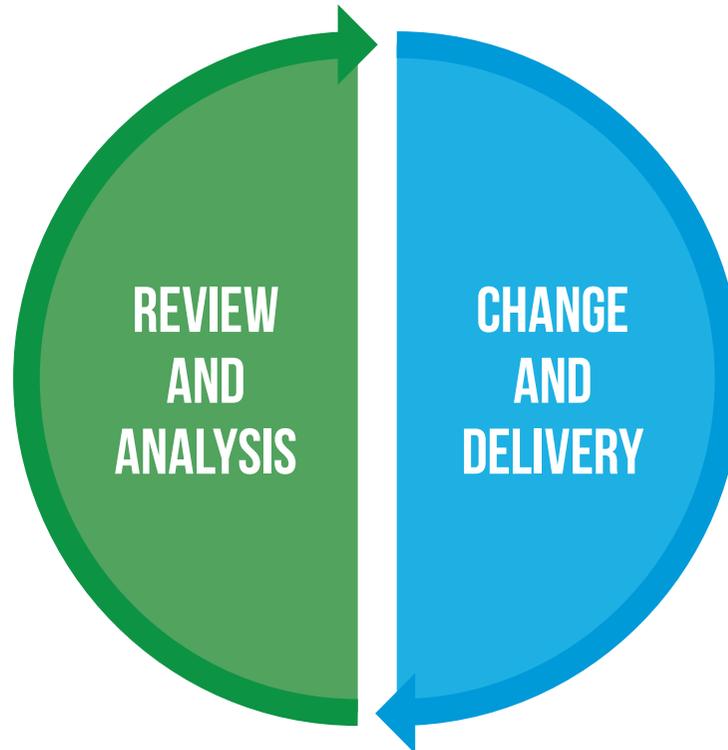
- Corporate projects (Climate Change; Assets)
- Strategic/Business Planning
- Staffing
- Contract Monitoring
- Risk
- Communications
- Member Engagement and Decisions
- Internal Audit
- Health and Safety

*Overview and analysis of corporate and business as usual activity*

## Performance, Quality and Practice Board (PQP)

Oversight and review of:

- Performance and Data
- Quality Audits (including the provider market)
- Compliments and Complaints



## Portfolio Board - Improvement and Assurance Programme Board - Design Authority

- All activity with delivery partner involvement
- Adults and Finance Improvement Activity
- IT

## Strategic Finance and Commissioning Board

- Strategic budget activity - savings, planned and new expenditure
- Strategic adults commissioning activity, including contract re-lets and contract waivers
- Business-as-usual activities in managing the Adult Social Care budget overseen by the Strategic Finance and Commissioning Board
- Better Care Fund related discussions

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 Portfolio Board and Improvement and Assurance Programme Board have been established with clear terms of reference to manage and track the delivery of our Improvement Programme. The programme consists of seven 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 Adult 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 all four parts of the organisation. The forum has approved a corporate wide training programme centred on excellent commissioning skills that will commence later this year forming a key component of our improvement programme to deliver sustainable services.

### System partners

We are a leading partner, along with other County Council Directorates such as Childrens Services and Public Health, in the development of the West Sussex Place-based Health and Care Partnership, part of the Sussex Integrated Care System. Now in its 3rd year, the Health and Care Partnership brings together local NHS (National Health Service) 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 Integrated Care System (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 involved in the development of indicators and measures for an ICS outcomes framework.

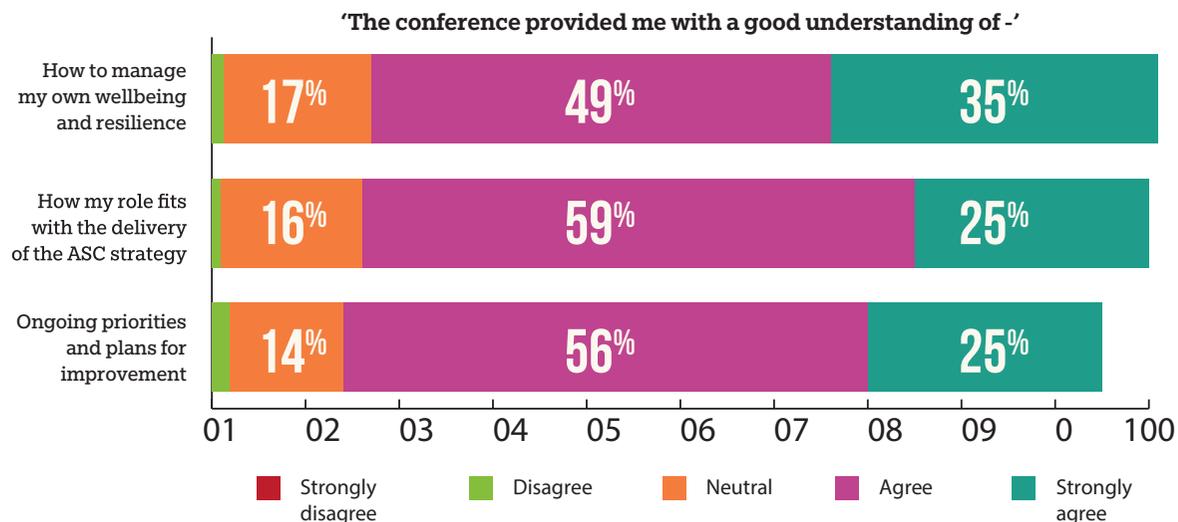
## Co-production and collaboration with the voluntary and community sector (VCSE)

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 Adults’ Services 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 voluntary and community sector (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 partners through projects and programmes has also been established. A forum chaired by the Director 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.

## Workforce engagement

The leadership team is engaging with staff through regular service-wide newsletters and messaging from the Director and Assistant Directors, 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). Most recently hosting a conference for two hundred and fifty members of staff to share learning and for the workforce to reflect on their own wellbeing. Customer and family and friend carers also attended and were involved in the development of the overall agenda and one of the workshops.

## Conference feedback (based on 160 responses)



*“The conference was excellent. It had a level of authenticity, honesty and openness 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.”*

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 living our values 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. Themes such as communication and staff pay, have been highlighted. As a result, of the feedback, we are holding staff sessions each year to update staff on key areas of business. 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 which is an area highlighted in our staff surveys.

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 [Quality Assurance Framework](#) sets out how we as a 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.

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 opportunity 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, 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 here. also be found [here](#).

## 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.

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.

## 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 where 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 2023.

## Leadership and workforce development

An overarching adult social care workforce strategy outlining our ambitions for our workforce is in draft and scheduled for sign off in the autumn. As well as a programme to develop our leaders to ensure that managers have the skills, knowledge, tools, and confidence to manage through challenging times, keeping 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 plan to further develop this in the latter part of 2023.

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. We have recently reviewed and [updated learning and development pathways](#) for all operational roles and grades from unregulated staff through to managers.

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 SW/OT apprenticeships. We work closely in partnership with Chichester and Brighton Universities in the design and delivery of courses / programmes at qualifying and post qualifying levels.

## Assessed and supported year in employment

We have a strong practice development offer and a skilled professional workforce. Our programme of assessed and supported year in employment (ASYE), 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 and retention, progression across WSCC. 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 Principle 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 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 therapists (Phase two) all of whom have now joined our community, hospital, learning disability and mental health teams. All recruits in phase one 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 WSCC and the UK.

Phase three commenced in January 2023 which 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.



