

Meeting date: 7 March 2023

Report to: Health and Adult Social Care Scrutiny Board

Report title: Cabinet Portfolio Holder for Adult Social Care and Health: Update on Priorities for 2022/23

Report from: Cllr Tony Diccico, Cabinet Member for Adult Social Care and Health

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Wards affected:

- All Wards | Bickenhill | Blythe | Castle Bromwich | Chelmsley Wood |
 Dorridge/Hockley Heath | Elmdon | Kingshurst/Fordbridge | Knowle |
 Lyndon | Meriden | Olton | Shirley East | Shirley South |
 Shirley West | Silhill | Smith's Wood | St Alphege
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Public/private report: Public

1. Executive Summary

- 1.1 This report outlines progress towards Cabinet Member for Adult Social Care and Health priorities for 2022/23 and Health and Adult Social Care Scrutiny Board are asked to note the progress towards these priorities.

2. Decision(s) Recommended

- 2.1 For noting.

Report Title: Cabinet Portfolio Holder for Adult Social Care and Health: Update on Priorities for 2022/23

3. Matters for Consideration

3.1 This report sets out progress towards the priorities of the Cabinet Portfolio Holder for Adult Social Care and Health for 2022/23. The priorities are aligned with the two relevant directorates, which are the Adult Care and Support Directorate and the Public Health Directorate.

3.2 With respect to priority areas aligned with the Adult Care and Support Directorate, these are set out in Table 1, below. These priorities support six of the priorities in the Council Plan:

- Improving Outcomes for Children and Young People in Solihull
- Good quality, responsive, and dignified care and support for Adults in Solihull when they need it
- Take action to improve life chances and health outcomes in our most disadvantaged communities
- Enable communities to thrive
- Enhance our natural environment, improve air quality, and reduce net carbon emissions
- Promote employee wellbeing

3.3 The following table summarises the Cabinet Portfolio Holder priorities in Adult Social Care.

3.4 Table 1:

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| 1 | Prepare for, and begin to implement, social care reform: The Autumn Statement in November 2022 confirmed the charging elements of the reforms will be delayed until 2025. The Fair Cost of Care exercise has been completed and our reports were submitted to the Department of Health and Social Care on the 14 th October 2022. Use of the Market Sustainability and Fair Cost of Care Grant for 2022/23 has prioritised Care at Home. The Council has increased the standard rate paid from £19.36 to £20.72 per hour from the 10 th October in support of the national policy direction of Home First and our response to workforce and local market capacity pressures. The outcomes from the cost of care exercise were shared with providers at a provider engagement meeting in January and the Cost of Care Reports for Care at Home and Residential Care to be published on the Council’s website on 1st February 2023. |
| 2 | Supporting Unpaid Carers: The Solihull Carers Strategy 2022-27, which is for all ages, was approved by Cabinet and Solihull Integrated Care Board, setting out a clear vision for how we will improve support to Carers in Solihull. We had a successful |

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| | Carers Week, and Carers Rights Day focusing on practical support for the cost-of-living challenges. We have brought in improved online support for carers with Mobilise as well as successfully introducing a new respite service for adults with learning disabilities at Bassett Road. |
| 3 | ‘Great Care, Great Careers’ Workforce Strategy: Year 1 of the Great Care, Great Careers – the Workforce Strategy for Solihull adult social care has seen a number of pilots run and a lot of work with the local care market. Mopeds for care workers have been trialled, National Express bus discounts have been introduced, along with investigation into sustainable transport solutions for the future. We have promoted Blue Light discount cards for care workers, and provided recruitment support and careers fairs to attract people into adult social care careers. We held a careers fair with Ukrainian refugees in Solihull to help them to access careers in care and sustainable transport options to enable that. |
| 4 | Facilitate Home Living: In September 2021, Cabinet approved the first Solihull housing Assistance Policy. This policy means that children and adults with care and support needs can stay in their own home independently for longer by enabling more funding flexibility. 2022/23 has been the first full year of policy implementation and has enabled more people to benefit from adaptations such as widening doors, bathroom, or bedroom adaptations, and providing the means to access a garden safely. A review of the effectiveness of the Policy has been completed and some amendments have been identified that will further open up access to Disabled Facilities Grants and these will be progressed in 2023/24. |
| 5 | ‘Homefirst’: Safe Hospital Discharge and Admissions Avoidance: Significant progress has been made towards improving hospital discharge and admission avoidance services for people who need care and support. This has included a system urgent community response service for people who have fallen and further development of the Early Response Service to open up access to health settings to support admissions avoidance. The operating hours for the Home Discharge Service have been expanded to support the winter pressures in the health system. A settle-in service to support people with practicalities such as turning on the heating when being discharged from hospital has been commissioned. Better Care Fund hospital discharge funding has been used to increase service capacity and also Social Work capacity over the Winter. |
| 6 | Reduce Exploitation: It continues to be important to raise the profile of all-age exploitation in the borough and continue to develop responses to reduce exploitation and provide support to individuals at risk. Plans have progressed to implement the communications plan to raise awareness of exploitation and also to support adults at risk. Progress has also been made towards sharing data across the organisations to better protect people. |

3.5 In addition to the work set out above, the following four enabling priorities in Table 2 have been agreed for the Adult Care and Support Directorate, each of which underpin the broader work of the Directorate:

3.6 **Table 2:**

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| <p>1</p> | <p>Inclusivity, Equality and Diversity: The Adult Care and Support Inclusivity, Equality and Diversity Plan has been refreshed in line with corporate plans. All staff across the Directorate have continued to have a Personal Development Plan (PDR) objective relating to this programme of work, and the Equality, Diversity and Inclusion staff group has continued to meet to progress work outlined in the action plan.</p> <p>Providers of social care services must meet the diverse needs of local communities. Commissioners have continued to work with providers so that existing and new services respond to people’s diverse personal needs and do not ignore aspects of life that are important to them, including practices that reflect their culture, sexuality, or language. This included ensuring that faith and religious practices important to the person are observed, and that the workforce is equipped to provide services that respect the dignity of each person.</p> |
| <p>2</p> | <p>High Performing Teams: Building on current good quality services and performance is key. The Health and Social Care Act introduced the requirement for Adult Social Care departments to be assured by the Care Quality Committee (CQC). Preparation for this has been prioritised during 2022/23. This has involved ensuring that governance, professional ownership, and effective management are in place to ensure consistency and quality of outcomes, always focused on improving the lives of people with care and support needs, and carers. Performance has been benchmarked against the highest quartile local authority performance and improvement plans have been developed where issues that need resolving are identified. The drive for high performance applies to the work of both our council staff and in commissioning services that meet care and support needs through accessible, affordable, and good quality provision from the independent and third sector, many of whom are already CQC-regulated. The satisfaction of people who draw on care and support has been a key measure of success, and this links to the increased engagement and involvement work outlined under priority 4 in this report.</p> |
| <p>3</p> | <p>Environmental Sustainability: The Adult Social Care Environmental Sustainability Action Plan 2022 to 2027 is now in place, following its approval at the Cabinet Portfolio Holder decision session in October. We believe that the environmental awareness of our staff is crucial for achieving our sustainability ambitions and Our Environmental Sustainability Charter, launched in November 2022 sets out our ask of staff to support our environmental sustainability ambitions.</p> |
| <p>4</p> | <p>Engagement & Involvement: Adult social care has conducted significant engagement on a range of changes across the year, with a large consultation on the 5 year plan, coproduction of the Carers Strategy, coproduction continuing on the Learning Disability and Autism Strategic Visions, and engagement on the changes to different services, including surveys of customers receiving care at home. These activities, some digital, some paper, some face to face, have increased the voice of the person across the work of adult social care and has resulted in tangible changes to plans (for example see the We Heard, We Listened, We Did document</p> |

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| | <p>on the impact of the 5 year plan consultation). We have 2 provider forums which have enabled us to conducted significant engagement with the local Market on a range of National and local changes across the year including the Fair Cost of Care fee inflation uplifts as well as sharing intelligence on new digital innovations.</p> |
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3.7 With respect to priority areas aligned with Public Health, these are set out in Table 3 below.

3.8 **Table 3:**

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| <p>1.</p> | <p>First 1001 Days: Solihull has been awarded £1m of Family Hub transformational funding from central Government to develop a Family Hub offer in Solihull by March 2024. This will comprise of a network of four hub buildings, outreach in the community and a digital offer for all borough families from pre-conception to 25 years. The hub offer will have a robust start for life component ensuring that the enormous potential of early attachment and good development is realised to support life-long protection from the effects of childhood trauma. The hubs will enable integration of existing service for families from the Council, NHS and Voluntary Community Sector partners, such as health appointments, family support, advice sessions and peer group activities.</p> <p>The contract for the Solihull Healthy Child Programme Service (0-19 years) has been extended until February 2025. ‘Accelerating prevention’ funding has supported skill mix, addressing capacity needs for the future and caseload numbers per Health Visitor have reduced. The establishment of an Early Intervention Health Visitor has enabled vulnerable families to have more intense support.</p> <p>The Family Nurse Partnership has demonstrated good outcomes with adolescent parents and continues to be an integral part of the early intervention offer.</p> |
| <p>2.</p> | <p>Health Inequalities: Work on implementing the strategy is well underway. As a first step, data has been requested from across key service areas broken down by geography and ethnicity. This will enable us to establish baselines for areas of inequality that we want to track.</p> <p>Housing and transport strategies have been influenced to ensure addressing inequalities is at the heart of their strategic objectives.</p> <p>As part of the implementation of the housing strategy, a housing and health group will be established. Dialogue with frontline health and care staff has already commenced, with a focus on damp and mould.</p> <p>Work has been undertaken with the Integrated Care Board to identify of alignment between the respective health inequalities strategies.</p> |
| <p>3.</p> | <p>Service Recovery: n 2022-23 the Public Health leadership team created a non-recurrent fund, referred to as the ‘accelerating prevention fund’. The purpose was to enable funding of proposals that would either increase activity and opportunities</p> |

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| | <p>for recovery of public health prevention services or provide solutions to increased demands for Public Health services following the pandemic.</p> <p>The investment has supported a booster programme for the Primary Care led NHS Health Checks service, with performance now surpassing pre-covid levels. It has been used to put in place an enhanced offer of support for smoking cessation services with e-cigarettes now included as a treatment choice and a new digital support app available across Solihull called 'Quit with Bella'. Additional capacity has been put into the 0-19 Healthy Child Programme with new roles introduced to support Health Visiting and promotion of parenting support. The programme has also provided additional delivery capacity to the 'Skills for success' project led by Employment & Skills to maximise the project following minimal direct delivery in schools and colleges during the pandemic.</p> |
| 4. | <p>Mental Health: Refreshing the Solihull Suicide Prevention Strategy has been a key focus in 2022/23.</p> <p>The strategy for 2023-2026 is an update of the previous strategy for suicide prevention in Solihull (2017 – 2021). It aligns to national priorities and builds on previous action towards preventing suicide and addressing gaps and emerging issues.</p> |
| 5. | <p>Health Protection: The Health Protection Board has been re-established with new terms of reference and membership reflecting the post-pandemic priorities across the borough. The purpose of the board is to have effective, system-wide oversight of health protection prevention and response.</p> <p>The directorate has supported the Birmingham and Solihull Integrated Care Board in their efforts to increase uptake of seasonal and routine vaccinations. This work includes collaboration with Birmingham City Council to understand and address inequalities in vaccination uptake.</p> <p>We have continued to support the Adult Social Care sector by providing advice on infection prevention and control and managing outbreaks of Covid, flu, norovirus and other communicable diseases. Infection Prevention and Control audits were completed at 69 care homes and training was offered to all audited settings to improve compliance with national standards.</p> <p>The Migrant Health and Wellbeing Group has been established and continues to work on numerous issues including mental health, infection prevention and control, and access to healthcare.</p> |
| 6. | <p>Substance Abuse: The Government published its 'From Harm to Hope' 10-year Drug Strategy 2021. Alongside the strategy came 3 years of additional ring-fenced funding for treatment and recovery systems. Solihull was awarded £398,493 for 22/23. In Year 1, the directorate has completed a new drug and alcohol needs assessment to identify gaps in delivery and work is progressing against 5 priority areas:</p> |

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| | <p>1. Reducing impact of substance misuse within the aging population, increasing knowledge and engagement to reduce harm.</p> <p>2. Prevention, awareness, advice, and information in primary schools – drug related exploitation.</p> <p>3. System-wide approach to supporting substantial risk and high impact individuals who beg, in and around Solihull.</p> <p>4. Ensuring continuity of care from prison to community to reduce harm and increase engagement.</p> <p>5. Making recovery visible and accessible to all in Solihull.)</p> |
| 7. | <p>Equality and Diversity: The directorate has an equality and diversity plan, in line with Solihull Metropolitan Borough Council’s corporate approach. A nominated directorate lead works with a senior managers forum to update this and to provide wider directorate development and best practice.</p> |
| 8. | <p>High Performing Team: Ensuring the directorate provides good value for money and continues to improve quality has been a key priority.</p> <p>The Directorate has put in place a revised approach to performance monitoring and management across our directly provided and commissioned services and is using benchmarking data from comparator/ peer authorities. It is also piloting a sector-led improvement programme with the Local Government Association. It continues to share learning and best practice with neighbouring authorities including Warwickshire and Coventry.</p> <p>The Employment and Skills team is adept at securing external contracts, maximising value and ensuring delivery meets local need whilst maintaining exemplary levels of compliance.</p> |

4. What options have been considered and what is the evidence telling us about them?

4.1 NA

5. Reasons for recommending preferred option

5.1 NA

6. Implications and Considerations

6.1 State how the proposals in this report contribute to the priorities in the [Council Plan](#):

| Priority: | Contribution: |
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| <p>People and Communities:</p> <p>1. Improving outcomes for children and young people in Solihull.</p> | <p>See main content of this report for details.</p> |

| Priority: | Contribution: |
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| 2. Good quality, responsive, and dignified care, and support for Adults in Solihull when they need it. 3. Take action to improve life chances and health outcomes in our most disadvantaged communities. 4. Enable communities to thrive. | |
| Economy: 5. Develop and promote the borough's economy, with a focus on revitalising our town and local centres. 6. Maximising the opportunities of UK Central and HS2. 7. Increase the supply of affordable and social housing that is environmentally sustainable. | See main content of this report for details. |
| Environment: 8. Enhance our natural environment, improve air quality, and reduce net carbon emissions. | See main content of this report for details. |
| 9. Promote employee wellbeing | See main content of this report for details. |

6.2 Consultation and Scrutiny:

6.2.1 NA- not arising from this report

6.3 Financial implications:

6.3.1 NA- not arising from this report

6.4 Legal implications:

6.4.1 NA- not arising from this report

6.5 Risk implications, including Risk Appetite:

6.5.1 NA- not arising from this report

6.6 Equality implications:

6.6.1 NA- not arising from this report

6.7 Linkages to our work with the West Midlands Combined Authority (WMCA), Local

Enterprise Partnership or the Birmingham & Solihull Integrated Care System (ICS):

6.7.1 NA- not arising from this report

7. List of appendices referred to

7.1 NA

8. Background papers used to compile this report

8.1 NA

9. List of Other Relevant Documents

9.1 NA