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27 June 2023

To: Councillors Bamborough, Boughton, Cooper, Critchley, Hunter, Jackson, D Mitchell, Roe and Scott

The above members are requested to attend the:

ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE

Thursday, 6 July 2023 at 6.00 pm in Committee Room A, Town Hall, Blackpool

AGENDA

1 DECLARATIONS OF INTEREST

Members are asked to declare any interests in the items under consideration and in doing so state:

(1) the type of interest concerned either a

- (a) personal interest
- (b) prejudicial interest
- (c) disclosable pecuniary interest (DPI)

and

(2) the nature of the interest concerned

If any member requires advice on declarations of interests, they are advised to contact the Head of Democratic Governance in advance of the meeting.

2 PUBLIC SPEAKING

To consider any requests from members of the public to speak at the meeting.

3 MINUTES OF THE LAST MEETING HELD ON 23 FEBRUARY 2023 (Pages 1 - 4)

To agree the minutes of the last meeting held on 23 February 2023 as a true and correct record.

4 ADULT SERVICES OVERVIEW

To provide an overview of the work of the Adult Services directorate including financial position.

5 INTEGRATED CARE BOARD UPDATE (Pages 21 - 26)

To provide an overview of the continuing development of the Integrated Care Board (ICB) and NHS Lancashire and South Cumbria Integrated Care Partnership (ICP).

ICB Update to include the development of the vision and strategy

6 FYLDE COAST INITIAL RESPONSE SERVICE (IRS) (Pages 27 - 32)

To provide an overview of the continuing development of the Initial Response Service.

7 OVERVIEW OF THE BLACKPOOL SAFEGUARDING ADULTS BOARD (Pages 33 - 36)

To provide an overview of the work of the Blackpool Safeguarding Adults Board and plans to develop a Place Based service.

8 SCRUTINY WORKPLAN (Pages 37 - 46)

To consider the details of the Committee's workplanning workshop.

9 DATE OF NEXT MEETING

To note the date and time of the next meeting as Thursday 28 September 2023 commencing at 6.00pm.

Venue information:

First floor meeting room (lift available), accessible toilets (ground floor), no-smoking building.

Other information:

For queries regarding this agenda please contact Jodie Stephenson, Democratic Governance Senior Advisor, Tel: 01253 477169, e-mail jodie.stephenson@blackpool.gov.uk

Copies of agendas and minutes of Council and committee meetings are available on the Council's website at <u>www.blackpool.gov.uk</u>.

(Pages 5 - 20)

Agenda Item 3

MINUTES OF ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE MEETING -THURSDAY, 23 FEBRUARY 2023

Present:

Councillor Mrs Scott (in the Chair)

Councillors

Critchley Hunter O'Hara D Scott Walsh

In Attendance:

Councillor Mrs Callow, Chair, Scrutiny Leadership Board

Ms Karen Smith, Director of Adult Services, Blackpool Council and Director of Health and Care Integration (Blackpool) at NHS Lancashire and South Cumbria ICB (joint appointment) Professor Sarah O'Brien, Chief Nursing Officer, NHS Lancashire and South Cumbria Integrated Care Board (ICB) Mrs Sharon Davis, Scrutiny Manager

1 DECLARATIONS OF INTEREST

There were no declarations of interest on this occasion.

2 MINUTES OF THE LAST MEETING HELD ON 26 JANUARY 2023

The minutes of the last meeting held on 26 January 2023 were signed by the Chair as a true and correct record.

3 PUBLIC SPEAKING

There were no requests from members of the public to speak on this occasion.

4 EXECUTIVE AND CABINET MEMBER DECISIONS

The Committee noted the decision taken since the last meeting.

5 ADULT SERVICES UPDATE

Ms Karen Smith, Director of Adult Services presented the report to the Committee and highlighted the ongoing challenges with workforce. She noted that staffing gaps were being managed through use of additional hours and agency workers. Support was being provided to staff with innovative ways of approaching tasks used where appropriate.

The ongoing work in Adult Social Care Health Linked Services and Community Based work was discussed in detail and it was noted that the capacity of the Coopers at Ambleside respite and short breaks service had doubled and the service was now supporting 63

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families on a regular basis. The work of the primary night care team was commended as was the introduction of the warm space at Nibbles Café.

With regards to the financial position of the service, it was noted that demand had continued to increase in addition to the increased cost pressures on service provision resulting in a £2.1 million pressure on the budget some of which might be offset with NHS and other streams of funding. Members raised concern that positions might be held vacant in order to achieve cost savings and in response Ms Smith advised that positions remained vacant due to an inability to recruit and positions had not been held vacant to achieve savings.

In response to further questions, Ms Smith advised that there had been some successes in recruitment more recently, she clarified that support was provided to staff in order to ensure they were not overworked and that employees off long term due to sickness were supported back to work appropriately.

In reference to the Adult Social Care Community Based Team it was noted that the backlog had not yet been cleared and it was hoped that the Agency Manager role would be extended for a short period in order to conclude this work. It was also reported that joint working between the NHS and Council continued to work well.

The Committee queried whether the agreed budget for 2023/2024 would be deliverable and in response, Ms Smith advised that the pressures on services were expected to continue and it was expected that the financial position for the service in the next financial year would be challenging.

The market reform delays were also noted. It was reported that as part of the grant conditions for this financial year a Fair Cost of Exercise had been published on the Council's website on the 1 February 2023, with an updated Market Sustainability Plan to follow in March 2023. It was agreed that the Plan would be circulated to Members when completed.

6 UPDATE ON PLACE BASED PARTNERSHIP / ICB UPDATE

Professor Sarah O'Brien, Chief Nursing Officer, NHS Lancashire and South Cumbria Integrated Care Board (ICB) and Karen Smith, Director of Health and Care Integration (Blackpool) at NHS Lancashire and South Cumbria ICB and Blackpool Council Director of Adult Services (joint appointment) gave a joint presentation on the ongoing development of the ICB and the action to be taken to integrate health and social care more closely together.

It was reported that NHS Lancashire and South Cumbria Integrated Care Board (ICB) was established on 1 July 2023. The eight Clinical Commissioning Groups (CCGs) in Lancashire and South Cumbria had been closed and the ICB had taken on the local commissioning functions as well as some of NHS England's commissioning functions and was now accountable for NHS spending and performance within the system. At this time the Integrated Care Partnership was also established as a statutory committee with Blackpool Council as a statutory member. The aims of the ICB were set as to:

• Improve outcomes in population health and healthcare

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- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development

In addition to the wider priorities, specific areas for improvement had been targeted by the ICB and a 10-year vision was being developed covering areas such as urgent and emergency care, how to deliver a challenging budget and to further integrate community health and social care services. Work on a draft strategy had commenced with workshops held with Blackpool partners and would be circulated for public consultation in due course.

It was noted that a key concern of the Committee had been the size of Blackpool in comparison to the overall size of the area of Lancashire and South Cumbria and Members were pleased to note that the borders had been redefined and now included Blackpool as a 'place' in its own right. This had led to the appointment of Ms Smith as the Director of Health and Care Integration (Blackpool) and allowed for priorities and services to be identified for Blackpool as its own entity.

In reference to the ICB priority 'start well', Members queried what this priority would entail. In response, Professor O'Brien advised that the importance of living well from birth to death had been reflected in the ICB priorities and that it was considered that many problems expected for adults in later life could be positively affected and improved if different approaches were taken when they were children. It was noted that Better Start was actively involved and services were working together for the benefit of all. The importance of other social determinants for a healthy life such as housing life was also noted.

In response to further questions, it was noted that the intention was that a joint committee would be established in the Blackpool 'place' which would be able to take decisions on funding. The main role of the Director of Health and Care Integration (Blackpool) would be to enable and encourage strong partnership working and lead the joint committee locally. It was expected that previous challenges such as data sharing across organisations could be more easily targeted with the new integrated arrangements.

The Committee agreed to add a further update on the development of the ICB to its workplan to include the development of the vision and strategy and to request that a briefing session be provided for all Members following the election.

7 HEALTHY WEIGHT SCRUTINY REVIEW UPDATE

Mrs Sharon Davis, Scrutiny Manager presented the report of the Healthy Weight Scrutiny Review to the Committee.

The Committee agreed:

1. That a full response to the recommendations of the Healthy Weight Scrutiny Review be provided to the October 2023 meeting of the Adult Social Care and Health Scrutiny Committee.

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- 2. That the update to recommendation 6 (to explore the feasibility of providing free gym access to young people aged 11 to 18) in particular be noted with the Committee's acceptance that alternative ways of promoting activity amongst young people as detailed be explored.
- 3. That the Committee receive the draft Healthy Weight Strategy in due course.

8 SCRUTINY WORKPLAN

The Committee noted its workplan and agreed to add in an update on the Integrated Care Board to the plan. It was also requested that an update be provided on suicide prevention and awareness work and to ensure that vaping was covered in the public health item on smoking cessation. It was noted that the workplan would be reviewed in the new Municipal Year following Annual Council.

The Chair highlighted the site visit that a number of Committee Members had undertaken at The Harbour on 22 February 2023 and advised that Members had been very impressed with the welcome and facilities. She encouraged all Members to take up any similar opportunities and noted that Lancashire and South Cumbria NHS Foundation Trust had also offered a site visit to the facility at Wesham.

9 DATE AND TIME OF NEXT MEETING

The date and time of the next meeting was noted as in 6 July 2023, subject to confirmation at Annual Council.

Chairman

(The meeting ended at 7.39 pm)

Any queries regarding these minutes, please contact: Sharon Davis, Scrutiny Manager Tel: 01253 477213 E-mail: sharon.davis@blackpool.gov.uk

Report to:	ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE
Relevant Officer:	Karen Smith, Director of Adult Social Services
Date of Meeting:	Thursday 6 July 2023

ADULT SERVICES OVERVIEW

1.0 Purpose of the report:

1.1 To provide Scrutiny Members with an up to date overview of the Adult Social Care directorate including the current financial position.

2.0 Recommendation(s):

2.1 Scrutiny members are asked to comment upon progress being made, propose potential improvements and highlight any areas for further scrutiny which will be reported back as appropriate.

3.0 Reasons for recommendation(s):

- 3.1 To ensure constructive and robust scrutiny of these areas of work.
- 3.2 Is the recommendation contrary to a plan or strategy adopted or approved by the Council? Yes
- 3.3 Is the recommendation in accordance with the Council's approved budget? Yes
- 4.0 Other alternative options to be considered: N/A

5.0 Council priority:

5.1 The relevant Council priority is: Communities: Creating stronger communities and increasing resilience.

6.0 Adult Social Care Update (Social Work Teams)

6.1 **ASC, as a whole - A summary of the main areas of work undertaken**

The remit of all of our ASC team's in both community and hospital based service areas is to support and promote the wellbeing of vulnerable adults across Blackpool; whatever the

6.2 cause of their problems, in line with local and national policy requirements.

We work with young people coming into adults from children's services who are in care/care leavers with care act eligible needs, including those with mild to moderate disabilities. For the 18 years plus population we work with those who have long term health or disability related needs, mild/moderate learning difficulties, mild/moderate mental health issues, drug and/or alcohol related problems or issues associated with older age including dementia. This includes safeguarding work, which covers concerns like poor care or negligence within the regulated care sector but also abuse of individuals by family members or strangers.

- 6.3 The departments work involves multi-disciplinary working with all relevant agencies to deliver statutory responsibilities. These responsibilities are outlined in The Care Act (2014) and include prevention, assessment, care planning, the commissioning of services and undertaking reviews. Safeguarding work also falls within S42 of this legal framework.
- 6.4 Another key part of the whole teams work is governed by the Mental Capacity Act (2005), which includes work around mental capacity assessments. Staff in all ASC teams undertake Mental Capacity assessments and best interest meetings along with associated S21A¹ challenges and Court of protection work. A number of staff in ASC teams are qualified Best Interest Assessors (BIA) and undertake these assessments as part of the departments Deprivation of Liberty Safeguards work.
- 6.5 Other key pieces of legislation (and this is not an exhaustive list) that the service have regard to in their duties include
 - The Domestic Abuse Act (2021)
 - The Health and Social Care Act (2022) and
 - The Human Rights Act.

6.6 The current picture, challenges and innovations

Over the last 12 months Adult Social Care has continued to feel the impact of post pandemic changes in peoples working lives and also staffing issues in both the care sector as a whole and the NHS. We experienced a number of staff leaving for jobs where they could work from home, staff wanting to reduce their working hours and staff taking early retirement' all of which impacted on our operational function. Work has been ongoing with staff teams to ensure that we are responsive to new ways of working that can be accommodated that

¹ A person who is deprived of their liberty under a DoLS (Deprivation of Liberty) authorisation in a care home or hospital has the right to have these arrangements reviewed by a court or tribunal. This is to ensure that their Human Rights are not breached. The mechanism for doing this is included in section 21A of the Mental Capacity Act 2005 and involves the person making an application to the Court of Protection. The application is referred to as a 'Section 21a Application'. Usually, an application will be made where the person is objecting to being deprived of their liberty, or objecting to their current care arrangements, for example if they are in a care home and want to go home.

support staff wellbeing, skills and experience retention while retaining a focus on delivering good outcomes for our residents.

- 6.7 Adult social care staff are now working within a "hybrid model" which affords staff reasonable flexibility in the way they manage their time in the office. The majority of staff have chosen to work from home 1 or 2 days a week although this varies depending upon personal circumstances. A greater degree of flexible working was introduced in the autumn and some staff are utilising this. As a result, we have seen a reduction in staff turnover, and the barriers in recruiting to vacant posts are now starting to ease. It is positive that we have also been able to offer jobs to our Social Work students who have graduated this year. This represents a really positive investment in their training and development and we are pleased to be able to retain our students locally.
- 6.8 Following period of significant challenge in recruitment, we are now seeing an uptick in the numbers and quality of applicants for advertised vacant posts and have had 2 new social workers start with the ASC Community Team in the last few weeks with 2 more due to start later this month. We have seen some staff who left to work for other authority areas return to work in Blackpool.
- 6.9 Coupled with the challenge of recruiting and retaining skilled staff, the service has also experienced high volumes of work coming through from people needing help and advice and from other agencies concerned about people they are in contact with. This increased demand at the "front door" has led to some bottlenecks in our response a common feature of most Adult Social Care departments nationally, but less usual for Blackpool.
- 6.10 We have developed, close to the work, an Adult Social Care Recovery plan which is monitored by the Senior Leadership Team, including the Director of Adult Social Services (DASS) and Heads of Service and Service Managers from across the department. The plan is designed to address the root causes and symptoms arising from these issues, alongside innovation work that is helping to deliver improvements in what we do and how we do it.

6.11 ASC Health Linked Services

Our teams that work alongside health partners in the hospital and in the community have also experienced retention and recruitment issues. While carrying vacancies, core staff and managers have been working flexibly to cover pressure points across all of their service area's to ensure discharges from hospital are able to continue. We have now appointed 2 new Deputy Team Managers to replace vacancies created by promotions and this management team are working well together to support staff in a high pressure environment, keeping to discharge time scales with a high volume of work and also managing longer term complex casework.

6.12 Our discharge support team who undertake the assessments and work after an individual's

discharge from hospital are based alongside Continuing Health Care (CHC) NHS colleagues and our 2 CHC social workers at Bickerstaffe House. Blackpool's model for integrated working with CHC is being adopted across the whole of Lancashire and South Cumbria, due to its effectiveness and timeliness.

- 6.13 Our hospital and community health partnership teams work hard to flex with demand surges that occur regularly from the Acute Hospital. Work prior to discharge is embedded into an integrated Transfer of Care Hub (TOCH), based at the hospital. Covering this over 7 day operations is a significant challenge.
- 6.14 The legacy of the pandemic is still being felt across the sector with people presenting at point of crisis both to ASC and in health, having not sought help at the earliest opportunity when a more preventative approach and lower level support or treatment would have been an option. Instead, we note an increase in the number of people who from no support at all are in such a crisis when they present that the only way of supporting them, all be it hopefully on a short term basis is in a 24 hr setting like a residential or nursing home.
- 6.15 We can see the impact for people who have missed out on early diagnosis and treatment for conditions that have deteriorated and while this probably is reflected across the country, for our population with some of the existing struggles around poverty related issues this simply deepened the crisis. More and more care act needs are emerging that stem from issues linked to poor quality private sector rented accommodation in disrepair and the impact significant cost of living pressures have on independence. We are working closely with partners across the Council and the wider community to look at ways we can work together to improve outcomes for our population.

6.16 **3 Conversations**

The Council is now underway with embedding the '3 Conversations' approach within adult social care. This is a nationally recognised strengths based way of working that engages staff and managers to change how services work with people to meet their needs at the earliest stage; and as a result also makes services more time-efficient and cost-efficient.

6.17 Currently, referrals to adult social care are predominantly via telephone and email and calls are screened via the duty workers. They information gather and if the person/carer is deemed in crisis they are prioritised for a visit and the rest of the referrals await allocation. The worker then goes out and completes a lengthy Care Act assessment and records in each domain to determine eligibility whether they are relevant to the person or not. The worker then commissions services and completes a care plan. The current process is embedded in the current market of traditional services and the person and their family are often handed off to many different people prior to receiving a visit.

The 3 conversations approach focuses on not handing off the person, the worker that

- 6.18 answers the initial enquiry will stay with them. The worker listens hard to the person and their family and focuses on how we can help them in that moment, what would make a difference and to understand their context and story. The person is empowered to concentrate on the resources that they have around them including community assets. Staff are able to support people to access these resources and checking back in with them following this rather than giving them the information and closing them down as is the traditional way of working.
- 6.19 Staff have found to date that often a small change actually makes a big difference such as supporting a person to use ride-a-bility community transport to attend a social club. They then have the confidence to access this independently whereas traditionally a commissioned service would have been requested.
- 6.20 There also is a shift to not planning long term in a crisis situation and the same worker staying with the person and their family until this has resolved. Only after things stabilise will the worker focus on what a good life will look like for them.
- 6.21 The programme will run for 12 months and the first phase is two innovation sites, which will run for 13 weeks each. Throughout the innovation period, feedback will be collected both from the people whom the teams work with and from the staff themselves.

The first innovation site within adult social care community teams went live on 15 May 2023. This consists of a team of 12 staff with a mix of skillsets, supported by a Deputy Team Manager. Initial feedback has been that staff are feeling motivated and that they are making a difference for the people of Blackpool much quicker than they might have done previously. The innovation site is undertaking the "duty" role of managing incoming work for 1.5 days per week. Outside of this time, they are working through a list of people that are aligned to one postcode area and have requested support. As part of the rollout of this work the department is collaborating closely with health colleagues to enable more streamlined ways of working. It is of note that there has not yet been a long-term commissioned service put in place.

6.22 The second innovation site is within the primary care (GP) neighbourhoods (PCNs) which are aligned to PCNs. This site went live on 12/6/23. This is a new service which is the integration of adult social care mental health social workers into the primary care neighbourhoods. This will be a team of 5 social workers who will support the wellbeing of people currently under GP care and it is envisaged that this will reduce the number of those who need to move on to access support through secondary and other mental health services.

6.23 Business Support Team Update

This area of service encompasses the following teams:

• The Purchasing Unit who work between the social work teams and our internal and

external care providers to source, record and pay for non-residential care and keep all source records up to date.

- The Direct Payments team who support adults and children to manage their personal budget (or part of) to self-direct care and support. This includes those who are eligible for health funding, as administration of Personal Health Budgets is undertaken on behalf of the Integrated Care Board.
- The Social Care Benefits Team. This team was moved from Resources to Adult Services in April 2023 to provide closer working links, preventing silo working and reducing duplication. The team financially assess and recover client contributions to residential and non-residential care costs, pay residential homes and managing the debt recovery process through to legal action.
- The Quality Assurance Team who manage the information, referrals and alerts that come into the department via telephone calls and emails. They also provide a general admin function for the department which includes taking meeting minutes and data cleansing.
- 6.24 As an evolving service, business support have taken a key role in working with contracting, quality assurance and external providers to build close working relationships whilst ensuring accuracy of fees and value for money.

6.25 Adult Social Care – Learning Disabilities, Autism and Mental Health Services

We are pleased to confirm that we have successfully made the appointment of a Head of Adult Social Care for Learning Disabilities, Autism and Mental Health following the retirement of the previous post holder. From 1st July 2023 Liz Russell will be our Head of Service. Liz brings to the role a wealth of experience across a number of key areas combined with a passion for improving services and support in Blackpool. We are confident that Liz will make a valuable contribution to the continued development of adult social care in the area of learning disabilities, autism and mental health. Liz will be supported in her new role by two service managers – Louise Mathews for Mental Health Services and we will be recruiting to the Learning Disabilities and Autism role.

6.26 Adult Social Care – Mental Health Service

We have embarked on our Mental Health Transformation journey with some short term funding for mental health social work posts to lead on this a 'make a difference'. We have managed to recruit to some of the posts so work can commence whilst further recruitment is underway. The practitioners are providing mental health social work presence into the Primary Care Networks (GP practices), to provide a more responsive and preventative approach to Blackpool residents. It is envisaged that they will be working closely with primary care colleagues to provide additional support and interventions to people with mild to moderate mental health needs.

- 6.27 Blackpool Council's Adult Social Care '3 conversations' approach has also been launched within this service area and went live on 19 June 2023 Providing a targeted strengths based and outcome focused way of working with people who present to primary care services and builds on the Mental Health Transformation journey around 'making a difference'. Further updates around the success of this model will be shared in due course.
- 6.28 Adult Social Care Community Mental Health teams continue to experience high volumes of people requiring specialist mental health support, not dissimilar to other areas of social care and health at this time. Our social care practitioners work collaboratively with co-located health colleagues to ensure people receive the care and support they need. However, there are particular difficulties at this time in respect to being able to access clinical psychiatric support and in some cases active care coordination. This is not unique to Blackpool and is a symptom of the currently challenges across all mental health services, whether these be social care or health provided. It is fair to say that further partnership working across agencies is needed going forwards and we envisage that this will improve when the new Initial Response Service (IRS) is launched in September at the Harbour. We continue to have positive dialogue with Lancashire Care Foundation Trust and will continue to explore the opportunities to improve on the current situation for Blackpool residents.

6.29 AMHP (Approved Mental Health Professional) Service

An approved mental health professional (AMHP) is a mental health worker who has received special training to provide help and give assistance to people who are being treated under the Mental Health Act. Their functions can include helping to assess whether a person needs to be compulsorily detained (sectioned) as part of their treatment. An AMHP is also responsible for ensuring that the human and civil rights of a person being detained are upheld and respected.

- 6.30 The AMHP Service in Blackpool continue to experience significant pressure. In part this is due to the difficulties in access to mental health inpatient beds but also access to Section 12 Doctors (whom are required to make medical recommendations under the Mental Health Act) and Patient Transport (following a decision to detain someone under the Mental Health Act). This is not unique to Blackpool and access to inpatient beds is a National challenge but these issues contribute to delays for people needing mental health care and treatment. We are fortunate in Blackpool that we have some really positive community services that can help during the intervening period whilst waiting for a mental health bed. However, given the current difficulties these services are also experiencing the challenges in responding to the demand that is coming through. Everyone in the AMHP service is working hard to ensure everyone that needs are support receives what is needed is a timely manner as possible.
- 6.31 We are fortunate to have a mental health in-patient hospital in Blackpool. However we continue to e see an increase in out of area hospital beds, a symptom of the current Natinal

challenges. An example recently of a person admitted to a mental health hospital bed in Northampton; this was a private hospital and the local AMHP service were not able or willing to undertake a Mental Health Act Assessment on behalf of Blackpool Council – this resulted in a Blackpool AMHP having to travel to Northampton to undertake a Mental Health Act Assessment. To help improve the current situation for Blackpool residents needing a mental health in-patient bed, we are having dialogue with Lancashire Care Foundation Trust who have provided assurances that they will do all they can to provide an in-patient bed as close to Blackpool as possible going forwards, however this is dependent on what is available at the time and the National picture.

6.32 Integrated Learning Disability Team

As is the same for all Adult Social Care services, the Learning Disability Team are also experiencing significant demand. To support with some of the management oversight of the Team we have successfully appointed a Deputy Team Manager who comes with considerable experience from other areas and will be a welcomed member of the Learning Disability Team into the future.

6.33 We continue to provide a fully Integrated Learning Disability Team, the only fully integrated model in the Northwest. This includes the vital resource of a dedicated Psychologist supported by Behavior Specialist Nurses and other social care and health probationers. This ensures that people receive the care and support they need from one place without having to be passed between different services. A real success story for Blackpool and our Learning Disabled population.

6.34 Learning from Safeguarding Adult Reviews (Learning Disability)

Learning from Safeguarding Adult Reviews in a key function of the learning disability team. This includes the development of actions plans in response to learning which is overseen by the Safeguarding Adults Board. Engagement sessions with partners has been a key feature of the learning and so far these sessions have reached over 226 colleagues across our partnership. The focus of the learning and engagement sessions is 'prevention' and how the learning will improve how we support people. The next stage is to expand the engagement sessions to care providers supporting learning disabled adults and to also develop and evaluation mechanism that checks back that the learning identified is now shaping how we support people.

6.35 Autism Team

The Autism Team continues to build on its positive reputation and this is evident in the number of request for support that come through to the team. We have successfully appointed a Team Manager which is providing a level of stability in the team as they respond the demand for support. There has also been a very successful Social Work Apprentice Pathway developed for those student social workers nearing completion of their qualification

to take on a role in readiness for qualification. This not only supports a 'grow your own' approach but helps retain our valued and experienced staff who are committed to Blackpool. We have taken the step to develop a Preparing for Adulthood Social Worker post in recognition of the number of young autistic people who may require ongoing support from the Autism Team (adults) into the future. This is proving to be a great success and already making a difference as we are getting to know young people sooner and helping them understand some of the decisions they may need to be considering as they become an adult and ensuring that they have a voice in those decision.

6.36 **Care and Support – Provider Services:**

Following what has been a very busy winter period of our Council provider services we are now entering what has traditionally been a less busy period in some of our services. We have continued to develop services in response to demand, where ever this might be at any given time, for example:

- 6.37 ARC We have flexed the service to accommodate the changes in demand at the Hospital and when packages of care have been difficult to secure. ARC has provided care for people for short periods of time whilst their onward place of care is being finalized. This has had a really positive impact on people as they have benefited from all that ARC offers in terms of rehabilitation and a very proactive care and support model. Indeed, some people are leaving ARC following a short period in a much healthier and more mobile position than they were before.
- 6.38 Homecare and Reablement Service With the expansion of Fylde Coast Rapid Response Service and the emphasis on 'prevention' we have seen a significant increase in requests for crisis care coming through to our Homecare Service. These requests have increased by at least 20% over a period. This is a really positive picture as this has a direct link to reducing numbers of people being conveyed to hospital and receiving alternative care at home. With the evolution of virtual wards and virtual monitoring, this number of people who receive care and health support at home will likely increase as we work towards a fully integrate care and health partnership in Blackpool. Our Council services are actively involved in conversations about what our community transformation could look like and 'care at home' services are absolutely key to this.

6.39 • Apprenticeships in Care:

We have supported in excess of 130 Care Apprenticeships over recent years with the latest cohort of 32 just embarking on their qualification journey. This is not only growing the skills and expertise of our workforce but supporting numeracy and literacy attainment as Functional Skills Level 2 is part of the programme. Our apprentices have remained in employment with the Council and in most cases remained with our internal care and support services, albeit, they have moved into different roles, advanced into management and/or undertaken further studies in Social Work. This is a really positive story for Blackpool residents as not only do we have highly skilled and trained

practitioners providing care and support but most of our workforce also live in Blackpool and are residents too living, working and supporting the Blackpool economy.

6.40 **Digital Switch from Analogue – Vitaline**

We are nearing the August 2023 analogue to digital SWITCH date and we are pleased to confirm that our Vitaline Service is ahead of schedule in terms of customers having a digital device in place ready for the SWITCH. We are in the process of replacing and installing the last of the digital smart units which will hopefully be by the end of July. We then transfer to a Digital Hosted Platform and will begin testing the 7000+ devices and connections across Blackpool. The early planning and installation of a digital solution has meant that on the day of the SWITCH there should be no or very little interruption for residents and in most cases, no-one will notice any change. In the background our Vitaline Service, Tunstall (contractor) and the Council's Information Technology Team will be working hard to ensure everything runs as smoothly as possible. Our Vitaline Service is one of the first technology enable care servicers in the region to have reached a position of being digitally ready for the end of August SWITCH deadline. Other areas are needing to find work rounds to support analogue to digital whilst work is done to become digitally ready.

6.41 **Commissioning**

The Commissioning Team work alongside Adult Social Care to facilitate the development and delivery of services required to meet identified need across the market. This includes reviewing existing services, assessing the market and any changing needs of the local population, redesigning and retendering service areas and implementing new contractual agreements for the ongoing delivery of commissioned provision. Commissioned Services across Adult Social Care include, but are not limited to, residential care, home care, day care, extra care housing, the equipment service, domestic abuse services and supported living for people with learning disabilities and mental health conditions.

6.42 Last year the Commissioning Team released the Market Position Statement (MPS) for Residential Care, this showed that Blackpool has 66 registered residential and nursing homes for people with dementia, learning disabilities, physical disabilities, sensory impairment and mental health issues, providing a total of 1,618 beds across the town. More than 88% of these homes have been rated 'good' or 'outstanding'. Market Position Statements allow the local authority to review and update their understanding of the current demands and needs of the local population, assess where there may be gaps in the market and communicate to the market our requirements for delivering appropriate service in the future. Later on this year Market Position Statements for both domiciliary home care and day care will also be published. We have developed a care at home provider event which is being held at the end of June which is designed to engage with the market, gather feedback on the practical delivery of the provision, identify barriers and assess the current contractual arrangements we have in place.

- 6.43 Recent areas of work include the development of a new carer's strategy, close working with the ICB to plan for the future delivery of the equipment service and the delivery of a range of new contracts. Recent tenders include the continuation of the Extra Care Housing Peace of Mind Service at Elk View and Tulloch Court, where iCare were successful in winning the bid to deliver the new contract for the next 5 years and beyond. The provision of day care services for elderly people and people with learning disabilities has also undergone a recent retendering process which resulted in the successful bidder, Independent Living, continuing to deliver the day care service at Warren Manor Hub.
- 6.44 The Commissioning Team are currently in the process of reviewing a number of Mental Health Supported Living schemes across the town. Work is also ongoing around the development of a Supported Living pathway for the provision of schemes that support people with mental health and learning disabilities. A review and mapping exercise of the current Domestic Abuse support services within the town is also underway, this will lead to the development of a more formalised, joined up approach going forward.

Quality Monitoring Team

Our quality monitoring team is a key part of our commissioning function, working with providers and partners to deliver a clear line of sight through to the challenges and opportunities for safe, dignified and innovative care delivery across our wide range of settings.

6.46 In late March 2023 The Adult Quality Monitoring Team initiated a short term project with regards to the adoption and implementation of the Skills for Care - Adult Social Care Workforce Data Set (SfC – ASC WDS) amongst local care providers. In order to move the project forward we collaborated with the Provider Support HUB so that we could draw on additional resources.

Local providers had been encouraged to engage with the programme by ourselves and also by a range of strategic partners for some time, however the level of take up amongst the local provider base was generally poor. At the time Blackpool ranked 129 out of 151 areas. Looking at the lack of take up we decided to give this some focused attention with a view to generating quick and positive results. The ultimate intention being that the long term benefits of high programme engagement to both ourselves as commissioners and also the providers could ultimately be brought forward. At the time of writing (16/09/2023) Blackpool's engagement level has migrated from 129 out of 151 to 35 out of 151. Whilst we are pleased at the positive direction of travel we are actually hopeful we can improve this position significantly in the near future.

The benefits of high programme engagement are considerable as the dataset is a comprehensive collection of data related to the adult social care workforce. It aim is to

- 6.47 capture information about the people employed in the sector, their skills, qualifications, and other relevant details. This dataset holds significant value for both national and local commissioners as well as care providers. Over time it will become incredibly useful to Blackpool across a range of commissioning activity such as:
 - Workforce Planning: The data set provides valuable insights into the size and composition of the adult social care workforce. It allows national and local commissioners to understand the current workforce capacity, identify gaps or shortages in specific areas, and plan for future workforce needs. This information is crucial for ensuring sufficient staff to meet the growing demands of social care services.
 - Quality Assurance: The dataset enables commissioners and care providers to assess the quality of care being delivered. By analysing information on staff qualifications, training, and experience, they can ensure that the workforce has the necessary skills and competencies to provide high-quality care to individuals. This information helps in making informed decisions regarding training programs and improving the overall quality of care.
 - Performance Monitoring: The data set aids in monitoring the performance of care providers and the impact of interventions or policy changes. It allows for benchmarking and comparison across different regions, providers, and specific workforce groups. By tracking workforce indicators such as turnover rates, vacancies, and staff retention, commissioners and providers can identify areas of concern, evaluate the effectiveness of interventions, and implement targeted strategies for improvement.
 - Workforce Development: The data set helps identify training and development needs within the adult social care sector. Commissioners and providers can use the information to design and deliver relevant training programs, identify areas where additional support may be required, and promote career progression opportunities for the workforce. This contributes to building a skilled and competent workforce, leading to improved service delivery.
 - Resource Allocation: The data set assists in resource allocation and funding decisions. By understanding the workforce requirements, commissioners can allocate resources effectively and distribute funding to address workforce challenges. It helps in optimizing the allocation of resources to meet the needs of specific populations, geographical areas, or service types, ensuring equitable access to quality care.

Overall, the Skills for Care Adult Social Care Workforce Data Set provides a robust foundation of information for national and local commissioners and care providers to make evidencebased decisions, promote workforce development, improve quality of care, and ultimately enhance the outcomes and experiences of individuals receiving adult social care services.

6.48 Finally Skills for Care have asked Blackpool if they can use the approach adopted by the Council as a published case study to support other localities generating their ow improvements in provider take up and engagement.

6.49 **Finance Update**

The reported outturn figure for Adults in 2022/23 was a £1.84m overspend, this was an improvement on the reported position as at Month 8 of a £2.3m overspend. The main areas of pressure sat within the Commissioning Placement budget (£2.352m), the main cost driver behind this was additional Short Term packages of care linked to hospital discharge (£1.819m) which was in part offset by the Discharge to Assess (D2A) recharges to the ICB and funding from the £500m Discharge Support Fund (£1.27m). This spend supported a minimum of an additional 40 residential packages and 120 Care at Home packages.

- 6.51 Further pressures sat within Direct Payments (£182k), Residential and Nursing packages (£414k), Supported Living (£402k), Complex Cases (£796k) and Day Services (£73k). There were areas of savings within Homecare (£851k) and Transport (£67k). Provisions were increased for both Bad Debt (£812k) and Deferred Payments (£42k). Adult Social Care had an overall underspend of £479k, £77k of this relates to additional income from the Integrated Care Board (ICB) in relation to Direct Payments, a further £41k Community Mental Health Transformation grant income from Lancashire County Council, £20K additional funding for a rough sleepers project, £39K funding from Public Health for Changing Futures and the remainder of the saving was due to a number of vacant posts across the service throughout the year.
- 6.52 The Care and Support service had a small underspend (£33k), pressures due to an income shortfall at Nibbles Café (£13k) and staffing pressures at Langdale day service (£12k) were offset by vacant posts.
- 6.53 For the 2023/24 financial year the main pressure identified at an early stage relates to fee uplifts with our out of area providers (£400k). We commission approximately 20% of our residential and nursing beds outside of Blackpool and had forecast that these uplifts would be in line with those made to our local providers, however, decisions were taken across other authorities to significantly increase their fee rates to providers. The majority of our out of area placements sit within Lancashire County Council, as an example of the disparity we have uplifted our residential rates by 8.3% yet LCC increased between 16-20% the consequence of differences in outcome from Fair Cost of Care exercises each Authority was required to conduct, different operating environments, and the investment capabilities from available resources of each Council.
- 6.54 There is close working between the senior finance and operational leads from the 4 main constituent organisations in Health and Social Care: The Council, Blackpool Teaching Hospitals (BTH, the main acute and community health provider), Lancashire and South Cumbria Foundation Trust (LSCFT, the main mental health provider) and the Integrated Care Board (ICB). This enables us to be aware of each other's issues and pressures, try to avoid

'cost shunting actions' and identify ways we can work together more effectively to achieve better outcomes for our population and in the use of our collective resources.

LGC Awards 2023 - Health and Social Career Academy

6.55

The Council has partnered with Blackpool and the Fylde College and health colleagues to deliver a national exemplar care academy to serve the needs of the town they all serve. A dedicated training facility and bespoke website have been developed. Over the last four years nearly 300 unemployed people have been trained with 95% securing employment or further training. Over 180 care providers have engaged with the programme. The success of the initiative has attracted external interest and lessons learned have been shared nationally. The partnership prides itself on being able to respond to emerging issues in local care provision.

Further to successful shortlisting the Health and Social Career Academy was awarded a high commendation in the Public/Public Partnership category at the LGC Awards.

7.0 List of Appendices:

None for this report.

8.0 Legal considerations:

No decisions requiring a legal consideration are recommended in this report.

9.0 Human resources considerations:

Staff welfare, retention and recruitment is a key identified area for continued development in the ASC Improvement Plan, and ongoing monitoring of turnover is in place.

10.0 Equalities considerations:

All policy decisions, new developments and changes in service delivery are subject to Equality Impact Assessments.

11.0 Financial considerations:

As detailed in section 6.47, there is pressure on the budget for the department. Work is ongoing to address pressures across the partnership.

12.0 Risk management considerations:

Risks to the continuity and delivery of service, the quality of provision, ability to deliver and the wider market are articulated in and managed through the departmental risk management plan, and aggregated up to the Council Risk Management Plan.

13.0 Ethical considerations:

In line with Equalities considerations, ethical considerations such as pay rates for frontline workers are clearly articulated in decision documents.

14.0 Internal/external consultation undertaken:

Policy changes, commissioning decisions and service delivery changes are subject to formal engagement and consultation requirements. Partnership working is in place to develop place based arrangements with the Integrated Care Board (ICB) which is subject to wide consultation and engagement work.

15.0 Background papers:

All relevant information is provided in the body of the report.

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Report to:	ADULTS SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE
Relevant Officer:	Prof Sarah O'Brien – Chief Nursing Officer, NHS Lancashire and South Cumbria Integrated Care Board (ICB)
	Karen Smith – Director of Health and Care Integration (Blackpool) at NHS Lancashire and South Cumbria ICB and Blackpool Council Director of Adult Social Services (joint appointment)
Date of Meeting:	6 July 2023

INTEGRATED CARE BOARD UPDATE

1.0 Purpose of the report:

- 1.1 To provide an overview of the continuing development of the Integrated Care Board (ICB) and NHS Lancashire and South Cumbria Integrated Care Partnership (ICP).
- 1.2 It also gives an overview of the ultimate aspirations of the ICP in relation to delegating authority to Lancashire and South Cumbria Places, which include Blackpool, and progress to date.

2.0 Recommendation(s):

2.1 That the report be noted and that the any areas for additional scrutiny be identified as appropriate.

3.0 Reasons for recommendation(s):

- 3.1 To enable to the Committee to remain informed regarding the development of the ICB and ICP
- 3.2 Is the recommendation contrary to a plan or strategy adopted or approved by the No Council?
- 3.3 Is the recommendation in accordance with the Council's approved budget? Yes
- 4.0 Other alternative options to be considered:
- 4.1 None.
- 5.0 Council priority:

- 5.1 The relevant Council priority is
 - "Communities: Creating stronger communities and increasing resilience"

6.0 Background information

6.1 Establishment of Lancashire and South Cumbria Integrated Care Board

NHS Lancashire and South Cumbria Integrated Care Board (ICB) had been established on 1 July 2022 as a result of the Health and Social Care Act 2022. As a result of which the eight Care Commissioning Groups (CCG) in Lancashire and South Cumbria, including Morecambe Bay CCG, were closed.

The ICB took on the CCG commissioning functions as well as some of NHS England's commissioning functions and is accountable for NHS spending and performance within the system.

The strategic aims of the ICB are to:

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development

6.2 Establishment of Lancashire and South Cumbria Integrated Care Partnership

As part of the Health and Social Care Act 2022, the Integrated Care Partnership (ICP) had also established as a statutory committee on 1 July 2022. The ICB and the unitary and upper-tier local authorities hold a statutory duty to coordinate Lancashire and South Cumbria ICP together.

The partnership sees health and care partners work together by agreeing joint priorities and a joint health and care strategy. Blackpool Council is a statutory member of this partnership, as are other Lancashire and South Cumbria local authorities, NHS organisations, businesses, education, Healthwatch and voluntary, community, faith and social enterprise (VCFSE) organisations.

From its first meeting in September 2022, partners have worked collaboratively on the development of the ICP, including membership and terms of reference. Councillor Jo Farrell, Blackpool Council Cabinet Member for Adult Social Care, and Community Health and Wellbeing and Chair of Blackpool Health and Wellbeing Board is a representative on the ICP. Tracy Hopkins is also a representative on the ICP. Tracy is CEO of Citizens Advice Blackpool and holds positions on Blackpool's Health and Wellbeing Board, Safeguarding Adults Board, Lancashire Association of Council for Voluntary Services Board and is working to develop the VCFSE Alliance across Lancashire and South Cumbria.

The ICP is keen to ensure and support greater levels of involvement from Blackpool representatives on the ICP going forward.

6.3 Developing an Integrated Care Strategy for the ICP

Since ICP's first meeting in September 2022, partners have been working together to develop an integrated care strategy to address the broad health and social care needs of the population within Lancashire and South Cumbria.

This strategy provides an opportunity for us to set out our ambitions for what we can achieve as an Integrated Care System. It aims to outline, at a high level, the difference we can make by working in an integrated way. It doesn't seek to replace or duplicate existing strategies and activity that is already underway in the system – instead it seeks to link them together by providing an overarching narrative about what it is that we are all trying to change and improve together. It is acknowledged that much of the strategy will be delivered through places.

The ICB and local authorities are required by law to have regard to the ICP's strategy when making decisions, commissioning and delivering services. There is a national deadline for the ICP to develop the strategy by December 2022. This is a tight and unrealistic deadline for the newly-formed ICP and therefore engagement around the strategy has continued into early 2023.

At its first meeting in September 2022, the ICP had been presented with a summary of findings which included information from local authority Joint Strategic Needs Assessments, data from the Health Equity Commission and insight gathered from engagement with Lancashire and South Cumbria communities over the last five years.

Using this data and insight, the partnership proposed six draft priorities for the integrated care strategy:

- Starting well: Supporting children and their families in the first 1000 days of a child's life, with a holistic consideration of factors influencing health, well-being and school readiness.
- Living Well: Preventing ill health and tackling inequalities, recognising the importance of mental well-being as well as physical health, and addressing the factors that cause inequality in access and outcomes.
- Working well: Supporting people into employment and staying in work, maximising the role of large-scale organisations and local businesses in contributing to the health and wellbeing of individuals and the social and economic development of communities.
- Ageing well: Delivering high-quality care that supports people to stay well in their own homes, with radical and innovative approaches to integrating care provision.
- Dying well: supporting people to choose their preferred place of death and that their

families and their carers plan for and improve end of life and provide excellent bereavement support to our communities.

In Autumn 2022, the ICP engaged with local people and partners on these draft priorities. This included an event that focussed on gaining feedback from Blackpool partners. The findings were reviewed by the ICP and partners have since further refined the priorities and produced a draft strategy. The draft Integrated Care Strategy will go to partners for further feedback before going out to further resident engagement which will be mainly focused on ensuring that the language used in the strategy is understandable and meaningful to residents.

This remains a draft strategy at present and are keen to engage with Blackpool councillors and other representatives to develop it further.

6.4 Place-based Partnerships (PBPs) in Lancashire and South Cumbria

6.5 Place-based boundary review

In July 2022, the ICB realigned its place boundaries with the upper-tier and unitary local authorities within the footprint:

- Blackpool Council
- Lancashire County Council
- Blackburn with Darwen Council
- South Cumbria

This supports the deeper integration of health and social care services. To further support this integration, Blackpool Council Chief Officer's Employment Committee approved the appointment of Karen Smith, Blackpool Council Director of Adult Social Services (DASS) to the joint Local Authority and Integrated Care Board appointment of Director of Health and Care Integration for Blackpool, (encompassing the statutory Director of Adult Social Services role).

The changes made by the Integrated Care Board to the Place-based partnership footprint, together with the joint Local Authority and NHS appointment of a Director of Health and Care Integration for Blackpool, allow resources and decision-making to be aligned with local needs and priorities for Blackpool. As it is co-terminus with the local authority area it also allows a more simplified structure to operate. Elected members, businesses, health, social care, and community organisations, together with our residents will be better able to shape and influence priorities specific to Blackpool, rather than the wider Fylde Coast, whose population in many respects has different characteristics and needs.

Since Ms Smith's appointment, the ICB's place-based team has been further enhanced by the continued support of Dr Neil Hartley-Smith and the additional support of Karen Tordoff as place lead.

6.6 **Responsibilities of Place-based Partnerships**

There is a long-term vision for developing, and delegating responsibility to, Place-based Partnerships such as Blackpool. The ICP is currently in the early stages of this journey.

The Long term aspirations are that places will:

- Coordinate the planning and delivery of all-age, community-based service provision for physical and mental health care.
- Focus on supporting people to live well and independently; reducing health inequalities and unwarranted variation within their place.
- Collaborate with a different place (Place+) or as a collective of four places in Lancashire and South Cumbria (all places).

Hospitals Trusts will be important as partners and large-scale employers, to ensure seamless pathways for residents and in supporting health creation, prevention, providing care in neighbourhoods and ongoing support for people to remain at home.

While this is a broad overview of the ICP's aspirations for places in Lancashire and South Cumbria, the focus in Blackpool will be on Blackpool and its specific and unique needs.

6.7 Developing Blackpool Place-based priorities

In line with the aspirations above, specific local priorities are being developed in the context of Blackpool being a new "place", together with partners and communities.

These Blackpool-based priorities will dovetail with the ICP priorities and the following:

- Blackpool Council Plan priorities and key programmes
- Blackpool Health and Wellbeing Strategy
- Prevention and Health Inequalities strategy 2020-25
- Health Equity Commission recommendations
- LSC Integrated Care Partnership Priorities
- The Lancashire 2050 Plan

Developing the Blackpool Partnership is also a key priority, including defining the operating model for system and place, confirming resources and staffing and an outcomes framework which will oversee delivery.

6.8 Future engagement between the ICP and Blackpool Council

The ICP welcome the opportunity to discuss in further detail at this meeting how formal and informal engagement and communication with Blackpool Council members and officers is developed and maintained in future.

- 6.9 Does the information submitted include any exempt information?
- 7.0 List of Appendices:
- 7.1 None.
- 8.0 Financial considerations:
- 8.1 None.
- 9.0 Legal considerations:
- 9.1 None.
- 10.0 Risk management considerations:
- 10.1 None.
- **11.0** Equalities considerations:
- 11.1 None.
- **12.0** Sustainability, climate change and environmental considerations:
- 12.1 None.
- **13.0** Internal/external consultation undertaken:
- 13.1 None.
- 14.0 Background papers:
- 14.1 None.

Report to: ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE

Relevant Officer: Andrew Williams, Director of Operations for the Fylde Coast Lancashire and South Cumbria NHS Foundation Trust

Date of Meeting : 6 July 2023

FYLDE COAST INITIAL RESPONSE SERVICE (IRS)

1.0 Purpose of the report:

1.1 Following the update to the Committee on 19 October 2022, this report provides an update on the development of the Initial Response Service for the Fylde Coast, detailing the background to the project, key challenges and progress to date. It outlines the next steps and the provision of a launch date.

2.0 Recommendation(s):

2.1 The Committee is asked to consider and note the progress in services and the continued improvements being made

3.0 Reasons for recommendation(s):

- 3.1 To ensure that the Committee is sighted upon this key development for Blackpool.
- 3.2 Is the recommendation contrary to a plan or strategy adopted or approved by the **No** Council?
- 3.3 Is the recommendation in accordance with the Council's approved budget? Yes
- 4.0 Other alternative options to be considered:
- 4.1 No other options are provided as part of this paper.

5.0 Council priority:

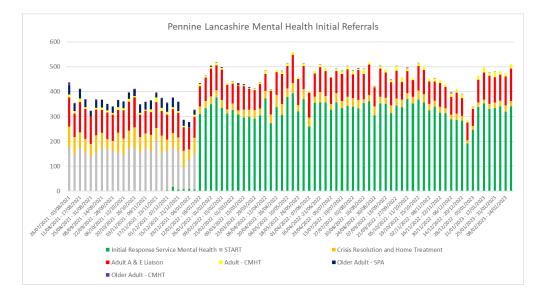
- 5.1 The relevant Council priority is
 - "The economy: Maximising growth and opportunity across Blackpool"
 - "Communities: Creating stronger communities and increasing resilience"

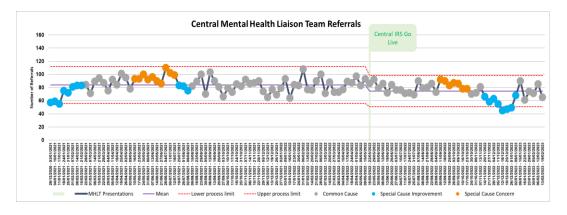
6.0 Background information

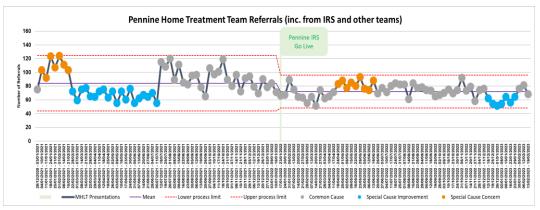
6.1 The Initial Response Service (IRS) is a new 24/7 model of access for people of all ages in Lancashire and South Cumbria, to enable access to urgent and routine mental health support and advice through a single triage, based on trusted transfer. Through this, people can access the mental health pathway, including signposting to relevant services within and outside of LSCFT, including voluntary, community, faith and social enterprise organisations, as well as health and social care services.

Currently, three IRS are operational in the Pennine, Central & West, and The Bay localities, with the Fylde Coast working towards launch this year. Fylde IRS is more complex as Blackpool Teaching Hospitals currently provide Mental Health services, including the single point of access. The IRS have to ensure, therefore, that there have been robust discussions across LSCFT and Blackpool Teaching Hospitals, to ensure pathways are appropriate.

We have started to see significant impact of IRS across other localities where it has been launched. For example, both Pennine & Central saw increases in total referrals since the launch of IRS, Pennine 25.4% and Central 15.7% with a concomitant reduction in referrals to MHLT (Pennine 11.2%, Central 11.1%) and Home Treatment Teams (Pennine 14.4% and Central 38.5%). Similar benefits are expected in Fylde Network. Graphs show examples of this below.







6.2 Due to the lack of suitable estate and following learning regarding the model post implementation, the Committee were apprised in June 2022 that the Trust would explore alternative delivery models, utilizing the learning from the two pilot programmes in Central & West and Pennine Networks and ensuring that there would be an IRS service delivered for the Fylde Coast.

Fylde's call handling function will be delivered by Central & West, while embedding the clinical team at The Harbour in Blackpool. This will ensure that there is an experienced call handling function, which is already in situ, and that the clinical function will be delivered locally in Fylde.

- 6.3 IRS will take calls for the Primary Intermediate Mental Health Team (PIMHT) delivered by Blackpool Teaching Hospitals NHS Foundation Trust (BTH). The PIMHT team are a key stakeholder in the task & finish group and a standard operating procedure has been developed to outline how referrals will be managed between the two services. This will be tested over the summer to ensure it is robust.
- 6.4 IRS will replace the current START service in Fylde Coast and prior to launch, plans have been made to reduce service user waiting times in START (medical and practitioner) so that IRS has an optimum launch and the risk of adverse outcomes for service users is prevented. The plan is on track to reduce waiting times prior to launch so that no service user will be waiting longer than 1 week to see a practitioner ahead of the IRS going live. This is also to prepare for an increase in demand,

which would be expectied to see as with other IRS launches across the Trust.

- 6.5 Recruitment to the clinical team at The Harbour has provided significant challenges and has been a key factor in delaying the launch, until it is safe to do so. 11.8 of the 16 have now appointed core team members required to deliver the service and have confidence that the remaining vacancies to be recruited over the autumn.
- 6.6 Fylde Coast currently operates the Psynergy Service, a collaboration between LSCft, the Police and NWAS providing a street triage service, and this will continue while the Street Triage model is further explored, with the aim to ensure consistency in how the street triage service is provided across the LSCft footprint.

The Street Triage Team brings together the knowledge, experience and training of a Police Officer and a Senior Mental Health Nurse. Working together they are able to triage a patient in situ and work out the best next steps for the patient, avoiding an unnecessary trip to A&E, or a Section 136 suite.

Also, **NHS111 First** is a national programme that aims to integrate mental health into the NHS111 service. The North West region is working to establish a comprehensive mental health crisis service by integrating the existing crisis lines across the three Integrated Care Systems by 31st March 2024, giving users the ability to press '2' for Mental Health.

- 6.7 Given the continued progress, it is anticipated that the Fylde Coast IRS will launch in October 2023. The developments are reported to the Accident & Emergency Delivery Board monthly and progress tracked through the IRS Mobilization Group and regular Gateway Meetings with the Executive Team at LSCft.
- 6.8 Does the information submitted include any exempt information?
- No

- 7.0 List of Appendices:
- 7.1 None
- 8.0 Financial considerations:
- 8.1 No relevant financial considerations for this Committee.
- 9.0 Legal considerations:
- 9.1 No relevant legal considerations for this Committee.
- 10.0 Risk management considerations:
- 10.1 No immediate risk issues for consideration by this committee. Risks to launch, including

staffing are considered and mitigated as part of the task & finish group.

11.0 Equalities considerations:

11.1 No issues for consideration by this committee.

12.0 Sustainability, climate change and environmental considerations:

12.1 The teams have been housed within existing LSCft estate.

13.0 Internal/external consultation undertaken:

13.1 No issues for consideration specifically by this committee. Paper for information and noting.

14.0 Background papers:

14.1 N/A

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Report to: ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE

Relevant Officer: Karen Smith, Director of Adult Services

Date of Meeting: 6 July 2023

OVERVIEW OF THE BLACKPOOL SAFEGUARDING ADULTS BOARD

1.0 Purpose of the report:

1.1 To share with Scrutiny Members an overview of the Blackpool Safeguarding Adults Board and plans to develop a Place Based service.

2.0 Recommendation(s):

2.1 To comment upon progress being made, propose potential improvements and highlight any areas for further scrutiny which will be reported back as appropriate.

3.0 Reasons for recommendation(s):

- 3.1 To ensure constructive and robust scrutiny of these areas of work.
- 3.2 Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No
- 3.3 Is the recommendation in accordance with the Council's approved budget? Yes
- **4.0** Other alternative options to be considered: None at this time.

5.0 Council priority:

- 5.1 The relevant Council priority is: Communities: Creating stronger communities and increasing resilience.
- **6.0** A decision has been taken across the three authorities, and in partnership with relevant stakeholders, to disband the centralised Joint Partnership Business Unit which provided support for the Lancashire, Blackpool and Blackburn with Darwen Safeguarding Adult Boards and their various sub-groups.

6.1 New Developments

Plans are underway for each area including Blackpool to become 'place based' and is

anticipated to be implemented by September 2023. The Blackpool business unit structure and governance arrangements are yet to be finalised but plans are well advanced. Pan-Lancashire agreed projects will continue to be pursued such as the Healthwatch project to ensure the 'voice' of service users and Making Safeguarding Personal is embedded in practice.

6.2 New Chair

The recruitment for a new Safeguarding Adults Board Independent Chair for Blackpool is in progress. The interview and selection process will take place in August 2023. The Board Chair in conjunction with Partners will review and refresh the governance arrangements and hold a development session to identify new priorities for the Safeguarding Adults Board. It is anticipated the new Chair will lead our Board Development Day in September, which will refresh our membership, structure and priorities.

6.3 Annual Report

The Blackpool Safeguarding Adults Board – Annual Report 2022/23 is currently being produced. This is a statutory duty under the Care Act. This report is anticipated to be shared and presented to the Scrutiny Committee at the September meeting by the new Independent Chair.

6.4 Safeguarding Adult Reviews (Adult V & Adult Q) - Progress Update

There were two Safeguarding Adults Reviews published in the year. These are independently chaired and bring together all relevant partners in reviewing what happened and any lessons to be learned and are published on the Board's website.

7.0 List of Appendices:

7.1 None for this update report.

8.0 Financial considerations:

8.1 Budget discussions are underway with the three contributory authorities.

9.0 Legal considerations:

9.1 Statutory duties delivered at a Pan Lancashire Level will be supported through the new governance arrangements (such as the development of an Annual Report).

10 Risk management considerations:

10.1 Risks associated with the change, and the place based delivery of the statutory functions of the board, will be subject to a plan which will include risk management considerations.

11 Equalities considerations:

11.1 Ensuring that the board has a line of sight through to the development and delivery of Equality Impact Assessments, that disparities are understood and that there are actions where required to address inequalities will be a key area for the new board arrangements.

12 Sustainability, climate change and environmental considerations:

- 12.1 **None**
- **13** Internal/external consultation undertaken:
- 13.1 None
- 14 Background papers:
- 14.1 None.

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Report to: ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE

Relevant Officer: Mrs Sharon Davis, Scrutiny Manager.

Date of Meeting: 6 July 2023

SCRUTINY WORKPLAN

- **1.0** Purpose of the report:
- 1.1 To consider the details of the Committee's workplanning workshop.

2.0 Recommendations:

- 2.1 To note that the Committee's workplanning workshop will take place on 20 July 2023, commencing at 6pm in the Members Training Room, 3rd Floor, Town Hall.
- 2.2 To monitor the implementation of the Committee's recommendations/actions.

3.0 Reasons for recommendations:

- 3.1 To ensure the workplan is robust and fit for purpose.
- 3.2 Is the recommendation contrary to a plan or strategy adopted or No approved by the Council?
- 3.3 Is the recommendation in accordance with the Council's approved Yes budget?
- **4.0** Other alternative options to be considered:
- 4.1 None.

5.0 Council Priority:

- 5.1 The relevant Council Priority is:
 - Communities: Creating stronger communities and increasing resilience

6.0 Background Information

6.1 Scrutiny Workplan

A Scrutiny Workplanning Workshop will be held on 20 July 2023 to consider items for inclusion on the Committee's workplan for the 2023/2024 municipal year. The workplan is a flexible document that sets out the work that will be undertaken by the Committee over the course of the year, both through scrutiny review and Committee meetings.

Committee Members are also invited to suggest topics at any time that might be suitable for scrutiny review through completion of the Scrutiny Review Checklist (attached at Appendix 6(a). The checklist forms part of the mandatory scrutiny procedure for establishing review panels and must therefore be completed and submitted for consideration by the Committee, prior to a topic being approved for scrutiny outside of the workplanning workshop.

6.2 Implementation of Recommendations/Actions

The table attached at Appendix 8(b) has been developed to assist the Committee in effectively ensuring that the recommendations made by the Committee are acted upon. The table will be regularly updated and submitted to each Committee meeting.

Members are requested to consider the updates provided in the table and ask followup questions as appropriate to ensure that all recommendations are implemented. The table includes the work and recommendations of the 2022/23 municipal year.

6.3 Does the information submitted include any exempt information?

No

7.0 List of Appendices:

- 7.1 Appendix 8(a) Scrutiny Selection ChecklistAppendix 8(b)- Implementation of Recommendations/Actions.
- 8.0 Financial considerations:
- 8.1 None.
- 9.0 Legal considerations:
- 9.1 None.
- 10.0 Risk management considerations:
- 10.1 None.
- **11.0** Equalities considerations:

- 11.1 None.
- **12.0** Sustainability, climate change and environmental considerations:
- 12.1 None.
- **13.0** Internal/ External Consultation undertaken:
- 13.1 None.
- **14.0** Background papers:
- 14.1 None.

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SCRUTINY SELECTION CHECKLIST

Title of proposed Scrutiny:

The list is intended to assist the relevant scrutiny committee in deciding whether or not to approve a topic that has been suggested for scrutiny.

Whilst no minimum or maximum number of 'yes' answers are formally required, the relevant scrutiny committee is recommended to place higher priority on topics related to the performance and priorities of the Council.

Please expand on how the proposal will meet each criteria you have answered 'yes' to.

	Yes/No
The review will add value to the Council and/or its partners overall performance:	
The review is in relation to one or more of the Council's priorities:	
The Council or its partners are not performing well in this area:	
It is an area where a number of complaints (or bad press) have been received:	
The issue is strategic and significant:	
There is evidence of public interest in the topic:	
The issue has potential impact for one or more sections of the community:	
Service or policy changes are planned and scrutiny could have a positive input:	
Adaguate recourses (both members and officers) are quallable to corrupt the constitution	
Adequate resources (both members and officers) are available to carry out the scrutiny:	

Please give any further details on the proposed review:

Completed by:

Date:

MONITORING THE IMPLEMENTATION OF SCRUTINY RECOMMENDATIONS

	DATE OF REC	RECOMMENDATION	TARGET DATE	RESPONSIBLE OFFICER	UPDATE	RAG RATING
1	06.02.20	That an item on dementia be added to the workplan.	ТВС	Sharon Davis	Delayed due to the pandemic. Added to the workplan as a scrutiny review panel.	Not yet due
2	11.05.22	That all Councillors be invited to attend Trauma Informed training.	October 2023	Catherine Jones	Deadline extended. Training will be provided by an external provider. We have requested their available dates to conduct the training.	Not yet due.
3	06.10.22	The Committee requested that NWAS returned in 2023 to provide an update on the opening of the new hub, the impact on performance of the measures being introduced and to update on the falls prevention work.	October 2023	NWAS		Not yet due.
4	06.10.22	The Committee requested that a further report be received on smoking cessation in approximately 12 months to allow them to monitor the performance of the service and requested that future reporting include a breakdown of key demographics of the service users.	October 2023	Arif Rajpura		Not yet due.
5	19.10.22	The Committee agreed: 1. To receive a report on the Initial Response Service in June 2023. 2. That the number of people waiting in Blackpool for a rehabilitation bed be reported in writing following the meeting.	July 2023	Chris Oliver	The data requested was circulated following the meeting. Further item on the July meeting agenda	

	DATE OF REC	RECOMMENDATION 3.That data related to returning	TARGET DATE	RESPONSIBLE OFFICER	UPDATE	RAG RATING
		patients could be provided following the meeting.				
6	26.01.23	 Stroke network 1. To receive the material developed to encourage members of the public to seek help immediately following experiencing stroke symptoms. 2. To receive a further update on the implementation of the programme in due course. 3. To receive stroke data specific to Blackpool. 	2024	Sharon Walkden	 Detailed update was emailed to Members 16/06. It was agreed at the March meeting of the System Finance Group to pause the year 3 funding of the business case. 	
7	26.01.23	Blackpool Teaching Hospital Maternity Services Update - Care Quality Commission Report (June 2022) 1. Members agreed to receive a further report on progress from the Trust in due course 2. To include patient feedback.	November 2023	Pete Murphy	To be discussed at the workplanning workshop	
8	23.02.23	To receive an update on the development of the ICB to its workplan, to include the development of the vision and strategy and to request that a briefing session be provided for all Members following the election.	July 2023	Professor Sarah O'Brien	Item on the July meeting agenda	
9	23.02.23	Weight Scrutiny Review - 1. That a full response to the recommendations of the Healthy	October 23	Arif Rajpura	To be discussed at the workplanning workshop. Item to be included on the Agenda for October	

DATE OF	RECOMMENDATION	TARGET	RESPONSIBLE	UPDATE	RAG
REC		DATE	OFFICER		RATING
	 Weight Scrutiny Review be provided to the October 2023 meeting 2. That the update to recommendation 6 (to explore the feasibility of providing free gym access to young people aged 11 to 18) in particular be noted with the Committee's acceptance that alternative ways of promoting activity amongst young people as detailed be explored. 3. That the Committee receive the draft Healthy Weight Strategy in due course. 				

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