

Report to:

ADULT SOCIAL CARE AND HEALTH SCRUTINY COMMITTEE

Relevant Officer:

Karen Smith, Director of Adult Services, Blackpool Council and
Director of Health and Care Integration (Blackpool), Lancashire and
South Cumbria ICB

Date of meeting:

8 February 2024

ADULT SERVICES OVERVIEW

1.0 Purpose of the report

1.1 To provide Scrutiny Members with an overview of the Winter Resilience arrangements for Blackpool Place and an updates on key areas of work.

2.0 Recommendation(s)

2.1 The Committee is asked to consider the content of the report and highlight any areas for further consideration.

2.2 To consider the presentation on 3 Conversations and identify any areas requiring further consideration

3.0 Reason for recommendation(s)

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

3.2 Is the recommendation contrary to a plan or strategy approved by the Council? No

3.3 Is the recommendation in accordance with the Council's approved budget? No

4.0 Other alternative options to be considered

4.1 N/A

5.0 Council priority

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

6.0 Background and key information

6.1 Adult Social Care Update:

Statutory Adult Social Care responsibility in both community and in health linked service areas is to support and promote the wellbeing of vulnerable adults across Blackpool; whatever the cause of their problems, in line with local and national policy requirements.

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. This work involves multi-disciplinary working with all relevant agencies.

Statutory responsibilities are those covered by The Care Act (2014) including prevention, assessment, care planning, the commissioning of services and undertaking reviews. Safeguarding work also falls within S42 of this legal framework. The Mental Capacity Act (2005), which includes work around mental capacity assessments, also linked BIA and best Interest work, Deprivation of Liberty Safeguards, Court of protection work and Section 21A challenges. The Domestic Abuse Act (2021) placing new responsibilities on local authorities around accommodation and support. The Health and Social Care Act (2022) with an emphasis on integrated working. Also the Human Rights Act sitting alongside other universal legal responsibilities falling under Equality and Diversity/Equal Rights.

3 Conversations – Adult Social Care is now underway with embedding the ‘3 Conversations’ approach into our teams across different areas of the department. This is a nationally recognised, way of working that engages the workforce to change how we work with people to meet their needs at the earliest stage; and as a result also makes our response more person centred, time-efficient and cost-efficient.

Then initial pilot has been evaluated as ‘successful’ in terms of delivering better outcomes for people and being less reliant on traditional service responses. On that basis we are now going to expand this way of working to further areas of adult social care and are monitoring progress and impact at weekly meetings.

Teams who have been working in this way are reporting better outcomes for people and on a personal and professional level, a higher level of job satisfaction, with all wanting to continue with the new way of working rather than old ways of working.

Newer team members are continuing to make adjustments but early feedback is positive and they are getting to understand the new way of working and therefore, the intention is to start our third frontline team working in this way early in 2024 which will mean that our whole front line community adult social care function will be using the '3 conversations' way of working.

Below is an example that illustrates the positive impact of the new way of working is having on people who need are support but also our practitioners who are building a relationship with the person and 'making a difference'.

Reason the Person Contacted Adult Social Care (ASC) – *X partner had contacted social care for support over the weekend as X was unwell and unable to get out of bed. Emergency care was arranged for over the weekend by the Emergency Duty Team (EDT) and ASC had been asked to make contact with X and their partner following this to offer further support.*

X and their partner were not previously known to social care services and had always lived independently, supporting each other, although X had a diagnosis of cancer.

What ASC Did - *We visited X and their partner at home and spent time talking to them about what was important to them. Although X did not focus on their diagnosis of cancer during the conversation- so neither did we. Instead, they enjoyed telling us about their life and their time living abroad where they and their partner 'lived life to the full'.*

They spoke about their support and love for each other and how they had always been 'fiercely independent'. We listened and respected their views, thoughts and feelings and gave them time to discuss and consider options of further support and help. X's partner decided that they would like to try and care for their partner and although we were concerned about how they would manage, we respected their decision and left the channel of communication open. A few days later X's health deteriorated and they contacted us to explain things had changed and they needed help. We again visited them and provided a short term care package which was flexible, non-intrusive and strengths based. We supported X set his own goals and plan out what he felt he needed from carers.

Making a Difference - *Prior to using the new way of working, our focus would have typically been to complete an assessment and to get services in place as quickly as possible. We would have previously regarded ourselves as quite person centred however by using the '3 conversations' way of working we now realise that we were actually led by my assessments instead of being led by the person, their wants and wishes.*

Practitioners Experience - *Shortly after our involvement with X, they sadly passed away. However, they passed away in their own home, with their partner by their side which is what X wanted. X's partner felt supported at the time they needed it and was grateful*

for my input.

This way of working has really made us stop and think about our social work practice and we have been able to reflect on how this has improved throughout the 3 conversations journey. What we have remembered from this piece of work was not the services and interventions we put in place, but the people we connected with and the conversations we had.

It wasn't about 'what we did', it was about 'what they said'.

Resilience and Response over the Christmas Period - Over the Christmas and New Year holiday period the Adult Social Care Community Team transferred to a 'one team duty model' leading up to, during and following the holiday period. This way of working ensured that an immediate response to emerging or new crisis requests were dealt with safely. The team were split into different functional areas to ensure all aspects of requests coming through received the appropriate and proportionate response, including safeguarding enquiries and concerns for welfare. This way of working during the holiday period enabled the team to keep in control of the requests and responses, this included new requests for support needing processing in a day, carrying out welfare visits to deliver urgent care, food parcels, as well as more traditional requests for help resulting in short term care placements and the commissioning of care packages. Typically demand for adult social care is high during the holiday period and 2023 was not different. The volume of requests for support that needed a response was high and the team worked hard really hard on the reduced working days during the period to ensure people that needed support, received this and that they were safe. Below are examples of the responses and volumes of requests the team responded to between 21 December 23 – 3 January 2024 (7 actual working days):

Response Type	Description	Volume
Adult Social Care Contact	Where someone has telephoned and made an on-line referral to adult social care requesting support and/or reporting a concern about a vulnerable person which requires a follow up	206 - general adult social care contacts
Welfare Visits	Where a social worker/practitioner needs to physically visit the person and complete a Welfare Check and arrange any follow up support and services if required	52 – Welfare Visits conducted and follow up actions taken
Safeguarding Concern	Where a social worker/practitioner needs to make contact, consider the situation and follow up with support	70 – Safeguarding Concerns responded to

	and/or services and/or ensure the person is safe through an agreed Safeguarding Safety Plan	and a Safeguarding Safety Plan developed
Discretionary Support Requests	Where Blackpool people request urgent financial or other assistance at times of crisis	£700 circa – Of financial assistance provided to people to assist with Gas, Electricity, Food and other essential living items/costs

Adult Social Care Hospital and Health-Based Teams – Over the Christmas holiday period the team have worked hard to flex with demand surges, in particular 2023 due to the increased operational pressures in the Acute Hospital. The hospital has been under tremendous pressure and operating at OPEL 4 (Operational Pressures Escalation Levels) almost throughout the holiday period.

Adult Social Care has supported the overall response to the increased pressures by ensuring discharges from hospital prior to Christmas were in place and care arranged. Also, over the typical non-work days, the department deployed social workers who volunteered to work additional hours to ensure as many people who wanted to be at home for Christmas were able to be.

Below are the numbers of referrals and discharges for specific periods over the Christmas holiday period:

Time Period	Number of Referrals and Discharges
Week Commencing Mon 18 December <ul style="list-style-type: none"> • Pre-Christmas planning • Significant operational pressures 	93 Referrals into the team (including non-discharge related work) 75 Discharges from hospital
Week Commencing Mon 25 December <ul style="list-style-type: none"> • 5 days of working • Christmas and Bank Holidays 	70 Referrals into the team (including non-discharge related work) 42 Discharges from hospital
Week Commencing Mon 1 January <ul style="list-style-type: none"> • 4 days of full working (limited weekend cover) • Significant operational pressures 	89 Referrals into the team (including non-discharge related work) 33 Discharges from hospital

6.2 **Adult Mental Health Update:**

Transformation - Lancashire and South Cumbria Health and Care Partnership - Community Mental Health Transformation - Seeking to address the challenges by

transforming the way mental health care for adults and older adults with severe mental illnesses are delivered across communities.

The new community-based offer is the devolvement for each PLACE with the creation of enhanced and integrated community mental health multi-disciplinary teams, supported by investment into new Primary Care Mental Health Practitioners and voluntary sector commissioned services. The aim is to establish a 'one stop access point' to psychological therapies, improved physical health care, employment support, personalised and trauma informed care, medicines management and support for self-harm and coexisting substance use. Adopting a 'one-team' approach that ensure the person needing our support remains at the center and they receive 'wrap around' personalised support.

The Service Manager for Adult Mental Health Services for Blackpool Council is our representative and is fully committed and a member of the Mental Health Transformational working Groups. They have regular attendance at meetings and is actively involved in the mobilisation meetings for Blackpool Place.

The Transformation will be a phased approach to implementation, which started with Central and West Lancashire on 16th October 2023. The roll out across other Place's is to be agreed through the Governance Structure. However, it is anticipated Blackpool Place will go live in February 2024.

As part of the work supporting mobilisation and implementation, a 'perfect week' has been tailored, which Blackpool Council and other partners were part of. The joint working with Crisis Home Based Treatment and the Initial Response Service (IRS) teams demonstrated through the 'perfect week' what could be achieved from a 'one team' approach and proactively working through some of the traditional barriers to joint working in this complex area.

A further feature of the 'one team' approach is the Enhanced Multi-Disciplinary Team (EMDT) which will convene weekly and will have significant benefit and improve the overall access to mental health support for Blackpool people.

There continues to be a considerable amount of work underway and to be done as part of the transformation journey which is being undertaken by the mobilisation teams, including full inductions and training to the teams here in Blackpool Place, which is planned for January and February 2024. The initial feedback from the Service Manager for Adult Mental Health Blackpool, suggests that the transformation and model that will be implemented and embedded in our new way of working here in Blackpool Place, will make a significant and positive difference for the people of Blackpool. Further updates will be provided to Scrutiny Committee as the transformation journey continues past implementation and we begin to see the evidence of the positive impact.

Winter and Christmas Resilience and Operational Response - The Adult Social Care Mental Health Service continues to experience increasing pressure and demand for Mental Health Act Assessments. The complexity and severity of people's poor mental health has a compounding impact on Blackpool Council's Approved Mental Health Professional (AMHP) service, in that Mental Health Act Assessments are understandably taking longer to complete with people.

Nationally there has been a reduction in community based support services for people experiencing mental ill health. The move away from traditional models of Care Coordination to Intervention Based Approaches by mental health services has led to vulnerable people with serious mental illness, dual diagnosis, and forensic histories, not being able to access support or this being available in the early stages of mental ill health deterioration and only coming to the attention of mental health services in times of crisis.

The establishment of the Initial Response Service (IRS) and the ongoing Transformation work underway, will go some way towards a more preventative model of support where people will receive support earlier and therefore reduce the number and maybe level of mental health crisis in the future.

Below is an illustration of the response to the current pressure and resilience within the service. On Friday 22 Dec 2023 there were **12** people awaiting a Mental Health Act Assessment or waiting for beds following a Mental Health Act Assessment and liable for detention due to mental ill health, all receiving support in the community and/or in settings with support. The Council's AMHP Service had **3** duty AMHP's deployed and undertaking Statutory Mental Health Act Assessments. This included a young person on the children's ward at Blackpool Victoria Hospital. The focus of AMHP Service was to complete the urgent assessments required and agree the plans for those people who needed support in the community whilst awaiting a specialist mental health hospital bed. This work continued up to 20.00hrs to ensure continuity and the Council's Out of Hours Serviced (EDT) then picked up the ongoing work throughout the Christmas period up to 27 December 23.

6.3 Adult Learning Disability and Autism Update:

Making a Difference - Beginning in October 2023, The Autism Team began working with the "3 Conversations" model of practice and service delivery. This dynamic approach has enabled the team to effectively manage its staffing resources whilst meeting the immediate needs of people referred to the team. Thus far, the approach has already reduced the traditional commissioning of longer term services. People have received the support they need, when they need it and in many different ways. It has proven to be a flexible, strength-based and relationship based approach which has moved more of the focus from what people 'cannot do' and need services to support with, to what they can

achieve themselves, building on their own strengths and assets.

The example below illustrates the positive impact the new focus in approach is having on the people we support.

X is a person who was diagnosed as being autistic later in their life. Prior to this they had experienced lots of difficulty in their life, including a high level of vulnerability, mental health challenges, difficulties around alcohol and substances and a forensic history including a conviction of a sexual offence.

Following a diagnosis X has been supported by the autism team for a numbers of years. Throughout this time they have experienced difficulty in having an acceptable standard of accommodation and has been very vulnerable to exploitation from other people who have sought to financially and materially abuse them as well as using their property against their wishes. They have struggled to establish and maintain positive personal relationships and they have been victim of domestic abuse.

Throughout this period, X has received support from many members of the autism team, and approximately 12 months ago a decision was made that they should remain allocated to a social worker and support worker on the team on a long-term basis.

In recent months and over the festive period, X has been subject to renewed abuse and exploitation in the community. They have been targeted on a consistent basis by a local group who are well known to the criminal justice system, who took their money, encouraged them to fraudulently borrow money from their bank and began living in and using their property.

Due to the positive relationship with their social worker and support worker, X was able to disclose what was happening to them and seek support. They had two short term emergency stays in one of the Council's Respite Services, and from this experience was encouraged to accept a higher level of support in the community.

X has now moved into a sheltered housing scheme provided by one of our mental health providers, where they will receive background support and some additional 1:1 hours to ensure they remain safe and are able to build positive relationships in order to hopefully prevent a recurrence of these issues.

6.4 Care and Support (All Age Provider Update):

The Council's internal provider services have supported winter resilience planning across the health and care system. In particular working with social care colleagues across the department to provide robust contingency arrangements anticipating increased demand for an urgent response. Highlighted below are some examples of the

advance arrangements in place and how these have been utilised, supported families and/or supported the overall health and social care response for the system.

Vitaline – The Council’s 24hr technology enabled care service is operational 365 days a year. When compared with previous years, the service experienced increased demand at particular points throughout the festive period.

For the period between 23 December 2023 – 1 January 2024 the Vitaline Service responded as per below:

Response	Impact
6,714 alerts from equipment in people’s homes all needing a response (telephone or physical)	<ul style="list-style-type: none"> • Peace of mind for person and families • Prevent more serious harm or deterioration
4,049 telephoned calls coming into and answered by Vitaline (Council 24hr telephone line)	<ul style="list-style-type: none"> • Responded to queries from Blackpool residents • Signposted or arranged follow up services
1,274 Welfare Calls, Visits and Medication Prompts	<ul style="list-style-type: none"> • Ensured the person was safe • Prevented deterioration of health and wellbeing • Ensure medication taken at right time
Falls Pick Ups (in own home) – Total of 54 requests of which 48 people were successfully lifted and remained at home.	<ul style="list-style-type: none"> • No ambulance required • No potential conveyance to hospital and/or admission • People remain at home • People received a response in less than 40 minutes in each case
NWS Ambulance Diverts for Falls Pick Up – 3 falls successfully lifted on behalf of NWS	<ul style="list-style-type: none"> • Ambulance stood down and did not need to respond • People received a response in less than 40 minutes in each case (may have been several hours for ambulance)
Installed 34 Telecare Units for people living in their own home	<ul style="list-style-type: none"> • At the point of installation, person receives falls pick up and physical welfare service • Early intervention to prevent deterioration and help manage risk and concerns within the home

<p>28 referrals received with a planned installation date due to additional equipment required</p>	<ul style="list-style-type: none"> • Anticipatory care response to help manage risks and concerns • Falls pick up and welfare available
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Care at Home and Reablement Service – The Council’s internal homecare service is operational 365 days per year and available 24hrs. At Christmas it is not unusual for care to be disrupted as people like to spend time with their families and they cancel care visits. This provides the service with some additional ad hoc capacity at key points during the festive period. As a result the service is able to deploy staff to people for longer visits at key times during the day, in particular for those people who may not have family or friends visiting. The carers may be the only people they see over Christmas, so the service does what it can to make it special for those people.

For the period between 24 December 2023– 1 January 2024 the Homecare Service provided URGENT responses as per below (in addition to providing 1,400hrs of planned care):

Response	Impact
<p>5 requests from Rapid Response equating to 80hrs of care</p>	<ul style="list-style-type: none"> • Directly prevented a hospital admission • Person remained at home
<p>5 D2A (Discharge to Assess) requests from the Hospital equating to 59hrs of care</p>	<ul style="list-style-type: none"> • People discharged from hospital at the right time • Supported flow and bed capacity at the hospital • People returned home with care and support
<p>2 requests for Home’s Best support equating to 31hrs of care</p>	<ul style="list-style-type: none"> • People remained at home • Short term support with no ongoing need
<p>40hrs of staff deployed to other services to support provision</p>	<ul style="list-style-type: none"> • Stabilised provision • Maintained safe levels of care

ARC Bed Based Intermediate Care Service – This service is delivered jointly between the Council and Blackpool Teaching Hospitals as an integrated model of care. Advance planning occurred in the week leading up to Christmas. In part due to the anticipated surge of requests for beds prior to the industrial action across health but as part of the normal planning for Christmas as people want to be at home with their families and loved ones at this time of the year.

For the period between 20 December 2023 – 2 January 2024 The ARC responses as per below:

Response	Impact
17 admissions to ARC from Hospital	<ul style="list-style-type: none"> • Ensured people were not in hospital longer than they needed to be • Supported flow and capacity at the hospital
7 Community Step Up admissions (Emergencies via Rapid and Community Social Care)	<ul style="list-style-type: none"> • Directly prevented admission to Hospital • Potential rehabilitation then home
5 Step Up to Clinical bed at ARC (deteriorating health)	<ul style="list-style-type: none"> • Directly prevented admission to hospital • Supported capacity in hospital
3 people admitted to Hospital from ARC due to ill health	<ul style="list-style-type: none"> • Only people needing hospital treatment admitted

Supporting Recruitment and Retention – The Council and the Health and Social Care Career Academy jointly facilitate a Recruitment and Retention Sub Group which is made up of different social care providers across the Blackpool Place.

The regular meetings provide an opportunity to explore the training opportunities available via the Blackpool and Fylde College, including the programmes that are specifically tailored to social care and supporting people to enter the field with very little experience.

Providers across Blackpool have experienced significant challenges around recruitment and retention over recent years. To assist providers the Council has made available to them the Council's I-Pool (e-learning) system so that their staff can receive training in a number of different areas. This has helped providers meet a training and development need that can be difficult to meet due to limited finance resources for training.

A further request from Providers to the Council was around the health and wellbeing of the broader social care workforce in Blackpool and if the whole social care workforce could be considered the same as Council employees in regards to Sport and Leisure Concessionary Memberships. Leisure Services have supported this initiative and the Active Blackpool Corporate membership will be made available to the wider social care workforce from January 2024 and at the same cost as it is for Council employees and associated partners of the Council, which is £19.99 per month or £39.99 for a joint membership.

This is a really positive step towards improving the health and wellbeing of our population but also the workforce that is supporting some of our most vulnerable residents in the Town. We need to continue to support a healthy workforce and this new initiative will ensure affordable membership of Blackpool's leisure facilities.

6.5 Adult Finance Update:

At Month 7 the Adults Department is reporting a forecast £2.4m overspend.

Both Adult Social Care and Care and Support are reporting operational underspends (£141k combined) due to a significant number of vacant posts within these divisions.

The Commissioning Budget is forecasting a £2.56m overspend due to pressures across various areas of the service, primarily Short Term Care, Supported Living, Residential and Nursing placements, Homecare, Daycare and Direct Payments. A proportion of these pressures have been offset through additional client income and the Market Sustainability and Improvement Fund which is being used to offset the residential/nursing top-ups and Out of Area fee rates.

There is also a savings shortfalls of £1.01m from the proposal in which the Integrated Care Board (ICB) were expected to provide additional income of £1.6m into the Better Care Fund (BCF).

6.6 Does the information submitted include any exempt information? No

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 and the impact of this decision for our children and young people

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