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**TRAFFORD
COUNCIL**

AGENDA PAPERS FOR HEALTH SCRUTINY COMMITTEE

Date: Thursday, 25 July 2024

Time: 6.30 pm

**Place: Committee Room 2 and 3, Trafford Town Hall, Talbot Road, Stretford, M32
0TH**

| A G E N D A | PART I | Pages |
|--------------------|---|---------------|
| 1. | ATTENDANCES | |
| | To note attendances, including Officers, and any apologies for absence. | |
| 2. | DECLARATIONS OF INTEREST | |
| | Members to give notice of any interest and the nature of that interest relating to any item on the agenda in accordance with the adopted Code of Conduct. | |
| 3. | QUESTIONS FROM MEMBERS OF THE PUBLIC | |
| | A maximum of 15 minutes will be allocated to public questions submitted in writing to Democratic Services (democratic.services@trafford.gov.uk) by p.m. on the working day prior to the meeting. Questions must be within the remit of the Committee of be relevant to items appearing on the agenda and will be submitted in the order in which they were received. | |
| 4. | MINUTES | 1 – 4 |
| | To receive and, if so determined, to agree as a correct record the Minutes of the meeting held on 6 th March 2024. | |
| 5. | ACCESS TO GP'S - PRACTICE MANAGEMENT | Verbal Report |
| | To receive a report from the Practice Manager. | |

Health Scrutiny Committee - Thursday, 25 July 2024

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|-----|---|------------------|
| 6. | ADULT SOCIAL CARE BUDGET & DIGITISATION | 5 - 20 |
| | To receive a report from the Corporate Director Adults and Wellbeing. | |
| 7. | CQC INSPECTION UPDATE | 21 – 48 |
| | To receive a report from the Corporate Director Adults and Wellbeing. | |
| 8. | DENTAL UPDATE | To Follow |
| | To receive a report from the Head of Primary Care Operations. | |
| 9. | TASK AND FINISH GROUP | Verbal Report |
| | Members to select nominees for the Task and Finish Group for the new municipal year 2024/25. | |
| 10. | HEALTH SCRUTINY COMMITTEE - WORK PROGRAMME 2024/25 | 49 – 54 |
| | To consider a report from the Chair for the new municipal year 2024/25. | |
| 11. | URGENT BUSINESS (IF ANY) | |
| | Any other item or items (not likely to disclose "exempt information") which, by reason of special circumstances (to be specified), the Chairman of the meeting is of the opinion should be considered at this meeting as a matter of urgency. | |

SARA TODD
Chief Executive

Membership of the Committee

Councillors D. Butt (Chair), S. Taylor (Vice-Chair), G. Devlin, S.J. Gilbert, B. Hartley, W. Hassan, W. Jones, J. Leicester, S.E. Lepori, J. Lloyd, F. Hornby (ex-Officio) and D. Western (ex-Officio).

Further Information

For help, advice and information about this meeting please contact:

Stephanie Ferraioli, Democratic Officer
Email: stephanie.ferraioli@trafford.gov.uk

This agenda was issued on **Wednesday, 17 July 2024** by the Legal and Democratic Services Section, Trafford Council, Trafford Town Hall; Talbot Road, Stretford, Manchester, M32 0TH

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HEALTH SCRUTINY COMMITTEE

6 MARCH 2024

PRESENT

Councillors: D Butt (Chair), S. Taylor (Vice Chair), J. Axford, K. Chakraborty, S. Gilbert, B. Hartley, J. Leicester, S. Lepori, S. Maitland.

In attendance

| | |
|---------------------|---|
| Elizabeth Calder | Director of Performance & Strategic Development, GMMH |
| Gemma Clarke | Associate Director of Nursing and Quality, GMMH |
| John Walker | Associate Director of Operations, GMMH |
| Dr Neeti Singh | Consultant Psychiatrist, GMMH |
| Fleur Blakeman | Director of Improvement, GMMH |
| Richard Spearing | Trafford Integrated Network Director |
| Gareth James | Deputy Place Lead, Trafford Health and Care Integration |
| Stephanie Ferraioli | Democratic Officer |

1 ATTENDANCES

An apology for absence was received from Councillors Lloyd, O'Brien and Western and Mrs Fairfield.

2. DECLARATION OF INTEREST

RESOLVED – That a disclosure be recorded given attendees' employment with the NHS.

3. QUESTIONS FROM MEMBERS OF THE PUBLIC

No questions were received from members of the public.

4. MINUTES

Correction to the attendance of the meeting held on 30th January 2024 when it was erroneously stated that Councillor Hartley and Slater were not in attendance when in fact they were.

RESOLVED – That the minutes of the meeting held on 30 January 2024 be noted as a true and correct record.

5 GMMH - UPDATE

The Director of Performance and Strategic Development for Greater Manchester Mental Health Trust thanked Members for the opportunity to update the Committee on the progress made by the Trust and spoke about some of the challenges relating to recruitment and information sharing across agencies as well as the historical low level funding, that remain a barrier.

She informed of the recent review of the service commissioned by NHS England which has now concluded and proven satisfactory and that also the Quality Care Commission continues to conduct regular inspections of the service, particularly looking at patients' safety.

Members expressed an interest in visiting the service.

RESOLVED:

- 1) That arrangements be made for Members to visit.
- 2) That the report be noted.

6. NEIGHBOURHOOD PROGRAMME UPDATE

The Integrated Network Director informed the Committee on the progress of the joint efforts made by Trafford Council, the NHS and community services and more recently local businesses too in the work relating to the neighbourhood programme.

Members were informed that one of the aims of the project is to have a leisure centre in each area of the borough. Some of the work has been ongoing already for a year, with consultations taking place with local people, asking them about their priorities based on population data via the Public Health team; and mental health is at the centre of everyone's experiences.

Progress meetings are held regularly each month with 40-60 services which some Councillor already attend. He extended the invite to all Members who are encouraged to go along to find out more about specific projects within the neighbourhood programme.

Members requested evidence of the actual impact of the programme on local people.

RESOLVED:

- 1) That real life stories be evidenced in the next update.
- 2) That the update be noted.

7. ICS UPDATE – TRAFFORD DRAFT LOCALITY DELIVERY PORTFOLIO 24/25

The Deputy Place Lead illustrated for the Committee the priorities for the next financial year 2024/25. He confirmed that the revised plan stretches over four years to 2026 and that a single Health and Wellbeing strategy plan will be factored in. However, not all items in the plan will be addressed in one go as the team will focus on the absolute must do and on some possible others mostly due to financial constraints.

It was noted that the report contained too many acronyms and that a clearer version will be required going forward to make it easier for everyone reading the report to understand what is actually being referred to.

RESOLVED:

- 1) That the next report contains fewer acronyms.
- 2) That the update be noted.

8. TASK AND FINISH

The Committee was presented with the report describing the work of the Task and Finish Group throughout the municipal year revolving around Social Prescribing.

Members recommended continuing on this project and that it should be publicised further perhaps via local news outlets and the Council's own social media channels in order to highlight further the cause and make people aware.

RESOLVED - That the report be noted.

9. AoB

Members expressed an interest in exploring dental waiting lists and the level of care provided in the next municipal year.

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TRAFFORD COUNCIL

Report to: Health Scrutiny Committee
Date: 25 July 2024
Report for: Information
Report of: Nathan Atkinson, Corporate Director, Adults & Wellbeing

Adult Social Care Finance and Digital Development

This report outlines the current position regarding Adult Social Care finance within Trafford for financial year 2024/5. This provides a breakdown of existing expenditure, links to the Better Care Fund, savings proposals, and budget movement since 2023/4. The second element of the report focuses on digital transformation in terms of future planned developments to the Liquid Logic Adult Social Care case management system.

Summary

This report should be read in conjunction with the accompanying PowerPoint presentation which provides the detail in terms of Adult Social Care Finance and Digital transformation.

Recommendation(s)

Health Scrutiny are asked to note the content of this report and progress to date.

Contact person for access to background papers and further information:

Name: Nathan Atkinson, Corporate Director, Adults & Wellbeing

Adult Social Care, Trafford Council, 1st Floor, Trafford Town Hall, Talbot Road, Stretford, M32 0TH

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TRAFFORD
COUNCIL

Adult Social Care Finance and Digital Development

Report to Health Scrutiny 25 July 2024

Nathan Atkinson

Corporate Director Adults and Wellbeing

Financial Overview

Page 8



2024/5 budget and movement from 2023/4

2024/25 Adult Social Care budget

Table 1

| Service Area | 2024/25 Budget £'000 |
|-------------------------------------|-------------------------|
| ICB FUNDING, GRANTS AND CONTINGENCY | (40,859) |
| CLIENT COSTS | 81,751 |
| SOCIAL SUPPORT | 309 |
| ASSISTIVE EQUIPMENT & TECHNOLOGY | 1,125 |
| SOCIAL CARE STAFFING | 15,407 |
| INFORMATION AND EARLY INTERVENTION | 341 |
| COMMISSIONING | 1,268 |
| NET ADULTS TOTAL BUDGET | 59,342 |

- Table 1 provides details of the breakdown of the net Adult Social Care budget.

Table 2

| Gross Clients Budget | 2024/25 Budget £'000 |
|----------------------------------|-------------------------|
| SUPPORTED LIVING | 20,594 |
| DIRECT PAYMENTS | 9,915 |
| RESIDENTIAL CARE | 28,572 |
| NURSEING CARE | 16,354 |
| HOMECARE | 23,175 |
| DAYCARE | 1,100 |
| RESIDENTIAL RESPITE | 1,159 |
| OTHER AGENCY CONTRIBUTIONS | 15 |
| EXT REABLEMENT | 560 |
| GROSS CLIENT BUDGET TOTAL | 101,442 |

- Table 2 is a breakdown of the 2024/25 Gross Clients budget. This is exclusive of income from client contributions etc.

Adult Social Care budget movements between 2023/24 and 2024/25

- The adjacent table shows a high-level summary of the budget movements between 23/24 and 24/25.
- The net movement in the budget was a £1m budget reduction.
- To help the Council achieve a balanced budget ASC has been required to contribute c. £2m in budget savings and efficiencies.
- Despite the significant budget challenges the Council has maintained its commitment to the External care market with £5.8m invested in Care provider fee uplifts.

| Category | £m |
|---|------------|
| (Increase)/decreases in grant funding | (8) |
| Savings and efficiencies | (2) |
| Inflation | 0.2 |
| Employee related costs | 0.4 |
| Other Pressures/Movements | 1.0 |
| Adults Client Demography | 1.2 |
| Investment in Care Provider Fee uplifts | 5.8 |
| Net Budget Movement | (1) |

Adult Social Care 2023/24 Financial position

| | 2023/24 Budget £'000 | Expenditure as at 31/03/24 £'000 | Variance £'000 |
|-------------------|----------------------------|---|-------------------|
| Adult Social Care | 60,439 | 59,124 | (2,130) |

- The Adult Social care budget reported an underspend of **£2.130m** at the end of the financial year.
- **£389k** favourable variance on Adults Clients budgets.
- **£1.125m** favourable variance due to the additional Market Sustainability and Improvement Fund announced on the 28 July 2023.
- **£616k** favourable variance on staffing and running costs broken down as follows;-
- **£269k** favourable variance on Assistive Technology and equipment.
- **£481k** favourable variance on staffing costs and minor variations.
- **£134k** adverse variance in the DoLS service, this is an area of increasing concern due to continual growth in demand for Best Interest Assessments.

It is important to note that the 2023/24 position benefited from several streams of temporary funding including £130k of funding from Homes for Ukraine, £458k contribution from reserves and £59k from the Urgent and Emergency care fund.

2024/25 Planned Expenditure from Better Care Fund (BCF)

- The total value of the Pooled Better Care Fund amounts to **£35.840m** for 24/25.
- The resources are split out as follows.

Headlines

- **£2.7m** Investment in Disabled Facilities Grant schemes.
- **£3.8m** Investment in Hospital Discharge activity.
- **£3.5m** on the provision of Intermediate Care.
- **£1.9m** on Early Supportive Discharge Schemes.
- **£11m** on Social Care packages.
- **£3.7m** on Community Nursing.
- **£1.5m** on Palliative Care.
- **£1.2m** Ageing Well.
- **£1m** on the One Stop Resource Centre equipment service.

| Funding Sources | Income | Expenditure |
|-----------------------------------|--------------------|--------------------|
| DFG | £2,694,131 | £2,694,131 |
| Minimum NHS Contribution | £20,494,280 | £20,494,280 |
| iBCF | £8,224,415 | £8,224,415 |
| Additional LA Contribution | £0 | £0 |
| Additional ICB Contribution | £587,556 | £587,556 |
| Local Authority Discharge Funding | £1,921,750 | £1,921,750 |
| ICB Discharge Funding | £1,918,000 | £1,918,000 |
| Total | £35,840,132 | £35,840,132 |

Existing 2024/25 Adult Social Care Savings Programmes

| Savings Project Title | Value | Progress Narrative |
|---|-------|--|
| ASC Bad Debt Provision Review | £50k | The achievement of this saving is dependent upon the level of ASC debt at the end of the financial year. In year reviews will take place to assess the likelihood of achieving the saving. The achievement of this saving is contingent on achieving a minimum of breakeven outturn position on the Adults client's budget. |
| Living Your Best Life – Learning Disability | £300k | Some savings have been achieved to date. However, there is a dependence on the Community Learning Disability team to carry out assessments of client needs to facilitate step downs. There is limited capacity within the team, so activity needs to be targeted. In-house provider services are revising the timelines for implementation of changes to two schemes. Commissioning colleagues appraising future options for new supported living schemes and opportunities for conversions. |
| TEC Enabled Care | £250k | This project has seen delays in implementation but has now commenced. Early days so challenging to pinpoint evidence of TEC leading to savings. |
| Reablement Review | £600k | Data shows that there has been an improvement in performance in this area however this needs to remain constant throughout the financial year to achieve the outcomes required to reach the savings target. |
| Carer Resilience | £336k | This is a new project which requires management action throughout the financial year. |

2024/25 P2 Forecast Outturn

| Budget Category | Projected Outturn Variation £000 |
|----------------------------------|-------------------------------------|
| Adults Clients Budget | 470 |
| Staffing & Running Costs | 291 |
| Total Projected Variation | 761 |

The forecast outturn variation at P2 is an overspend of £761k.

- £470k is attributable to the Adults Client budget.
- There is £1.1m contingency included within the forecast to mitigate increasing costs throughout the remainder of the financial year.
- Savings target included in the budget for 2024/25 of c. £1.7m. This is a significant challenge to the service and risk to the financial position. Close monitoring will be applied throughout the financial year.

Page 14

- £291k is attributable to staffing and running costs.
- £147k relates to the DoLS service as demand continues to rise. The absence of new legislation is a cause for concern as without it the financial pressure will continue to rise.
- £79k due to additional costs in the One Stop Resource Centre relating to PAT testing and £65k due to minor variations.

Liquid Logic (LAS) – Adult Social Care Case Management System

Developments to the Adult Social Care Case Management system

Page 15



Liquid Logic - LAS

- Liquid Logic is the Adults Social Care case management solution used by social workers.
- It is an end to end system covering contacts, referrals, assessments, the setting of personal budgets, reablement plans, the planning of care and support, and commissioning of services for funded adults and self-funders, safeguarding s.42 enquiries, organisational safeguarding, DoLS, provider management, financial management and financial assessment.
- It integrates with the ContrOCC finance module and to the GM Shared Care Record
- There are over 300 LAS Users
- There are also linked client and delegation portals which integrate into the system. These are used for safeguarding contacts and self-assessments
- Annual Budget for LAS is £118K

New Developments in LAS

- The Directorate is looking to enhance our tools aligned to adult social care workflow, focusing on identifying and encouraging the use of strengths and community assets to maximise independence.
- The specialist tools (Imosphere) will provide Adult Social Care Service with two-part self-assessment form, suite of integrated forms aligned to adult social care workflow and the most accurate and locally configurable Resource Allocation System (RAS) known as Formulate.
- Formulate supports providing Adult Social Care clients an accurate, equity and sustainability Personal Budget allocation as part of a strengths-based approach.
- Some local authorities have found that by implementing the self-assessment tools has led to a 20-30% reduction in initial contact requests leading to a full s.9 Care Act assessment. Further, 20% of all completed self-assessments resulted in no further action. If the local authority completes an average of 2800 assessments in a year, and it takes 7 hours to complete each assessment, this would be a saving of 3,920 hours.

Other Key Developments

- **Resource Allocation System (RAS)** - Currently not fit for purpose- last updated in 2016 and not being used in the system
- **Delegation Portal – Individual Placement Agreement, Telecare, Online Financial Assessments**
- **Safeguarding system changes**
- **DoLs enhancements**
- **Assessment and referral changes**
- **Direct Payment Workspace**
- **Retention - Currently switched on in UAT with 27.5K records requiring cleansing**

Customer Defined Workflows CDW+

CDW+ functionality enables the Council to build our own workflows within the LAS application, thus reducing the number of bespoke systems/processes that were being managed 'off system'.

The CDW functionality has enabled other local authorities to consolidate their IT estate within adult social care, and, more importantly, promote information sharing and visibility of data to support a more cohesive approach within the Council.

Page 19

Possible use cases:

- Sensory Assessments
- Welfare Rights services case work
- People in a Position of Trust (PIPOT) safeguarding processes
- Direct Payments
- Community Link Workers case work

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TRAFFORD COUNCIL

Report to: Health Scrutiny Committee
Date: 25 July 2024
Report for: Information
Report of: Nathan Atkinson, Corporate Director, Adults & Wellbeing

Preparing for CQC Assessment in Trafford

Local authorities are now subject to mandatory inspections of their Adult Social Care functions by the Care Quality Commission (CQC) under the Health and Care Act 2022. It is imperative that the Council is prepared for inspection and has plans in place to meet the requirements of the national CQC Assurance framework. Since February 2024 CQC have commenced 44 mandatory inspections and have published reports from three local authorities in the south of England all of whom have achieved a 'Good' rating. There is an expectation that all local authorities with adult social functions will be inspected by March 2025.

Summary

This report should be read in conjunction with the accompanying PowerPoint presentation.

The report briefly outlines the CQC Assurance process, learning from other local authorities and how the Council responded to the LGA Peer Challenge against the CQC Assurance framework in September 2023 by launching the *Improving Lives Every Day* Programme. This Programme of work will enable the Council to be prepared for any future inspection and most critically deliver better outcome for our residents requiring care and support from Adult Social Care.

Recommendation(s)

Health Scrutiny are asked to note the content of this report and progress to date.

Contact person for access to background papers and further information:

Name: Nathan Atkinson, Corporate Director, Adults & Wellbeing

Adult Social Care, Trafford Council, 1st Floor, Trafford Town Hall, Talbot Road, Stretford, M32 0TH

Tel: 0161 912 2705

Email: nathan.atkinson@trafford.gov.uk

1.0 The CQC Assurance Process

1.1 The Care Quality Commission (CQC) have a responsibility to independently assess how local authorities are delivering their Care Act functions under the Health and Care Act 2022.

1.2 The CQC assessment approach has been designed in partnership with a range of stakeholders and people who use health and adult social care services.

1.3 CQC use a single assessment framework to assess local authorities, using a subset of 9 quality statements focused across four themes:

| Care Quality Commission Assurance themes | |
|--|--|
| <p>Theme 1: Working with people.</p> <p>This theme covers:</p> <ul style="list-style-type: none"> • Assessing needs • Planning and reviewing care • Arrangements for direct payments and charging • Supporting people to live healthier lives • Prevention • Wellbeing • Information and advice • Understanding and removing inequalities in care and support • People's experiences and outcomes from care. | <p>Theme 2: Providing support.</p> <p>This theme covers:</p> <ul style="list-style-type: none"> • Market shaping • Commissioning • Workforce capacity and capability • Integration • Partnership working. |
| <p>Theme 3: How the local authority ensures safety within the system.</p> <p>This theme covers:</p> <ul style="list-style-type: none"> • Section 42 safeguarding enquiries • Reviews • Safe systems • Continuity of care. | <p>Theme 4: Leadership</p> <p>This theme covers:</p> <ul style="list-style-type: none"> • Strategic planning • Learning • Improvement • Innovation • Governance • Management • Sustainability. |

1.4 Local authorities will receive a CQC rating consistent with previous approaches to health and care services:

- Outstanding
- Good
- Requires Improvement
- Inadequate

2.0 CQC Assurance Framework Learning thus far

2.1 The CQC has commenced the inspection of 44 local authorities as of the end of June 2024. To date no local authorities in Greater Manchester have been contacted by CQC to inform as to impending inspection, though Wirral, Warrington, Sefton and St Helens have been within the North West region. Thus far, 11 site visits have been conducted and three inspection reports have been published. All three of the published reports for Hertfordshire, Hounslow and West Berkshire Councils have received a 'Good' rating.

2.2 The ask of CQC from notification of the intention to inspect is that within three weeks local authorities provide them through a secure portal:

a) A self-assessment document outlining key strengths, with evidence and plans to address risks and challenges. There is no prescribed format currently, though CQC are deliberating as to the introduction of a template in the future. The LGA have helpfully developed a template to guide local authorities and this format has been adopted by most, including in Trafford.

b) Identification of 50 live cases with assessments having been conducted within the last 12 months. The expectation is that the individuals identified have provided consent to be contacted by CQC as part of the inspection. CQC will then dip sample a proportion of these cases.

c) Mandatory Information Return (IR) – CQC have identified 38 key documents including strategies as well as policies and procedures that they expect all local authorities to have in place and be able to evidence prior to any on-site inspection.

2.3 Following receipt of the information above CQC will inform as to the date of the site visit, which will usually last 3-days. There has been some delay in this for some local authorities who have waited longer than the 6-8 weeks originally envisaged by CQC.

2.4 The intention is that CQC will have concluded inspection of all local authorities with adult social functions by March 2025.

2.5 The emerging themes from the concluded inspections are that local authorities have further work to improve in the following areas:

- Waiting Lists / times for assessments
- Transitions – Preparing for Adulthood
- Hospital Discharge processes
- Support for Unpaid Carers

- Co-production and engagement with people with lived experience in shaping service delivery
- Safeguarding including s.42 enquiries, Making Safeguarding Personal, effectiveness of Safeguarding Adults Boards, Learning from Safeguarding Adults Reviews (SARS) and Deprivation of Liberty Safeguards (DoLS)

3.0 Recap of Key Messages from the LGA Feedback

3.1 The LGA Peer Challenge was concluded at the end of September 2023, with initial feedback provided at the end of the process and the final report was received in December 2023. The LGA Peer Challenge team's key messages to the Council were:

3.2 Developing the Neighbourhood Model

3.2.1 The Council has a strong focus on integrated work with health and health outcomes, particularly around hospital discharge and admission avoidance. The development of a Neighbourhood model should offer opportunities to co-produce with communities and develop a broader Adult Social Care focus in integrated teams, supporting people to live the life they want and fully embedding an early intervention and prevention approach.

3.3 Getting it right at the Front Door

3.3.1 The Council has a range of preventive and early intervention offers, but access relies heavily on social workers to undertake the initial conversations, which may not be the best use of resources and skills. More could be done to develop information advice and guidance, make access easier through a variety of channels, and provide self-serve options.

3.4 Safeguarding

3.4.1 There is work to do to ensure that the Council consistently applies thresholds for concerns and that safeguarding enquiries are working well. The Council should consider the right balance in skills and resources across all adult teams to ensure concerns and enquiries can be responded to in a timely and person-centred way.

3.5 Strategic direction and commissioning strategies

3.5.1 The golden thread from corporate strategy and vision needs to be developed to support a simple clear vision for Adult Social Care, which can shape plans and strategies. These need to be supported by SMART plans for delivery and improvement for the next 3-5 years.

3.6 Mental Health

3.6.1 There is a need to increase assurance regarding mental health services provided under the existing s.75 agreement with Greater Manchester Mental Health NHS Foundation Trust (GMMH).

4.0 Immediate Response to the LGA Peer Challenge Feedback

- 4.1 Following conclusion of the LGA Peer Challenge at the end of September, activity immediately commenced to address some of key findings from the feedback provided at the end of the session and from the final report received in December 2023.
- 4.2 The Council had an existing, self-managed, programme of improvement for Adult Social Care based on the concept of *Improving Lives Every Day*. This approach was launched to improve outcomes for people supported by Adult Social Care and to promote strength-based working, with a focus on prevention and early intervention. The Programme was revisited and expanded to specifically address the findings of the Peer Challenge, prepare Adult Social Care for inspection and to incorporate approaches to transformational savings. Priority areas of improvement have been identified in detailed programme plan.
- 4.3 An *Improving Lives Every Day* Development Board was established in February 2024. This meets monthly, with established governance and an independent chair, Maggie Kufeldt, who was appointed in May 2024 to oversee delivery of the plan and to track progress against areas requiring improvement. Key partners from health and the VCFSE, along with the Council Leader and Executive Member for Healthy and Independent Lives sit on the Board to provide a joined-up approach and to ensure transparency.
- 4.4 A working group for performance data has been established and three temporary business analysts employed, using external grant funding, to support the development of 15 Power-Bi dashboards to ensure better use of data to inform decision making.
- 4.5 There has been a significant overhaul of the safeguarding adults strategic arrangements within the Trafford Strategic Safeguarding Partnership (TSSP) with marked improvements in governance and delivery of Safeguarding Adult Reviews, the annual report and priority setting.
- 4.6 Support from the LGA consultancy for adult social care through Partners in Care and Health was secured to provide independent support for commissioning and safeguarding activity. This was at no additional cost to the Council. This activity has now concluded, and a Commissioning Strategy and two Market Position Statements have been produced and published on the Council website. Further, the review into operational safeguarding concluded earlier in July with report recommendations to follow, including appraisal of the improvements made in performance data reporting.
- 4.7 A review of the Principal Social Worker and supporting functions has commenced reflecting the importance of the role in the CQC Assurance process.
- 4.8 Partners in Care and Health conducting briefing sessions to support staff preparation for inspection, applying learning from the pilot sites in January

2024. The Feedback from these sessions informed an intensive period of frontline staff engagement led by the DASS which concluded in June. Over 100 staff were involved in face-to-face sessions to help inform the *Improving Lives Every Day* Programme content and for them to form part of the project working groups.

5.0 Progress against commitments made to Health Scrutiny in January 2024

5.1 Programme Management support providing extra capacity and dedicated focus on *Improving Lives Every Day* has been secured with a Band 11 Programme Manager, Band 9 Project Manager recruited and a further Band 9 Project Manager post to be filled and out to recruitment. This has enabled production of:

- a full Programme Plan with phased activity over 10 workstreams with a milestone plan.
- Terms of Reference for the *Improving Lives Every Day* Development Board and for the 10 working groups that feed the Board.
- a Governance flow chart
- templates for flash reports, detailed business reports and presentations for the Board have been in operation since the May Board.
- a risk register linked to the Programme Plan is in operation.

5.2 As indicated above, a Monthly Development Board chaired by an independent person has met since February 2024. The July Board has been updated on progress against the refresh of the CQC Assurance Framework Self-assessment, IR evidence base and 50 cases. The intention is that this information will be refreshed on a quarterly cycle to enable the Council to be as inspection ready as possible.

5.3 The *Improving Lives Every Day* Programme plan has a dedicated workstream for improvement to mental health provision. This aligns the activity with GMMH Trafford's improvement plan and the work led by Greater Manchester ADASS to ensure social work elements are incorporated.

5.4 As indicated above, face to face engagement with frontline Adult Social Care staff has taken place as planned with a commitment from the DASS to running 3 sessions every quarter with a 'You said, we did' approach.

5.5 A detailed communications strategy for engagement with all stakeholders is under production with the aim to conclude this by the end of July. This has two elements, firstly to cover the *Improving Lives Every Day* Programme ambitions and secondly to specifically focus on the CQC inspection process and the steps required to deliver an effective response.

5.6 The Adults & Wellbeing vision statement has been agreed with Directorate staff through an engagement process of face-to-face discussions and digital voting. The vision for Adult Social Care in Trafford is to be "*Improving Lives Every Day, supporting people to be Independent, Safe and Well.*"

- 5.7 Activity has commenced on the development of the Adults & Wellbeing Directorate Strategy, with aligned Target Operating Model (TOM) and Outcomes Framework. This work is due to be concluded by October 2024. The strategy will align to the new Council Corporate Plan's Healthy and Independent Lives ambitions and will drive the *Improving Lives Every Day* Programme. The focus must be on improving the outcomes of Trafford residents requiring care and support through more effective service delivery, not solely on passing inspection. If the Council gets the offer right and has the platform in place to support the inspection process, then the outcome should reflect this.

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Preparing for CQC Assessment in Trafford

Nathan Atkinson, Corporate Director Adults and Wellbeing
Health Scrutiny Committee
25 July 2024

Overview of CQC Assessment Framework

- The Care Quality Commission (CQC) have a new responsibility to independently assess how local authorities are delivering their Care Act functions
- CQC assessment approach has been designed in partnership with a range of stakeholders and people who use health and social care services
- CQC use a single assessment framework to assess local authorities, using a subset of 9 quality statements focused across four themes:
 - Working with people
 - Providing support
 - Ensuring safety
 - Leadership

CQC Assessment Framework: Four Themes

Working with People: assessing needs, care planning and review, direct payments, charging, supporting people to live healthier lives, prevention, wellbeing, information and advice

Providing Support: shaping, commissioning, workforce capacity and capability, integration and partnership working

Assessing Needs

Supporting people to live healthier lives

Equity in experiences and outcomes

Care provision, integration and continuity

Partnerships and communities

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

We support people to manage their health and wellbeing so they can maximise their independence, choice and control. We support them to live healthier lives, and where possible reduce their future needs for care and support.

We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement

Ensuring Safety: safeguarding enquiries, reviews, Safeguarding Adults Board, safe systems, pathways and continuity of care

Leadership: culture, strategic planning, learning, improvement, innovation, governance, management and sustainability

Safe systems, pathways and transitions

Safeguarding

Governance, management and sustainability

Learning, improvement and innovation

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

We work with people to understand what being safe means to them as well as our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.

We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research

Single CQC Assurance Framework

- Integration & Innovation Policy Paper, February 2021: introduction of a new assurance framework for ASC & ICS, confirmed in Health & Care Act 2022
- CQC acquire a new duty to independently review and assess how Local Authorities are delivering their Care Act Part 1 duties
- Focus on legislative framework; meeting statutory responsibilities as per the Care Act 2014
- Single assessment framework, with ratings
- All Local Authorities to be assessed in an initial formal assessment period of 24 months
- 5 pilots run over summer 2023
- On-site work commenced in February 2024
- Ongoing assessment throughout year, themes reported in State of Care report

Page 32

Our framework will assess providers, local authorities and integrated care systems with a consistent set of key themes, from registration through to ongoing assessment

Aligned with "I" statements, based on what people expect and need, to bring these questions to life and as a basis for gathering structured feedback

Expressed as "We" statements; the standards against which we hold providers, LAs and ICSs to account

People's experience, feedback from staff and leaders, feedback from partners, observation, processes, outcomes

Data and information specific to the scope of assessment, delivery model or population group

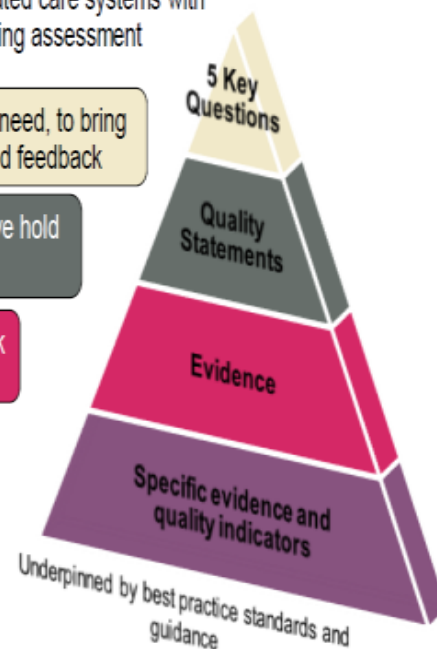


Diagram taken from CQC. For more information on the single assessment framework see [Single assessment framework - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk)

CQC Inspection Process

Notification of inspection and initial submission of evidence

- CQC notifies DASS by letter that the council is being assessed
- CQC will come and inspect within 6 months of notification
- Council has 3 weeks to submit their evidence
- The council is under inspection from the point of submitting the evidence via CQC portal

Page 33
CQC will send out proformas to partners, vol sector to get feedback

On-site inspection

- CQC will give 4 – 6 weeks notice
- CQC provides templates with visits and meetings required for council to populate/arrange

Evidence submission via CQC portal (3 weeks after notification)

- Self-assessment (no CQC template yet)
- IR evidence base
 - 38 IR's different to LGA Peer review
 - BI developing a CQC dashboard to provide data for 5 IR's that require data that is no more than 12 months old - regular reports required

Evidence requirements for feedback from people with lived experience and vol sector

50 Care records for case tracking (within last 12 months)

Contact info of partners and vol sector

CQC Assurance Process

Process

Page 34

Preparation

- Self-Assessment
- Improvement Planning
- Staff Engagement

Getting 'the call'

- 8-10 week in advance of on-site arrival
- PCH support
- Internal communications

Local Authority Information Return

- Required between 1 and 3 weeks
- Set of approx. 50 documents
- Self-assessment
- Case list for case tracking (list of 50 from which they will choose 6 + 4)

Visit

- Around 3 days onsite
- Speaking to: PSW, DASS, Lead Member, CEx, frontline staff
- The level of contact the CQC chooses to have with senior managers is at their discretion!

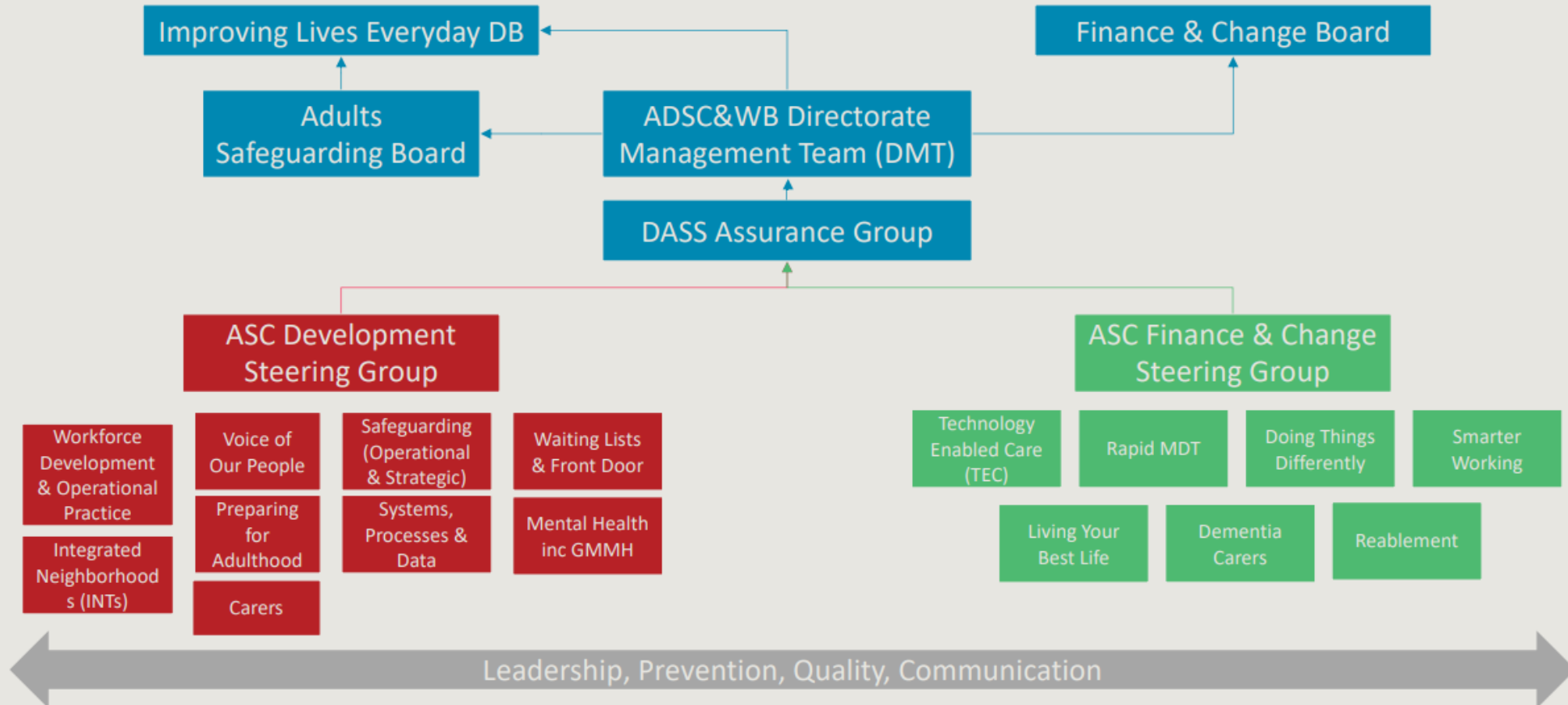
Recap of Key Messages from the LGA Feedback Trafford Peer Challenge 26-28 September 2023

- **Developing the Neighbourhood Model**
- **Getting it right at the Front Door**
- **Safeguarding**
- **Strategic direction and commissioning strategies**
- **Mental Health**

Themes from early inspections

- The CQC has commenced the inspection of 44 local authorities as of the end of June 2024.
- To date no local authorities in Greater Manchester have been contacted by CQC to inform as to impending inspection, though Wirral, Warrington, Sefton and St Helens have been within the North West region.
- All three of the published reports for Hertfordshire, Hounslow and West Berkshire Councils have received a 'Good' rating.
- The intention is that CQC will have concluded inspection of all local authorities with adult social functions by March 2025.
- Key Themes so far:
 - Waiting Lists / times for assessments
 - Transitions – Preparing for Adulthood
 - Hospital Discharge processes
 - Support for Unpaid Carers
 - Co-production and engagement with people with lived experience in shaping service delivery
 - Safeguarding including s.42 enquiries, Making Safeguarding Personal, effectiveness of Safeguarding Adults Boards, Learning from Safeguarding Adults Reviews (SARS) and Deprivation of Liberty Safeguards (DoLS)

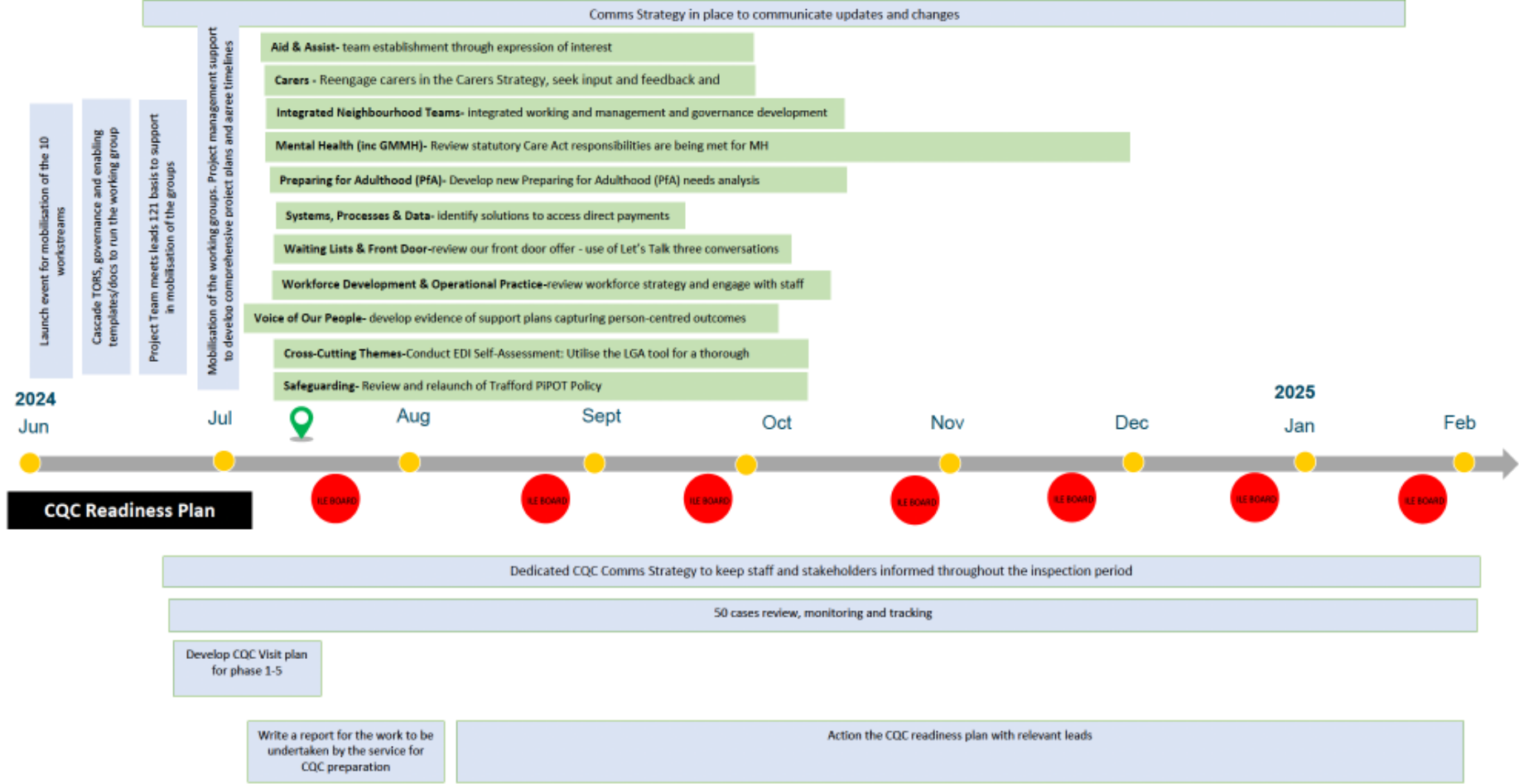
Improving Lives Every Day Development Board Governance



Improving Lives Every Day Milestone Plan

Project Workstreams

Improving Lives Everyday Programme Plan



Update on Preparations

| CQC requirement | Trafford's Position- Key points | RAG |
|--|---|--------------|
| <p>50 Care records for case tracking</p> | <ul style="list-style-type: none"> Requirement to submit 50 care records to CQC for case tracking. The requirement is that 7 themes need to be covered by these 62 care records identified that have scored 4/5 Spreadsheet on MS Team channel with overview of possible care records to submit also includes contacts for the people. The next step would be to make the contact with the individuals to conduct the voice of our people element <p>Approach</p> <ul style="list-style-type: none"> Trafford has implemented a process to identify 50 care resource through the audit process All audits that score 4/5 or higher are added to spreadsheet which will flag up the ones that needs to be removed | <p>Amber</p> |

Update on Preparations

| CQC requirement | Trafford's Position- Key points | RAG |
|-------------------------|---|-------|
| CQC IR Evidence (38) | <ul style="list-style-type: none"> • Changed requirements from Peer review - Evidence owners identified for each (need confirming) • Egress has new primary and secondary evidence folders for CQC • Spreadsheet in MS Teams channel gives overview of gaps • Current status of 38 IR Evidence based on September 2023 return completed • Appraisal of evidence not yet logged in Egress taking place to ensure that evidence is updated, and that any gaps have actions plans to resolve. | Amber |
| Key contact information | <ul style="list-style-type: none"> • Carers organisations, Vol sector, Advocacy organisations. CQC provide template for this. This is to be submitted in phase 1 along with the rest of the evidence. | Amber |
| Self-assessment | <ul style="list-style-type: none"> • Self-assessment of peer review revised – initial draft produced but requires further revisions incorporating recent data returns | Amber |

Update on Preparations

| CQC requirement | Trafford's Position- Key points |
|--|--|
| Response Plan Implementation Plan Comms Plan | <ul style="list-style-type: none">• Draft prepared and shared for consideration. Identifies the 6 phases of the process from first notification to receiving the outcomes of the inspection with comms plan integrated. |
| Quality Assurance | <ul style="list-style-type: none">• Trafford has a QA Framework – will need further refresh of revised vision. Proposal to formally launch to raise awareness across the Directorate and develop an action plan for full implementation of all processes |

Progress against commitments made to Health Scrutiny in January 2024

July 2024 Status Update

Programme Management support providing extra capacity and dedicated focus on *Improving Lives Everyday* commenced January 2024 to develop:

- Full Programme Plan underpinned by a new governance framework with phased activity – **now in place**
- Terms of Reference for the *Improving Lives Everyday* Development Board - **completed**
- Governance flow chart - **completed**
- Templates for flash reports, detailed business reports and presentations for the Board - **completed**
- Risk register linked to the Programme Plan - **completed**

July 2024 Status Update

- Monthly Development Board to be chaired by an independent person (currently under recruitment for February 2023) – **completed**
- Self-assessment and evidence base to be refreshed on a quarterly cycle – **next iteration in progress, to be completed Sept 24**
- Alignment of activity with GMMH Trafford improvement plan to ensure social work elements are incorporated – **mapping activity in progress for Sept 24**
- Further face to face engagement with Adult Social Care staff planned for February 2024 - **completed**
- Full communications strategy for engagement with all stakeholders drafted for sign-off at monthly board – **in progress**

Planned activity

- Development of the Adults & Wellbeing Directorate Vision, Target Operating Model (TOM) and Outcomes Framework - activity has commenced on this, but this needs to ultimately sit above the Programme Plan for CQC Assurance – Vision agreed, and Strategy being developed for Oct 24
- Focus must be on improving the outcomes of Trafford residents through more effective service delivery, not solely on passing inspection. If we get the offer right, then the inspection outcome should reflect this – in progress

Further Successes

- Completion of 10 front-line staff engagement sessions (March to June) outlining CQC Assurance process, LGA findings and the Development Plan.
- Rolled out Care Act, Legal Literacy and Safeguarding training from a highly regarded independent trainer Ali Gardner to c100 staff – training in May/June.
- Launched the Multi-agency Risk management (MARM) Framework on 17 May. This aims to complement existing safeguarding arrangements by providing a practitioner toolkit for when people who have capacity and fall out of the Care Act arrangements for safeguarding but are at risk of harm.
- Published the Commissioning Strategy and Market Position Statements
- Started the Test & Learn for the Integrated Neighbourhood Teams following the 100-day sprint to design this multi-agency model of working with the top 5% risk cases identified by GPs in the four localities.
- Planned the Emergency Duty Team (EDT) review to explore both the CYP and Adults/Mental Health elements of the Model.

Further Successes

- Plans in place for quarterly “you said, we did” themed staff engagement sessions and a recap of the previous quarter’s activity/future priorities x3 sessions (TTH/Waterside)
- Concluded work on the Adults & Wellbeing vision statement.
- BCF/MSIF/SALT/SAC (safeguarding) returns submitted on time for the June 2024 deadlines.
- Making Connections have completed the independent review of operational safeguarding.
- Safeguarding Adults Reviews (SARS) now all on track for anticipated timescales.
- Partnership Boards for Cares, Autism and Learning Disabilities to be relaunched in September. Revised membership, new terms of reference (TORs) and sufficient strategic support to be more effective and representative. Boards to be co-chaired by the DASS and a nominated person with lived experience representative.

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Trafford Health Scrutiny Committee 2024/25 Work Programme

| Wednesday 25 July 2024 – 6:30 p.m., Committee Rooms 2&3, Trafford Town Hall | | | | |
|--|--|---|----------------------------------|-----------------|
| <i>Report submission deadline – midday on Monday 15 July 2024</i> | | | | |
| Item | Information | Executive Member(s) | Lead Officer(s) | Comments |
| ACCESS TO GPs – PRACTICE MANAGEMENT | To inform Members on good and bad practice across the borough – a day in the life of a practice manager. | Executive Member for Adults Social Care | Pam Wilson Conway Practice | |
| ADULT SOCIAL CARE BUDGET | To receive a report on the directorate’s management of the budget and the directorate’s digitisation status. | Executive Member for Adults Social Care | Nathan Atkinson | |
| CQC INSPECTION UPDATE | To update on the CQC inspection’s outcome and the directorate’s preparedness for any future inspections | Executive Member for Adults Social Care | Nathan Atkinson | |
| DENTAL UPDATE | To receive a report to inform Members of the current picture on practices procedures and waiting lists | Executive Member for Adults Social Care | Ben Squires | |
| TASK AND FINISH GROUP | To select nominees for the Group. | H.S.C. Chair | All Members | |
| HEALTH SCRUTINY COMMITTEE WORK PROGRAMME 2024/25 | To consider a report for the new municipal year 2024/25 | HSC Chair | All Members | |

Wednesday 11 September 2024 – 6:30 p.m., Committee Rooms 2&3, Trafford Town Hall

Report submission deadline – midday on Monday 2 September 2024

| Item | Information | Executive Member(s) | Lead Officer(s) | Comments |
|--|---|---|------------------------|-----------------|
| MENTAL HEALTH | To receive a report update on the current picture across the borough and any progress along with a progress update on changes within GMMH. | Executive Member for Adult Social Care and Health | Liz Caulder | |
| BLUE BADGE DIGITISATION | To receive a report update on the digitisation of the department: challenges/successes. | Executive Member for Adult Social Care and Health | Lucy Boubrahmi | |
| DISCHARGE FROM HOSPITAL SUPPORT & VIRTUAL UNIT | To receive a report highlighting the current position within Trafford including readmission figures and the opening and progress of the virtual unit. | Executive Member for Adult Social Care and Health | Richard Spearing | |
| GM ICP UPDATE | To receive a report, update on relevant strategic updates concerning the GM ICP – operating model and performance | Executive Member for Adult Social Care and Health | Gareth James | |
| BUDGET UPDATE | To receive a report update on the Council's budget spend for the NHS in Trafford and the impact given the current financial climate. | Executive Member for Finance | Graeme Bentley | |

Wednesday 13 November 2024 – 6:30 p.m., Committee Rooms 2&3, Trafford Town Hall

Report submission deadline – midday on Tuesday 5 November 2024

| Item | Information | Executive Member(s) | Lead Officer(s) | Comments |
|------------------------------------|--|---|--------------------------------|----------|
| CANCER DIAGNOSIS | To receive a report update on the delays in cancer diagnosis and treatment. | Executive Member for Adult Social Care and Health | Helen Gollins | |
| ALTRINCHAM MINOR INJURIES UNIT | To receive a report update on the current status and future of the Unit. | Executive Member for Adult Social Care and Health | Cathy O'Driscoll/Helen Gollins | |
| COUNCIL STAFF HEALTH AND WELLBEING | To receive information relating to sickness absence rates to cover the period from before Covid 19 restrictions to date. | Deputy Chief Executive | Sara Saleh | |
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Wednesday 15 January 2024 – 6:30 p.m., Committee Rooms 2&3, Trafford Town Hall

Report submission deadline – midday on Tuesday 7 January 2025

| Item | Information | Executive Member(s) | Lead Officer(s) | Comments |
|-------------|--------------------|----------------------------|------------------------|-----------------|
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Wednesday 5 March 2025 – 6:30 p.m., Committee Rooms 2&3, Trafford Town Hall

Report submission deadline – midday on Monday 24 February 2025

| Item | Information | Executive Member(s) | Lead Officer(s) | Comments |
|-----------------------|--|---|------------------------|-----------------|
| MENTAL HEALTH | To receive a final report update on the Mental Health picture across Greater Manchester and Trafford specifically. | Executive Member for Adult Social Care and Health | Liz Caulder | |
| DENTAL HELATH | To receive a report update on the 100.000 appointments pledge. | Executive Member for Adult Social Care and Health | Ben Squires | |
| OGM ICP UPDATE | To receive a final update on progress to date. | Exec Mem for Adult Social Care and Health | Gareth James | |
| TASK AND FINISH GROUP | To provide a final report for consideration and submission to Council. | HSC Chair | Members | |
| | | | | |

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