

CITY OF
WOLVERHAMPTON
COUNCIL

Fulfilled Adult Lives Scrutiny Panel

5 July 2022

Time 6.00 pm **Public Meeting?** YES **Type of meeting** Scrutiny
Venue Council Chamber - 4th Floor - Civic Centre

Membership

Chair Cllr Val Evans (Lab)
Vice-chair Cllr Stephanie Haynes (Con)

Labour

Cllr Qaiser Azeem
Cllr Olivia Birch
Cllr Rashpal Kaur
Cllr Louise Miles
Cllr Lynne Moran
Cllr Anwen Muston
Cllr Clare Simm
Cllr Jacqueline Sweetman

Conservative

Cllr Christopher Haynes
Cllr Sohail Khan

Quorum for this meeting is three Councillors.

Information for the Public

If you have any queries about this meeting, please contact the Democratic Services team:

Contact Earl Piggott Smith
Tel/Email 01902 551251 email:earl.piggott-smith@wolverhampton.gov.uk
Address Democratic Services, Civic Centre, 1st floor, St Peter's Square,
Wolverhampton WV1 1RL

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Agenda

Part 1 – items open to the press and public

Item No. *Title*

- 1 **Welcome and Introductions**
[The Chair to welcome everyone to the meeting.]
- 2 **Meeting procedures to be followed**
[The Chair will explain how the meeting will proceed, how questions are to be asked and any matters of meeting etiquette.]

BUSINESS ITEMS

- 3 **Apologies**
- 4 **Declarations of Interest**
- 5 **Minutes of previous meeting (16 March 2022)** (Pages 3 - 8)

DISCUSSION ITEMS

- 6 **Update on Health and Social Care Act - Fair Funding** (Pages 9 - 20)
[Becky Wilkinson, Director of Adult Services, to present report]
- 7 **Adult Services Transformation Programme** (Pages 21 - 34)
[Becky Wilkinson, Director of Adult Services, to present report]

Attendance

Members of the Adults and Safer City Scrutiny Panel

Cllr Qaiser Azeem
Cllr Olivia Birch
Cllr Val Evans (Chair)
Cllr Stephanie Haynes
Cllr Sohail Khan (Vice-Chair)
Cllr Lynne Moran
Cllr Anwen Muston

Members of the Adults and Safer City Scrutiny Panel in attendance via Teams

Cllr Rashpal Kaur
Cllr Simon Bennett
Cllr Jacqueline Sweetman

Employees

Jennifer Rogers
Becky Wilkinson

Principal Social Worker (Interim)
Director of Adult Social Services

Part 1 – items open to the press and public

Item No. *Title*

- 1 **Welcome and Introductions**
Cllr Val Evans, Chair, welcomed everyone to the meeting and advised it was being live streamed to the press and public. A recording of the meeting would be available for viewing on the Council's website at a future date.
- 2 **Meeting procedures to be followed**
Cllr Evans explained the protocol to be followed during the meeting for asking questions and reminded everyone that microphones should be muted and cameras off, unless they have been invited to speak.
- 3 **Apologies**
No apologies received.
- 4 **Declarations of Interest**
There were no declarations of interest recorded.

5 **Minutes of previous meeting (15 February 2022)**

The panel members voted and approved the minutes of the meeting held on 15 February 2022 as being a correct record.

6 **Mandatory Vaccinations for Social Care Homes - verbal update**

Becky Wilkinson, Director Adult Services, gave a brief verbal update on a recent change to the Governments mandatory Covid 19 vaccination policy.

The policy required people working in all CQC registered services to be double vaccinated by the end of November 2021.

The Director of Adult Services advised the panel that following a consultation and review of the policy the Government decided to repeal the mandatory vaccination legislation. The change became effective from 15 March 2022 and managers have been advised that no further meetings will be required for people working in CQC registered services who have not been double vaccinated.

The Director of Adult Services advised the panel that service will continue to offer vaccinations to care workers who want to be vaccinated and encourage other workers who have concerns to consider getting vaccinated.

The panel were invited to either ask questions or comment on the update.

The panel thanked the presenter and queried the implications of the policy change for family members who may be concerned that care workers supporting their relatives in care homes are not fully vaccinated and wanted reassurance.

The Director of Adult Services advised the panel that the current vaccination rate in care homes is at 96 per cent and it is estimated that about 100 people are either medically exempt or have chosen to leave the profession. The Director of Adult Services commented that in terms of advice to care homes the Council will continue to provide infection prevention control teams to support them.

The Director of Adult Services reassured the panel that while the requirement for Covid 19 testing will end in March 2022 there will still be a requirement that people visiting a care home to have a negative lateral flow test result before they can enter.

The Director of Adult Services added that should anyone test positive for Covid 19 in a care home then it will be closed for admissions to new residents or visitors while the outbreak is dealt with, the aim is to keep the most vulnerable people as safe as possible.

The panel thanked the presenter and agreed to note the update on the policy.

7 **Adults Social Work and Workforce Health Check 2021**

The Chair invited Jenny Rogers, Principal Social Worker, to present the report. The Principal Social Worker advised the panel that the Council does an annual survey to check on the 'health' of its social workers as part of Adult Service ongoing self-assessment.

The Principal Social Worker advised the panel the survey was extended to the wider workforce a few years ago. The survey information gives an insight into social work practice and the general wellbeing of the workforce. The annual health check survey was a key recommendation of the National Social Work Task Force which was set up by the Government.

The Principal Social Worker advised the panel that the report gives an overview of the main findings from both surveys, highlighting areas of strength, a review of progress made since the previous annual health check report and future actions.

The Principal Social Worker advised the panel that overall, the survey findings were positive particularly when considering challenges the workforce faced during the pandemic. The Principal Social Worker advised the panel that the survey was sent out between September and November 2021.

The survey response rate was higher than the previous year following the introduction of protected time during briefings or team meetings to allow people time to complete the form. There is further work planned to increase the number of responses to get results which are more representative of the wider workforce.

The Principal Social Worker advised the panel that an action plan is being developed in a 'you said we did' format to report on progress during the year and to make clear the tangible difference taking part in the survey has made.

The Principal Social Worker gave more details of the main findings from the survey outlined in the report. The panel were invited to comment and or questions about the report.

The panel thanked the presenter for the report and welcomed the positive findings from the survey.

The panel queried the issue of the retention of social workers and frontline adults' workforce within the Council and requested more details about the definition of the term 'manageable workload' referred to in the report and the issues highlighted by the workforce about this issue.

The Principal Social Worker commented on the difficulty in quantifying what a manageable workload is and often the approach has been to quantify it in terms of case numbers and as a guide 25 cases would be manageable, but this would depend on the complexity and mix of the cases. There would also need to be a consideration of the experience and skills of the social worker when considering workload issues.

The Principal Social Worker commented on the importance of social workers having high-quality supervision sessions to give them the opportunity to talk about case workload issues and their other commitments. The Principal Social Worker commented on the importance of offering social workers who may be struggling with their workload different strategies that could help them better manage their caseload and offering wellbeing support where appropriate, while recognising that some social workers may be able to manage a higher number of cases than their colleagues.

The panel queried the work planned to encourage more people to participate in the annual survey and suggested that the inclusion of age profile in the report would provide helpful context to consider the results and see who is taking part.

The Principal Social Worker commented on the further work being done to increase the survey response rates and agreed with the panel about the importance of making the survey findings more representative.

The Principal Social Worker commented that the impact of Covid 19 may have led to survey fatigue and added that work is being done to review the length of the survey, which may encourage more people to take part. The Principal Social Worker commented on other initiatives to encourage more people to complete the survey, for example, the service trialled having some protected time in a social work briefing which worked well last year.

The Principal Social Worker agreed to include an analysis of survey results by age in future reports.

The panel queried the reasons for not using the questions in the national survey in the social work and commented that this would make it difficult to compare local responses to the findings from other local authorities' social work teams.

The Principal Social Worker explained that the pros and cons of using national survey questions in the local survey were considered at the time but on balance it was decided that having more control of the wording of questions meant that they could be adapted to meet local. The Principal Social Worker added that in the past there has been a low uptake on the national survey compared to the locally designed questionnaire and the Council still has access to some of the higher-level comparison data which can be used to inform plans.

The panel queried the chart in the report detailing the number of social workers and other care workers receiving regular supervision showing as less than 100 per cent, as the expectation would be everyone would be having regular supervision sessions.

The Principal Social Worker commented that supervision meetings are normally arranged monthly and is used to talk about wellbeing, learning and work issues. However, there are situations where for different reasons the planned supervision does not take place as scheduled due to a family crisis, sickness and or training date clash which would mean the date being rearranged.

The Principal Social Worker added that sessions may happen every six weeks and reassured the panel that most social workers would have a supervision session every four weeks but may be delayed for the reasons given.

The panel queried the reasons behind the increase from 2016 years in the number of workers receiving regular supervision. The Principal Social Worker was only able to comment on work done since 2019 and explained the increase may have been due to impact of Covid 19 and the switch to virtual meetings which may have helped with the attendance at supervision sessions. The Principle Social Worker commented that the reduction in travelling time due to home working has also helped to give people more time to book supervision sessions.

The panel queried the advantages of delivering training online. The Principal Social Worker advised the panel that social workers are now being offered more opportunities for face-to-face training to replace virtual training events following the relaxation of Covid 19 restrictions. The plan is to offer a mix of virtual and in person training in recognition that some people do not like virtual training. The Principal Social Worker commented on the value of face-to-face training in supporting the learning of social workers and the highlighted future in person events.

The panel expressed concern about the planned redesign of adult care and asked for more details of the scope and focus on the review. The panel also queried the reason for social workers working beyond their contracted hours as detailed in the report, as in the past they would not have been paid in this situation, without the approval of a supervisor or manager.

The Principal Social Worker commented that there is an acceptance that social work is not '9 to 5' job and as part of the role in supporting families there will be the need to work unsociable hours; so the service is as flexible as possible in recognition of this and the need to be responsive to the individual needs of a family. There is also an expectation that managers will encourage social workers to take the time accrued back in recognition of the need to look after their well-being.

Becky Wilkinson, Director of Adult Services, offered reassurance to the panel about the planned redesign of adult social care services and suggested that a report be presented to a future meeting to give more details about the ideas being considered. The Director of Adult Services added that there were no efficiency targets linked to the redesign and is intended to build on current work, for example, the introduction of 'The Three Conversations model' across social work teams. The approach involves creating a new relationship between professionals and people who need support, providing a graded process of conversations aimed at helping people lead independent lives, with traditional support packages offered only when other options have been exhausted.

The redesign will look at the restructuring the service to put the person at the heart of the work being done to support families and strengthening links with the community and voluntary sectors to better understand the needs of different areas of the City.

The Director of Adult Services commented on the implications of future legislation due to be implemented in October 2023 and advised the panel there are several workstreams to engage with social work teams about these plans.

The panel discussed the list of key actions detailed in the report and suggested milestone or expected completion dates could be added to help panel to review progress. The panel requested a progress report on the actions could be presented to a future meeting.

The Director of Adult Services agreed to this request and suggested a progress report could be presented to the panel in September 2022. The panel also requested that a sample of the questions used in the next planned survey to be shared in advance.

The panel thanked the presenters for the report and presentation.

Resolved.

1. The Principal Social Worker to present a progress report on actions detailed in the report, to panel meeting in September 2022.
2. The Principal Social Worker to share a copy of the next survey questions before the start of the survey in September 2022.
3. The Director of Adult Services to update the panel on plans for the redesign of adult social care for discussion to a future meeting.

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Wolverhampton Trailblazer
Update to Scrutiny
05 July 2022

Health and Care Reform – The objective

Fair cost of care reforms

Local authorities can use their position as a large purchaser of social care to obtain lower fee rates from care providers, which can be less than the cost of providing the care. To compensate, providers often attempt to cross-subsidise by charging more to people who fund their own care.

The Government says this leads to market failure and has announced two measures to address the issue:

- Provisions in the Care Act 2014 will be brought into force enabling self-funders to ask their local authority to arrange their care for them so that they can benefit from lower rates.
- £1.4 billion will be provided to local authorities over the next three years to support them to increase the rates they pay to providers where necessary (move towards a “fair cost of care”).

Health and Care Reform – The objective

Cap on care costs

From October 2023, the Government plans to introduce a new £86,000 cap on the amount anyone in England will have to spend on their personal care over their lifetime. The cap will apply irrespective of a person's age or income.

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Changes to the social care means test

From October 2023, the Government proposes to make the means test for accessing local authority funding support more generous. The upper capital limit (the threshold above which somebody is not eligible for local authority support) will increase from £23,250 to £100,000. The lower capital limit (the threshold below which somebody does not have to contribute towards their care costs from their capital) will increase from £14,250 to £20,000.

Purpose of Trailblazer

This is to give the Department of Health and Social Care (DHSC) an opportunity to test how the reforms would work in practice and identify and share best practice across all LAs ahead of national roll out.

- the £86,000 cap on personal care costs (no later than January 2023),
- enhanced lower and upper capital limits of the means test (£20,000 and £100,000 respectively) (no later than January 2023); and,
- the creation of a care account for individuals with eligible care needs.
- implement the cap on care costs and changes to the means test capital limits between April 2022 and September 2023.

Purpose of Trailblazer

In addition to implementing the statutory requirements, CWC will (conditions providing) implement the following non-statutory requirements:

- To adopt the approach for commencing s.18(3) of the Care Act to meet an adult's needs for care and support when requested, even if the adult has financial resources above the financial limit, for example by commissioning care on their behalf.
- Assess market sustainability requirements considering reform ahead of early go live on the statutory requirements. This will involve conducting a fair cost of care exercise and using its findings to create a market sustainability plan, ahead of 2023/24, as well as making progress towards paying a fair cost of care in 2022/23.
- To begin preparing for the early assessments of self-funders and implement the cap on care costs and changes to the means test capital limits between April 2022 and September 2023.

Progress to Date

- An IEDN has been approved to enable the budget available to the project to be released to provide the capacity and skills required. So far:
 - 3 agency social workers have been recruited to support the assessment of self-funders
 - a data analyst has been recruited to support the new data requirements
 - a finance manager has been recruited to support financial analysis
 - A consultant has been recruited to support the cost of care exercise
- Engagement with providers to recruit them to cost of care exercise and the identification of self-funders.
 - Home care providers – a sample that includes large nationals as well as local providers.
 - Care home providers – providers have registered to use the cost tool
 - Self-funders – A number have been identified. Estimates would put the full total above 1000 plus those receiving care from providers registered outside of Wolverhampton (extra 10-15% estimate)
- Care Account – pending receipt of the DHSC specification, an internal interim solution is being developed within CareFirst to capture the care and financial eligibility information from self-funders

Project Risks – Trailblazer risks

Risk	Description	RAG	Mitigations
Time constraints	the MOU with the DHSC sets out a very tight timeline for delivery		Pushback on date set for data return accepted
Resource constraints	the project requires significant resources to be allocated to it. There is a risk that if the skills and expertise are not available, this will negatively impact on the project's quality and ultimately its delivery.		Continued to push recruitment, social work staff and reform specialist on board
Technical tools required	the technical solution required to establish an interim care account and new means-test tool in CareFirst will need to be transferable into Eclipse.		Currently we still await the specification for the proposed MVP
Provider engagement	not having sufficient engagement risks not having sufficient, quality information to understand the current market, the cost of delivering care services and the number of self-funders		Forums, comms and ring arounds resulted in improved returns

Wider Risks and Issues for the Council – implementing the reforms

- **Affordability** – the initial analysis of the provider returns suggest for home care, that the median hourly cost is significantly above what we currently pay, as part of the reform we will have to produce a market sustainability plan without knowing the settlement from government – legally impossible as we cannot sign off a plan that risks being in breach of a balanced budget.
- **Legal challenge** – some services that people currently pay for may not be considered as eligible to meter towards the care cap and this may lead to challenges
- **Market sustainability** – self-funders will be able to ask the council to procure their care at the agreed fair cost of care which may be significantly less than they might pay currently. This could lead to some providers becoming financially unviable especially those that have a higher proportion of self-funders

Wider Risks and Issues for the Council – implementing the reforms

- **Wider workforce** – The changes in processes and the potential increase in the numbers of people the council will need to help will have an impact on adult services and support services such as finance, IT and Insight & Performance
- **Managing expectations** – the publication of the median fair cost of care could raise expectations of providers that market rates will rise significantly. Also self-funders may expect that metering towards the care cap will be based on the fair cost of care when in fact it will be their PB/IPB

Mitigations and Assurance

- Internal project group with key stakeholders including finance and IT
- West Midlands Association of Directors of Adult Social Services (WMADASS) have provided support with financial / policy expertise
- All trailblazer DASS' in contact without DHSC present to share issues / concerns learning
- Policy changes are being worked on and timelined to go through Cabinet in November
- There is a 'go / no go' point for the trailblazer work in November - ***note this only mitigates an early implementation of the reforms***

Timeline

Adult Social Care Reform Trailblazer - High-Level Project Plan - Version 24/06/22

Start Date: 01.04.22

End Date: 31.03.23

Key

Reflects a missed task or milestone (a task or milestone with a finish date in the past)	Red
Reflects a slipped task or milestone (where the baseline date is likely to be exceeded)	Yellow
Reflects a task or milestones that is on target to complete on or before its baseline finish date	Green
Reflects a 100% completed task or milestone	Blue
Reflects a task or milestone that is yet to be baselined/agreed	Pink
Review point with DHSC	Orange

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Ref	Workstream	Task	Milestone ●	Start Date	Target Date	Complete Y/N	2022												2023
							Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan			
	Fair Cost of Care	Cost of Care Analysis	Submission date to DHSC	01.04.22	22.07.22														
		Cost of Home Care Exercise																	
		Identify participating providers and support required			04.05.22	13.05.22	Y												
		Returns returned			30.05.22	17.06.22													
		Completed returns analysed			20.06.22	08.07.22													
		Cost of Care Homes Exercise																	
		Identify participating providers and support required			23.05.22	10.06.22	Y												
		Returns returned			15.06.22	24.06.22													
		Completed returns analysed			15.06.22	08.07.22													
	Market Sustainability Plan	Submission date to DHSC		06.06.22	22.07.22														
	Spend Report	Submission date to DHSC			14.10.22														
	Internal Approvals SEB Scrutiny Cabinet Resources				19.07.22														
					TBC														
						16.11.22													
	Care Cap	Systems/Processes																	
		Care Account creation			01.04.22	31.08.22													
		Explore, agree and implement interim solution			29.04.22	30.6.22													
		Explore, agree and implement long tem solution			01.04.22	TBC													
		Implement cap on care and new capital limits			01.04.22	01.01.23													
		Identification and quantification of self funders			01.04.22	31.08.22													
	Early Assessments commence			01.09.22	TBC														

Questions



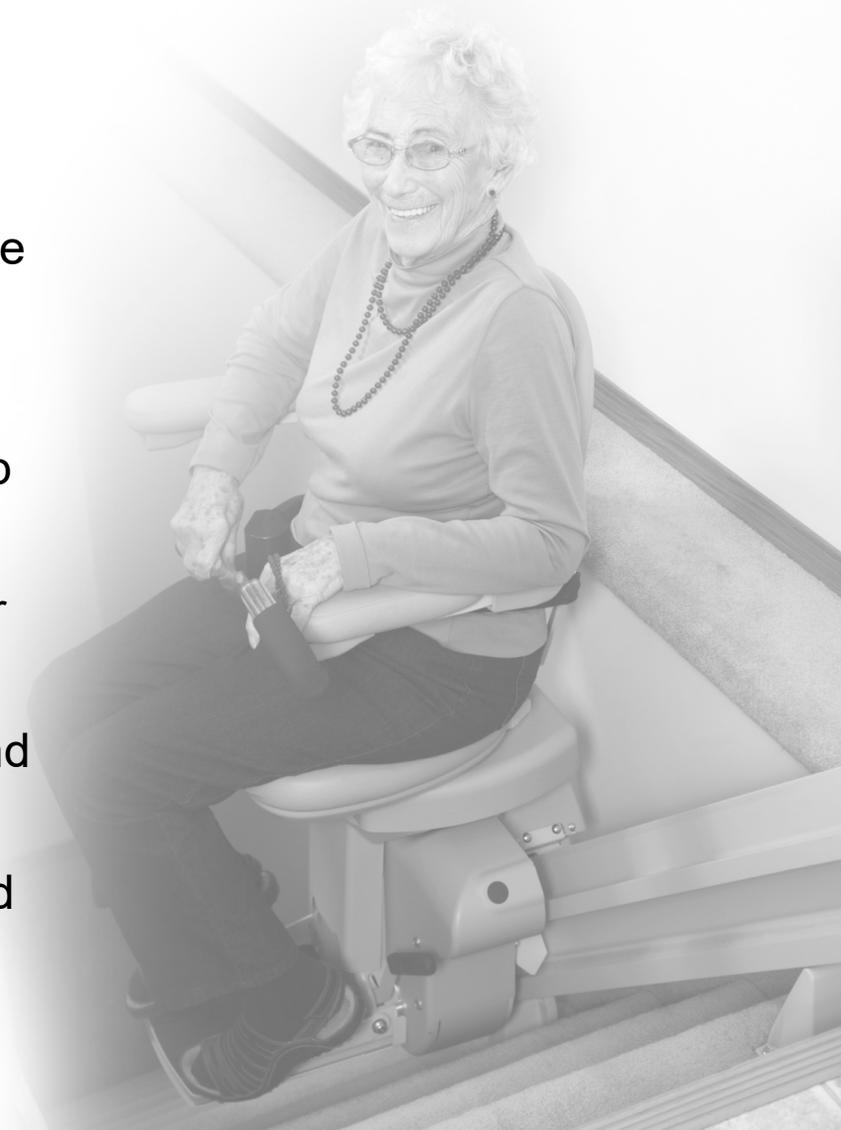
Adult Services Transformation Programme

June 2022

Vision for Adult Services

People of Wolverhampton will be at the centre of everything we do, celebrating uniqueness, promoting independence, wellbeing and safety. We will do this by:

- Page 22
1. Empowering People by providing the right information and advice to help make decisions and lead their best life
 2. Ensuring People can access the right support at the right time to keep or regain their independence
 3. Encouraging People to continue to use what is strong in their families and communities whilst ensuring choice and control
 4. Enabling People to think about their future and possible changes needed to live the life they want to



What has happened so far

- ✓ January 2021 – Transforming Adult’s Services Programme Refresh
- ✓ April 2021 – initiation of three additional TASP projects
- ✓ October to December 2021 – iMPOWER Adult Service’s discovery project
- ✓ January 2022 – iMPOWER presentation of discovery findings and opportunities
- ✓ January 2022 – Adult Social Care Reform Director Briefing
- ✓ March 2022 – Confirmation Wolverhampton will be a ‘Charging Reform’ Trailblazer for DHSC
- ✓ March 2022 – New DASS appointed
- ✓ March 2022 – ALT Away Day: Re-design and Reform
- ✓ March 2022 – Exec briefing: Re-design and Reform
- ✓ March 2022 – Adult workforce briefing: Re-design and Reform
- ✓ April 2022 – Head of Adult Improvement recruitment to lead transformation, re-design and reform
- ✓ May 2022 – Early Help and Families Front Door projects initiated
- ✓ June 2022 – Locality and Specialist Teams Project initiated
- ✓ June 2022 – Second Adult workforce briefing: Re-design and Reform



Adult Services Existing Transformation Programme

INTERNAL

Eclipse Adults
and Finance

Telecare
Transition to
Digital

Technology
Enabled
Independent
Living Strategy

Disability Model
Transformation

CHANGE | COMMS | WORKFORCE | LEGISLATION | MAXIMISING INDEPENDENCE | PERFORMANCE

EXTERNAL

Adult Social Care
Reform

One
Wolverhampton

Adult Services New Transformations Projects – June 2022

INTERNAL

Early Help & Prevention

Families Front Door

Transformation of Adult Locality and Specialist Teams (re-design)

Responsive Commissioning

Co-Production

CHANGE | COMMS | WORKFORCE | LEGISLATION | MAXIMISING INDEPENDENCE | PERFORMANCE

EXTERNAL

Adult Social Care Reform Trailblazer

Integrated Care Systems

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New Projects - Aims and Objectives



Early Help and Prevention

Category	Detail
Aim(s)	<p>To co-ordinate an early help and preventative offer that:</p> <ul style="list-style-type: none"> • Supports frontline practitioners to prevent, reduce and delay long term support • Improves outcomes for individuals (with and without care and support needs) • Reduces social care dependence and maximises independence by meeting needs in alternative ways sooner • Enables residents to independently access resources within communities and online • Offers a coordinated and accessible front door to 'whole family' services
TASP Outcomes	<ol style="list-style-type: none"> 1. Improved models of community care 2. Increased use of technology to deliver care services 3. Increased independence for all adults 4. Improved integration between agencies 5. Improved co-production – on all steps of the participation ladder
Project Objectives (SMART)	<ol style="list-style-type: none"> 1. Reduced avoidable contact at the front door 2. Implementation of one point of 'whole family' contact (front door) 3. Increased take up of community services and assets 4. Increased prevention/reduction/delay of long term support 5. Increased capacity within community support 6. Improved knowledge and sharing of information amongst the workforce 7. Improved self help through online channels 8. Embedded co-production approach into early help and preventative support
Progress	<p>The project has had its project concept approved at the Adults Transformation Board and will be moving through its lifecycle into the options appraisal phase from May 2022. Delivery is expected to start in October 2022. This project will run alongside the Families Front Door Project.</p>

Transformation of Adult Locality and Specialist Teams (Re-design)

Category	Detail
Aim(s)	An Adult Service’s specialist team model that builds on existing strengths, meets statutory care and support needs of younger adults, older adults and carers equitably across the city and is outcomes focussed.
Top SP Outcomes	<ol style="list-style-type: none"> 1. Increased independence for ALL adults 2. Improved co-production – on all steps of the participation ladder
Project Objectives (SMART)	<ol style="list-style-type: none"> 1. Improved baseline (cost and projection) understanding of the optimum staffing levels required to deliver adult services 2. Establish a ‘journey map’ of Adult Social Care services and identify gaps with resolution – ‘as is’ and ‘to be’ service delivery model 3. Increased input from managers, a cross section of staff and where relevant, people with lived experience, to identify short- and long-term improvements. 4. Work towards a ‘balanced scorecard’ for the service that brings together performance, demand, management, and finance insight for Adult Services 5. Deliver a recommend leadership structure aligning teams appropriately to deliver an integrated approach of services. 6. Deliver a restructure toolkit and suite of reports and communications ahead of delivering required consultations. To include keys decision and reporting points with unions, managers, staff, public and members.
Progress	The project is being scoped with work underway to agree the approach to the re-design. This is due to be received at ALT in the coming weeks with a DASS briefing in advance. The re-design of the services in scope of this project will be completed by March 2023 with a new structure in place ready for the next financial year.

Responsive Commissioning

Category	Detail
Aim(s)	A commissioning approach that will have a strong focus on outcomes, collaboration and innovation and support the service to meet the changing needs of residents and maximise their independence by providing the right services at the right time.
TASP Outcomes	<ol style="list-style-type: none"> 1. Improved models of community care 2. Increased use of technology to deliver care services 3. Increased independence for ALL adults 4. Improved co-production – on all steps of the participation ladder.
Project Objectives (SMART)	<ol style="list-style-type: none"> 1. Innovative commissioning strategy that is outcome focussed, sustainable and enables/stimulates market stability 2. Upskilled, developed and appropriately resourced teams to confidently deliver commissioning ambitions 3. Improved interface with the ‘families’ theme – Adult Services in particular 4. Improved ‘System wide’ commissioning approach specifically health and social care 5. Commissioning that is inclusive, equitable, needs based and offers personal choice and control 6. Increased co-production throughout all phases of commissioning activity – current and future provision 7. Assured CQC compliance and quality
Progress	This project is not due to start until October 2022.

Charging Reform Trailblazer

Category	Detail
Aim(s) Page 30	<p>To deliver the 'Trailblazer' to accelerate the introduction of the reform of Adult Social Care</p> <ul style="list-style-type: none"> To put in place processes, systems and resources to implement the maximum (cap) people will pay for their lifetime eligible care needs (£86k) – as per the Care Act. To update existing processes, systems and resources to provide means tested financial support for people with assets up to £100k To put in place the processes, systems and resources for assessing and meeting the potential future demand from self-funders for LA support in arranging their care To deliver a 'care account' for each eligible person in the city in receipt of care and support (self-funders known to CWC and to be known to CWC in the future) To ensure that implementation of new legislation is sustainable and linked with service re-design (financial assessment, commissioning and social work practice in particular) To promote efficient and effective operation of care markets in our local area (Under the Care Act 2014) through moving local care markets towards a more sustainable footing.
Objectives (SMART)	<ol style="list-style-type: none"> Achieve DHSC milestones as set out in the trailblazer MOU Create and maintain a record of learning: for CWC future service design and DHSC national roll out Improved forecasting, rigour and early notification of people who are at risk of reaching the care cap (by understanding the 'as is' and the 'to be' following introduction of legislation and any associated risks). Improved business capability and capacity to cope with potential increased demand for assessment and brokering care on behalf of self-funders Effective engagement with care providers to understand the cost of care and establish a fair cost of care model
Progress	<p>This project is well into deliver with the main activity being the Fair cost of Care exercise. Providers have been engaged with the tools made available through the Department of Health and Social Care and the next steps are to analyse returns and prioritise a CWC draft Market Sustainability Plan. Preparation is also underway for the self-funder analysis.</p>

Families Front Door

Category	Detail
Aim(s)	<ul style="list-style-type: none"> To create a welcoming and accessible route into whole family support services To strengthen and better coordinate the 'front door' into adult and children's services to enable a single, seamless contact and ongoing care journey for families. To enable choice and control through effective verbal, face to face and online first contacts with families supported by intuitive back-office practice and processes. To ensure a skilled, knowledgeable, and curious workforce at the front door responsible for gathering understanding and confidently sharing information at the first point of contact. To create a welcoming route into whole family support services, from universal through to targeted, that collaboratively, help people earlier To respond to feedback from SEND short breaks and carers strategy consultation
Page 31 ASP Outcomes	<ol style="list-style-type: none"> Improved models of community care Increased independence for all adults Improved integration between agencies
Project Objectives (SMART)	<ol style="list-style-type: none"> Improved experience for people contacting us Reduced avoidable and or duplicate contact Increased self-help and or self-assessment through an online front door Reduced demand on social care and other statutory teams Reduced community access points and improved consistency Improved preliminary understanding of a person's enquiry Improved accurate, appropriate, and timely response to enquiries beyond the front door Improved 'whole family' curiosity and cross-team working at first point of contact Effective integration with Customer Services and relevant adult and children's workforce and or systems Reduced wait times for follow up advice/guidance/support
Progress	<p>The project has had its project concept approved at the Adults Transformation Board and will be moving through its lifecycle into the options appraisal phase from May 2022. Delivery is expected to start in October 2022. This project will run alongside the Early Help and Prevention Project.</p>

Existing Transformation programme update

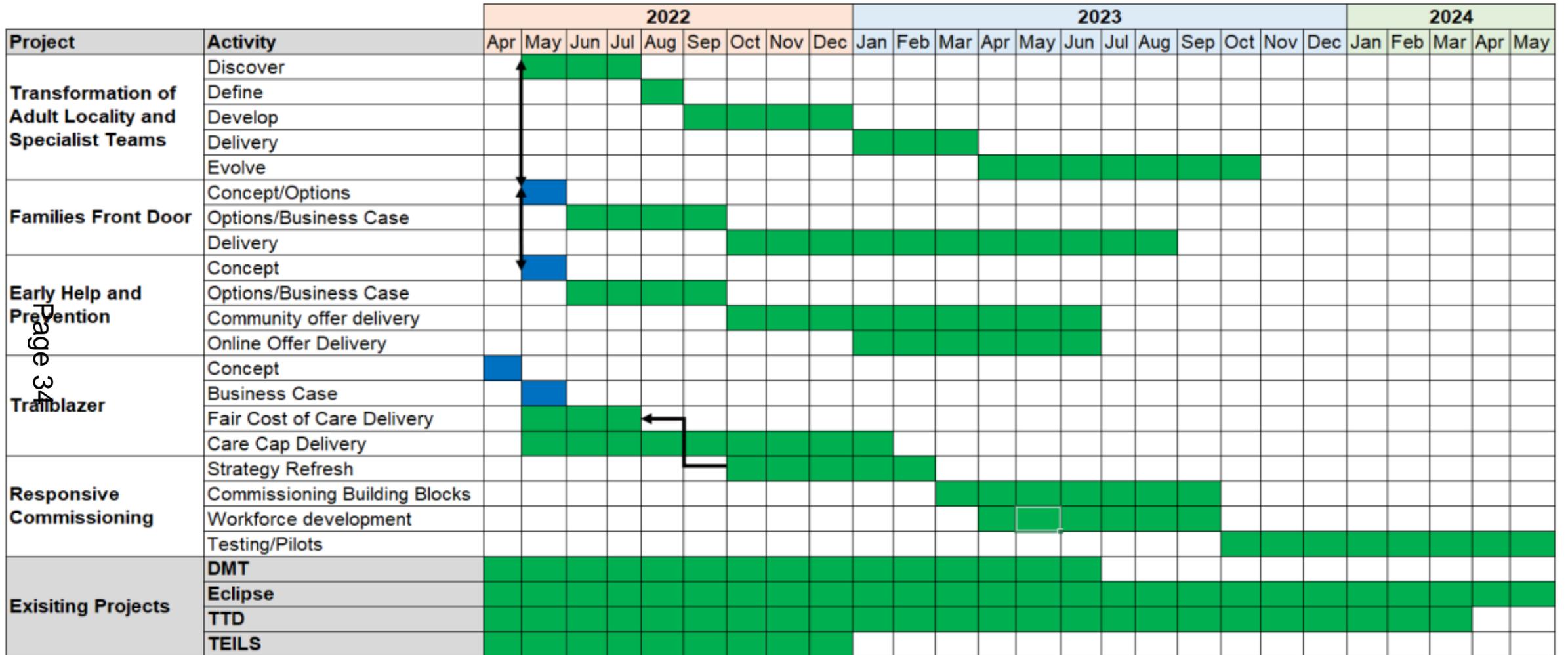
Project	Progress
Disability Model Transformation	<p>This project remains on track.</p> <p>This project has recently moved into its delivery phase and work is now underway with areas of the service to establish its three key workstreams: Improved Commissioning, Workforce development and Equalities. Workshops are due to take place over the summer to agree workplans for each workstream.</p>
Telecare Transition to Digital	<p>This project is currently on hold until outcomes from the Technology Enabled Independent Living Strategy are presented and implications to Telecare understood.</p> <p>This project is in its Options Appraisal phase with a recommended options being considered at present. Further liaison with the service continues due to the dependencies on the overarching Technology Enabled Independent Living Strategy and what people want and how they could benefit from technology enabled care in the future.</p>
Technology Enabled Independent Living Strategy (TEILS)	<p>This project remains on track following an approved extension to its end date (December 2022) following the commissioning of an expert technology provider to input into the strategy and its action plan.</p> <p>This project has recently completed a review of existing technology services used by CWC. A Technology partner has been commissioned to support CWC with our future use of technology in care and what the possibilities are for the adults we support. The Strategy is expected to be complete by the end of the year following consultation with residents.</p>
Eclipse Adults and Finance	<p>This project remains on track following an approved extension of two months to its end date (May 2024) after considering the time taken to work through business requirements for the system with all the services in scope.</p> <p>The project continues to move through its delivery with a focus at present on gathering business requirements for the system with the services in scope. The project is in a 'discovery' phase with a cycle of define, approve, build and deploy all the various forms and processes needed to effectively case manage and transfer care records of adults receiving our support now and in the future.</p>

Adult's Co-production Approach - Still to be scoped

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Timeline



→ Arrow indicates high level dependency