

CITY OF  
WOLVERHAMPTON  
COUNCIL

# Fulfilled Adult Lives Scrutiny Panel

18 October 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 Scrutiny Team:

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Copies of other agendas and reports are available from:

**Website** <http://wolverhampton.moderngov.co.uk/>

**Email** [democratic.services@wolverhampton.gov.uk](mailto:democratic.services@wolverhampton.gov.uk)

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# Agenda

## Part 1 – items open to the press and public

- | <i>Item No.</i> | <i>Title</i>   |
|-----------------|--|
| 1               | <b>Welcome and Introductions</b><br>[The Chair to welcome everyone to the meeting.]  |
| 2               | <b>Meeting procedures to be followed</b><br>[The Chair will explain how the meeting will proceed, how questions are to be asked and any matters of meeting etiquette.] |

### BUSINESS ITEMS

- |   |   |
|---|---|
| 3 | <b>Apologies</b>  |
| 4 | <b>Declarations of Interest</b>                                 |
| 5 | <b>Minutes of previous meeting (5 July 2022)</b> (Pages 3 - 14) |
| 6 | <b>Matters arising</b>  |

### DISCUSSION ITEMS

- |    |  |
|----|--|
| 7  | <b>Our Commitment to All Age Carers 2022</b> (Pages 15 - 46)<br>[Becky Wilkinson, Director of Adult Services, to present report]                                 |
| 8  | <b>Wolverhampton Winter Plan Summary 2022 -2023 DRAFT</b> (Pages 47 - 62)<br>[Becky Wilkinson, Director of Adult Social Services, to present report]             |
| 9  | <b>Transforming Adult Services Programme (TASP) Annual Report 2021-22</b> (Pages 63 - 90)<br>[Meena Dulai, Head of Service Adult Improvement, to present report] |
| 10 | <b>Fulfilled Adult Lives Scrutiny Panel - draft work programme 2022- 2023</b> (Pages 91 - 94)<br>[Earl Piggott-Smith, Scrutiny Officer, to present report]       |

# Fulfilled Adult Lives Scrutiny Panel

## Minutes - 5 July 2022

Agenda Item No: 5

### Attendance

#### Members of the Fulfilled Adult Lives Scrutiny Panel

Cllr Qaiser Azeem  
Cllr Val Evans (Chair)  
Cllr Christopher Haynes  
Cllr Stephanie Haynes (Vice-Chair)  
Cllr Sohail Khan  
Cllr Louise Miles  
Cllr Lynne Moran  
Cllr Anwen Muston  
Cllr Clare Simm  
Cllr Jacqueline Sweetman

#### Employees

Meena Dulai  
Jennifer Rogers  
Becky Wilkinson  
Earl Piggott-Smith

Head of Service Adult Improvement  
Principal Social Worker  
Director of Adult Social Services  
Scrutiny Officer

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## 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.
- 3        **Apologies**  
Apologies were received from the following members of the panel:  
  
Cllr Olivia Birch  
Cllr Rashpal Kaur
- 4        **Declarations of Interest**  
There were no declarations of interest recorded.

5 **Minutes of previous meeting (16 March 2022)**

The panel members approved the minutes of the meeting held on 16 March 2022 as being a correct record.

6 **Update on Health and Social Care Act - Fair Funding**

The Chair invited Becky Wilkinson, Director of Adult Services, to present the report.

The Director of Adult Services advised the panel that the presentation is an update on report presented earlier in the year about Government proposed health and social care reforms. At that time there was a commitment to bring a more detailed update on the plans to a future meeting.

Wolverhampton along with five other authorities were invited by the Department of Health and Social Care to participate in the Adult Social Care Reform Trailblazer. The aim of the plan was to test out how the introduction of the fair cost of care reforms would work in practice. The local authorities involved would share best practice from the implementation of the changes ahead of a national roll out of the scheme. The Director of Adult Services advised the panel that the trailblazer scheme is expected to start in January 2023 and the national rollout is planned for October 2023

The Director of Adult Services outlined the background to the Government's proposals and the key objectives of the reforms, for example, from the plan to introduce a new cap of £86,000 on the amount anyone in England will have to spend on their personal care over their lifetime.

The Director of Adult Services commented that the fair cost level will differ according to the area. There will also be changes to the social care means test for accessing local authority funding. The upper capital limit will increase from £23,250 to £100,000 and the lower capital limit will increase from £14,250 to £20,000.

The Director of Adult Services advised the panel that there will be additional money from government to support the implementation of the reforms as it is expected that the current rate the Council pays for care will increase and the amount that self-funders pay will decrease. The Director of Adult Services commented on the benefits of being part of the trailblazer programme.

The Director of Adult Services advised the panel that in addition to implementing the statutory requirements of the reforms those local authorities involved in the trailblazer would also need to implement specific non-statutory requirements.

The Director of Adult Services gave an update on the progress to date and the assessment of different risks linked to being involved in the trailblazer project. The Director of Adult Services commented on the good progress made to date and the success in recruiting additional social workers and other specialists to better understand the impact of the proposals.

The response from home care providers has been good but there is an issue about engaging some care home providers, especially nursing care home providers.

The Director of Adult Services reassured the panel that work is being done to improve the returns from care home providers and that overall, the work is on track to be completed by the deadline.

The Director of Adult Services advised the panel that work is being done to identify the number of self-funders in the city as the reforms will enable the Council to act as a broker to negotiate their care home fees on their behalf.

The Director of Adult Services commented that a wider risk highlighted in implementing the reforms is the issue of affordability as an initial analysis of returns from provider care homes suggest that the median hourly cost is significantly above the rate currently paid by the Council. The Council is required to produce a market sustainability plan but without having details of the Government grant settlement figure this will be difficult.

The Director of Adult Services highlighted the risks of potential legal challenge from care home residents and to the financial viability of those care homes who have a high proportion of self-funders. A further risk which has been raised with the Department of Health and Social Care is managing the expectations of providers and residents following the publication of a median fair cost of care rate about the future level of fees.

The Director of Adult Services commented on the work being done to mitigate the risks listed but added that some of the risks were outside the direct control of the Council to manage.

The Director of Adult Services outlined the timetable for the project. A proposal on moving forward with the Council's involvement with the trailblazer programme will be presented in November 2022 to the Leader, Cabinet Resources and Executive Team for approval. The Director of Adult Services proposed that a further report on the plans could be presented to the panel in January 2023 before a final decision is made to go live.

The panel were invited to comment on the presentation.

The panel queried the implications of introducing a cap of £86,000 on what someone would have to pay for personal care if they had property and savings above this amount. The Director of Adult Services advised the panel that there is a means test for accessing local authority funding support. There is work being done to develop different financial scenarios to give a guide about impact of the introduction of the personal care cap. The panel welcomed the idea.

Meena Dulai, Head of Service Adult Improvement, advised the panel that the cap of £86,000 is only for personal care needs and the local authority will decide if the care needs are eligible. The Head of Service Adult Improvement commented that in a situation involving a self-funder they can decide what care they will pay for, but if they approaches the local authority for financial support, they would need a financial assessment to decide the level of funding from the Council.

The panel discussed the issue of financial support for accommodation costs.

The panel discussed the workforce challenges facing the care sector and highlighted the need for care to be delivered properly and safely by staff who have been

appropriately trained. The panel asked for more details to be included in the proposals about plans for recruiting people with the skills and expertise needed to deliver the programme.

The panel queried the number of care home providers who have agreed to take part in the trailblazer programme and if there was a minimum number needed for the work to go ahead.

The Director of Adult Services responded that 58 percent of home care providers have responded, based on return rate of 42 per cent and the responses are broadly representative of the sector. However, there is concern about the number of responses from the nursing sector care homes and a request has been made to Department of Health and Social Care for an extension to the deadline. The Director of Adult Services commented that there are some reservations from care providers about sharing all their financial information with the Council, especially around their costings for essential care. The Director of Adult Services added that the response was not unexpected, and reassured the panel that work is being done to contact care providers to encourage them to be part of the programme. This work is being supported by a communication plan.

The panel queried how the level set for median fair cost of care would apply in a situation where people have different care needs and specifically how people this would be factored into the financial assessment. The Director of Adult Services explained that there is work being done to consider different care packages and to develop weighted medians to reflect this difference in care needs. The Head of Adult Improvement added that a consultant has been appointed to undertake this specific work. The Head of Adult Improvement agreed to share a briefing paper on the findings with the panel when the work is completed.

The panel queried the plans for making the public and care home providers aware and updated about the changes.

The Director of Adult Services Care commented on the challenges in advising residents in care, who may lack capacity to make their own decisions and advised the panel of the work being done with Department of Health and Social Care to advise them of the changes. Further work is planned to develop a communications strategy to explain the changes to the wider public.

The panel queried the reference in the presentation to a possible legal challenge arising from the reforms where some services that someone is currently paying for may not be eligible towards the care cap financial assessment.

The Head of Service Adult Improvement commented that the issue is likely to arise for self-funders who can choose the services they want. The Council when doing the assessment under the reforms may not consider the service to be an eligible need, which could lead to the Council getting more complaints and possible legal challenges about this decision.

The panel expressed concern about the practicalities of the proposed changes and highlighted the likely differences in regional care costs and the complexity and challenges in trying to implement the reform plans. The panel commented on the likely beneficiaries from the reforms and there was concern that the change will not

result in achieving greater equality in the way that the policy aims have been presented.

The panel discussed the issue of the low pay and poor working conditions of care home workers and the added financial pressures this group may face. The panel suggested that this issue should also be considered as part of the preparation for the implementation of the care home reforms.

The Director of Adult Services acknowledged the difficulties caused by the introduction of the cap when applied to homes with different valuations, as in some cases the value of the home will be less than the £86,000 personal care cap limit. The reason for being involved in the trailblazer was to share these and other concerns about the possible impact of the reforms onto the Department of Health and Social Care. The Council is waiting for feedback on the issues raised following a visit last week by colleagues from the Department of Health and Social Care.

The panel requested that a copy of the timeline for project plan is shared at the beginning of every month so that progress can be monitored. A meeting of the panel could be arranged if a project task or milestone in the plan is likely to be missed or slipped to understand the reasons for the change.

The panel thanked the presenter for the report.

**Resolved:**

1. The panel comments on the presentation to be noted.
2. The Director of Adult Services to share the financial modelling work about how the reforms might affect people with different care needs.
3. The Director of Adult Services to share an update on project plan at the beginning of each month.
4. The panel to consider arranging an extra meeting in January 2023 for pre-decision scrutiny of the final decision about the Council's involvement in the Adult Social Care Reform Trailblazer project.

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**Adult Services Transformation Programme**

The Chair invited Becky Wilkinson, Director of Adult Services, to present the report on the adult service transformation programme and the services being delivered to the residents of Wolverhampton. The Director of Adult Services outlined the vision for adult services and the key elements of the strategy for achieving it.

The Director of Adult Services commented on the impact of Covid 19 pandemic, and the changes made to the service model over the last few years, for example, embedding the 'three conversations model' into social work practice, taking a more local approach to delivering social care and understanding the needs of different parts of the community, and not simply telling people what they need.

The Director of Adult Services commented on the progress made since the Transforming Adult Services Programme Refresh was launched in January 2021.

The Director of Adult Services outlined the details of the previous transformation programme and the new transformation projects that have been introduced since June 2022. The Director of Adult Services commented on the importance of early help and prevention and supporting communities to provide for themselves. There will be a focus on adopting a more local approach to providing social care and understanding better what different parts of the community want and how to deliver it.

The Director of Adult Services commented that the level of demand for services is heavy on long term support and the probability is that once someone starts getting this level of care it will continue at this level into the future. The panel were reassured that the service is looking at what can be done earlier to prevent people from needing this level of long-term support in the future.

The Director of Adult Services gave further details of the new transformation projects in terms of their aims, expected outcomes, objectives, and progress to date. The work on existing transformation programme will continue as it complements the work being done on the service redesign.

The Director of Adult Services highlighted the challenges of implementing a co-production in the development of a new approach to service redesign, which will involve having conversations with people rather than deciding for them what it is they need. The work on adult co-production approach is still to be scoped.

The Director of Adult Services invited panel members to share their ideas about how to engage with local people. Based on previous experience, the transformation is expected to take up to five years before the full impact will be seen, but there is hope that people will start to see a difference in the service by the end of this year.

The panel thanked the presenter for the report and extended their thanks and congratulations on the progress of the service redesign work.

The panel commented on the overall good progress made to implement projects aimed at delivering the aims of the transformation programme. The panel queried if the Early Help and Prevention project was on track to deliver support to families from October 2022.

The Director of Adult Services confirmed that the project is on track to start in October and progress is being regularly monitored and if there are any expected slippages this will be reported. The Director of Adult Services assured the panel that the service will be open and transparent when there are issues that may affect the delivery of the project.

The panel commented on the scale and complexity of the different transformation projects and highlighted the challenges in engaging with as many stakeholders and in particular families when the work on Adult Co-Production Approach is still to be scoped. The panel commented on the importance of this project in the delivery of the other projects and asked for more details. The panel commented on added challenges faced by people wanting to access their local GP which is the main route to accessing care and support services.



The Director of Adult Services commented that the project Families Front Door is aimed at addressing the issue highlighted and there was an acceptance that people do find it difficult to contact the service due to different options available or knowledge of best number or email to use. The Director of Adult Services added that there is work being done to make the first point of contact much easier and avoid the public having to give the same information several times. The project will help the service to resolve issues much earlier. The Director of Adult Services gave details of the changes to procedures and team structures to support the desired change and to address the concerns highlighted by the panel.

The Director of Adult Services commented on the challenges in how best to engage with different local communities about redesigning services and welcomed ideas from the panel. The plans for public engagement will also include talking to members of the workforce about their experiences and those of their family members about the services, both good and bad. The Director of Adult Services highlighted the importance of involving the public in the design of services and listening to what they think about the current services being offered.

The Director of Adult Services commented that the service is looking at implementing the changes by the end of 2023. Based on the learning from the children's transformation programme it is expected that the full impact of the changes could take up to five years to be seen.

The panel welcomed the comments on the plans for developing the co-production approach but were concerned about the timetable and asked for details.

Meena Dulai, Head of Service Adult Improvement, commented that previous approaches have involved the public at a stage of the process when it had already been scoped, which is not considered to be co-production.

The Head of Service outlined the approach that will be followed and reassured the panel that discussions have started with various organisations about how this can be done in an open and transparent way to ensure the service is properly engaging with people. The Head of Service added that this approach will mean more time is needed when working to develop ideas with local communities as equal partners and to engage with them more effectively.

The panel highlighted the difficulties faced by a resident who is supporting a relative with mental disability or illness in getting access to a GP which is the necessary to getting a proper assessment of their situation by health professionals.

The panel queried the work being done to involve colleagues in NHS in discussions about supporting and implementing the planned service changes.

The Director of Adult Services acknowledged the importance of the contribution of the NHS and the challenges in working with health colleagues because of the impact that delays for people needing medical interventions have on the adult care sector. The Director of Adult Services commented that the issues highlighted are being raised in discussions with health colleagues.

The Head of Service advised the panel that was a meeting earlier with health colleagues to discuss the issue of urgent care.

The Head of Service commented on the challenges in providing 24-hour access to mental health support services under the current arrangements and there are discussions ongoing with health colleagues about how to provide a more seamless service that maximises people's independence.

The panel commented on the previous discussion about the difficulties experienced by residents when trying to access their GP and that the underlying problem was the general lack of GPs and the increasing numbers choosing to either reduce their working hours or to retire from the profession.

The panel commented on the important contribution that the voluntary sector can make in supporting the changes and that partnership working should be encouraged.

The Director of Adult Services acknowledged the important role of the third sector and advised the panel that a community engagement event is planned for next week to talk to representatives about the plans for future service redesign.

The Director of Adult Services commented on the benefits and the value of engaging with the third sector in the redesign of care services.

The panel commented on the key shortage care workers and their role in delivering the aims of the programme.

The Director of Adult Services acknowledged the challenges created by the shortage of care workers. The issue was set out in a report to SEB which commented on the impact of changes to Covid financial support rules. The Director of Adult Services commented on the impact of the challenges facing the sector which is encouraging some care workers to look elsewhere for work which is less stressful.

The Director of Adult Services commented on the importance of recognising and valuing the role of social care workers and looking at improving their working terms and conditions to reduce the risk of them leaving.

The panel asked for feedback on the community event to be shared with panel and that an invitation to attend could be shared with members.

The panel asked to be updated on progress of the implementation of the transformation programme.

The panel thanked the presenter for the report.

**Resolved:**

1. The panel comments on the Adult Service Transformation Programme to be noted.
2. The Director of Adult Services to update the panel on progress of implementing the programme and a further report to be presented to a future meeting.

**8 Principal Social Worker Annual Report 2021 2022**

The Chair invited Jennifer Rogers, Principal Social Worker, to present the report.

The Principal Social Worker advised the panel that the annual report details the progress report on the work done during 2021- 2022 in promoting and improving the quality of social work practice and the key priorities for 2022-2023.

The Principal Social Worker advised the panel that the main remit of the work is around the retention of social workers, learning and development and quality assurance policies.

The Principal Social Worker advised the panel that the report covers both children's and adult's social work.

The Principal Social gave a summary of the key highlights and areas of progress from adult's social work and the work done to support excellence in social work practice.

The Principal Social Worker outlined the key priorities for 2022 – 2023.

The Principal Social Worker advised the panel that she will be supporting the Adult Service Transformation Programme, focusing on the preparation for Care Quality Commission regulation, and the implementation of the new social care charging reforms.

The Principal Social Worker commented that work is also being done to prepare social workers for the introduction of Liberty Protection Safeguards, which replaces the current Deprivation of Liberty Safeguards scheme.

The panel were invited to ask questions and to comment on the report.

The panel thanked the presenter for the report and commented on the importance of having a benchmark of good practice.

The panel expressed concern about the challenges in providing a quality of service due to the shortage of social workers and other experienced public sector workers which all affect the delivery of adult care services. The panel welcomed the plans for improving the recruitment and retention of social workers and the reduced use of agency workers.

The panel also welcomed the reference in the report to supporting social workers, and monitoring caseloads, and the importance of regular supervision in helping workers to manage work which can be very stressful.

The Principal Social Worker thanked the panel for the comments and the assessment of the challenges facing the service. The Principal Social Worker advised the panel that the adult social care service is not having the same difficulties in recruiting to permanent vacancies, compared to children's services. The Principal Social Worker acknowledged the issues of quality and increasing costs of recruiting agency workers and commented on the benefits of having an experienced peripatetic social work team that can help support social work teams during a period of increased demand. The Principal Social Worker commented on

the importance of keeping people at the centre and listening to their experiences to help shape how services are delivered.

The Principal Social Worker discussed the importance supervision in supporting social workers and adopting a trauma informed practice approach. The Principal Social Worker outlined plans to discuss the issue at the next joint social work conference.

The panel congratulated the Principal Social Worker on the progress and key achievements detailed in the report.

The panel asked for more details about social work practice weeks and the link to supervision sessions and the challenges in covering children's and adult social work services.

The Principal Social Worker commented that the joint role requires the same skills and social work values across both areas of work. The role is supported by a good team but acknowledged the challenges in learning about new processes and different legislative requirement that applies to children's social work, as previous background was in adult social work. The Principal Social Worker commented on the benefits of covering both children's and adults and the opportunities for applying learning and practice from one area to another area.

The Principal Social Worker advised the panel that there are three social work practice weeks a year which have now been combined with the case file audit work. This provides the opportunity for learning and sharing knowledge among social workers.

The Principal Social Worker commented on the value of case work audits in supporting this process, for example, supporting social workers in their CPD work and social work re-registration. The learning and feedback from the first pilot practice week in May 2022 will be used help improve the next planned practice week in November 2022. The topics for the next session will include safeguarding adult reviews, child safeguarding practice reviews, complaints, and feedback.

The Principal Social Worker outlined the work being done in terms of improving the recruitment and retention of social workers.

The panel agreed to receive feedback on progress on the agreed actions in January 2023.

The panel commented that it would be helpful for the report to include an assessment of progress against actions for the key priorities for Principal Social Work detailed in the report for 2021 – 2022. The Principal Social Worker agreed to include the information in a future annual report.

The panel asked for examples of the Principal Social Worker being able to show a degree of independence in the role and challenge as referenced in the report.

The Principal Social Worker highlighted different examples of critical challenge in meetings with Leadership Teams and in the use of language, specifically the term 'service user' which is not considered to be appropriate. The aim will be to

incorporate these changes in approach into the strategic vision document for the service. The Principal Social Worker commented on the importance of having conversations with people about what matters to them when redesigning services.

The Director of Adult Services gave further examples of how the Principal Social Worker have demonstrated the independence of the role. The Director of Adult Services commented on the positive contribution of the role to the work of the Council.

The panel queried the support available to the Principal Social Worker. The Principal Social Worker advised the panel that there is team that supports her work across the Council and commented on the important contribution they made in the preparation of the annual report.

The panel thanked the presenter for the report and offered their congratulations on the progress and performance of the role as detailed in the annual report.

The agreed to endorse the report recommendations.

**Resolved:**

1. The panel comments on the draft Principal Social Worker Annual Report 2021 – 2022 to be noted.
2. The panel endorse the recommendations in the Cabinet report dated 27.7.22.
3. The Principal Social Worker agreed to present an update report to the panel in February 2023 on the progress of plans to further improve the recruitment and retention of social workers.

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# Our Commitment to All Age Carers

Scrutiny Panel 18 October 2022

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Agenda Item No: 7

## Carers - The Context

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- A Carer is someone who cares, unpaid for family or friend who due to illness, disability, poor mental health or an addiction needs support
- Carers UK estimate that nationally carers save the economy £132 billion per year, an average of £19,336 per carer
- 2011 Census, 27,000 people in Wolverhampton identified themselves as carer
- Carers UK estimate that nationally 4.5 million people became carers during the Pandemic
- Currently working with between 5000-7000 carers in the city including carers under 18 years
- The Local Authority has statutory duty to assess and provide support to carers



## Our Commitment to All Age Carers

Extensive engagement with carers and professionals led to 5 priorities being identified these align closely to Our City Under pinned by Core values ;

- Page 17
- Co-production
  - Continuous improvement
  - Connecting with communities
  - Equality and Fairness for all
  - Safeguarding



# The 5 Priorities

- Priority 1 – Employment & Financial Wellbeing
- Priority 2 – Services & Systems That Work for Carers
- Priority 3- Support Young Carers
- Priority 4 - Recognising & Supporting Carers in the Wider Community
- Priority 5 - Using Research & Evidence to Improve Outcomes for Carers

# Priority 1 – Employment & Financial Wellbeing

To achieve this the Council with partners will;

- Align support for carers with the Wolverhampton Pound approach, building and retaining local wealth in Wolverhampton to improve outcomes for local people including carers.

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Ensure carers have access to information about benefits, grants and financial management and financial support and advice.

- Identify and raise awareness of pathways into adult education and training for carers.
- Amongst employers, increase the awareness of carers legislation, how to identify carers and actions that can be taken to enable carers to balance their caring and employment responsibilities.

## Priority 2 – Services & Systems That Work for Carers

To achieve this the Council with partners will:

- Ensure carers and stakeholders understand carers rights to and benefits of an assessment, known in Wolverhampton as a Carer Conversation, and routinely offer assessments.

Enable access to clear, concise, accurate and relevant information and communicate changes to it.

- Ensure services are responsive to telephone contact and provide timely call back.
- Require services, including universal and preventative services, to make reasonable adjustments to enable carers to access services that meet their equality needs and at times that fits with their caring role.
- Develop the use of technology.
- Use social networks to empower and enable collaboration within communities.

## Priority Three- Support young carers-

To achieve this the Council with partners will;

- Improve the identification of hidden young carers in schools and by services which work with children, young people and their families.

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Increase schools' awareness and understanding of the impact of being a young carer on education and emotional wellbeing.

Increase schools' awareness of the services available to young carers so they can inform young carers about them.

- Ensure young carers know their rights regarding assessments and are always offered a young carers assessment.
- Enable young carers to obtain information safely and easily and provide information which is tailored to their needs and level of understanding.

## Priority 3- Support young carers ( continued)

To achieve this the Council with partners will;

- Ensure the voice of young carers included in delivery of the SEND strategy.
- Ensure the voice of young carers can influence information about the local offer.
- Support young carers to use the Youth Council to have a voice.
- Review the commissioned support service with a focus on the transition from young carer to adult carer and how emotional wellbeing is supported.
- Review the opportunities available to young carers to talk to other young carers including young carer clubs.
- Prepare young carers for transition to adulthood.
- Support young carers to access educational and out of school opportunities that help them develop and maintain friendships with their peers.
- Help young carers to have the same opportunities to access education, work, experience and training as any other young person.

## **Priority 4 - Recognising & Supporting Carers in the Wider Community**

To achieve this the Council with partners will:

- Identify hidden carers who are not engaged with services to ensure they know how to engage, what support is available and how to access it.
- Maximise opportunities to raise the profile of caring, to help people to self-identify, such as Carers Week and Carers Rights Day.  
Address the stigma some carers feel their caring role has.
- Work with voluntary and community organisations to reduce social isolation, increase the use of carer peer support and improve mental health and emotional wellbeing.
- Encourage carers to inform their Primary Care Surgery about their caring role so that appropriate support, for both physical and mental health and wellbeing, can be offered in a timely way.
- Ensure carers are offered appropriate support to safeguard them.

# Progress and next steps

- Focussed workshops are being held with carers and stakeholders to identify what actions are required to achieve the priority aims.
- Two workshops have taken place, further three planned for October and November.
- Council Employee Forum set up for carers.
- Development of multi- agency implementation plans to ensure priorities are delivered



# Next Steps

- Membership of Carer Steering Group to be extended
  - Further engagement events with carers of all ages including young carers under 18 years
- Page 25
- Full launch of Our Commitment to All Age Carers planned early December
- Events planned for Carers including Christmas meals, coffee mornings, links with Wolverhampton university, WV Active, promote Emergency carers card and concessions, after school events for young carers

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# Our Commitment to All Age Carers

2022

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# Foreword

**In Wolverhampton, there are 27,000 adults and 500 young people who identified as a carer in the 2011 census. There are 5,324 people in Wolverhampton who are known to the Council to care for an ill, frail or disabled family member, friend or partner. This shows how many hidden carers there are in the City.**

Carers play a vital role in society, not only in providing care to a person, but also helping the health and social care system to meet rising demand in care needs. Carers help to improve quality of life for the people they care for, family and friends. It is estimated that nationally, carers save the economy £132 billion per year, an average of £19,336 per carer.

Research has shown that for most people the experience of caring is rewarding, and many carers manage with help from their family, friends and communities. Some might need additional help and ask the Council, the NHS or both for support.

As part of the development of this plan, which sets out our commitment to carers of all ages living in Wolverhampton and sets out the strategic direction for support for carers, extensive consultation has been carried out with partners including, most importantly, carers, the experts by experience. The feedback, knowledge and experience of participants has shaped Our Commitment to All Age Carers plan.

Our Commitment to All Age carers describes the Council's priorities for carers and the cross-cutting values that will underpin all the work undertaken to implement it. Implementation will be co-produced by a steering group with representation that reflects the wide range of partners, all with a commitment to the provision of support for carers that enables them to maintain their own health and wellbeing while carrying out their caring role.

**Councillor Linda Leach**  
**Cabinet Lead for Adult Social Care**

## National context

The Government's vision for carers <sup>1</sup> is that they will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individuals' needs, enabling carers to maintain a balance between their caring responsibilities and a life outside caring, while enabling the person they support to be a full and equal citizen.

In 2018, the Government published the Carers Action Plan <sup>2</sup>, which builds on the rights for carers that were introduced by the Care Act 2014 <sup>3</sup> and Children and Families Act 2014 <sup>4</sup> and sets out the practical actions required by the Government and partners for carers to:

- be recognised and valued.
- have access to information and support to provide the best care they can.
- be helped to balance their caring responsibilities with their own employment.
- preserve their personal health and wellbeing.

Furthermore, the Government has committed to social care reform in England, including taking steps to ensure that carers have the support, advice and respite they need.

The carer population is not static. Each year millions of people take on caring responsibilities whilst caring comes to an end for millions of other carers as the person they care for recovers, increases independence, moves into accommodation with care or passes away. Three in five people will be carers at some point in their lives <sup>5</sup>.

In 2019, using population projections from the ONS and polling by Carers UK, it is estimated that 8.8 million adults in the UK were carers <sup>6</sup>.

Carers Trust 2020 <sup>7</sup> found that there are an additional 4.5 million unpaid carers in the UK since the coronavirus outbreak. In addition, 40% of young carers and 59% of young adult carers felt their mental health is worse since the Coronavirus outbreak.

Carers UK 2020 <sup>8</sup> found that 70% of unpaid carers they consulted had experienced negative impact on physical and mental health because of their caring responsibilities.

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1. UK Government (2010) Recognised, Valued and Supported: Next Steps for the Carers Strategy. Available at [Recognised, valued and supported: Next steps for the Carers Strategy \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/270000/Recognised_valued_and_supported_Next_steps_for_the_Carers_Strategy.pdf).
  2. UK Government (June 2018) Carers Action Plan 2018 - 2020 Supporting carers today. Available at [Carers Action Plan 2018 to 2020: Supporting carers today \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/354000/Carers_Action_Plan_2018_to_2020_Supporting_carers_today.pdf).
  3. UK Government (2014) Care Act 2014. Available at [https://www.legislation.gov.uk/ukpga/2014/23/pdfs/ukpga\\_20140023\\_en.pdf](https://www.legislation.gov.uk/ukpga/2014/23/pdfs/ukpga_20140023_en.pdf).
  4. UK Government, (2014) Children and Families Act 2014. Available at [https://www.legislation.gov.uk/ukpga/2014/6/pdfs/ukpga\\_20140006\\_en.pdf](https://www.legislation.gov.uk/ukpga/2014/6/pdfs/ukpga_20140006_en.pdf).
  5. Carers UK (2019) Policy Briefing August 2019 Facts About Carers. Available at [Facts\\_about\\_Carers\\_2019.pdf \(carersuk.org\)](https://www.carersuk.org/images/Facts_about_Carers_2019.pdf).
  6. Carers UK (2019) Juggling work and care. Available at [Juggling work and unpaid care - Carers UK](https://www.carersuk.org/news-and-media/news/post/51-juggling-work-and-care).
  7. Carers UK (2020) Carers Week 2020 Research Report: The rise in the number of unpaid carers during coronavirus (Covid-19) outbreak. Available at [https://www.carersuk.org/images/CarersWeek2020/CW\\_2020\\_Research\\_Report\\_WEB.pdf](https://www.carersuk.org/images/CarersWeek2020/CW_2020_Research_Report_WEB.pdf).
  8. Carers Trust (2020) Steep decline in mental health of young carers and young adult carers following Coronavirus outbreak. Available at <https://www.carers.org/news-and-media/news/post/51-steep-decline-in-mental-health-of-young-carers-and-young-adult-carers-following-coronavirus-outbreak>.

Carers UK 2019<sup>9</sup> showed that 7% of carers felt their caring responsibility had negatively impacted their work. This decreased from 10% in 2013 which may indicate employers' policies to support carers are having a positive impact.

The Children's Society 2022<sup>10</sup> reports that 800,000 young carers aged five to 17 care for an adult or family member in England. Twenty-seven percent (27%) of young carers aged 11-15 miss school. Young carers are often hidden - 39% said nobody in their school was even aware of their caring responsibilities.

Carers UK 2021<sup>11</sup> reported that carers who provide more hours of care per week were much more likely to be struggling financially. Whilst 84% of those providing under 10 hours a week said they can afford their bills without struggling, fewer (77%) of those caring for up to 35 hours a week said the same, and only around half (56%) of those providing more than 35 hours of care per week can afford their bills.



9. Carers UK (2019) Juggling work and care. Available at [Juggling work and unpaid care - Carers UK](#).

10. The Children's Society (2022)

<https://www.childrenssociety.org.uk/what-we-do/our-work/supporting-young-carers/facts-about-young-carers>.

11 Carers UK (2021) State of Caring 2021 A snapshot of unpaid care in the UK. Available at [State of Caring 2021 report - Carers UK](#).

## Local context

We are committed to supporting all our Carers in Wolverhampton and our plan for how we build on the support we have in place and improve our offer to all carers starts with this document.

Our Commitment to All Age Carers will contribute towards the delivery of the refreshed Our City, Our Plan which re-confirms the Council's commitment to supporting carers by making carers a specific focus within the priorities strong families where children achieve their full potential and fulfilled lives with quality care for those who need it.

To inform the development of our commitment, Public Health conducted a needs assessment. The assessment describes the profile of carers in Wolverhampton, assesses the uptake of services aiming to support carers and reviews the academic literature. These are the findings.

There are 5,324 adult carers registered with a Wolverhampton GP. Of these, around 230 are young adult carers, defined as aged 18 to 24 with caring responsibilities.

There are 95 young carers, defined as children under 18 with caring responsibilities, registered with a Wolverhampton GP.

The number of carers increased by 25% between 2019 and 2020 and by a further 24% between 2020 and 2021.

Most parent carers care every day, with 6% caring every other day and 2% caring weekly. Four percent care as required, depending on when other family members can also care.

Over two thirds (68%) of adult carers are female which is above the national average of 58%. There is an equal amount of female and male young carers.

The ethnicity profile of all age carers is representative of the general population of Wolverhampton.

More than half of all carers have one or more long term condition which means they have their own health needs that require management, as well as managing their caring role.

36% of adult carers in Wolverhampton have as much social contact as they would like, compared to 32.5% nationally.

People caring for someone living with dementia in Wolverhampton report a quality-of-life score of 7.3 which is the highest score in the Black Country.

The Council's quarterly carers newsletter is sent electronically to 1,380 people and a paper version is sent to 2,113 people. A further 750 copies are distributed at events and through partner organisations.

3,016 carers have an emergency card, provided to offer reassurance should they suddenly be taken ill and to identify that they have a caring role.

Eighty-nine carers use the home-based respite service, enabling them to have a break from their caring role and to support their wellbeing.

The Young Carers Service was supporting 141 young carers in July 2019, rising by 91% (128 young carers) to 269 young carers in December 2021.

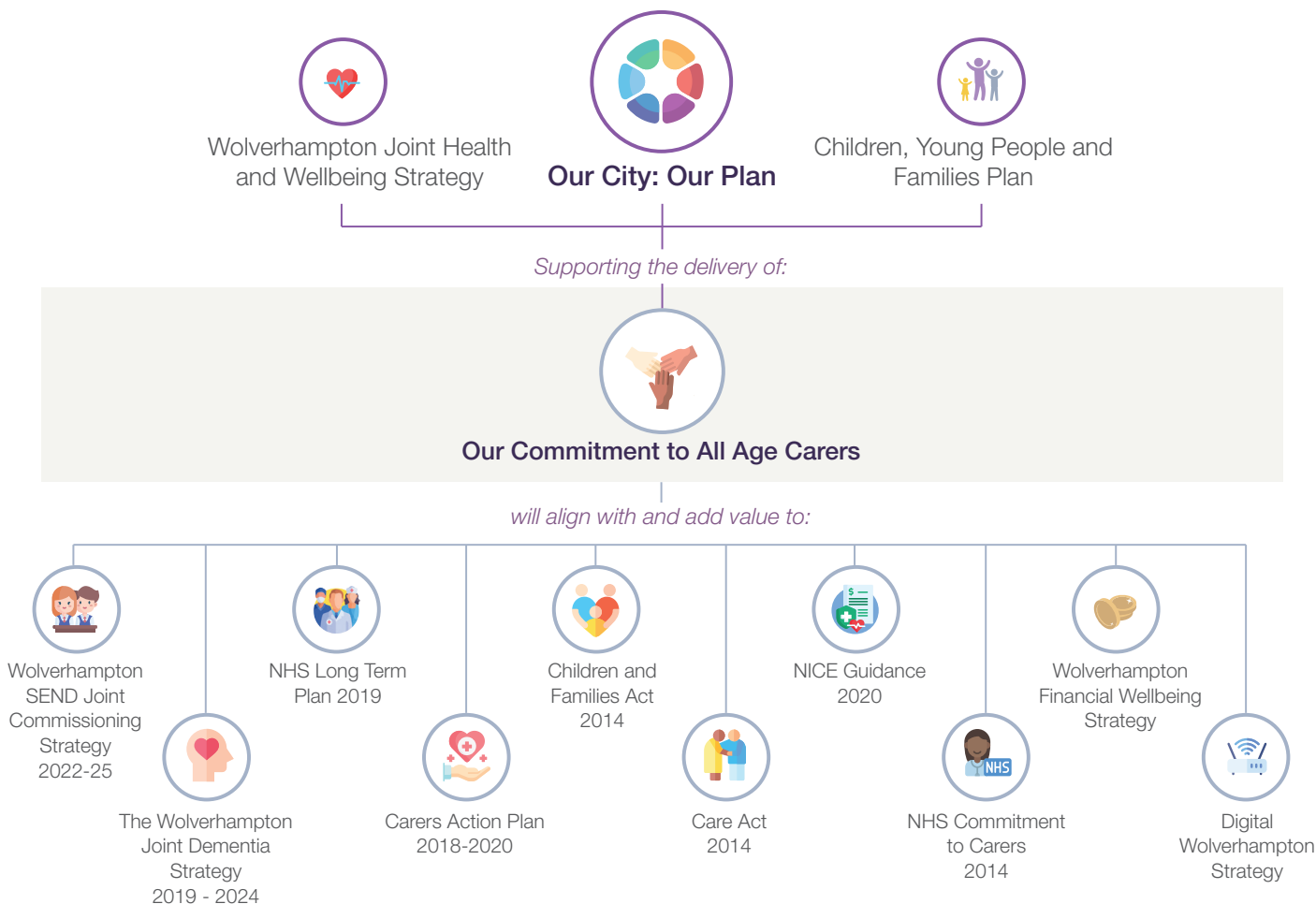


# The vision

Aligned with the Government’s vision for reforming adult social care in England, the refreshed Council Plan for 2022 and the redesign of Adult Services, this plan builds on the work driven by the strategy before it, acknowledging that the needs and priorities of carers have been impacted by the Coronavirus pandemic. It focusses on the main five priorities identified by partners; employment and financial wellbeing, services and systems that work for carers, support young carers, recognising and supporting carers in the wider community and building research and evidence to improve outcomes for carers.

The council is committed to working in partnership across the city to deliver the priorities, working with partners to connect people, places and communities to unlock potential and create change. Opportunities for partners to co-design and co-produce will be provided, developing long-term resilience and capacity to tackle inequalities. The development of a new community relationship will help to eliminate barriers and develop networks between carers and other partners in the city. We recognise that as we relight our city after the pandemic that our offer to carers will need to evolve and grow. We are committed to continuously listening to carers of all ages in order to strengthen our offer in line with our ambitious plans for the city. This plan will be regularly reviewed and refreshed.

**The following chart shows the national and local policy and guidance links to Our Commitment to All Age Carers.**



## What people have said

To determine the priorities of Our Commitment to All Age carers, a comprehensive eight-week consultation programme was carried out involving young carers aged under 18, young adult carers aged between 18 and 24, adult carers aged 25 and over, parent carers and professionals. A further seven-week consultation programme was then carried out to determine the actions that will be taken to implement the priorities. This is a summary of what people said.

Some carers do not like to be **identified** as a carer and choose not to be. Sometimes this is due to stigma. Others do not recognise themselves as a carer; they are someone's relation or friend. Where they are both, they want their relationship or friendship to be maintained, not to become only a carer. Better identification of hidden carers is required.

There are many types of carer, including young carers aged under 18, young adult carers aged 18 to 24, adult carers aged 25 and over, parent carers including for children with a special educational need or disability (SEND), sibling carers and sandwich carers (who have caring responsibilities for different generations e.g. children and parents). Carers each have **unique circumstances and needs**, some of which are niche and/or complex, that are individual to them, and service planning should reflect this.

Carers wish for a **whole family approach**, meaning support is provided to carers in the context of their families. When carers needs are being identified, the impact of their caring responsibilities on the whole family should be considered, and support personalised in accordance with this.

The service offer changed during the Coronavirus pandemic. Due to infection prevention control measures, less face-to-face services were available and there was an increased virtual offer. A **mixed offer** that uses both face-to-face and virtual options became normal. The changes that worked well should shape future provision, including the innovative use of technology, teamworking, peer support and keeping people safe from infection. Care should be taken to maintain the right balance to avoid creating loneliness and isolation. How services are provided should not exclude carers who are in digital poverty.

Carers experience problems with their **emotional wellbeing** because of their caring role. Problems include stress and worry due to thinking about the cared for person's health and future, constant anxiety about the person they care for, isolation and loneliness due to having less time to work, socialise and pursue hobbies, money worries due to reducing hours of work and care, medical and travel costs, lack of sleep due to caring during the night or worry, guilt, frustration and anger about their situation, low self-esteem, losing confidence in their ability to do anything except care and depression due to the challenges faced. Carers would like a choice of group and one-to-one interventions. Some carers would like to choose their own councillor who they feel comfortable with.

**Carer's assessments** (Conversations) should be easy to access and result in service provision when need is identified. Staff carrying out carers assessments should be trained and competent.

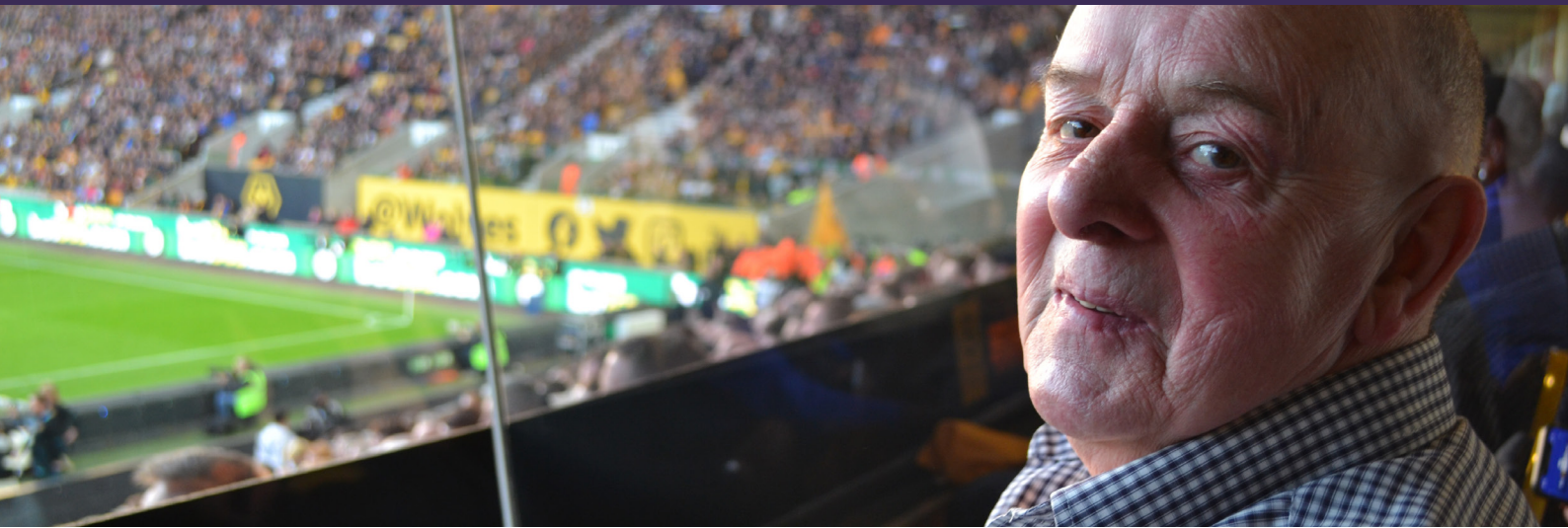
Carers would like **high quality planned and emergency respite** that they can trust will meet the needs of the person they care for. Services should be provided by well trained, competent staff who can meet each person's unique and sometimes complex needs. When planning respite, the needs of the whole family need to be considered together. There are many different reasons for requiring respite. The range of respite services needs to be flexible enough to meet all of them.

Carers value **time away** from their caring role to live an ordinary life. This means different things for different carers, with examples including time alone, to have hobbies, to self-care, to do homework with their other children, to meet with friends, to attend organised group and activities for carers, to develop relationships, to have a family of their own, to go away to university and to pursue a career.

There needs to be an increased **awareness of the caring role** within schools, GPs, employers and the public, including the impact on emotional wellbeing. They should be able to recognise the early warning signs of problems with emotional wellbeing. Schools, employers and GPs should promote the caring role amongst students and employees. Carers wish for understanding, empathy, peer support and the same ambition for them as for others. Flexible practices are required such as working from home, alternative working patterns, appointments at times that fit with the caring role and home visits.

Carers use a wide range of **technology** to support them in their caring role. Seventy-nine percent of carers use social media, 55% use Facebook, 22% use Instagram, 10% use Snapchat, and 8% use Twitter. Using a combination of face-to-face and virtual approaches enables people choice and maximises access to services and engagement. In line with this, the Carer Support Bulletin, which is highly valued by carers, is distributed in both paper form and electronically. Some carers and staff require training in the use of technology.





**Information** about services is very important. It needs to be up-to-date, available in one place, easily accessible to all, easy to understand and provided at the right time. Some people find it difficult to navigate information about the Local Offer and felt it is not enough to signpost to information. A discussion about the information and the opportunity to ask questions and seek advice is required.

The **transition** for young carers to adulthood needs to be improved. Areas for improvement include better identification of young carers, strengthening of the assessment process, offering the right support at the right time, making accessible information available prior to transition and not losing contact with carers during transition.

**Young carers** would like more opportunities to make friends, share their experiences with other young carers, have a break from their caring role and have a voice. They would also like schools, colleges and their friends and family to have a greater understanding of the impact of being a carer.

Carers would like better **financial support** to help with the increased costs they experience. Their caring role may limit their educational, work and training opportunities and therefore their income. Working carers may give up work or reduce the hours they work to carry out their caring role.

**Equality and diversity** should be an explicit and integrated part of the plan.

Services provided by different organisations need to be **better co-ordinated**, including health and social care services, Special Educational Needs and Disabilities (SEND) provision and services for young carers. Where the carer and the cared for person have different GPs, the GPs should work together.

Services need to be **responsive**. In a timely way, telephones should be answered, and answer machine messages should be responded to. When a call back has been arranged, it should be made on time. If information is promised, it should be provided on time. Named contacts and choice of key worker should be given whenever possible. Carers value the role of telephone calls in preventing isolation.

Many participants expressed an interest in being part of the **delivery** of Our Commitment to All Age Carers. Some would like to be part of the group that oversees the delivery of the plan, some in smaller groups that work on specific actions and some in the commissioning and review of services. Some carers would like to co-design services including writing service specifications.

## Priorities and themes

In response to legislative requirements, local knowledge and consultation, the Council's five priorities for carers are:

- Employment and financial wellbeing.
- Services and systems that work for carers.
- Support for young carers.
- Recognising and supporting carers in the wider community.
- Building research and evidence to improve outcomes for carers.

The following values will underpin all the work undertaken to achieve the priorities:

- **Co-production** – working with carers, their families and other partners, using each partner's knowledge and experience to help plan, design and develop services for carers.
- **Continuous improvement** – increasing the quality of services for carers through review and change.
- **Connecting with communities** – promoting resilient, inclusive communities, helping to reduce isolation, and building connections that enable carers to support each other.
- **Fair and equal** – addressing the inequalities experienced by carers.
- **Safeguarding** – ensuring that carers and the person they care for are safe



## Employment and financial wellbeing

### To achieve this, we will:

- Align support for carers with the Wolverhampton Pound approach, building and retaining local wealth in Wolverhampton to improve outcomes for local people including carers.
- Ensure carers have access to information about benefits, grants and financial management and financial support and advice.
- Identify and raise awareness of pathways into adult education and training for carers.
- Review the Council's Support for Carers policy and build understanding of the number of carers employed and how their caring and employment responsibilities can be balanced.
- Increase employer's awareness of carers legislation, how to identify carer employees and actions that can be taken to enable carers to balance their caring and employment responsibilities.
- Encourage employers to increase employee awareness of the carer role and promote peer support.
- Work with the Wolves Anchor Network to explore how they can support carers in the City.
- Engage with Wolves at Work to explore how carers can achieve their employment goals.
- Engage with Wolverhampton Cares to explore opportunities for carers who may wish to pursue a career in the care sector.



## Services and systems that work for carers

### To achieve this, we will:

- Promote a City-wide understanding of carers rights to and benefits of an assessment, known in Wolverhampton as a Carer Conversation, and always offer assessments.
- Enable access to clear, concise, accurate and relevant information and communicate changes to it.
- Promote the need for services, including universal and preventative services, to make reasonable adjustments to enable carers to access services that meet their equality needs and at times that fit with their caring role.
- Improve the assessment pathways for parent carers whose child is preparing for adulthood.
- Continue to develop a mixed approach to providing face-to-face and virtual services.
- Ensure the voice of carers is reflected in delivery of the Digital Wolverhampton Strategy to maximise digital inclusion.
- Use social networks to empower and enable collaboration within communities.
- Work with carers to review the role of a carers café/carers forum.
- Review carers need for advocacy and map the services available.
- Review the current short breaks and respite (planned and crisis) offer for carers, with a focus on the range of individual needs, a whole family approach and quality.
- Ensure that in emergency situations carers in need of support are supported as quickly as possible.
- Help carers to plan for an emergency, using their own resources wherever possible.
- Use personalisation to give carers choice and control.
- Map emotional wellbeing services and use this to identify and address gaps.
- Promote the device loan service to enable carers to try assistive technology that may help them.
- Enable carers to access training to maximise their digital skills and knowledge.



## Supporting young carers

### To achieve this, we will:

- Improve the identification of hidden young carers in schools and by services which work with children, young people and their families.
- Increase schools' awareness and understanding of the impact of being a young carer on education and emotional wellbeing.
- Increase schools' awareness of the services available to young carers so they can inform young carers about them.
- Ensure young carers know their rights regarding assessment and are always offered a young carers assessment.
- Enable young carers to obtain information safely and easily and provide information which is tailored to their needs and level of understanding.
- Ensure the voice of young carers is included in delivery of the SEND strategy.
- Ensure the voice of young carers can influence information about the Local Offer.
- Support young carers to use the Youth Council to have a voice.
- Review the commissioned support service with a focus on the transition from young carer to adult carer and how emotional wellbeing is supported.
- Review the opportunities available to young carers to talk to other young carers including young carers clubs.
- Prepare young carers for transition to adulthood.
- Support young carers to access educational and out of school opportunities that help them develop and maintain friendships with their peers.
- Help young carers to have the same opportunities to access education, work experience and training as any other young person.





## Using research and evidence to improve outcomes for carers

### To achieve this, we will:

- Review the impact of the Coronavirus pandemic, both positive and negative, including on emotional wellbeing and use the findings to influence changes to services and systems.
- Maintain up to date knowledge of the technology that is available to support carers and promote the use of it.
- Maintain up to date knowledge about the research undertaken by other local and national organisations and use this to influence changes to services and systems.
- Set up an implementation group with carer representatives and partner agencies to enable co-design and co-production.
- Collect information on and analyse the carer profile, including equality information, and use this to plan services accordingly.
- Develop engagement opportunities including for GPs, schools and communities.

## Recognising and supporting carers in the wider community

### To achieve this, we will:

- Work with partners to identify hidden carers who are not engaged with services and provide information on the support available and how to access it.
- Maximise opportunities such as Carers Week and Carers Rights Day to increase understanding of the caring role and help people to identify as a carer.
- Encourage carers to inform their GP about their caring role so that appropriate support for both physical and emotional wellbeing can be offered.
- Address the stigma some carers feel their caring role has.
- Work with voluntary and community organisations to reduce social isolation, increase the use of carer peer support and support emotional wellbeing.
- Offer carers safeguarding advice and support when appropriate.
- Promote and increase take-up of the emergency card.
- Ensure the carer voice can influence the delivery of the City Housing Strategy and access to the Disabled Facilities Grant.
- Ensure the carer voice influences the Council's All Age Travel Assistance Policy.
- Consider the opportunities available for carers to access leisure and social offers in the City.
- Explore the introduction of the carer passport scheme.

## Monitoring performance and accountability

Partnership working is a key theme running through this strategy. During its development, many participants expressed an interest in being involved in the implementation of the plan. Through the involvement of partners including carers, health and care services, the voluntary and community sector, education and others, a whole system approach to improving outcomes for carers will be taken. An implementation plan to support Our commitment to All Age Carers plan will be co-produced, identifying the actions required for each priority and for each action the measurable target, responsibility and timescale.

An implementation partnership will oversee delivery of the implementation plan, enabling an ongoing conversation with opportunities for continuous influence. The partnership will be supported by smaller groups responsible for specific actions within the implementation plan. The partnership will also monitor and report the impact of the actions.

Our Commitment to All Age Carers is best aligned with the governance and scrutiny provided by Health and Wellbeing Together Board and therefore the implementation partnership will report to this Board.

Robust contract and performance management arrangements will be included in the commissioning arrangements for services for carers, to include outcomes monitoring and regular consultation with carers to shape the delivery and development of services.



## Further information

### Legislation and national strategies

Department of Health and Social Care (1 December 2021) People at the Heart of Care: adult social care reform white paper. Available at <https://www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper>.

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## Related local strategies

City of Wolverhampton Council (March 2022), Digital Wolverhampton Strategy. Available at <https://www.wolverhampton.gov.uk/sites/default/files/2022-03/Appendix%201%20-%20Digital%20Wolverhampton%20Strategy.pdf>.

Wolverhampton SEND Partnership Board (2022) Wolverhampton SEND Joint Commissioning Strategy 2022-25. Available at [https://search3.openobjects.com/mediamanager/wolverhampton/asch/files/wolverhampton\\_joint\\_commissioning\\_strategy\\_mar\\_22.pdf](https://search3.openobjects.com/mediamanager/wolverhampton/asch/files/wolverhampton_joint_commissioning_strategy_mar_22.pdf).

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Wolverhampton WV1 1SH

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# OneWolverhampton

Working together for better health and care

## Summary Winter Plan

# Current Position

- Royal Wolverhampton NHS Trust's modelling predicts a deficit of 52 beds in January 2023. This is without any mitigation or additional capacity
- The following assumptions have been made:
  - 4% growth in non-elective activity
  - Medically fit for discharge (MFFD) reduces by 30% from an average of 100 to 70 patients
  - Surgical capacity includes the need for additional 10 beds as a result of the Walsall partnership for Urology
  - Elective and Cancer activity continues throughout the winter
  - Forecast rate of beds that could not be available for use due to infection prevention (Covid, Norovirus, Flu)





# Reducing ambulance handover delays and admission avoidance

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# Primary Care

- **Funded:**
  - Reviewing the Enhanced Health in Care Homes approach to minimise avoidable conveyances to hospital
  - Pro-active care planning around frailty
  - Increasing referrals to the Community Pharmacist Consultation Services (CPCS)
  - Increasing access to routine appointments and releasing clinical time through alternative delivery of the Covid-19 vaccination programme (e.g. community pharmacies) and additional roles and reimbursement scheme (ARRS) roles
- **Funding required:**
  - Enhanced and extended access to provide an additional 96 slots (pre-booked and same-day) across Wolverhampton on a Sunday – providing a 7-day service
  - The development of a primary care-led paediatric Wolverhampton respiratory hub
  - Exploring initiatives to support the care for respiratory illnesses in a community setting (e.g. the provision of pulse oximeters and communications resources) and a Primary Care Virtual Ward



# Community Services

- **Funded:**

- Increase of 82 beds across Virtual Ward pathways, including: respiratory, frailty, paediatrics, palliative care and those awaiting diagnostics
- 24-hour Urgent Care Response (UCR) is already operational and delivered by the Rapid Intervention Team (RITs)
- Continue current commissioning arrangement with St John Ambulance for falls service

- **Funding required:**

- Expansion of the Rapid Access to Social Care (RASC) team to support patients who would otherwise be admitted for social concerns and expedited discharge of patients. A trial is planned to allow the team to deliver medications.
- Expansion of the Care Co-ordination team as a Single Point of Access (SPA) for primary care, care homes and other services across Wolverhampton to provide a 24-hour first line of response (additional funding required to support telephony requirements and additional call-handling staff)



# Acute Services

- **Funded:**

- The Children and Young People's service are scoping a GP access HOT advice pathway to support the management of children and young people in the community without the need to attend the Emergency Department

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- **Funding required:**

- Ambulance Receiving Centre (ARC) will become fully operational on the 28<sup>th</sup> November. This will create an additional eleven ambulance offload spaces, increasing the total to 28 (Capital funding assured, additional revenue funding required for staffing)



# City of Wolverhampton Council

- Funded:
  - Maintain the hospital avoidance beds to prevent unnecessary hospital admissions. This service can also support patients who require additional support following a Community review, but do not require an inpatient hospital stay

Page 53

## Funding required:

- Increasing the capacity of the Telecare Responder Service to enable, help or support individuals to remain at home where appropriate
- Expansion of the hospital avoidance beds provision



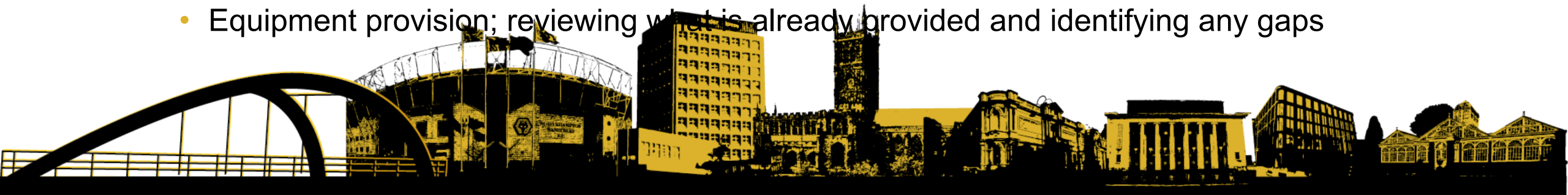
# Place Partners

- Compton Hospice:
  - Funding required:
    - A trial has taken place with a number of care homes to support advance care planning. Early data suggests that across the 9 care homes involved, the number of patients conveyed to hospital has reduced by 895 attendances and the number of admissions by 54 compared to baseline.
    - Plans are in place to support further care homes

## Wider multi-agency work:

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- Funded
  - Multi-agency delirium pathways to enable everyone to be clear about the role they play in identifying treating and managing delirium within their setting, preventing an avoidable hospital admission
- Funding required:
  - Additional support services for unpaid carers, particularly to avoid burnout and crisis
  - Falls prevention; reviewing and building on existing services and ensuring better integration with wider partners such as the Fire Service
  - Equipment provision; reviewing what is already provided and identifying any gaps



# Improving patient flow and discharge

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# Acute Services

- **Funded:**

- Additional 10 surge beds to be opened across A7 and A8
- Push Pilot for ambulance recovery based on the North Bristol model
- Expansion of the Same Day Emergency Care (SDEC) provision, to include surgical, head and neck and gynaecology functions
- Frailty SDEC is operational and providing a 7-day service with capacity for 8 patients
- Discharge lounge in operation 7-days a week
- Ring-fenced ward to support the continuation of the Cancer and Elective Recovery Plan

- **Further funding required:**

- There are ambitions to support the wider implementation of the HomeFirst approach in partnership with the City of Wolverhampton Council
- Increased Rapid Access to Social Care (RASC) to support expedited discharge and social care of patients





# Acute Services

- Reduction in Medically Fit For Discharge (MFFD) patients by 30% through:
  - Funded:
    - Increased UCR
    - Daily huddle rounds with a focus on multi-disciplinary team (MDT) working
    - Daily review of complex patients, including those who are long length of stay (LOS)
    - Implementing a process of weekend discharges to ensure parity with weekday discharges
  - Further funding required:
    - Enhanced Care co-ordination
    - Additional step-down beds



# City of Wolverhampton Council

- Funded:
  - Continuation (through additional funding in 2022/23) of the HomeFirst model for all pathway 1 and 2 discharges, based on DHSC guidance and additional social care and therapy support
- Adult Social Care Discharge Fund:
  - To help people get out of hospitals and into social care support, the government is launching a £500 million Adult Social Care Discharge Fund. The Wolverhampton allocation is not yet known. Work is underway to develop a series of initiatives and plans to use this money, to avoid delay when allocation is made.



# Place Partners

- British Red Cross

- Funded:

- The funding from NHSE ended June 2022. The ICB has funded the gap from July to November and NHSE will continue to fund from November. This is a short-term service for pathway 0 patients, those who do not meet the minimum criteria for social care, but require a level of support to be resettled at home, aiming to reduce potential readmissions



# Governance

- This presentation provides an overview of the winter planning work that is ongoing in Wolverhampton
- A comprehensive Winter Plan has been created, which provides a detailed list of the initiatives presented here, and a detailed delivery plan
- The progress, outcomes and effectiveness of this delivery plan will be monitored via the Urgent and Emergency Care Strategic Working Group, which is chaired by the COO of The Royal Wolverhampton NHS Trust – Gwen Nuttall
- Support has been identified from within OneWolverhampton, to support the monitoring and delivery of the Wolverhampton Winter Plan using a project management approach



# Funding Arrangements and Risks

- Our detailed, written plan highlights schemes that are currently funded, and those that would be possible with additional funding
- Work is ongoing to identify additional funding required for the delivery of the plan
- There are a number of risks associated with the delivery of our winter plan

• These include:

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- Lack of funding
- Short timescales for implementation and delivery
- Recruitment of appropriate workforce
- Workforce illness and absence – including potential Covid and Flu spikes
- Legislative changes



# Funding Gaps

Scheme	Funding Required	Potential Funding Stream
Extended Access in Primary Care	£264,000	National / ICB System Funding
Development and Implementation of a Primary Care Paediatric Respiratory Hub	£150,000	Winter Funding / ICB Funding
Respiratory Illnesses – Provision of Paediatric Pulse Oximeters	£3,600	Winter Funding
The Piloting of Primary Care Virtual Wards	TBD	Winter Funding
Responder Service Expansion	£70,000	Winter Funding
Compton Advance Care Planning work with Care Homes	£10,560	Winter Funding
Ambulance Receiving Centre	£275,000	Capital funding is in place. Revenue funding required to support staffing (12.5 WTE across bands 5 – 7). Winter Funding.
Rapid Access to Social Care Expansion	TBD	Winter Funding – revenue costs of staffing
Enhanced Care Co-ordination	£57,000	£57,000 for telephony and further funding for additional call handlers (TBD) Winter Funding.
HomeFirst	TBD	Social Care Discharge Fund
Adult Social Care Discharge Fund	TBD (Cost of nursing stepdown beds)	Potentially to be funded by Social Care Discharge Fund or Winter Funding
Rapid Access to Social Care (RASC)	£57,000 (plus costs of call handlers)	



# Fulfilled Adult Lives Scrutiny Panel

18 October 2022

<b>Report title</b>	Transforming Adult Services Programme (TASP) Annual Report 2021-22	
<b>Cabinet member with lead responsibility</b>	Councillor Linda Leach Adults	
<b>Wards affected</b>	All	
<b>Accountable director</b>	Becky Wilkinson – Director for Adult Services (DASS)	
<b>Originating service</b>	Adult Services	
<b>Accountable employee(s)</b>	Meena Dulai	Head of Adult Improvement
	Tel	01902 556754
	Email	Meena.dulai@wolverhampton.gov.uk
<b>Report to be/has been considered by</b>	Joint Leadership Team	6 October 2022
	Scrutiny Panel	18 October 2022
	Councillor Briefing	24 November 2022
	Strategic Executive Board	1 November 2022
	Executive Board	7 November 2022

## Recommendation(s) for action or decision:

The Scrutiny Panel is recommended to:

1. Review and comment on the content of the Transforming Adult Services Programme 2021-22 Annual Report.
2. Receive the 2022-23 Annual Report in September 2023.

## Recommendations for noting:

The Scrutiny Panel is asked to note:

1. The achievements and successes for this reporting year against programme outcomes.
2. The priorities for the next reporting year 2022-23.

## **1.0 Purpose**

- 1.1 The purpose of this report is to provide the Fulfilled Adult Lives Scrutiny Panel with an overview of the first Transforming Adult Services Programme 2021-22 Annual Report (see Appendix 1) including key achievements, progress against outcomes and priorities for the next reporting year.

## **2.0 Background**

- 2.1 The 2021-22 Annual Report is the first for the Transforming Adult Services Programme (TASP).
- 2.2 Since the introduction of the Care Act, Adult Social Care services throughout England and Wales have been on a journey to ensure that they are able to deliver quality services with positive outcomes for people who need care and support – all in line with new legislation.
- 2.3 Nationally, the sector has faced significant challenges in the past few years, particularly financially through Reform and in the wake of the Coronavirus pandemic. In meeting these challenges, Wolverhampton is embracing the opportunity to transform through working collaboratively and creatively, both internally and externally, to achieve its vision.
- 2.4 In 2016, the then named Transforming Adults Social Care Programme (TASC), was established - initially as part of a response to City of Wolverhampton Council's (CWC) Medium Term Financial Strategy (MTFS).
- 2.5 The TASC Board aimed to coordinate the effective delivery of key projects that not only supported the MTFS but importantly, improved life outcomes for adults across the city.
- 2.6 Since then, the programme has gone through several reviews of its governance, vision and outcomes and has subsequently repurposed itself as TASP to reflect the broader transformation of services outside of Social Care.
- 2.7 Following a final programme refresh in early 2021, an updated and repurposed TASP Mandate, including vision and outcomes, and for the first time, a detailed programme business case was approved by the Board.
- 2.8 From this, the first TASP Annual Report has been produced to evidence the ongoing transformation journey for the service and to celebrate successes and learning from the past 18-months with stakeholders.

## **3.0 Progress, options, discussion, etc.**



- 3.1 2021-22 is the first Annual Report for TASP. The programme has been established since 2016 and has changed direction several times in recent years with changes in leadership and most significantly, having to navigate services through the Coronavirus pandemic.
- 3.2 TASP has taken the opportunity to reflect, refresh and repurpose its innovative transformation journey. There remains a backdrop of changes including reform, re-design and integrated care systems, but the Board remain committed to improving services for adults in the city and ensuring that people are able to live long, healthy and independent lives.
- 3.3 The first Annual Report documents examples, case studies and project successes as part of the programme. The last 18-months of transformation has seen projects close and new projects initiated, all aligned to seven agreed outcomes.
- 3.4 Included in the report is an assurance section evidencing how, over the past 18-months, TASP has self-assessed quality, and compliance of its projects against corporate project methodology standards.
- 3.5 The report includes an SRO and DASS appraisal which both capture praise for positively moving the programme forward recognising that the foundations to a successful programme need to be well established and embedded as TASP matures. Both SRO and DASS appraisals highlight exciting times ahead for Adult Services particularly as co-production and technology enabled care initiatives develop.
- 3.6 TASP has seven agreed outcomes, five aimed at providing a clear scope for transformation projects, two aimed at contributing to wider service transformation with use of a project framework. Successes this year include:
  - 3.6.1 The launch of the Early Help and Prevention project aimed at preventing, reducing, and delaying the need for long term care and support through an early help offer that is coordinated, needs based and builds on the strengths and assets of local communities.
  - 3.6.2 Development of the first data and insights dashboard as part of the Disability Model Transformation (DMT) project to assist the team and Service Managers with understanding the complex needs of young disabled adults and make informed decisions about project outputs.
  - 3.6.3 Successful transition of the Community Equipment Re-design (CER) project into business as usual which implemented a new service operating model, a new team structure, improved purchasing contracts and procedures with improved equipment maintenance – all creating savings of almost £50,000.
  - 3.6.4 Implementation of The Three Conversations © social care practice which, through a number of Innovation Sites, embedded new ways of strength-based working. The project saw increased worker moral and satisfaction, improved timescales for ‘conversations’ with a shift away from assessments and saw a year-on-year reduction in Adult Social Care complaints.

- 3.6.5 Development and regular use of a 'System Flow Dashboard' as part of Better Care Fund reporting and used by the Place Based Partnership – One Wolverhampton, which represents health and social care. The dashboard tracks and monitors a patient's journey to identify and reduce pinch points that would lead to delayed transfer days from hospital to home. Use of the dashboard has enabled data informed decisions and saw Wolverhampton move from the bottom performing quartile for delayed transform of care to the top quartile.
- 3.6.6 Implementation of a 24/7 Approved Mental Health Professional Hub which merged daytime and night-time teams into one improving the handover of patients amongst staff and quicker assessments for people in crisis.
- 4.1 Finally, the report concludes with how the team and the Board have acknowledged learning from the past year and priorities for 2022-23 which include delivery of the phase 2 re-design transformation programme, integrated working with internal services and external partners and a co-produced, co-production approach for adult services.

#### **4.0 Questions for Scrutiny to consider**

- 4.1 No further questions.

#### **5.0 Financial implications**

- 5.1 There are no direct financial implications of this report and financial impact of the projects within TASP are discussed within the Annual Report. Any costs as a result of the Annual Report are met from the existing budgets attached to each individual project.  
[JB/07102022/L]

#### **6.0 Legal implications**

- 6.1 There are no legal implications in the context of this report.  
[SB/08102022/N]

#### **7.0 Equalities implications**

- 7.1 TASP remains committed to equalities, diversity, and inclusion. Each project agreed under the programme, and in accordance with the corporate project management methodology, has to complete an Equalities Impact Assessment (EIA) which goes on to be presented at a Project Assurance Group (of which Equalities colleagues are a member of).
- 7.2 An EIA will define the impact of project objectives in the context of protected characteristics.

#### **8.1 Climate change and environmental implications**

8.1 There are no environmental implications in the context of this report.

## **9.0 Health and Wellbeing Implications**

9.1 Each project under TASP has an agreed set of objectives that contribute to the outcomes set out in the Annual Report. Should project objectives have a health and wellbeing focus, impact of these will be included in future Annual Reports or as evidence presents.

9.3 Ultimately, TASP is a programme that aims to improve outcomes for adults and their families and keep people living independently which is assumed to have a positive impact on health and wellbeing.

## **10.0 Human resources implications**

10.1 There are no human resources implications in the context of this report.

## **11.0 Corporate landlord implications**

11.1 There are no corporate landlord implications in the context of this report.

## **12.0 Covid Implications**

12.1 Covid-19 and learning from the pandemic will inform priorities under TASP. The Board are committed to ensuring that outcomes are aligned to the care and support needs of our communities as a result of Covid-19.

## **13.0 Schedule of background papers**

13.1 None.

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# Transforming Adult Services Programme 2021 – 2025

# Setting the scene

Since the introduction of the Care Act, Adult Social Care services throughout England and Wales have been on a journey to ensure that they are able to deliver quality services with positive outcomes for people who need care and support – all in line with the new legislation.

Nationally, the sector faces significant challenges, particularly financially and in the wake of the Coronavirus pandemic. In meeting these challenges, Wolverhampton has embraced the opportunity to review and refresh its vision for Adult Services transformation and the prospect of working collaboratively and creatively, both internally and externally, to achieve its goals.

Refreshing the programme starts with its mandate.

## It will set out:

- Agree the vision and outcomes for transformation over the medium and long term
- Agree the strategic narrative and context for stakeholders
- Pave the way for the first Annual Report 2021-22

# Phased approach to transformation

## Transformation Phase 1 (April 2021 – September 2022)

### Phase 1 will:

- Run in parallel to an Adults Services re-design. The aim of TASP during this phase will be to support the Board in effectively delivering projects (at all stages of the Lifecycle) that are controllable, not dependent on a service re-design and where positive change and improvement can be made sooner.
- Respond to the Relighting our City Plan
- Prepare for any transformation plans following a service re-design as part of Phase 2.

## Transformation Phase 2 (September 2022 – March 2025)

### Phase 2 will:

- Support the Board and a redesigned service in delivering transformed business capabilities through agreed projects

# Adult's Services Successes



A successful and sensitive home closure programme



Successful development and promotion of the community offer

Reduced admissions to in-patient treatment and increasing and timely discharges



A significant improvement in Delayed Transfer of Care



Modernisation of Day Services and Opportunities using renovated buildings and community facilities

Implementation of the Adult's Multi-agency Safeguarding Hub (MASH)



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Transformation of Community Equipment Service



Improved residential and nursing placements across the city



Successful embedding of Reablement Services into the Discharge to Assess process



Development of the adult and young carer offer



Improved Deprivation of Liberty Safeguarding performance



Improvement in number of people with learning disability in paid employment



Successful implementation of the 3 Conversations® practice model



Innovative work on testing predictive analytics and using data science to manage future demand



Development and implementation of a 24 hour AMHP Hub

Strong and efficient partnership work across the city in response to the Coronavirus pandemic



Launch of the Wolverhampton Cares brand and partnership forum



iMPower review and initiation of five Adult Services Re-design projects



Wolverhampton announced as a Charging Reform Trailblazer





# Strategic drivers

## Our City: Our Plan

### Fulfilled lives for all with quality care

- Support the Health and Social Care system to respond to and recover from Covid-19
- Maximise independence for people with care and support needs
- Work as a system to make sure people get the right support at the right time

### Healthy, inclusive communities

**Our Principles:** Climate conscious, Driven by digital, Fair and equal.

## The Care Act 2014

Under the Care Act 2014, Local Authorities have duties to make sure that people who live in their area:

- can get the information and advice they need to make good decisions about care and support
- receive services that prevent their care needs from becoming more serious, or delay the impact of their needs
- have a range of provision of high quality, appropriate services to choose from

There are many chapters to the Care Act which drive our legal responsibilities to provide care and support to adults with eligible needs.

These chapters should be called upon dependent on the scope of projects to ensure that transformation contributes to the lawful delivery of care and support.

## Wolverhampton City Strategy 2011-2026

### Empowering People and Communities through the following priorities:

1. Undertaking early intervention and prevention
2. Supporting financial inclusion
3. Encouraging healthier lifestyles and independence at all stages of life
4. Supporting more people to be active within their communities
5. Encouraging the voluntary and community sectors

# What's important to local people

***'Think family'** – who are the people supporting adults with care and support needs? How are they? If a member of a support network is not well, this can cause stress for the person being cared for, how can we help?*

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***'Early help is important'** – avoid crisis, all services from community support through to blue lights should be able to help someone in need at the earliest possible stage.*

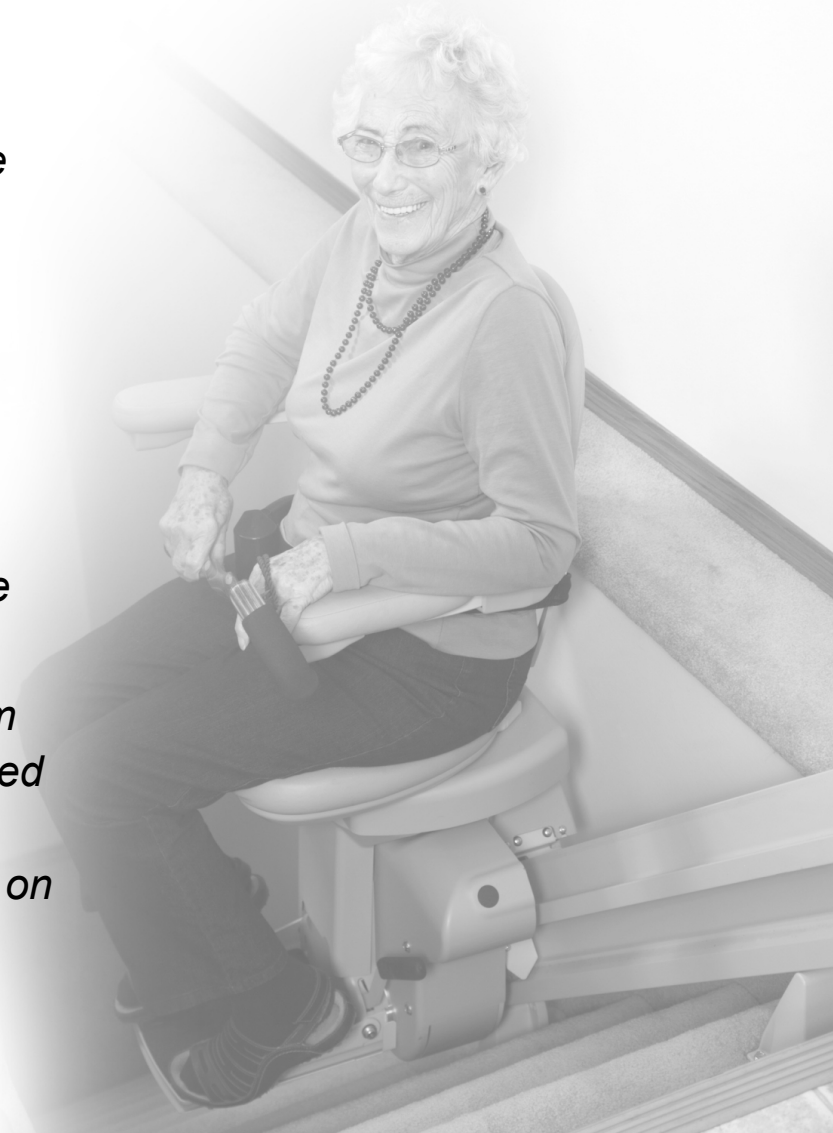
***'Ensure inclusive practice'** – be aware of protected characteristics, use sensitive and appropriate language depending on who you are supporting, be empathetic.*

***'Be curious'** – are you really fine? Are there any invisible needs?*

***'Be person centred'** – get to know people, understand their needs, understand the needs of their support network.*

***'Improved access to information'** – help people to help themselves and be consistent.*

***'Continuity of care'** – particularly from childhood to adulthood. Having a trusted person or professional who you can regularly keep in contact with and rely on makes all the difference.*



# Vision

The Transforming Adult Services Programme will have **people** at the heart of all its activity – from the voice of **individual person** who is accessing our support, or the **family member** who works around the clock to care for a loved one to the **team** who continuously go above and beyond in their duties and the many **community groups** and **volunteers** that deliver crucial services on our behalf.

Page 15  
Our approach to transformation will be **innovative, bold** and **creative**. We will continue to **embrace new ways of working** with our communities to deliver **equitable** and **sustainable** services right across the city that are based on **knowledge** and **need**.

Through the transformation programme, we will continue to **work together** with our partners in health and the third sector and work internally as **OneCouncil** to deliver the very best quality and personalised care that maintains **independence for adults**, keeps them **connected** to a support network and **safeguards their welfare**.

Our **workforce** will be one of **stability** and **skill** and who share the vision for transformation. We will give them the tools and resources they need to be the **best in their field** and our practice model will enable **confidence** and **trust** for both our organisation and the people we support.

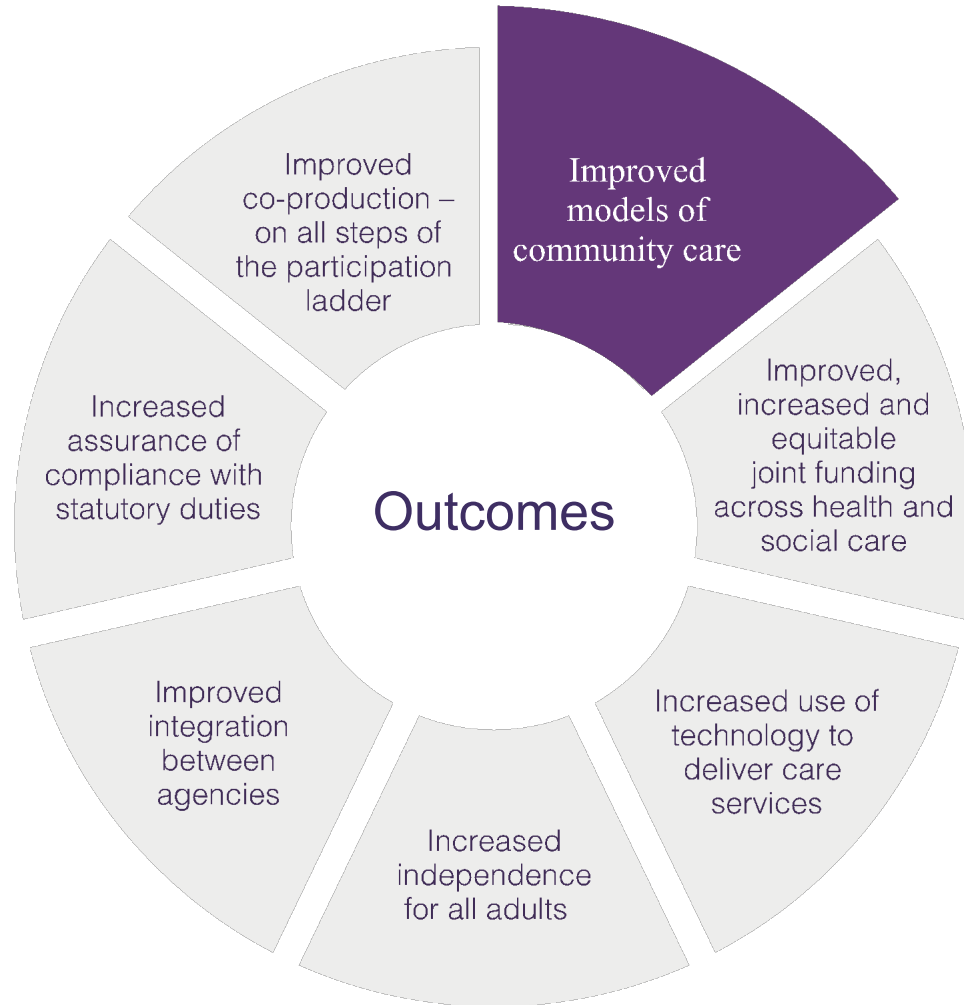
**Technology**, data analysis and digital transition will be immediate priorities. Adult Services will lean on national, regional, and local **best practice** to be **brave in its approach** to assisted living. Aspiring to be at the forefront of technology enabled care, Wolverhampton will explore a variety of ways to support adults and ensure **inclusion** at all stages.

Driving the transformation programme will be a **robust market position statement, financial rigor** and **strong, transparent leadership**.

Finally, through the Board and its associated transformation projects, we will strive to **effectively communicate** with key stakeholders' our **progress, successes**, and embrace **continuous learning**.

# Programme Outcomes

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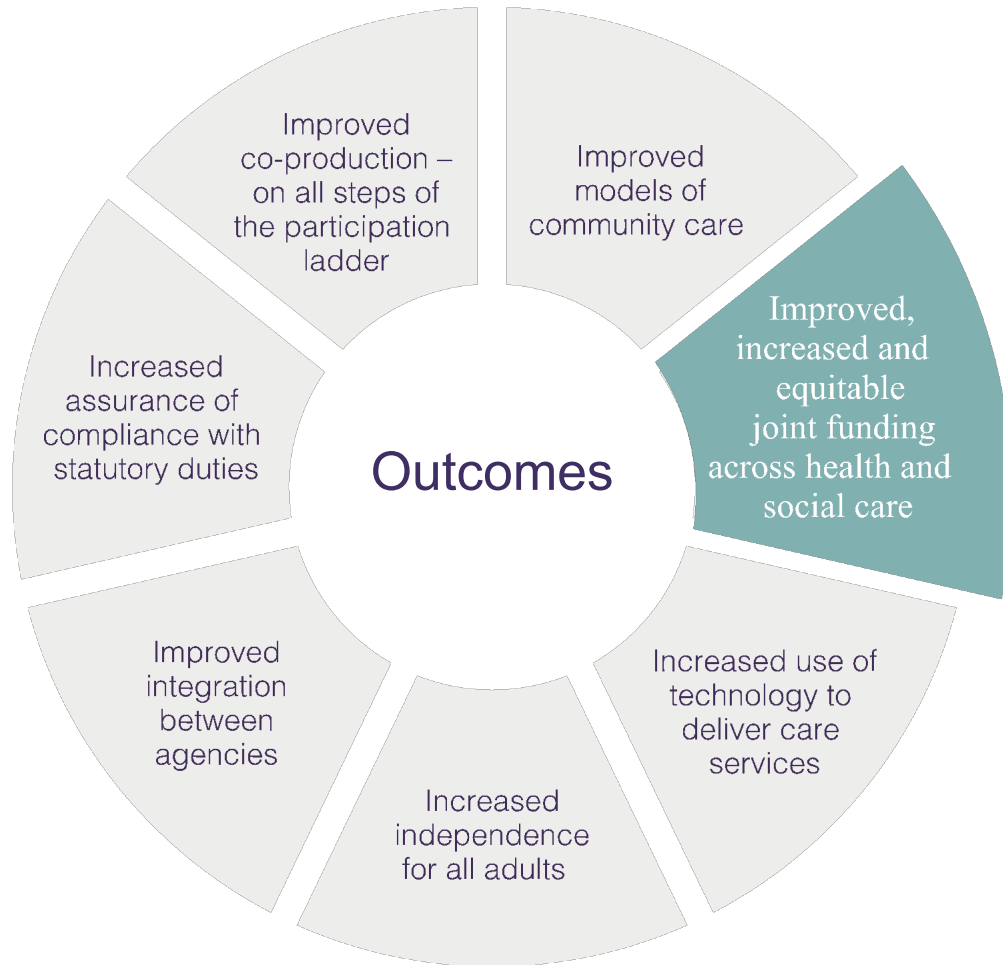


## Objectives

- Increased digital contact
- Increased community resilience
- Increased community connections
- Reduced isolation
- Improved wellbeing
- Reduced dependency on care and nursing homes
- Improved early help

# Programme Outcomes

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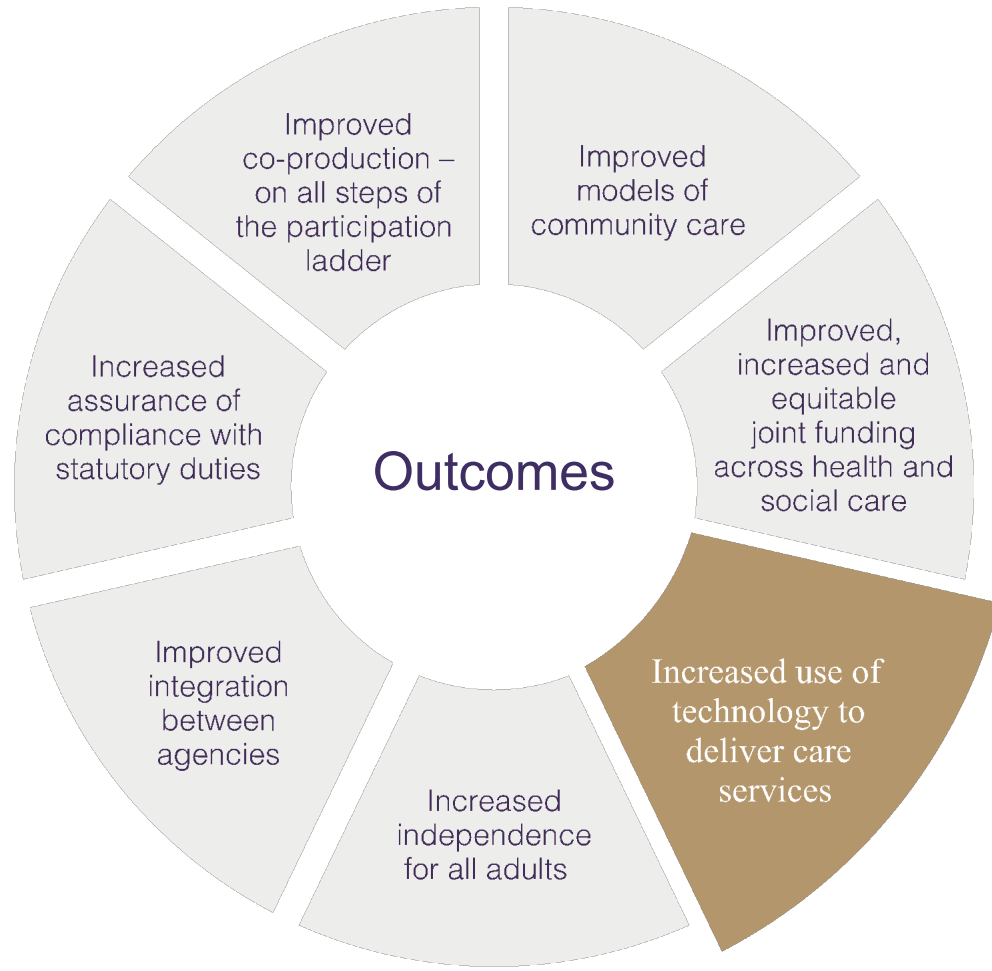


## Objectives

- Improved pathways
- Increased equity in funding for all adults who have care and support needs - no matter how complex
- Increased skills and knowledge for social workers who work with adults who have learning or physical disabilities

# Programme Outcomes

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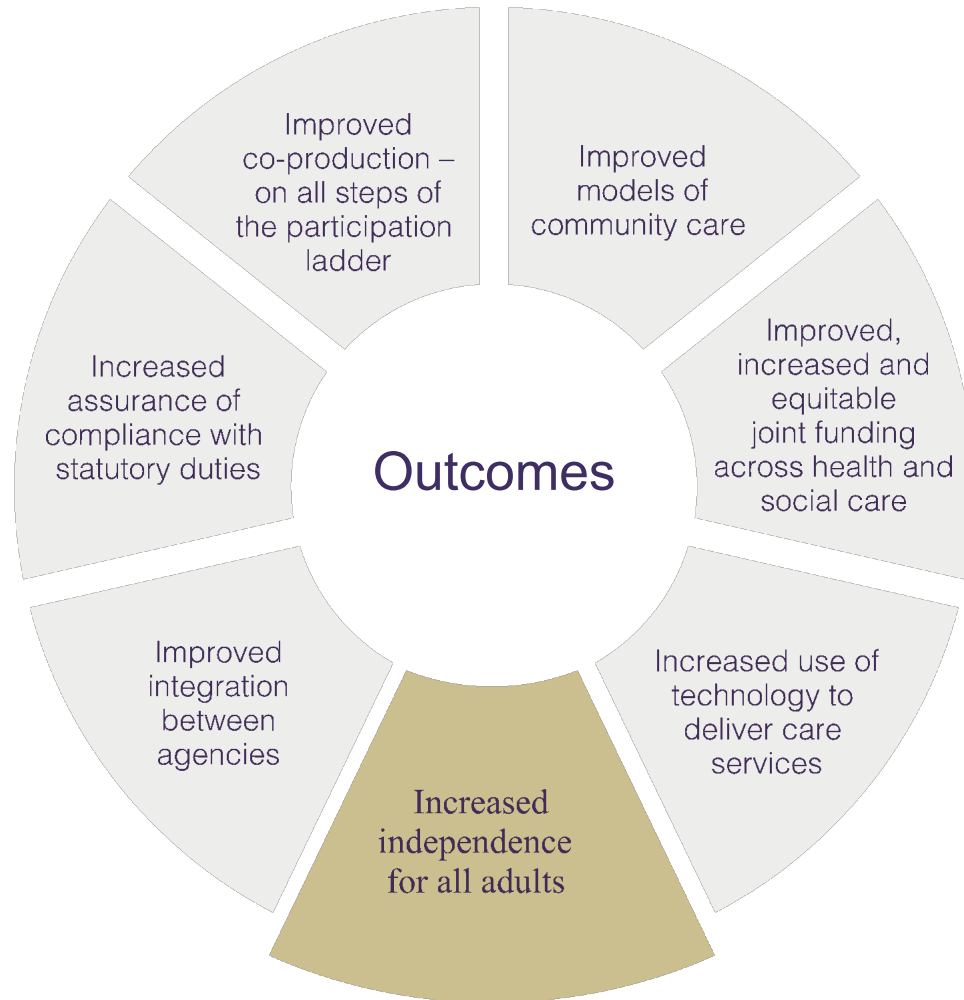


## Objectives

- Implementation of an Assisted Living Technology Strategy
- Increased number of technology initiatives implemented across adult services

# Programme Outcomes

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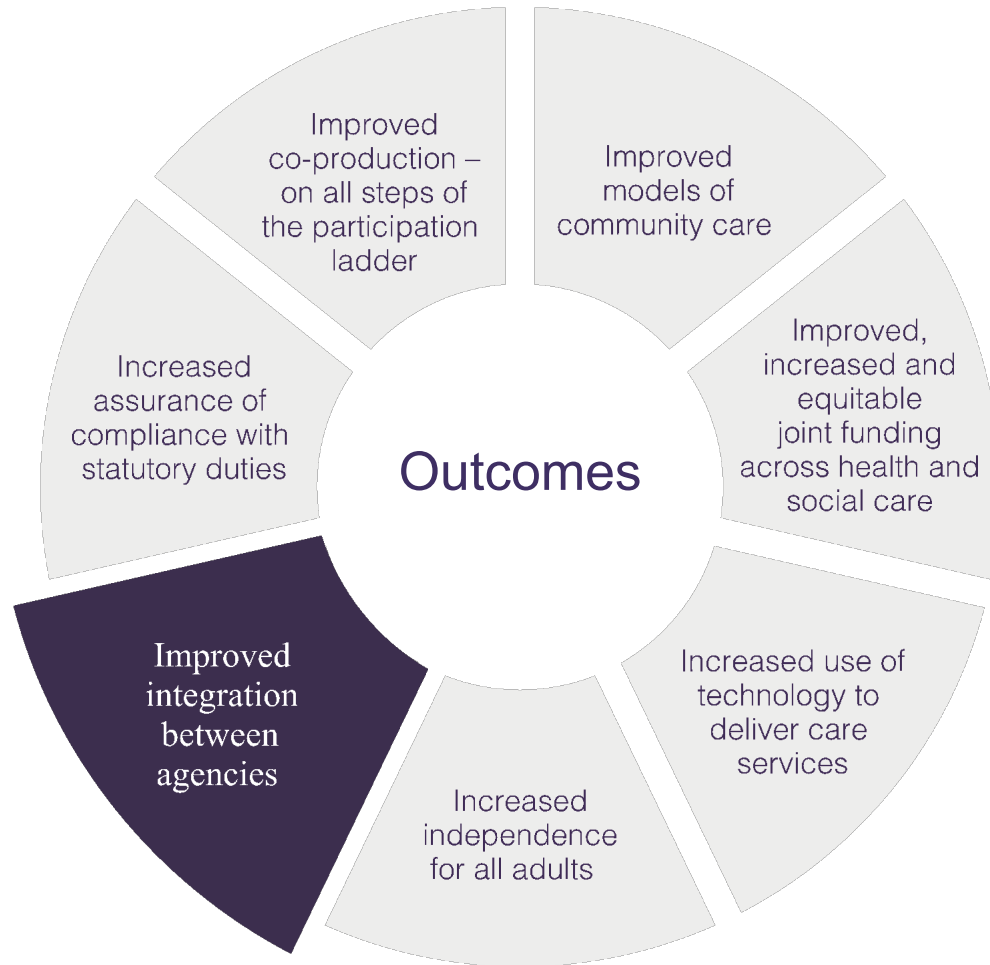


## Objectives

- Improved choice for younger adults (under 65) and older people (over 65)
- Improved variety of reablement services
- Increased access to and use of benefits and welfare rights (to include ISFs as a default)
- Improved 'whole family' approach

# Programme Outcomes

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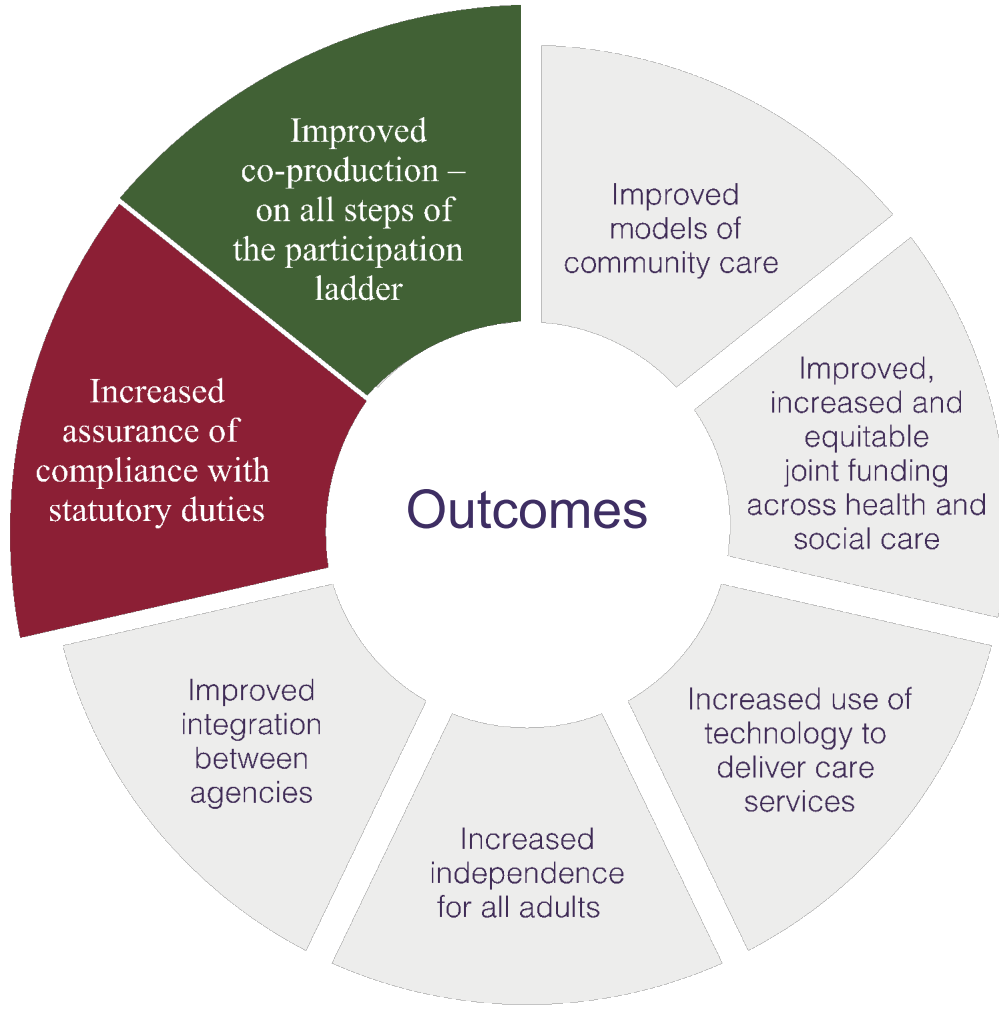
## Objectives

- Increased partnership working with health, Voluntary Community Sector and Public Health
- Improved use of data in decision making
- Improved integration between children’s and adult services



# Service priorities that are supported by transformation

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## Objectives

### Support the service (through transformation) to:

- Improve systems and pathways
- Improve performance through realistic and relevant KPIs
- Implement learning from Covid-19
- Increase the voice of adults when designing and delivering services and projects with adults, families and organisations
- We will strengthen the voice of adults in shaping support and services or something similar

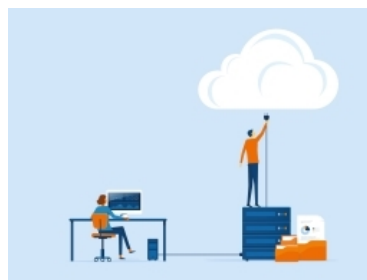


# Projects



## Families Front Door

To implement an integrated front door across adults and children's services that offers guidance, support, signposting and referral at first point of contact with back office processes that enable a more seamless care journey.



## Eclipse Adults and Finance

To deliver an alternative, externally cloud hosted, care record solution for a range of existing, on premise, server-based systems.



## Disability Model Transformation

To improve our commissioning model, optimise health funding and ensure there is a skilled workforce so that we can offer improved and increased options for young adults with learning and physical disabilities.



## Technology Enabled Independent Living Strategy

To produce an assistive living technology strategy that will provide a framework for the deployment of technologies which are outcome driven to support self-care and independent living.



## Early Help and Prevention

A project aimed to prevent, reduce and delay the need for long term care and support through early help, prevention and improved models of community care and online self-help.

# TASP Annual Report 2021-22 Highlights

## Key achievements:

- Programme refresh with **renewed vision and outcomes** for transformation
- **Initiation** of phase 1 transformation and **preparation** for phase 2
- **Successful transition** of the Community Equipment Re-design project into business as usual creating **£50,000 in savings**
- **One Council** response to the Coronavirus pandemic with **continuity** of Adult Services delivery through **innovation and creativity**
- Successful implementation of the **24-hour Adult Mental Health Professional (AMPH) Hub**
- Successful project closure of PIPP – Prompting Independence through Prevention and Prediction which tested prediction capability through artificial intelligence and machine learning tools and products
- **Successful implementation** across several ‘innovation Sites’ of The Three Conversations © social work practice
- Wolverhampton selected as a **Charging Reform Trailblazer**
- **Wolverhampton Cares forum and campaign launched**
- **iMPower review completed** with **five re-design projects** scoped in response to the recommendations
- **Ongoing collaboration as part of One Wolverhampton** – the place-based partnership of the Integrated Care System (ICS)

# TASP Annual Report 2021-22 Highlights

## SRO and DASS Appraisal - Snapshot

**Emma Bennett:** *'I feel like the programme is in a much better place 18-months on. We have refreshed our vision for transformation, are much clearer on our ambitions and how we will measure success through our agreed objectives.*

*We are on a journey, and as part of this journey we have become much clearer as a Board about what sits under the programme and how we can use innovation to drive forward change'*

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**Becky Wilkinson:** *'I want to see projects be creative and give people a chance to work outside their comfort zone, bringing ideas forward and leading or being part of positive change across the service.*

*I too feel excited about some of our future projects, particularly in the world of technology enabled care but also how we respond to reform and new policy.*

*I look forward to seeing co-production at the centre of Adult Services and how this will contribute hugely to our preparations for CQC inspection.*

*I want the workforce to be fully engaged in TASP projects and for their expertise, passion, and knowledge to shape and influence how we delivery improvement under the programme'*

# TASP Annual Report 2021-22 Highlights

## Outcome 1: Improved models of community care

- **The Early Help and Prevention** project will be a key contributor to this outcome. Set to be delivered in 2023, the project aims to **prevent, reduce and delay long term care and support need**.  
The project will look at a coordinated early help offer and enable community support, assets and networks to work collaboratively to support people to **live long, healthy and independent lives**.
- The project will link closely to the Families Front Door Project.
- Early Help and Prevention is a **'look forward project'** as part of the transformation programme and will be a focus in the 2022-23 report.

## Outcome 2: Improved, increased, and equitable joint funding across health and social care

**Disability Model Transformation** Project aims to improve the commissioning of and training around disability services, practice and support. Two outputs so far have been:

- For the first time, **creation of a data dashboard** that has enabled a better understanding of performance so that **informed decisions** can be made on gaps, improvements and forecasting of need and provision.
- **A series of engagement workshops** have led to **recommended changes to training materials** available to Social Workers on understanding, navigating and negotiating joint funding pathways.

## Outcome 3: Increased use of technology to deliver care services

**The Community Equipment Re-design** project aimed to transform the community equipment service model to ensure the **right logistics** were in place to **minimise delays** in people receiving valuable equipment needed to live independently at home or as part of reablement. At closure, the project had delivered:

- A **new operating model**
- A **new team structure**
- A new and improved **equipment purchasing contract**
- Revised **operating procedures**
- A **new equipment maintenance contract**
- Budget savings of **£50,000**

# TASP Annual Report 2021-22 Highlights

## Outcome 4: Increased independence for all adults

- **The Three Conversations** © project saw the introduction of a new social work practice into Adult Services.
- The project aimed to implement The 3Cs to enable people to access appropriate services **in a timely, effective and personalised manner** recognising that **people and families are the experts their own lives.**

**Social workers said:** *'The 3Cs has allowed me to spend more time with people'*

**District nurses said:** *'I feel we are working in a much better and proactive way and the communication is so much more than it ever was before'*

**People and families said:** *'It was reassuring to know that if things changed, I would be able to just call back and get some help'*

## Outcome 5: Improved integration between agencies

- **One Wolverhampton** is the Place Based Partnership (PCB) of the wider Integrated Care System (ICS).
- One Wolverhampton provides the engine room to deliver **shared priorities** and enable improved outcomes through a local vision supported by **combined health and social care data and insights.**

**The System Flow Dashboard** is a practical example of **joint analysis and decision making.** The dashboard looks at pressure points in the transfer of care from hospital to home so that improvements can be made to ensure it is timely and effective. The result has been Wolverhampton reducing its delayed transfer of care indicators moving from the bottom performing quartile to the **top.**

## \*Outcome 6: Increased assurance of compliance with statutory duties

A service review of the Emergency Duty Team (EDT), who operated an out of hours service for children and adult's mental health, highlighted a number of **opportunities to improve service delivery and statutory compliance.**

The AMHP Hub project was initiated and at closure had **delivered:**

- **Improved** pathways and processes that support improved outcomes for people
- **Improved** management support and oversight of professional disciplines
- **Improved** integration of service functions
- **Improved** consistency of practice
- **Improved** professional development
- **Improved** recruitment and retention
- **Reduced** bureaucracy

# TASP Annual Report 2021-22 Highlights

## \*Outcome 7: Improved ladder

Making it Happen meetings **co-production – on all steps of the participation** served as the project Board as part of The 3Cs. The meetings enabled Innovation Sites across the project to **design and implement the practice how they saw best** with simple guidance and broad principles rather than using more prescriptive, ridged instructions.

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Innovation Sites were allowed to **break the current rules of the system and experiment with working differently.**

It was a **bottom-up** process **led by frontline staff** who were able to **influence new ways of working.**

Making it Happens meetings have continued beyond the closure of the project and are delivered as 'It's My Life' meetings allowing for ongoing collaboration and constructive professional scrutiny of care plans.

\*Highlights shared outcomes recognising that both the transformation programme and the service will operate alongside one another to achieve these

# TASP Annual Report 2021-22 Highlights

## Priorities for 2022-23:

- **Delivery** of the phases 1 and 2 of the transformation programme
- **Improved co-production** within transformation projects and universally across adult services
- **Ongoing collaboration** with our partners including health and community organisations
- **Delivering against the vision for ‘families’** through integration with children’s services (and other directorates where relevant)
- **Ongoing review** of what can be achieved through transformation and where the service can improve its business as usual
- **Gathering the evidence** that supports the impact projects have on people



CITY OF  
WOLVERHAMPTON  
COUNCIL

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**Fulfilled Adults Lives Scrutiny Panel**

**Chair:** Councillor V Evans

**Vice Chair:** Councillor S Haynes

**Remit and Function**

- Ensuring that the Health and Social Care system to respond to and recover from Covid-19
- Ensuring independence for people with care and support needs
- Ensuring that people get the right support at the right time
- Ensuring the health and care reform agenda is delivered for people in Wolverhampton
- Protecting vulnerable people at risk of harm and exploitation
- % of older people (aged 65 and older) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services
- % of adults with learning disabilities in paid employment
- % of social care users supported to remain in their own homes
- % of adults who use services who say social care services help them to feel safe and secure
- % of adults in receipt of long-term services who are in control of their own lives

Item	Description	SEB Lead	Office Lead	Scrutiny Lead	Date of Meeting	Publication Date	Status
Update on Health and Social Care Act - Fair Funding	Request from the Director to add this item to the agenda – report on Health and Care Reform proposals and Wolverhampton being part of the trailblazer local authorities	Becky Wilkinson	TBC	Earl Piggott-Smith	5 July 2022	27 June 2022	Complete

Agenda Item No: 10

Adult Services Transformation Programme	Request from the Director to add this item to the agenda – the report outlines the vision for adult services and the key elements of the strategy	Becky Wilkinson	TBC	Earl Piggott-Smith	5 July 2022	27 June 2022	<b>Complete</b>
Principal Social Worker Annual Report	This is an annual report that is presented to the panel for discussion and comment on the work of the Principal Social Worker in promoting and improving the quality of social work practice and outline the key priorities for 2022-2023.	Becky Wilkinson	Jennifer Rogers	Earl Piggott-Smith	5 July 2022	27 June 2022	<b>Complete</b>
Our Commitment to All Age Carers 2022	Request from Director to add this item to the agenda	Becky Wilkinson	TBC	Earl Piggott-Smith	18 October 2022	10 October 2022	<b>Confirmed</b>
Adult Social Care Winter Planning 2022-23	Request from Director to add this item to the agenda	Becky Wilkinson	TBC	Earl Piggott-Smith	18 October 2022	10 October 2022	

Transforming Adult Services Programme 2021-22 Annual report	Request from Director to add this item to the agenda	Becky Wilkinson	Emma Cleary	Earl Piggott-Smith	18 October 2022	10 October 2022	
Care and Support Provider Fee Review 2023-2024 and Market Sustainability	This is an annual report that presented to the panel for discussion and comment	Becky Wilkinson	Andrew Wolverson	Earl Piggott-Smith	17 January 2023	9 January 2023	Confirmed
City of Wolverhampton Council's Local Account	This is an annual report that presented to the panel for discussion and comment	Becky Wilkinson	TBC	Earl Piggott-Smith	17 January 2023	9 January 2023	Confirmed
Implementation of Carer Commitment and ambition for carers going forward	Request from Director to add this item to the agenda	Becky Wilkinson	TBC	Earl Piggott-Smith	17 January 2023	9 January 2023	Confirmed
Principal Social Worker Annual Report	This is an annual report that is presented to the panel for discussion and comment	Becky Wilkinson	Jennifer Rogers	Earl Piggott-Smith	17 January 2023	9 January 2023	Programmed
Health and Social Care Act - Fair Funding - Trailblazer Briefing Sessions	Briefing for panel on progress of the trailblazer. The meeting will be open	Becky Wilkinson	TBC	Earl Piggott-Smith	TBC		

	to all Cllrs - a morning and early evening sessions is planned						
Implementation of Social Care Commitment	Request from Director to add this item to the agenda	Becky Wilkinson	TBC	Earl Piggott-Smith	21 March 2023	13 March 2023	<b>Programmed</b>
Care and Support Provider Fee Review 2023-2024 and Market Sustainability – Follow Up Report	This is an annual report that is presented to the panel for discussion and comment	Becky Wilkinson	Andrew Wolverson	Earl Piggott-Smith	21 March 2023	13 March 2023	<b>Programmed</b>
Adults Social Work and Workforce Health Check 2022	This is an annual report that is presented to the panel for discussion and comment	Becky Wilkinson	Jennifer Rogers	Earl Piggott-Smith	21 March 2023	13 March 2023	<b>Programmed</b>