

Public Document Pack



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Ask for Alisha Parker

PUBLIC

To: Members of Improvement and Scrutiny Committee - People

Tuesday, 23 April 2024

Dear Councillor,

Please attend a meeting of the **Improvement and Scrutiny Committee - People** to be held at **2.00 pm** on **Wednesday, 1 May 2024** in Committee Room 1, County Hall, Matlock, DE4 3AG, the agenda for which is set out below.

Yours faithfully,

A handwritten signature in black ink that reads 'Helen E. Barrington'.

Helen Barrington
Director of Legal and Democratic Services

A G E N D A

PART I - NON-EXEMPT ITEMS

1. Apologies for absence
To receive apologies for absence (if any)
2. Declarations of Interest
To receive declarations of interest (if any)
3. Minutes (Pages 1 - 2)

To confirm the non-exempt minutes of the meeting of the Improvement and Scrutiny Committee – People held on 11 April 2024.

4. Public Questions (30 minute maximum in total) (Pages 3 - 4)

(Questions may be submitted to be answered by the Scrutiny Committee, or Council officers who are attending the meeting as witnesses, on any item that is within the scope of the Committee. Please see the procedure for the submission of questions at the end of this agenda)

5. Online Information Finder and Self-Assessment (Pages 5 - 16)

6. Annual Feedback (Pages 17 - 30)

PUBLIC

MINUTES of a meeting of **IMPROVEMENT AND SCRUTINY COMMITTEE - PEOPLE** held on Thursday, 11 April 2024 at Council Chamber, County Hall, Matlock, DE4 3AG.

PRESENT

Councillor K S Athwal (in the Chair)

Councillors R Iliffe, T Kemp, C Dale, R George, N Gourlay, P Rose and J Wharmby.

Also in attendance was Councillor J Patten, A Noble, C Caley, D Rachford (union representative).

Apologies for absence were submitted for Councillor S Burfoot.

07/24 DECLARATIONS OF INTEREST

There were no declarations of interest.

08/24 MINUTES

The minutes of the meeting held on 04 February 2024 were confirmed as a correct record.

09/24 PUBLIC QUESTIONS (30 MINUTE MAXIMUM IN TOTAL)

There were no public questions.

10/24 REVIEW OF EARLY HELP AND CHILDREN'S CENTRE SERVICES

Alison Noble, Director Early Help and Safeguarding and Chris Caley, Head of Service Early Help gave a presentation to the Committee on the Review of Early Help and Children's Centre services.

The Council were forecasting an overspend of almost £34m by 31 March 2024. This led officers to have to review the delivery of Children's Centre operations, the Early Help Service, and the cessation of the Early Help Development Team.

Due to the significant financial challenges faced by the council, it was proposed that the new service would offer a combination of responses to statutory expectations combined with some practical family support within the new financial window plus an additional £1m from Public Health.

The public consultation ran from 12 February to 24 March, and received 2,027 responses from users of the service, members of the public and

partner agencies. The top 5 themes coming out of the feedback from the public consultation and professional engagement were:

- Impact of vulnerable children and families
- Disagreement with the proposed savings proposals
- Importance of early help services
- Pressure on Social Care and other services
- Long term consequences for vulnerable families – and additional cost to the Council

The report to Cabinet on 29 April will seek approval to:

a) Disestablish the Council's existing Early Help teams and Children's Centres – and the Early Help Development Team (which provided support to partner agencies).

b) Implement a new service model for Family Help in Derbyshire, and to the retention of 12 Children's Centre buildings – and the closure of 10 Children's Centres.

Committee Members acknowledged the officers difficulties but having thoroughly examined the proposals presented by officers, at the meeting, they remained concerned with the increased level of risk to children and families. It was encouraged that officers continued to work with Children's Services to mitigate risk.

Procedure for Public Questions at Improvement and Scrutiny Committee meetings

Members of the public who are on the Derbyshire County Council register of electors, or are Derbyshire County Council tax payers or non-domestic tax payers, may ask questions of the Improvement and Scrutiny Committees, or witnesses who are attending the meeting of the Committee. The maximum period of time for questions by the public at a Committee meeting shall be 30 minutes in total.

Order of Questions

Questions will be asked in the order they were received in accordance with the Notice of Questions requirements, except that the Chairman may group together similar questions.

Notice of Questions

A question may only be asked if notice has been given by delivering it in writing or by email to the Director of Legal Services no later than 12noon three working days before the Committee meeting (i.e. 12 noon on a Wednesday when the Committee meets on the following Monday). The notice must give the name and address of the questioner and the name of the person to whom the question is to be put.

Questions may be emailed to democratic.services@derbyshire.gov.uk

Number of Questions

At any one meeting no person may submit more than one question, and no more than one such question may be asked on behalf of one organisation about a single topic.

Scope of Questions

The Director of Legal Services may reject a question if it:

- Exceeds 200 words in length;
- is not about a matter for which the Committee has a responsibility, or does not affect Derbyshire;
- is defamatory, frivolous or offensive;
- is substantially the same as a question which has been put at a meeting of the Committee in the past six months; or
- requires the disclosure of confidential or exempt information.

Submitting Questions at the Meeting

Questions received by the deadline (see **Notice of Question** section above) will be shared with the respondent with the request for a written response to be provided by 5pm on the last working day before the meeting (i.e. 5pm on Friday before the meeting on Monday). A schedule of questions and responses will be produced and made available 30 minutes prior to the meeting (from Democratic Services Officers in the meeting room).

It will not be necessary for the questions and responses to be read out at the meeting, however, the Chairman will refer to the questions and responses and invite each questioner to put forward a supplementary question.

Supplementary Question

Anyone who has put a question to the meeting may also put one supplementary question without notice to the person who has replied to his/her original question. A supplementary question must arise directly out of the original question or the reply. The Chairman may reject a supplementary question on any of the grounds detailed in the **Scope of Questions** section above.

Written Answers

The time allocated for questions by the public at each meeting will be 30 minutes. This period may be extended at the discretion of the Chairman. Any questions not answered at the end of the time allocated for questions by the public will be answered in writing. Any question that cannot be dealt with during public question time because of the non-attendance of the person to whom it was to be put, will be dealt with by a written answer.

Online information finder and self-assessment Review (Spring 2024)



The Offer

Page 6

Online Information Finder

Available from DCC website

The person is asked **a few questions** about what they, or a friend/family member, are having difficulty with. As a result, they receive a **tailored links to info and advice**, and a **personalised summary** (which can be sent as a PDF)

- The person has the **option to create an account** with us, but they don't have to (unless completing self-assessment)
- The person can **leave a star rating** (out of 5)
- They can also **leave comments** about their experience

Option to continue to self-assessment where eligible needs indicated

Online Self Assessment

Following on from Online Information Finder

The person can start their assessment and request assistance from Adult Care.

They can provide their **own narrative** about **what's important to them** and **what they want to achieve** from their self-assessment. They provide information against the **Care Act domains**

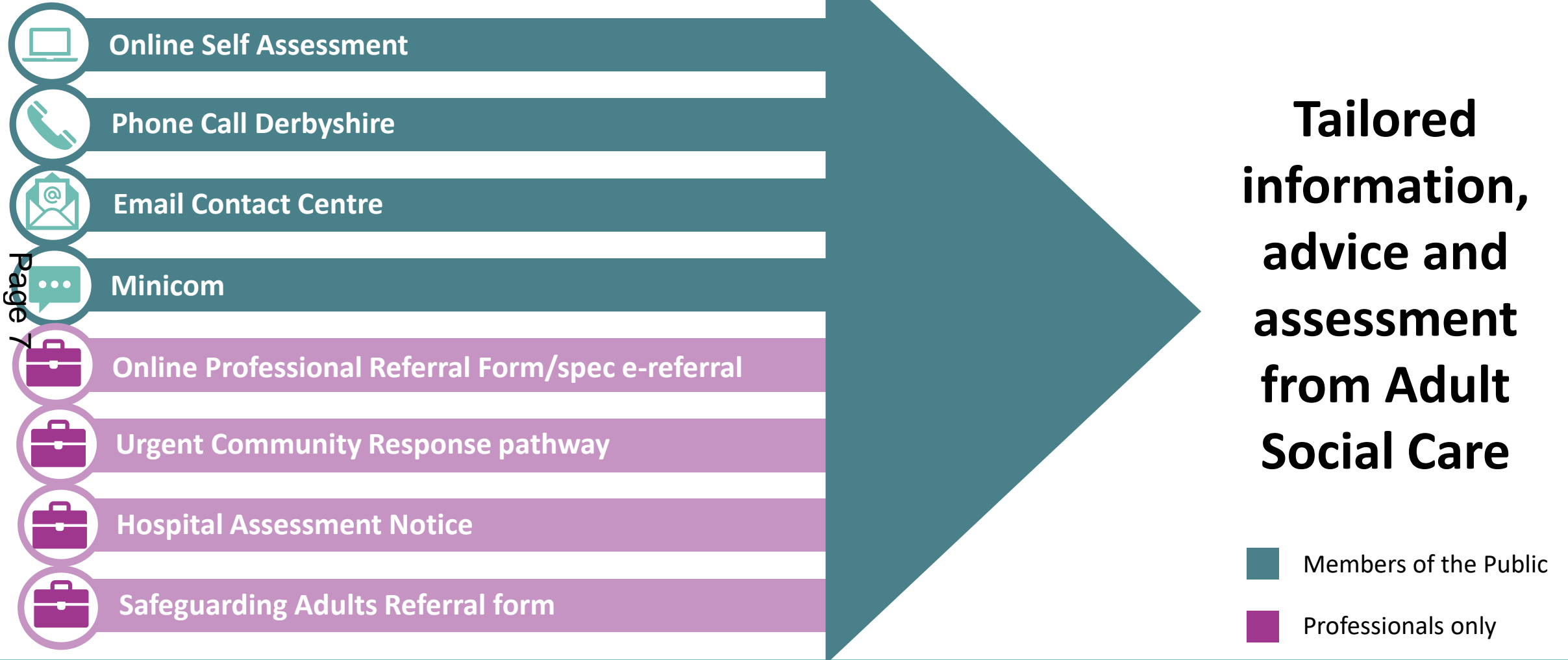
- **Screened upon receipt** by ACATT practitioner
- ACATT will support where the enquiry can be resolved swiftly and remotely
- Otherwise, it is **passed directly for allocation to a local social work team.**
- Practitioners are encouraged to obtain feedback from people using the self-assessment as part of their intervention

www.derbyshire.gov.uk/social-health/adult-care-and-wellbeing/information-finder

ASC Online Information Finder and Self Assessment

Routes into Adult Social Care

There are various routes into Adult Care, to suit the person's preferred communication method or communication needs



Use of the Online Information finder



8,188 website views
since June 2023 to
3rd March 2024



27% of viewers go on
to complete the online
information finder

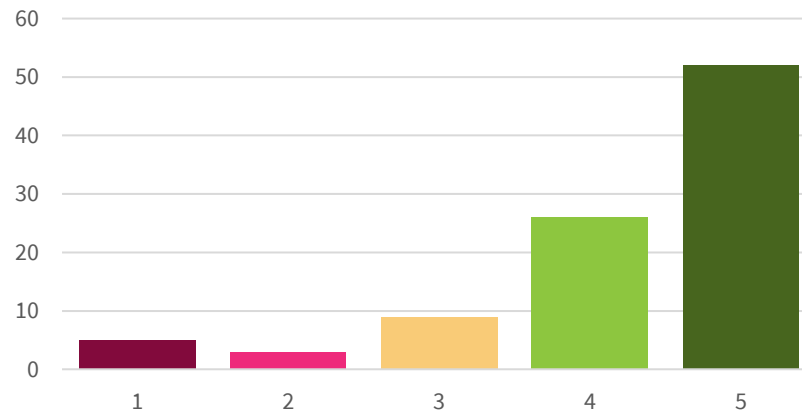
We are working with colleagues in
IT to build a greater understanding
of the web-use via Google Analytics

Page 8

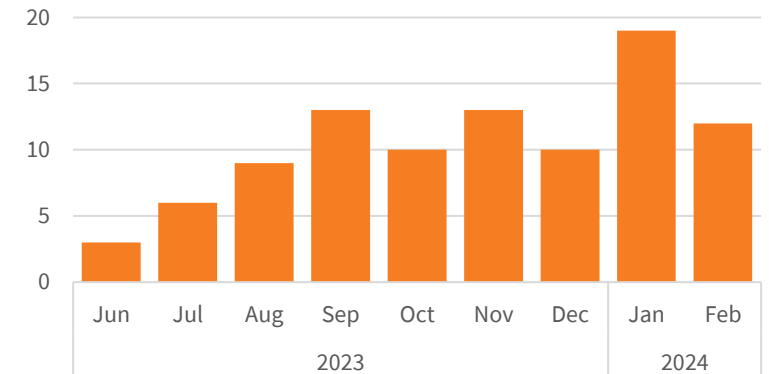


Average star rating
for Online Info finder

Number of responses per rating level



Number of responses received
(by month)



Feedback

Overall, I thought the form was **very user friendly** and **informative**, especially with the amount of information one could be provided with at the end

Excellent website. **Really useful for someone who wants to help themselves or for someone who wants to help someone** who is willing to accept help. Unfortunately my mother is refusing everything we are trying

10/10, really easy to use, **clear layout, thoughtfully worded** and plenty of useful information

the site is quite **easy to use**

This will help me; **I'm going to contact the fire service first. I like this**

Good initiative to have an online form. **Similar to PIP/DLA in style so may be familiar to users**

The **wording was really user friendly**, no jargon and great explanations to get people thinking about their situation

Allows users to give graduated responses, **reflecting their particular needs and abilities**, and allows identification of associated needs

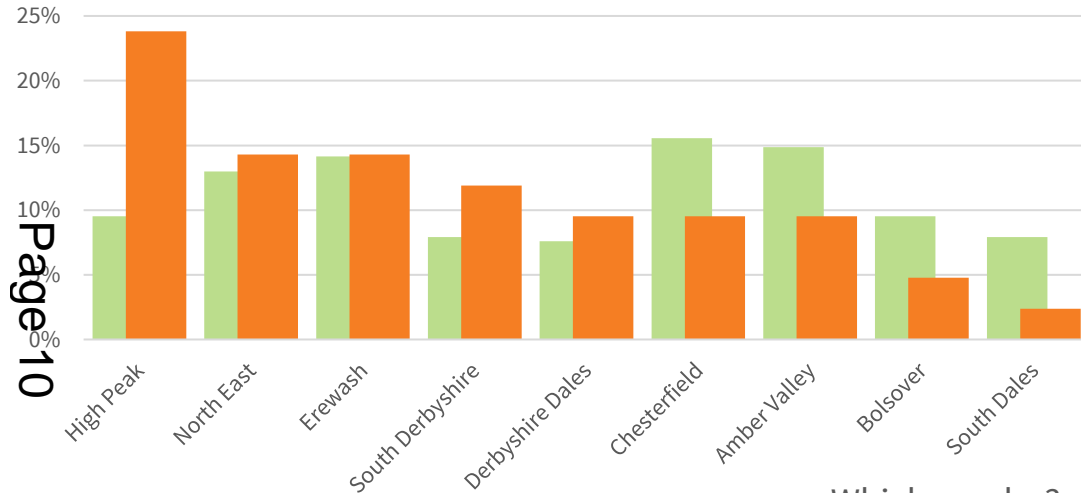
[I] found the form **long winded but got through, all the information requested was relevant**. The estimated time to complete the form was spot on.

...it's impressive and it will help people find out about services they might not be able to without this. ...it's a really good platform and add on to services that will allow people to have access to **so much information at their fingertips** whilst ensuring all needs are covered. Also taking a certain amount of demand away that can be self-service level and a level of preventative.

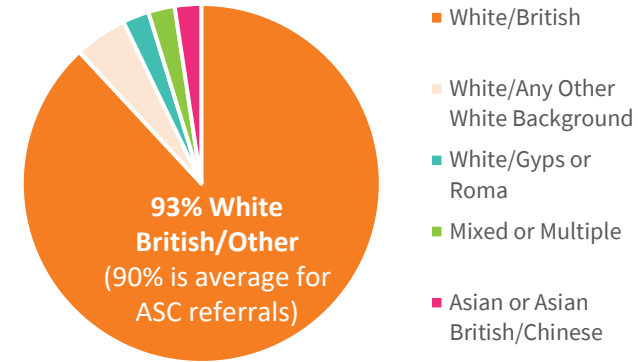


Who is making use of the Self Assessment*

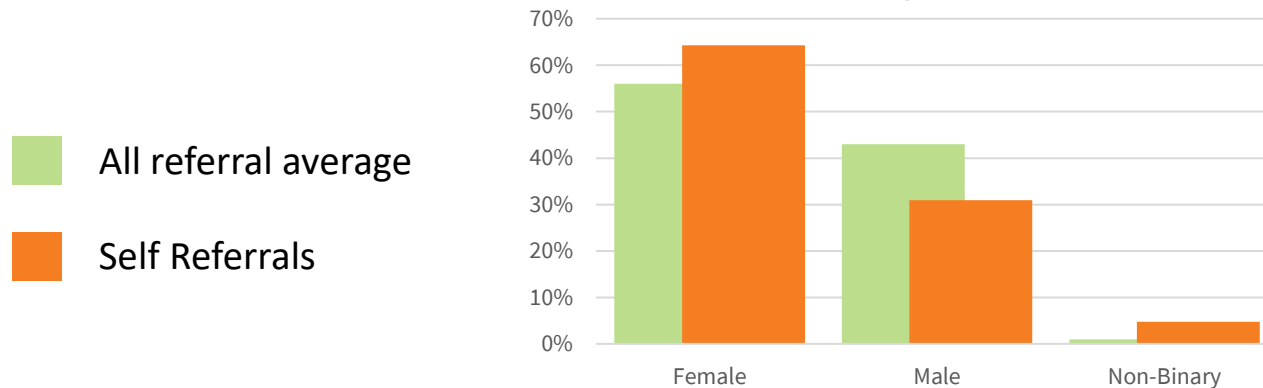
Which Area?
(compared with average referrals trends)



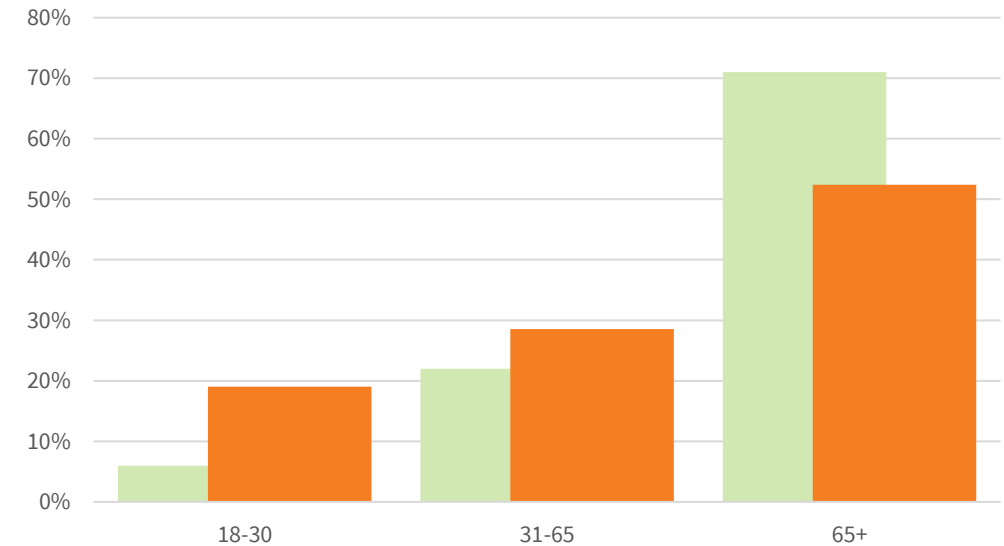
Ethnicity breakdown



Which gender?



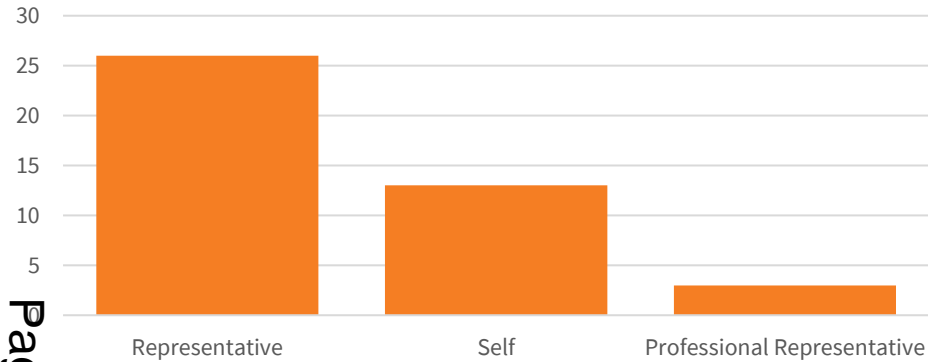
What age?



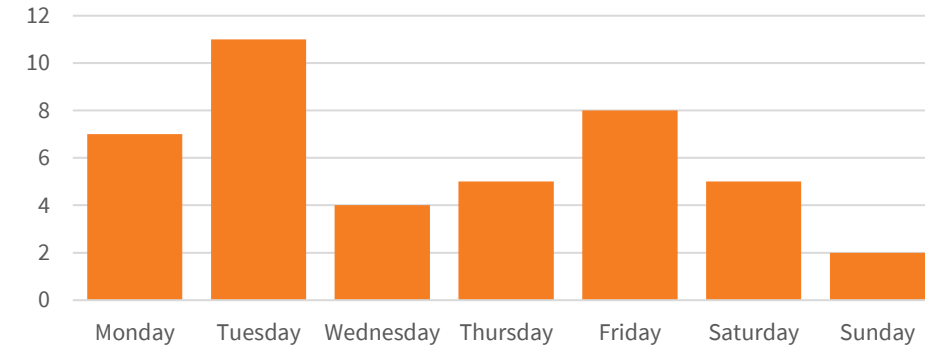
Accessing the Self Assessment*

This data is taken from all referrals received between 03/10/23 – 18/02/24

Who has completed this self assessment?

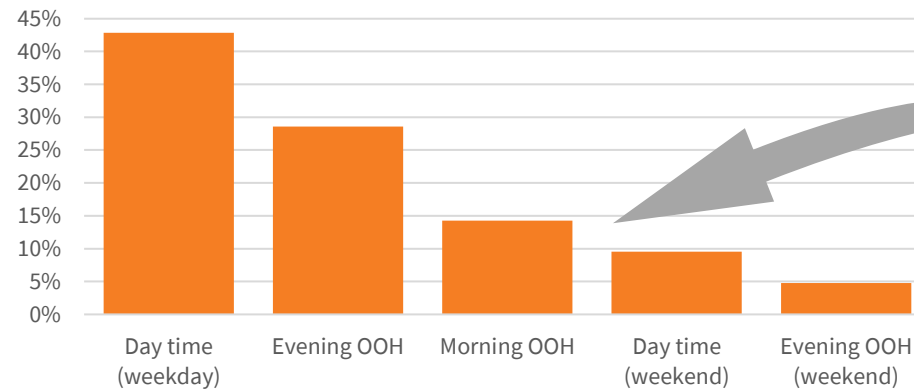


Which day of the week?



Page 11

What time of day?

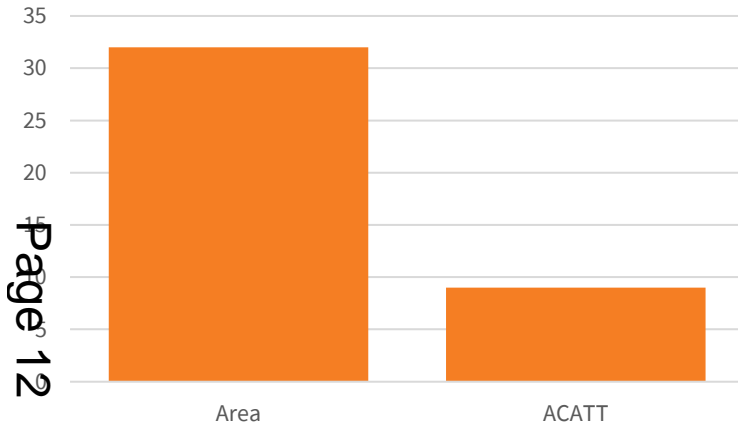


67% of referrals received Morning OOH were before 7am

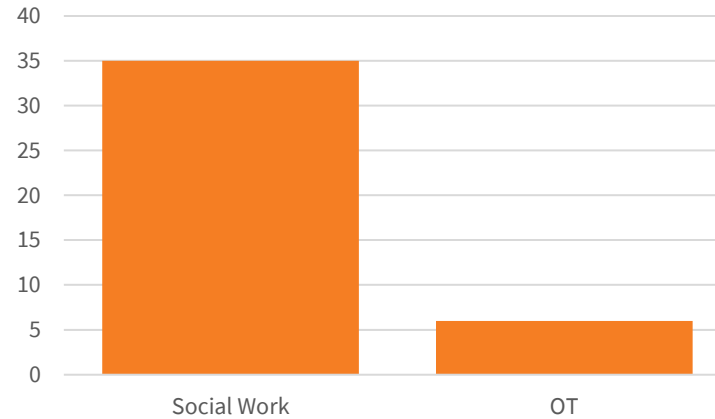
Self Assessment outcomes*

This data is taken from all referrals received between 03/10/23 – 18/02/24

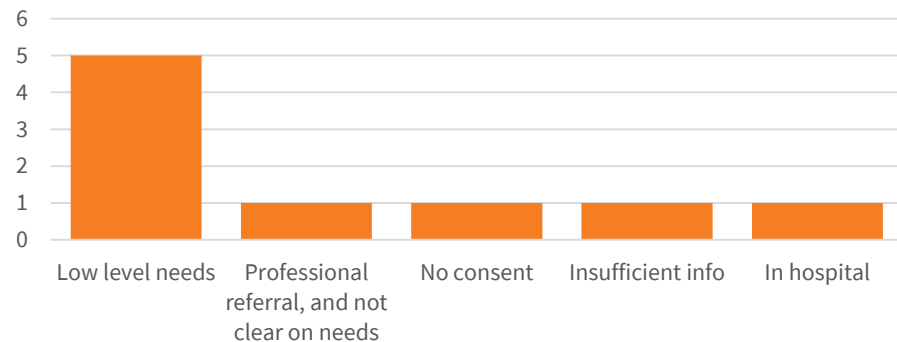
Who is responding to Self Assessments?



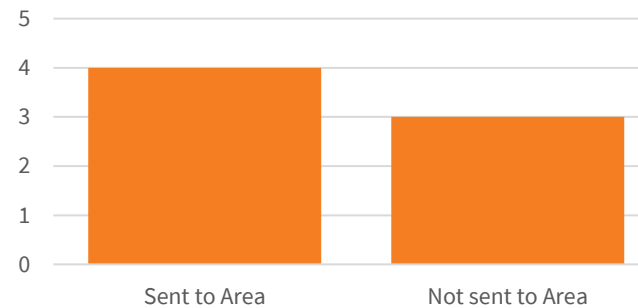
Types of referral



Reason for ACATT intervention



Conclusion of ACATT intervention

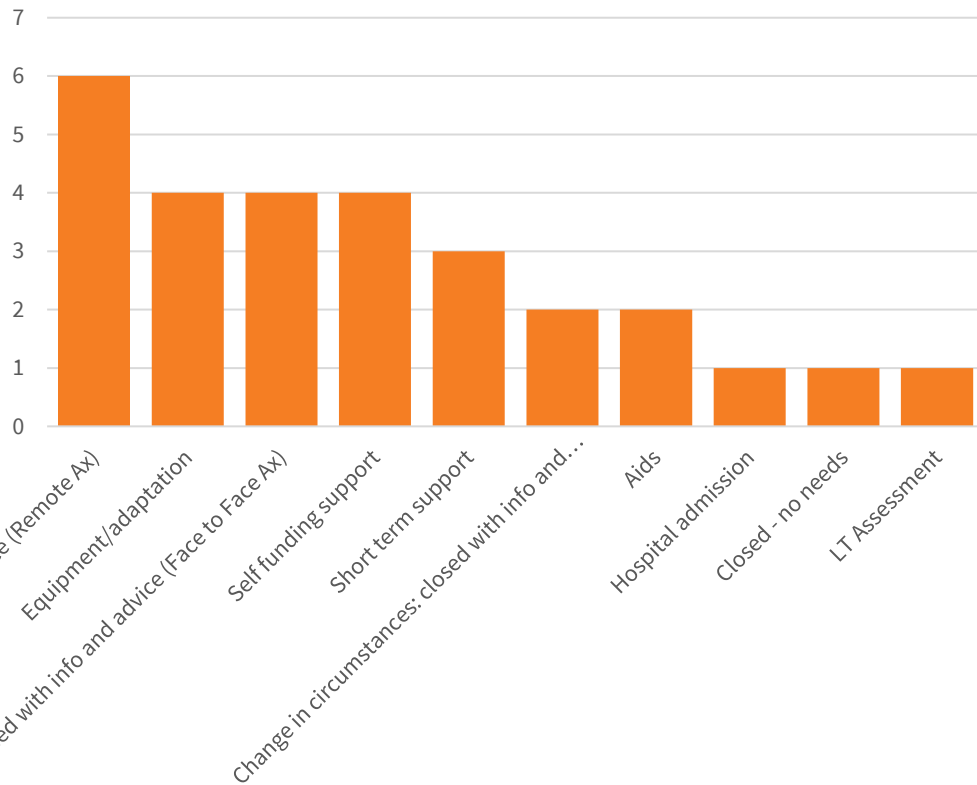


ACATT are adding limited value with these referrals due to the quality of the information coming through; we are exploring whether it would be more efficient for referrals to go straight to local teams in the future.

Self Assessment outcomes*

This data is taken from all referrals received between 03/10/23 – 18/02/24

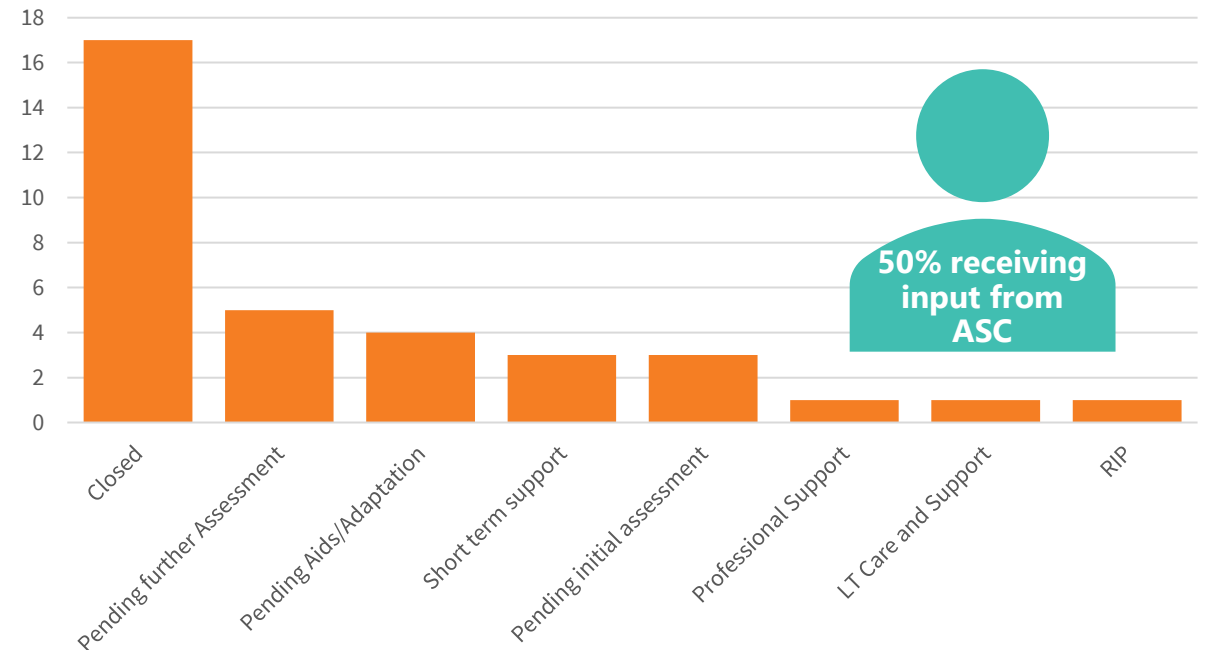
Outcome following initial professional assessment



Page 13

3 of these people would have been able to resolve their enquiry themselves with improved online information about health Mobility assessments

Outcome at 6 weeks



Average days to agree initial outcome
(i.e. complete initial professional assessment)



13 days

Business as usual arrangements

The following are established:

- ASC webpage information pages updated to link to Online Information Finder
- Operational work flow and triage route via ACATT
- Operational leadership from ACATT Service Manager
- Customer Experience reporting routes and regular analysis
- Monitoring and repairing weblinks via ACATT Business Services support
- Monitoring and reporting (manual)
- Embedded process for small scale improvements to forms and outputs
- Regular formal review (Spring 2024 will be first review)

Page 14

	Outstanding	Status
1	Embedded monitoring and reporting (Mosaic) via Management Information reports	Being scoped
2	Granicus reporting and styling	Being scoped
3	Updates to Adult Care Leaflets via the Information Team	Designed, pending completion
4	Further communications to promote (internal and external)	To do

What does good look like?

Derbyshire residents are:

- Able to **directly access tailored information and advice** that helps them to live their best life
- Able to request assistance from Adult Care via **a medium that suits them**
- Able to do this **at a time that suits them**
- Where it is needed, they receive a **timely response from Adult Care**
- Able to tell **their own story and not have to repeat this** at different stages of an assessment

Page 15

How will we know if we've achieved this?

Develop meaningful performance indicators, to help us understand:

- Was the information and advice accessible and appropriate for their situation? (*online user feedback in place*)
- Are people able to access the information finder and self-assessment (*usage data in place – to be established as automated*)
- Are appropriate response times achieved (*Mosaic data – pending updates*)
- Whether people accessing an Adult Care response need this (*Mosaic data – to be established as automated*)
- Did the person journey through to their Adult Care outcome without having to repeat their story (*User feedback – not yet in place*)



Conclusions and Next Steps

The introduction of the self-assessment process has broadly been very successful and is now established as business as usual.

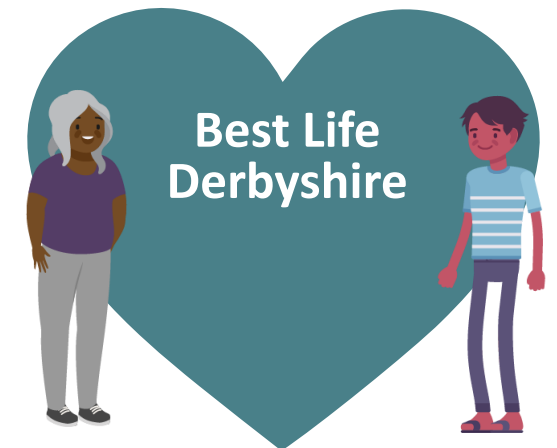
The following next steps are required to support the continued efficacy of this work:

Page 16

KPIs need to be embedded and reported on (as per previous slide)

Google analytics data developments required to include details of usage

- **Communications** activities to be revisited now that this is business as usual (leaflets, further external and internal promotion)
- Future reviews will report via the Quality Assurance Board



**Health
Communities**

Prevention Support

**Advice
Connected**

Universal Support

Lead your best life

look out for one another

Independent

Quality of life

Support



Adult Social Care

Derbyshire County Council

1. **Outcome focused:** Support people to live to their best life independently at home, connected to the community and local resources, stepping in with more help where needed.

2. **Short-Term Support:** helping people recover and regain stability independence and control following a personal crisis or illness

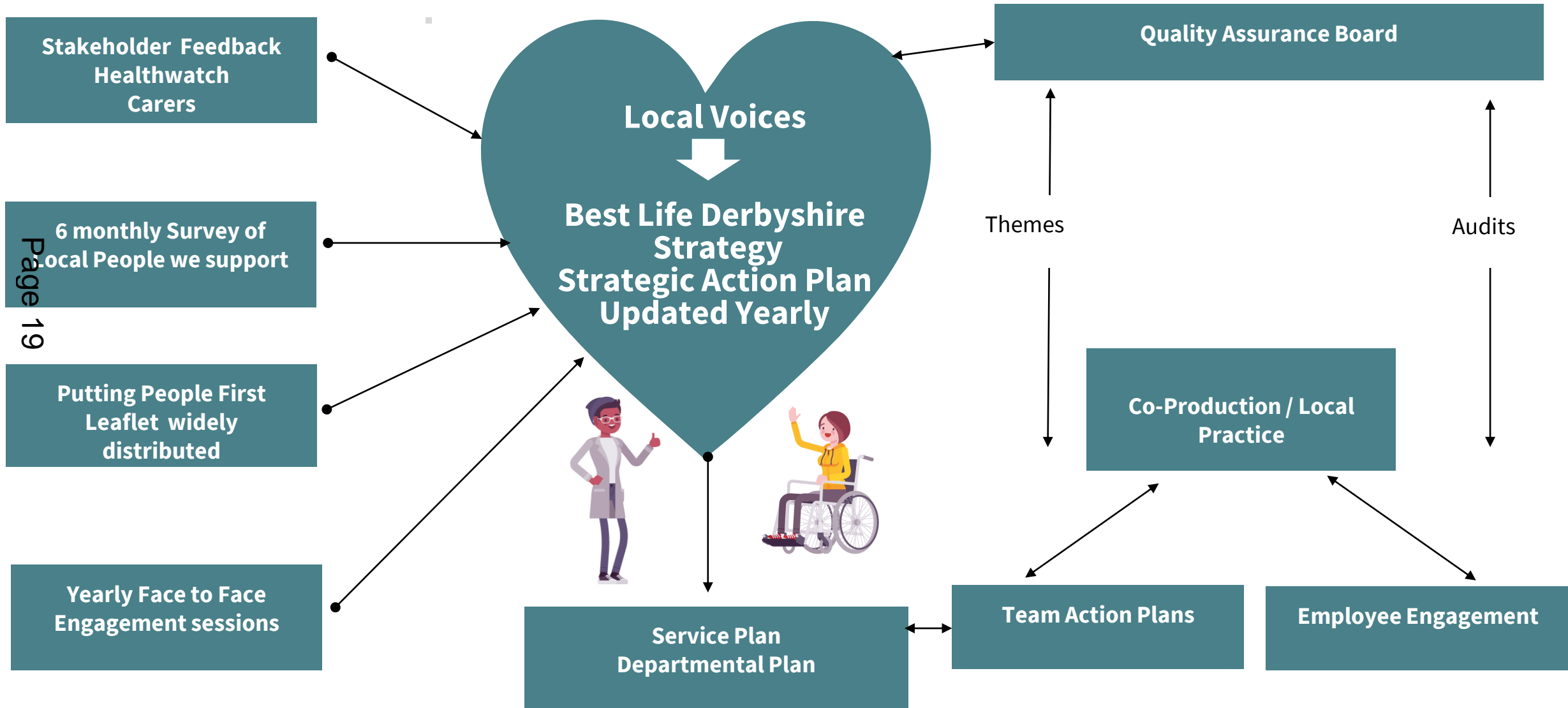
3. **Joining up support:** Working across the system with partners, carers and residents to provide support in a safe, supportive homelike setting

4. **Co –production:** Develop more equal partnerships between people who use services, carers and professionals to deliver better outcomes

5. **Supporting Carers and our workforce:** Recognise and value carers and our social care workforce, and the contribution they make.

6. **Standards and value for money:** Make sure there is a good choice of affordable care and support available across the county with a focus on people’s experiences and improving quality

Vision: engagement and feedback



What people said “ Prevention”

The adviser deserves a medal. Without her, I certainly would have had a nervous breakdown.”
(Public Health Advisory Service)

“I would just like to say a big thank you for all the work you all do especially to Paula I really appreciate all she has done for me in the short time she has worked with me and all my family. It really feels that I’m being listened to in the first time in a long time and I would not be where I am now without her. I’m so very ,very grateful and always will be so once again thankyou”
(Health and Wellbeing Coaches)

“Thank you for your support, greatly appreciate it”
(Universal Credit claim supported through Welfare Rights)

Mrs X was very grateful for the outcome of the benefits check which helped her to receive an attendance allowance and pensions credit stating she can “live her life without worrying about the costs”. (Welfare Rights)



What Carers said

Out of the blue phone call to check I'm doing ok. Was lovely to hear someone is thinking about you and your health"

Page 21

Carer Support has made me feel less isolated. My carer personal budget has been a godsend and enabled me to look after my health by paying for acupuncture"

I had an assessment then I was offered emotional support from the Carers service, which was a great help"

"As a family we have been pleased with the care that we have received throughout this long debilitating period"

I found the support from the carers service invaluable to my experience whilst caring for Dad. I didn't realise the scope of support available until I became part of a carers group"



What people said “Support”

“I would like to sincerely thank you for your support....You have delivered excellent support to me, and I would like to thank you for your advice and guidance with navigating this complex and somewhat challenging field”

(Family member to Discharge and Review Team)

‘Words can never express what you have done for us. You have believed in Bill and enabled him to have a ‘can do’ outlook once more’

(Family member to Hospital Discharge Team)

“Everything is going sweetly and falling into place which it hasn’t for years”
(Person drawing upon support)

Only Social services in conjunction with the local GP seems to realise I desperately needed help and only social services were able to move things along for me. I am very, very grateful for Carole & Pam's timely interventions and want to pass on my thanks for their help and professionalism yesterday as well as their personal support. Both were excellent in their empathetic and knowledgeable / impactful approach’.

(Person drawing upon support to ACATT)



What people and young people said “Community Connectors and Transitions”

“I had a package of support from children’s services, which worked well for me. My adult social worker was allocated early, so she got to know me. Between her and the children’s worker, a DST was done at 17.5 years old, so the right funding was in place ready for me turning 18. My adult’s worker got to know me and stayed the whole transition, meaning she got to know me well. My children’s worker started fading into the background and my adult’s worker became my point of contact. I didn’t feel anxious or worried about transition, as it all felt seamless.”

“K’s life has changed dramatically he is now able to go into the community with his PA ..(without Mum,) and socialise He has had an amazing opportunity at Burton Albion (football is one of his passions) selling 50/50 tickets every home game with the opportunity to watch the game also as paid work!”

“My son has surprised us all. He now goes out most days. He is going swimming this afternoon. These activities are having a positive impact on his physical health”
Parent carer of young person supported to move to his own flat through transition

“Thank you once again for persevering with finding something for J- this was not easy I must admit.” mum

“Thank you for everything you have done. You and the community connectors team have made a world of difference!”



What people said “Living Well and BRS”

All of this works because of relationships. They are so important. I am really happy with everything; I do feel valued. It is nice to know that people are interested in hearing what we think and about our experience.

Feedback from a parent of a young man in the BRS cohort

They are great, they listened, were supportive, and offered values and opportunities to explore the source of my issues, suggesting checking the areas that possibly I haven't considered so far that might be a trigger to my mental health problems that I have or have been having"

-Feedback on the support received through Living Well

I thought it sounded amazing having a support bubble around you with different people involved in the team. They involve you more with the work. You get feedback from the team, a larger team review my situation, which is helpful, even if they are saying things that I do not like. You get to know what other professionals' thoughts are, it is not just one person you work with"

-Feedback from the voice of lived experience on the High Peak Living Well Prototype

“



Adult Social Care Survey (ASCS) 2022-23 Results

- ✓ **All ASCOFs higher than the previous year (2021-22)** – we cannot be certain increases represent improvement as they are not statistically significant
- ✓ Derbyshire ranked 10th out of 152 local authorities for satisfaction with social services, significantly better than England
- ✗ 29% response rate, down from 31.5% in 2021-22
 - Much higher response rate from community (72%) compared to residential settings (24%) - same last year, seen both regionally and nationally
 - Response rate higher amongst the following groups: females, 65 years and over, PSR of physical support

All ASCOFs are higher than the previous year (2021-22)

1A Social care-related quality of life (composite measure of multiple questions): peak score seen in 2016-17

1B Control over daily life: highest figures seen in 2016-17 and 2019-20

1|1 Social contact: seems to have improved since 2021-22 but in general declining since the peak in 2016-17

3A Satisfaction with care and support: highest it has been since surveys started in 2014-15

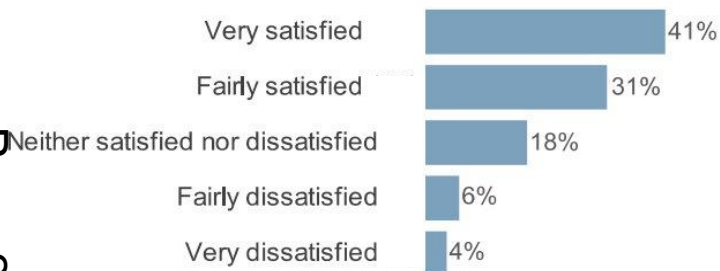
3D1 Ease of access to information: slightly higher than 2021-22 but generally the trend has been one of continuous decline

4A Proportion who feel safe: not as high as seen in 2018-19

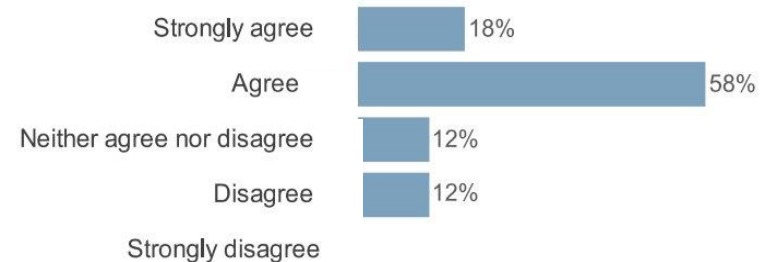
4B Proportion who say that services help them feel safe: higher than most years apart from the highest recorded figure in 2014-15

2023 Short Term Service Survey

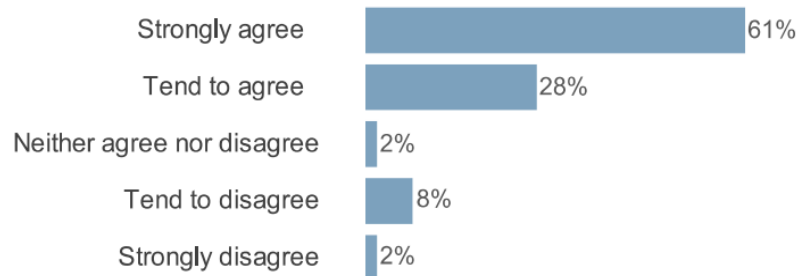
How satisfied or dissatisfied are you that your care and support works well and is responsive to your needs?



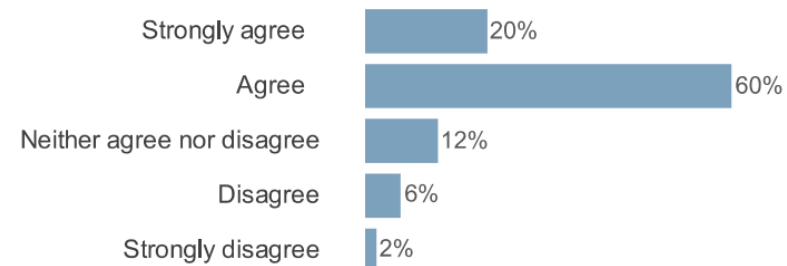
How strongly do you agree or disagree with the following statements (I have help to make informed choices if I need and want it.)



How strongly do you agree or disagree that your support staff are kind considerate and competent when delivering your support?



How strongly do you agree or disagree with the following statements (I have the information and support I need in order to remain as independent as possible.)



Our Transformation Story

Following the pandemic, it that on average 50% of people being identified as requiring reablement home care support was unable to access it.

This was impacting negatively on people's opportunity to be supported in their own home, increasing the challenges faced by hospital providers and resulting in poorer outcomes for people. There was also evidence which highlighted dissatisfaction within the already fragile workforce and that there was significant opportunity to improve the efficiency and effectiveness within the current offer.

Following a previous transformation programme supported by Newton, we had a tool kit of change methodology and set of solutions already in place, we worked collaboratively to look at the performance and identify the barriers for embedding the ways of working and alongside the challenge the pandemic brought identified that a revised workforce model and structural changes would help us embed and sustain the ways of working previously identified.

Following a consultation with 805 front line professionals, the restructure of social work, OT and home care teams across 8 geographical areas and an implementation plan which promotes a culture of high performance, strength-based approaches and collective professional responsibility. Through our sustainability plan we are committed to further integration with voluntary sector and health partners, a process for engagement with people with lived experience and a framework which supports our workforce to thrive.

In January 2024 we will implement our key structural changes, supported by the enabling approaches and are confident that we can achieve a 30% uptake in our access to reablement services.

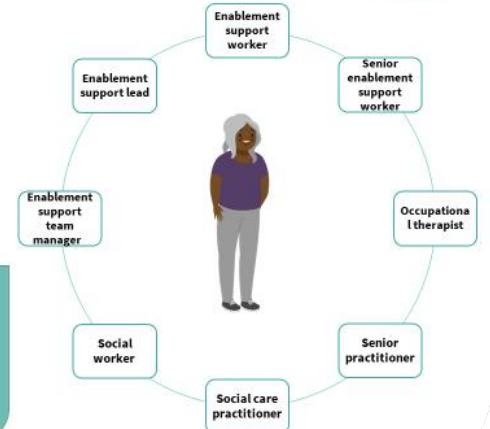
Page 27

The importance of the team and individuals

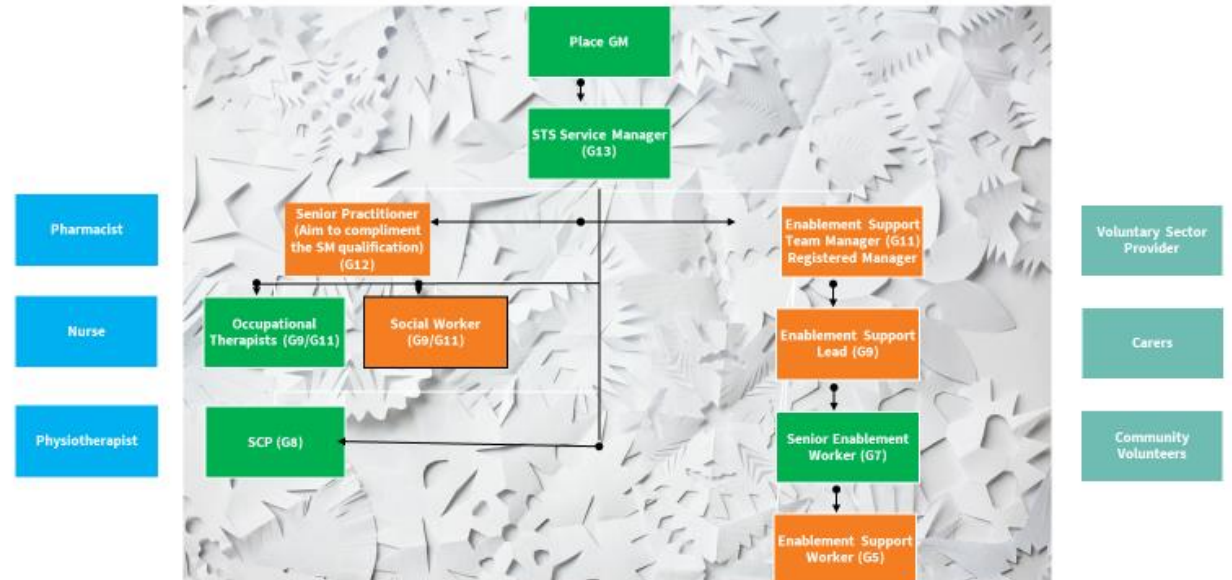
'A principal of reablement, which ensures an effective service, is having a reliable team. This is dependent on having the right structure, roles and a fully competent team of people which understand and operate within the ethos of reablement'. (SCIE)

Care Act 2014 commits local authorities to

- working with their communities and providing or arranging services that help to keep people well and independent.
- providing or arranging services aimed at reducing needs and helping people regain skills, for instance after a spell in hospital.
- working with partners, like the NHS, to think about what types of service local people may need now and in the future.

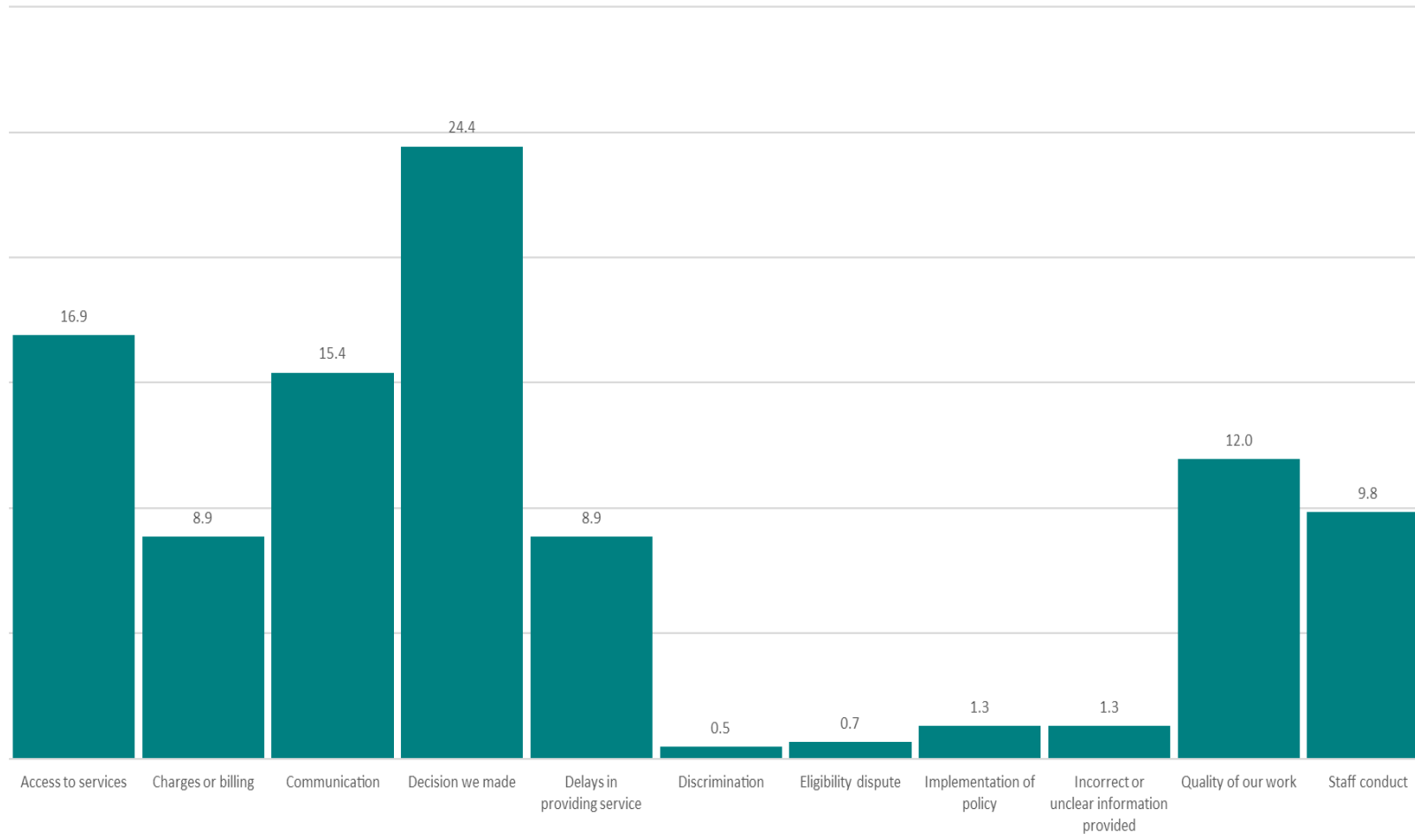


Team around the individual



Themes from Complaints and Service Enquiries

Number of Complaints and Service Enquires by theme in %



Themes from Complaints and Service Enquiries

Our top three themes received through formal complaints and service enquiries were decision we made, access to services and communication.

Decision we made (24.4%)

In 2023/2024 a consultation around Community Care charging was completed in October 2023.

This is reflected in the increased feedback received, with 24% of our complaints being around the theme 'decision we made'.

Access to services (16.9%)

The majority of the complaints and service enquiries received in this category were not upheld but there was a theme around where communication could have been better.

Communication 15.4%

This is a key area as a department for development and continue to look at ways to improve in this area.

• In response we have implemented the following-

- From December 2023, after every complaint, a themes and learning form is completed with the investigating officer to ensure that all identified learning can be looked at and reviewed. This is centrally overseen by the quality team who report on this at performance DMT meetings
- Monthly meetings are taking place with area senior managers to look at open complaints and service enquires and identify any learning.
- A financial review panel has been implemented to provide consistency in response to financial concerns.
- Performance reports are completed quarterly by the quality team to ensure that any thematic trends are identified and can be addressed within local area or the department when necessary
- There has been bespoke training sessions for operational colleagues with the introduction of the new recording policy, this is to support with improving quality around recording and written communication.
- There has been an internal webpage produced to support with the quality of complaint and service enquiry investigations and responses. There has also been an internal webpage created to share learning from feedback

Response to the Feedback

- We used this feedback to inform our Adult Social Care improvement plan
- We use this feedback to support ongoing transformation work
- Feedback is shared with teams and individuals to shape improved practice
- Relevant feedback is shared with partners to influence systems developments
- Specific systems in place as referred to on the previous slide