



Adult Social Care and Public Health Committee

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| Date: | Tuesday, 23 January 2024 |
| Time: | 6.00 p.m. |
| Venue: | Birkenhead Town Hall |

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This meeting will be [webcast](#)

AGENDA

- 1. WELCOME AND INTRODUCTIONS**
- 2. APOLOGIES**
- 3. MEMBER DECLARATIONS OF INTEREST**

Members are asked to consider whether they have any disclosable pecuniary interests and/or any other relevant interest in connection with any item(s) on this agenda and, if so, to declare them and state the nature of the interest.

- 4. MINUTES (Pages 1 - 4)**

To approve the accuracy of the minutes of the meeting held on 28 November 2023.

5. PUBLIC QUESTIONS

Public Questions

Notice of question to be given in writing or by email by **12 noon, Thursday 18 January 2024** to the Council's Monitoring Officer via this link: [Public Question Form](#) and to be dealt with in accordance with Standing Order 10.

For more information on how your personal information will be used, please see this link: [Document Data Protection Protocol for Public Speakers at Committees | Wirral Council](#)

Please telephone the Committee Services Officer if you have not received an acknowledgement of your question by the deadline for submission.

Statements and Petitions

Statements

Notice of representations to be given in writing or by email by 12 noon, Thursday 18 January 2024 to the Council's Monitoring Officer (committeeservices@wirral.gov.uk) and to be dealt with in accordance with Standing Order 11.1.

Petitions

Petitions may be presented to the Committee if provided to Democratic and Member Services no later than 10 working days before the meeting, at the discretion of the Chair. The person presenting the petition will be allowed to address the meeting briefly (not exceeding three minute) to outline the aims of the petition. The Chair will refer the matter to another appropriate body of the Council within whose terms of reference it falls without discussion, unless a relevant item appears elsewhere on the Agenda. If a petition contains more than 5,000 signatures, it will be debated at a subsequent meeting of Council for up to 15 minutes, at the discretion of the Mayor.

Please telephone the Committee Services Officer if you have not received an acknowledgement of your statement/petition by the deadline for submission.

Member Questions

Questions by Members to be dealt with in accordance with Standing Orders 12.3 to 12.8.

SECTION A - KEY AND OTHER DECISIONS

6. COMMUNITY CONNECTOR COMMISSION (Pages 5 - 12)

7. **OUTCOME OF DIRECT PAYMENTS REVIEW (Pages 13 - 20)**
8. **AWARD OF CONTRACT AND EXTENSION OF BUDGET TO RECOMMISSION WIRRAL INDEPENDENCE SERVICE (COMMUNITY EQUIPMENT AND TELECARE) (Pages 21 - 28)**

SECTION B - BUDGET AND PERFORMANCE MANAGEMENT

9. **ADULT SOCIAL CARE AND PUBLIC HEALTH 2024-25 BUDGET UPDATE REPORT (Pages 29 - 42)**
10. **MATERNITY AND NEONATAL QUARTERLY REPORT (Pages 43 - 48)**

SECTION C - OVERVIEW AND SCRUTINY

11. **END OF LIFE CARE BEST PRACTICE (Pages 49 - 56)**
12. **WIRRAL SAFEGUARDING ADULTS PARTNERSHIP BOARD UPDATE REPORT (Pages 57 - 106)**

The PDF file below may not be suitable to view for people with disabilities, users of assistive technology or mobile phone devices. Please contact alisonmarchini@wirral.gov.uk if you would like this document in an accessible format.

13. **ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE WORK PROGRAMME UPDATE (Pages 107 - 116)**

Adult Social Care and Public Health Committee Terms of Reference

The terms of reference for this committee can be found at the end of this agenda.

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ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

Tuesday, 28 November 2023

Present: Councillor J Williamson (Chair)

Councillors P Gilchrist G Jenkinson
T Murphy J McManus
K Murphy M Jordan
A Onwuemene S Mountney
J Stewart Laing (In C Baldwin
place of B Hall)

52 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting as well as those watching the webcast.

53 APOLOGIES

An apology for absence was received from Councillor Brenda Hall.

54 MEMBER DECLARATIONS OF INTEREST

Members were asked to declare any disclosable pecuniary interests and any other relevant interest and to state the nature of the interest.

Councillor Gail Jenkinson declared a personal interest as a client of hers was in receipt of direct payments in order to pay her.

55 MINUTES

Members considered the minutes of the meeting of the Committee on 17 October 2023. It was noted the Councillor James Stewart Laing was present at the meeting as a substitute.

Resolved – That, subject to Councillor James Stewart Laing being noted as present, minutes of the meeting held on 17 October 2023 be approved as a correct record.

56 PUBLIC QUESTIONS

There were no questions, statements or petitions to report.

57 **UPDATE ON CARE MARKET SUFFICIENCY, HEALTHY WIRRAL PROGRAMME**

The Assistant Director for Integrated Services and Commissioning presented the report of the Director of Care and Health which provided an update on the Unscheduled Care Programme workstream for Care Market Sufficiency. The purpose of the workstream was to ensure sufficiency in the community care market to respond to local needs, and to remove barriers to people leaving hospital care to either go to their own home or into domiciliary care. Capacity and demand modelling had been undertaken to assess future demand and prepare for it. The numbers of people requiring packages had not increased but the complexity of the packages had since 2019. The numbers of clients awaiting packages had reduced to zero and there were also six new providers in the care market.

Members asked about the due diligence for new providers and about recruitment and retention. They also asked about the consideration of cultural diversity among carers and clients and were interested in seeing figures on this at future meetings.

Resolved: That

- 1. the improvements to the care market capacity and flow for domiciliary care be noted.**
- 2. the work completed with care homes to improve safe transfers of care from a hospital setting be noted.**
- 3. the future work of the Care Market Sufficiency Group be endorsed.**

58 **ADULT SOCIAL CARE AND PUBLIC HEALTH 2023/24 Q2 BUDGET MONITORING**

The Director of Care and Health introduced his report which set out the financial monitoring information for the Adult Social Care and Public Health Committee as at Quarter 2 (1 Apr – 30 Sep) 2023/24. The report provided Members with an overview of budget performance for this area of activity, including delivery of the 2023/24 saving programme and a summary of reserves to enable the Committee to take ownership of the budgets and provide robust challenge and scrutiny to officers on the performance of those budgets. At the end of Quarter 2, there was a reported adverse position of £0.435m on the Committees net revenue budget of £130.579m. Underlying pressures and extra funding were detailed.

Members queried aspects of the report including extra care housing developments. It was noted that some applications for development had been rejected at Planning Committee and a workshop with Planning officers was suggested to examine the issue. The use of technology to assist with care was also discussed.

Resolved: That

- 1. the adverse position presented at Quarter 2 be noted.**
- 2. the delivery of the 2023/24 savings programme at Quarter 2 be noted.**
- 3. the reserves allocated to the Committee for future one-off commitments be noted.**
- 4. the level of reserves at Quarter 2 be noted.**

59 ADULT SOCIAL CARE AND PUBLIC HEALTH PERFORMANCE REPORT

The Assistant Director Operational Delivery and Professional Standards presented the report of the Director of Care and Health which was a performance report in relation to Adult Social Care and Public Health. It was noted that the increase in care home clients was less than proportional to the increase in population which was a sign of positive interventions of the Home First initiative. There were measures in place to improve the quality of care homes and to enable reablement of clients so they do not suffer a detriment to their lifestyle as a result of treatment.

Members questioned the distribution and improvement progress of care homes.

Resolved: That the content of the report be noted.

60 ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE WORK PROGRAMME UPDATE

Members considered the work programme for the Committee.

Various changes were suggested including:

- the addition of a workshop with planning officers on supported living projects (i.e. Extra Care Housing) to work through the approach of such developments to the planning process;
- The moving of the National Substance Misuse Grant Funding Update to March 2024 when there would be more substantial issues to report;
- The All Age Disability And Mental Health Service Delivery Review be considered before the contract expires in September 2024;
- Front Door To Volunteering item in March 2024 looking at the initiative being led by Wirral Community and Voluntary Services including funding and social prescribing
- An update on the Domestic Abuse Strategy as it relates to the Health and Wellbeing Strategy

Resolved: That, subject to the changes noted above, the proposed Adult Social Care and Public Committee work programme for the remainder of the 2023/24 municipal year be noted.



Adult Social Care and Public Health Committee

23rd January 2024

| | |
|----------------------|------------------------------------|
| REPORT TITLE: | COMMUNITY CONNECTOR SERVICE |
| REPORT OF: | DIRECTOR OF PUBLIC HEALTH |

REPORT SUMMARY

This report seeks agreement from the Adult Social Care and Public Health Committee to progress proposed commissioning intentions for Community Connector Service, Connect Us.

The report sets out the requirement for the current community connector service to be recommissioned from February 2025. The current service is experiencing increasing demand, supporting residents and communities with a wide range of complex issues in following the pandemic and in response to the ongoing cost of living crisis. This report sets out the proposed funding model for the re-commission, which includes use of the Public Health Grant, given the strong links between the service outcomes, and improved population health.

Evaluation undertaken to date will shape the delivery and outcomes of this recommission, and an evaluation of the new service will take place to inform any future recommissions.

The report supports the implementation of the Wirral Working Together Plan 2023-2027 and its core purpose to work together to promote fairness and opportunity for people and communities in Wirral through working to local priorities using local resources to ensure Wirral residents receive the best possible services.

The proposed actions affect all wards within the borough and is a key decision.

RECOMMENDATION/S

The Adult Social Care and Public Health Committee is recommended to:

1. Authorise the Director of Public Health to re-commission the Community Connector service totalling up to £4,308,654 (£718,109 per annum) for a four-year contract (1st February 2025 – 31st January 2029) with the option of a one year plus further one year extension.
2. Agree that delegated authority be given to the Director of Public Health to award the tender to the successful bidder following the tender process.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 To allow Public Health to implement the commissioning intentions for the community connector services as outlined in this report.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 It is necessary to recommission the service highlighted to comply with Public Contract Regulations and Wirral Council Contract Procedure rules.
- 2.2 The current commission was considered as part of the Public Health Grant Review process. Options, including contract length, contract value and service capacity, were explored. One of the options contemplated by the review panel was to reduce the current contract value by a third with a specific focus on those areas with the highest levels of deprivation. However, given the level of needs being seen across the borough relating to mental health, social isolation and increasing complex needs of residents, the grant review panel concluded that keeping the service Wirral wide was the best option. The impact of not recommissioning the service was also considered.

3.0 BACKGROUND INFORMATION

- 3.1 The Community Connector service was commissioned in response to local insight undertaken to understand the support communities required to address health related worklessness in the borough. Involve Northwest were originally awarded the Community Connector contract by Wirral Council following a tender process in 2017. The contract was subsequently extended in August 2022 in line with Wirral contract procedure rules and currently runs until January 2025.
- 3.2 The service aims to engage with residents who are disconnected and unlikely to access mainstream services. Through a network of Community Connectors, the service seeks to address social isolation and promote active inclusion to improve mental health and wellbeing. The service takes a person-centred approach, based on individual need and is community centred; always striving to build community resilience. The Community Connectors provide outreach and 1:1 support to individuals to encourage greater access to social groups and activities within the community and access to mainstream services. In addition to this the Community Connector service offers a range of wraparound support to local communities including the Good Neighbour scheme, the Sparks Fund and Wirral Infobank
- 3.3 Since the service was established in 2017, the Community Connectors have signed up 7,581 community members from across the Wirral. This figure includes only those who have formally engaged with the service, meaning once door knocks and community events are included, this figure is much higher. Data from the Connect Us database shows that high proportions of community members engaged with the service were out of work due to long-term sickness, having a disability, or being unemployed (n=5,164, 68.7%). The service also supports a relatively high number of retired community members (n=806, 10.7%).

- 3.4 The Community Connector service has been independently evaluated by Liverpool John Moore's University (LJMU) in 2019 and again in 2023. Both evaluations demonstrate the system wide outcomes achieved by the service including, reductions in medical interventions, social care interventions and increases in employment, volunteering, and further education outcomes. This evaluation highlighted how many people using the service described situations of desperation, of contemplating suicide; others described being housebound or socially isolated for many years. The knock on the door for many people was seen as saving them from their situation. The positive features people identified with the service was that the Community Connectors worked at the speed of individuals and showed they really cared by spending time with people, allowing them to engage at their own pace and in their own environment. The service is not linked to any statutory services, which also increased levels of trust.
- 3.5 The Community Connectors offer small amounts of funding, up to £1,000, as part of the Sparks Fund initiative. This fund allows grass roots community groups and individuals across Wirral to apply for a 'kickstart' funding to get local initiatives started to benefit the community. The Community Connectors have supported the development of Wirral Infobank, an online directory of support to make people aware of what support is available in their local area. The Community Connectors are key to ensuring that Infobank is consistently and proactively updated. Providing a platform to share the wealth of knowledge and support on offer to all Wirral residents. There are currently over 2,300 active pages of community support available through Wirral Infobank: <https://www.wirralinfobank.co.uk>.
- 3.6 The good neighbour scheme was developed as part of the Community Connector Service in 2017 and is delivered in collaboration with Wirral Older People's Parliament. The initiative aims to:
- Reignite community spirit
 - Encourage community integration
 - Make people feel valued and safe in their neighbourhoods.
 - Trigger conversations to bring people together
 - Celebrate good neighbours
 - Establish a recognisable symbol of the community spirit (providing a 'Good Neighbour Sticker' to display on their windows)

15,424 Wirral households/community premises and commercial businesses have opted in to be part of the Good Neighbour initiative.

- 3.7 Key recommendations from the Liverpool John Moore's University evaluation have been used to ensure the new specification focus on the following elements:
- **Promoting the service:** The service remit (including the roles, activities, and responsibilities of the Community Connectors) could be promoted more clearly across the whole system, alongside clear definitions of the signposting function of the service.
 - **Partnership working:** Work should continue to be undertaken to continue to develop and strengthen these relationships, particularly in the statutory sector.

- **Flexible approach:** It is important, for the sustainability of the service, to continue to follow a flexible model, providing a preventative, proactive and person-centred approach.
- **Signposting or case holding:** Further exploration may be undertaken to see whether a 'case worker' approach would be suitable for specific Community Connectors to undertake, with a 'link' role for those Connectors working with service users who may require initial support or handholding but are then referred on for case work.
- **Asset building:** Creative approaches such as the Sparks fund using existing strengths should continue to be explored (e.g. retired professionals offering coaching and mentoring to increase aspirations amongst others).
- **Engagement with community members:** It was suggested that door-knocking should be maintained but consider focusing resource in areas where the presence of Connectors is less well-known.
- **Evidencing impact:** Ways in which to capture informal feedback and conversations to evidence system impact should be explored.
- **Support for Community Connectors:** It would be beneficial to provide specific support and training to the Community Connectors, ensuring all are Trauma Informed and have access to support for their own wellbeing.

3.8 The service will be commissioned in line with Wirral Contract Procedure Rules and will follow on open tender process. Soft market testing will be carried out with all potential providers including mapping of similar or existing community roles to avoid duplication and understand capacity across local communities.

4.0 FINANCIAL IMPLICATIONS

- 4.1 The current contract is funded from the Public Health grant. The total value of the proposed contract is up to £718,109 per annum equating to a maximum of £4,308,654 over the length of the contract (4 years contract plus the options of adding one year followed by one further year).
- 4.2 The value and availability of the Public Health grant for 2025/26 onwards is not yet known. The budget for the service has been allocated based on the Public Health Grant funding being consistent with the current financial year. Should the Public Health Grant be reduced, then contract amounts may need to be varied. The procurement process that will be undertaken will include appropriate mitigating measures to ensure that the Council does not commit to expenditure that is unfunded.
- 4.3 Any inflationary pressures incurred by potential providers will be managed by those providers, for example through operational efficiencies. The contract value will not be amended for inflation and there will therefore be no inflationary pressure to be met by the Public Health Grant.

5.0 LEGAL IMPLICATIONS

5.1 The recommissioning of the service detailed within this report will need to be undertaken in accordance with the Public Contract Regulations and Wirral Council Contract Procedure rules.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) will be applicable from one provider to another.

7.0 RELEVANT RISKS

7.1 It is necessary to recommission the services highlighted in order to comply with the Public Contract Regulations 2015 and Wirral Council Contract Procedure rules. There is always a risk of disruption to service provision during service redesign, re-commissioning, and commencement of new services. To mitigate against this and minimise disruption, adequate time to plan for, and implement the mobilisation of new services, is built into the procurement process between contract award and commencement.

7.2 The procurement process is also subject to scrutiny and at risk of legal challenge. Particular regard is given to contract procedure rules and relevant legislation at all stages of the process and the Public Health team works closely with the Procurement team to ensure compliance.

7.3 In the current challenging financial climate, the impact of any future reductions in budget or policy implications on the amount of funding available for Public Health is unknown. The value and availability of the Public Health grant for 2024/25 onwards is not yet known. This risk will be mitigated by the insertion of appropriate termination clauses in the contract.

8.0 ENGAGEMENT/CONSULTATION

8.1 In order to inform the continued development and design of the service moving forward, engagement and consultation will be undertaken with key partners, stakeholders, and local communities. This will include:

- Engagement with local commissioners of health and care and community services to understand the impact of increasing cost of living.
- Engagement sessions with a wide range of stakeholders to understand their current concerns and challenges that are affecting local residents including any key policy changes.
- Working with third sector and community partners to engage with local communities to understand their needs in relation to information and advice services.
- Qualitative insight work with local residents to understand the impact and ways support can be tailored to meet their needs.

9.0 EQUALITY IMPLICATIONS

9.1 As part of the recommission an equality impact assessment (EIA) will be undertaken to ensure all equality impacts are considered and relevant actions are taken to mitigate any potential negative impacts. The current EIA- Community Connectors December 2023 is available here:
<https://www.wirral.gov.uk/communities-and-neighbourhoods/equality-impact-assessments>

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 The current contract is monitored against social value targets on a quarterly basis. These returns demonstrate how the service has a positive impact on Wirral's environment and climate.

11.0 COMMUNITY WEALTH BUILDING

11.1 Community Wealth Building is a people-centred approach to economic growth which reorganises local economies to be fairer and stops wealth flowing out of communities, towns, and cities, and instead places control of this wealth into the hands of local people, communities, businesses, and organisations. This service supports several of the key outcomes within the strategy.

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APPENDICES

N/A

BACKGROUND PAPERS

Improving Individual Health and Wellbeing across Wirral.

<https://www.wirralintelligenceservice.org/media/2013/final-wirral-toolkit-1d.pdf>

An Evaluation of the Health Related Worklessness Programme.

https://www.wirralintelligenceservice.org/media/2942/wirral-worklessness-evaluation-timpson-et-al-2019_final.pdf

TERMS OF REFERENCE

This report is being considered by the Adult Social Care and Public Health Committee in accordance with Section 2.2(c) of its Terms of Reference:

all Public Health functions (in co-ordination with those functions reserved to the Health and Wellbeing Board and the Overview and Scrutiny Committee's statutory health functions)

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|-----------------|------|
|-----------------|------|

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ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

23 JANUARY 2023

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|----------------------|--|
| REPORT TITLE: | OUTCOME OF DIRECT PAYMENTS REVIEW |
| REPORT OF: | DIRECTOR OF CARE AND HEALTH |

REPORT SUMMARY

The review of Direct Payment support was presented to this Committee on 13 June 2023, and approval was given to explore how a Personal Assistant register could best be delivered with the intention of increasing the numbers of people, carers and families choosing to use a Direct Payment. This report describes the outcomes of the procurement process, and the decision to not proceed with an award of contract. It recommends and describes a more ambitious and longer-term service model that would be better able to achieve the strategic aims of the Council, value for money targets and a more comprehensive offer for potential and current Direct Payment recipients to support the sustainability of the arrangements.

This review has been a collaborative exercise and included, as equal partners, officers of the Council, people with lived experience, and representatives from Cheshire and Wirral Partnership (CWP) NHS Foundation Trust and the Wirral Community Health and Care NHS Foundation Trust (WCHCFT). The latter remain involved, but the relevant staff have transferred to the Council.

The report supports the following theme from the Council’s Plan:

- Promoting independence and healthier lives

This affects all wards and is a key decision.

RECOMMENDATION/S

The Adult Social Care and Public Health Committee is recommended to:

- (1) Endorse the proposed service model and outcomes as described in section 3.1 to 3.6 of this report.
- (2)
 - (a) Authorise the Director of Care and Health to commence a procurement process for the appointment of an accredited provider for a merged offer to include a payroll and managed accounts service, information advice and guidance for current and potential Direct Payment recipients and a Personal Assistant register for a three-year contract with an option for a further one-year extension; and
 - (b) Give delegated authority to the Director of Care and Health to award the contract to the successful bidder following the tender process.
- (3) Request the Director of Care and Health to bring a further report to a future Committee to inform Members of the outcomes achieved once the new service model is established.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

1.1 On 13 June 2023, this Committee approved a one-year pilot, for the delivery of a Personal Assistant register. A procurement exercise was completed in October 2023. The response rate was low, possibly due to the short-term nature of the contract. The procurement process did not attract adequate competition. This report recommends that a procurement process is opened for the procurement of a merged Direct Payment offer. It would include:

- A payroll and managed accounts service;
- Information advice and guidance for current and potential Direct Payment recipients, Personal Assistants and staff undertaking assessments; and
- A Personal Assistant register.

1.2 The recommended model would be more efficient and cost effective than the Personal Assistant register and would have the potential to attract a broader range of providers and offers a single point of entry for Personal Assistants for current and potential Direct Payment recipients. The successful provider would be required to provide a training plan for all staff and improvement targets will be agreed for Personal Assistant Recruitment and Direct Payment recipients.

2.0 OTHER OPTIONS CONSIDERED

2.1 **Other Option One** - Award of contract to a provider offering information advice and guidance to people looking to access a Direct Payment , and a Personal Assistant register. The payroll and managed accounts service would not be included and access to this function would be via a single or a framework of providers. This structure could be fragmented, and two entry routes could be a disincentive to potential Direct Payment recipients.

2.2 **Other Option Two**- To include a Personal Assistant register, a payroll and managed accounts service, information, advice, and guidance as part of the Council's provider arm. Current capacity within this service would prevent the development of the recommended model at the pace and scale required.

3.0 BACKGROUND INFORMATION

3.1 It is proposed that a procurement process is commenced for a merged offer for a three-year contract with an option for a further one year. It is anticipated the proposed length of contract will attract a broad range of providers. This would include a payroll and managed accounts service, information advice and guidance for current and potential Direct Payment recipients and a Personal Assistant register. Performance against metrics would be undertaken for the lifetime of the contract. This is the preferred option.

- 3.2 People with lived experience, have identified delays in Direct Payments being processed and sourcing Personal Assistants with the appropriate skill set as disincentives to opting for a Direct Payment. There is evidence that suggests a lack of support with the responsibilities associated with becoming an employer has led to people opting out of the arrangement. The proposed blended model accelerates the 3 stages of the strategy previously approved by Committee and will help circumvent or reduce these barriers. The successful provider would be required to deliver the following.
- Training for Personal Assistant recipients to support successful recruitment and compliance with employment law.
 - A Payroll and managed accounts function, to enable people to enjoy the flexibility a Direct Payment offers without the responsibility of managing the budget themselves.
 - A Personal Assistant register which would match people with the skill set required to meet assessed needs.
 - Information, guidance and support for Direct Payment recipients, Personal Assistants and social care professionals.
- 3.3 The hourly rate of pay for Personal Assistants would continue to be aligned with that offered in the domiciliary care sector. A resilient care at home offer which enables people to choose a commissioned domiciliary care service, or a Direct Payment would increase self-directed support. Capacity to meet demand would increase, enabling more people to stay at home or to return home from hospital reducing reliance on out of area placements or inappropriate placements in residential and nursing beds.
- 3.4 A business process has been developed to streamline internal processes (there are no resource implications associated with this). Adult Social Care would be required to:
- Complete a Care Act compliant assessment and support plan and where possible, develop a support plan enabling people to self-direct their support;
 - Calculate the personal budget including that start-up costs are correct;
 - Make Team managers responsible for validating the support plan;
 - Provide information and advice about Direct Payments and access to the commissioned Direct Payment support service.
 - Ensure business processes are followed, including any referrals and interface with the personal finance unit for payment set up and recovery of unspent funds via prepaid cards.
 - Undertake statutory reviews and ascertain if a Direct Payment continues to be the best way to meet the person's needs.

3.5 Revenues and Benefits (Personal Finance Unit & Direct Payments Team) would be responsible for:

- Setting up Payment Card accounts and closing where appropriate/in a timely manner;
- Completing audits of all Direct Payment accounts and escalating to the appropriate Social Work teams when non-compliant;
- Recovery of unused funds in a timely manner. This should include monitoring of cases 'transferring' to Continuing Health Care funding or a personal health budget (which can generate significant overlap/invoicing);
- Ensuring the payment run is processed on time and correspondence is sent out informing the recipient of costs; and
- Completing a financial assessment that is compliant with the Council's charging policy, which is publicly available. Provide training to Social Workers to enable them to undertake their role within the Direct Payment process. Responsibility for issuing pre-paid cards.

3.6 The Direct payment recipient is responsible for:

- Using the Direct Payment to meet the needs identified in the support plan only, including the purchase of services, equipment, and Personal Assistants;
- Employing staff and ensuring they are supported, appropriately trained (e.g., safeguarding) and paid (including National Insurance contributions and holiday pay);
- Being complaint with employment law, keeping accounts, and any necessary HM Revenue and Customs reporting requirements.

3.7 A further report to be brought to a future committee setting out the extent to which the recommended service model will have increased accessibility, awareness and knowledge for staff undertaking assessments, Personal Assistants and current and potential Direct Payment recipients. The overall intention is to increase the number of adults and children who opt for a Direct Payment to meet their assessed needs.

4.0 FINANCIAL IMPLICATIONS

4.1 The table below sets out the annual costings of the service reflecting the full 3-year cost of £661.251:

| | Year 1 | Year 2 | Year 3 | Total |
|----------------------------------|----------------|----------------|----------------|-----------------|
| | 2024-25 | 2025-26 | 2026-27 | 3-year |
| | (£) | (£) | (£) | cost (£) |
| Payroll Managed Accounts (Wired) | 105,000 | 109,200 | 113,568 | 327,768 |
| PA Register | 27,000 | 28,080 | 29,203 | 84,283 |
| Supervisor (inc. on-costs) | 38,400 | 40,000 | 41,600 | 120,000 |
| Support Worker (inc. on-costs) | 31,100 | 48,000 | 50,100 | 129,200 |
| Total Cost | 201,500 | 225,280 | 234,471 | 661,251 |

- 4.2 Salary costs are based on current Wirral pay rates and have been uplifted each year to reflect inflation. An additional 0.5 full time equivalent Support Worker is included in the plan from year 2 as the service grows.
- 4.3 The cost of the service will be met in year 1 by the Adult Social Care Discharge Fund, the current cost of the payroll and managed accounts service is provided by Wired and the contribution from the Better Care Fund.
- 4.4 Efficiencies achieved in growing the Direct Payment offer will ensure the service is cost neutral to the Authority from year 2. 25 care plans commissioned through Direct Payments instead of direct home care is sufficient to cover the cost of the service. This equates to less than 5% growth in the current service. Any further growth will support yearly savings targets. The procurement process will be an open tender.

5.0 LEGAL IMPLICATIONS

- 5.1 If the preferred option is approved for progression, officers will undertake a formal market engagement on the proposed model prior to going out to tender.
- 5.2 It is a statutory duty as defined by the Care Act 2014, to offer a person a Direct Payment as an alternative to a directly commissioned care and support service where a person has been assessed as having eligible needs. This applies both to carers and people in need of care and support. The regulations of the Children's Act also place a duty on Local Authorities to offer a Direct Payment to disabled children. The proposed model will be an adult services commission, but the specification will include a provision to include support for children and their families the within lifetime of the contract.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

- 6.1 There are no resource implications as a result of this exercise.

7.0 RELEVANT RISKS

- 7.1 There is a risk that the number of people in receipt of a Direct Payment does not increase potentially impacting the viability of the commissioned service. A lower response rate to the tender application would lead to a lower number of people in receipt of a direct payment.

8.0 ENGAGEMENT/CONSULTATION

- 8.1 On evaluation of the original tender exercise, the market was advised of the intention to commission a wider specification to include a payroll and managed accounts service, info advice and guidance and a PA register. This was communicated to the providers who engaged in the procurement process, they were advised, due to the landscape changing and Council strategy, a decision to award had not been made.
- 8.2 The model described in the report was produced in consultation with people with lived experience, representatives from CWP and WCHCFT. The latter remain involved, but the relevant staff have transferred to the Council.

9.0 EQUALITY IMPLICATIONS

9.1 A new Equality Act Assessment (EIA) has been completed in December 2023 and is located:

<https://www.wirral.gov.uk/communities-and-neighbourhoods/equality-impact-assessments/equality-impact-assessments-january-202-6>.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 It is anticipated that Personal Assistants will be recruited locally, therefore the model proposed will have limited environmental or climate implications.

10.2 Any provider commissioned by the Council is required to demonstrate the ways in which they will reduce the carbon footprint.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Increased employment opportunities for people electing to become a Personal Assistant and for those people in receipt of a Direct Payment, due to the flexible nature of this arrangement.

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APPENDICES

N/A

BACKGROUND PAPERS

Direct Payment report to Adult Social Care & Public Health Committee (13.06.23)

TERMS OF REFERENCE

This report is being considered by the Adult Social Care and Public Health Committee in accordance with Section 2.2(a) and (b) of its Terms of Reference: adult social care matters (e.g., people aged 18 or over with eligible social care needs and their carers) and promoting choice and independence in the provision of all adult social care).

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|---|--------------|
| Adult Social Care and Public Health Committee | 13 June 2023 |
| Adult Social Care and Public Health Committee | 3 March 2022 |

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ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

23 January 2024

| | |
|----------------------|---|
| REPORT TITLE: | AWARD OF CONTRACT & EXTENSION OF BUDGET TO RECOMMISSION WIRRAL INDEPENDENCE SERVICE (COMMUNITY EQUIPMENT AND TELECARE) |
| REPORT OF: | DIRECTOR OF CARE AND HEALTH |

REPORT SUMMARY

The purpose of this report is to request approval to award a contract for the provision of the Wirral Independence Service (WIS), at an increased budget cost of £4.9m from £4.2M per year.

The commencement of the procurement process at an original budget cost of £4.2M was approved by this Committee in June 2023. Following a rigorous procurement exercise, the bid from the most economically advantageous tenderer was £4.9M per year. The current contract ends in June 2024 and there are no further contract extensions available.

This is a joint commission with NHS Cheshire and Merseyside Integrated Care Board (Wirral Place) (NHSCMICB) and is managed via the Better Care Fund. The WIS is inclusive of:

- The provision of Community Equipment;
- Technology Enabled Care and Response service;
- Carers emergency card;
- Falls Pick-up / Responder service;
- Falls prevention service;
- Provision of Paediatric equipment; and
- Education equipment for schools

The commission will support the following priorities from Wirral Council’s Plan:

- To prioritise those with the greatest needs
- To deliver council services within the means of the council budget
- To be prepared to innovate and face the future
- To play our part in addressing the climate emergency and protecting our environment

This is a key decision which affects all wards.

RECOMMENDATION/S

The Adult Social Care and Public Health Committee is recommended to approve the award of a 5-year contract (with options for a 3 year, plus a 2-year contract extension) for the provision of the Wirral Independence Service (Community Equipment and Telecare) with a total contract value of £4.9m annually, up to £51m over 10 years to Medequip Assistive Technology Ltd as the highest scoring tenderer in accordance with the Most Economically Advantageous Tender (MEAT) criteria.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 The Wirral Health and Care system must ensure that it has a fully operational and responsive community equipment and technology enabled care (TEC) service to meet local needs to meet its statutory duties.
- 1.2 The use of TEC forms a key part of the Council's approach to digital care and early intervention and prevention services.
- 1.3 The Council has a duty to ensure value for money and to tender will ensure that best value is sought.
- 1.4 A longer contract length of up to 10 years, will support the successful tenderer to invest in local infrastructure and support social value.
- 1.5 The additional finances (£700k per year) required have been identified:
 - £300k from Adult Social Care;
 - £130k from Public Health for the Falls Prevention service; and
 - £300k from NHSCMICB

2.0 OTHER OPTIONS CONSIDERED

- 2.1 To not award the contract would mean that the Council would not meet its statutory duty to provide community equipment.
- 2.2 To re-tender the service at the original £4.2M per year would mean delays to awarding a new contract and, following a competitive dialogue process, would be unlikely to deliver the specified service at any lower cost.
- 2.3 To remove elements of service from the specification would reduce the quantity and quality of service to Wirral residents, potentially resulting in challenges that the Council is failing to meet its statutory duties.

3.0 BACKGROUND INFORMATION

- 3.1 This Committee in June 2023 approved the re-commissioning of the Wirral Independence Service on a 5-year contract (with options for a 3-year, plus a 2-year contract extension) with a total contract value of £4.2m annually, up to £42m over 10-years. The Committee also approved that Director of Adult Social Care and Health be authorised to award the contract to the most economically advantageous tenderer. Subsequently a procurement process proceeded on the basis of a Competitive Dialogue Tender exercise. Procurement colleagues recommended this approach as it offered the opportunity to utilise industry best-practice, exploit the latest expertise of service providers and ensure best value for the Council because of the "competition" created between interested providers.
- 3.2 Only one tenderer submitted a tender which met the full tender requirements and was selected to participate in the second stage. Their bid was fully evaluated and scored in accordance with the relevant criteria.

- 3.3 The initial bid for the contract resulted in a cost of £67M over ten years. Making use of the robust and challenging discussion element of the Competitive Dialogue Tender process a revised bid of £51.7M over ten years was submitted.
- 3.4 This is a joint commission with NHSCMICB and Wirral Council (WBC), Adult Social Care and Public Health and Childrens Directorate working collaboratively with Wirral schools. This service supports people to remain independent and safe in their own home, and at school.
- 3.5 The provision of community equipment to eligible children and adults is vital in helping to achieve efficiency and cost-effectiveness across a range of other local authority and health authority services, and to help achieve local and health authority strategic objectives.
- 3.6 During the lifetime of the contract, the service has developed and now also supports provision of specialist equipment to mainstream schools, provision of equipment for paediatrics and as part of the new commission will include specialist schools' equipment.
- 3.7 The overarching aims of this service is to support people to live independently in their own homes as long as possible, support the reduction in hospital admission and support timely hospital discharges.

The service is inclusive of:

- Pressure care
 - Falls Prevention Service
 - Community equipment, e.g., bathing equipment, beds, commodes
 - Response for Continuing Health Care (CHC)
 - Adult Visual Impairment & Hearing Impairment equipment
 - Technology enabled care and remote monitoring (equipment, installation maintenance, decontamination and repair and recycling)
 - An online IT requisition, monitoring and reporting system
 - Centre for Independent Living with a Retail Outlet/ Demonstration facility
 - An online self-help and ordering system with suitably qualified, knowledgeable, and experienced staff to support those funding their own care and to provide professional assessment and oversight within the service.
- 3.8 The service will operate 7 days a week (8am to 8pm) to achieve:
- Delivery of equipment
 - Installation of equipment
 - Technical support/knowledge for prescribers
 - Maintenance and repair of equipment
 - Collection and decontamination of equipment
 - Recycling, disposal and adaptation of equipment
 - Reissue of community equipment

3.9 The specification will also require the new supplier to:

- Work collaboratively with WBC and NHSCMICB to develop a multi-disciplinary approach for an Independent Living Centre in partnership with other stakeholders across Wirral.
- Strengthen the approach to best value and procurement approach throughout the lifetime of the contract, through continuous proactive negotiations with suppliers, geographic pricing comparisons and reviews.
- Work proactively on reducing costs of supply – seeking local alternatives make and buy from UK.
- Work with Wirral to achieve a suitable and affordable pricing model working within the WIS contract cost envelope agreed as part of the Better Care Fund.
- Work proactively and collaboratively with WBC and NHSCMICB and wider stakeholders to maximise equipment recovery and recycling to support the Council with its carbon reduction mission.
- Reduce the impact of the environment through tracking and recycling of equipment, reducing the carbon footprint.
- Work collaboratively with WBC and NHSCMICB to deliver a carbon reduced transport solution provision across the lifetime of the contract in line with Wirral Council's priorities, objectives, and values.
- Work collaboratively with WBC and NHSCMICB and wider stakeholders to increase performance around equipment recovery and recycling as above.
- Work in collaboration with WBC and NHSCMICB to drive the Early Intervention and Prevention and NHS England 2-hour Crisis Response National Initiatives, by recalibrating service delivery to meet urgent equipment requests between 16:00 and 18:00 7 days a week.
- Work with WBC and NHSCMICB to achieve value for money Technology enabled care installation, monitoring and response service solutions in line with the switchover from the old analogue public switched telephone network (PSTN) to a fully digital network by 2025.
- Work collaboratively with WBC and NHSCMICB to review the cost of call centre and explore alternative operating models e.g., virtual or agile/hybrid working to maximise efficiencies and financial gain share.
- Work with WBC and NHSCMICB to support Early Intervention and prevention initiatives and data quality through the development of interface between Digital Equipment ordering system for Community, Liquid Logic and NHS systems, with the production of a commissioner dashboard.

4.0 FINANCIAL IMPLICATIONS

4.1 The WIS contract is managed within the Better Care Fund. The current annual value of the contract is £4.2m, this amount for the future commission does not allow for inflationary impact or growth. The current contract is a maximum amount with mitigating actions taken within year to continue to achieve this amount.

| Number of Years | Total Amount (£m) |
|-----------------|-------------------|
| 1 | 4.2 |
| 5 | 21.0 |
| 8 (5+3) | 33.6 |
| 10 (5+3+2) | 42.0 |

- 4.2 The revised average annual value of the contract after the Competitive Dialogue tender exercise is £4.9m in year one. There is an annual allowance of 1.5% built in for growth and an allowance of 2% inflation for staffing costs.

| Number of Years | Total Amount (£m) |
|-----------------|-------------------|
| 1 | 4.9 |
| 5 | 24.8 |
| 8 (5+3) | 40.7 |
| 10 (5+3+2) | 51.7 |

- 4.3 To manage the increase in the contract value, the Council and ICB have jointly agreed to share the pressure and manage within the Better Care pooled fund from consistently underspent commissions to ensure the full contract value is met. Public Health have increased their contribution by £130k for the Falls Prevention service.

5.0 LEGAL IMPLICATIONS

- 5.1 WBC and NHSCMICB is required to meet its statutory duty under the Care Act 2014 (Adult Social Care only) to provide specialist equipment to the Wirral population.
- 5.2 The supply of Community Equipment is also a statutory duty under:
- Chronically Sick and Disabled Persons Act 1970
 - Children and Families Act 2014
 - National Health Service Act 2006
 - Health and Safety at Work act 1974 and Regulations
- 5.3 The procurement process has been undertaken in accordance with the Public Procurement Regulations and the Council's Contract Procedure rules.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

- 6.1 There are no current resource implications.

7.0 RELEVANT RISKS

- 7.1 There is a risk that the Council will not have a service to support people to remain independent at home. This risk can be mitigated by recommissioning the service.

- 7.2 There is a risk that providers will not tender if the contract is let for a shorter-term period, as the new provider will require investment for premises and supply chain. This will risk will be mitigated by a longer contract length with contract extension options.
- 7.3 To remove elements of service from the specification would reduce the quantity and quality of service to Wirral residents, potentially resulting in challenges that the Council and its partners would not meet their statutory duties.
- 7.4 There is a risk that the inflationary costs may increase over the lifetime, of the contract dependent on external factors, these will be managed and mitigated within the Adult Social Care budgetary forward planning process, and via the Better Care Fund oversight, given this is an integrated commission.

8.0 ENGAGEMENT/CONSULTATION

- 8.1 The Competitive Dialogue Tender process generated interest amongst providers across the market, helping officers in Wirral to refine their ideas and service design.
- 8.2 A subsequent formal Competitive Dialogue discussion with the organisation that tendered for the service, resulted in clarification and challenges around assumptions, service delivery and costs which led to a resubmission with pricing much more in line with Council expectations.
- 8.3 Local agreement has been reached between commissioning partners in Adult Social Care and Public Health, Children's and Young People Department, and NHSCMICB on a joint specification.
- 8.4 Given this is technical and logistical contract, this is not a fully coproduced service design.
- 8.5 The incumbent provider has provided monthly intelligence on customer satisfaction and feedback.
- 8.6 Coproduction sessions have been held with the prescriber community, in particular Occupational therapy services in Adult Social care for both TEC and community equipment provision.

9.0 EQUALITY IMPLICATIONS

- 9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment (EIA) is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.

An EIA titled 'Community Equipment and Telecare' for the proposed service can be found here:

<https://www.wirral.gov.uk/communities-and-neighbourhoods/equality-impact-assessments>

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 10.1 Commissioning of services will have an impact on the Council’s indirect emissions. The tendering process will ensure prospective bidders are aware of the Council Environment and Climate Emergency declaration and ensure they have a sustainability or environmental policy in place.
- 10.2 Within the specification, commissioners have aimed to minimise environmental impact through its specification and commissioning process. The specification for the service includes targets for re-use and recycling of equipment, a requirement to provide a carbon efficient fleet of vehicles for deliveries, and local sourcing of supplies to support the Councils carbon reduction programme.

11.0 COMMUNITY WEALTH IMPLICATIONS

- 11.1 The provider is required to have a depot for storage and distribution which is based in Wirral and will therefore contribute to the Wirral economy.
- 11.2 The proposed service specification includes provision for apprentices to be employed by the provider.

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APPENDICES

N/A

BACKGROUND PAPERS

Telecare Standards agency (TSA) – Analogue to Digital Shift <https://www.tsa-voice.org.uk/campaigns/digital-shift/social-alarms-systems-from-analogue-to-digital/>

TERMS OF REFERENCE

This report is being considered by the Adult Social Care and Public Health Committee in accordance with Section 2.2(a) and (b) of its Terms of Reference: adult social care matters (e.g., people aged 18 or over with eligible social care needs and their carers) and promoting choice and independence in the provision of all adult social care).

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|---|--------------|
| Adult Social Care and Public Health Committee | 13 June 2023 |
| Adult Social Care and Public Health Committee | 3 March 2022 |



ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

Tuesday, 23 January 2024

| | |
|----------------------|-------------------------------------|
| REPORT TITLE: | 2024-25 BUDGET REPORT UPDATE |
| REPORT OF: | DIRECTOR OF FINANCE |

REPORT SUMMARY

The purpose of this report is to provide an update on the budgets within the remit of the Committee in respect of forthcoming pressures and proposed savings that are being considered within the Medium Term Financial Plan.

It is also for the Committee to consider feedback and outcomes from the Budget Workshops which have been held in recent months. The workshops enabled officer and member liaison on proposed budget options, to facilitate discussion and allow direction to be obtained on further analysis required. The Budget Workshops also provided an opportunity for alternative proposals to be considered.

The Policy and Service Committees are responsible for those services being delivered under their operational headings within their annual budget envelope. The Policy and Resources Committee, in consultation with the respective Policy and Service Committees, has been charged by Council to formulate a draft Medium Term Financial Plan (MTFP) and budget to recommend to the Council.

The Council is required to set a balanced budget each year and set a Medium-Term Financial Plan which considers the future pressures and savings options that will be taken forward to result in a balanced budget position.

The Council faces a challenging financial outlook due to inflationary and demand pressures alongside the previous significant reductions in Government funding and uncertainty around the future financial settlements.

The report contributes to the Council Plan 2023-2027 in supporting the organisation in meeting all Council priorities.

RECOMMENDATIONS

The Adult Social Care and Public Health committee is recommended to:

1. Note the indicative pressures and proposed savings detailed in Appendix 1 and 2.
2. Agree the Budget Workshop feedback and outcomes, as detailed in Appendix 3.

1.0 REASONS FOR RECOMMENDATIONS

- 1.1 The Council has a legal responsibility to set a balanced budget, which sets out how financial resources are to be allocated and utilised. This report highlights the external challenges impacting the 2024/25 budget setting process and proposes options to address the challenges faced.
- 1.2 Setting a budget, especially in the context of largely uncontrollable, macro-economic pressures, requires challenging decisions to ensure that a balanced position can be presented. Members are engaged in the process through the work of this Committee, the Finance Subgroup and Policy and Service Committees.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 The setting of a legal budget is a statutory requirement and therefore no other options have been considered.

3.0 BACKGROUND INFORMATION

- 3.1 The Council has a legal responsibility to set a balanced budget, which sets out how financial resources are to be allocated and utilised. To do this effectively requires engagement with staff, elected members and residents along with other stakeholders. Previous reports to the Committee have highlighted the external challenges that are impacting on the 2024/25 budget setting process and have highlighted the extent of the financial challenge faced. This report presents the culmination of the work undertaken to present options for budget formulation and to ensure the necessary preparations to facilitate a budget recommendation to Council on 26 February 2024.
- 3.2 The Policy & Resources Committee is responsible for co-ordinating processes for the development of the Budget and Policy Framework, together with decision-making on cross-cutting policies not part of the Policy Framework. The Policy and Service Committees are responsible for those services being delivered under their operational headings within their annual budget envelope. The Policy and Resources Committee, in consultation with the respective Policy and Service Committees, has been charged by Council to formulate a draft Medium Term Financial Plan (MTFP) and budget to recommend to the Council.
- 3.3 The Senior Leadership Team (SLT) has met regularly to discuss the budget setting process, budget proposals, the budget gap that the Council faces and the associated uncertainty on funding. Member engagement in the process has taken place through Budget Workshops along with the presentation on Committee reports.
- 3.4 The Budget workshops were convened to enable officer and member liaison on proposed budget options, in order to facilitate discussion and allow direction to be obtained on further analysis required. The Budget Workshops also provided an opportunity for alternative proposals to be considered.
- 3.5 The outcomes of these workshops are to be reported to meetings of those committees and to the Policy & Resources Committee as part of the decision-making process that facilitates a budget proposal to Full Council.

- 3.6 Appendix 3 to this report details the feedback and outcomes from this Committees Budget Workshop.
- 3.7 At the Policy and Resources Committee on 4 October 2023, a potential budget gap of £14.9m for 2024/25 was presented. Members will be aware that the budget gap is an ever-moving target due to a number of factors; these include:
- Ongoing Government announcements of funding, including specifically the Provisional Local Government Financial Settlement for 2024/25.
 - A process of challenge and refinement within the Council to ensure that the proposals are evidence based. Addition of new pressures that continue to materialise as further local and national evidence comes to light.
 - The continuing refinement of budget assumptions including inflation.
 - The development and refinement of budget options.
- 3.8 As a result of these factors, the budget forecast presented to P&R in November 2023 was updated and a more robust position made available. An accurate appraisal was not possible at the time as the details of the financial settlement for Local Authorities was not received until late December.
- 3.9 Following budget challenge sessions with Directors and a review of the Q2 budget monitoring information, a position around the current and future pressures has been ascertained. This represents the best available information at this point in time and forms the baseline for the pressures within the Medium Term Financial Plan (MTFP) for current and future years.
- 3.10 This information will be updated periodically as a significant element of the pressures is linked to inflation. Assumptions have been made that inflation will continue to fall between now and the 24/25 financial year and that this will be reflected in pay and contract negotiations for 24/25.
- 3.11 Demographic changes have been incorporated within the pressure figures based on the current trend data and the available datasets.
- 3.12 An assessment of the in-year budget variances has necessitated the inclusion of pressures to negate existing income targets and some additional funding for service pressures. These amounts have been minimised in recognition of previously agreed savings which are still to be delivered.
- 3.13 The impact of all these changes will be considered, along with feedback from the consultation process and the budget proposals developed through the Service Committee and Policy & Resources Committee (P&R) Budget Workshop approach to present a robust position on financial matters to be considered in formulating a budget proposal to Full Council.
- 3.14 Policy & Resources Committee budget recommendations will be proposed in February 2023 in respect of the agreement of the annual Budget, setting of the council tax requirement and related matters to the Council, which will be debated by Full Council and voted upon by a simple majority.

4.0 FINANCIAL IMPLICATIONS

- 4.1 This report is part of a programme of activity to ensure that a fully balanced, legal budget can be recommended by the Policy and Resources Committee to Full Council at its meeting of 26 February 2024.
- 4.2 The programme to develop a robust budget position, of which this report is a part, will support the Council in demonstrating compliance with CIPFA's Financial Management Code, specifically in relation to Section 4 of the FM Code which refers to the Annual Budget.
- 4.3 The Financial Management Code requires the Council to demonstrate that the processes used satisfy the principles of good financial management, based on the following six principles:
- Organisational Leadership – demonstrating a clear strategic direction based on a vision in which financial management is embedded into organisation culture.
 - Accountability – based on Medium-Term Financial Planning, which derives the annual budget process supported by effective risk management, quality supporting data and whole life costs.
 - Financial management - undertaken with transparency at its core using consistent, meaningful and understandable data, reported frequently with evidence of periodic officer actions and elected member decision making.
 - Professional standards - Adherence to professional standards is promoted by the leadership team and is evidenced.
 - Assurance - sources of assurance are recognised as an effective tool and are mainstreamed into financial management, including political scrutiny and the results of external audit, Internal Audit and inspection.
 - Sustainability: issues around sustainability of local services are at the heart of all financial management processes and is evidenced by prudent use of public resources.
- 4.4 Delivering financial sustainability is vitally important for the Council and the budget options presented have been drawn up with this in mind, consideration is given to areas of discretionary expenditure that could be curtailed along with demonstrating savings that can be delivered from statutory components of the Council.

5.0 LEGAL IMPLICATIONS

- 5.1 The Council must set the budget in accordance with the provisions of the Local Government Finance Act 1992 and approval of a balanced budget each year is a statutory responsibility of the Council. Sections 25 to 29 of the Local Government Act 2003 impose duties on the Council in relation to how it sets and monitors its budget. These provisions require the Council to make prudent allowance for the risk and uncertainties in its budget and regularly monitor its finances during the year. The legislation leaves discretion to the Council about the allowances to be made and action to be taken.
- 5.2 The provisions of section 25, Local Government Act 2003 require that, when the Council is making the calculation of its budget requirement, it must have regard to the report of the chief finance (s.151) officer as to the robustness of the estimates

made for the purposes of the calculations and the adequacy of the proposed financial reserves.

- 5.3 It is essential, as a matter of prudence that the financial position continues to be closely monitored. In particular, Members must satisfy themselves that sufficient mechanisms are in place to ensure both that savings are delivered and that new expenditure is contained within the available resources. Accordingly, any proposals put forward must identify the realistic measures and mechanisms to produce those savings.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

- 6.1 There are no additional resource requirements directly from this report, however the implications for the proposals included within the 2024/25 budget and MTFP will be assessed at the time of implementation. For budget proposals that may result in reductions to the workforce, the Council have consulted with trade unions and relevant staff groups as required and in accordance with section 188(1A) of the Trade Union and Labour Relations Act (TULRCA) 1992).

7.0 RELEVANT RISKS

- 7.1 The Council's ability to close the funding gap is highly dependent on the accuracy of assumptions used for Government funding and levies from other bodies, as well as demand estimates for Council services. As the Local Government Finance Settlement only covers one year, the uncertainty around future funding over the MTFP period remains high.
- 7.2 The Council's ability to maintain a balanced budget is dependent on a proactive approach due to estimated figures being provided in the calculation for the budget, albeit the best estimates available at the time, plus any amount of internal and external factors that could impact on the budget position in year. Examples of which are new legislation, increased demand, loss of income, increased funding, decreased funding, inability to recruit to posts, etc.
- 7.3 A robust monitoring and management process for the budget is in place. If at any time during the year an adverse position is forecast, remedial action must be agreed and implemented immediately to ensure the budget can be brought back to balanced position.
- 7.4 Failure to achieve a balanced budget would lead to the Section 151 Officer issuing a Section 114 notice and potential ministerial intervention under Section 15 of the Local Government Act 1999.

8.0 ENGAGEMENT/CONSULTATION

- 8.1 In December 2022, consultation took place in respect of the priorities and views of the public in formulating budget plans.

- 8.2 Statutory budget consultation will commence subject to agreement by the Committee. This will take place in January 2024 and feedback will be taken into consideration by the Policy and Resources Committee when recommending a budget to Full Council at its meeting of 13 February 2024.
- 8.3 The Council has engaged regularly with trade unions about the Council's financial position.

9.0 EQUALITY IMPLICATIONS

- 9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.
- 9.2 The equality implications will be included within the individual savings proposals currently being developed and will be addressed when these are brought forward for approval.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 10.1 The environment and climate implications will be considered within the individual savings proposals currently being developed and will be addressed when these are brought forward for approval.

11.0 COMMUNITY WEALTH IMPLICATIONS

- 11.1 The community wealth implications will be considered within the individual savings proposals currently being developed. The budget proposals under consideration will take account of related matters across headings such as:

- **Progressive Procurement and Social Value**
How we commission and procure goods and services. Encouraging contractors to deliver more benefits for the local area, such as good jobs, apprenticeship, training & skills opportunities, real living wage, minimising their environmental impact, and greater wellbeing.
- **More local & community ownership of the economy**
Supporting more cooperatives and community businesses.
Enabling greater opportunities for local businesses.
Building on the experience of partnership working with voluntary, community and faith groups during the pandemic to further develop this sector.
- **Decent and Fair Employment**
Paying all employees a fair and reasonable wage.
- **Making wealth work for local places**

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APPENDICES

- Appendix 1: Budget Pressures
- Appendix 2: Potential Savings
- Appendix 3: Service & Policy Committee workshop feedback

TERMS OF REFERENCE

This matter is being considered by the Policy and Resources Committee in accordance with section 1.2(b) provide a co-ordinating role across all other service committees and retain a 'whole council' view of [budget monitoring].

BACKGROUND PAPERS

CIPFA's Financial Management Code

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|-------------------------------------|-------------------|
| Adult Social Care and Public Health | 16 November 2021 |
| Adult Social Care and Public Health | 25 January 2022 |
| Adult Social Care and Public Health | 14 June 2022 |
| Adult Social Care and Public Health | 11 October 2022 |
| Adult Social Care and Public Health | 29 November 2022 |
| Adult Social Care and Public Health | 6 March 2023 |
| Adult Social Care and Public Health | 13 June 2023 |
| Adult Social Care and Public Health | 19 September 2023 |
| Adult Social Care and Public Health | 28 November 2023 |

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APPENDIX 1 – Budget Pressures

| Pressure | 24/25 (£m) | 25/26 (£m) | 26/27 (£m) | 27/28 (£m) | 28/29 (£m) |
|---|---------------|---------------|---------------|---------------|---------------|
| Adult Social Care & Public Health | | | | | |
| Inflation | | | | | |
| Adult Social Care: Cost of care inflation | 10.453 | 7.900 | 8.300 | 8.700 | 9.200 |
| Social Care Contract Increases | 0.330 | 0.340 | 0.360 | 0.380 | 0.400 |
| Demographic | | | | | |
| Adult Social Care: Growth in Adults 18-64 | 1.000 | 1.500 | 1.540 | 1.590 | 1.650 |
| Adult Social Care: Growth in Older People 65+ | 2.000 | 3.000 | 3.100 | 3.200 | 3.300 |
| Policy Change | | | | | |
| Social Care charging reforms | 0.000 | 3.260 | 6.900 | 0.000 | 0.000 |
| Reducing delayed transfers of care. | 1.800 | 0.000 | 0.000 | 0.000 | 0.000 |
| Total | 15.583 | 16.000 | 20.200 | 13.870 | 14.550 |

APPENDIX 2 – POTENTIAL SAVINGS

Budget Saving Proposals can be placed into the following categories:

- **Increasing Business Efficiencies:** This approach will identify efficiency measures that will result in more effective ways in which services are currently provided and may include cost reduction.
- **Increasing Income:** The Council will look to identify areas where it can raise income through fees and charges.
- **Changing how we fund or provide services:** We aim to ensure that the right service reaches the right resident when and where they need it, for the best cost. This may mean changing how we fund or provide services so that we are able to reduce costs and maintain services by becoming more efficient and by doing things differently.
- **Reducing or stopping services:** Although all efforts will be made to keep service reduction to a minimum, the scale of the financial challenge means that not all reduction proposals can be avoided.

| Committee: Adult Care & Public Health | | | | | | | |
|---|--|---|-------------------|-------------------|-------------------|-------------------|-------------------|
| Theme | Option | Description | 24/25 Saving (£m) | 25/26 Saving (£m) | 26/27 Saving (£m) | 27/28 Saving (£m) | 28/29 Saving (£m) |
| Page 38 Increasing Business Efficiencies | Review of Adult Social Care cost-effectiveness | There is a need to continuously review the cost effectiveness of Adult Social Care (ASC) Services against: Learning Disability costs, NHS funding, locations and supporting workstreams. To achieve this, a range of initiatives have been developed that support the overall reduction in unit cost of the service which support ASC to manage an increasing number of service users in line with demographic change and service demand. | -4.800 | -5.040 | -5.292 | -5.557 | -5.668 |

APPENDIX 3 - Service & Policy Committee workshop feedback

| |
|---|
| Budget Workshops |
| Subject: Adults Committee |
| Date: 26 October 2023 |
| From: Mike Jones, Principal Democratic Services Officer michaeljones1@wirral.gov.uk |
| To: P&R Committee |

1. Background

All local authorities are required to set a balanced budget by 11th March each year.

The Adult Care and Health Directorate had developed efficiency options for consideration by the Policy and Resources Committee (P&R). A workshop to gather the below feedback was held on the 26 October. The context to the budget was discussed along with the budget options. This will inform the P & R's Committee's proposals and final budget recommendation to Council.

Members were made aware that the Indicative Budget gap for 2023/24 currently stands at £14.90m across the Council and that officer proposals (savings/income) relating to the Adult Care and Health Directorate to bridge that gap total £4.8m.

2. Key Considerations

Members were advised that the Adult Care and Health Directorate was planning four years ahead with an estimated increase of 5% but there were many uncertainties, including:

- the general grant settlement from Government expected in December 2023;
- any further grant funding for Winter social care pressures, which was expected but not guaranteed;
- fluctuations in inflation;
- fluctuations in demand;
- Increases in the Real Living Wage without commensurate Government support;
- Increases in Extra Care Housing availability.

Table 1: Savings options – Adult Social Care

| | |
|---|--------|
| All Age Disability Strategy Implementation: | |
| • Reducing the cost of care packages for young adults aged 18-25 by 10%. | £0.75M |
| • Plans for a new employment scheme for young adults supporting 10 clients to develop working skills. | £0.15M |

| | |
|--|-----------------------|
| Independent Living Opportunities for Older People: <ul style="list-style-type: none"> Proposals for further 300 extra care units to support Older People with 160 due to open during 24-25 Increasing numbers of clients supported with Assistive Technology. 250 client care plans reduced/avoid 1hr care per day for 6 months. Increasing activity within domiciliary care to avoid unnecessary residential placements – 20 clients. | £1.6M £1m 0.35M |
| Improved Assessment and Support Planning: <ul style="list-style-type: none"> Improvements in pick-up of direct payments by 10%. Increasing the opportunity for Shared Lives placement by 10%. | £0.85M £0.1M |
| Total savings | £4.8M |

Pressures

| |
|---|
| <ul style="list-style-type: none"> Growth assumed to be 5% and maximum Council Tax was assumed with Adult Social Care precept. Real Living Wage increased by 10% and was beneficial to recruit and retain staff but extra Government funding may mitigate some of that. Winter season 2023/24 still to come but may be Government grant assistance |
|---|

Savings rejected by the Committee.

No savings outlined in the table above were rejected by the Committee.

List of Savings and Pressures to be considered further.

As no savings were rejected by the Committee, all savings outlined in the table above will be put forward for consideration.

Priorities from Members:

- Tackling health inequalities
- Maintaining the Real Living wage
- Supported Living
- Mental health
- Dementia services particularly Dementia Friendly Communities and capital investment for Enabling Towns
- Admiral Nurses
- Capital investment in infrastructure to enable people to live independently.
- Extra Care Housing

3. Members questions

Q: Given the increase in the older population we need to look at dementia pressure including a need to invest in Admiral Nurses?

A: Costs around dementia are around care and support. Dementia Friendly Communities could be built into other programmes such as regeneration which will be an investment against the costs Rate Retention. Admiral Nurses were funded by the CCG then ICB.

4. Member Comments

- Having people independent, aided and supported can benefit the economy as they spend in their communities.
- If we are planning four years ahead it would be useful if the Government could fund that far ahead.
- There is a risk of having unsupported asylum seekers requiring care.
- Need to get the Public Health part right so people do not need to progress to Social Care support.

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ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

23rd JANUARY 2024

| | |
|----------------------|---|
| REPORT TITLE: | MATERNITY AND NEONATAL QUARTERLY REPORT |
| REPORT OF: | DIVISIONAL DIRECTOR OF NURSING & MIDWIFERY, WOMEN'S AND CHILDREN'S DIVISION, WIRRAL UNIVERSITY TEACHING HOSPITALS NHS FOUNDATION TRUST |

REPORT SUMMARY

The report provides an update and oversight of the quality and safety of maternity services at Wirral University Teaching Hospital NHS Foundation Trust (WUTH).

This paper provides a specific update regarding Year 5 of the Maternity Incentive Scheme (MIS). There is also an update on progress on the Saving Babies Lives Care Bundle, which is one of the ten safety actions included in the MIS and on the Three-Year Delivery Plan and Maternity Continuity of Carer (MCoC). The paper also highlights the outcome of the recent Care Quality Commission (CQC) inspection of the maternity services provided by WUTH.

This is not a key decision.

RECOMMENDATION

The Committee is asked to note the updates within the report and progress by Wirral University Teaching Hospital NHS Foundation Trust (WUTH) on the delivery of safe maternity services.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 The Adult Social Care and Public Health Committee requested a report on the quality and safety of maternity services in Wirral. These services are commissioned by NHS Cheshire and Merseyside and provided by Wirral University Teaching Hospitals NHS Foundation Trust (WUTH). This report sets out progress being made by WUTH in delivering the requirements set by NHS Cheshire and Merseyside commissioning and regulatory organisations for safe and high-quality maternity services. The Committee is therefore asked to note the updates within the report and progress by WUTH on the delivery of safe maternity services.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 No other options have been considered.

3.0 BACKGROUND INFORMATION

3.1 Maternity Incentive Scheme (MIS), Year 5

- 3.1.1 The Clinical Negligence Scheme for Trusts (CNST) handles all clinical negligence claims against member NHS bodies where the incident in question took place on or after 1st April 1995 (or when the body joined the scheme if that is later). It is administered by NHS Resolution, which is an “arm’s length” body of the Department of Health and Social Care (DHSC). Of the clinical negligence claims notified to NHS Resolution in 2021/22, obstetrics claims represented 12 per cent of clinical claims by number but accounted for 62 per cent of the total value of new claims; almost £6 billion.
- 3.1.2 The Maternity Incentive Scheme (MIS), introduced by NHS Resolution, supports the delivery of safer maternity care through an incentive element to trust contributions to the CNST. The MIS has been established as part of a wider Maternity Safety Strategy, as set out in *Safer maternity care: progress and next steps*, first published by the DHSC in November 2017. The MIS has been developed in partnership with the National Maternity Safety Champion, Dr Matthew Jolly, and rewards trusts that meet 10 safety actions designed to improve the delivery of best practice in maternity and neonatal services.
- 3.1.3 The 10 safety actions that trusts providing maternity and neonatal services, such as WUTH, are required to address are:
- Action 1: Are you using the National Perinatal Mortality Review Tool to review perinatal deaths to the required standard?
 - Action 2: Are you submitting data to the Maternity Services Data Set to the required standard?
 - Action 3: Can you demonstrate that you have transitional care services to support Avoiding Term Admissions into Neonatal Units programme?
 - Action 4: Can you demonstrate that you have an effective system of medical workforce planning to the required standard?

- Action 5: Can you demonstrate that you have an effective system of midwifery workforce planning to the required standard?
- Action 6: Can you demonstrate compliance with all four elements of the Saving Babies' Lives care bundle?
- Action 7: Can you demonstrate that you have a patient feedback mechanism for maternity services and that you act regularly on feedback?
- Action 8: Can you evidence that 90% of each maternity staff group have attended an "in house" multi-professional maternity emergencies training session within the last training year?
- Action 9: Can you demonstrate that the trust safety champions (obstetrician and midwife) are meeting bi-monthly with Board level champions to escalate locally identified issues?
- Action 10: Have you reported 100% of qualifying incidents under NHS Resolution's Early Notification Scheme?

3.1.4 WUTH has reported to NHS Resolution that they remain on track to meet the requirements of each safety action.

3.2 Saving Babies Lives

3.2.1 The Saving Babies' Lives Care Bundle (SBLCB) Version 3 was launched by NHS England in July 2023. It provides evidence-based best practice, for providers and commissioners of maternity care across England to reduce perinatal mortality.

3.2.2 The NHS has worked hard towards the national maternity safety ambition, which was to halve rates of perinatal mortality from 2010 to 2025 and achieve a 20% reduction by 2020. Office for National Statistics (ONS) data showed a 25% reduction in stillbirths in 2020, with the rate rising to 20% in 2021 with the onset of the COVID-19 pandemic. While significant achievements have been made in the past few years, more recent data show there was more to do to achieve the ambition in 2025. Version 3 of SBLCB was redeveloped to include a new, additional element on the management of pre-existing diabetes in pregnancy based upon data from The National Pregnancy in Diabetes Audit (NPDA).

3.2.3 The Three-Year Delivery Plan for Maternity and Neonatal Services also sets out that providers should fully implement Version 3 of the SBLCB by March 2024. An implementation tool was developed nationally to support its implementation. Maternity services at WUTH have met the required compliance achieving 84% compliance as 4th December 2023. The requirement is to exceed 70% compliance with a robust action plan to achieve 100% compliance by 31 March 2023.

3.3 Ockenden Review of Maternity Services

The Independent Review of Maternity Services at Shrewsbury and Telford Hospital NHS Trust, the Ockenden Review, was published on 30th March 2022. There were 15 immediate and essential actions that every trust was asked to act upon following this review. The maternity services at WUTH are and have maintained compliance against the 15 immediate and essential actions.

3.4 Three-Year Delivery Plan (East Kent)

3.4.1 The Three-Year Delivery Plan has been prepared considering the independent report into maternity services at East Kent Hospitals University NHS Foundation Trust. Over the next three years the following four themes will be focused on:

- Listening to and working with women and families, with compassion
- Growing, retaining, and supporting our workforce
- Developing and sustaining a culture of safety, learning, and support; and
- Standards and structures that underpin safer, more personalised, and more equitable care.

3.4.2 Delivering this plan will continue to be a collaboration with maternity and neonatal services to support women and families and improve care. Progress is monitored via a local Maternity and Neonatal Quality Assurance Board and WUTH continues to implement within the timescales.

3.5 CQC Maternity Inspection

3.5.1 The maternity services provided by WUTH were recently inspected by the Care Quality Commission (CQC). This included services on the Arrowe Park site and at the Seacombe Birth Centre in Wallasey. The inspection took place on 24th and 25th April 2023. The inspection was part of the national review into maternity safety currently underway by the CQC. The CQC rated the services provided by WUTH as 'Good' for safe care and 'Good' for well-led services, with areas of outstanding practice being reported in the Trust's joint work with Wirral Maternity and Neonatal Voices Partnership.

3.5.2 Among the many positive findings in the report, the CQC noted that:

- Staff are competent and feel valued and supported.
- There is clear and visible leadership, including Maternity Champions at Board level.
- The service has a positive culture, with openness, honesty, and strong commitment to safety.
- The Leadership Team has the skills and abilities to manage the service well.
- There is a positive culture within the service where people, their families and staff felt they could raise concerns.
- Staff are committed to improving services to ensure people receive a high standard of care. Engagement and involvement with women, families, and birthing people was strong – especially the partnership working with Wirral Maternity and Neonatal Voices Partnership, which was rated as outstanding.
- Care is individualised, compassionate and personalised.
- The team had a commitment to training and research.
- The service is committed to improvement, innovation and continued learning.
- The Trust was the only service within the local maternity services network to offer 4 birth choices to woman and birthing people.

3.6 Implementation of Maternity Continuity of Carer

3.6.1 The Maternity Service continues to deliver care via two models of maternity care – one that is traditional in its approach, and the other a Continuity of Carer (CoC) Model of Care. Women being cared for by a team of midwives under the CoC model

appreciate the benefits of improved outcomes and experience compared to those cared for by a traditional model.

3.6.2 As a provider WUTH has six maternity continuity of carer teams and in line with upskilling programs and safe staffing levels, further teams are anticipated in 2024.

4.0 FINANCIAL IMPLICATIONS

4.1 There are no financial implications arising from this report.

5.0 LEGAL IMPLICATIONS

5.1 There are no legal implications arising from this report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 There are no resource implications arising from this report.

7.0 RELEVANT RISKS

7.1 All relevant risks pertaining to maternity provision in Wirral are managed and mitigated by WUTH, as provider of these services, in conjunction with NHS Cheshire and Merseyside as the commissioner of this provision.

8.0 ENGAGEMENT/CONSULTATION

8.1 The maternity services provided by WUTH work closely with the Wirral Maternity and Neonatal Voices Partnership. This engagement has been recognised by the CQC as outstanding.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council and NHS organisations have a legal requirement to make sure their policies, and the way they carry out their work, do not discriminate against anyone. No Equality Impact Assessment (EIA) is required for this report.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 There are no environment or climate implications arising from this report.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 There are no community wealth implications arising from this report.

REPORT AUTHOR: Jo Lavery, Divisional Director of Nursing and Midwifery, WUTH
jo.lavery@nhs.net

APPENDICES

There are no appendices to this paper.

BACKGROUND PAPERS

[NHS England » Maternity and Neonatal Safety Improvement Programme](#)

[Maternity incentive scheme - NHS Resolution](#)

[Ockenden review: summary of findings, conclusions and essential actions - GOV.UK \(www.gov.uk\)](#)

[Maternity and neonatal services in East Kent: 'Reading the signals' report - GOV.UK \(www.gov.uk\)](#)

[Wirral University Teaching Hospital NHS Foundation Trust - Care Quality Commission \(cqc.org.uk\)](#)

TERMS OF REFERENCE

This report is being considered by the Adult Social Care and Public Health Committee in accordance with Section 2.2 (g)(iv) of its Terms of Reference,

“(iv) to consult, be consulted on and respond to substantial changes to local health service provision, including assessing the impact on the local community and health service users”

and Section 2.3 (b)(ii)

“b) Overview and Scrutiny – The Committee holds responsibility: (ii) for the overview and scrutiny of external organisations whose services or activities affect the Borough of Wirral or any of its inhabitants where this does not fall within the role or remit of another service Committee or where it relates to cross cutting issues;”

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|-----------------|------|
| | |



ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

23 January 2024

| | |
|---------------|--------------------------------|
| REPORT TITLE: | END OF LIFE CARE BEST PRACTICE |
| REPORT OF: | DIRECTOR OF CARE AND HEALTH |

REPORT SUMMARY

The report provides an update on Palliative and End of Life Care Services provided in Wirral. The report includes services commissioned by NHS Cheshire and Merseyside Integrated Care Board (ICB), Wirral Place and also activities undertaken by commissioned Adult Social Care providers in Wirral.

The report supports the following Wirral Plan priorities:

Active and Healthy Lives: Working to provide happy, active, and healthy lives for all, with the right care, at the right time to enable residents to live longer and healthier lives.

This is not a key decision.

RECOMMENDATION/S

The Adult Social Care and Public Health Committee is recommended to note the content of the report, and the Health and Care system work underway to support End of Life Care in Wirral.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 Adult Social Care and Public Health Committee requested a report on Palliative Care End of Life Care and dignity in dying initiatives for people in Wirral, and this report provides the update.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 No other options were considered as this report is information provided to Adult Social Care and Public Health Committee on the current service offer for Palliative and End of Life Care Services for Wirral people.

3.0 BACKGROUND INFORMATION

- 3.1 Ambitions for Palliative and End of Life Care are set out in the NHS England Paper Ambitions for Palliative and End of Life Care. The six ambitions for all people are set out in the table below, which includes the “I” statements for individuals:

| | | |
|---|--------------------------------------|--|
| 1 | Each person is seen as an individual | I, and the people important to me, have opportunities to have honest, informed and timely conversations and to know that I might die soon. I am asked what matters most to me. Those who care for me know that and work with me to do what’s possible. |
| 2 | Each person gets fair access to care | I live in a society where I get good End of Life Care regardless of who I am, where I live or the circumstances of my life. |
| 3 | Maximising comfort and wellbeing | My care is regularly reviewed, and every effort is made for me to have the support, care and treatment that might be needed to help me to be as comfortable and as free from distress as possible. |
| 4 | Care is co-ordinated | I get the right help at the right time from the right people. I have a team around me who know my needs and my plans and work together to help me achieve them. I can always reach someone who will listen and respond at any time of the day or night. |
| 5 | All staff are prepared to care | Wherever I am, health and care staff bring empathy, skills and expertise and give me competent, confident, and compassionate care. |
| 6 | Each community is prepared to help | I live in a community where everybody recognises that we all have a role to play in supporting each other in times of crisis and loss. People are ready, willing, and confident to have conversations about living and dying well and to support each other in emotional and practical ways. |

- 3.2 The Wirral Place Palliative and End of Life Care Partnership (PEOLCP) promotes excellent equitable End of Life Care through local plans for the place-based area; it provides the strategic steer and is the body of expertise on PEOLC for the Wirral Place. It engages with the NHS Cheshire and Merseyside (C&M) Integrated Care System (ICS) PEOLCP and the C&M PEOLC clinical network through the Place Based Partnership representative on the Programme Board. Meetings are held bi-monthly.
- 3.3 Dr Maria Jones a Wirral based GP has been identified as the Palliative and End of Life Care lead for the Wirral system and plays a proactive role in leading good Palliative and End of Life Care.
- 3.4 The Wirral Place Partnership vision for Palliative and End of Life Care reflects local priorities and aligns to the strategic objectives for the C&M ICS PEOLC programme and best practice clinical guidance through the C&M PEOLC clinical network. Membership is representative of the health and care organisations who contribute to the commissioning and provision of local services and incorporates representation from those local people with lived experience to help with service review and service improvement.
- 3.5 The C&M ICS PEOLC programme supports Place Based Partnership reporting by providing a regular insight report for the locality. The Wirral Place PEOLC Partnership reports via the Chair to C&M PEOLC Clinical Network Group which meets quarterly.
- 3.6 The Wirral Place Palliative and End of Life Care Partnership (PEOLCP) works with and supports the ambition of Cheshire & Merseyside ICS to enable equitable access to high quality End of Life Care. The vision is for adults, children, and the young people of Cheshire & Merseyside at the end of their life to live well, before dying with peace and dignity in the place where they would like to die, supported by the people important to them.
- 3.7 The Wirral Place PEOLC Partnership is the body of expertise on PEOLC and provides the strategic steer for the locality. The group has developed and oversees a local delivery plan for promoting service improvement which reflects local need and C&M ICS PEOLC strategic priorities, which are:
- Early identification: People are identified as likely to be in the last 12 months of life and are offered personalised care and support planning (PCSP).
 - Preferred Place of Care: Patients identified as probably being in the last 12 months of life to be supported to remain in the place of their choice and die in the place of their choice.
 - Specialist Advice: Staff, patients and carers can access the care and advice they need, whatever time of day.
 - Equitable access to PEOLC for all, focussing on locally identified under-served populations.

- Workforce: A confident workforce with the knowledge, skills and capability to deliver high quality PEOLC. The PEOLC workforce is fit for purpose, now and in the future.
- Strategy: High quality Palliative and End of Life Care for all, irrespective of condition or diagnosis.
- Sustainably commissioned: Safe specialist palliative care delivered through community specialist palliative care teams and hospices is sustainably commissioned across C&M.

3.8 The responsibilities of the PEOLC Partnership are as follows:

- Monitor progress of the local service improvement plan taking remedial action and escalating issues and risks to the Director/ clinical lead / governance group
- Consider clinical guidelines, policies, and procedures and endorse for recommended implementation across Wirral.
- Provide support, advice, and recommendations on PEOLC to Wirral Place including horizon scanning.
- Oversee a co-ordinated approach to stakeholder engagement and communication in relation to PEOLC for the Wirral Place Partnership
- Ensure a coherent and consistent approach to both locality development and activities with partner localities in neighbouring areas.
- Annually self- assess development of the Wirral Place PEOLC Partnership using a maturity matrix.
- Developing a local delivery plan which reflects C&M ICS PEOLC strategic priorities and C&M PEOLC clinical guidance agreed with the membership and the Wirral Place Partnership representative on the Programme Board.
- Reporting Wirral Place Partnership progress against the delivery plan through to Programme Board.
- Operating as an expert advisory group feeding through issues and challenges through to Programme Board.

3.9 Services commissioned by NHS Cheshire and Merseyside ICB for Wirral Place include:

- Marie Curie – Night Sitting Service
- Wirral Palliative Care Emergency Medicines Service
- Wirral Hospice St John’s – Hospice at Home, Palliative Personal Care Service, Wellbeing Unit, Inpatient Service, Outpatient Service, Interventional Pain Service
- Claire House – Rapid Response and Emergency Respite (dedicated to children and young people)
- Wirral University Teaching Hospital (WUTH) NHS Trust – Supportive and Palliative Care Service (for inpatients)
- Wirral Community Health and Care (WCHC) NHS Trust – Wirral Specialist Palliative Care Community Service, End of Life Care Service

- 3.10 There is an Education Hub for Palliative Care provided through WCHC and Wirral Hospice St John's. The hub provides free online training and can be found at <https://www.wirralhospice.org/wirraleducationhub/>. All care home providers are able to access this free online training, which is regularly updated. The online resource supports face to face training which is held on a request basis throughout the year.
- 3.11 The End of Life Care and Community Specialist Palliative Care Team can also offer training for:
- Communications skills
 - Introduction to EOL care (1 day course)
 - Symptom management (1 day course)
 - Syringe driver training (bespoke for nursing homes)
 - In house training for carers in care home settings
- 3.12 The local training offer is being enhanced to include the 'Mayfly' Advance Care Planning education and communication skills programme, which focuses on enhancing the skills and confidence of professionals delivering End of Life Care in all settings. It supports professionals to have "difficult conversations" around advance care planning.
- 3.13 Local intelligence indicates that an average length of stay in a care home in Wirral is 16-months and therefore it is important that staff are trained and supported to deliver the six steps programme, to ensure a consistent and compassionate approach for all people in care homes, who are approaching the end of their life.
- 3.14 All Wirral Council contracted services are commissioned to support End of Life Care initiatives, and this is reviewed as part of contract monitoring and quality improvement responses. The End of Life Care Team are commissioned to deliver the "six step programme", which is aimed at improving End of Life Care provided by a care home (and its workers) that encompasses the philosophy of palliative care. At the core of the Six Steps Programme is the nomination of two or three representatives from the service to act as champions. Having representatives for End of Life Care ensures each service has champions who have access to current national and local information. They are supported by the service to develop their knowledge and skills and encouraged to empower and educate staff within their organisation to deliver End of Life Care. Training locally is delivered by the End of Life Care Team to care homes and the care home can be accredited to the National six steps programme. The six steps are:
- Step 1 - Discussions as End of Life approaches
 - Step 2 - Assessment, care planning and review
 - Step 3 - Co-ordination of care
 - Step 4 - Delivery of high-quality care in care homes
 - Step 5 - Care in the last days of life
 - Step 6 - Care after death

- 3.15 The care home has to build and maintain a portfolio of evidence that shows excellent delivery of End of Life Care. Feedback is sought from the End of Life Care Team from other services, e.g. community nursing and the tele triage team on the performance of the service. A certificate is issued to the care home once competencies are well evidenced and to be maintained this is checked every 12-months but can be checked prior based on any concerns or intelligence received that would indicate an earlier intervention.
- 3.16 As of November 2023, of the 74 care homes, 56 have a six steps certificate, 18 do not have a valid certificate, but 6 of these 18 are working towards the certificate. It is important to note that the numbers can change monthly dependent on the care homes having their portfolios assessed to check they can maintain their certificate. Our Quality Improvement Team is working in partnership with the End of Life Care Team to support the providers who have not yet achieved it.
- 3.17 Every care home has a named contract manager and quality improvement practitioner allocated to them from the Council, and there is also a dedicated End of Life Care Practitioner identified within the Quality Improvement Team who is a practice lead.
- 3.18 There is an expectation that care homes complete an end of life register on a monthly basis and return form to the End of Life Care Team at each submission period.
- 3.19 As part of the enhanced health in care homes programme, General Practice (GP) will put in place an Emergency Health Care Plan (EHCP), to support people to stay in their preferred place of care and avoid any unnecessary acute admissions. A separate form can be completed which includes any wishes in relation to attempts at resuscitation.
- 3.20 The End of Life Care Team can provide syringe driver training for nursing homes to support them with medication for End of Life Care patients and will also loan the syringe driver (nursing homes are expected to provide the consumables to be used with this) to support patients.
- 3.21 There is a dedicated “Record of care” document which is in use for the last days of life, and all professionals: care home staff, social care staff, GP, and health professionals will all record on the same ‘record of care’ document.
- 3.22 There is a 24-hour palliative care advice line in place for Wirral – 0151 343 9529 and posters are displayed in care home settings.

4.0 FINANCIAL IMPLICATIONS

- 4.1 There are no financial implication arising as a result of this report, current services are delivered within available resources.

5.0 LEGAL IMPLICATIONS

- 5.1 Health and Social care providers undertake regulated activity which is monitored by the Care Quality Commission.

5.2 The Local Authority has a duty under the Care act 2014 to assess and meet a person's needs, where they are eligible.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 No implications as a result of this report

7.0 RELEVANT RISKS

7.1 There is a risk that people will not live well or have a dignified death at the end of their life. This risk is mitigated by having the Palliative and End of Life Care Partnership (PEOLCP) in operation locally, supported by national, regional, and local priorities.

7.2 There is a risk that care service providers will not be able to support providers with compassionate end of life care, this is mitigated by providers following the "six step" programme and accessing free training via the local palliative care education hub. This risk will be further supported by the annual checks undertaken with providers.

8.0 ENGAGEMENT/CONSULTATION

8.1 The Palliative and End of Life Care Group is a multi-stakeholder group and includes the views of people and their carers who are experiencing End of Life Care.

9.0 EQUALITY IMPLICATIONS

9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help Council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.

9.2 Equality implications are part of the commissioning process, and all partner agencies are expected to provide a service to all, that does not discriminate. This is part of the contract review process.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 No environmental or climate implications arise as a result of this report.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Social care providers locally employ in the region of 8000 staff.

REPORT AUTHOR: **Jayne Marshall**
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email: jaynemarshall@wirral.gov.uk

APPENDICES

N/A

BACKGROUND PAPERS

NHS England Paper Ambitions for Palliative and End of Life Care: A national framework for local action 2021-2026. The paper can be found here: <https://www.england.nhs.uk/wp-content/uploads/2022/02/ambitions-for-palliative-and-end-of-life-care-2nd-edition.pdf>

Six Steps to Success in End of Life Care: <https://eolp.co.uk/SIXSTEPS/>

Mayfly Training <https://www.england.nhs.uk/north-west/north-west-coast-strategic-clinical-networks/our-networks/palliative-and-end-of-life-care/for-professionals/education/>

TERMS OF REFERENCE

This report is being considered by the Adult Social Care and Public Health Committee in accordance with Section 2.2(a) and (b) of its Terms of Reference: adult social care matters (e.g., people aged 18 or over with eligible social care needs and their carers) and promoting choice and independence in the provision of all adult social care).

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|-----------------|------|
| N/A | |



ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

23 JANUARY 2024

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| REPORT TITLE: | WIRRAL SAFEGUARDING ADULTS PARTNERSHIP BOARD UPDATE REPORT |
| REPORT OF: | DIRECTOR OF CARE AND HEALTH |

REPORT SUMMARY

This report seeks to further update the Committee on the work of the Wirral Safeguarding Adults Partnership Board (WSAPB) and present the WSAPB 2021-2023 Annual report (Appendix 3).

The Care Act 2014 requires Local Authorities to establish a Safeguarding Adults Board in its area. Up until June 2021, the Merseyside Safeguarding Adults Board fulfilled this requirement for Wirral Local Authority; however, following the cessation of the Merseyside Board in June 2021, it became a necessity to establish a new Board for Wirral. This took place in September 2021.

This underpins the Wirral Plan 2021-2026 vision of Safe and Pleasant Communities and Active and Healthy Lives - working to provide happy, active, and healthy lives for all.

This is not a key decision and affects all wards.

RECOMMENDATION

The Adult Social Care and Public Health Committee is recommended to note the update report in relation to the work of the Wirral Safeguarding Adults Partnership Board and the 2021 – 2023 Annual report spanning the first 18 months of the Board.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 To ensure the Committee is updated on the work of the WSAPB and receives the Boards Annual Report.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 No update could be presented to Committee, but this could impact on the Committee's ability to fulfil their duty in protecting adults at risk.

3.0 BACKGROUND INFORMATION

- 3.1 The Wirral Safeguarding Adults Partnership Board held its inaugural meeting in September 2021 and meets quarterly with the addition of two development days per year. The Board is chaired by an Independent Person, Sue Redmond, and is supported by a Board Manager and an Administrator.
- 3.2 The following diagram shows the current structure which was reviewed and updated in June 2022. The Structure will be reviewed on an annual basis to ensure it remains fit for purpose.



- 3.3 The Boards Strategic Plan for 2022 – 2024 was signed off on 19 September 2022, and is attached with an update of progress to date (Appendix 1). Also attached is a visual minute's document (Appendix 2) from a Development Day held on 25 November 2022 with Board members and colleagues from Nursing and Residential Care Homes.

3.4 Safeguarding Adults Boards are required to produce an Annual Report detailing their work in the previous financial year to include safeguarding data and information on any SARs (Safeguarding Adult Reviews) undertaken. As the WSAPB was only established part way through 2021 it was agreed by the Board that the first Annual report for the WSAPB would cover September 2021 to March 2023. It was agreed that this report would be brought to Committee in January 2024.

4.0 FINANCIAL IMPLICATIONS

4.1 There are no financial implications as a result of this report.

5.0 LEGAL IMPLICATIONS

5.1 S.43(1) Care Act 2014 states that each Local Authority must establish a Safeguarding Adults Board (SAB) for its area. Without having arrangements to have a SAB, Wirral will not fulfil its statutory duties. This will also affect S.44 Care Act and the role for the Safeguarding Adults Board to ensure that Safeguarding Adults Review (SAR) are managed within the local area.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 The Board is supported by 1 Full Time Equivalent (FTE) Board Manager, 1 FTE Administrator and up to 24 days per year of support from the Independent Chair.

7.0 RELEVANT RISKS

7.1 If a Board were not in place, Wirral Council would be at risk of not fulfilling its statutory functions under S.43/S.44 Care Act 2014. This could place members of the community at risk of harm or abuse and/or neglect. These risks are mitigated by having a Safeguarding Adults Partnership Board. If it fails to monitor and report on its work the Board would fail in its, and the council's, priorities as well as the needs of the community. The Board seeks to mitigate any safeguarding related risks on the corporate risk register.

8.0 ENGAGEMENT/CONSULTATION

8.1 A wide range of stakeholders were consulted in the lead up to the implementation of the new Board and engaged within a stakeholder workshop which was felt to be a positive and productive event. Moving forward a key priority of the Board is to hear the views of citizens including those experiencing services, families, carers, and those working within organisations and systems. Co- production is also a key priority, and we are linking with other key strategic partnerships around this i.e. Health and Wellbeing Board, Children's Partnership, Safer Wirral Partnership, Domestic Abuse Change Board.

8.2 All partners have been involved in the development of the new Strategic Plan through participation in development sessions and Board Meetings. Engagement with the Care Sector has increased through the Development Day held on 25 November 2022 and is the basis for more engagement work with the sector moving forward. Further engagement with partners has taken place throughout 2023 in the form of a SAB effectiveness survey, Care Quality Commission (CQC) assessment preparation and 'Let's Talk About Safeguarding' sessions.

9.0 EQUALITY IMPLICATIONS

- 9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision, or activity. There are no direct equality implications from this report.
- 9.2 The pdf file may not be suitable to view for people with disabilities, users of Assistive Technology or mobile phone devices. Please contact the report author if you would like this document in an accessible format.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

- 10.1 There are no direct environment and climate implications. Current arrangements require less travel by the majority of Board members, contributing to a reduction in carbon emissions.

11.0 COMMUNITY WEALTH IMPLICATIONS

- 11.1 The Board has a role to play in supporting the development of resilient local communities and community support organisations in relation to adult abuse and neglect both from a preventative perspective as well as identification and response.

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APPENDICES

Appendix 1 - WSAPB Strategic Plan (December 2022 update)
Appendix 2 - WSAPB Development Day Visual Minutes (November 2022)
Appendix 3 - WSAPB Annual Report September 2021 – March 2023

BACKGROUND PAPERS

Care Act 2014
WSAPB Terms of Reference

TERMS OF REFERENCE

This report is being considered at the Adult Social Care and Public Health Committee in accordance with Section 2.2(a) adult social care matters (e.g., people aged 18 or over with eligible social care needs and their carers).

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|---|-------------------|
| Adult Social Care and Public Health Committee | 18 January 2021 |
| Adult Social Care and Public Health Committee | 3 March 2022 |
| Adult Social Care and Public Health Committee | 26 September 2022 |
| Adult Social Care and Public Health Committee | 31 January 2023 |

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WIRRAL SAFEGUARDING ADULTS PARTNERSHIP BOARD

STRATEGIC PLAN 2022- 2024

Raising awareness of adult abuse and neglect by improving the quality of adult safeguarding services for the residents of Wirral and those working with them.

BE ASSURED...

1. Quality of Services
2. Neglect (Whole family approach)
3. Self-Assessment & Multi Agency Audits
4. VPRF Referrals - police

BE HEARD...

1. Advocacy
2. Connectivity (Frontline, Public and other boards)

BE KNOWLEDGABLE AND SKILLED...

1. Multi-Agency Training
2. Learning from SARs and other reviews
3. PiPoT (Persons in Position of Trust)
4. LPS – Liberty Protection Safeguards

WSAPB Business Plan 2022- 2024

Improving the quality of Adult Safeguarding Services for the residents of Wirral and those working with them.

BE ASSURED – QUALITY OF SERVICES

| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |
|--|-----------------------------------|--|--|-----|
| Ensure there are appropriate Multi-agency Adult Safeguarding Policies & Procedures in place and where necessary co-ordinate their revision | Operational Safeguarding subgroup | April 2023 (adjusted from original date of December 2022) | <ul style="list-style-type: none"> - MA Safeguarding Adults Policy, S42 Guidance and WSAPB Escalation Policy & Procedure signed off at December 2022 board - Inaugural Operational Safeguarding Group meeting took place on 07/12/22 - Forward plan for all | |

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| | | | <p>Policies & procedures agreed at the above meeting</p> <ul style="list-style-type: none"> - MA Safeguarding procedure drafted and with partners for final comments (march 23) - Final revisions made at June OS sub group meeting. MA procedure to go out to board for sign off and publication in July. - MA safeguarding procedure published September 2023 | |
| Ensure there is a consistent, measurable approach to the grading of quality of care in local care homes | Care Home Quality Task & Finish Group | January 2023 | <ul style="list-style-type: none"> - Care Home Development Day took place on 25/11/22 - PAMMs system implemented, and | |

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| | | | <ul style="list-style-type: none"> results shared with the Q & P sub group - Regular reports presented to the Q & P subgroup re care providers - Update report to be presented to board meeting 14/12/23 by quality and commissioning leads | |
| Gain assurance that the information is used to improve quality | Quality & Performance Subgroup | March 2023 | <ul style="list-style-type: none"> - Health & Social Care Care Home improvement plan / strategy to be developed and brought to Board for assurance - Update report to be presented to board meeting 14/12/23 by quality and commissioning leads | |

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| Provide quarterly reports on the progress of Quality Improvement projects | Key partners | Quarterly from January 2023 onwards | - This forms part of the Quality Assurance Framework and updates are provided to the Quality & Performance subgroup | |
| BE ASSURED – NEGLECT (a whole family approach-joint approach with WSCP) | | | | |
| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |
| Develop a Wirral wide neglect strategy | Combined Neglect Group | January 2023 | <ul style="list-style-type: none"> - Several 'Neglect' meetings attended by Business Manager. Strategy on track for completion - Cherish strategy completed and going to the next meeting of the T & F group on the 22/03/23 for sign off - Cherish strategy circulated to board | |

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| | | | members in June 23. Work has started on the delivery plan | |
| Awareness raising re Neglect and the support available locally | Combined Neglect group | March 2023 | <ul style="list-style-type: none"> - Cherish strategy circulated to board members in June 23. Work has started on the delivery plan - Further work required on the development plan | |

BE ASSURED – SELF ASSESSMENT AND AUDITS

| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |
|--|-----------------------------------|---|---|-----|
| Develop a Self - Assessment tool for use by all organisations delivering services | Quality & Performance subgroup | September 2023 (adjusted from original date of December 2022) | <ul style="list-style-type: none"> - Discussed at Q&P group in November and T & F group agreed at December 2022 meeting - T & F group met in February and are currently undertaking a scoping exercise of other SA tools to | |

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| | | | <p>update the existing one</p> <ul style="list-style-type: none"> - Platform for delivery and completion of the SA still to be identified - Draft SA loaded on to survey monkey and sent to T & F members to test- June 23 - Further work was required to find a suitable platform, this has been done and it is planned for the self assessment to go live in January 2024 | |
| All organisations delivering services to undertake an adult safeguarding self-assessment | Quality & Performance subgroup | Annually January 2024 and onwards (amended from original date of June 2023 & June 2024) | <ul style="list-style-type: none"> - Discussed at December 2022 meeting - Self assessment to be rolled out in January 2024 to aid the | |

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| | | | planning of board priorities for 2024 onwards | |
| Develop a programme of multi-agency deep dive audits derived from the findings from the WSAPB's performance dashboard | Quality & Performance subgroup | Developed by March 2023 and undertaken periodically thereafter | <ul style="list-style-type: none"> - Discussed at Q & P group in November - This work has not yet started due to difficulties in getting regular, accurate performance data through which to identify areas for audit - Single agency audit findings are scheduled to be brought to the Quality & Performance subgroup from January 2024 onwards. These will help to define the areas requiring MA audit work | |

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| Develop a schedule of reporting to the board detailing the outcomes of safeguarding audits undertaken by individual agencies | Key partners & WSAPB Business Manager | Twice yearly – dates to be agreed | <ul style="list-style-type: none"> - Discussed at Q & P group in November - Please see above update | |
| BE ASSURED – VPRF Referrals | | | | |
| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |
| Participate in the collaborative Learning Review detailing concerns re VPRF referrals and work with Police colleagues to improve the system | WSAPB Business Manager | April 2023 (adjusted from original date of December 2022) | <ul style="list-style-type: none"> - Further meetings have taken place and information is ready to be discussed with Police Colleagues - Police have been made aware of concerns, this has been highlighted as part of their recent PEEL inspection report and further | |

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| | | | work will follow because of this | |
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| Report the outcomes to the WSAPB to support the identification of trends and areas for improvement | WSAPB Business Manager and Police Colleagues | April 2023 (adjusted from original date of December 2022) | - please see information above | |
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| BE HEARD – ADVOCACY | | | | |
| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |
| Develop a stream of work to better understand the provision and uptake of Advocacy services on the Wirral | Operational Safeguarding subgroup | Initiate September 2022 and complete by March 2023 | <ul style="list-style-type: none"> - Spotlight Session held in September 2022 to start discussion - NCompass colleagues attend the board sub group to lead this piece of work - T & F group set up to undertake a scoping and assurance exercise and come | |

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| | | | back to board with proposals of next steps / actions req'd - Consultation exercise undertaken with professional social worker forum on the 01/02/23 including questionnaire - Data analysis exercise undertaken - T & F group due to meet again at the end of March - Report currently being written to show usage and feedback on advocacy services to be presented to a future board | |
| BE HEARD – CONNECTIVITY (Frontline and Public) | | | | |
| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |

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| <p>Develop appropriate and effective mechanisms to hear the voices of our citizens to inform the work of the board. Each Board meeting to start with a story of someone with lived experience</p> | <p>Communication & Engagement subgroup</p> | <p>December 2022 onwards</p> | <ul style="list-style-type: none"> - Forward plan discussed at December 2022 Comm's & Engagement sub group - 2 strands of consultation work underway. One with the VCSFE sector and one with practitioners - Hoarders work & experience planned for March board meeting - Engagement event held with MASH staff and safeguarding practitioners in May 2023 - Engagement with the | |
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| | | | public and those using services is currently under development and is a priority for the communication & engagement subgroup | |
| Develop appropriate and effective mechanisms to engage with practitioners and use their experiences to improve safeguarding adult services on the Wirral | Communication & Engagement subgroup | Ongoing with quarterly feedback to the WSAPB | <ul style="list-style-type: none"> - Discussed at December 2022 Comm's & Engagement sub group with focus group sessions planned and agreed - 2 strands of consultation work underway. One with the VCSFE sector and one with practitioners - 2 Consultative sessions undertaken with the VCSFE sector during March. One | |

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| | | | <p>with managers and safeguarding leads and one with practitioners</p> <ul style="list-style-type: none"> - Consultative work on Advocacy undertaken with Social Workers - A series of 'Let's talk about Adult Safeguarding' sessions have been ran with people working within the sector inc VCSFE organisations, Health & Care workers. The findings from these sessions have been shared with board in September 2023 with actions agreed for specific organisations - The board held a networking and | |
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| | | | awareness raising event during adult safeguarding week (23/11/23) this was attended by 160+ workers and volunteers | |
| Work with other boards in Wirral to ensure the work of the WSAPB is aligned with Wirral priorities and opportunities for joint work are maximised | Independent Chair and WSAPB Business Manager | Initiated September 2021. Work ongoing | <ul style="list-style-type: none"> - Several meetings have taken place but further work is needed. New date has been arranged for January. - A further meeting took place on the 07/03/23 and there is a move for the CEO for Wirral Council to take the lead on this moving forward. This is still on going | |

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BE KNOWLEDGEABLE AND SKILLED – MULTI-AGENCY TRAINING

| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |
|--|-------------------------|------------|---|-----|
| Develop a multi-agency workforce development strategy with particular focus on the training needs of our 3 rd sector partners | WFD Task & Finish group | March 2023 | <ul style="list-style-type: none"> - Meeting held with Wirral Council organisational Development team and support agreed - Proposal agreed at December 2022 board - WFD Task & Finish group meeting arranged for 19 December 2022 - This work has been halted due to staff absence - Confirmation from Wirral organisational Development that this work can now start again and a paper was taken to | |

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| | | | <p>board in June 23 with a proposed delivery plan which was accepted.</p> <ul style="list-style-type: none"> - Leads from key partners have now been identified and meetings established to start to write content for courses. The intention is for the offer to be available from April 2024 | |
| Roll out a comprehensive programme of Multi-agency Safeguarding Adults training for Wirral | WFD Task & Finish group | June 2023 | <ul style="list-style-type: none"> - WFD Task & Finish group meeting arranged for 19/12/22 to take forward this work subject to approval at Board - Approved at board - Please see update | |

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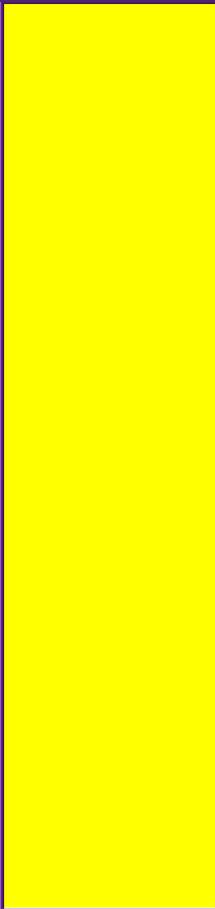
BE KNOWLEDGEABLE AND SKILLED – LEARNING FROM SAR'S (Safeguarding Adult Reviews)

| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |
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| Explore the Bexley Learning hub and other approaches to the sharing of learning from SARs and other processes | WFD Task & Finish group | September 2023 | <ul style="list-style-type: none"> - to be undertaken by WFD task & Finish group once the training programme has been implemented - This is an area of work that is still being explored both on a local and regional basis. | |
| Ensure a timely approach to the sharing of learning from national and local SARs | WFD Task & Finish group | March 2023 | <ul style="list-style-type: none"> - On agenda for December 2022 Task & finish group meeting - Work being undertaken with | |

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| | | | other boards to support the development of a robust approach to this. | |
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| BE KNOWLEDGEABLE AND SKILLED – Specific safeguarding responsibilities | | | | |
| OBJECTIVE | LEAD | TIMESCALE | PROGRESS | RAG |
| Re-launch the NW PIPOT policy and deliver refresher briefings to support organisations in the undertaking of their responsibilities | Operational Safeguarding subgroup | June 2023 | <ul style="list-style-type: none"> - Awaiting revised version of the Policy from NWADASS group - Policy / Guidance still under revision by NWADASS however the Operational Safeguarding subgroup of the board have agreed that a working group on this needs to be established | |

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| <p>Ensure the partnership are aware of requirements under new LPS legislation (Liberty Protection Safeguards)</p> | <p>Operational Safeguarding subgroup</p> | <p>Dependent on publication of new legislation</p> | <ul style="list-style-type: none"> - Spotlight session to be delivered by Lorna Quigley and Isabel Watson. Date to be confirmed - A core group is to be set up by Isabel Watson (PSW) to keep an oversight of developments in relation to LPS and provide periodic updates to Board as appropriate - Core group established by Principle Social Worker who feeds back to the Q & P group on a regular basis - National delays with this work |  |
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WIRRAL Care homes SAFEGUARDING ADULTS PARTNERSHIP BOARD DEVELOPMENT DAY



Drawn by Claire from WWW.MORETHANMINUTES.CO.UK @visualminutes

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*Wirral
Safeguarding Adults
Board*

*Annual Report
2021-2023*

Page 85



**SAFEGUARDING IS EVERYBODY'S
BUSINESS**

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Glossary of Terms

| | |
|--------------|---|
| WSAPB | Wirral Safeguarding Adults Partnership Board |
| SAB | Safeguarding Adults Board |
| SAR | Safeguarding Adults Review |
| DHR | Domestic Homicide Review |
| MCA | Mental Capacity Act |
| LGA | Local Government Association |

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*Safeguarding is everybody's
business*



Glossary of Terms

Wirral Safeguarding Adults Partnership Board is a new Board , it formed in September 2021 after the previous combined Board of Knowsley, Wirral, Sefton and Liverpool decided to set up separate Boards.

The Board includes senior managers from the Local Authority, local NHS services, Police, Fire and Rescue Services, Probation, Age UK Wirral, and Healthwatch.

This is the first report from the Board covering the 18 month period since its start and up to the end of March 2023. All Safeguarding Adults Boards have a duty to publish a report each year to describe the work done by the Board and I am pleased to introduce this on behalf of all the members of the Board . It details the priorities for the first year and the structures of the Board which have been developed to help deliver on them.

One of the most important roles in any community is ensuring people can live fulfilling lives safe from abuse, exploitation and harm. The role of the Board is to work together to protect people, who have care and support needs, from fear and abuse . The Board has a statutory duty to monitor and evaluate what is done by partner agencies individually and collectively to safeguard and promote the welfare of adults with care and support needs.

As the Independent Chair of the Board my role is to encourage, support and at times challenge all agencies, to ensure they work together to better protect adults in Wirral.

For the period covered by this report the Board has met 4 times and also held a development day looking at quality and safety in the Care Homes on the Wirral. The Board is supported by sub-groups, who are the real engine of the board and who take forward actions and provide members with data, assurance and intelligence to understand the experiences of people in Wirral, who may experience abuse, and of the frontline staff working with them.



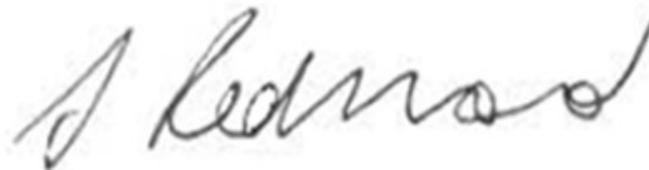
Foreword by the Chair



The start of this new Board has been very busy and all members have worked together to start to help gain insights and understanding of the issues that affect people on the Wirral . In particular the report details the work done to develop spotlight sessions to inform and educate people in particular areas, the beginnings of developing a performance framework and also the ground breaking work of the communications and engagement sub-group in listening and talking to a whole range of people across the borough on their experiences and understanding of safeguarding and working within the safeguarding process. The insights gained from this work will inform the work of the Board in the coming year.

In addition the year ahead will see the Board further develop their monitoring and assurance work, and embedding learning from Safeguarding Adult Reviews and other learning reviews.

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I have been impressed by the participation and contributions of all partners, who are under enormous pressure, and their commitment to their local area and the people of Wirral. Particular thanks must go to the Board Manager and the Lead Administrator for the Board who between them manage the many demands of the work programme, drive forward the many actions and provide constant, professional and quality support to the sub-groups and to me as Chair.



Foreword by the Chair



Membership



About the board

The Wirral Safeguarding Adults Partnership Board

The 3 Statutory Partners are :

- ◆ Wirral Health and Care (Wirral Council)
- ◆ Integrated Care Board NHS England
- ◆ Merseyside Police

The non-statutory partners include:

- ◆ Merseyside Fire & Rescue Service
- ◆ Healthwatch
- ◆ Age UK Wirral
- ◆ National Probation Service
- ◆ North West Ambulance Service
- ◆ Wirral University Teaching Hospital
- ◆ Cheshire & Wirral Partnership Trust
- ◆ Wirral Community Health & Care NHS Foundation Trust

**Elected members are also invited to sit on the board as observers*

WIRRAL SAFEGUARDING ADULTS PARTNERSHIP BOARD

STRATEGIC PLAN 2022- 2024



The board has 4 formal meetings a year plus 2 development sessions.

In addition to these meetings a series of ‘Spotlight’ sessions are offered to board and sub group members to support the development of knowledge and understanding on specific elements of safeguarding adults work.

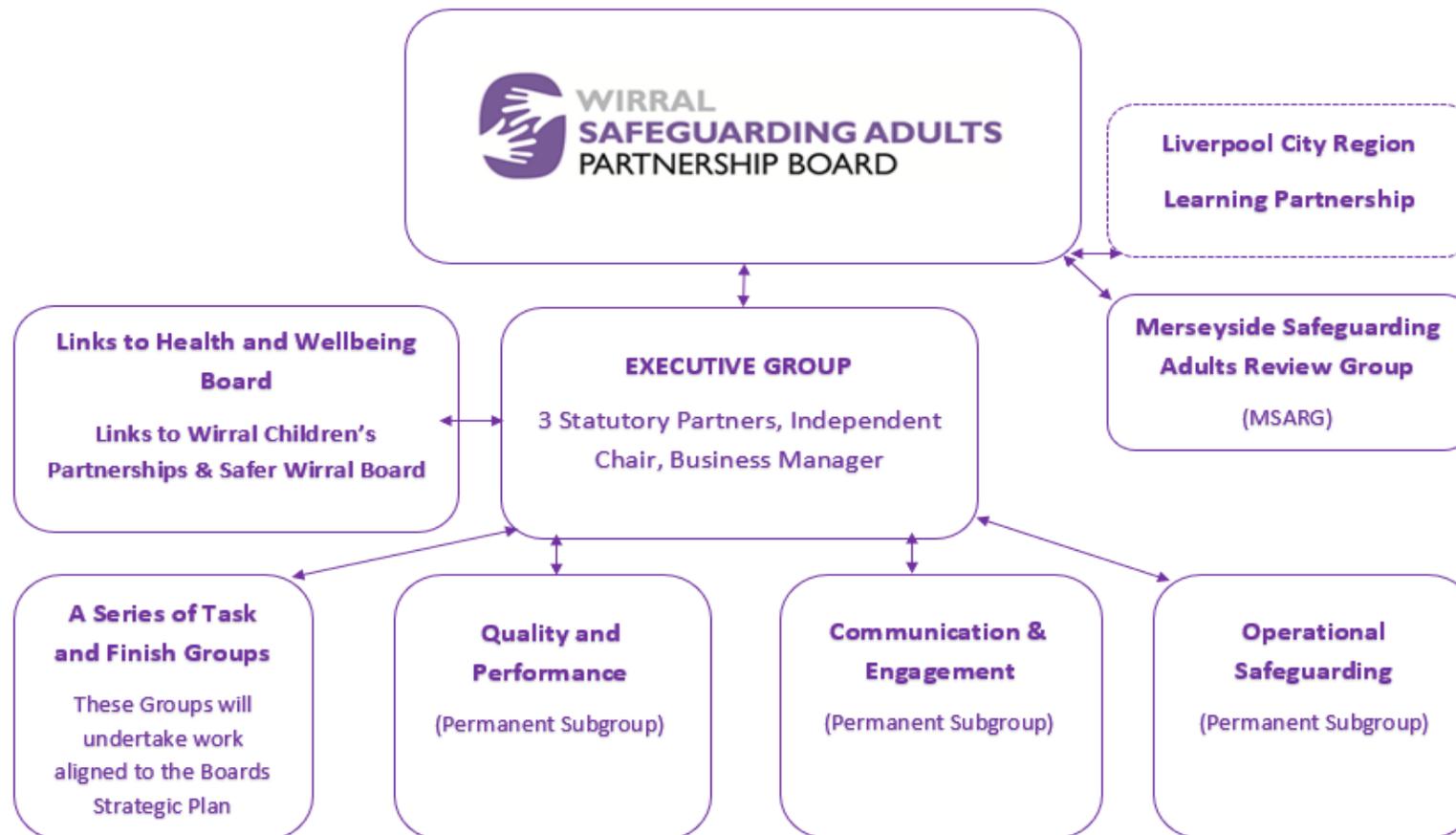
Board Overview



About the board

WIRRAL SAFEGUARDING ADULTS PARTNERSHIP BOARD

STRUCTURE



National Statistics— Key Facts

The following information is from [Data - NHS Digital](#)

Safeguarding Concerns

Between 1st April 2022 and 31st March 2023 a total of 587,970 concerns of abuse were raised nationally showing an increase of 9% on the previous year. This is a national average of 1,313 concerns per 100k adults. The Wirral figure is 1,553 per 100k adults.

Section 42 Enquiries

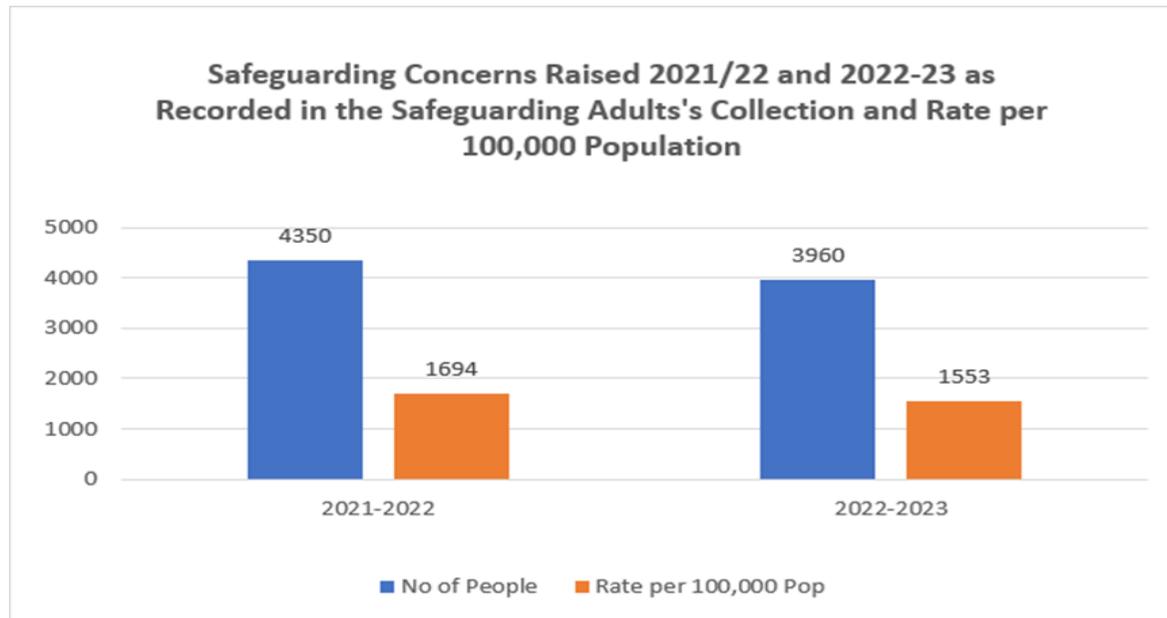
The total number of Section 42 and Other Enquiries between 1st April 2022 and 31st March 2023 nationally was 191,190 which is an increase of 4% from the 2021/2022. Wirral saw a decrease in 2022/ 2023 from 318 enquiries per 100k adults to 258 per 100k adults.

Age of individuals involved in Section 42 Enquiries

The majority of individuals reported by Local Authorities to have been involved in Section 42 Safeguarding Enquiries between 1st April 2022 and 31st March 2023 were 85 and over. This is approximately 1 for every 38 adults in England. This age group is also the most affected on the Wirral.



Numbers of Concerns received by Wirral Adult Social Care

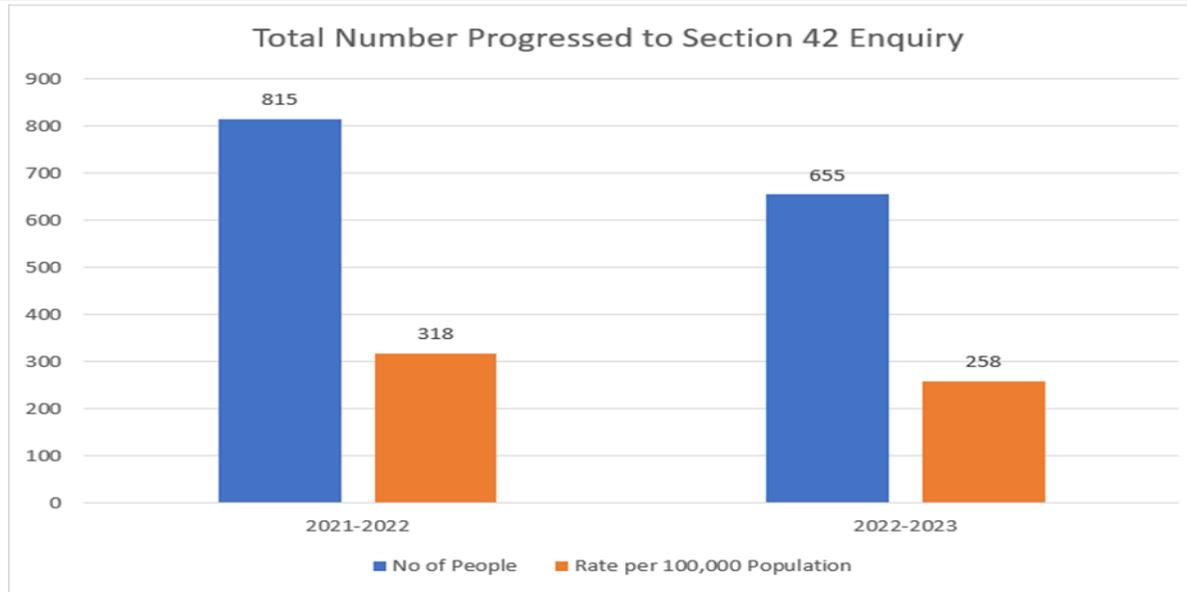


A Safeguarding concern is when someone contacts the local authority with concerns about an Adult with Care and Support needs and the concern is of a safeguarding nature i.e. a form of abuse or neglect.

The chart above shows that the total volume of adult safeguarding concerns on the Wirral has remained fairly consistent with 4350 in 2021/2022 and 3960 in 2022/2023 financial years. This is, however, a significant decrease on the volumes recorded in the years previous to this. In 2019/2020 the number was 6620 reducing to 4910 in 2020/2021.

This is due to a review and redesign of the MASH (Multi-agency Safeguarding Hub) and also the introduction of the Care Concerns model. Pre 2021 Wirral were an outlier regionally due to very high numbers of safeguarding concerns but it is now inline with average figures both regionally and nationally.

Section 42 Enquiries



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After some initial information gathering it may be decided that a full investigation is required. These are called Enquiries. An enquiry may be a Section 42 Enquiry (ie. It meets the criteria as set out under s42 of the Care Act) or an Other Enquiry (it doesn't meet the criteria set out in the Care Act but it is felt that the individual concerned would benefit from further support with the issue).

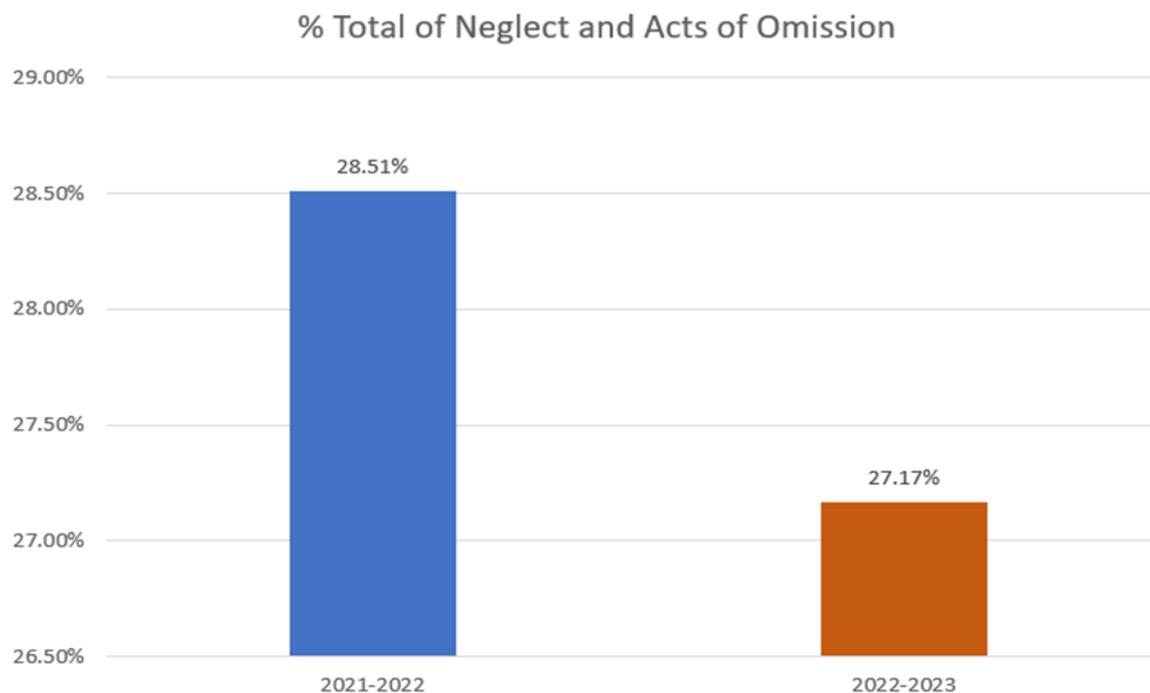
Between 1st April 2021 and 31st March 2022 815 Section 42 Enquiries were carried out on the Wirral. For the same time period in 2022/2023 that number reduced to 615. This is in line with a reduction in the total number of concerns raised. In relation to our national peers Wirral is now more in line with average figures rather than having significantly more as in previous years.

One area of interest is that the numbers of 'Other' enquiries undertaken on the Wirral is very low compared to some peer authorities and is something that may warrant further consideration.



Safeguarding Data

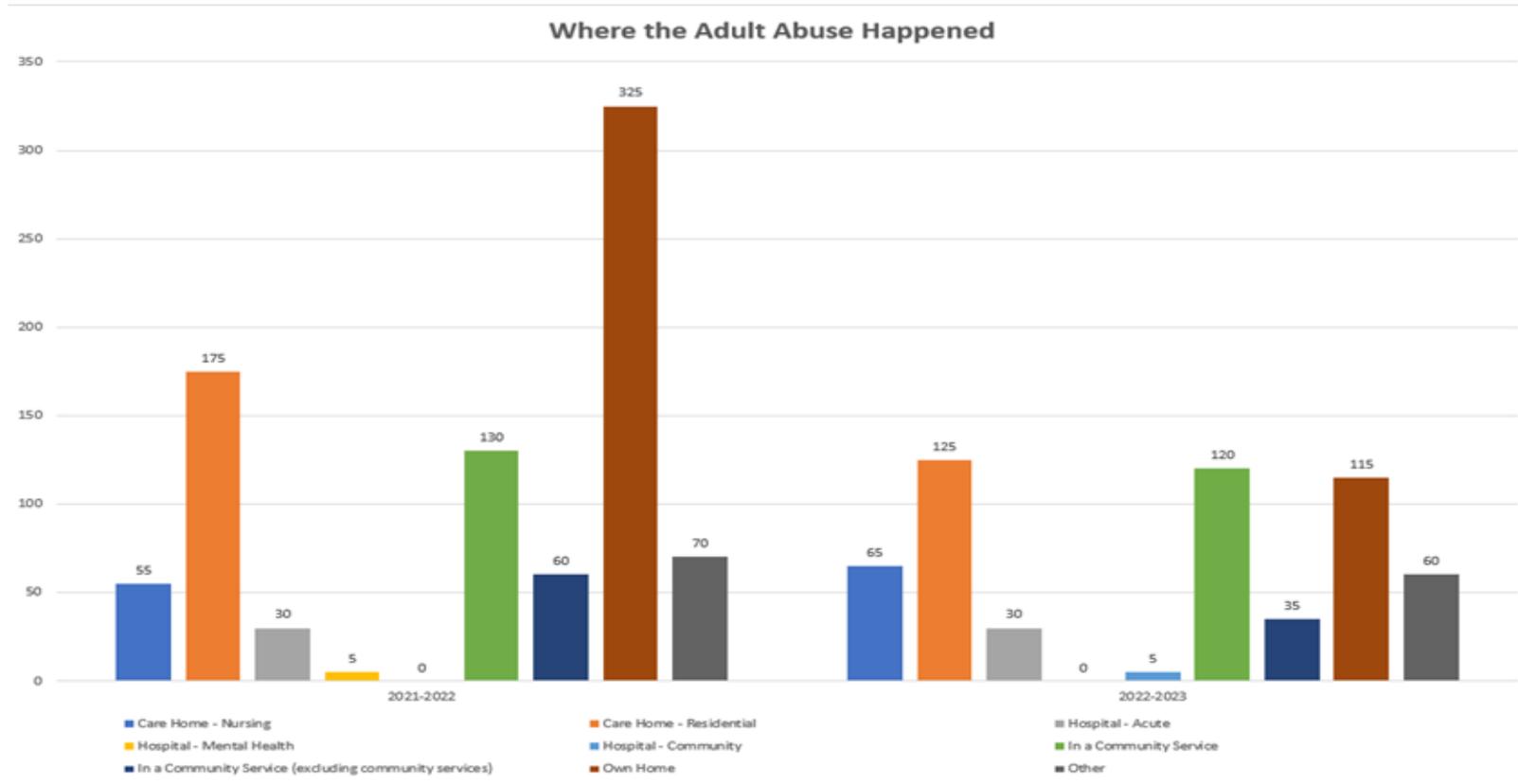
The type of alleged abuse



The most common type of abuse on the Wirral is 'Neglect and Acts of Omission'. This also reflects the regional and national picture.

All volume of other forms of abuse have remained consistent however there has been a slight increase of reporting on allegations of sexual abuse and sexual exploitation between 1st April 2021 and 31st March 2022 and the same time period in 2022/2023 of 1.9%.

Where the alleged abuse took place



When alleged abuse is investigated it is the persons own home or residential care home which is most often stated to be the location of where it took place. This is not just the case for the Wirral but also regionally and nationally. As the chart above shows there has been a 6% decrease in 2022/2023 of alleged abuse taking place in a persons own home and a 2.5% increase of it taking place within a residential care home when compared to 2021/2022. We believe this is a result of more accurate recording rather than an increase in alleged abuse in residential homes.

Quality & Performance sub-group

Chaired by Associate Director of Quality and Safety

NHS Cheshire and Merseyside



Work of the Sub-Groups

The primary purpose of the Quality and Performance sub-group is to monitor and evaluate the effectiveness of what is done by organisations working with adults with care & support needs, to keep the board updated and advise on any areas for concern.

ACHIEVEMENTS 2021-2023

This sub-group held its initial meeting in November 2021, and met 9 times up until March 2023. So far the group has;

- Developed a Quality Assurance framework
- Undertaken an assurance exercise with commissioners of services to ensure their contract arrangements include safeguarding adult responsibilities
- Refreshed a self assessment tool for agencies to see how well they are doing in relation to their safeguarding adult responsibilities

Forward plan

- To embed the use of a new performance report for use by the sub-group to better understand Adult Social Care data and identify themes and trends
- To develop a way to meaningfully collect data from partners inc Police, Health etc
- To develop a programme of multi-agency audits building on the findings of single agency audits

Quality & Performance sub-group cont.d



Work of the Sub-Groups

FRAMEWORK KEY



Domain 1 - Provide board with assurance that there is adequate capacity and skills within the safeguarding workforce



Domain 2 - Provide board with oversight of care provider activity, triangulating care concerns data with safeguarding data. This will enable proactive monitoring thereby potentially helping to identify trends which are a precursor to safeguarding incidents.



Domain 3 - Provide board with oversight of safeguarding activity (demand). To identify areas of concern and highlight if specific demographic cohorts are experiencing higher rates of abuse.



Domain 4 - Provide board with oversight of people's experience of the safeguarding process.

This framework is used to structure each meeting of the Quality & Performance sub-group. Reports are brought to the meeting by the relevant professionals and shared with the group for discussion, challenge and further action as appropriate. It enables the group to have knowledge and understanding of lots of different aspects of adult safeguarding work.

Operational Safeguarding sub-group

Currently Chaired by Board Business Manager

The Operational Safeguarding sub-group aims to support the development and roll out of Adult Safeguarding policies and procedures and to ensure that partner agencies operate in accordance with them. This group also aims to lead on the development of new approaches to working with adults with care & support needs.

ACHIEVEMENTS 2021-2023

The Operational Safeguarding group was not part of the initial board structure . Following a review of the board structure it held its initial meeting in December 2022 and has met 3 times during this period. So far the group has;

- Revised and published a new Wirral Multi- Agency Safeguarding Adults Policy
- Developed and published a board Escalation procedure for all partners to use
- Undertaken a piece of work to understand the use of Advocacy on the Wirral and how this can be improved

Forward Plan

- To refresh and publish a new multi-agency Safeguarding Adults procedure
- To develop a Wirral Complex safeguarding strategy
- To develop a strategy for work around Modern slavery and help partners to recognise the signs and how to support victims
- To support partners to fulfil their responsibilities in relation to P.I.P.O.T (Person in a position of trust) and manage allegations made against those working with adults with care & support needs



Work of the Sub-Groups

Communication and Engagement sub-group

Chaired by Chief Executive of Age UK Wirral

The Communication & Engagement sub-group aims to ensure the experiences of local people, including adults at risk, carers, advocates and those working with adults with care & support needs, are heard and used to improve the ways services work. It is also working to increase the awareness of adult safeguarding issues to help people feel more confident in asking for help.

ACHIEVEMENTS 2021-2023

This sub-group held its initial meeting in November 2021 and has met on 5 occasions during this period. The group is very well attended and so far has;

- Undertaken a survey of those working with adults with care & support needs to understand how organisations support their staff
- Followed this up with a series of engagement sessions in order to understand how the 'system' works on the Wirral and how it could be improved
- Attended the Childrens 'Big Learn' event to increase the knowledge of Adult Safeguarding within the children's workforce
- Supported the Wirral White Ribbon Event — ending violence against women and girls

Forward Plan

- Develop ways to meaningfully engage with adults with care & support needs to understand what works well and what can be improved
- Hold an awareness raising and networking event during Safeguarding Adults week
- Refresh and print new leaflets and posters and distribute across organisations on the Wirral
- Establish a WSAPB Communications Charter to try and offer a consistent message to the public about safeguarding adults work



Work of the Sub-Groups

Safeguarding Adults Review Group

Chaired by Senior Officers, Merseyside Police

The **SAR (Safeguarding Adults Review) sub-group** is a collaboration between the Wirral, Knowsley, St Helens and Sefton Safeguarding Adults Boards. Every board has a statutory duty to undertake a Safeguarding Adults Review when an individual with Care & Support needs has died as a result of , or has suffered, abuse and/or neglect and there is thought to be a failure in the way in which organisations worked together to protect them.

The group receives and considers all referrals and then makes a recommendations to the Chair of each Safeguarding Adults Board Chairs who will make the final decision.

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Work undertaken April 2021– March 2023

- The Merseyside Safeguarding Adults Review Group meets on a monthly basis
- 27 referrals have been considered by the group. The breakdown is as follows;
 - 19 between April 2021 and March 2022
 - 8 between April 2022 and March 2023
- From the 27 referrals **8** were for **Wirral residents**
 - 5 between April 2021 to March 2022
 - 3 between April 2022 to March 2023
- 3 of the 8 Wirral referrals have progressed to a full Safeguarding Adults Review

Work undertaken cont.d

- 2 of the 8 Wirral referrals have progressed to other forms of reviews
- The remaining 3 have resulted in action being followed up with an individual agency as no multi-agency failings were found
- The board received and signed off 3 completed SARS during this time. Details of which can be found overleaf



Work of the Sub-Groups

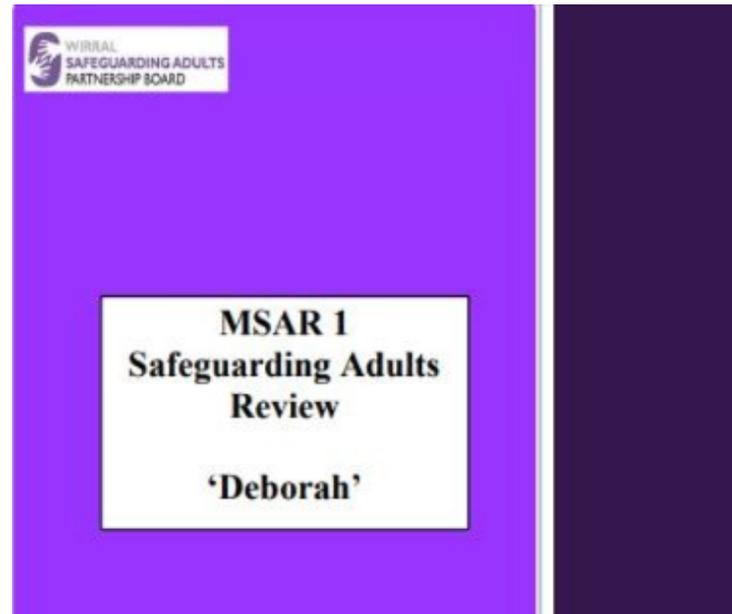
Safeguarding Adults Reviews

From April 2021 to the end of March 2023 the Wirral Safeguarding Adults Partnership Board received and signed off 3 SARs.

Deborah—MSAR 1

Deborah died in December 2018. She was 54. She had been diagnosed with early onset dementia in 2014. Safeguarding concerns arose periodically over the care her husband provided to her and considerable conflict arose between Deborah's birth family and her husband. Her husband arranged for Deborah to be cared for by his family in the country of his birth and she remained there until her death. Deborah's birth family applied to the Court of Protection for Deborah to be repatriated to the UK but her deteriorating health prevented this from happening.

The learning from this review included Mental Capacity assessments, mediation, the voice of the adult at risk, familial domestic abuse and coercion & control.



For copies of the full reports please visit the board website at www.wirralsapb.co.uk



SARS

Safeguarding Adults Reviews



SARS

MSAR 7 & 8—This was a joint review of 2 adults who had passed away following unwitnessed falls and where there was felt to be similar multi-agency learning

Adult 7

Adult 7 was a 94yr old gentleman who resided in the Care Home and had fallen and sustained a laceration to his head on the 14 January 2019. Adult 7 was taken to Wirral University Teaching Hospital where he subsequently died on the 17 January 2019. Up until 26 September 2018, Adult 7 had resided alone in his own home with minimal support. He had no family nearby and had no formal care provision in place. Concerns were raised by Northwest Ambulance service due to the lack of staff available to provide information about Adult 7's injury.

Adult 8

Adult 8 was admitted from her own home to Wirral University Teaching Hospital in August 2018. Following a period of treatment at the acute hospital, Adult 8 was transferred to a care home in a T2A (Transfer 2 Assess bed) in September 2018.

During her time in the T2A bed Adult 8 had a total of ten recorded unwitnessed falls and subsequently died from her injuries in October 2018.

The Learning from this joint review included transition of care arrangements and sharing of information, home environmental assessments and co-ordination of care planning.

Other work undertaken by the Board

In addition to the work of the sub-groups the board and its partners have also undertaken a number of other pieces of work as detailed below. The Board is keen to further develop its work with other partnerships on the Wirral such as the Childrens Partnership, Safer Wirral Partnership and the Domestic Abuse Alliance and looks forward to greater collaboration in the future to improve the support offered to all generations.

- Spotlight sessions have been held to increase knowledge and awareness of Domestic Abuse, Safeguarding Adult Reviews and Advocacy
- We have worked with the Childrens Partnership to develop the Cherish (anti-neglect) strategy
- We have made links with the Chairs of other Partnerships on the Wirral to seek out more opportunities to work together
- We held a Care home development day to bring together commissioners and providers to consider how this relationship can be strengthened and care provision can be improved
- Undertaken an effectiveness survey to understand how the Board has developed in its initial 18 months and how it can be improved



Other Board Work



ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

23 JANUARY 2024

| | |
|----------------------|--|
| REPORT TITLE: | ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE WORK PROGRAMME UPDATE |
| REPORT OF: | DIRECTOR OF LAW AND GOVERNANCE |

REPORT SUMMARY

The Adult Social Care and Public Health Committee, in conjunction with the other Policy and Service Committees, is responsible for proposing and delivering an annual committee work programme. This work programme should align with the corporate priorities of the Council, in particular the delivery of the key decisions which are within the remit of the Committee.

It is envisaged that the work programme will be formed from a combination of key decisions, standing items and requested officer reports. This report provides the Committee with an opportunity to plan and regularly review its work across the municipal year. The work programme for the Adult Social Care and Public Health Committee is attached as Appendix 1 to this report.

RECOMMENDATION

The Adult Social Care and Public Health Committee is recommended to note and comment on the proposed Adult Social Care and Public Committee work programme for the remainder of the 2023/24 municipal year.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 To ensure Members of the Adult Social Care and Public Health Committee have the opportunity to contribute to the delivery of the annual work programme.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 A number of workplan formats were explored, with the current framework open to amendment to match the requirements of the Committee.

3.0 BACKGROUND INFORMATION

- 3.1 The work programme should align with the priorities of the Council and its partners. The programme will be informed by:

- The Council Plan
- The Council's transformation programme
- The Council's Forward Plan
- Service performance information
- Risk management information
- Public or service user feedback
- Referrals from Council

Terms of Reference

- 3.2 The Adult Social Care and Public Health Committee is responsible for the Council's adult social care and preventative and community based services. This includes the commissioning and quality standards of adult social care services, incorporating responsibility for all of the services, from protection to residential care, that help people live fulfilling lives and stay as independent as possible as well as overseeing the protection of vulnerable adults. The Adult Social Care and Public Health Committee is also responsible for the promotion of the health and wellbeing of the people in the Borough. This includes , in respect of the Health and Social Care Act 2006, the functions to investigate major health issues identified by, or of concern to, the local population. The Committee is charged by full Council to undertake responsibility for:-

a) adult social care matters (e.g., people aged 18 or over with eligible social care needs and their carers);

b) promoting choice and independence in the provision of all adult social care

c) all Public Health functions (in co-ordination with those functions reserved to the Health and Wellbeing Board and the Overview and Scrutiny Committee's statutory health functions);

d) providing a view of performance, budget monitoring and risk management in relation to the Committee's functions; and

e) undertaking the development and implementation of policy in relation to the Committee's functions, incorporating the assessment of outcomes, review of effectiveness and formulation of recommendations to the Council, partners and other bodies, which shall include any decision relating to:

- (i) furthering public health objectives through the development of partnerships with other public bodies, community, voluntary and charitable groups and through the improvement and integration of health and social care services;
- (ii) functions under or in connection with partnership arrangements made between the Council and health bodies pursuant to Section 75 of the National Health Service Act 2006 ("the section 75 Agreements")
- (iii) adult social care support for carers;
- (iv) protection for vulnerable adults;
- (v) supporting people;
- (vi) drug and alcohol commissioning;
- (vii) mental health services; and
- (viii) preventative and response services, including those concerning domestic violence.

f) a shared responsibility with the Children, Young People and Education Committee for ensuring the well-being and support of vulnerable young people and those at risk of harm as they make the transition into adulthood

g) in respect of the Health and Social Care Act 2006, the functions to:

- (i) investigate major health issues identified by, or of concern to, the local population.
- (ii) consult, be consulted on and respond to substantial changes to local health service provision, including assessing the impact on the local community and health service users.
- (iii) scrutinise the impact of interventions on the health of local inhabitants, particularly socially excluded and other minority groups, with the aim of reducing health inequalities.
- (iv) maintain an overview of health service delivery against national and local targets, particularly those that improve the public's health.
- (v) receive and consider referrals from local Healthwatch on health matters which are to include the establishment and functioning of joint arrangements as set out at paragraph 14 of this Section.

FINANCIAL IMPLICATIONS

- 4.1 This report is for information and planning purposes only, therefore there are no direct financial implication arising. However, there may be financial implications arising as a result of work programme items.

4.0 LEGAL IMPLICATIONS

- 5.1 There are no direct legal implications arising from this report. However, there may be legal implications arising as a result of work programme items.

5.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 There are no direct implications to Staffing, ICT or Assets.

6.0 RELEVANT RISKS

7.1 The Committee's ability to undertake its responsibility to provide strategic direction to the operation of the Council, make decisions on policies, co-ordinate spend, and maintain a strategic overview of outcomes, performance, risk management and budgets may be compromised if it does not have the opportunity to plan and regularly review its work across the municipal year.

7.0 ENGAGEMENT/CONSULTATION

8.1 Not applicable.

8.0 EQUALITY IMPLICATIONS

9.1 Wirral Council has a legal requirement to make sure its policies, and the way it carries out its work, do not discriminate against anyone. An Equality Impact Assessment is a tool to help council services identify steps they can take to ensure equality for anyone who might be affected by a particular policy, decision or activity.

This report is for information to Members and there are no direct equality implications.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 This report is for information to Members and there are no direct environment and climate implications.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 This report is for information to Members and there are no direct community wealth implications.

REPORT AUTHOR: **Christine Morley**
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email: christinemorley@wirral.gov.uk

APPENDICES

Appendix 1 - Adult Social Care and Public Health Committee Work Plan

BACKGROUND PAPERS

Wirral Council Constitution

Forward Plan

The Council's transformation programme

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|------------------------|-------------|
| Standing Item | |

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ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE
WORK PROGRAMME MARCH 2024

| Item | Approximate timescale | Lead Departmental Officer | Decision |
|---|------------------------------|----------------------------------|-----------------|
| National Substance Misuse Grant Funding Update | March 2024 | Sophie Baird (interim) | Key |
| C&M LD & Autism Housing Strategy | March 2024 | Jayne Marshall | Key |
| Outcome of Annual Rate and Fees Engagement | March 2024 | Jayne Marshall | Key |
| All Age Disability Strategy | March 2024 | Jean Stephens | Key |
| Co-production Strategy | March 2024 | Jayne Marshall | Key |
| All Age Disability Review Implementation Report | March 2024 | Jean Stephens | Non-Key |
| Annual Complaints Report | March 2024 | Jean Stephens | Non-Key |
| Public Health Annual Report | March 2024 | Dave Bradburn | Non-Key |
| Financial Monitoring Report | March 2024 | Sara Morris | Non-Key |
| Performance Monitoring Report Quarterly Q3 Report | March 2024 | Nancy Clarkson | Non-Key |
| Work Programme | March 2024 | Christine Morley | Non-Key |

ADDITIONAL AGENDA ITEMS – WAITING TO BE SCHEDULED

| Item | Approximate timescale | Lead Departmental Officer |
|---|------------------------------|----------------------------------|
| BCF S75 2024-25 (Key decision) | June 2024 | Bridget Hollingsworth |
| Supported employment framework (Key decision) | June 2024 | Jean Stephens |
| Autism strategy | June 2024 | Jean Stephens |

| | | |
|--|---------------|---|
| Able Me Implementation Progress Report | June 2024 | Jean Stephens |
| Update on Front Door Volunteering | June 2024 | Dave Bradburn (invite Gareth Prytherch for an interim update) |
| Update on Domestic Abuse Strategy | June 2024 | Mark Camborne |
| CWP Contract Review | June 2024 | Bridget Hollingsworth |
| Dentistry | November 2024 | Tom Knight |

STANDING ITEMS AND MONITORING REPORTS

| Item | Reporting Frequency | Lead Departmental Officer |
|---|--|------------------------------|
| Financial Monitoring Report | Each scheduled Committee Finance have set out the below for finance reports June September November February/March | Sara Morris |
| Performance Monitoring Report | Quarterly Reports Q3 March, Q4 June, Q1 September, Q2 November | Nancy Clarkson |
| Adult Social Care and Health Committee Work Programme Update | Each scheduled Committee | Christine Morley |
| Social Care Complaints Report | Annual Report – March | |
| Adults Safeguarding Board | Annually – January | Sue Redmond/ Alison Marchini |
| Public Health Annual Report | Annually – March 2024 | Dave Bradburn |
| Health Protection Strategy Update | April 2024 then every six months | Dave Bradburn |
| Appointment of statutory committee and member champion for domestic abuse and joint health scrutiny | Annually - June | Dan Sharples |
| Sec 75 Pooled Fund | Annually – October TBC | Bridget Hollingsworth |
| Better Care Fund Plan | Bi-Annual September 2025 | Bridget Hollingsworth |

WORK PROGRAMME ACTIVITIES OUTSIDE COMMITTEE

| Item | Format | Timescale | Lead Officer | Progress |
|---|----------|-------------------|-------------------------------------|-----------|
| Spotlight sessions / workshops | | | | |
| CQC | Workshop | 9 August 2023 | Simon Garner | Completed |
| BCF/ Section 75 | Workshop | 18 September 2023 | Bridget Hollingsworth | Completed |
| Wirral Drugs Strategy | Workshop | 2 November 2023 | Dave Bradburn | Completed |
| Dementia (including regen and environment) | Workshop | 14 November 2023 | Graham Hodkinson | Completed |
| Public Health Grant Review | Briefing | 25 January 2024 | Dave Bradburn | |
| Budget Briefings | Workshop | | TBC | |
| Integrated Care Systems, Place arrangements and the Integrated Care Board | Workshop | March 2024 | Graham Hodkinson and Vicki Shaw | |
| BCF/Section 75 2024-2025 | Workshop | March 2024 | Bridget Hollingsworth | |
| Care Home Commissioning contracting and Quality Improvement. | Workshop | April 2024 | Jayne Marshall | |
| Supported Living Projects | Workshop | | | |
| COMF Grant | | | Jen Smedley/ Barry Graham | |
| Planning decisions on extra care housing | Workshop | | Graham Hodkinson/ Jayne Marshall | |
| Written briefings | | | | |
| Position statement – Refugees (written briefing) | TBC | Lisa Newman | | |
| Working Groups/ Sub Committees | | | | |
| | | | | |
| Task and Finish work | | | | |
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Adult Social Care and Public Health Committee – Terms of Reference

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- b) promoting choice and independence in the provision of all adult social care
- c) all Public Health functions (in co-ordination with those functions reserved to the Health and Wellbeing Board and the Overview and Scrutiny Committee's statutory health functions).
- d) providing a view of performance, budget monitoring and risk management in relation to the Committee's functions; and
- e) undertaking the development and implementation of policy in relation to the Committee's functions, incorporating the assessment of outcomes, review of effectiveness and formulation of recommendations to the Council, partners and other bodies, which shall include any decision relating to:
 - (i) furthering public health objectives through the development of partnerships with other public bodies, community, voluntary and charitable groups and through the improvement and integration of health and social care services;
 - (ii) functions under or in connection with partnership arrangements made between the Council and health bodies pursuant to Section 75 of the National Health Service Act 2006 ("the section 75 Agreements")
 - (iii) adult social care support for carers; (iv) protection for vulnerable adults;
- (v) supporting people; (vi) drug and alcohol commissioning; consult, be consulted on and respond to substantial changes to local health service provision, including assessing the impact on the local community and health service users.
 - (i) scrutinise the impact of interventions on the health of local inhabitants, particularly socially excluded and other minority groups, with the aim of reducing health inequalities.
 - (ii) maintain an overview of health service delivery against national and local targets, particularly those that improve the public's health.
 - (iii) receive and consider referrals from local Healthwatch on health matters which are to include the establishment and functioning of joint arrangements as set out at paragraph 14 of this Section.
- (vii) mental health services; and (viii) preventative and response services, including those concerning domestic violence.

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