

1.0 Executive Summary

The purpose of this report is:

- To provide evidence of the impact and improved position that Wirral Community Health and Care NHS Foundation Trust (WCHC) made whilst delivering services via the Adult Social Care (ASOC) contract to date; and how it has added value having adult social care services provided alongside NHS Healthcare.
- To provide evidence that ASOC services have performed well and beyond contract, up to the point of transfer, delivering person-centred, safe support whilst delivering all care on budget and making the required financial efficiencies

To describe the joint approach with Wirral Council (WC) and specific actions taken by WCHC to ensure the safe and seamless transfer of the service by 30 June 2023. The report demonstrates:

- WCHC has delivered high quality and improved statutory social work services up to the point of transfer
- WCHC has demonstrated value for money through strong financial management and governance in addition to delivering the required efficiencies in extremely challenging circumstances
- WCHC has committed significant investment in the development of social care staff including leadership and management.
- WCHC, in partnership with Cheshire and Wirral Partnership NHS Foundation Trust (CWP) has developed arrangements to strengthen practice around transition and professional development
- WCHC has harnessed the strengths and opportunities of an integrated adult social care and health organisation to innovate, deliver increased capacity and improved performance
- WCHC has strong governance and assurance approaches and has developed a framework for supporting preparation for CQC assessments of ASOC and continuous improvement
- WCHC has invested in professional development which safeguards the voice and integrity of social work practice and service development
- Professional Leadership by WCHC to ensure the safe and effective transfer and retention of best practice in service provision

The transfer of staff will take place at midnight on 30 June 2023 - there are currently no risks identified to the achievement of the critical path.

This report highlights the significant innovation and improvement in provision during the five years of the contract and achievement in performance and efficiency savings. The Trust provides safe Adult Social Care services. There have been no performance notices raised during the lifetime of the contract. Performance has improved in several areas over the term of the contract which are outlined below.

WCHC has worked collaboratively with WC colleagues during the transfer process to provide detailed information and expertise to support the safe and effective transfer of the service back to WC. This means that the service will transfer back in a strong position, well equipped to continue delivering high quality provision for Wirral residents and meet future requirements of CQC Inspection.

2.0 Service Improvement in ASOC through integration and innovation

2.1 The Section 75 Agreement required development in the following areas:

- Single Point of Access
- Prevention and admission avoidance
- Integrated Community Care Hubs

Single Point of Access

The Integrated Gateway provides access to all community health and social care services in Wirral. There are several teams located within the Integrated Gateway including the Central Advice and Duty Team (CADT), Promoting Peoples Independent Network (POPIN), and First Contact. Over the last five years the ASOC Teams have:

- responded to over 215,868 contacts
- completed 93,393 assessments
- completed 40,972 reviews

Prevention and admission avoidance

The following integrated teams have been key to effective prevention and admission avoidance:

- Community Integrated Response Team
- Discharge to Assess
- Home First
- Integrated Discharge Team

Community Integrated Response Team (CIRT) includes a range of integrated services to promote faster recovery from illness, prevention of unnecessary acute hospital admissions, reduction in admissions to long-term residential care, and supporting of timely discharge from hospital. WCHC's CIRT multi-disciplinary team includes social workers, nurses, and therapy staff and is demonstrating excellent performance:

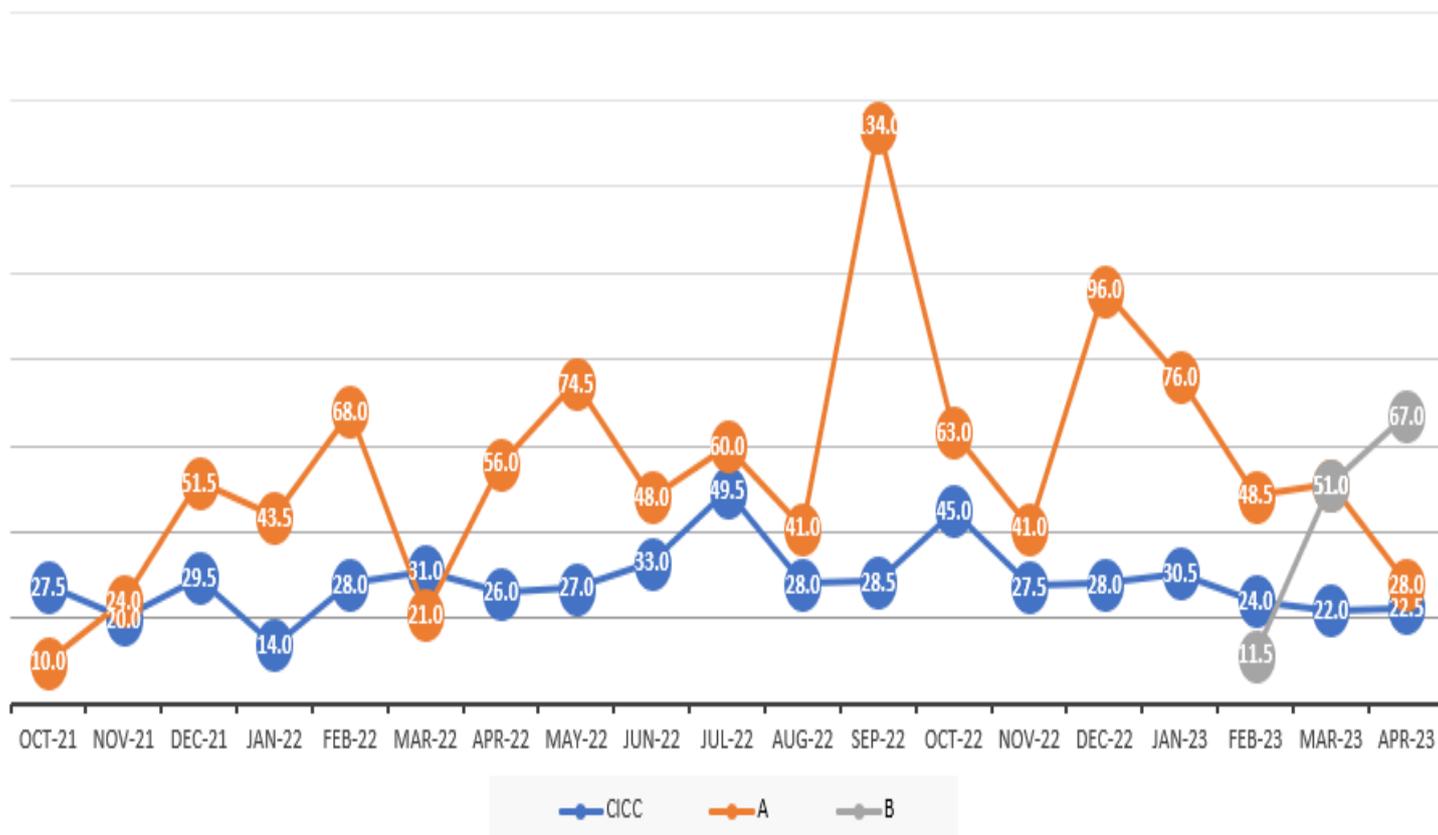


- 200-300 patients a month - around half of these are urgent patients
- 87.7% compliance for a response within 2 hours against the national target of 70%

Discharge to Assess (D2A) was enhanced in 2020/21 to include the Community Intermediate Care Centre (CICC). This provides bed-based reablement and rehabilitation for individuals who require additional assessment and reablement goals prior to returning home from hospital. Social care staff function as a key member of the multi-disciplinary

team and provide a holistic and person-centred assessment of need and determine eligibility in accordance with statutory requirements of the Care Act 2014. Key successes of this service are a lower length of stay compared to similar provision in Wirral and the outcome that 65% of patients go home from CICC.

Median Length of Stay (Discharges in Month)



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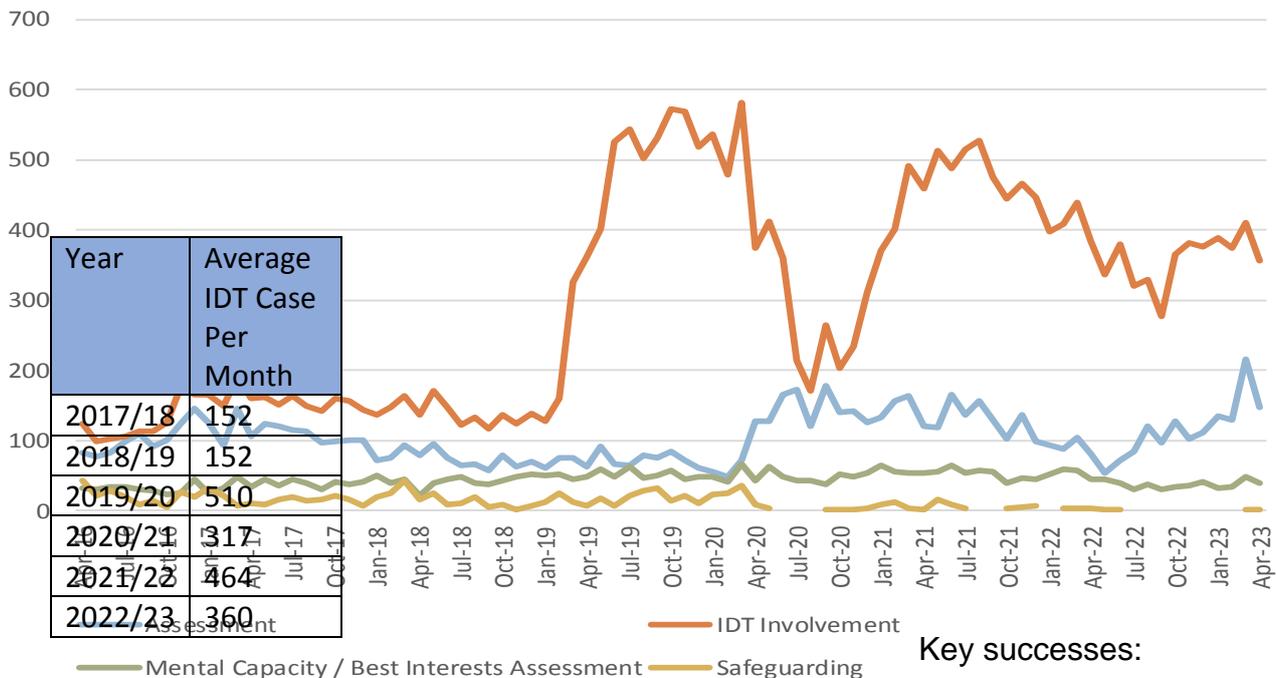
Home First was implemented by WCHC in 2022. This highly innovative approach is based on the evidence that assessment and support at home provides a better picture of someone's needs and a more accurate assessment. Moreover, a concentrated period of reablement involving a highly coordinated multidisciplinary team, means that people should require less long-term care, maintaining quality of life and independence for longer.

Key successes to note:

- Average referrals – 55 per month
- 450-500 HCA visits per week
- Average time in service -16 days
- No delays in discharge due to Home First
- 1 in 5 people went on to have long term care compared to 1 in 3 from comparable services

The **Integrated Discharge Team (IDT)** works across the acute services to provide support to people and their carers in their discharge planning from admission to discharge. IDT is an integrated multi-disciplinary team of social care workers, nurses, and discharge trackers who triage and provide information to access services aiming to support hospital discharge.

IDT Monthly Activity



Key successes:

- A 137% increase in the number of contacts over the lifetime of the contract
- Increased capacity by employing additional Social Worker and Care Navigators to support assessments
- Successful roll out of the Notification to Assess/Discharge process which has included the implementation of the duty function to ensure that no assessments are awaiting allocation
- Responsive to the increased demand due to commissioning of bespoke placements
- Streamlining of the reporting process to release staff to complete the assessments required on the wards
- Establishment of the multi-agency complex discharge panel which evolved into the Executive Discharge Cell

- Developed a discharge dashboard on Liquid Logic that provides an accurate picture, highlighting delay and demand for IDT support at ward level
- Aligned to hospital teams resulting in improved relationships and expedited discharges
- Implementation of a collaborative framework that supports Mental Capacity Assessments being completed once by professionals, and shared across the Trust partnership, to facilitate more timely discharges

Integrated Community Care Hubs (ICCHs)

WCHC has developed co-located integrated community care teams, including ASOC which has led to significant changes in the way people coordinate services and work together for the people they serve. Measurable outcomes of this work are evidenced business intelligence by people's stories, staff, and stakeholder feedback.

Working for the same organisation in the NHS has supported effective collaboration Health and Social Care professionals to plan interventions that support a holistic person-centred approach meaning that people only having to tell their story once. Most significantly staff describe how it is easier to resolve either a case issue or a wider practice issue working in the same organisation.

This structure has allowed the development of new ways of working; for example, Birkenhead ICCH has a daily triage multidisciplinary meeting to provide a quick response to the individual and their families.

2.2 Innovation Highlights

Adult Social Care Occupational Therapy Assessment Service

- Implemented an integrated pathway with the Rehabilitation at Home Service improving flow and preventing duplication. This includes a pilot of joint triage
- Responded to a year-on-year increase in assessments since 2017, with a 34% increase in 2022/23

Moving with Dignity Project was initiated in January 2022 to implement an intervention focusing on single hand techniques and the use of new technology to optimise function. The project has led to a reduction in prescribing, increased market capacity in domiciliary care, and contributed to better utilisation of resources. There has been a consequential 56% reduction in care service provision for people who participated in a Moving and Dignity Review.

A **Transition Pathway** has been developed in partnership with CWP's Children's with Disability Service and the Integrated Disability Service, including the development of joint visits to provide an appropriate handover for the young person. This reduces the need for the individual to retell their story and provides better outcomes for the individual and their family.

Three Conversations is a more person-centred way of understanding people's social care needs that leads to less reliance on statutory care. This was initially piloted in Birkenhead and West Wirral ICCHs resulting in:

- a 20% reduction in the number of people who require long term support
- a reduction in the average cost of support and
- a 50% improvement in response times



Service user feedback: *“My wife’s improvement has been astonishing. I cannot praise the Service enough. ...look forward to further visits and continual improvement. Thank you so much for offering the service.”*

The model was subsequently extended to Wallasey ICCH, South Wirral ICCHs, the Multi-agency Safeguarding Hubs and the Review Team.

Innovation in **Quality and Safe Care** is evidenced by:

- Creation of a quality lead role for Adult Social Care and a Deputy Director for Adult Social Care to support and lead professional practice and quality improvements both within WCHC and across the wider system
- Implemented partnership meetings with CWP to developed joint approaches to improve people’s experience of transition and safeguarding interventions
- Putting in place the Professional Leadership Framework, ensuring that practitioners are supported to achieve the highest standard of clinical and professional practice, including the professional standards for social work
- Implementation of a robust supervision policy with compliance evidenced by annual audit and mechanisms in place to identify and respond to gaps in supervision quickly
- Effective mechanisms for staff to raise concerns and have them responded to quickly and safely, for example, the “Freedom to Speak Up” programme
- Working in partnership to enhance the initial configuration and scope of safeguarding social care services that transferred from WC. ‘Making Safeguarding Personal’ principles have informed the development of safeguarding pathway design, to provide improved safeguarding outcomes for individuals
- Implementation of a new MASH which has resulted in more proportionate level of concerns coming into the MASH and a more appropriate level of conversion to Section 42 enquiries. The location of MASH within the organisation has allowed greater use of information systems, more in-depth screening, and more robust Section 42 Enquiries. Quick access to WCHC professional colleagues has supported urgent joint responses when needed from both social care and health. The new MASH structure has allowed the outcomes for individuals within the ‘Making Safeguarding Personal’ agenda to be at the centre of the Section 42 Enquires. This has demonstrated a significant increase in individuals understanding the process, feeling listened to, feeling safer, achieving their outcomes and being happy with them
- Implementation of robust governance structure. Key to this is the Safeguarding Operational Group where multi-disciplinary members including ASOC provide assurance around safeguarding, audits, compliance, and key performance indicators. This group provides assurance to the Safeguarding Assurance Group,

regarding the organisation discharging its safeguarding responsibilities. The meeting is attended by the Principal Social Worker (WC). Scrutiny and oversight by the WCHC Quality and Safety Committee internally provides assurance to the Safeguarding Adult Partnership Board through the Chapter 14 Audit and production of an Annual Safeguarding Annual Report

- The MASH supported the Government scheme to provide homes for Ukrainian Refugees through completing safeguarding checks on people who were interested in hosting refugees. WCHC was able to provide a timely response even though Wirral had three times more requests than many other LA areas in Merseyside
- ADASS Northwest undertook a peer CQC readiness visit in November 2022 which included an external peer audit of case files which evidenced practice to be either good or outstanding in ALL the cases reviewed.

Continued Professional Development (CPD)

WCHC has implemented a range of innovative initiatives to support the CPD of the ASOC workforce to aid recruitment and retention and support enhanced care including:

- Implementation of the Leadership Qualities Framework which gives health and social care leaders access to evidence based and high-quality leadership development
- Investment in an ASOC training project co-ordinator role to lead recruitment on the Social Work Degree Apprenticeship Programme and embed CPD and specialist training opportunities within Adult Social Care.
- Investment in an ASOC education lead to determine training and development requirements for WCHC and address any training gaps and support service development
- Investment in role-essential learning by developing the matrix in collaboration with CWP, increasing opportunities for training, for example, commissioning a Wirral-wide Best Interest Assessor (BIA) annual legal refresher training course for the last three years which has supported a threefold increase in the number of BIA assessors within the organisation since 2017
- Implementation of the Degree Apprenticeship Programme over the last three years with thirteen members of staff currently participating, seven of whom will shortly be able to start their social work career in the Wirral
- Investment in the Cheshire Mersey Social Work Teaching Partnership (CMSWTP) which is an employer-and-academic-led initiative that is uniquely dedicated to the CPD of social care staff. The investment facilitated four modules of learning between January 2021 and March 2023 for social care staff
- Input to social work training at Liverpool Hope University and provision of student placements.
- Engagement with the Professional Social Work Network (PSWN) established with CWP. This runs on a quarterly basis and can account for twelve hours a year of CPD for the social work staff
- A five-year workforce strategy for Adult Social Care that sits under the WCHC's People Strategy. This is underpinned by a clear action plan for improving

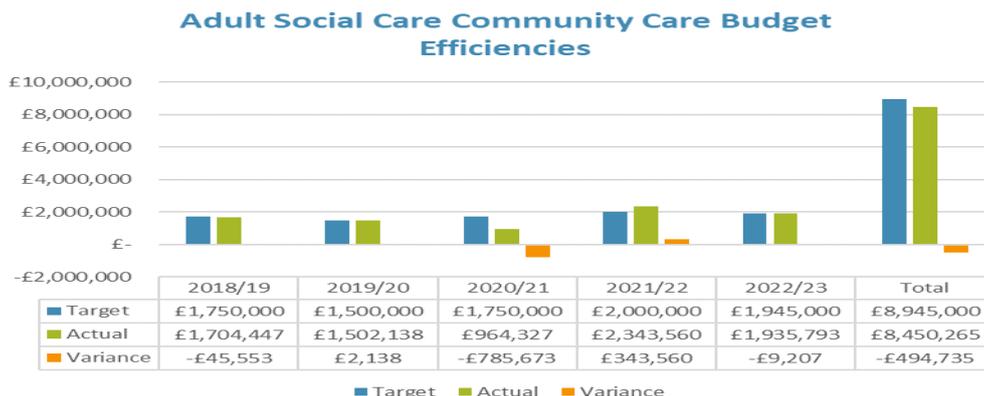
recruitment and retention into Adult Social Care and a working group who review this monthly

3.0 Performance and Value for Money

3.1 Value for Money

Over the life of the contract WCHC has contributed resource in addition to the contract value. This includes investment in key quality improvement and assurance posts.

As part of the Section 75 Agreement WCHC agreed to deliver specific financial efficiencies against the community care budget each year for the life of the contract. The total delivered savings over the life of the contract amount to £8.445m - an achievement of 95% of the set target. This achievement is despite an extremely challenging year in 20/21 during Covid-19 where savings of close to £1m were still delivered.



3.2 Contract KPI Performance

The operational performance of WCHC’s integrated health and social care teams is assured through a robust governance structure with local and organisational wide meetings, feeding board level assurance through the Integrated Performance Board and Wirral Council contract monitoring meetings. 2022/23 performance against the contract KPIs is detailed in the tables below.

No	Description	Green	Amber	Red	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	YTD
KPI 1	% of initial contacts through to completion of assessment within 28 days	>=80%	<80% >= 70%	<70%	73.4%	74.7%	73.5%	74.6%	73.3%	78.4%	81.4%	84.9%	77.4%	82.7%	81.4%	76.9%	77.9%
	Total Assessments Completed within 28 Days				207	216	208	258	264	243	288	299	243	292	258	309	3,085
	Total Assessments Completed				282	289	283	346	360	310	354	352	314	353	317	402	3,962
KPI 2	% of safeguarding concerns (Contacts) completed within 5 Days	>=99%	<99% >=95%	<95%	99.6%	99.7%	99.6%	99.3%	99.4%	98.2%	97.9%	95.6%	95.4%	98.8%	97.6%	99.0%	98.4%
	Total number of safeguarding concerns completed within 5 days				247	329	267	274	322	275	283	258	227	239	242	285	3,248
	Total number of safeguarding concerns completed				248	330	268	276	324	280	289	270	238	242	248	288	3,301
KPI 6	% of adults with a learning disability who live in their own home or with their family	>=88%	<88% >=70%	<70%	94%	95%	95%	94%	95%	95%	95%	95%	95%	95%	94%	95%	95%
	No. of people aged 18-64 with a learning disability living in their own home or with their family				439	444	444	446	451	455	461	468	473	479	478	481	5,519
	No. of people aged 18-64 with a learning disability in receipt of a long term service during the year				465	469	469	472	476	480	486	495	499	506	506	508	5,831
KPI 7	% of older people who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	>=83%	<83% >=81%	<81%	100%	100%	89%	88%	100%	100%	85%	80%	90%	79%	86%	88%	88.5%
	Total number of people at home 91 days post discharged from hospital into a reablement service				11	18	8	14	17	11	17	28	37	22	25	23	231
	Total number of people discharged from hospital into a reablement service				11	18	9	16	17	11	20	35	41	28	29	26	261

Performance in relation to safeguarding adults is demonstrated to be better than regional and national benchmarks in the tables below. The safeguarding metrics used are considered most relevant in evidencing their self-assessment as part of Adult Social Care Assurance.

Wirral (Quantiles of All English single tier and county councils)

% of users who feel safe 2021/22 %

73.4



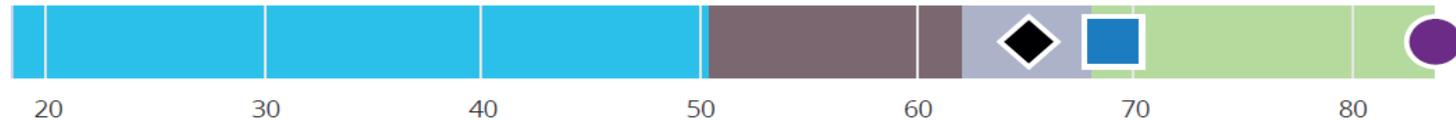
% of users who feel safe 2021/22 %

91.3



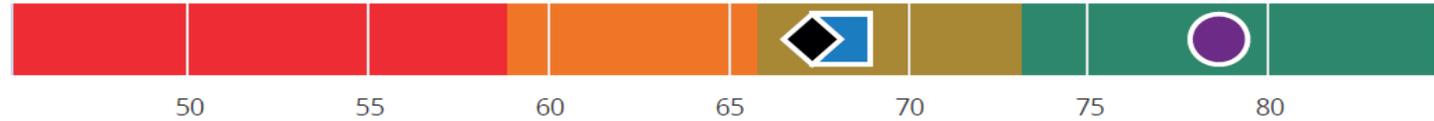
Proportion of section 42 safeguarding enquiries where desired outcomes were asked for and expressed 2021/22 %

83.8



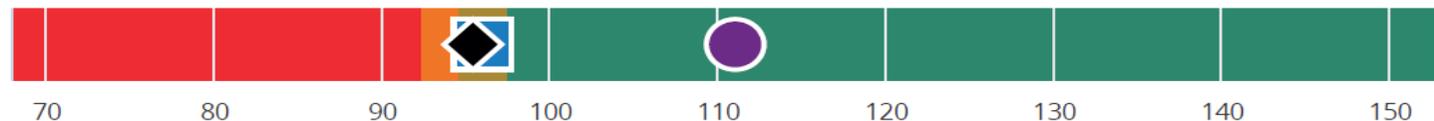
Proportion of section 42 safeguarding enquiries where desired outcomes were asked for and expressed, where outcomes were fully achieved 2021/22 %

78.6



% of section 42 safeguarding enquiries where desired outcomes

111.0

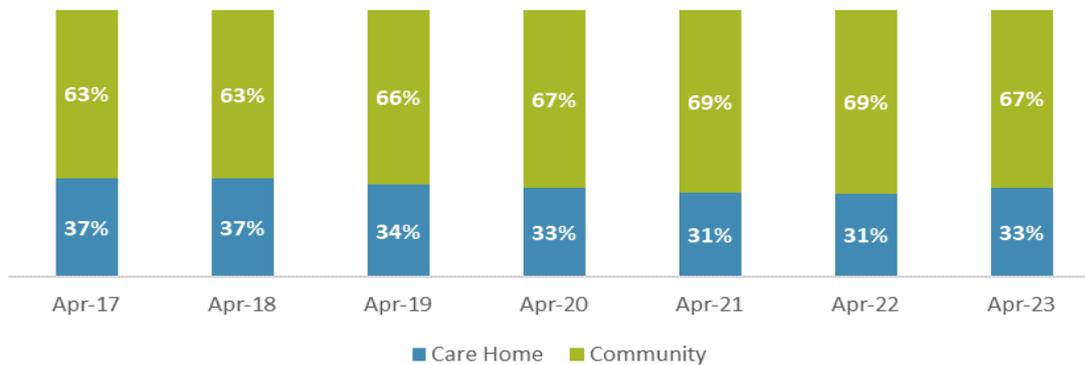


- Wirral
- Mean for North West (ADASS Region)
- ◆ Total for England

3.3 Additional Performance Highlights

- WCHC has delivered a reduction in the percentage of people within long term care since 2017 as a proportion of those with a Care Act eligible need. Joint working across the ICCHs, CIRT and CICC has resulted in individuals maintaining their independence within the community and with less reliance on 24-hour care.

Proportion of People Supported in the Community



- WCHC has facilitated the management of the referrals for Extra Care Housing (ECH) across Wirral. This has led to increase of individuals within Extra Care Tenancies of 112% from 2017-2023.
- Since 2017 WCHC has completed more than 2,500 BIA assessments thereby achieving and surpassing its contractual target.

4.0 Process of Transfer of the ASOC contract from WCHC to WC

4.1 WC and WCHC have managed the transfer in collaboration. Joint SROs from WC and WCHC were appointed and chair the Joint Project Board which has overseen the project against the agreed delivery plan and work of the seven workstreams:

- Workstream 1: Workforce (including Transition)
- Workstream 2: ICT/Digital
- Workstream 3: Data
- Workstream 4: Service Delivery & Patient Liaison
- Workstream 5: Finance
- Workstream 6: Communications
- Workstream 7: Estates

4.2 Progress against Key deliverables

As agreed in the plan, WCHC will provide all required information to the Council; to date this includes:

- The full TUPE list of staff to (including personal details) – full sits sent 7th February 2023 (requirement to send 28 days before transfer)
- Current staff structures of existing teams that will be affected by the TUPE
- Current base and desk allocation
- List of agency staff over complement
- Data sharing agreements
- Policies, procedures, and governance structures
- CPD offer
- Student placement commitments
- Detailed audit of data systems used by staff and file storage
- Full list of IT systems and asset information

WCHC and WC will continue to work in collaboration to:

- Consult with staff on transfer and any measures proposed by the Council and statutory letters to confirm arrangements
- Agree a plan for Transfer of payroll and Pensions to the Council including any actuarial assessments
- Plan for transfer of staff records upon Transfer date
- Develop joint QIA for the transfer of the service
- Agree joint and external communications plans
- Complete QIA/EIA for all affected services once the impact of TUPE transfer is understood
- Complete Data Sharing Agreements and associated Data Protection Impact Assessment
- Agree a post-transfer Memorandum of Understanding to support the maintenance of integrated working
- Build on the existing preparation for CQC commencing assessments of ASOC Services, transitioning responsibility the Council. WCHC has worked with two national improvement organisations on how to prepare for this inspection and is also a member of the Sector Led Improvement Board and one of the four national groups developing “What Good Looks Like” reference material on behalf of the Association of Directors of Adult Social Services
- There are no current risks regarding completion of activities with a jointly agreed plan for all actions to be addressed by 30 June 2023.

5.0 Summary

This report highlights the significant innovation and improvement in provision of social care services during the 5 years of the contract and WCHC's achievement in performance, efficiency savings and development as detailed in the Section 75 Agreement. This is evidenced by the improved performance and informed views of both the staff and services users, examples of which are included in the section 75 review report published in October 2022. WCHC has invested significantly in developing the current and future workforce and building integrated teams that can provide holistic personalised care.

WCHC have worked collaboratively with WC colleagues during the transfer process to provide detailed information and expertise to support the safe and effective transfer of the service back to WC. This means that the service will transfer back in a strong position well equipped to continue delivering high quality provision for Wirral residents and meet future requirements of CQC.

The transfer of staff will take place on 30th June 2023 – There are no project risks to the transfer plan due to robust mitigation identified at weekly joint project meetings.