



**Bath & North East
Somerset Council**

Improving People's Lives

Care Quality Commission

Self-Assessment

May 2024

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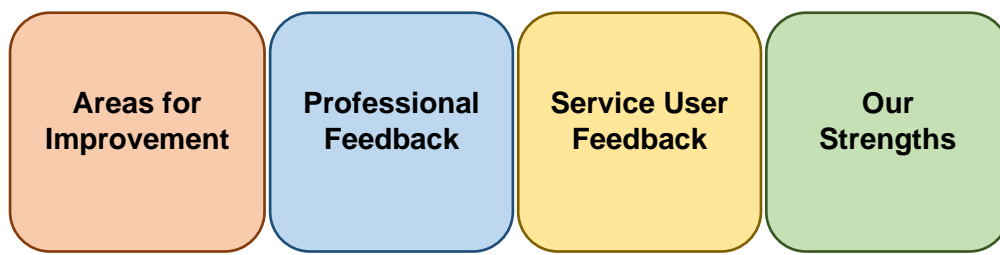
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Overview and Summary

A guide to Bath and North East Somerset Council's Self-Assessment

This self-assessment describes how we operate, our evidence base, and the difference that we make to the lives of B&NES residents. We have considered the areas of improvement that were identified in our Peer Review and through our current self-assessment and service plans. Our vision and strategy sets out how we will achieve the ambitions we have for the residents of B&NES. The golden thread 'Improving People's Lives' flows throughout this assessment.

This self-assessment begins by providing the reader with local context and highlights our corporate strategies. We then describe the services and support we provide to fulfil our statutory duties under Part 1 of the Care Act 2014, in order of the themes defined by the Care Quality Commission (CQC). There will be a series of key messages we want to highlight, broken down into sections:



This is the second self-assessment we have undertaken and we would like to extend our thanks to our staff, partners and people who we work with that have provided feedback on what we do well and our areas for improvement.

During a significant change period in Adult Social Care our staff continue to demonstrate how they make a difference to individual lives. We have focused on demonstrating this and on how well work is progressing to tackle our areas of improvement. We have assessed ourselves against the nine Quality Statements outlined by CQC, listed below. The Quality Statement number will be assigned to each area of our self-assessment where we feel we can demonstrate good outcomes for people, and where we have identified an area of improvement.

1. [Assessing needs](#)
2. [Supporting people to live healthier lives](#)
3. [Equity in experiences and outcomes](#)
4. [Care provision, integration and continuity](#)
5. [Partnerships and communities](#)
6. [Safe systems, pathways and transitions](#)
7. [Safeguarding](#)
8. [Governance, management and sustainability](#)
9. [Learning, improvement and innovation](#)

Our area, our people

Bath and North East Somerset is a thriving and diverse region with two thirds of the area lying in 'green belt'. We have two areas of outstanding natural beauty, 37 conservation areas and 6,408 listed buildings.

Home to over 193,000 people, B&NES is one of the least deprived authorities in the country, ranking 269 out of 326 English authorities. Nevertheless, there are significant inequality gaps in education, employment, and health outcomes for residents.

The population of B&NES is projected to increase by 8% from 2018 to 2028, from 192,106 to 207,919. The 65+ population is projected to increase by 15% over the same period and within the 65+ group, the largest increase is projected to be in the 75-84 age range (33%), followed by the 85+ age group (20%). In 2030, it is projected there will be 3,670 older people (65+) with dementia in B&NES which is an increase of 36% since 2019.

How do we meet the needs of our population now and in the future?

Our sole purpose is to improve people's lives. This lays at the heart of our [Corporate Strategy](#) and is supported by other policies that include giving people a bigger say.



We have a [People Strategy](#) this sets out the offer in B&NES we use this as one of the ways to attract and retain our staff, offering a strong culture that focuses on equality, diversity and inclusion.

The [B&NES, Swindon and Wiltshire Inequalities Strategy 2021–2024](#) provides a framework for how we work with our partner organisations to reduce health inequalities and aims to address inequalities across the life course, to include pregnancy, children and young people, adults and into old age.

This is supported by our [Health and Wellbeing Strategy 2023-2030](#) which recognises how important it is to take a whole system approach, including statutory health and care services. Our innovative approach to this is seen across the council to integrate people and place shaping strategies, where social prescribing pilot schemes have been rolled out, as well as initiatives to encourage community engagement and joined-up support.

How we prevent, reduce and delay the need for care and support for the people of B&NES

In B&NES our Community Wellbeing Hub (CWH) enables us to do this. The CWH is a partnership between the Council, HCRG Care Group and third sector organisations. The purpose of the partnership is to link health and social care services with the third sector, collaborating to prevent, reduce and delay residents need for statutory services. The partnership is governed through a partnership board, chaired by the local authority and attended by HCRG Care Group and third sector representatives.

We can evidence people receiving the support they need in the most efficient, effective, and timely way and working in collaboration with partners, voluntary organisations and residents leads to better outcomes for people.

A key function of the partnership is to refer service users to third sector organisations. The 'professionals' form, allows health and social care professionals, from hospital and the community, to refer someone to third sector support. Referrals are triaged via a referral management system, 'This ensures people access the most appropriate services for their needs. If there is a clinical or social care need, the CWH will refer to health and social care teams. The triage team can be contacted by residents via phone and email, and also self-refer.

The CWH collect data on the impact of their involvement with people to demonstrate how they 'improve people's lives. Follow the link [here](#) for an explanation of the partnership and its positive impact on residents and its innovative approaches to connecting across the whole system are detailed [here](#).

[3SG](#) is a Community Interest Organisation who are an active member of the CWH partnership and operates as an umbrella organisation. 3SG provides support and a voice for its network of charities, social enterprises and community groups across B&NES. This is funded through the Better Care Fund and has three clear aims:

- Co-ordinating third sector support to meet local authority priorities
- Supporting effective data gathering from the third sector regarding available activities/services and capacity
- Collaborating with the Live Well B&NES team to support signposting to third sector organisations

Whereas 3SG is a strategic networking and support tool for third sector organisations, '[Live Well B&NES](#)' is the mechanism for ensuring people, regardless of age, can find activities, services and organisations that meet their needs. As the council's Information and advice website, it brings together information and resources for people of all ages living across Bath & North East Somerset, providing support and signposting to enable our citizens to continue to live independently. Examples of support available include keeping safe, housing options, social leisure, work and learning, health and wellbeing, financial support, information for carers and transport.

Recent change to Adult Social Care Services delivered in B&NES

On 1 April 2024 ASC services delivered by HCRG Care Group, an independent provider organisation, since April 2017, transferred to B&NES with no disruption to service users. The transfer of Adult Social Work, Direct Payments Team and Learning Disabilities Day services along with the Supported Living service, Shared Lives and Employment Inclusion teams saw a total compliment of 237 staff transfer. The Adult Social Care directorate now represents 19.5% of the council's workforce.

Robust programme governance arrangements between the council and HCRG Care Group have ensured the transfer project remained on track with key milestones achieved through early identification of and mitigation of potential risk and issues with frequent assurance reports on progress to Corporate Management Team, Lead Member for Adult Services and Scrutiny Panel.

Upon transfer the ASC workforce have been welcomed by B&NES through a well-planned induction period which has included daily huddles for team managers with the Assistant Director Operations and the transfer project team to escalate and resolve any issues early on, induction sessions, planned mandatory training sessions, IT floor walkers at each base location and pairing with buddies' to support and provide guidance with new ways of working in B&NES.

Feedback from the transferring staff has included the warm and positive welcome received from B&NES, good levels of support to resolve operational issues and a well-planned welcome and induction programme.

On Thursday 4 April, Will Godfrey (Chief Executive Officer) and Suzanne Westhead (Director Adult Social Care) visited all staff across all sites to welcome the staff to B&NES and also visited the existing Adult Social Care teams within those locations.

The Assistant Director has met with 3 of our newly transferred teams and held 'What's working, what's not working' and our opportunities for the future sessions, these sessions will continue throughout May with all operational teams.

We have focussed on strengthening our data to ensure that reporting to our Data System Quality and Performance Group, which is chaired by Director of Adult Social Services, Suzanne Westhead, provides the assurance required by the DASS. This is further enhanced through team KPI reporting and oversight by the Assistant Director for Operations through to the Quality Assurance Board.

CQC Theme 1: Working with People

Our Strengths:

1. Well established integrated working in mental health (4)
2. Strong governance of integrated mental health services via a variety of performance meetings (8)
3. Good support for our ASYE social workers (9)
4. Strong focus on wellbeing and prevention (2)
5. Our commitment to provide 'exceptional' quality of care and support (4)

Introduction to Adult Social Care Teams

We know demand for Care Act assessments outstrips our current capacity and that the complexity of people we are working with has increased in acuity. This has resulted in a waiting list for all our assessment services. To keep people safe whilst they are waiting a full Care Act assessment, we have guidance for our staff in relation to how to risk stratify those people who are waiting. As part of our pathway for people and their carers we at every stage look at how we can prevent, reduce or delay by providing information and advice, short term services or link them in with Community Wellbeing Hub or other universal services.

Waiting times for social care assessment and reviews are regularly monitored by our Operational Management team and through our Quality Assurance Board. Our current overall waiting list across all our teams, including mental health is 128. This is broken down by team below.

Adult Mental Health Services and its impact in B&NES

The council has a long-established track record of integrated working in the provision of mental health services in B&NES alongside Avon and Wiltshire Mental Health Partnership Trust (AWP). This approach has been in place for over 12 years. AWP is a large trust covering 6 Local Authorities and is divided into two areas – B&NES, Swindon and Wiltshire (BSW) and Bristol, North Somerset and South Gloucestershire (BNSSG). B&NES is the only fully integrated service in Bath and North East Somerset, Swindon and Wiltshire. AWP's values of passion, respect, integrity, diversity and excellence match the council's own overriding purpose.

Our social care functions are delegated via a memorandum of understanding. This integrated approach is robustly governed by a series of performance meetings attended by both senior council and AWP staff. In addition, there is a weekly multi-agency Quality and Practice Review Group (QPR) to discuss people who need the support of multi-agency teams and whether we are supporting their needs in the right way. In addition, decisions related to S117 of the Mental Health Act are also discussed at this forum.

The following teams form the integrated Mental Health Services in B&NES:

Primary Care Liaison Service (PCLS)

The 'front-door' of mental health services mostly receiving referrals from primary care as well as allowing self-referrals. The team is split into adults of working age and older adult provision. It provides initial assessment resulting in either referral onto secondary services, the third sector or signposting to other support options.

The Recovery Team

An all age multi-disciplinary service for adults with severe and enduring mental health needs, providing longer-term assessment and support. This team completes the delegated functions on behalf of the council, including safeguarding and Care Act responsibilities.

Current waiting list for Care Act Assessment: 2

The Early Intervention Team (EI)

A multi-disciplinary team that provides support for those aged 14-65 who may be experiencing symptoms of psychosis for the first time. Following the assessment the team offers rapid support to individuals and their families for up to three years.

Current waiting list for Care Act Assessment: 0

Complex Intervention & Treatment Team (CITT)

A multi-disciplinary team that works primarily with older adults with both functional and organic mental health needs. The team fulfils the council's responsibilities under the Care Act.

Current waiting list for Care Act Assessment: 0

Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DOLS) Team

The MCA and DOLS service are two dedicated teams who focus on safeguarding the rights of vulnerable people by undertaking assessments for individuals who are subject to requests from care homes and hospitals for DOLS authorisations. In addition, the team offers advice and support to teams/services around the application of the MCA and promotes good practice, operational developments and relevant practice case law.

In September 2023, the team began to seek feedback from individuals who have undergone the process of a DOLS assessment. Information is collected from a short survey via either an information letter sent out by the team, web-link or QR code. So far the team have received 67 responses and this has helped show us what we are doing well and areas where further development is needed.

Current waiting list for DOLS Assessment: 621

'It was absolutely fab talking to someone who not only listened but heard what I was saying and put action in place! Brilliant listening skills from X and using both your gut feel and common sense too! Thank you'

Approved Mental Health Professional (AMHP) Service

The B&NES AMHP service is responsible for fulfilling the council's statutory responsibilities under the Mental Health Act. A daily rota system is in place that ensures an 'office AMHP' is in place each day who triages all assessment requests and passes on to the three duty AMHPs. This system ensures requests are prioritised effectively and delays minimised.

The team works closely and is co-located with AWP services such as the Intensive Team, Hospital Liaison Team and the local acute ward from where many of the referrals are received.

The team have been working hard to improve its engagement and feedback from those individuals who have had contact with the service as well as their families. Since September 2023, a short survey has been sent out to both those with lived experience and nearest relatives. Feedback can be sent via return of the paper copy or completing online via a QR code. In addition, team members have been attending the local ward OT meetings to offer time for patients to discuss their experiences, either individually or as a group, of the AMHP service. Any feedback received is collated monthly and, although limited from those with lived experience so far, will be used as a way of AMHPs to reflect on practice and role.

"Despite the sadness of the circumstances, I am happy that this process was carried out in a thorough and respectful manner regarding all those involved."

Integrated Working in Action

Our adult social care workforce plays an integral part in bringing a social perspective and a strengths-based approach to a medical model of care within our integrated mental health provision. They are strong advocates for addressing social injustice with the people who use services, supporting them to have equitable access the full range of services available. The proportion of people with mental health needs in employment in B&NES is 11% (April 2024). Specialist employment help is available for residents who are supported by our integrated mental health teams via the AWP Individual Placement Support (IPS) service who, in conjunction with care co-ordinators, help individuals find and stay in employment.

Our social workers have professional supervision from an experienced social worker, either via the ASYE framework or from a social work trained manager or senior practitioner. In addition, the Principal Social Worker for mental health chairs regular 'Social Work Forums'. Both approaches help in maintaining professional values and identity.

"Stepping into my new role, I now spend longer with people I work with, trying to gain a deeper understanding of what values they have, challenges they face and how relationships they have might be instrumental in their recovery"

How we are developing our mental health service transition process

We have recognised that young people with mental health needs do not receive an equitable offer from our transition workers, we are now recruiting a dedicated social worker to work with young people who are coming to the end of their involvement with CAMHS.

We have identified a number of young people who by improved information sharing any necessary joint assessments between adult mental health and children's services or CAMHS are identified in a timely manner. Planning meetings are now taking place with all agencies and the person or their representatives, to ensure that the young person knows what the next step in their journey is and can contribute fully.

Mental Health Recruitment and Retention

The Head of Service, in previous years, has supported the recruitment of Mental Health Social workers through the 'Think Ahead Programme'. In preparation for September 2024, we are working with AWP to collaborate on a joint initiative for the next cohort of 'Think Ahead' trainee social work posts. The PSW for mental health is exploring the possibility of social work apprenticeships starting in our mental health teams.

We continue to have difficulties in recruiting AMHPs and therefore we offered, as part of World Social Work Week, our practitioners had the opportunity to hear from our Mental Health Development Lead about the programme of support for existing social workers to train to become AMHPs. As a result, two social workers are now pursuing BIA and AMHP training.

Mental Health Co-Production and Feedback

The council's AMHP and DOLS teams regularly ask for feedback from users of their service. The DASS and the Assistant Director have both met with families whose loved ones were supported by mental health services and that were subjected to a safeguarding adults review. we have heard about their experiences beyond what has been written in serious case reviews and used that to inform our action plans.

The Head of Service for mental health, is now developing a focus group involving those with lived experience. The aim being to co-design a questionnaire about the impact that integrated working has on the experience of those receiving mental health care in B&NES and obtain feedback on social outcomes via an integrated service. In addition, the council's AMHP and DOLS teams regularly ask for feedback from users of their service.

xxxx reported she really benefited from discussion with an AMHP. Benefited from being able to have 1-1 and feel able to talk about negative experiences without consequences being posed upon her or judgement.

DOLS Waiting List

In the last 12 months B&NES received 1147 DOLS referrals. We continue to triage all new referrals according to the ADASS prioritisation tool. In addition, we also monitor all referrals awaiting allocation in our backlog to ensure their priority status remains unchanged. The process for this is detailed in our recently updated screening procedure.

Current waiting list for DOLS Assessment: 621

Adult Social Care

Our 'Front door' First Response Team & Social Care Assessment Service

Our First Response Team (FRT) and Social Care Assessment services (SCAS) manage all new contacts from members of the public, service users already receiving care and support, carers and professionals. New contacts to both teams all begin with a strength based conversation to ascertain the type of help people are seeking. This might be information, advice and guidance, or signposting with the aim of preventing, reducing and delaying the need for care.

Alongside the prevention offer the teams also provide an urgent duty response where necessary. The FRT and SCAS are co located with the Health Access Team, Virtual Ward, Reablement at the Care Coordination Centre (CCC).

The SCAS Team are active members of all multi-disciplinary team meetings, which include reablement, community hospitals and the Royal United Hospital. This service provides social care expert advice on the Care Act, Mental Capacity Act and discharge responsibilities for health colleagues leading up to the point of discharge from hospital or reablement, and following discharge where there is an identified need. The team work primarily in the RUH and the Community Hospitals and work with service users and carers to undertake Care Act Assessments, support planning and reviews following discharge. Ongoing support from Adult Social Care and reviews then go to the locality teams or the Annual Review Team (ART).

Current waiting list for Care Act Assessment: 2

Have a great weekend and thank you for all your diligent help. You have been really wonderful and so calm in such unsteady times for us as a family. Thank you

Annual Review Team (ART)

The Annual Review Team is responsible for carrying out annual reviews to support the long-term care management teams. The team works with individuals to review whether a persons outcomes have been achieved and what support will be needed over the next 12 months. The team use a proportionate review approach dependant on the needs of the individual and their preferred way of engaging with the review conversation.

Whilst they have a dedicated role, the team have been used flexibly over the last 12 months to support system pressures over winter earlier this year, where staff were redirected to support the Discharge to Assess process.

We have reviewed the current operating model for this team, processes across the service, and the important work this team carries out, we have identified there needs to be fewer 'handoffs' to other teams, particularly when more complex review activity such as Mental Capacity Assessments and DoLs applications need to be undertaken. As part of new operating model we will enhance the skill level in the team through training and development. This change for people will mean that service users will no longer need to tell their 'story' more than once.

75% of our scheduled annual reviews have been completed.

ART Team I've just had some lovely feedback from ***** husband. He told me that following your visit to them for her annual review you have "really got the ball rolling" which has led to them getting much more support which will be of great benefit to them both!

Bath Locality Team and North East Somerset Locality Team

For our people that require more complex or longer-term support, one of the two locality adults teams undertake assessments, complex reviews, safeguarding enquiries and case management. To ensure a timely response to service users, the team operates a 'duty system' and undertakes regular triage and risk analysis to prioritise allocation of work. The team keeps in regular contact with people awaiting an assessment or review to understand if their circumstances have changed and need a more urgent response. The resources across the teams are used flexibly to manage any variation in demand across the two areas. The Team works with all age adults in partnership across Health, Housing, Community safety and Safeguarding.

Current waiting list for Care Act Assessment: 109

Thank you so much for all the support you have provided not only xxxx, but myself. You have been very supportive and I take my hat off to you. This has made the whole process a lot easier and seeing xxxx smile again was great.

Specialist Social Work services

We have three specialist social work team, that are dedicated teams for people with a Learning Disability, Autistic people, and people with a hearing or/and vision impairment. There is dedicated resource within these teams that support young people who are in transition from children's services. Practitioners in the teams have access to bespoke training and support and are particularly knowledgeable about their specialism such as Autism and Deaf culture.

Current waiting list for Care Act Assessment: 15

Thanks xxxx! You have been brilliant – I think you're the best social worker I've ever had the pleasure of working with

Practice Forums

We identified through case reviews that there were inequities in how care and support needs were met across different service user groups. Practice Forums were introduced in November 2023 and are designed to support practitioners to practice in a safe, effective and legally compliant way. Practitioners have access to legal, specialist mental health and safeguarding advice. This ensures that services being provided to people with care and support needs is fair and equitable, the least restrictive option and best value across all services. All the people that are discussed at Practice Forum have had a case review by a Head of Service or the Assistant Director depending on the complexity of the individual. Advice and support is casenoted and recorded on the Practice Forum Form on Liquid Logic to help capture involvement from all professionals as part of the persons journey.

These themes are being used to support the continuing professional development of our workforce. After the implementation for the Practice Forums we understood there was confusion about the purpose of the Practice Forums as this was a different approach to practice. To support our staff and respond to this, we met with teams to hear their concerns. As a result, we amended the guidance for practitioners on what did and did not need to go to Practice Forum. It is important for us to listen to our workforce to and involve them as much as possible.

We have a data set that enables us to monitor all referrals to Practice Forum, whether the request was agreed or not. We use this data to identify themes and learning needs, all while giving us the ability to reduce inequalities, provide assurance of services being provided and to more accurately forecast spend. To date, over 500 people have been discussed at Practice Forum.

Direct Payments

Currently, 22% of service users who have social care funded support use a Direct Payment (DP) to pay for their care. The target is to increase this to over 26% by the end of 2024/25, bringing our performance in line with regional and national averages. We are working with our dedicated DP Officers and front-line practitioners to review our DP rates, systems and process, this will enable us to understand any barriers to the uptake of DP's and work to address these. We have produced new information that can be given to people to have them understand the opportunities and challenges to meeting their assessed eligible needs through a DP.

How we support Carers

Carers in B&NES are supported in a number of ways. We commission the Carers Centre to provide information, advice, guidance and support to carers. Alongside this, our social work teams undertake Carers Assessments, including parent carers, to offer advice and information and provide Direct Payments to carers to support

their own needs and wellbeing. Our Commissioning Team are in the process of co-producing a new Carers Strategy, which details what we do to support carers in our region. Our last strategy is now out of date, and we are keen to ensure the voice of carers is prominent in the design and delivery of our new strategy. To do this, we have met with carers groups to hear first-hand what they want to see in the future offer, and how this will lead to positive outcomes for them and the cared for people.

I just wanted to email to say how happy we have been with the support help and guidance shown to our family, about our son you took time to really listen and understand and also listened to our concerns as parents. Our experience of communication with people involved in *** care hasn't always been so positive so you are like a breath a fresh air and helped a family at a really tough time.

Our Occupational Therapy Service

Our Occupational Therapists support the people of B&NES with assessment and access to aids, adaptations and equipment. The team also works with NHS partners, housing providers and the council's Disabled Facilities Grant Team to provide assessments for adaptations and complex moving and handling assessment. There is a significant demand for OT support and there is currently a waiting list for residents requiring an OT assessment.

The team operates a duty triage system offering immediate advice, information and signposting to prevent, reduce and delay the need for longer term adult social care support. In September 2023 the waiting list in this service was over 230 people. In order to address the waiting list, people have been risk assessed and further advice given to them about community equipment options, and as a result of this our waiting list has reduced. We have responded to the increased referral numbers, complexity of referrals and vacancies within the OT team, through investing in three additional OT apprenticeships posts that are due to start in September 2024.

Waiting list for Occupational Therapy Assessments: 40

Waiting list for Occupational Therapy Assistant Assessments: 164

He was very informative on several aids and supports that I can receive. I was very pleased with all the support and information he gave me which I will follow up

Financial assessments

Our Care Finance Officers undertake financial assessments for people who receive care and support. Practitioners refer to the team to complete an assessment to determine if the service user is eligible for financial support from the Council. A financial assessment form is sent to the service user or their appointed representative. Once all the required information is received the service users

assessed weekly care charge will be confirmed. If they are above the upper capital threshold the service user will fully fund their own care and are advised to contact the council when their assets are nearing the upper capital limit.

If the service user lacks capacity to manage their property and finances and nobody holds Lasting Power of Attorney, the finance officer will ask if there is anybody suitable to apply for Deputyship to manage the service user's affairs. If there is no one suitable, then a referral is made to the councils Deputyship team who will complete the required Court of Protection documents and either apply for B&NES to be the appointed Deputy or request the Court of Protection appoints a panel Deputy.

Waiting list for Financial Assessments: 145

How we use technological innovation to support people

What we are doing to support service users in more innovative ways

We know that there have been many developments in the use of technology to support service users and carers. Technology Enabled Care (TEC) and embracing technological advancements to improve outcomes, has been demonstrated across many other Local Authorities and further implementation of this is high on the government's agenda.

At present, we predominantly use technology in our 'in house' care provision, both in terms of actual pieces of equipment and recording systems. For example, in our care homes, we have provided some residents with electronic cats, but we are introducing a digital care planning system whereby family members/ carers can see how their relatives are doing and what they have been doing.

The development of our 'TEC' strategy has so far involved meeting with neighbouring authorities to understand their TEC offer, what the different operating models look like, and mapping where we are on our journey for embracing and embedding TEC into our processes. During World Social Work week, we hosted a session on TEC and invited practitioners from across the service to share their thought on feelings about using TEC and any particular situations they felt TEC might be the solution to a problem. Developing our TEC offer continues to be high on our agenda, particularly to promote prevention and use of least restrictive care to people.

Data Systems

Adult social care operational activity is recorded on Liquid Logic (LAS). Adult Social Care has used LAS data in the development of POWER BI across the council to provide a single source of the depth and breadth of activity. All leaders and managers can access this to provide a day-to-day snapshot of current performance against our KPI's and national reporting requirements. In addition to this we know that the LAS system needs further development to ensure the correct functionality. We have developed an online portal for Safeguarding referrals. The outcome of which is detailed in the safeguarding narrative later in this self-assessment.

We have a further development program to ensure that our system is fit for purpose and can generate data that demonstrates how we are improvement trends for the outcomes for people. Improving our data quality will support making better,

evidence-based strategic decisions and manage risk and demand more accurately across organisations.

Areas for Improvement:

1. Continue to reduce the DOLS and OT waiting list (1)
2. Improved practitioners legal literacy and focus on outcomes (6)
3. Increase the number of people receiving a Direct Payment (1)
4. Improve the quality of our recording practice (6)
5. To embed the staff and service user voice groups into our Quality Assurance Framework (9)

Our LGA Peer Review that took place in September 2023, highlighted an opportunity to develop our information, advice and prevention offer for people who self-fund their care. As a result, we are now one of five Local Authorities working with Ernst and Young and The. This work will not devise a new ASC process but rather to extend our current ASC processes and use of tools and resources to further develop our information and advice offer and the ability for residents to complete self-assessments.

CQC Theme 2: Providing Support

Our Strengths:

1. Integrated Commissioning to support seamless person-centred care (5)
2. Robust and collaborative contract management and quality assurance (8)
3. A progressive and integrated approach to hospital discharge (6)
4. Strong impact from the Better Care Fund and Disabled Facilities Grant (8)
5. Coordinated and innovative approach to housing (3)
6. A strong and well-coordinated third sector (5)

Our Integrated Commissioning Team

In B&NES commissioning arrangements for a wide range of health and social care services are strategically led, managed, and delivered by an Integrated Commissioning team that is jointly funded by the Council and the BSW ICB. This commissioning function follows the all-age approach and mirrors the BSW Care Model and life cycle approach of Start Well, Live Well, Age Well and Dying Well.

A senior commissioning manager oversees each portfolio, responsible for commissioning officers who plan, buy, and monitor a range of NHS and Council services for children and adults with a variety of social, physical, and mental health needs. The team also includes a brokerage function that brokers and sources care for adults in both health and social care funded arrangements. The team collaborate with HCRG Care Group (the prime community health provider), wider ICB teams and the third sector as commissioners, and system and place shapers to ensure people experience joint-up timely care and make informed decisions about care that is right for them.

This ensures we can adopt best practice in collaborative commissioning, promoting, maintaining, and enhancing people's wellbeing and independence so that they are healthier, stronger, more resilient, and less reliant in the future on formal social care services. This is demonstrated in the key new areas of commissioning focus which include technology enabled care, co-production and collaboration with the third sector on strengthening our prevention offer.

How we increase diversity of care and support through market shaping

The B&NES footprint, similar to other areas, is a mixture of rural and urban areas. However, while there are small pockets of deprivation, up to 65% of care is being purchased by self-funders. To support people to maintain their independence public transport is being invested in, not just so that people can stay independent in their communities, but also to enable carers to reach out into rural areas.

In addition, B&NES Integrated Commissioning teams have invested in block contracts with providers to reach out into rural areas, increased the number of homecare providers by 25% in the last year, and published sustainable rates for care which can be used as a benchmark for self-funders, B&NES ICA and ourselves. This ensured that home care is readily available to those who need it.

The team invested in a contract with Community Catalysts, through the Better Care Fund, to enable the development of sustainable community micro-enterprises. In first year of the contract since May 2023, 130 people have used either Direct Payments or personal funds to receive person-centred support from 34 new micro-enterprises which has also created 26 local jobs.

"Going out amongst people in social situations has always caused me major anxiety. Lockdown was a relief, but starting to go out again was difficult. Snap and Stroll made socialising possible again. The focus on creativity through photography and development of friendships has made going out into the big wide world much easier and enjoyable."

A member of the Snap and Stroll Group (Micro-enterprise) in Keynsham

B&NES' housing team and commissioners from the Specialist Commissioning Team have been responsible for overseeing the construction and implementation of two new build Supported Living Developments at Sulis Down and Hygge Park, which are specially adapted to support adults with learning disabilities and autism. The developments are now completed, and individuals are identified with phased move in dates. This has enabled several individuals to move back to the area from different parts of the country.

Contract management and quality assurance

B&NES Integrated Commissioning teams hold the responsibility for contract managing care providers, working alongside the B&NES safeguarding team and the BSW ICB quality team to ensure residents experience good quality safe care. This is achieved through planned visits, engagements and collaborations working collectively and individually with providers. We work alongside B&NES Healthwatch who support us with independent visits and conversations.

We conduct specific enquiries as "You Said, We Did" exercises. As an example, in 2023 we looked at quality of discharge from hospital to care homes. Care Homes were able to tell us about the difficulties they experienced with discharge process, we worked through the concerns together, then repeated the exercise and showed that better communication and information sharing lead to improved continuity of care.

One of the care homes was inspected by CQC and rated as 'Requires Improvement' with complaints related to poor discharge practice and communication with relatives. In response, our commissioning team met with the manager, observed the running of the home and talked to residents, family members and staff. We brought in an advanced practitioner nurse to support the development of care plans, medication management and worked with both the home and the acute provider to improve discharge practice. After several months we were able to observe, evidence and discuss improvement with all involved. They are now rated Good in 3 out of 5 domains.

"My mum was moved from hospital to the home following a fall. Mum's physical care and mental wellbeing were paramount to all the staff. We cannot praise the team highly enough, especially two members of staff in particular, whose communication with our family members during Mum's stay, was above and beyond".

Collaborative commissioning and market engagement to ensure sufficiency

The Integrated Commissioning teams work to engagement strategies that support the Market Position Statement. These are due to be renewed in 2024 following publication of the revised [Strategic Evidence base](#). By regularly updating these commissioning plans we strive to remain data-informed and insight-led to ensure commissioned services reflect changes in need and market conditions. The Market Sustainability Plan links to the annual Fair Cost of Care exercises. Together, this set of plans guide the team and collaborations with our provider community to ensure there is an open dialogue about the resilience, sufficiency, diversity and capacity in the market.

Commissioning joined-up flexible care that supports choice and continuity

The Integrated Commissioning team played a lead role in setting up the Home is Best programme. Programme partners committed to work together to better understand the care journey of residents to ensure it is joined-up, with the aim of reducing the length of stay for people in hospital. In June 2023, we invested in Care Journey Coordinators (CJCs) whose role is to bridge the case management between being discharged from hospital and starting statutory care in community.

To support this initiative the operational team introduced the Urgent and Interim Plan process. This enables people to be discharged from hospital, into the community with care funded through the Intermediate ASC Discharge Grant. Introducing the UIP and CJC's created more capacity in the Reablement Service, to focus on therapy, and therefore this supported with flow out of the hospital. This happened as a time where the Trust was introducing other changes too, and so this contributed to the whole system approach to discharges.

The CJC's are managed by HCRG Care Group Care Coordination Centre and work closely with reablement, intermediate care, Continuing Health Care teams and social work teams. A review of the CJC's role by the "Home is Best" team has demonstrated that residents on this pathway receive personalised information, quick solutions to small practical problems, a timely response to care needs with a named worker overseeing their care and support until the Care Act assessment is transferred to the Social Care Assessment Service. Our investment in new ways of working has enabled people to not need long term care or manage on smaller packages of care and linked them in with the Community Wellbeing Hub for wellbeing support.

Commissioning support to workforce capability and capacity

BSW ICS have developed the [BSW Academy](#) that aims to focus on Leadership, Learning, Inclusion, Innovation and Improvement. In 2023 the BSW Academy has developed a Domiciliary Care Steering Group collaborating with the providers and

their representatives to improve data monitoring and develop action plans to improve the retention and recruitment of staff into the care industry to ensure there is sufficient provision. Alongside this, B&NES is also working with [Westco](#), [Proud to Care](#) and a [Clean Slate Ltd](#) working with people who have found themselves hard to employ. As a result, the turnover rate within the Adult Social Care independent provider workforce reduced from 19.2% in 2021/22 to 18.9% in 2022/23. This is lower than the national sector average of [29% in 2021/2022](#). We have also invested in further support to providers engaged in international recruitment and are using the Better Care Fund to invest in BSW Care Skills Partnership. This enables providers to engage with the Workforce Development Funding and deliver Registered and Aspiring Managers Networks to improve quality.

We believe that more consistency in care has positively contributed to better care outcomes. 81% of B&NES residents experience good or outstanding care in care homes and home care. To further increase that percentage we are currently investing in increased engagement with residents and people receiving care, supporting providers to draw more active support from provider associations, supporting workforce investment through the Market Sustainability and Improvement Fund and using the international recruitment fund to create both professional and community support to overseas employers and employees. Our Brokerage team will select providers (where there is a choice) with higher quality ratings, and we are also developing a framework for commissioning specialist care and support.

Partnership with ICB and third sector – making improvements so that more people get swiftly home after hospital and receive coordinated care

This most recent [Better Care Fund Plan](#) demonstrates the shared commitment across the BSW ICB and local authority to work together to improve the lives of B&NES residents. We have invested the Better Care Fund and the Adult Social Care Discharge Grants (both the Council and ICB element together) to bolster our existing mature integrated provision.

The 2023/25 Better Care Fund Plan focusses on:	Weekly impact since April 2023
<ul style="list-style-type: none"> • Improving discharge from hospital • Reducing the pressure on UEC • Supporting intermediate care • Supporting unpaid carers • Supporting housing adaptations • Supporting the development of an ICA Technology Enabled Care Strategy and delivering the strategy at locality level. • Supporting the transition of children to adults’ services. • Investing in prevention and early help 	<ul style="list-style-type: none"> • 60 more people are now getting home from hospital in a timely way • 44 people are now getting reablement in a community hospital rather than going straight to a care home • The Community Wellbeing Hub is supporting 120 people to get home from hospital or avoid hospitalisation with informal support • Most people now get home care brokered within 48 hours. • 2 people have benefitted from a virtual ward with aligned homecare

This has been particularly evident in the development of the Community Wellbeing Hub working closely with 3SG. The commissioning team developed the partnerships,

created business cases, including benefit realisation assessments, to secure the investment from system partners and ensure that this investment in third sector commissioned services can be collectively and individually monitored to ensure funds follow activity, and people needing support see sustained improvement in outcomes.

“They stepped up when I really needed them at the start of all of this and gave me a lifeline really. Without their support I think actually to tell you the truth, I was really in a panic and did not know quite what I was going to do before they actually stepped up and gave me the support” - Beneficiary of CWH

“We are developing a way of working that is opening up so many possibilities. In the past cracking the code for actively engaging with Adult Social Care, the NHS and Community Health was above daunting, just impossible. Now I can see that possibility of coming very soon and being a much needed solution for positive outcomes. Taking that leap of faith is key but I know that it was the best decision for us for sure”

Denise Perrin, Manager of Village Agents

Our commitment to provide exceptional quality of care and support - Annual Survey for residents 2023

Whilst our ASCOF data identifies satisfaction levels have been low for people receiving care and support, results for the recent annual survey for residents (April 2023), show a number of areas of improvement, with overall good levels of satisfaction, a positive impact and a better quality of life reported, which helps people to have more control over their life. Residents also said Adult Social Care support helped them to feel safer.

Collaborating and innovating with housing – making improvements so that more people can stay in B&NES independently in their communities

Led by the Director of Adult Social Care we have set up an Independent Living strategic conversation with providers. This is a precursor to a strategy being built on a review in 2023/24 and informed by a South West review of housing needs by the Housing LIN. In 2023/24 Housing and Commissioning have worked together to enable 10 B&NES residents to move into a new build home specially adapted to support adults with learning disability and autism, therefore reducing the number of younger people moving into registered care. We also developed a third Extra care provision for older people, enabling 52 additional people to remain in the community. In 2024/25 we plan to develop an innovative 16-home supported housing scheme for young people with autism in [Englishcombe](#) that aspires to transform people’s lives through high quality housing specially adapted to their needs.

New housing options sit next to opportunities provided through the Disabled Facilities Grant (DFG) outlined in the document [Decent Homes Policy](#). During 2024 the Integrated Commissioning team is working alongside Housing to in-house the Minor Adaptations scheme alongside the Community Equipment store to create a

cohesive housing adaptations and equipment offer into people's homes when they want to stay in their own home. Number of people waiting for DFG support for longer than 12 months reduced from 130 (2022) to 107 (2023) to 46 (2024). The time taken for Housing to complete a case has reduced from 85 weeks (2022) to 62 weeks (2023). We are ambitious that greater coordination of these services alongside OT and social work interventions will further reduce waiting time and improve people's lives.

Our 'in house' provision

We have accelerated improvements within the 'in house' provision through focused work to review and understand the direct delivery of services for homecare, extra-care, and care homes following a previous transfer of those services back into B&NES. Improvements in terms of safety, quality and financial sustainability have been delivered, allowing us to meet our duties in respect of provider failure, supporting the Integrated Care System to manage effective hospital discharge and responding to the need for urgent safeguarding admissions. There are good effective relationships across the system and positive feedback from relatives, people who use the services and professionals about [their experiences](#) reflected in the Healthwatch report. The service is now redesigning the use of 10 vacant beds to support older individuals with learning disabilities and dementia.

Areas for Improvement:

1. Increase the number of providers rated outstanding (4)
2. Reduce the number of people placed out of area (3)
3. Introduce more innovative ways of supporting people through the use of technology (9)
4. Giving residents a bigger say (3)
5. Improving integrated data (6)

Having co-produced a new Carers strategy, which is moving into delivery stage, we are investing further resources and BCF funds, working alongside Healthwatch, 3SG and the Community Wellbeing Hub, to increase participation and engagement across health and social care. This should ensure that the views of people who have or will be receiving care, have greater influence on the development of commissioning strategies and shape quality of services.

CQC Theme 3: Keeping People Safe

Our Strengths

1. Oversight of the end-to-end safeguarding journey for individuals and strategic lead for large-scale enquiries (8)
2. A Strong B&NES Community Safety and Safeguarding Partnership; and access to Professional knowledge, advice, support, and guidance from the safeguarding services (5)

Safeguarding and Quality Assurance Service

The Safeguarding and Quality Assurance Service is responsible for reviewing all referrals where there are concerns that an adult is at risk of abuse or neglect. The service operating model is underpinned by the six principles of 'Making Safeguarding Personal'. The service is responsible for undertaking safeguarding enquires, or we coordinate and seek others to undertake them on our behalf.

This could be done:

- Within the service
- Within the council's Adult Social Care services
- And/or by commissioned adult social care organisation (AWP)
- And/or by partner agencies, such as the police or the ICB.
- And/or by a commissioned care provider (Health and/or Social Care provider)

Throughout the enquiry, practitioners have access to support and case work supervision from the service which has the overall responsibility to support enquiries. This is done through activities such as chairing conferences, approving all closures and undertaking performance monitoring. Such activities provide assurance that safety is managed and monitored, that statutory objectives have been met and that the principles of 'making safeguarding personal' are embedded in practice. Positive feedback on our management of s42 enquiries has been received by both service users and professionals alike.

I thank you and the social worker for your intervention as I was lost on what to do to protect and keep X safe so as far as I am concerned thank you to both of you a good job done.

At the Data Systems, Quality and Performance Group, we identified concerns about the data accuracy we were reporting for safeguarding. As a result of this, we carried out an end-to-end review of service users' journey, where a SGA concern had been raised, right from the moment of first contact and up until the SGA referral had been closed. We had three objectives:

- Provide a single source of data
- Improve process that supported practice

- Improve outcomes for individuals

As a result, we have introduced a portal referral process, ensuring better data is captured at the beginning of the process. This will support better scrutiny and analysis of the adult journey through the safeguarding systems. Alongside the quantitative data that we currently capture, we are exploring broadening the qualitative data currently captured by our “Service User Feedback” activity. We will be using this to map the adult’s journey through a “*lived experience*” and “*expert by experience*” lens, this feedback will be reported to the Quality Assurance Board.

The Bath and North East Somerset Community Safety and Safeguarding Partnership

Bath & North East Somerset Community Safety & Safeguarding Partnership (BCSSP) is a multi-agency partnership developed in 2019. It allows us to look more holistically at how the needs of children, families, adults at risk and wider communities can be met. The development of the BCSSP fits with our corporate strategy, particularly around wanting to give people a bigger say and improving their lives. To this end, we have worked with partner agencies and co-produced public facing information to support adults in understanding the safeguarding process. BCSSP is committed to identifying and responding to the needs of vulnerable groups and communities in our area who most need our help and strengthening their voice in this process.

Safe transitions from Children’s Services into Adult Care

We have been reviewing our safeguarding triage systems and ‘front door offer’, including working with our Childrens colleagues to improve the transitional safeguarding, for all young people at risk. We have initiated this through a “Task and Finish group”, with the aim and focus of the group is ensuring information is shared easily between children and adult organisations.

We have reviewed The 2023 Safeguarding Adults Multi–Agency Policy in light of the findings/recommendations from Safeguarding Adult Reviews. Further work is needed to update the 2019 B&NES LSAB Multiagency Safeguarding Adult Procedures.

Performance scrutiny and management of transitional safeguarding activity is part of the Quality Assurance Framework and schedule of activity.

How we ensure safe systems of care and manage large-scale enquiries

Utilising the Large-Scale Enquiry (LSE) protocol we respond to any concerns where an organisation's structure, policies, processes and practices are leaving adults at risk of abuse or neglect. Working with partner agencies we have coordinated six LSE's since 2022, including responding to a police led modern slavery investigation into a domiciliary care provider. We worked with our in-house services to organise an immediate replacement of care to keep people safe.

Building upon the practice and knowledge gained in coordinating these activities, we have, with commissioning colleagues, partner agencies and providers, reviewed the LSE policy and have redesigned the Organisational Safeguarding Enquiry policy and procedures.

The safeguarding service supports practitioners through contributions to Practice Forums, Continuing Health Care discussions and multi-agency risk meetings. The safeguarding service is a partner in the 'Quality and Risk Oversight Group' which addresses any quality concerns for regulated providers.

Learning from reviews

The BCSSP developed a training programme for partnership staff in response to recommendations in learning reviews. The Practice Review Group (PRG) which is chaired by the Assistant Director for Adult Social Care Operations. This group oversees the process for Child Death Reviews and Safeguarding Adults Reviews (SAR) alongside ensuring that learning from other areas e.g. Domestic Homicide Reviews are brought forward for participation and learning.

The second highest reported source of risk leading to a SAR in 2022-23 was self-neglect. Four out of the six SAR's published on the BCSSP website relate to practice around self-neglect and the multi-agency risk management meeting (MARMM) process. We have undertaken an audit of MARMM processes and have conducted a review of the Self-neglect policy through the self-neglect working group on behalf of the BCSSP.

To improve the oversight and assurance of safety of people who are at high risk of self-neglect (hoarding) and to improve practice, a series of 7-minute briefings have been developed for staff across the partnership. In response to learning from reviews we have produced briefings on Korsakoff's syndrome, the Mental Capacity Act and individual SARs. These aim to ensure lessons are learned when people have experienced serious abuse or neglect.

Areas for Improvement:

1. Improving our data to capture outcomes (3)
2. Ensuring our processes support practice (6)
3. Enabling feedback from service users (3)

Community safety is a core priority for both Adults and Childrens services and the Director is responsible for chairing the Channel Panel to identify vulnerable people who may become involved with extremism and is a member of the Prevent Board.

We will continue to develop our individual-led approaches to safeguarding adults, improving awareness of safeguarding across all communities and partner organisations to ensure that people voices from marginalised groups are heard and responded to.

CQC Theme 4: Leadership

Our Strengths

1. Strong ASC leadership team supported by Executive, ICB and Political leadership (8)
2. Governance of our indicators of quality, performance, risk and financial management (8)
3. Well led organisation with a positive culture built upon mutual respect and values (8)
4. Financial management is strong, assured and supported (8)
5. Good relationships with statutory and system partners (5)
6. Committed to implementation of Equality, Diversity and Inclusivity corporate and service priorities (3)
7. Service planning demonstrates the Directorate is self-aware (8)

The B&NES Leadership Structure

The Executive Leadership Team comprises the Chief Executive Officer, Will Godfrey, with a team of three Executive Directors: Chief Operating Officer, Mandy Bishop, Resources and S.151 Officer, Andy Rothery, and Sustainable Communities is led by Sophie Broadfield. Suzanne Westhead is the Director of Adult Social Services and is responsible to the Chief Operating Officer.

The leadership team for Adult Social Care has been in place for over 2 years. The teams demonstrate compassionate leadership with a focus on delivering a quality service to those people who draw on care and support.

The Director of Adult Social Services with Assistant Directors for Operations, Integrated Commissioning and Strategy, Transformation and Governance make up the ASC Leadership Team and the team sets the tone and culture of ASC to ensure managers and staff are well informed, understand their role and responsibilities, are accountable for their decision making and know what exceptional care and support should look like.

The ASC management team have demonstrated resilience during 2023/24 through delivery of effective management of a large change programme for ASC services transfer from HCRG Care Group, a break-even budget and improved provider services. The leadership team also continues to contribute leadership into the integrated care space, with systemic change to improve lives through the Integrated Care Board (ICB).

The ASC leadership and management team are accessible, compassionate, and focussed on the delivery of good outcomes to B&NES residents. The Lead Cabinet Member for Adult Services, who is also the lead member for Public Health, demonstrates knowledge and ability to champion on behalf of ASC. The Children and Adults Health and Wellbeing Policy Development and Scrutiny Panel is chaired Cllr Dine Romero who was previously the leader of the council. The panel assist the

Council and Cabinet by giving comments on issues identified as “key decisions prior to decisions being made”. The panel have scrutinised the transfer of ASC services back to the council from HCRG Care Group, performance of Adult Social Care, de-registration of Charton House Residential Care Home and more recently the learning from the independent evaluation of the excess deaths in care homes in the second wave of Covid 19.

The ASC Leadership Team aspire to enabling people to live in the place they call home, with the people and things they love, in communities where they look out for each other and doing the things that matter to them. Our priority setting focuses on addressing service gaps, and as a leadership team we will not shy away from difficult issues and be accountable in our decision making to support individuals and their families.

The ASC Vision and Three-Year Strategy has been developed under the headings of Safe, Effective, Caring, Responsive and Well Led and states our 3 commitments to:

Internal/Practice Offer: We deliver a service focused on empowerment to deliver the support that’s required, and that’s right for the individual. We have a Quality Assurance framework for the ASC offer that delivers the highest professional standards and looks at all opportunities to collate feedback to monitor and manage outcomes.

External/Community Offer: We recognise the value of the communities, assets and resources available locally to support residents to be active and fulfilled citizens, including the vital role played by the Community Wellbeing Hub. We use our organisational influence to support the fair and equitable access to opportunities for residents.

Provider/Marker Offer: We are focused on the delivery of a quality provision that helps people to progress and to lead enjoyable and meaningful lives. We will be bold, ambitious, innovative and adaptable to support people to live the lives they want to lead.

Following the transfer of statutory and provider services back to the council from HCRG Care Group on 1st April 2024 this marks an exciting milestone to review and reshape our ASC offer for the people of B&NES in line with our ASC Vision and Three-Year Strategy. Our ambition is to ensure staff are empowered to show innovation and are supported and encouraged to embrace this opportunity to co-design and co-produce our new ASC offer to the B&NES population.

As a council there is a robust assurance process which the Director of Adult Social Care reports monthly to the Chief Operating Officer on compliance regarding

safeguarding, quality indicators and budget savings. Each quarter the Director of Adult Social Care will present the key risks on performance, budget, workforce and safeguarding to the Corporate Management Team.

ASC actively engages in a wide range of activity to promote and support the council's equality, diversity, and inclusivity agenda. For example, the DASS will chair the council's LGBTQ+ Group. Staff attend a range of inequalities groups and care experience is a protected characteristic approved by cabinet.

There is a strategic approach between the Director Adult Social Services and Director Children's Services on the transformation agenda for both commissioning and preparing for adulthood.

There is robust governance across ASC with forward planning for key decisions. This is evidenced through a dedicated risk register which is monitored and updated by the ASC management team with clear escalation to the corporate risk register and proactive engagement at the Health, Safety and Wellbeing Steering Committee.

The ASC management team meet monthly to scrutinise the financial performance of the directorate and monitor progress against the transformation saving plan. Feedback on service planning over the last two years from the corporate management team highlights the strength and clarity of priority setting with demonstrable evidence of our achievements.

The ASC Leadership Team have delivered safe, effective, and legal service outcomes for B&NES residents over 2022-2024. This has included, safely de-registering a care home, which will now be repurposed as a SEND resident school and improved the care homes and extra care housing services which returned to the council in 2020. The Director of Adult Social Services is accountable for monitoring compliance within the newly introduced Quality Assurance Framework. Robust challenge and scrutiny is welcomed by the ASC Leadership Team as a supportive and enabling process.

Our commitment to continuous learning and professional curiosity is strong and our strategic leaders are involved with several sector-led developments, including those with LGA as well as ADASS. The Assistant of Integrated Commissioning is the chair of the South West ADASS Commissioning Group. The Assistant Director Operations has recently completed a Peer Review at Wokingham Council. The DASS is the South West Regional Lead for Workforce and has led on domiciliary care staff workforce modelling and joint themes for systems workforce gaps between the NHS and Adult Social Care. These regional leadership roles help the senior management team remain updated with changes in practice across the sector and influence the redesign programme for ASC to help improve services for our residents. There is a relentless pursuit of an inclusive, diverse, and equitable offer across services and into provider services but there is still more to do on representation of the community and the population at the most senior level and recognised as an area for improvement for ASC.

Low number of complaints across Adult Social Care

There has been a reduction in the number of complaints across the whole of adult social care from 73 in 2022/23 to 66 in 2023/24.

During 2023/24, 17 complaints were upheld. Where there has been fault on the part of the service, the complainant is given an apology and remedial action is taken wherever possible to rectify a situation or rebuild trust with the service. As we were preparing for the transfer of adult social care and learning disabilities services from HCRG Care Group to the Council, from January 2024 the Council took responsibility for issuing all complaint responses on behalf of HCRG Care Group. This was done to ensure continuity for complaints which had not been concluded by 31st March 2024.

In 2023/24 four cases were considered in by the Local Government and Social Care Ombudsman (LGSCO). The LGSCO decided not to investigate 2 of the complaints, one was closed as 'Fault but no injustice' and the fourth remains open to the LGSCO.

The Complaints and Data Protection Team is the contact point for all MP and Councillor enquiries relating to an individual service user. All enquiries are recorded and monitored in the same way as complaints.

The full Adult Social Care Complaints and Feedback Annual Report for 2023/24 is due to be produced by end June and this will be reported at a scrutiny panel by September 2024. We know that for this period 2023-24 we have one case upheld by the LGSCO pending a final response following our acceptance of the ombudsman recommendations.

Adult Social Care Leadership Feedback from Peer Review

"The peer challenge team commented on how the Chief Executive had articulated a clear purpose for the council and is a valued leader alongside the corporate leadership team. An example that has resulted in clear outcomes for some of B&NES most vulnerable residents has been the enhanced focus on inequalities and the impetus of this area in the Corporate Strategy."

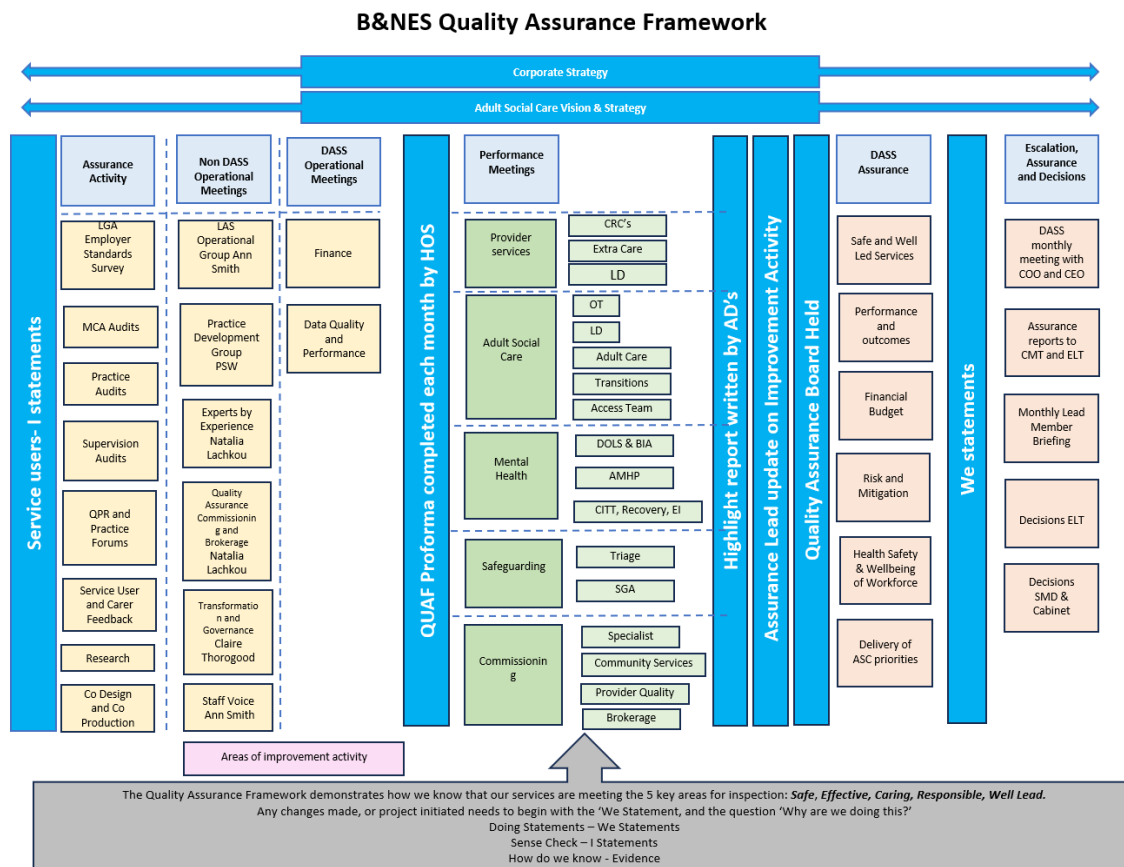
"The Senior leadership team in Adult Social Care are a new team and are seen as ambitious, knowledgeable, visible and accessible. Benefits of the additional investment into the team are already tangible in terms of delivering on ambitions and improvements."

Embedding the Quality Assurance Framework to deliver effective outcomes and robust performance management

On the transfer of services from HCRG Care Group all ASC statutory functions came together on 1st April 2024. In anticipation of this change the ASC Leadership Team have developed, with front line staff, a new Quality Assurance Framework. While there have been a number of service developments in relation to quality assurance,

the ASC Leadership Team recognised that more work was needed to clearly define the standards of practice expected and have in place reporting mechanisms to oversee and measure practice and the difference it makes for B&NES residents.

The Quality Assurance Framework reporting mechanisms have been designed with engagement from Heads of Service and Service Managers with feedback incorporated from presentations of the new approach from the ASC Management Team. A key element of the Quality Assurance Framework is the robust progress monitoring and assurance reporting of our areas for improvement.



The Quality Assurance Framework in setting out how we monitor, analyse and evaluate our practice will enable us to effectively demonstrate that not only are adults and their carers are being supported and safeguarded but that we are meeting local and national standards and that the feedback from people with lived experience and their carers is shaping our services.

Giving people a bigger say through co-production

2023 was the year we started to develop our approach to involving residents in the co-design and co-production of key service plans and strategies, picking up some of the themes raised in the satisfaction survey seen earlier. B&NES Council's Corporate Strategy confirms our commitment to 'giving people a bigger say' as one of our two core policies. This gives us a clear mandate to build our co-production approach on. Examples of this include co-production of the commissioning of new purpose-built supported living services for adults with learning disability and autism, growing local micro-enterprises with support from Community Catalysts as our

strategic partner, co production of the carers strategy and embedding bespoke care and support for individuals with complex needs.

The council is committed to making co-production a core part of all planning and review processes. Building on existing mature culture of collaboration, B&NES development of co-production approaches started with Adult Social Care wide investigative meeting, which has led to a programme of co-production projects and established a 'Let's Talk about Co-production' community of practice for social care staff. In 2023 we engaged with 383 carers to co-develop the Carers Strategy as a test and learn project for developing and embedding the coproduction process. This project will continue in 2024 to co-design and co-deliver improvements in two areas of focus identified by carers. We have also streamlined opportunities for recording feedback from people who draw on social care into our case management system and quality assurance processes.

More recently Adult Social Care and Housing led the engagement with local people on the planning application for 18 bungalows for people with complex needs. We employed a design group who specialize in building environments that transform people's lives and have experts with lived experience on their team.

We support Swallow as a third sector organisation, to enable people with learning disabilities to have a greater say in how they lived their lives and their services. In 2024 Swallow have been awarded Charity of the Year by Somerset Business Awards.

Furthermore, we are strengthening the voice of experts by experience and frontline staff in shaping social care law, policy and practice through research. We are collaborating with the University of Bath and the University of Bristol to co-evaluate experience of admission under the Mental Health Act for people living with dementia involving our AMHP service and experience of working with the Care Act for mental health social workers in integrated mental health teams.

To accelerate the work of Equality, Diversity and Inclusivity

Adult Social Care leaders will communicate and be knowledgeable about inequalities of service provision to diverse groups in a meaningful way. This is a priority focus within the service plan for 2024/25 and we have identified performance measures to improve inclusivity across a range of communities.

The Directorate will drive forward the Equality Diversity and Inclusion (EDI) agenda so as Adult Social Care can further utilise their influence and experience to deliver support to the health and care market about challenges around EDI.

As a senior leadership team, we will promote equality, diversity and inclusivity and communicate the importance of managing unconscious bias throughout the management team. We will develop a strategic training plan for ASC staff to ensure confidence in promoting EDI in their professional role when working with individuals and carers who draw on care and support, and in turn this will help facilitate an inclusive work culture.

The DASS leads across B&NES, Swindon, and Wiltshire (BSW) on behalf of the councils to support the international recruited workforce with pastoral care. In partnership with Wilshire Care Association support is given to international staff who work for care providers in the three localities.

Focus on legal literacy to deliver responsibilities under the Care Act

Using the approach set out in Research for Practice Legal Literacy Change Project we understand that legal literacy begins with sound knowledge of relevant legal rules. We will be improving legal literacy within the service by focussing on the three key components of sound knowledge of the legal rules and understanding of their relevance to practice as this enables people to 'do things right', strong engagement with professional ethics as this enables people to 'do right things' and respect for principles of human rights, equality and social justice as this enables people to bring 'rights thinking' to decision making.

Our Mental Health and Safeguarding teams, with the support of our legal colleagues, will continue to offer bespoke training as identified by individuals, teams and through our Quality Assurance Framework.

Refresh and implement the Preparing for Adulthood Pathway

The Children's and Adults teams are on an improvement journey for Preparing for Adulthood. Young people with learning disabilities and autism receive a timely and well-co-ordinated service. Our revised offer will ensure that all young people who are following a Preparing for Adulthood pathway receive an equitable offer. We have recognised that teams working in silos across both Children's and Adult directorates does not deliver the best outcomes for individuals, therefore we are working on options for a combined 16-25 team.

It has been identified there is a lack of local provision for young people moving into adult services. We continue work collaboratively with commissioning and housing colleagues and ASC has supported and engaged in the development of the 10 year strategy with our housing association strategic partner.

Embed the council's new commissioning model

A new commissioning approach is in development for the council and the ICB. The councils future commissioning hub will be an all age approach with a focus on strategic commissioning, quality assurance of the provider market and robust commercial management. This is a significant workforce change programme with the expectation that most of the services commissioned on behalf of the council will be the responsibility of the commissioning hub within the ASC Directorate.

The ASC commissioning service plan for 2024/25 has identified as a key priority the development of strategies for carers, co-production, independent living as well as autism and neurodiversity.

Increase of the technology offer to individuals, their carer's and our staff

The ASC commissioning service plan for 2024/25 has identified as a key priority the development of technology and digital transformation strategy for enabled care.

The Assistant Director Operations with the support from the Assistant Director Strategy, Transformation and Governance are working with the Department of Health and Social Care and Ernst & Young as one of 5 Local Authorities developing a toolkit of resources that can be used to provide support to Local Authorities to streamline their Adult Social Care assessment through new operating models. The aim is to bring together the best practice tools and resources from all Local Authorities into a single resource that can be used as a suite of technical resources that best meet the needs of a Local Authorities individual population.

The ASC commissioning service plan for 2024/25 has identified as a key priority the development of technology and digital transformation strategy for enabled care.

Areas for Improvement

1. Embedding the Quality Assurance Framework (8)
2. Giving people a bigger say through co-production (3)
3. To accelerate the work of Equality, Diversity and Inclusivity (3)
4. Focus on legal literacy to deliver responsibilities under the Care Act (1)
5. Refresh and implement the Preparing for Adulthood pathway (1)
6. Embed the council's new commissioning model (8)
7. Increase of the technology offer to individual, their carer's and our staff (9)

This self-assessment is an honest and open reflection of the way we operate in B&NES with a relentless focus on our residents. We are ambitious for people who draw on care and support to enable them to lead the lives they want to lead, no matter their level of need. We have described our systems, processes and robust governance to help deliver our Adult Social Care services. We have clearly narrated what our areas for improvement are, how we know how we are doing and some of the actions underway to address them as a learning council that is striving for improvement.

We are in the unique position of our Adult Social Care services having returned to the council and we therefore want to ensure our Adult Care Statutory functions now come together.

We will continue with our improvement plans and assess our progress and the outcomes we are delivering. To end, there is much great work being done already, but we know there is more we can do, to continue to improve people's lives.