

Meeting: Torbay Council Cabinet Meeting

Date: 20 April 2021

Wards Affected: All

Report Title: Adult Social Care Front Door Redesign

Decision to be made at April Council Cabinet meeting

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1. Purpose of Report

- 1.1 This paper outlines the proposal of the *Adult Social Care Improvement Plan – Future Front Door* project to have a single route of referral for all adult social care requests, have one clear picture of demand and capacity for commissioned services, enabling statutory bodies to make often difficult, but well-informed decisions around where to prioritise our commissioned services, have a deeper connection to our community and further support the established integrated approach of health and social care.
- 1.2 There are a number key contextual elements that need to be considered when designing the future front door for Adult Social Care in Torbay. Integration of health with adult social care brings about challenges and opportunities, both for the Council and NHS. Demographic pressures in Torbay mean that if Torbay Council and Torbay & South Devon NHS Foundation Trust 'did nothing' in relation to managing demand and transforming services, the services would not be sustainable in the future.
- 1.3 Additionally, bringing together two areas, Torquay and Paignton & Brixham, with associated differing practice, has highlighted the need to standardise practice, but there is also an opportunity to radically transform the relationship with residents in a way that promotes wellbeing and independence. The variation in demand and performance illustrates the opportunity to adopt best practice, both internally across Torbay and from wider health and social care system.
- 1.4 The proposal:
 - 1.4.1 A new Adult Social Care and Community Front Door with Torbay Community Development Trust, utilising their current helpline system and diverting the ASC telephony system to the new Community Front Door. This will be the first point of contact for all ASC enquiries where wellbeing conversations will be supported.

- 1.4.2 Within Torbay and South Devon NHS Foundation Trust, a new virtual Assessment Team, and later a physical co-located team which brings both the Torquay and Paignton & Brixham teams together under one bay-wide team.
- 1.5 The proposed changes will support realising the actual cost in Torbay, collaboration of capacity, skills, knowledge and potential in individuals and communities through an asset and strength based approach, bridging the future aspirations of the adult social care and the community to the present day, a consistent and clear process and a positive experience of community and adult social care working together. These will be quantified as part of the full Front Door Implementation Plan.
- 1.6 There are three key elements to the future front door model that will meet the overarching objective of an effective adult social care front door for finding solutions for people and their problems where impact is demonstrated in terms of diversions from formal care and delivering good outcomes.
 - 1.6.1 Engaging early and prevention which builds and supports community empowerment and resilience.
 - 1.6.2 Rationalise, standardise and improve communication and contact channels. A streamlined, intuitive and digital and face-to-face front door will allow customers to self-serve for information advice and guidance and shift channels of communications wherever possible. Accessing guidance and real-time information, having good outcome based conversations, relating to their services in Torbay is vital to support Torbay communities.
 - 1.6.3 Our Care Act assessment approach need to be focused on supporting our residents through a strength-based conversation model and develop an outcome-focused support package which can be reassessed alongside the Community Front Door in the future.

2. Reason for Proposal and its benefits

- 2.1 We want Torbay and its residents to thrive.
- 2.2 The current front doors do not systematically promote independence for residents, and there are more opportunities to prevent, reduce and delay the demand on adult social care than are currently undertaken.
- 2.3 Supporting and enabling community activities through coordination and signposting to encourage participation, limiting social isolation and encouraging independence, contributing towards improved societal wellbeing as a whole. This proposal seeks to reduce need and therefore reduce or delay demand for social care services as part of the Care Act 2014.
- 2.4 By connecting to local community based support, residents could remain independent for longer, reducing their need for formally provided statutory adult social services. This will support earlier identification of required investment in commissioned services, using data and insight, alongside a more rounded understanding of need, TSDFT and Torbay Council will help to shift service delivery away from more costly interventions.

- 2.5 We will be support good assessments in adult social care and be able to rapidly work with those who are in crisis or low level no complex needs. Enable resource in the complex and long-term teams to have good quality information about the person, continue to have consistent strengths-based conversations and support planning by well trained staff, work alongside the ASC Community Front Door to ensure that assessment does mean 'statutory-only' package and we have understood the best outcome for the individual.
- 2.6 The proposals will help us to deliver an ambition by having the following areas of focus. Community empowerment and resilience, that supports a thriving community and voluntary sector for residents to be involved, consistently engaging early, in a way that prevents and delays demand, and maximises independence, community based customer contact including digital, and encouraging self-service. The aim is to achieve assessment which is proportionate in its approach.
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3. Recommendation(s) / Proposed Decision

- (i) That the proposed community-based Adult Social Care and Community Front Door model be approved; and
- (ii) That the creation of a TSDFT virtual assessment team to allow performance and data to be measured consistently, streamlined and rationalise processes in the newly formed bay-wide integrated team followed by a co-located bay-wide Assessment Team be approved.

Appendices

Appendix 1: Adult Social Care Front Door Redesign proposal.

Background Documents

Supporting Information

1. Introduction

- 1.1 There are inconsistencies across the front door, and some good practice across the services. Performance data is not currently readily available in a way that allows for comparison across the adult social care zones in Torbay. The multiple front doors do not systematically promote independence for residents, and there are further opportunities to prevent, reduce and delay the demand on adult social care which are not being realised.

2. Options under consideration

- 2.1 There are a number key contextual elements that need to be considered when designing the future front door for Adult Social Care in Torbay:
- 2.1.1 Integration of health with adult social care brings about challenges and opportunities, both for the Council, NHS and for adult social care.
- 2.1.2 Bringing together two areas, Torbay and Paignton & Brixham, with associated differing practice, has highlighted the need to standardise practice, but there is also an opportunity to radically transform the relationship with residents in a way that promotes wellbeing and independence.
- 2.1.3 The discrepancies in demand and performance illustrate the opportunity to adopt best practice, both internally across Torbay and from wider health and social care systems.
- 2.1.4 Torbay, like many adult social care services, can be broadly characterised as having two front doors:
- A front door that responds to requests for help from the public, from our local community, from relatives and community based services including those from primary care and nurses.
- A front door is from the TSDFT acute hospital that is covered in the next section.
- 2.1.5 For adult social care in Torbay, understanding who visits directly the front door for help, and the communication channel they choose to make the request, whether over the phone, face-to-face or web-based are vital in managing the demand. The majority of the requests for help through this front door will not require an immediate social work assessment but may provide an indication of future needs which we are currently not measuring advantageously.

- 2.2 Demographic pressures in Torbay mean that even if Torbay Council and Torbay & South Devon NHS Foundation Trust 'did nothing' in relation to managing demand and transforming services, the adult social services would not be sustainable going forward.

3. Financial Opportunities and Implications

- 3.1 The ASC front door will be delivered from existing resources, the intention being to redistribute recurrent resources to support community and voluntary sector work.

- 3.2 The following indicators of success will be monitored in the new Front Door Model:

Number of initial calls to adult social care that are resolved with information/advice/guidance (IAG)

% of initial calls to adult social care that are resolved with information/advice/guidance (IAG)

Number of Community Communication Channel available and their percentage of use

Number of Community Front Door appointments available/used in period

% of available Talking Point appointments attended by Customer

% of Reviews that result in reduced level of formal care & support (rolling 12 months)

Number of people who have approached Community Front Door for help with adult care who go on to receive a full social care assessment

Number of people who have received a full social care assessment who go on to receive a package of care

Percentage of people who at the point of discharge have received Community Front Door input within 48 hours.

The proportion of people in any one week waiting for a service that has been agreed by the patient and the multi-disciplinary team.

Number of people who are delayed from discharge when they are medically fit

The proportion of all people who are discharged from hospital with no formal care services after 2 weeks and 6 weeks

4. Legal Implications

- 4.1 When designing the future front door for adult social care, the statutory guidance and ethos of the Care Act 2014 is being followed. If the proposal is agreed, the Front Door Model will need to be sighted and agreed by both Torbay Council Legal Team and the TSDFT Safeguarding Committee for assurance, along with any operating procedures, policies and process.

5. Engagement and Consultation

- 5.1 A considerable amount of work has gone into understand the internal processes of the current model in the NHS Trust. If the proposal is agreed, the next stage will be to begin engagement and dialogue with residents of Torbay and key system partners to further develop plans going forward.

6. Purchasing or Hiring of Goods and/or Services

- 6.1 Where this proposal requires the procurement of services or the provision of services together with the purchase or hire of goods we will consider the Public Services Value (Social Value) Act 2012 as per our legal duty. To ensure every opportunity is considered including those outside the scope of any procurement, should there be one. We will be linking these benefits to the Community & Corporate Plan, and the TSDFT strategies for the Community, and be reviewed as part of contract performance reviews.

7. Tackling Climate Change

N/A

8. Associated Risks

- 8.1 Significant risks if the proposal is not implemented:

- 8.1.1 We will fall short of providing the right support that Torbay residents need to enhance their wellbeing and improve their connections to family, friends and community, and to ensure that Torbay residents are in control of their care from initial enquiry.
- 8.1.2 We will reduce our capability as statutory providers to promote independence for residents and fulfil our obligations under the Care Act 2014, in terms of prevention, reduction and delay into formal adult social care.
- 8.1.3 Full realisation of the Community Led Approach and strength/asset-based approach will not be achieved.

Equality Impacts

| 9. | Identify the potential positive and negative impacts on specific groups | | | |
|---|---|--|--------------------------------------|----------------|
| | | Positive Impact | Negative Impact & Mitigating Actions | Neutral Impact |
| Older or younger people | | This proposal is designed to have a positive effect on older people, those people with caring responsibility and people with a disability. This is via: Improved communication and contact channels, increased prevention, reduction & delay in formal adult social care services Efficient access to our Integrated and multidisciplinary health and social care specialist teams | | |
| People with caring Responsibilities | | | | |
| People with a disability | | | | |
| Women or men | | | | x |
| People who are black or from a minority ethnic background (BME) <i>(Please note Gypsies / Roma are within this community)</i> | | | | x |
| Religion or belief (including lack of belief) | | | | x |
| People who are lesbian, gay or bisexual | | | | x |
| People who are transgendered | | | | x |

| | | | | |
|------|---|---|--|---|
| | People who are in a marriage or civil partnership | | | x |
| | Women who are pregnant / on maternity leave | | | x |
| | Socio-economic impacts (Including impact on child poverty issues and deprivation) | | | x |
| | Public Health impacts (How will your proposal impact on the general health of the population of Torbay) | Supporting and enabling community activities through coordination and signposting to encourage participation, limiting social isolation and encouraging independence, contributing towards improved societal wellbeing as a whole | | x |
| 10.. | Cumulative Council Impact (proposed changes elsewhere which might worsen the impacts identified above) | None currently identified. | | |
| 11. | Cumulative Community Impacts (proposed changes within the wider community (inc the public sector) which might worsen the impacts identified above) | None currently identified. | | |