

TORBAY COUNCIL



Torbay and South Devon
NHS Foundation Trust

Local Account Summary

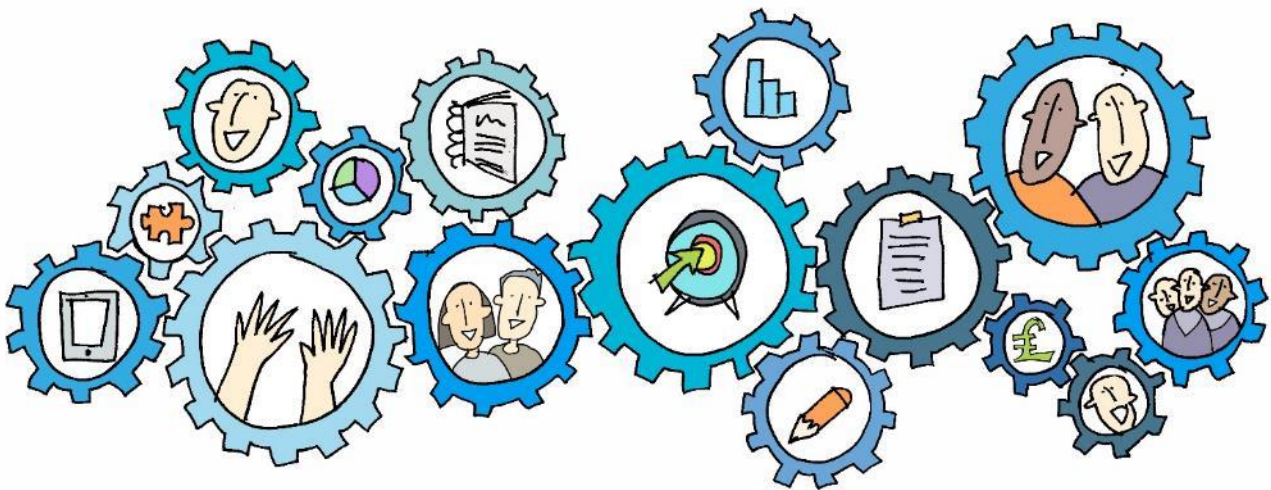
2021-22



Contents

Foreword	4
Councillor Jackie Stockman: Cabinet Member for Adult Services and Public Health	4
Sir Richard Ibbotson and Liz Davenport, Chair and Chief Executive of Torbay and South Devon NHS Foundation Trust.....	5
Jo Williams: Director of Adult Social Services	7
The Vision	8
Why did we need an Improvement Plan?	8
Engagement and Co-Design	8
Adult Social Care – Torbay’s Future	10
The Population of Torbay	11
If Torbay was a village of 100 people.....	12
Our adult social care people and teams	14
Progress during 2021/22	16
Focus on front door gateway and flow.....	17
Performance in 2021/2022	18
Annual Survey	20
Principal Social Work Annual Review	22
Audit.....	22
World Social World Day.....	22
Policies	24
Training	25
Core Capabilities Framework for People with Autism and Learning Disabilities.....	25
Providing Safe Quality Care and Best Experience	26
Focus on Mental Health	26
Focus on the Transition team	29
Focus on Learning Disability	32
Focus on Autistic Spectrum Conditions and Neurodiversity	35
Focus on Extra Care Housing	37
Focus on the Homelessness Reduction Act 2017	38

Focus on carers.....	39
Focus on Safeguarding Adults	41
Improved Wellbeing Through Partnership Working	46
Focus on Supported Living Provision	46
Focus on Enhanced Intermediate Care	47
Focus on the Torbay Voluntary Sector and Adult Social Care.....	48
Focus on Technology Enabled Care Services (TECS).....	49
Focus on Health Connect Coaching.....	52
Financial Position	54
Looking after Information.....	57
Healthwatch response to the Local Account.....	58
Appendix 1 – At a Glance – Performance Data	Error! Bookmark not defined.
Appendix 2 – Adult Social Care Outcome – Key Performance Activity	65





Councillor Jackie Stockman: Cabinet Member for Adult Services and Public Health

We are celebrating some great work in health and social care this year, including some exciting innovation and a strengthened commitment to communities. This is despite the ongoing pandemic coupled with the very real, financial challenges being experienced by households and partner organisations across the whole of Torbay and the wider Devon area.

As demand for our adult social care services has increased significantly during 2020, we are continuing to work with an alliance of community and voluntary organisations to help us support people to remain independent in their own homes.

As well as all the activity which is detailed within this Local Account, we are supporting projects to help people manage debt, digital exclusion and food poverty. We are working hard to support residents in financial hardship and to provide extra accommodation for those in immediate need and fleeing domestic abuse.

We continue to work in partnership with Torbay Community Helpline to ensure we help as many people in need as possible. The helpline offers advice, information and referrals to a whole range of support in the community. We have worked with partners to prevent and respond to Covid-19 outbreaks in care homes and other settings across the Bay such as schools and businesses.

Our plans for the coming year include developing more extra care facilities for local people and continuing to support people with their mental health. Our partnership approach is at the heart of all that we do and the development of the Torbay Community Helpline is just one example of this. We will also be funding the Community Builders so that they can continue their excellent work in neighbourhoods across the Bay.

There remains a solid and real commitment to the people of Torbay from the Council and all of our partners and we will continue to work together to ensure quality is at the centre of everything we do.

Thanks to everyone who works in health and social care, both paid and unpaid.

Sir Richard Ibbotson and Liz Davenport, Chair and Chief Executive of Torbay and South Devon NHS Foundation Trust



We want to start by saying a huge thank you to everyone working in, and supporting, adult social care in Torbay. Whatever your role, whether paid or unpaid, you are helping us make a real difference and we are deeply grateful for your commitment and your continued efforts to support our shared vision for thriving communities where people can prosper.

Two years of the pandemic has had a significant impact on all of us and we know that those living in our most deprived coastal communities have seen an increasing gap in health inequalities. Our established partnership between health and social care services, now moving into its eighth year, has provided a solid and enduring foundation on which to build and develop further as we strive for better health and care for all.

Our Adult Social Care Annual Local Account gives us the opportunity to reflect on the successes and challenges of the past year in adult social care while recognising the progress we have made and identifying areas for further development. It supports us to share with you how we have spent our money and what the people who have used our services have said about them.

Our three-year Adult Social Care Improvement Plan makes sure that we are learning the lessons both from what has gone well and what could have been better and helps to embed the improvements we have made.

We passionately believe that the best way to care for people is by focusing on what matters to them, putting them at the centre of everything we do and integrating services around them. We believe that care as close to home as possible benefits everyone.

The stories shared in this document reinforce the importance of home and community and of listening to what matters to the people we support. We all need somewhere where we can feel safe, where we feel connected to others and where we feel valued. Helping people find a home or assisting them to stay in their home, supporting people with their choices about how they live, empowering people to achieve what matters most to them – this is priceless and this is the work that our adult social care teams are doing each and every day.

But they don't do this alone. Through working together and in partnership with local voluntary and community partners such as Torbay Community Development Trust, Healthwatch and many others too numerous to mention (but each uniquely valued) they are creating sustainable networks of care and support for people.

Over the past year, we have further strengthened our relationships with local and regional partners including NHS Devon Clinical Commission Group, Devon County Council, Torbay Council, Public Health England South West. The formation of the Devon Integrated Care System and the

continued development of the South Local Care Partnership will offer new opportunities to work closer together on the wider complex web of issues which affect people's health and wellbeing – housing, education, environment, and employment.

The future feels a little uncertain for all of us at the moment – there is a war in Ukraine, the pandemic continues, the cost of living is rising rapidly and many of our people are experiencing long waits for treatment and operations which is further impacting on their health and wellbeing. What gives us confidence is the way the established partnerships we have here in Torbay and the work we are doing together to reduce the health inequalities experienced by local people, improve health and wellbeing, and support the regeneration of the bay area.

Together we will build on the strengths we have so that we can co-create a brighter future for everyone in Torbay.

DRAFT

Jo Williams: Director of Adult Social Services



Welcome to the 2021/2022 Local Account Summary for Adult Social Care in Torbay which provides details of the performance and use of resources for this vital area of the Council.

We have the benefit of a locally integrated system, and are a partner in regional planning as part of the Integrated Care System. Nationally, it has been acknowledged that Adult Social Care is experiencing critical difficulties and that our model needs to transform and evolve alongside partners in order to survive.

The Adult Social Care Improvement Plan is being supported by a quarterly Board overseen by an Independent Chair with representatives from all the partners involved. The Board's role is to monitor progress on delivery, support problem-solving if delivery is not on track and to offer constructive challenge across the partnership. We aim to ensure that the right changes are made to secure better outcomes for local people.

We have much to be proud of in Torbay as we continue to build on our innovative approaches to maintaining the health and wellbeing of our communities. This Local Account provides details of what we have achieved over the past year – from supporting our carers to making the best use of technology; from supporting people with autism and learning difficulties to growing our own social workers. Within this document you will see first hand accounts of how we are making life better for our residents and their families.

We also have ambitious plans for our future and these are set out within the document. The continued development of the Torbay Community Helpline – one of the most positive things to come out of the Covid-19 pandemic – absolutely sums up our commitment to work with the community and voluntary sector so that our residents are supported by their communities, rather than needing to access statutory services.

That partnership approach will continue to be the central focus of our work as we go forward to meet the challenges that we face. We want to co-design and co-produce services that meet the needs of the people of Torbay so that Torbay, as a whole, can thrive.

It has been another extraordinary year and I'd like to thank everyone involved in health and care services across Torbay for their input.

The Vision

Despite the pandemic continuing beyond expected timeframes, colleagues from within Torbay and South Devon NHS Foundation Trust and Torbay Council continued to work together on the Adult Social Care Improvement Plan (ASCIP) that was referenced in the 2019/20 Local Account Summary. We remain committed to transforming how Adult Social Care is delivered in Torbay. We have built on the new ways of working developed throughout the pandemic and relationships with community partners have flourished as a result.

Our co-designed shared vision is becoming more embedded in everyone's thoughts and actions:

Thriving communities where people can prosper

Our mission statement continues to be:

Our residents can have a place to call home in a community they can be part of, while being empowered to achieve what matters most to them, through the best care and support available.

Why did we need an Improvement Plan?

The demand on the adult care system in Torbay remains high and indicators suggest it will only continue to increase due to our aging population, repercussions from the pandemic and levels of social deprivation within Torbay. The pandemic has demonstrated that old ways of working need to change to become sustainable into the future. We believe that the way we deliver social care will be better by adopting a community led and strengths-based approach where we can enable our communities to flourish and find their own solutions to the issues emerging. We remain committed to engaging and working with our voluntary and community partners and people who have lived experience in co-designing the future pathways which will ensure a robust service delivery that is fit for the future and for the people of Torbay. Our workforce has also remained engaged in developing a culture of embedding continual improvement which focusses on monitoring our own performance and seeking feedback from all involved so we can learn from experience.

Engagement and Co-Design

Torbay Council and Torbay and South Devon NHS Foundation Trust remain committed to developing services in partnership with members of our community who require the services and support we provide. Engagement and Co-Design remains a key priority for us during 2022/23 and we intend to build on the firm foundations created through the pandemic. Meaningful engagement continues to be sought wherever possible to ensure we can celebrate where things went well and consider how this can be embedded as future best practice. It is equally important to consider and address areas where identified improvements should be made and we are engaged with a developing programme which will ensure learning is put into practice. Throughout all areas where

improvement and innovation are being considered we are committed to engaging people with lived or living experience to participate in co-designing the future, in partnership with us.

During 2020/21 our communities benefitted from the partnership working that has emerged from the joint work arrangements we have made with the Learning Disability Partnership Board (LDPB). Working relationships have developed so well that the Treat Me Well Group is now closely entwined with the LDPB and the Learning Disability Ambassadors are helping to drive the agendas and work plans.



During 2021, Torbay Council has begun to work more closely with the voluntary sector, partnership organisations and people with lived experience to create services to meet the needs of people with mental health issues. We are working together to decide how best to invest £400,000 to support people and prevent further decline in their wellbeing. We hope to report more on this in next year's Local Account Summary. This is a really exciting time and progress continues to be made in this area with partnership working at its heart.

Adult Social Care – Torbay’s Future



The Adult Social Care Improvement Plan (ASCIP) continues to support the vision of developing thriving communities in Torbay by delivering the strategic priorities, deepening integration with partners and promoting a strength-based approach throughout all conversations. The pandemic response necessitated everyone redirecting resources to ensure the overarching wellbeing for people living in Torbay. As a result, we began building collaborative relationships with partner agencies by valuing skills, knowledge and potential in all individuals and their communities.

We began our journey of innovation with the end in mind and identifying long-term opportunities that are starting to gain momentum. Together with our workforce and partners, as well as feedback from the public, we have created efficiencies within processes which has led to better outcomes for people who require support.

Our aims are to:

- Be effective
- Ensure staff and communities who are part of adult social care delivery experience good outcomes and positive impacts.
- Work within the assigned budget of adult social care in Torbay.
- Achieve the vision through delivering on the strategic priorities,

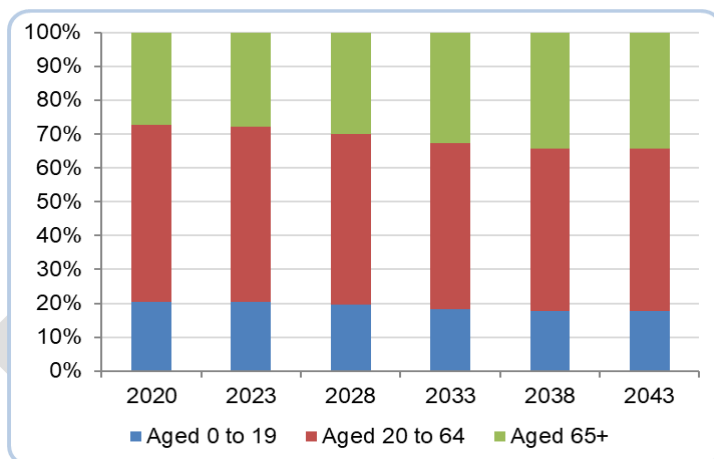
Building on the learning obtained during the Covid pandemic we have deepened our health and adult social care integration by working together and with partners to have embedded arrangements that allow for the speedy discharge of patients from hospital whilst achieving best possible outcomes for adults in Torbay.

We have committed time and effort to ensure our workforce continues to be legally literate and compassionate as they discharge their duties and responsibilities to the communities of Torbay. We remain committed to maintaining a fully trained workforce who are supported to meet the needs of social care which fits the ethos and vision of adult social care in Torbay.

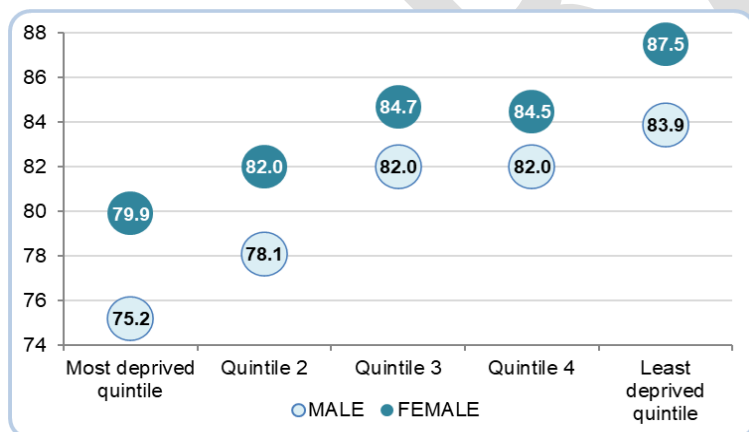
The Population of Torbay

The Office for National Statistics estimates that Torbay has 136,218 people living in our area in 58,500 households. The overall population in Torbay has grown by 1.3% in 2020 since 2016, this compares to 2.3% growth across England. 27% of our population is over 65 years of age which is set to increase to 34% over the coming 20 years. This is only a slight increase since 5 years ago, when this group represented 26%.

Torbay's population is currently projected to rise from 136,218 in 2020 to 153,088 by 2043. The proportion of the population aged 0 to 19 is projected to fall from 20% to 18% by 2043. Those aged between 20 and 64 are projected to fall from 52% to 48% by 2043, the proportion of those aged 65 and over is expected to rise from 27% in 2020 to 34% by 2043. The projected rate of fall amongst those aged under 65 is steeper than the projections for England as a whole.



Life expectancy for males is 78.6 years and females 82.5 years. This is slightly below the national average for the latest 3-year period. The average England life expectancy in males is 79.4 years and females 83.1 years. When compared to the South West, Torbay's life expectancy is approximately 1.5 years lower over the last 3 years for both men and women. The average for males in the South West is 80.3 years and females 84.1 years.



It is known nationally that there is a gap in life expectancy between the richer and poorer. For the period 2016 – 2020, life expectancy for men living in areas of Torbay that are amongst the 20% most deprived areas in England have a life expectancy of 8.7 years less than those men living in our 20% least deprived areas. For women, the gap is 7.6 years.

Data on early mortality in Torbay, those aged under 75 years, indicates that for causes of death relating to cardiovascular, cancer and respiratory diseases, in both males and females are in line with the England national average. When looking at liver disease, Torbay males are in line with the England average, however, the females have a lower mortality rate than the national average. Torbay is also reported as having lower than the England average rates for both males and females in the preventable causes category.

If Torbay was a village of 100 people...

5 would be aged under 5 

14 would be aged between 5 and 17 

8 would be aged between 18 and 24 

15 would be aged between 25 and 39 

36 would be aged between 40 and 64 

10 would be aged between 65 and 74 

12 would be aged over 75 



Over a third of children aged 5 would have one or more decayed or filled teeth



A quarter of four year olds would be overweight or obese



11 people would be living with long-term health condition or disability which limits their day to day activities a lot



27 people would live in a deprived neighbourhood and be likely to live for 6 years fewer than those living in wealthier areas



3 children would have special educational needs



23 people would be unpaid carers



11 people would be serving in the military or be veterans



2 people would not speak English as their first language



3 people would be victims of domestic violence (highest rate in the South West)



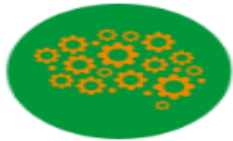
3 people would identify as lesbian, gay or bisexual



14 adults would smoke



1 adult would be admitted to hospital each year for alcohol related health issues



12 adults would have a diagnosis of depression



27 people would not have access to a car or other vehicle



48 adults would be overweight or obese



2 children would be in care (the second highest rate of looked after children in England)



On average, women would live to 83 while men would live to 79

Our adult social care people and teams

165

the number of people working in our adult social care teams

82%

are female

18%

are male

7

Arranging Care and Support team

41

Care Management Team (Paignton)

36

Care Management Team (Torquay)

12

Carers Team

7

Emergency Duty Service

10

Mental Health Team (over 65s)

14

Quality Assurance and Improvement Team and the Review Team

19

Rapid Response Team (southern)

9

Safeguarding Adults Team

1

Safeguarding Adults Board

12

Sensory team

13%

leaver rate (21 people)

10%

starter rate (17 people)

48%

of our people are over 50 years of age

48

is the average age of our people

96%

of our people are white

2%

are from BAME backgrounds

2%

have not shared their ethnicity

Progress during 2021/22

Throughout the pandemic operational pressures increased and the needs of the acute hospital have also been significant. This has impacted on the aspirations of the wider delivery of the Adult Social Care Improvement Plan (ASCIP).

Nevertheless through 2021/22 we have delivered the following successes:

- Created and implemented an interim workforce structure and adopted a Bay-wide approach to service delivery. This has led to improvements in performance as case load allocation has increased and waiting lists have reduced.
- Implemented numerous accessible training programmes which are driven by the needs of the services whilst ensuring that all adult social care staff are legally literate and compassionate as they discharge their duties and responsibilities.
- Embedded more robust governance and assurance measures to create greater transparency around performance whilst working to make performance data more accessible and reliable to help further monitor flow of work and embed quality measures. We are now able to closely monitor the length of time people remain open to social care staff and the activity that occurs to support the individual to reach their desired outcomes.
- Introduced more robust performance outcomes in line with the social work supervision standards and as a result, we are beginning to see an increase in strength-based practice.

Full transformation has not yet been achieved and there are still some major areas of improvement to be made including:

- Improving the brokerage function so we can access better value services for the communities of Torbay,
- Renewing the roles and responsibilities of the Quality Assurance and Innovation Team (QAIT)
- Embedding more robust contracting functions and oversight
- Developing a mechanism to monitor flow through adult social care and translate that into improved market management.
- Strength-based practice improvements continue to be a central driver for the overarching ASCIP for the remainder of 2022/23.

Specific attention will be focussed on the following areas:

- a. Review and Insights – enabling the team to continue to reassess support packages in a strength-based approach
- b. SPACE Learning Disability Reviews – continuing to support the Complex Care Service to work alongside our partners SPACE to reassess people with a Learning Disability who may benefit from a more person-centred and strength-based approach to achieving their desired outcomes
- c. Under 65 Mental Health – assessing residential and overdue support packages to deliver better outcomes for people receiving services.

- d. Continue to develop the size and skill set of the ASC workforce ensuring it is aligned with the social care functions they are required to perform whilst delivering a high-quality service to our communities.

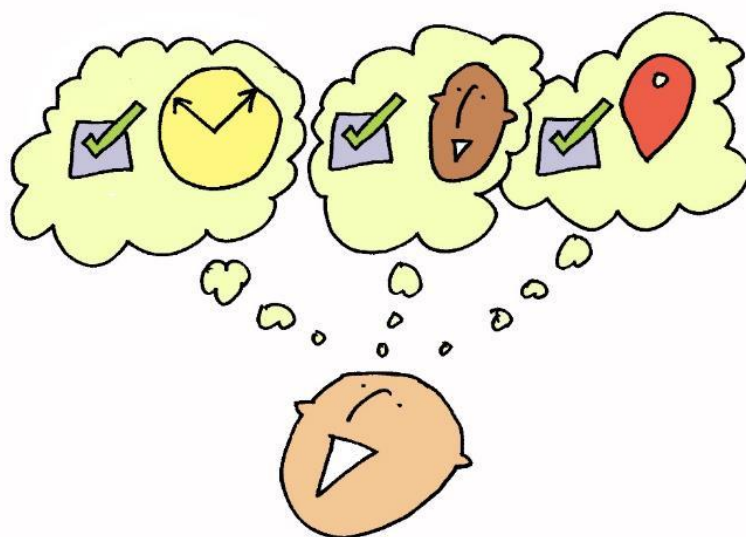
Focused effort will be placed on major areas where completion is needed ahead of other improvement activities to enable transformation. The following areas are including in this work for 2022/23:

- e. Review our current Operating Model, the Standard Operating Procedures and policies that support this model of delivery
- f. Completion of Phase 2 of the Adult Social Care Front Door including creating opportunities for Information, Advice and Guidance to be delivered earlier in people's conversations with us
- g. Developing our Direct Payments offer so that people can make best use of person-centred care planning
- h. Embedding the Social Care Reforms including the Care Accounts

Focus on Front Door, Gateway and Flow

During 2021/22 Adult Social Care (ASC) worked in partnership with the Torbay Community Development Trust (TCDT) and piloted a new initiative called the ASC Front Door. In the testing of this change, there were 656 people who consented to their query or request for support being transferred over to the TCDT Helpline. They received support from the Voluntary, Community and Social Enterprise (VCSE) sector. Of those 656 people who had a conversation with TCDT, 82% of people had their needs met

entirely by VCSE partners, 6% received a joint response with the VCSE offering some support and ASC also provided some paid for care and 12% have been referred into ASC for a Social Care Assessment. This initiative has supported the overarching objective of finding solutions with people where impact is demonstrated by engaging early, preventing further deterioration, and delivering good outcomes. The community has also been empowered to establish, increase, and consistently support asset-based working in Torbay.



Performance in 2021/2022

Adult Social Care receive a large volume of requests for support on a day-to-day basis. Our aim is to maximise people's independence and support people in the least intrusive way.

When comparing our performance data relating to contacts or requests for support, the figures for 2021/22 shows sharp increases. This is because we have made changes to improve our accessibility to the service and recording processes. We have been working closely with the VCSE and internally with our NHS colleagues to implement the 'Discharge to Assess' Government guidance. Analysis shows us that the true increase for requests for support is approximately 10% up compared to 2020/21, however, with the improved system recording we intend to use the 2021/22 figures as a new baseline.

As part of the service's improvement plan and in preparation for the ASC reforms to be implemented in 2023, we have started investing resources into improving our systems and the quality of the data produced. This will ensure it meets both organisation's data quality objectives to produce accurate, reliable, and timely information to improve future decision making and also enable us to deliver against the aspirations of the Government's 'Build Back Better' white paper.

Adult social care is provided by Torbay and South Devon NHS Foundation Trust and commissioned by Torbay Council. We support adults who have care needs to be as safe and independent as possible.

Performance at a glance:



8,420

requests for support were received compared to 5,407 in 2020/21



771

people received one-off support compared to 443 in 2020/21



2,226

people received Short Term Reablement services to help them gain independence compared to 1,275 in 2020/21



1,092

people started to receive an ongoing support service including community activities compared to 544 in 2020/21



2,128

people did not go on to receive a service for a variety of reasons (pay themselves, not eligible etc) compared to 2,136 in 2020/21



100%

of service users received community based social care services through self-directed support



4,747

carers are on Torbay's carers register - we assessed and reviewed 1,355 carers in 2020/21 and provided 678 carers with Direct Payments



386

people with mental health issues were supported by services compared to 343 in 2020/21



92

people aged 18-64 with learning disabilities are living in residential or nursing accommodation compared to 93 in 2020/21



3,152

adults received long term support services last year – 37% are aged between 18-64 and 63% are aged 65+



1,775

people received home care support to enable them to stay in their own home compared to 1,729 in 2020/21



949

people were in permanent residential placements during 2021/22 compared to 930 in 2020/21



1,871

people were directed to other types of help and support including community activities compared to 1,921 in 2020/21



423

service users received direct payments compared to 482 in 2020/21



998

safeguarding concerns were raised. This represents a 9.1% decrease in the 1,098 safeguarding concerns raised in 2010/21

The data relating to Permanent Admissions to res/nursing care (Appendix 2 ASC 2A p1) for younger people would seem to suggest a percentage increase from 17.7% in 2020/21 to 27.2% in 2021/22. The large increase seen in this KPI (54%) is predominantly due to system and reporting changes as mentioned previously however it is helpful for people to be aware that the numbers behind this increase are relatively small; In 20/21 we reported 13 permanent admissions and 20 permanent admissions in 21/22. Further analysis using the new methodology on the 20/21 data would suggest that the true increase in this KPI would be closer to 5% which equates to only 1 additional admission. Work across the Adult Social Care and Children's SEND teams continues to be beneficial and the number of longer-term placements has been significantly reduced as a result.

Annual Survey

Every year adult social care services across the country carry out an annual user satisfaction survey. The questions are set by central government and help us ascertain the experience of adults in receipt of support. The results of the survey help us inform our future priorities and identify any areas for needed improvement.

Central government made the survey discretionary in 2020/21 and as a result only 18 authorities submitted their results compared to the usual 147 contributors. The national benchmarking data is

published in the autumn each year. Below is a selection of our provisional 2021/22 results and where we estimate our performance to be based on historical national benchmarking data.

When looking at our results compared to last year, we can see that there has been a drop in performance across many of the survey questions. We will not know until we are able to compare these figures with the national benchmarking information if this is isolated to Torbay or a recognised national trend and an effect caused through the pandemic.

In total 402 completed surveys were returned which showed that 67% of service users said they were overall satisfied with the care and support services they receive. Historically, we have reported similar figures which indicates the service is likely to remain in the top quartile for England.

85% of those of who completed the standard survey rated their quality of life as alright or better, this was a slight drop compared to the 91% response in 2021.

When asked about their safety 64.8% of respondents said they feel safe. This is a drop compared to our previous year's performance of 72.2%. Nationally, it is recognised that due to COVID residents accessing services have felt more isolated.

85.2% of respondents said the services they are using makes them feel safe and secure. This is an improvement compared to the 2020/21 result 81.6%, however, historical insight indicates that we are likely to remain below the national average in England for this indicator.

72% of respondents found it easy to find information about our services. This is a slight improvement compared to the previous year. To build on this service, we are continuing to invest on ways to improve this indicator and this forms part of the ongoing Front Door, Gateway and Flow project referenced on page 17

We saw a drop in the percentage of respondents who said they feel they have control over their daily lives. 78.9% in 2021/22 compared with 85.1% in 2020/21. Although there is a drop, the performance indicators the figures are likely to be in line with the England average.

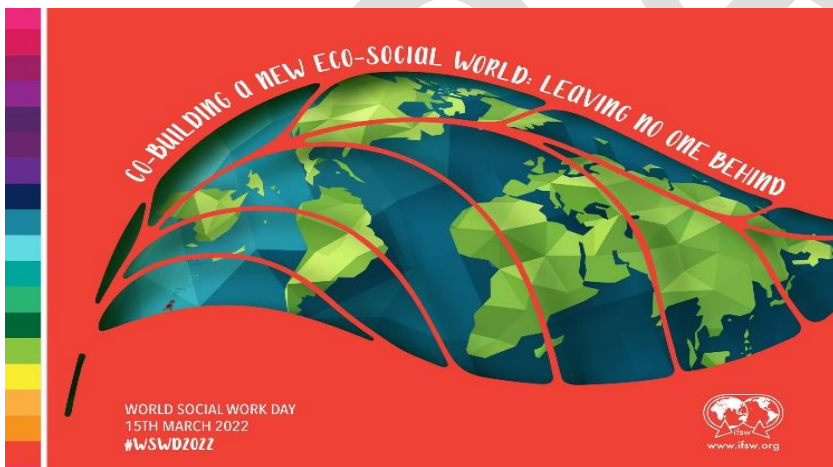
Principal Social Work Annual Review

Audit

We have further developed and implemented a standardised and well-structured audit process that has been embedded across key areas of practice in Adult Social Care. Each month a group of Community Service Managers and Specialist Leads meet with a rotating group of senior Social Workers to undertake a thorough review of current practice in Adult Social Care. This enables a quality oversight of practitioners' recordings, but also widens the senior management oversight of processes and procedures. We are taking the learning from these audits and translating the outcomes into improved practice across the wider Adult Social Care workforce.



World Social World Day



The theme of World Social Work Day this year was **Co-building a New Eco-Social World: Leaving No One Behind** and to celebrate, Torbay and South Devon NHS Foundation Trust highlighted the pivotal role that social work colleagues play in helping to deliver its integrated health and social care services.

We hosted our event at the Grand Hotel in Torquay as part of an international initiative bringing together social work colleagues and partners from across the communities they work within. The aim was to contribute to a set of values and principles that address inequalities while living in balance with nature and protecting the planet.

The feedback following the event clearly demonstrated this was a great success with many social workers saying they were grateful for the opportunity to celebrate their profession and connect with other social workers and professional partners.

The event focussed on the effects of the pandemic on our community links and considered how we might further develop this. Using a World Café action learning set format, we had an energetic

and interactive day where we heard the voice of our local service providers, included the VCSE sector, commissioners and people who use our services including young adult carers.

Deputy Director of Adult Social Care, Sharon O'Reilly, said:



“We were one of the first NHS trusts in England to integrate acute hospital care, community healthcare and adult social care.

By changing how we deliver health and social care services, we have been able to put people at the centre and integrate services around them, working with their families and our partners to provide support and care that is timely, accessible, personalised, and compassionate.

Our social workers are an essential part of this collaborative approach and World Social Work Day is an opportunity to say thank you to them for their contribution to supporting and empowering children, adults, and families to make important choices about the direction of their lives.

I would also like to commend the teams on their commitment, resilience, and creativity during the pandemic”.

Operational oversight and links with Professional Practice

One of the benefits of working in a smaller local authority is the opportunity to work more closely and collaboratively with other neighbouring organisations and directorates. It has become apparent since the implementation of the Adult Social Care Improvement Plan that links between finance, operations, commissioners, and our local communities need to be much improved. We have therefore implemented whole service meetings and, as a result, we are starting to see a more streamlined exchange of information that is more meaningful, relevant, and current. The newly structured meetings allow for full engagement across the organisation, it also develops trust, builds camaraderie among the team members, boosts morale, and helps employees stay engaged in the workplace. Our partners are invited as key note speakers/advisors and as subject matter experts, this has enabled our staff to hear first-hand issues of any financial pressures, as well as looking at market shaping and how we can further develop better long-term services to meet the needs of the people of Torbay.

Apprenticeship degree and Assessed and Supported Year in Employment

We have moved our “in-house” Social Work degree over to the apprenticeship programme which is fully funded by the Trust’s Apprenticeship Levy. Staff have been successfully recruited onto this programme and as such we are able to ameliorate our recruitment issues by committing to 2-3 students each year who will qualify as Social Workers. The Social Work Degree Apprenticeship contributes to widening participation and a new means of social mobility – which goes hand-in-hand with social work values. Apprenticeships work to break down some of the barriers to disadvantaged individuals being able to attend university. For example, employers or employer

levy will pay the tuition fees and apprentices are paid a working wage throughout studies, too – avoiding having to take an unpaid gap while accruing tuition fees at the same time. Plus, apprentices then already have a job after graduating.

Cav Kirby, one of our “Grow your Own” social work graduates:

“When I made the decision to move into the adult social care field 13 years ago, I had no idea what I wanted to do with my career. For me, at that time, I had heard that working for the NHS guarantees a pension and would be the next, logical step for someone working as a carer in the community.

Reflecting back, going to university to become a social worker at a young age wasn’t something I had planned out and I can’t remember a time where being a social worker straight from leaving higher education was an interest or option for me.

As the years have gone on, my interest in becoming a social worker was formulated through the many different experiences and situations I had witnessed and been part of; whilst also being able to speak with colleagues and social workers already in post over several years.

Only by having these experiences throughout my late 20s and early 30s was I able to see that completing a social work degree and being part of the profession was something which I had great interest in.

Thankfully, I was able to undertake this training through the Trust and Open University as a mature student, without this I would never have found my calling as a social worker!”

We have eight Senior Social Workers who have all worked from being un-registered staff to qualifying, and now hold senior positions, including our Community Service Manager for ASC and our Triage lead.



Policies

We have recently undertaken a full audit of our policies and as such have aligned them to our neighbouring partner’s policies and procedures to ensure consistency and ease of access. Together, policies and procedures provide a road map for day-to-day operations; they ensure compliance with laws

and regulations, give guidance for decision-making, and streamline internal processes. During the year ahead, we want to continue to develop and strengthen some of our standard operating procedures (SOPs) We want to develop continuous improvement methodologies to ensure we keep at the forefront of innovation and to look at ways in which we can improve and deliver better products and outcomes for the people we serve across our communities.

Training

7 Minute Briefing (7MB) have been tested and trialled across the organisation for over 12 months now, and as such have become a key standard operating procedure in how we disseminate and communicate key areas of practice and any associated changes in legislation, policy etc. Some of the most recent 7MB 's includes, but not limited to are: Mental Capacity Act. Independent Mental Capacity Advocacy. Liberty Protection Safeguards. Undertaking a Mental Capacity 2005 Act Assessment. Deprivation of Liberty in a Domestic Setting, Hospital and Care Setting. Advance Decisions to Refuse Medical Treatment. Ordinary Residence, the Homelessness Reduction Act. The feedback is positive, and the workforce agree that committing seven minutes is manageable in most services, and learning is more memorable as it is simple and not clouded by other issues and pressures.

Core Capabilities Framework for People with Autism and Learning Disabilities

Adult Autism Strategy

We have delivered training for all frontline public service staff, in line with their job role. The training is inclusive of specialist training for staff in health and social care. Our ASC internal interim strategy, and objectives are representative of the new strategy, 'Think Autism', which was published in April 2021 that fully supports the implementation framework. We have already implemented the "Bitesize" pathway that supports Tier 1 and 2 of the Core Capabilities Framework for Supporting Autistic People, furthermore we have developed and implemented Tier 1 and 2 of the frameworks for Supporting People with a Learning Disability.

We are working collaboratively with other organisations, such as Devon Partnership NHS Trust and University Hospitals Plymouth NHS Trust in the co creation of a training and development framework that will further support our workforce; this will be underpinned by a partnership agreement and guiding principles, including governance arrangements.

Legal Literacy

During 2021 we developed and implemented a new legal literacy training pathway. The pathway is accessible across the entire organisation, including our partners and key stakeholders. Our collaborative approach enabled us to deliver a series of large events/ seminars with some of the top leading experts in Social Care law across the country. Webinars were delivered across wide ranging subjects such as the Mental Capacity Act: Assessments & Best Interests, Deprivation of Liberty Safeguards, and the new Liberty Protection Safeguards: what this means for practice and Safeguarding Adults and the Human Rights Act. The learning resources now available include video recordings, case studies, comprehensive presentations and interactive quizzes that further supports reflective practice and ways in which our workers can evaluate their knowledge and indeed use the outcomes to enhance professional knowledge and develop practice skills.

Train the Trainer programme and toolkit for Carers

During 2021 we developed and implemented a bespoke blended Train the Trainer/ Facilitation Skills programme for carers to share across the Integrated Care Organisation which includes primary care services.

Risk enablement training pathway

The content includes, videos made of two interpretations of undertaking a risk assessment, presentation, risk enablement assessment/quiz and a pathway flow chart.

Epilepsy training pathway

We now have an up-to-date Epilepsy pathway readily available for our staff. A 7MB briefing has also been developed to help staff navigate around the services in the event of a referral or request for any advice and guidance.

Post Qualifying Standards Supervision (PQS)

The post-qualifying standards for social work supervisors in adult social care development pathway is an employer-led programme of support and assessment against the post-qualification standards. The eight standards are currently being developed into a flexible rolling programme, and as such has been mapped against Skills for Care and RiPfA resources. There is a series of face-to-face workshops throughout the year that aims to support our first cohort to successfully meet the standards, including formative/summative assessments.

Research in Practice for Adults

Working collaboratively with Research in Practice in supporting our workforce in understanding the impact that our services are having. The evidence-informed approach is central to research and evaluation. The successful commissioning of RiPfA will see a mixed method approach to evaluations, incorporating evidence collection techniques. This includes interviews, focus groups, observations, case studies, surveys, and statistical analysis of administrative data. The future planning will fully support a series of workshops of our choice that will be centred and themed around the training needs of our organisation -thus to maximise impact and outcomes. The workshops will also build in-house capacity in research methods, develop a 'Theory of Change' or 'Monitoring and Evaluation Framework'. Analysis and interpretation of service level or administrative data and the creation of tailored tools to support long-term monitoring of our impact.

Providing Safe Quality Care and Best Experience

Focus on Mental Health

During 2020 and 2021 the Adult Social Care Mental Health Services have worked successfully with partner organisations and wider networks to successfully support people with mental health problems and those living with dementia, and their carers.

The team have delivered compassionate strengths and asset based social work and social care interventions despite the challenges of the pandemic.

Colleagues within the team have readily adapted to hybrid and new ways of working to deliver legally literate, trauma informed and recognised goal-based interventions. The team has a clear vision, strategy, and culture to consolidate learning from experience in order to adapt to the changing needs of older adults and the economic market.

Care providers have been supported by the team to ensure placed people have been safeguarded with a wide range of Covid safe innovative offers, including targeted outreach approaches to ensure options available are inclusive and personalised to people living in Torbay. The Torbay Care Home Education team commenced a 12-month pilot during this period with the aim of further integrating health and social care to improve and assure quality and putting people living with dementia at the very heart of the service. The dedicated jointly funded (Health and Social Care) manager offered further leadership within this initiative and established a virtual hub of provision that could be delivered across Torbay. The hub works in partnership with the Quality Assurance and Innovation Team (QAIT), the Home Visiting Service and Intermediate Complex Care Team to support facilitated discharges from general hospitals back into appropriate care settings or the person's own home. The hub has delivered home based dementia care by enhancing the educational elements available through the Care Homes and Education Support Team (CHEST) provision. CHEST has been available to Residential and Nursing home providers across the Bay for several years, receiving positive feedback and successful results.

Other key achievements have seen social care and health collaborate, as tests of change, on supporting early facilitated community discharges for older adults back to the community from general hospitals and specialist wards by supporting both residential and nursing providers to meet the complex needs and high-risk people with functional and dementia presentations may display. The team has worked collaboratively in Torbay with the Devon Partnership NHS Trust Older People Mental Health Home Treatment Pilot with the aim of avoiding admissions, supporting early facilitated discharges, reducing inappropriate requests for Mental Health Act assessments.

Margaret's story

Margaret is 85-year woman had a diagnosis of Vascular Dementia with complex physical and mental health needs, she lived in her own home and had a good supportive family network, particularly her daughter who lived locally who would visit daily after work.

Margaret was referred to the Older People Mental Health service due to a breakdown in her care at home support package. Her support needs had become such that she needed a specialist hoist and for this to be a safe and deliverable provision in her own home, double handed care would be required to sustain this. Without this provision Margaret was at risk of needing an admission to a residential care

Margaret wanted to remain in her home and enjoyed a good relationship with carers. Margaret had previously had respite for a few weeks in a care home and didn't like it as a result she deteriorated and showed signs of Behavioural and Psychological Symptoms of Dementia and wanted to go back home.

Margaret required four visits daily which were double handed as well as a night sit every evening. Due to the difficulty in trying to source the care and Margaret's dementia deteriorating the option of going into a long-term placement looked highly likely.

Margaret's daughter who holds Lasting Power of Attorney for health and welfare decisions didn't want her Mum to go into a long-term placement as Margaret was so happy at home. At this point the Social Worker investigated Live in Care options. The agency that was already providing care were able to provide the live-in care which meant that, Margaret had someone with her 24/7 to meet all her needs. Margaret also continued to have continuity of care which was vitally important to her.

Shortly after the live-in care started, the carers reported a big change in Margaret whereby she appeared happier, and her mobility began to improve. At this point an OT assessment was requested to re-evaluate the use of the hoist. Margaret had improved so much that she no longer needed the hoist and support could be reduced to single handed care. Margaret is currently very happy living in her own home with 1 live in carer. By working in a person centred, strengths-based way the social care staff member was able to ensure that Margaret's wellbeing was maintained and that her voice was heard, and appropriate actions taken to support her wishes and improve her quality of life and general wellbeing. Equally her wider family felt supported and that their voices were heard. The family were really appreciative of the social care team's intervention which enable Margaret to continue to live independently in her own home.

This showed very effective communication skills, to reach an outcome that was person centred rather than service led. Under the current climate with so many pressures on resources, this case demonstrates that thinking creatively, asking questions, and negotiating with providers can provide solutions, outside of "the norm" to the greater benefit to people who require service and their families.

Dylan's story

Dylan is in his thirties and has complex mental health needs including schizophrenia and Asperger's and was living in a residential care home, with stable mental health, for

six years. He had hopes and aspirations for his future and wanted independence but acknowledged he has been living in fear and remained in the care home because it was what he knew.

However, Dylan's family was worried his mental health would deteriorate if he left the care home. The Torbay and South Devon Community Mental Health team felt Dylan had scope to be more independent and discussed with the family and Dylan how he could transition to more independent living, without compromising his mental health.

Dylan now lives in a supported living placement with his own room, a shared lounge, kitchen, and bathroom and has background enabler care workers during the day. He has a voluntary job, goes to the gym, swims, attends a chess club, and is about to do a mindfulness course. He aspires to study at college.

Through an integrated approach to his care, Dylan has replaced his formal support network of care and is building his own informal support network in the community. Dylan, like many people, still has challenges, needs guidance and support, but he is now living more independently.

Patricia's story

Patricia is 71 with a diagnosis of depression and has lived in a residential care home for 12 years. Last year, she expressed that she would like to move out of residential care and live more independently. Patricia was supported with her request and was moved to live in a flat, as part of an extra care housing scheme.

The social worker who helped Patricia was able to challenge assumptions around age allowing Pat to achieve her much desired return to independent living in the community.

Although Patricia receives care visits, she is taking responsibility for tasks such as cooking and cleaning, travelling on public transport and is now attending church, something that she always loved doing.

“I much prefer living in my new accommodation. I felt institutionalised living in residential care, and I wanted to move out for a long time. My social worker supported and listened to me and was able to put my wishes into practice.”

Focus on the Transition team

Over the past 12 months the specialist transition team has evolved and now has 7 members consisting of a manager, social workers, and skilled non-registered staff members.

Close links have been developed with Children's services, Education and Mental Health services. There are now weekly transitions panels to consider a young person's aims, hopes and aspirations when they reach adulthood. The transition team work within a strengths-based approach aligning their assessments and support with the preparing for adulthood guidelines promoting health, education, employment, independence, and community inclusion. The team work flexibly to ensure their care plans are outcome based which includes reviewing a situation when it is right for the young person rather than on an annual basis.

Our aims are:

- To ensure that everyone involved in a young person's preparation for and transition to adulthood have the information they need to assist in making the right decisions at the right time.
- To engage in person-centered and restorative planning for all young people with special educational needs and disabilities, to ensure that these young people have a positive experience of transition to adulthood.
- To support all young people, we work with to prepare for independence through ongoing planning.
- To consider the views of young people, parents, and carers in reviewing the transition process and ensuring that the transition into young adulthood is an effective and positive experience.
- To empower young people to develop their own independence and to ensure that they have hopes and aspirations for their future.
- To work jointly with partners from education, health, and social care to produce good quality transition plans for young people.
- To ensure that young people with additional needs are supported to have the same opportunities as their peers to achieve good health, a sense of wellbeing, employment, education, independent living, community identity and interaction whilst developing a sense of security and purpose.
- To ensure that young people, their parents or their carers have the information they need to make good choices.
- To ensure that young people, their parents or their carers know who to reach out to for support.

What does 'good' preparation for adulthood look like?

Planning for transition should:

- Evidence consistent and effective joint working between Children's Services and adult services.
- Be a process during which children and young people have received relevant support and guidance at a minimum from the age of fourteen.
- Include planning for independence which is clearly considered within care planning for young people throughout their intervention with Children's Services.

- Identify and assess current but also potential future adult need as early as possible.
- Ensure that young people, their parents and their carers are not left without support as the young person approaches their eighteenth birthday.
- Ensure that young people, their parents and their carers have access to appropriate and relevant information, support, and guidance.
- Consider any learning needs or issues relating to capacity in respect of the young person, their parents or carers.
- Remain focused on safeguarding the young person's wellbeing as a paramount consideration.
- Include pre-transition activity where possible.
- To take into account a systemic consideration of the needs not only of the young person, but also of their parents or carers.
- Promote independence.
- Be a process in which young people and their families or carers feel involved, listened to and respected.
- Reflect the learning from feedback of young people, their parents and carers.

A story of three friends

Following a team conversation, they realised three of the young people being supported by the Transitions team were close friends, each were having their support needs delivered by the same company. Following discussions with these young people it was agreed that their support would be shared, and they would all work with the same enabler. This arrangement supported their friendship and enabled them to enjoy social activities more as they participated as a group. The aims are to continue to support these three young people to meet on their own and pursue areas of interest.

Jon's story

Jon is a young person who transitioned into adulthood, was receiving a very restrictive support package that amounted to 1-1 support consistently throughout a 24-hour period every day of the week. The Social Care professionals within the Transitions team applied the Mental Capacity Act legislation and a strengths-based approach alongside Jon which helped him secure and move into supported living.

In this environment he was able to receive more autonomous support which provided him with the freedoms so desired by young people whilst still ensuring he was able to have his support needs met.

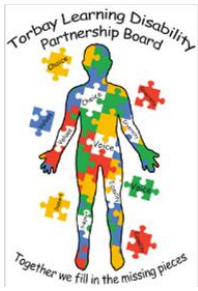
Focus on Learning Disability

During 2020/21 Torbay launched its [Market Position Statement](#) with the aim to achieve the following outcomes:

- An increase of 50 units of self-contained supported living, sheltered housing and/or Extra Care for people with learning disabilities, in line with the Housing Strategy 2017. One third of people over 45 with a moderate or severe learning disability, and one third younger adults (under 35 years) are living with parents. We want to ensure there is appropriate accommodation and choice, so people can have planned transitions towards independent living, and avoid unnecessary entry into residential care wherever possible.
- Increased Quality Assurance support for supported living providers and the consequent improvement and monitoring of the quality of support and tenancies.
- A reduction in the number of working age adults with LDs in long-term residential settings (currently just over 70 adults). Residential settings by their nature, do not usually maintain or increase self-determination, control, citizenship, or enable community inclusion and natural circles of support.
- The development of an outcomes commissioning framework for the development of daytime activities/services which offer more choice, develop community inclusion, and deliver more aspirational outcomes.
- Greater housing choice particularly self-contained Supported Living, sheltered housing, Extra Care and access to general needs housing.

Learning Disability Partnership Board

The Torbay Learning Disability Partnership Board (LDPB), launched in December 2019 has continued and been supported and led by the Learning Disability Ambassadors who act as self-advocates. The Ambassadors ensure that people with learning disabilities are involved in decisions about all new services, strategies, and policies. The following is their contribution to the Local Account Summary.



The Partnership Board is about working together with people on the Board from different organisations including health, social care, education, carers, and local groups like Mencap.



The Partnership Board meets 4 times a year and the minutes from the meetings are available for people to read. The meeting is co-chaired so that people with learning disabilities hold equal power and control with their professional colleagues.



The Ambassadors support the work of the Board and are people with lived experience. Their job is to share things with the Board which people with learning disabilities are talking about and which are important. They also check that work is being done as agreed and take information back to their peers.



Jamie shared his story about his experience with social care services. He was in a long-term relationship which ended after 13 years and he sofa surfed for 3 months. He was allocated a social worker who helped Jamie apply for housing and to complete a support plan.

Jamie secured a one-bedroom flat until he was given custody of his daughter which then led to his search for a two-bedroom property.



Jamie and his daughter moved in to a two-bedroom flat in December 2019 and both receive allocated support hours along with respite for his daughter. Jamie was pleased that he could complete courses about safety for them both and he values the support he receives which enables them to live well and to be happy.



Jamie would like to share his thanks with everyone who has helped them get to a good, happy place in their lives.



The Ambassadors have worked with the Torbay Treat Me Well group to look at Reasonable Adjustments and created an example of an accessible easy read menu that can be used to assist patients in hospital with choosing meals.



The Ambassadors enjoy their involvement in the work of the Partnership Board.

“I enjoy getting together and working with friends”.

“I am honoured to do something to make changes happen, I think we are making changes”.

Focus on Autistic Spectrum Conditions and Neurodiversity

Torbay Advice Network (TAN) has been commissioned to support neurodiverse people and their family carers to have increased knowledge of entitlements to benefits and improved access to support with appeals. TAN's supported pathway also includes advice, support and assistance with housing related benefits, Discretionary Payments as well as signposting for additional support needs such as housing rights, options and legal support.

TAN has also helped many people receive more support to obtain and maintain employment through advice and guidance with Reasonable Adjustments and Access to Work Schemes. This covers support such as providing Reasonable Adjustments (RA) letter templates as well as assisting people to write their RA request. Guidance is also provided on the Equality Act 2010 as well as support for people to apply for Access to Work Schemes for employment.

The Ambassadors are supported by Devon Link-up to talk to others and share any news from the Learning Disability Partnership Board (LDPB) as well as gather common issues to raise at the LDPB.

The issues closest to people's hearts are housing, support services and health. People want greater choice about where they lived with more self-contained supported living accommodation that provided person-centred care. The views of people with learning disability have been incorporated into the market development plan.



Paul's story

Paul is a 22-year-old male with Autism. Paul was seeking employment advice having been referred to a Department of Work and Pensions (DWP) dedicated provider for assistance with job applications which had not happened.

TAN supported Paul with arranging the initial meeting with DWP to discuss options available and explain Paul's concerns and support needs. Following this, TAN supported Paul with identifying applicable jobs he was interested in, helped review his job applications, including framing his specific requests around reasonable adjustments for any interviews offered. Paul has subsequently been offered an apprenticeship opportunity from one of the job applications TAN assisted with. As Paul was unable to walk to work due to the distance involved, TAN has assisted him to make an Access to Work application to request support with taxi costs. Paul would experience extreme trauma, anxiety, and stress if he had to use public transport due to the large numbers of people, noise, unknown familiar environment, proximity

of strangers, etc. The application was successful, and a grant was awarded which enables Paul to accept the employment offer and he is really enjoying the experience.

Dimensions for Autism (DFA) facilitate support groups for autistic people. DFA have two online support groups at least twice a month, this is to support individuals that do not feel able to attend real life events at present. DFA Torbay members are free to attend any online group, regardless of where they live in Devon. Throughout the pandemic the group have met on line providing much needed support to one another. This group provides a vital platform for people to share interests and hobbies and speak about day-to-day matters that maybe affecting them.

Rob's feedback

I am a 30-year-old male who wants to contribute my life experience. As someone who receives support and information for my Autism Spectrum Condition, I feel it is important that in Torbay, adults 'with' autism are not feeling side-lined from decisions and services 'about' autism. My decision to join an autism group in Torbay supports me to engage with issues that autistic persons frequently face. Accurate representations of Autism Spectrum Condition are very difficult to put into a framework that is accepted by all autistic persons, as we vary enormously in presentation and ability, but it is our aim that by meeting as a group of autistic persons in Torbay we achieve meaningful narratives that express our experiences and participation in society. The group in Torbay provides visibility for those of us who are autistic - and this is important that we feel seen and recognized, as; without providing opportunities for positive engagement, adults with the condition can especially feel forgotten and discarded.

During 2021 we commissioned the National Autistic Society to provide some training aimed at supporting people through assessments. Staff from the Social Care Teams in Torbay were invited to attend. Some of the feedback we received is below:

“This is the first time that autism training has been available for staff, and I really enjoyed the course and felt that it was time well spent and extremely valuable to me in my Community Care Worker role.”

“The trainer, clearly set out the aims and objectives of the course at the beginning of session 1. The course was well paced and interesting, the visual aids will be a useful reminder. I felt I learned a lot more about Autism, particularly from C who joined us on Teams, he was only diagnosed as an older adult, and he explained the difference the diagnosis has made to him. I feel more confident in my understanding

of the impact of Autism, but I am also more aware now of its complex nature and that it impacts individuals differently. The trainer reiterated throughout the course that we need to know the person before we can support them, and this underpinned the course content Thanks- this training was brilliant.”

Following guidelines from the National Autism Strategy during 2021 we have started to develop an Autism Partnership Board in Torbay. The Board aims to:

- Be the voices of people with autism.
- Use the experience and knowledge of local people with autism on the board, to know what is and is not working, and to understand why.
- Involve people with autism in discussions, decisions and developing solutions.
- Make sure any actions are co-designed and co-produced with people with autism.
- Monitor the impact of the strategies and policies we decide on and keep an eye on changes.
- Envision the future for those with autism and to be very aspirational.
- Influence the whole system, health and social care, education, employment, housing, and relationships.
- Work to increase awareness and understanding of autism in the community.

Working parties have taken place, which included people with lived experience, to identify the aims and values of the Board. We are now about to recruit the autism ambassadors to help shape the further development of the Board. We hope to have the first full meeting June/July 2022.

Focus on Extra Care Housing

Extra care housing provides quality, safe and affordable housing with care and support which enables people to enjoy living independently, to build relationships and to live life to the full. People live in their own home, and there is on-site care and support staffing available 24 hours a day, 7 days a week which flexes to individual needs, and may be provided on a continuous basis or only periodically.

In Torbay, extra care housing is not age-restricted and is available to anyone over the age of 18, who might have, or develop, ongoing care and support requirements and who would otherwise experience difficulties in other forms of accommodation.

There are currently 108 units of Extra Care Housing in Torbay, located over two sites and provided by one service provider who is registered as a social care organisation. The current residents include people with the following long-term conditions:

- Dementia
- Learning disabilities
- Autistic Spectrum Condition

- Mental health issues
- Physical disability; and
- Sensory impairment.

Extra Care was successfully re-tendered in Autumn 2021 and is now delivered by a new care provider.

To meet changes in demographic need, there are 175 units of Extra Care Housing already planned for development over two sites from 2023; one will be a specialist dementia extra-care facility at Torre Marine, Torquay and the other will be a multi-generational extra-care facility at Crossways, Paignton.

Extra care should enable people who need personal care and/or support to live as independently as possible in accommodation that is genuinely ‘their own’, and this is facilitated by separate legal agreements for the care/support provided and the accommodation. Extra Care is an important housing with care option as it:

- Promotes independence, quality of life, health, and well-being
- Creates diverse and mixed communities which promote reciprocity, inter-dependence and belonging
- Supports people to stay in their own home, by adapting to changing needs.
- Diverts people from more institutionalised care.

Focus on the Homelessness Reduction Act 2017

The Homelessness Reduction Act 2017, introduced on 3 April 2018, placed new legal duties on local authorities so that everyone who is homeless or at risk of homelessness will have access to meaningful help, irrespective of their priority need status, if they are eligible for assistance.

It was one of the biggest changes to the rights of homeless people in England for 15 years and effectively bolts two new duties to the original statutory rehousing duty: the **duty to prevent homelessness** and the **duty to relieve homelessness**.



The Act introduced a duty on certain public authorities to refer service users who they think may be homeless or threatened with homelessness to a housing authority. The service user must give consent and can choose which authority to be referred to.

Torbay and South Devon NHS Foundation Trust have developed and implemented a 7-minute briefing on the Homelessness Reduction Act for all staff across the Integrated Care System and Torbay Council.

The purpose of the briefing/protocol is to ensure staff are aware of their duty ‘to refer’ patients/service users who are homeless or at risk of homelessness as set out within the Homelessness Reduction Act 2017.

As we progress this piece of work in 2022/23, we are hopeful that we will start to see a profound shift in approach towards earlier prevention and the opening up of support to more people who need it. Coupled with the development and dissemination of our 7MB, this protocol has been set out to support staff understanding their “duty to refer”. The brief duration should also mean that it holds people’s attention, as well as giving managers something to share with their staff. The briefings have been used consistently as part of team briefings/discussion points to further enhance learning and knowledge.

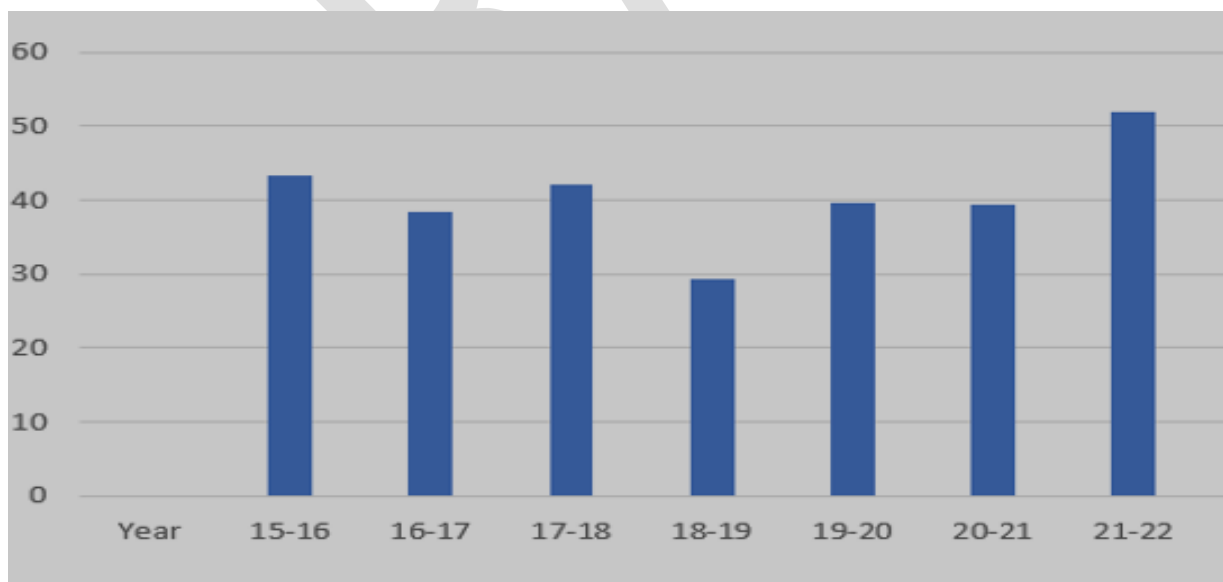
Focus on carers

With the Covid pandemic still around, the past year has been another difficult year for the hundreds of unpaid carers who support family and friends in Torbay. However Adult Social Care and its partners have continued to work hard to support carers across the Bay.

Carers Assessments

The number of Carers’ Assessments completed was the highest ever – 52% against a target of 36%¹, meaning more carers had conversations about how to achieve their identified outcomes. Carers’ Aid Torbay completed 235 assessments (against a target of 100), and the GP-based Carer Support Workers completed 570 (against a target of 500).

We think that this is partly because many carers had increased needs, but also partly due to the efficiency of doing assessments over the phone or on-line.



Carers Assessment data 2015 – 2022, with target of 36%

¹ Carers Assessments are measured as a percentage of total people receiving services from Adult Social Care

“Having a carers health and wellbeing check gave me the opportunity to stop, think and talk about my situation to someone who really understood and didn't judge, which felt safe and supportive, and they helped me to look at what might help me to achieve things that matter and to keep this under review. “

Support to Carers 2021-22

- When Carers join Torbay Carers, they can have emergency back-up plans, free Carers courses, Signposts information line, magazine, discounts, and support. This year, our numbers of Carers joining increased by 20.5% (target 20%), and our Signposts for Carers Telephone Line remained very busy.
- We have continued to offer on-line meetings where appropriate with our Carer Support Workers, as well as telephone contacts and socially distanced face to face meetings, and tech support for Carers who might need it.
- 668 Carers received one-off Direct Payments (up 14% from pre-Covid levels), making a significant impact on Carers' health and wellbeing. ²
- 179 Carers have benefited from having counselling via our Carers Emotional Support Voucher Scheme.
- Short breaks in residential care, which often give Carers a break from caring, have increased (602 in 19-20, 334 in 20-21, 667 in 21-22).

‘Somebody who got it, somebody who understands what being a Carer is all about’

Involving Carers

The 2021 National Carers Survey showed that Torbay's Carers were feeling positive about Adult Social Care:

- 71.3% of Carers (up from 70.4) reported being included / consulted in discussions about the person they care for.
- 45.9% of Carers felt 'satisfied' with Adult Social Care, a figure higher than most other areas in the South West.

‘I would strongly encourage anyone else who is providing care to others to contact carers services in Torbay, because being supported as a carer helps you to get the right balance between looking after yourself so you have the resilience to care for others and enjoy doing so.

² <https://www.torbayandsouthdevon.nhs.uk/uploads/carers-direct-payments-evaluation-december-2021.pdf>

Young Carers under 25 (YC<25)

We have continued to work hard to support Young Adult Carers in Torbay, with one-to-one support, welfare calls, signposting, on-line, and socially distanced face-to-face meetings as well as our regular fortnightly 'drop-in' sessions, and activities.

'I was then signposted to the Young Adult Carers Office. Suddenly I didn't feel alone, I felt supported and understood.'

For Young Carers Action Day in March 2022, Torbay launched a 3-year **Young Carers Under 25 Strategy and Action Plan** for Health, Social Care, Education and Voluntary Sector partners to work together.

"Another thing that I found really helpful from the Young Adult Carers service was the ability to have my voice heard."

South Devon College's Support to Carers received a Beacon Award which included testimonials about our Young Adult Carers Service who have had a presence at the College since 2010.

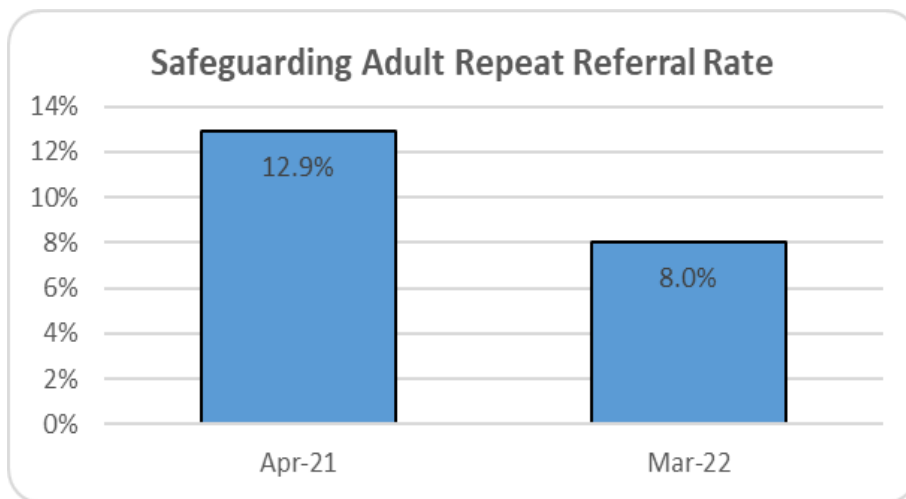
"I would not have stayed in education without the support I received"

Focus on Safeguarding Adults

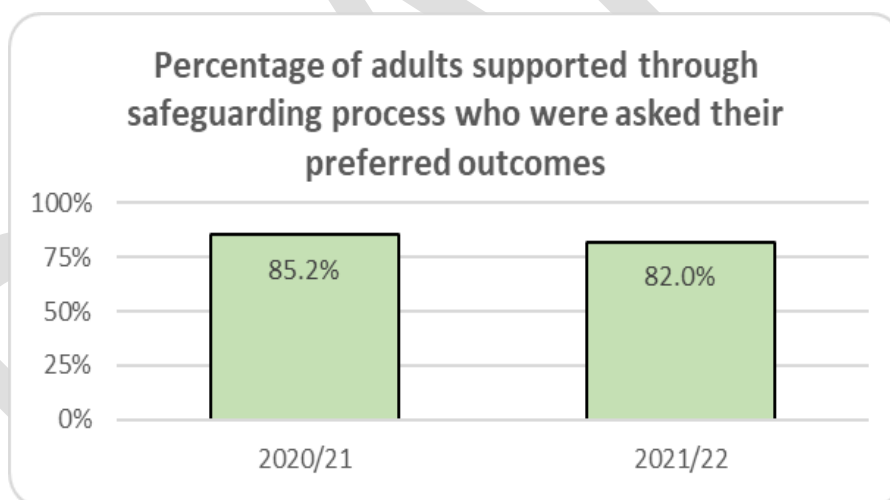
Our aim in the broadest sense is for the public, volunteers, and professionals to work together to uphold human rights and ensure everyone is treated with dignity and respect, and that people have choice, control, and compassionate care in their lives. Everyone has the right to live their lives free from violence, fear and abuse and all adults have the right to be protected from harm or exploitation. But not everyone can protect themselves.

'Safeguarding' is a term used to mean both specialist services and other activity designed to promote the wellbeing and safeguard the rights of adults with care and support needs where harm or abuse has or is suspected to have occurred. Our responses to concerns are driven by Care Act 2014 statutory guidance and the national Making Safeguarding Personal (MSP) agenda. This includes working with individuals or their representatives to establish their preferred outcomes to concerns and work with individuals to meet those outcomes. Where adults with care and support needs do not have the mental capacity to make specific decisions, we will ensure there is an appropriate legal advocate to act on the individual's behalf.

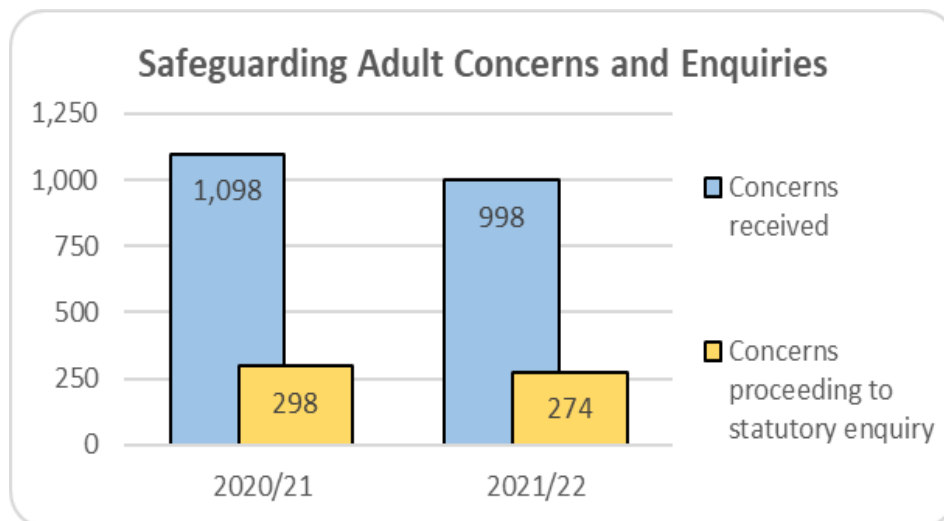
Between April 2021 and March 2022 our safeguarding adult repeat referrals rates decreased from 12.9% to 8% which is seen as a positive as there are less repeated concerns requiring statutory safeguarding responses.



Moving forward, we are changing our key performance indicators (KPIs) for the forthcoming year to focus more on person centred responses and qualitative feedback. In the last year we recorded that 82% of people who were supported through the safeguarding processes were asked their preferred outcomes compared to 85% in the previous 12 months. We want to improve on this and have therefore set a minimum target of 90% for the forthcoming year. Similarly, we want to ensure we are asking people if they consent to giving qualitative feedback on their experience of our responses and as such, have set a new KPI to gain consent to feedback from 20% of individuals who access safeguarding support.



Between April 2021 and March 2022, 998 safeguarding adult concerns were received by the Torbay Safeguarding Adult Single Point of Contact which is 100 fewer than the previous year. 274 proceeded to statutory safeguarding adult enquiries compared to 298 in 2020-2021. We have worked hard in the past year to provide more resilience within the safeguarding single point of contact service and ensure we are more streamlined in responding to concerns received. We have re-located our safeguarding single point of contact to within our Front-End team. We have trained more staff to respond to safeguarding concerns to increase capacity for timely responses and ensure concerns that do not require safeguarding intervention are responded to quicker.



Torbay and South Devon NHS Foundation Trust's work in this area primarily divides between the community operational teams who respond to safeguarding concerns and our Quality, Assurance and Improvement Team (QAIT) which works with care homes and domiciliary care providers to promote high quality care which proactively monitors quality standards.

We work closely with Devon and Cornwall Police, Devon Partnership NHS Trust, NHS Devon Clinical Commissioning Group and the Care Quality Commission both in causing enquiries to be made and maintaining strong local partnership arrangements.

Ultimate accountability for safeguarding adults sits with the Torbay and Devon Safeguarding Adult Partnership (TDSAP). Torbay and Devon Safeguarding Adult Boards merged in December 2020 to form a single partnership Board arrangement across Torbay and Devon. Activity within the partnership has gained strong momentum and has agreed a 3-year strategic business plan focusing on four key priorities. These are:

- Embed learning from Safeguarding Adult Reviews (SARs) into organisational practice.
- Improve outcomes for people with needs for care and support by finding the right solution for them.
- Work with partners to better understand the risk of 'hidden harm', especially in the context of COVID.
- Improve involvement and engagement with people in receipt of safeguarding services.

The partnership has a good cross section of organisations working together to meet these priorities as well as a service user led Community Reference Group (CRG) to ensure that our communities have a strong voice in directing the activity of the partnership.

The CRG has just taken on the responsibility to meet with people who have experienced the Safeguarding processes to quality check feedback and enable us to further improve the services we provide. The information obtained will be formally fed back to safeguarding governance groups and front line to staff so that any learning can be embedded into practice.

More information on the partnership can be found at the Torbay and Devon Safeguarding Adult Partnership public website: www.devonsafeguardingadultpartnership.org.uk

Learning from Safeguarding Adult Reviews

The TDSAP must arrange a Safeguarding Adults Review (SAR) when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is a concern that partner agencies could have worked more effectively to protect the adult. Boards must also arrange a SAR if an adult in its area has not died, but the Safeguarding Adult Board (SAB) knows or suspects that the adult has experienced serious abuse or neglect. Boards may also arrange for a SAR in any other situations involving an adult in its area with needs for care and support if it deems it appropriate. The focus of SAR's is to identify learning not to apportion blame.

One referral has been commissioned by the TDSAP relating to a Torbay resident during 2021/22. The learning review will form part of a thematic review following similar referrals received from within Devon County Council.

The new partnership arrangements will support greater collective learning outcomes across the local safeguarding adult partnership. For example, learning outcome events will occur in June and July 2022 for frontline staff and a webinar event in March 2022 provided an overview of local arrangements and current activity and responses.

Advocacy for people unable to make decisions for themselves

We continue to use advocacy services across the three legal frameworks: Mental Health/IMHA, Mental Capacity/IMCA and Care Act this is via a contract with Devon Advocacy consortium. A recent promotion of the Care Act advocacy service has been undertaken, resulting in an increase in referrals. The IMCA service is really well used. We regularly refer people and have contract monitoring systems in place to monitor uptake of services.

Deprivation of Liberty Safeguards

This is a key Safeguarding issue where sharing experience together as partners is critical. Safeguarding in this context is about ensuring that those who lack capacity and are residing in care home, hospital and supported living environments are not subject to overly restrictive measures in their day-to-day lives, but high risk of harm is mitigated. This is known as Deprivation of Liberty Safeguards (DoLS) Safeguarding - for example where due to the serious onset of dementia an individual's capacity to act safely is significantly affected. In the past year we have seen a positive increase in the number of patients being referred to and from local hospitals. We have also been planning and preparing for the implementation of the new legal framework resulting as a consequence of the Mental Capacity (Amendment) Act 2019. The framework creates new 'Responsible Bodies' who will have accountability to ensure that Liberty Protection Safeguards (LPS) are granted for people in their care. We are proactively working across the integrated care system to ensure consistency of approach and equity across Torbay and Devon local authority boundaries.

Learning and Improvement and Quality Assurance

The Torbay and Devon Safeguarding Adult Partnership Learning and Improvement and Quality Assurance Groups has been focussed on several work streams including multi-agency case audit; embedding learning into practice: training and competency framework review. In addition, Safeguarding Adult and Mental Capacity Act Training is now mandatory for all adult social care

staff. The framework is aligned to national competency standards and is also accessible to appropriate staff from partnership organisations. Our aim is to achieve 90% compliance across both frameworks for level 1 training and 85% for all others.

Safeguarding Adults: A Summary

Whilst our performance is good, we must constantly strive to understand emerging issues for Safeguarding Adults in Torbay and act proactively to maintain our performance. Our new partnership Board arrangement has assisted in driving a consistent approach in these agendas across our local safeguarding adult partnership. A key message is that safeguarding adults is everyone's business, and we are all part of our local safeguarding adult team. When adult abuse concerns are raised, we work in a multi-disciplinary and multi-agency context to understand risk and ensure responses are person centred, include the right people, and include the right partner agencies. Our main focuses in the forthcoming year are to continue to embed learning from safeguarding adult and quality checker reviews, plan and prepare for the new Liberty Protection Safeguards system and apply the making safeguarding personal principles of practice in all our responses.

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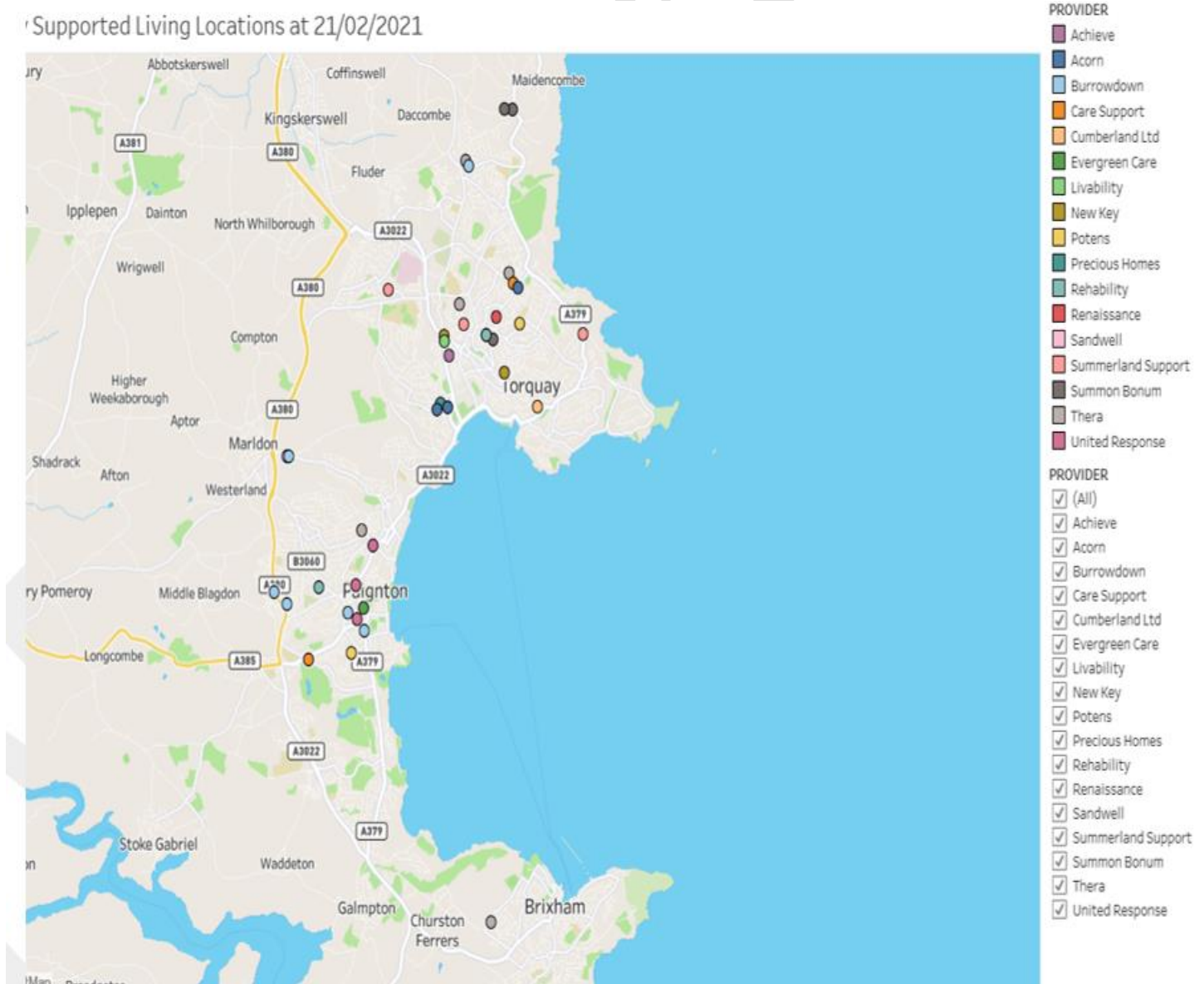
Improved wellbeing through partnership

We continue to work with our local partners in the public, private, voluntary and community sectors to tackle the issues that affect the health and wellbeing of our population. Partnership working with individuals and communities has enabled many to find alternative solutions and address their own health and wellbeing.

Focus on Supported Living Provision

Supported living increases self-determination, independence, and citizenship, and enables people to be part of their community and develop natural circles of support.

There are 23 supported living providers in Torbay, providing accommodation with support to over 250 people. About 70% of supported living tenants are people with a learning disability.



The map above shows the geographic distribution of supported living providers – some have more than one property.

Most providers are on the Torbay Supported Living Framework which facilitates referrals from practitioners through a vacancy register, and provides a focus on promoting people's independence, quality of life, health, and well-being. Only one provider is not on our Framework but working towards the same quality measures.

Developments

- During the summer of 2021, a group of the Learning Disability Ambassadors took part in the interviews and assessment of new providers applying to join our Supported Living framework.
- To support the empowerment of people finding/identifying their own supported living accommodation, rather than being placed, work began on the geo-mapping of Torbay's supported living resources. The aim is to have a 'shop-window' where local people, their family carers and local providers can see what housing options there are, and where.
- In Torbay's Market Position Statement and Commissioning Blueprint, published in 2021, we identified the aim to significantly increase supported living provision for people with learning disabilities, autism, and mental health issues, both to enable people to leave residential care, and to divert people from entering it. We also recognised the need for more supported living providers who were skilled at providing enabling support to people with complex issues and behaviours that challenge, using the least restrictive practice, and developing a person's ability to self-regulate.
- In Autumn 2021/22 we began re-writing the specification for Supported Living, and developing new Service Quality Standards. The five Service standards cover person-centred planning, individual choice and control, staff

Focus on Enhanced Intermediate Care

We have invested in Enhanced Intermediate Care services to help people stay independent at home longer. Intermediate care also aims to avoid hospital admission if possible and delay people being admitted to residential care until they absolutely need to. Intermediate Care is a key requirement in facilitating early discharges from hospital and supports or urgent community response to help prevent inappropriate hospital admissions. We work to ensure Enhanced Intermediate Care is fully embedded working with GPs and Pharmacists as part of the health and wellbeing teams within Torquay, Paignton and Brixham. We also have a dietician in the Torquay and Paignton and Brixham localities who have been invaluable during any Covid Care Home Outbreaks

We have developed stronger links with the ambulance service and the acute hospital which means that the person experiences a more seamless service between settings. We work with the Joint Emergency Team in the Emergency Department (ED) to prevent an unnecessary admission into the hospital when they present in ED.

We are doing a virtual multi-disciplinary team meeting with the Care Home Visiting Service, Older Mental Health Services, dietician, pharmacist, and Health Care for the Older Person Consultants. This happens weekly and we refer any people in our Intermediate Care service who we feel would benefit from this specialised group of clinicians. This results in the person receiving suggested

care by the consultants without having to attend an appointment. This service has been extended so that the localities can discuss any people who are either in their own home or a care home placement. This has promoted proactive treatment for these people

The average age of people benefitting from this service is 83 years old. The deeper integration of these services has helped ensure people have shorter stays in hospital. The implementation of a 'discharge to assess at home' pathway has further developed the ability of the organisation to care for people at home and we always work towards the ethos that 'the best bed is your own bed'.

Focus on the Torbay Voluntary Sector and Adult Social Care

Adult Social Care (ASC) and the Voluntary and Community Sector in Torbay is built upon long standing partnerships between the sectors during 20/21, that have been enhanced in response to the pandemic.

Torbay Council have taken a commissioning led role in developing the sector and considerable progress and common purpose has emerged and been capitalised on as part of the Torbay ASC plan.

The excellent response to the pandemic made by setting up the community helpline in Torbay and mobilising volunteers to support people in locked downs and later at the vaccination centres, have proven a catalyst for a range of changes and innovation.

- Support for the community helpline and its development into a potential gateway to Adult Social Care in partnership with a lead Trust contract began in 20/21 learning from the success of the Community helpline.
- The community and voluntary sector in responding to the pandemic demonstrated the value of an asset-based approach and how community organisations can support local people.
- The use of the Adult Social Care Council precept to fund asset-based offers and test of change projects across a range of activities to develop the sector innovations.
- Well attended monthly Voluntary Sector (VS) and community sector steering group including the Council, many VS organisations, CCG, Public Health, Social Prescribers, Integrated Care Organisation staff, Housing, food alliance, Debt experts, Carer's rep and invited guest speakers. The forum became based on 'go design' principles and equal partnerships. Honesty and transparency ethos grew, and much was achieved, greater than the sum of its parts with local people at the heart of our focus.
- The VS set up its own representative network that has improved communication within the sector and with statutory bodies.
- From all this grew a sense of a 'Torbay way' with thriving communities where people could prosper and a developed joint voice that came from the response to the pandemic.

The work undertaken by the VCS is intrinsic in Torbay and to our system. It is a work in progress and by bringing organisations together, creating a network of strong, well-established services and a strong community asset-based infrastructure it can delay and divert entry in the NHS and social care whilst addressing emerging need sooner.

The role of voluntary sector in 20/21 was proven key in the Adult Social Care plan and the Council and Trust's partnership to build up and support the community sector so we can support the people in our community in most need of our services.

On a final note, we are all aware and value the tremendous work undertaken by volunteers in Torbay who do so much to make this a more pleasant place to live for so many residents & visitors. It would be impossible to list the many longstanding groups & organisations as well as individuals who do so much for the Bay, often unsung & unnoticed.

Focus on Technology Enabled Care Services (TECS)

A Technology Enabled Care Service (TECS) is available across Torbay. Commissioned in 2018 by Torbay and South Devon NHS Foundation Trust, the service is provided by NRS Healthcare located in Paignton. TECS provides solutions to individuals to keep them safe and independent in their own homes for longer, potentially delaying any need for formal service interventions.

NRS Healthcare offer a private purchase option so that people can choose different ways to support how they access the community and live as independently or care for loved ones. For those who are eligible following a Care Act Assessment, TECS will be considered before other packages of care are put in place.

During 21/22, the supported service has grown by 18% and has amassed a client number of 600 for the first time since TECS has been in place. The rate of growth suffered compared to previous years which is likely due to not having the capability to engage with our workforce in person and a vacant co-ordinator position for 4 months at the end of 2021.

In 2021 the service delivered package of care reduction cash savings of over £40k, with an estimated preventative avoided cost of over £3.8 million. This is an increase from the previous financial year from £18k cost reduction with an estimated £2.5 million avoided costs.

This year special work has gone into collaborating with the Unpaid Carers service in supporting unpaid carers with TECS to enable them in their roles and help reduce stress and risk of carer breakdown. Many of these free offerings have been extremely useful in supporting carers in their roles and some clients have gone on to make the installation permanent beyond the free trial and support period.

In April-May 2021 the service underwent a major upgrade to the ordering system for TECS, moving from a paper-based form system to an online ordering tool called iRIS4 hosted by our provider, NRS Healthcare.

This contract has supported people from managing medications independently through to allowing people to access their community with TEC phones linked to 24/7 care for emergencies. The provider NRS have been developing a new system to support people being discharged from hospital through until their assessment has been completed in their home while having access to a care line. Work has started with public health to use TEC to support people with diabetes and mental health so that they are able to manage and live full lives.

Mrs B's story

Mrs B is 80 years old, and often forgets to take her medication in the morning. She has a daughter who works full time and is unable to support Mrs B with her medication. Mrs B's daughter has contacted the TEC team and asked if there was a TEC solution that would help Mrs B manage her morning medication independently, thus avoiding the risk of hospital admission.

The TEC team discussed Memrabel 3 as a TEC solution that can meet her needs. The TEC team gained consent from Mrs B to install Memrabel 3. Mrs B and her daughter were shown by the TEC team how to operate the Memrabel 3. Mrs B can now manage her medication without support from carers.

Mrs B has confirmed that since she started using the Memrabel device, her anxiety level has reduced dramatically. She is now in control of her own medication and feels a greater sense of control over her condition. Mrs B's daughter reported that she feels relieved that her mum can remain independent and in control of her medication.

The Memrabel 3 is a calendar clock that is used to prompt and remind clients to carry out tasks that are repeated daily, or in any other frequency, as well as ad-hoc, one-off reminders that family members or support networks can send to the device using an app.

There are over 100 pre-installed audio, picture, and video files. An unlimited number of personalised reminders can be created using an SD card or Flash Drive (using a phone or PC) and inserted into the Memrabel 3.

The calendar clock has an HD touchscreen and can connect to the internet via Wi-Fi. The display can show an analogue or digital clock, date, day of the week and/or time of day (e.g., morning or night). It also has a feature to display a slideshow and play music.

Mrs M's story

Mrs M is a fiercely independent 85-year-old female who lives alone in a retirement flat, receiving four daily visits to help meet her care and support needs following hospital discharge. When Mrs M's daughter Karen contacted NRS to discuss her mum's discharge from hospital she mentioned that prior to going into hospital Mrs M was distressed by the noise made by her existing lifeline. Mrs M also has Autistic traits and Karen wondered if there was an alternative piece of equipment available or the possibility of reducing the volume.

After NRS did some investigating and spoke with the TECS Team, NRS suggested a new digital lifeline unit that is based on digital (SIM card or Internet connection rather than analogue (phone line).

NRS installed this device prior to Mrs M's discharge the new device has been programmed to verbally update Mrs M that the call is being progressed. NRS have also adjusted the conversation level to suit Mrs M. Karen has been very pleased with the service and has reported it has improved her mum's life dramatically.

Mr G's story

Mr G is 77-year-old who lives alone and receives three visits a day to enable him to meet his care and support needs because of his dementia. Mr G has a daughter who lives locally, and he likes to go out for daily walks. Usually, Mr G takes the same route, however, there have been occasions when he has got lost and has been taken home by the police. Mr G already had access to a GPS tracker called Footprint as fears for his safety if he lost his way are not new. The GPS tracker connected directly to his daughter rather than via a call centre but unfortunately due to Mr G's Dementia he started to press the SOS button more frequently as he was unsure what the button did. This was causing extra stress to Mr G's Daughter as she was being called multiple times a day. The reasons for the initial GPR installation remained true including remain independent in his own home; to enable choice and control with his daily walks but ensuring his safety and easy location if he gets lost; but also, to give him reassurance that he can call for help should he need it.

Mr G's social worker approached the TEC service to help find a solution. The TEC service identified replacing the Footprint with a piece of equipment called Oysta Lite which is a small GPS tracker device with a discreet SOS button to stop him from pressing the button unnecessarily and causing extra stress to Daughter receiving calls that are not emergencies.

Mr G has not been affected by the change of equipment and has enabled him to continue with his daily routines, but it has made a significant improvement to the life of Mr G's daughters.

Financial Position

Financial position and use of resources (Trust elements)

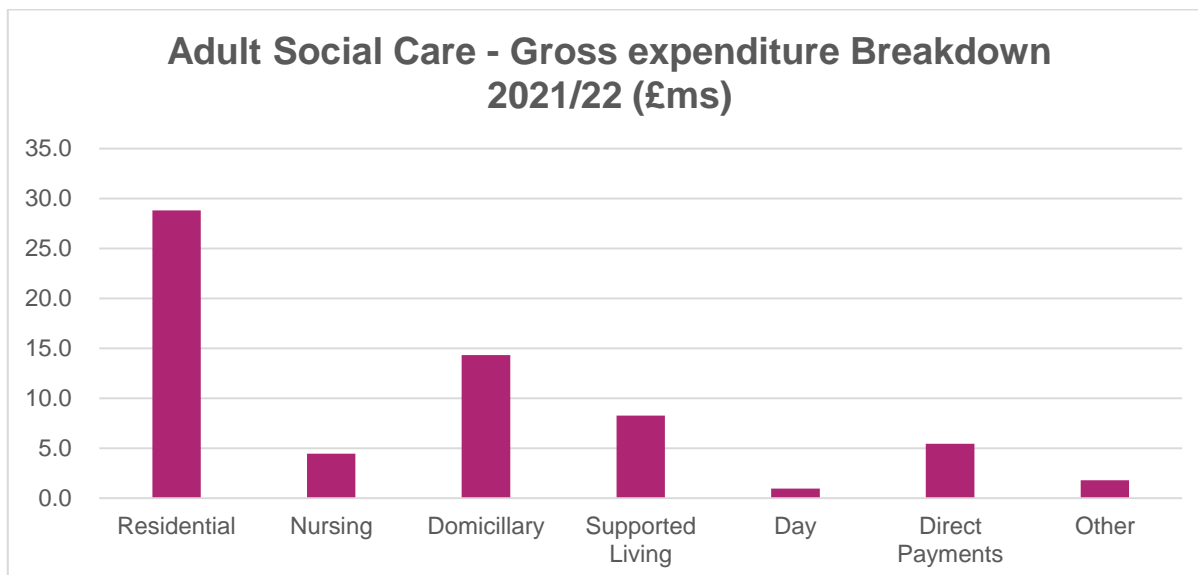
Our aim with this section of the review is to describe the financial resources available and how they have been used in the care sector. On 1st October 2015 an Integrated Care Organisation (ICO) was formed and this organisation's remit was to provide Adult Social Care (ASC) on behalf of the population of Torbay. From a financial perspective the Council's role as a commissioning body is to provide a funding contribution to the overall running costs of the ICO. In 2021/22 the Core contract value was £45 million plus £2m held as a specific contract contingency. In 2021/22 this contingency was fully utilised meaning a total contribution of £47m was made to cover cost of client care and any operational costs.

The ICO provides a diverse range of service, of which ASC is a part. The ASC aspect specifically comprises of care management and social care support across Torbay as well as the cost of social workers, community care workers, occupational therapists, physiotherapists, finance and benefit assessors and support service staff. The Council contribution towards ICO running costs therefore aims to cover the cost of these staff, in addition to the actual cost of client care (outlined in more detail below).

The vast majority of ASC spend is on the purchase of client care (including residential, nursing, day and domiciliary care) from independent providers. The majority of these providers are based within Torbay; however the ICO also funds some specialist residential care provided out of area. At any point in time there is on average 2,300 people receiving a service of some type.

Net expenditure on the cost of care totalled £50.4m in 2021-22. This is the net figure after taking in to account all client contributions towards the cost of care.

Under national legislation people assessed as having a social care need are also given an individual financial assessment. This assessment can result in a client being asked to make a contribution towards the cost of any care that the Council then puts in place. The income collected from these client contributions in 2021/22 amounted to £13.6m. The total (gross) expenditure on services was therefore £64.0m and the allocation of this gross expenditure across different types of services is illustrated in the following chart.



These services are provided to clients aged 18 to over 100 years old, with a range of needs such as learning disabilities, mental health issues, dementia, as well as those with sensory or physical disabilities, vulnerable people, and the frail and elderly.

In addition to the above core spend, the financial year 2021/22 was unprecedented with the impact of **Covid 19**. The Independent Sector market within Torbay needed additional financial support for it to play its part in dealing with the pandemic. Funding of c.£9.5m was passported to providers through the Trust accounts and covered the following areas.

- Local authority specific grants of c.£6.6m to cover infection prevention & control, rapid testing vaccines workforce retention and market sustainability.
- Through Devon CCG accessing National funding, expenditure of c£2.9m was incurred for packages of care in relation to hospital discharge process (HDP).

Throughout 2021/22 the trust has faced a number of challenges, driven by sustained pressure from the Acute system and commercial market volatility.

There has been an increase in complexity and market fragility which has seen the average cost of 'packages of care' rising throughout the year (over and above any inflationary uplift). Underpinning this is the dynamic between care work and hospitality work and the latter have increased remuneration to attract workers into their sector. To counter this, providers have been under pressure to exceed these offers if they wish to retain and recruit staff. Part of the COVID funding in 2021/22 centred on work force and retention schemes and it is hoped that some of these initiatives will have had a positive and permanent impact on staffing numbers available within the market.

Financial outlook for 2022-23 and beyond

In 2022/23 there will be no specific government COVID funding to support hospital discharge or the local authority as it continues to support the market on COVID matters.

The 2022/23 fee setting process is now complete and a new structure communicated to providers. The fee uplift is on average 6.4% and takes into account employee cost increases through the MLW and the increased NI contribution. It is hoped this level of uplift will help stabilise the rates in

the short term, and are broadly in line with the rest of Devon. However, it is likely that continued commercial pressures impacting recruitment and costs, could put pressure on fees during the year.

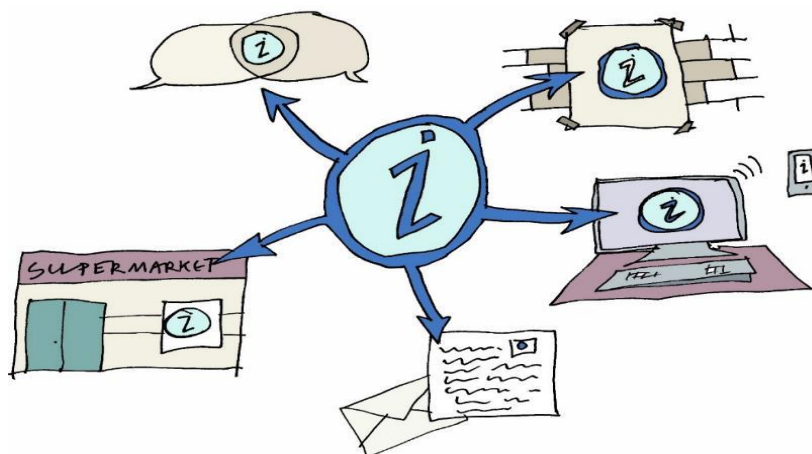
2022/23 also sees the introduction of two elements relating to the Build Back Better reforms. Firstly, the Council will need to undertake a Market Sustainability and Fair cost of care / exercise by mid-October 2022. Secondly, preparation work towards the Charging reform will also commence.

The ICO and its partner organisations are committed to ensuring resources are managed so that the ICO can provide the best level of care, for the highest number of clients. Both the Council and Devon Clinical Commissioning Group acknowledge the pressures facing social care and continue to believe that the ICO is still best placed to manage these services and a further two-year extension has just been added to the agreement (until 31st March 2025).

The ICO will aim to achieve this through the managing of resources across health and social care to deliver a more efficient and effective profile of expenditure. This is needed not only to maintain a financially stable and sustainable model of care, but one that has the ability to improve people's experiences of the service. Such development will be done in consultation with the Council and, where it is necessary to make changes to the way services are delivered. Consultation will take place with the people and carers who use those services.

Looking after Information

Everyone at Torbay and South Devon NHS Foundation Trust who handles personal information understands the fundamental rights of our data subjects (patients and service users) and ensures the data is held securely, accessed only when required, kept up to date and shared in line with best practices and UK law. The Trust has clear policies to support staff in handling data in a safe way adhering to UK data protection laws. Our Trust website informs the public how we handle personal information promoting a culture of transparency.



The Trust must have appropriate guidance for all staff and our processes are robustly documented. This is assessed by our submission to the Data Security and Protection Toolkit which measures the organisation against the 10 Data Security Standards developed by the National Data Guardian in 2017. The Trust met these standards in 2021-22

Where confidentiality has been found to have been breached the Trust has a formal reporting mechanism allowing effective investigation by local managers and specialist teams, supporting, and encouraging learning from all incidents. Any incident meeting specific criteria is reported to the Information Commissioner's Office via the Data Security and Protection Toolkit. In 2021-22 there were no incidents involving social care data that required onward reporting.

All breaches of confidentiality, information risks and evidence the Trust needs to demonstrate it meets the Data Security and Protection Toolkit is reviewed by the membership of the Information Governance Steering Group which is chaired by the Trust's Senior Information Risk Owner (SIRO)

Healthwatch response to the Local Account

Healthwatch Torbay welcome the opportunity to comment and provide a response to the Local Quality Account.

Firstly, we would like to say a big thank you to all the dedicated staff for their continued hard work and commitment over the past twelve months. As we start to recover from the Covid Pandemic we recognise that the continued focus on the impact and recovery of services provides significant pressures and challenges across the organisation.

We also recognise the difficulties with the workforce challenges and the implications this brings. Despite this we are encouraged to see the three-year Adult Social Care Improvement Plan continues with its development especially putting people at the centre of their care.

Healthwatch welcomes the opportunity and the ambitious plans to have a wider collaborative approach, working with the VCSE Partners to deliver a wider range of services to meet the needs of the local population requiring support.

We need to ensure moving forward that in order to create a more sustainable future for the Adult Care System that there is strong evidence to show improved outcomes from our service users by gathering feedback and learning from shared individual experiences

The new Front Door project is an innovative and responsive approach which brings integration into the community. However, we would welcome an independent evaluation to measure the effectiveness and successful outcomes for the community, especially around access to services and support to ensure it is person centred.

There is some concerns in the Local Account regarding the National Annual Survey which is now discretionary and we would recommend a more localised approach be used to determine overall satisfaction.

We understand the enormous pressure on Mental Health and recognise that the services have adapted well in responding to the needs of local people during these difficult times. We are aware this will be a challenge moving forward due to the demand for Mental Health support

Healthwatch are pleased to see that the Learning Disability Partnership Board have a good balance of people with lived experience, community groups and statutory sector to ensure the voice of local people are heard and play a part in decisions about new services strategies and policies.

We look forward to working in partnership and collaboration next year with our statutory and VSCE partners and the opportunity to enhance service user involvement throughout the Torbay Adult Social Care Improvement Plan



Dr Kevin Dixon, Chair



Pat Harris, Chief Executive Officer

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Appendix 1 – At a Glance Performance data

Measure	2019/20	2020/21	2021/22	% change
Number of requests for support	6,210	5,407	8,420	55.7%
Number of people received who received one-off support	479	443	771	74.0%
Number of people who received short term reablement services	1,219	1,275	2,226	74.6%
Number of people who did not go on to receive a service	2,434	2,136	2,128	-0.4%
Number of people who started to receive an on-going support service	667	544	1,092	100.7%
% of service users who received a community-based service through self-directed support	88%	72%	100%	38.5%
Number of people who were directed to other types of help and support	2,063	1,921	1,871	-2.6%
Number of services users receiving direct payments	532	482	423	-12.2%
Number of safeguarding concerns raised	753	1,098	998	-9.1%
Number of people who received long-term support services	3,047	3,225	3,152	-2.3%
% of people aged 18-64 who received long-term support services	39%	36%	37%	3.0%
% of people aged 65+ who received long-term support services	61%	64%	63%	-1.7%
Number of people who received home care support	1,541	1,729	1,775	2.7%
Number of people in permanent residential placements	940	930	949	2.0%
Number of Carers on carers register	4,176	4,406	4,747	7.7%
Number of Carers assessed and reviewed	1,277	1,187	1,355	14.2%
Number of Carers with direct payments	609	546	678	24.2%
Number of people with mental health issues who were supported by services	315	343	386	12.5%
Number of people with learning disabilities living in residential or nursing accommodation	110	93	92	-1.1%

Appendix 2 - Adult Social Care Outcome - Key Performance Activity

Domain 1: Enhancing quality of life for people with care and support needs

Domain & KPI	2020/21 Outturn	2021/22 Outturn provisional	2020/21 Target	2021/22 Target	2020/21 England Average
ASC 1A: Social care-related quality of life	19.3	19.0	19.7	19.7	n/a
ASC 1B: The proportion of people who use services who have control over their daily life	85.1%	78.9%	82.0%	82.0%	n/a
ASC 1C part 1A: The proportion of people using social care who receive self-directed support (adults aged over 18 receiving self-directed support)	72.2%	100.0%	94.0%	94.0%	92.2%
ASC 1C part 1B: The proportion of people using social care who receive self-directed support (carers receiving self-directed support)	95.9%	100.0%	85.0%	85.0%	75.3%
ASC 1C part 2A: The proportion of people using social care who receive direct payments (adults receiving direct payments)	20.5%	18.9%	28.0%	28.0%	26.6%
ASC 1C part 2B: The proportion of people using social care who receive direct payments (carers receiving direct payments for support direct to carer)	95.9%	94.6%	85.0%	85.0%	75.3%
ASC 1D: Carer-reported quality of life	n/a	7.4%	n/a	9.0%	n/a
ASC 1E: Proportion of adults with a learning disability in paid employment	7.2%	6.5%	7.0%	7.0%	5.1%

Domain & KPI	2020/21 Outturn	2021/22 Outturn provisional	2020/21 Target	2021/22 Target	2020/21 England Average
ASC 1F: Proportion of adults in contact with secondary mental health services in paid employment (commissioned outside ICO)	4.0%	3.4%	6.4%	6.4%	9.0%
ASC 1G: Proportion of adults with a learning disability who live in their own home or with their family	82.2%	81.8%	80.0%	80.0%	78.3%
ASC 1H: Proportion of adults in contact with secondary mental health services who live independently, with or without support (commissioned outside ICO)	66.0%	62.9%	60.0%	60.0%	58.0%
ASC 1I part 1: Proportion of people who use services who reported that they had as much social contact as they would like	35.3%	40.3%	50.0%	50.0%	n/a
ASC 1I part 2: Proportion of carers who reported that they had as much social contact as they would like	n/a	34.4%	n/a	41.5%	n/a
ASC 1J: Adjusted Social care-related quality of life – impact of Adult Social Care services	0.392	0.372	no target	no target	n/a

Domain 2: Delaying and reducing the need for care and support

Domain & KPI	2020/21 Outturn	2021/22 Outturn provisional	2020/21 Target	2021/22 Target	2020/21 England Average
ASC 2A p1: Permanent admissions to residential and nursing care homes, per 100,000 population. Part 1 - younger adults	17.7	27.2	14.0	14.0	13.3%
ASC 2A p2: Permanent admissions to residential and nursing care homes, per 100,000 population. Part 2 - older people	417.3	772.7	450.0	450.0	498.2
ASC 2B p1: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services. Part 1 - effectiveness	77.8%	77.1%	76.5%	76.5%	79.1%
ASC 2B p2: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services. Part 2 - coverage	3.6%	7.4%	5.0%	5.0%	3.1%
ASC 2C p1: Delayed transfers of care from hospital per 100,000 population. Part 1 - total delayed transfers	n/a	n/a	n/a	n/a	n/a
ASC 2C p2: Delayed transfers of care from hospital per 100,000 population. Part 2 - attributable to social care	n/a	n/a	n/a	n/a	n/a
ASC 2C p3: Delayed transfers of care from hospital per 100,000 population. Part 3 - jointly attributable to NHS and social care	n/a	n/a	n/a	n/a	n/a
ASC 2D: The outcomes of short-term support % reablement episodes not followed by long term SC support	86.8%	89.6%	83.0%	83.0%	74.9%

Domain 3: Ensuring that people have a positive experience of care and support

Domain & KPI	2020/21 Outturn	2021/22 Outturn provisional	2020/21 Target	2021/22 Target	2020/21 England Average
ASC 3A: Overall satisfaction of people who use services with their care and support	71.2%	67.7%	70.0%	70.0%	n/a
ASC 3B: Overall satisfaction of carers with social services	n/a	45.9%	n/a	46.6%	n/a
ASC 3C: The proportion of carers who report that they have been included or consulted in discussions about the person they care for	n/a	71.3%	n/a	75.7%	n/a
ASC 3D part 1: The proportion of people who use services who find it easy to find information about services	70.8%	72.1%	80.0%	80.0%	n/a
ASC 3D part 2: The proportion of carers who find it easy to find information about services	n/a	61.4%	n/a	75.0%	n/a

Domain 4: Safeguarding adults who circumstances make them vulnerable and protecting from avoidable harm

Domain & KPI	2020/21 Outturn	2021/22 Outturn provisional	2020/21 Target	2021/22 Target	2020/21 England Average
ASC 4A: The proportion of people who use services who feel safe	72.2%	64.8%	72.3%	72.3%	n/a
ASC 4B: The proportion of people who use services who say that those services have made them feel safe and secure	81.6%	85.2%	85.0%	85.0%	n/a

Notes:

- RAG rating is against ASA target. Green = on target or within agreed tolerance
- Differences in survey KPIs are not always statistically significant due to survey margin of error
- Biennial carers survey 2020/21 postponed due to covid.
- 2020/21 ASC Survey optional due to covid so no benchmarking available.

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