

# Waiting lists and outstanding support package reviews within Torbay Adult Social Care Baywide Report

for

## Torbay Council Oversight & Scrutiny Committee

Committee date: 27 October 2022

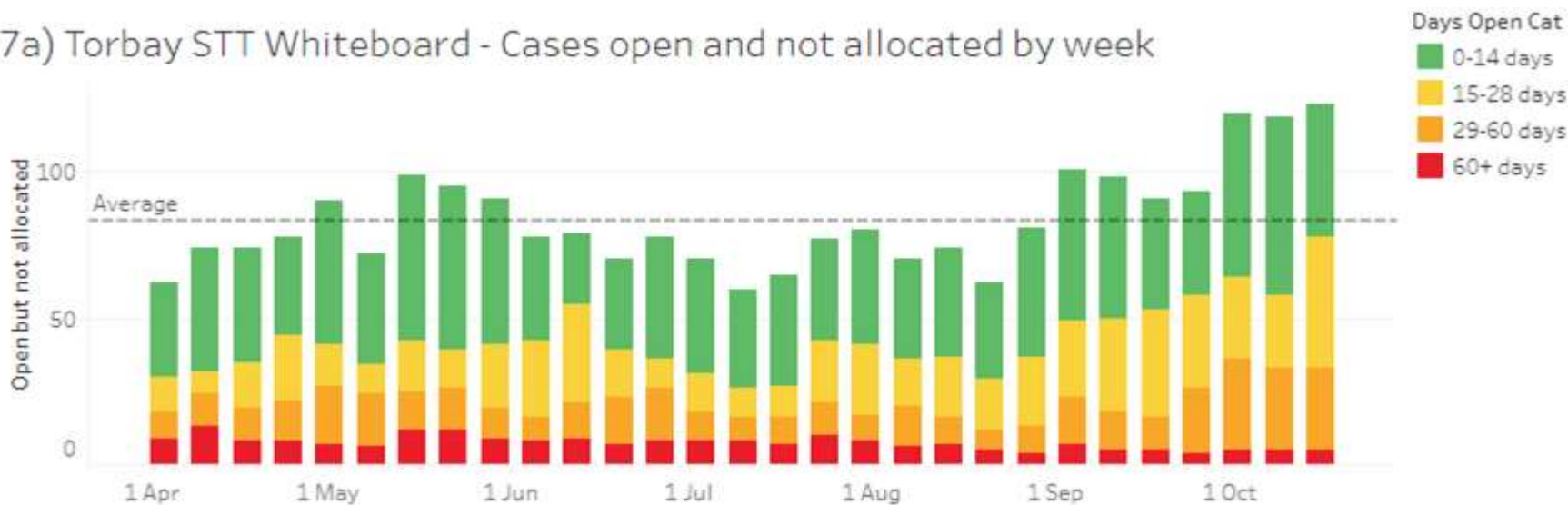
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on 13 October 2022

*This report is written so as to provide a situational overview of waiting lists in Front End (Triage) and Complex Care Team (CCT) within the Adult Social Care (ASC) Bay Wide Teams and also the overall picture of overdue reviews. Waiting list information is held centrally using digital White Boards and the data for to Overdue Reviews is extracted from PARIS.*

**Triage waiting list**

The Torbay STT Whiteboard graph below indicates the weekly waiting list levels for the Front-End Services within ASC from October 2021 to October 2022. It is a waiting list detailing S.9 assessments combining Discharge to Assess (D2A), individuals dropping below financial threshold, referrals from other agencies and routes.

7a) Torbay STT Whiteboard - Cases open and not allocated by week



The graph shows a steady increase in the waiting list over the last 12 months due to a range of contributory factors including (but not excluded to):

- Increase in overall number of referrals to the Front-End Service compared to 12 months previously for D2A and other S.9 assessments,
- Increase in the staff absence including sickness, particularly COVID, and vacancies,

- Operational pressure within other ASC Team leading to pressure in the Triage team, for example deficit of staffing in HSCC and CCT team. The front-end service has also encompassed the Single Point of Contact (SPOC) service within the interim structure

### **Management of the Triage Waiting List including the management of risk**

Risk and client safety is managed daily by triaging of all the work that comes through the Front-End service, including the waiting list. Triaging activities are completed by band 7 Social Workers (of which there are WTE 4.5) and this is overseen by the Front-End Services Lead. The Front-End team operate RAG (Red, Amber, Green) ratings and a “target action date” system. RAG ratings are defined as:

Duty (completion same day): Typical work in this category includes safeguarding, welfare concerns, urgent carer breakdown, individuals without support, Discharge to assess (social care involvement / contact but visit carried out by Therapy), care handbacks (from agencies)

Red (within 7 days urgent for next allocation - the upcoming Friday (case allocation day): Typical work in this category includes carer breakdown (non-urgent), Individuals with care and support in place but change in need, D2A reviews (urgent visit carried out but follow up required)

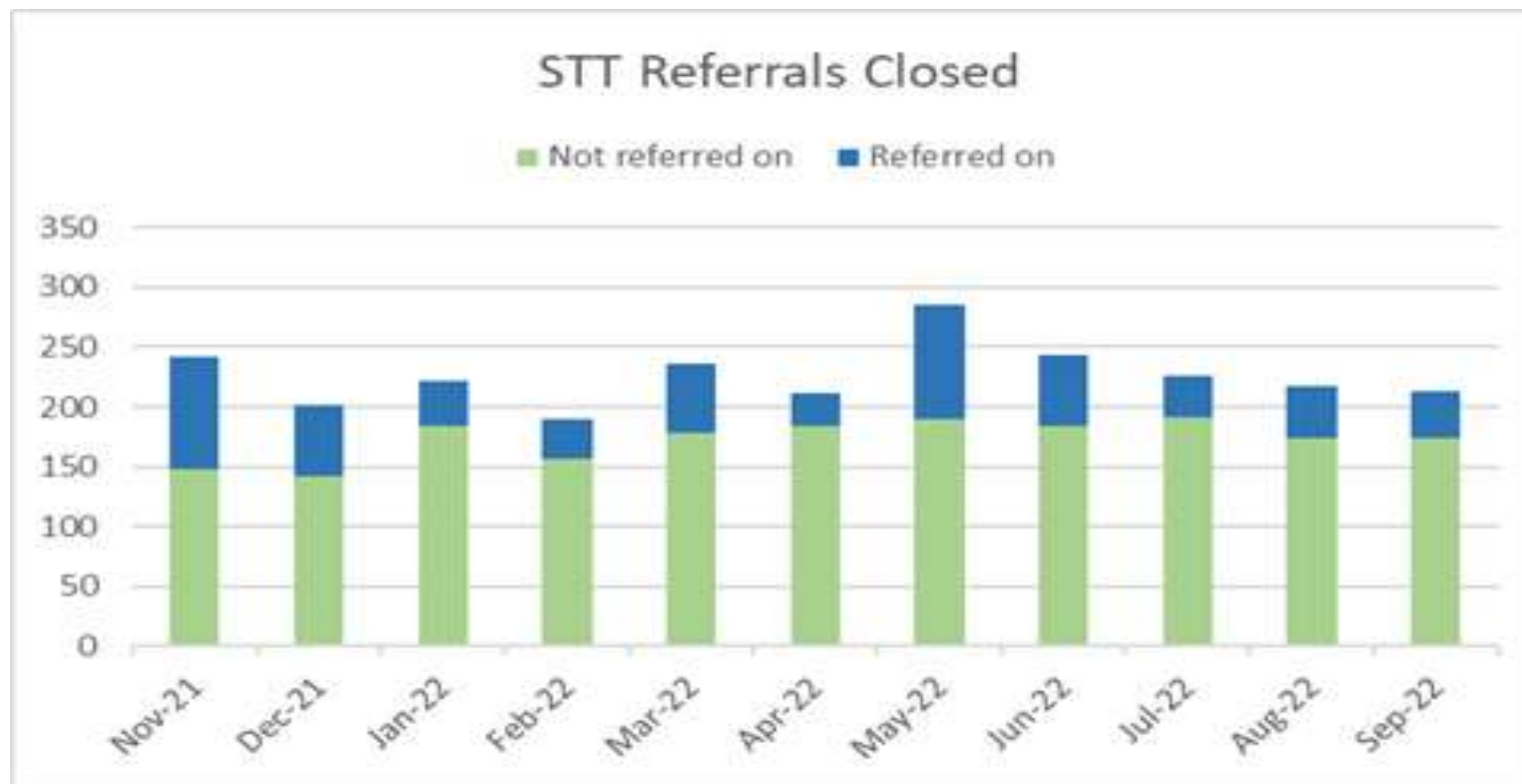
Amber (within 14 days): Typical work in this category includes respite requests, individuals spending down (reaching the social care financial threshold) within 28 days, D2A residential reviews (IHF funding in place and in a place of safety)

Green (a future appointment): POC and residential care reviews (work completed but review required), future dated individual spend down

With the exception of duty allocations, “target action date” ensure that clients waiting will be moved to the designated allocation day. Urgent cases would not be accounted for within the waiting list stats as they are allocated the same day or up to 72 hours (not allocated to the waiting list). The waiting list stats are captured on a weekly basis, thus not fully capturing the daily throughput of work.

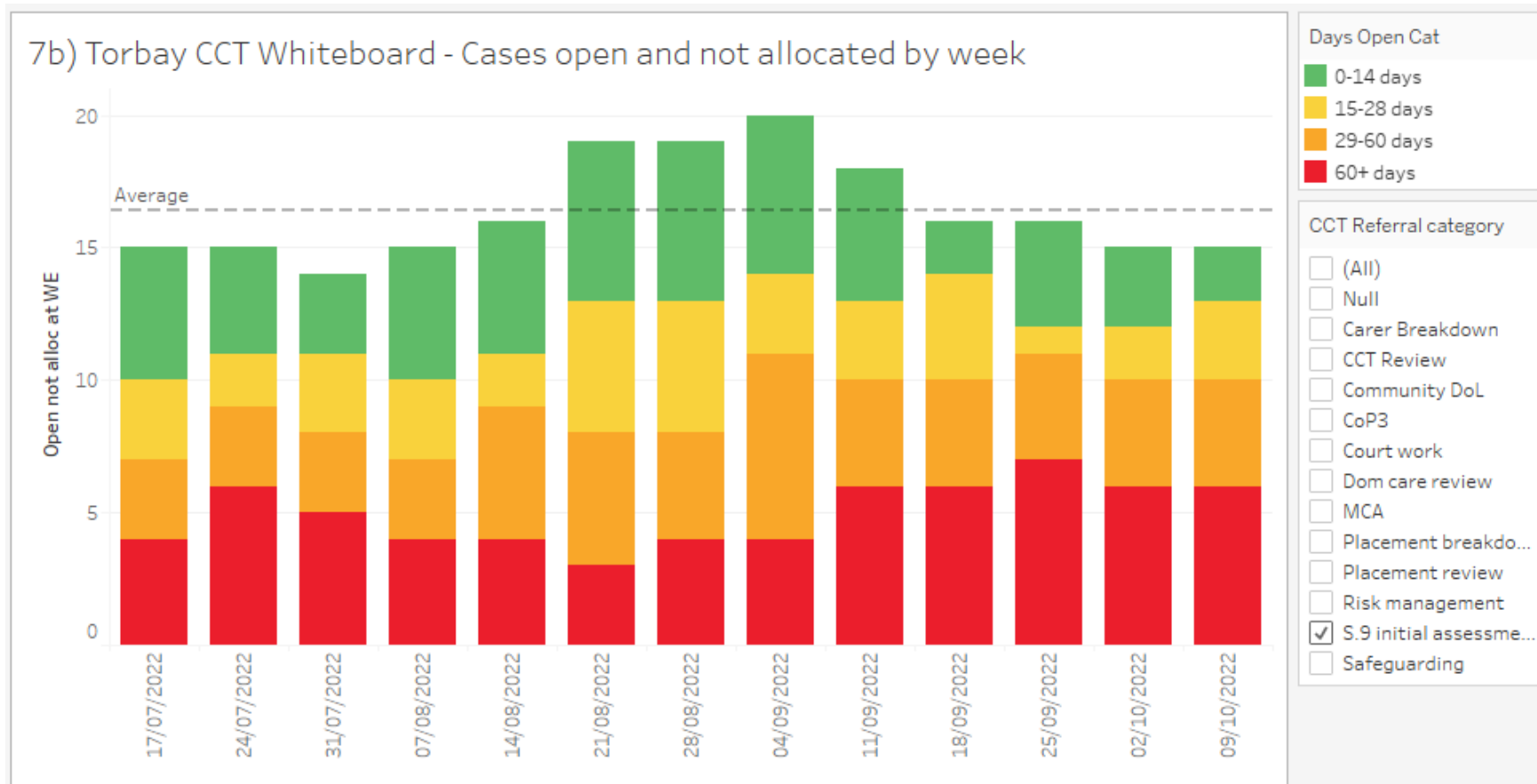
**Allocations and closures within the Front End by month**

The work within the FE service is captured within closures, with additional data collection as to the pathway of cases (allocated, referred on and to where etc). This is shown in the “SST Referrals closed” graph.



**CCT Waiting list**

The Torbay CCT Whiteboard graph shows the weekly waiting list for the Complex Care Team from July 2022 to October 2022. The data is only displayed from July 2022 because the filter for S.9 assessments was introduced from that date to support improvements in data capture and evidence-based decision-making.



The graph indicates a steady increase in the overall waiting list for CCT in respect of S.9 assessments, hitting a peak over the summer period where there was an increase in staff absence, mostly attributable to increased annual leave. The waiting lists for CCT have steadily increased over the last 12 months, following a similar trajectory of the Front-End Service.

Similarly, to the Front-End Services, this is due to a range of issues, including (but not exclusive to) the following factors:

- An increase in staff vacancies, support to other teams including rotational activities,
- Staff sickness and increased annual leave,
- Difficulties associated with social worker recruitment resulting in extended deficit of staff, and
- Increases (at times) with processes such as Providers of Concern and Whole Service Safeguarding to which CCT staff are deployed on an urgent basis

### **Management of the TCCT List including the management of risk**

The waiting list in CCT is monitored on a daily basis by CCT Lead Leanne Bruce and Claire Lloyd CCTeam2 Lead. This ensures priority allocations to be highlighted and allocated in a timely manner. Ongoing is targeted work undertaken by a Senior Social Work Practitioner within the CCT service who will contact clients and/or their representative(s) to ensure their safety. The monitoring information is updated on the CCT digital whiteboard. There are strong links between the FE and CCT services and flow of information, especially to alerting any change in information regarding client circumstances who are awaiting input from CCT. Additionally, CCT have recently also started to operate duty system to improve current processes. The CCT duty worker covers workloads for absent (due to leave or sickness) and respond to urgent matters on the CCT waiting list. Cases are triaged as follows:

Urgent – allocated the same day or within 24 hours: Typical work in this category includes safeguarding, duty work due (individuals with a sudden change in need, carer / care arrangement breakdown), cases that require urgent risk assessment / support

Cases to be allocated during planned weekly allocation: Typical work in this category includes new S.9 assessments, non-urgent change in need, complex BI process, risk enablement / risk assessment, Community DoLS, MCA's, court directed work

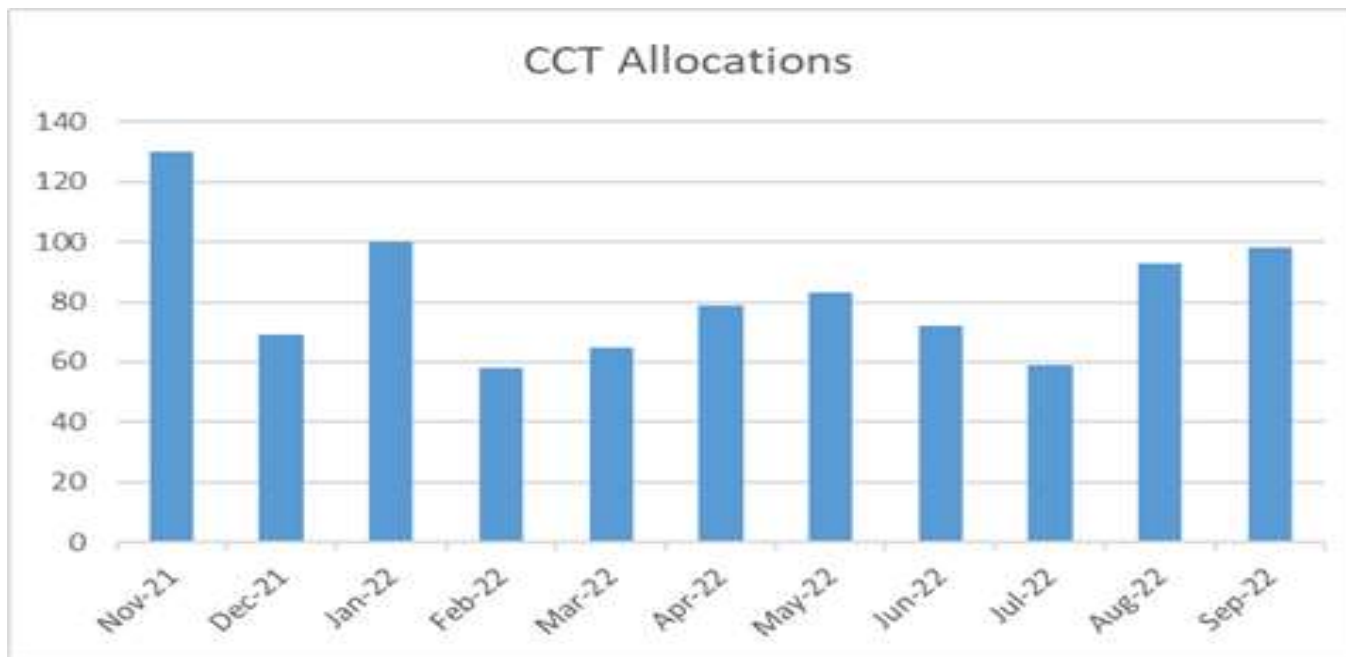
Future appointments: Typical work in this category includes overdue reviews, planned reviews (not overdue -care in place but review within 28 days), Planned move of car setting

Similarly, to the FE service urgent cases would not be accounted for within the waiting list stats as they are allocated within up to 72 hours (with safeguarding allocated the same day), whereas the waiting list stats are captured on a weekly basis, thus not fully capturing the daily throughput of work.

**Allocations within CCT**

The work within the CCT service is captured within the graph CCT Allocations.

There is a surge of allocations in January 2022 which is following a cessation of non-urgent work to support Christmas Leave. There is another dip in the summer months due to staff deficits followed by a steady increase throughout the end of August / beginning of September due to increase in overall staffing (new staff joining and less annual leave being taken).



### **Reviews in Adult Social Care**

The graph, Adult Social Care Annual Reviews, shows the overall number of reviews within adult social care including ASC and Community Mental Health Team. The overall compliance in terms of reviews needs to be improved and there is a targeted work plan underway to improve the current position:

- Over 400 reviews identified with the enabling market sector. This work is being undertaken by the R and I team, supported by the IPMO,
- Identification of categories of overdue reviews, i.e. reviewable equipment (sensory, OT, pendant alarms), residential and domiciliary care to support a targeted approach by relevant MDT Leads,
- Targeted identification of cases where there is evidence of a Social Care review within the last 12 months (data errors)
- Demonstration through our data recording of any between full review 'touch points' for all individuals with overdue reviews, and
- Senior Leadership Team agreement to the ringfencing of review-only work to be undertaken by the Review & Insights Team. The Review and Insight Team now have the dedication of one single Lead Social Worker who is responsible for overseeing all allocation and authorisations of this teams work



