

# SHEFFIELD CITY COUNCIL

## POLICY COMMITTEE DECISION RECORD

The following decision was taken on Wednesday 30 October 2024 by the Adult Health and Social Care Policy Committee.

### Item No

#### 8 CITYWIDE DEMENTIA STRATEGY

8.1 The Assistant Director for Living and Ageing Well in Adult Care and Wellbeing introduced the report which outlined and sought approval for the nine commitments of the new Dementia Strategy 2025-2030. It described the vision for adults living with dementia and how the city will become a dementia friendly place to live.

8.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care** Policy Committee:-

1. Approve the 2025 – 2030 Dementia Strategy.
2. Requests that the Director of Adult Health and Social Care provides the Committee with updates on the progress in delivering upon the commitments made on an annual basis.

#### 8.3 **Reasons for Decision**

8.3.1 Those living with dementia and their carers have told us that 2019-2023 Dementia Strategy has made a significant positive difference to how we support them. They also highlighted that we have a lot more to do to deliver on our vision which is to make sure people with dementia are supported to live life to their full potential. This strategy supports in delivering our vision through.

“Alone we can do so little; together we can do so much”

- Helen Keller -

#### 8.4 **Alternatives Considered and Rejected**

8.4.1 Do nothing and let existing Strategy expire. Agencies would continue to support those living with dementia and their carers, but it would mean a lack of focus and coherence. We would not be taking a coordinated approach to what our citizens living with dementia tell us. The sum of our parts is far greater than we are as individual organisations we can only harness this potential through the co-ordination the Strategy gives the city.

#### 9 CHANGING FUTURES PROGRAMME AND STRATEGY TO TACKLE INEQUALITIES AND MULTIPLE DISADVANTAGE

9.1 The Head of Commissioning for Vulnerable People and Communities introduced the report which set out a new 5 year Sheffield Strategy which will take the

learning from the Changing Futures Programme and further develop system wide support to some of the most vulnerable residents of the city. The strategy has been developed in partnership with other statutory and voluntary organisations and people with lived experience of multiple disadvantage.

The report asked for Committee approval for the Council to play a lead role in delivering the Strategy and a future resourcing plan to support the development of new service models to put the learning from the Programme into practice and improve outcomes for vulnerable people.

9.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care Policy Committee:-**

1. Approve the new citywide strategy to support people facing severe and multiple disadvantage.
2. Approve a recommissioning process to organise existing and, where available, new resources, into a reshaped service model to provide direct support to vulnerable adults including people with severe and multiple needs from 2026 in line with the principles and objectives in the strategy.
3. Approve the development by officers of an interim resource and delivery plan for 2025-26 to enable key services developed through the Changing Futures Programme to continue within existing budgets, whilst the recommissioning process recommended above takes place.

9.3 **Reasons for Decision**

9.3.1 The recommendations in this report, if accepted, will build on the successful work and learning from the Changing Futures Programme, turning this into a sustainable citywide strategy in future years to support some of the most vulnerable residents of Sheffield.

9.3.2 The Strategy will ensure better outcomes for people and communities including better health and wellbeing, reduced crime and exploitation, reduced homelessness and rough sleeping, and direct involvement and participation of people with lived experience of multiple disadvantage.

9.4 **Alternatives Considered and Rejected**

9.4.1 **Alternative Option 1:**

One option would be to bring the Changing Futures Programme to a close locally in line with the Governments National Programme and the External Grant Funding in March 2025.

9.4.2 All the partners involved in the programme are agreed that this approach would squander the rich insight and learning that has emerged from the programme and would stall the system change that has in many ways only just started to take root. It would mean scaling back activity and support for Coproduction which would go directly against the spirit of the programme and the energy and time that so many coproduction associates have personally invested in the programme.

9.4.3 **Alternative Option 2:**

An alternative option which was considered was for all partners to secure additional new resources from their budgets to make up the gap from the external Grant ending and continue to deliver the programme in the future in the same or similar way to the current Changing Futures Programme.

9.4.4 This option was not considered the best because, although having the additional new resources and the structure of the Changing Futures has given us a strong platform to start from, there have been drawbacks to having a standalone Programme of activity. All partners agreed that in order to really make the system change sustainable for the future it is necessary to widen the scope of the work and integrate the activity increasingly with other services and systems. In other words, to deliver more than just a new service but a strategic system change ambition.

9.4.5 In addition to this, in the last year the uncertainty over public sector budgets, including delays to funding announcements due to the election and subsequent Spending Review and ongoing pressures on budgets, mean that it is increasingly difficult to find new additional resources for activities. The best way to achieve our ambitions as a Council is to have a longer term plan to integrate a range of resources under a new strategy, as set out in this report.

9.4.6 As we start to engage with partners to develop a new service model for the future, there is potential for other budgets and resources to be aligned with the Council's to widen the scope of a more preventative service to deliver other partner objectives. This will be something officers will pursue as we develop the process.

## 10 **ADULTS WORKING WITH PEOPLE DELIVERY PLAN**

10.1 The Operations Director in Adult Care introduced the report which provided the Committee with a six-monthly update to the Working with People Delivery Plan which was presented to Committee in March 2024. The Working with People Delivery Plan focuses on delivery of our Care Act 2014 requirements relating to assessments, reviews and individuals' wellbeing.

In addition, the aim of the Delivery Plan is to ensure that Sheffield has a robust response towards the Care Quality Commission Quality Statements of Assessing Needs, Supporting People to Live Healthier Lives and Providing Equity in Experiences and Outcomes. The plan was developed to coordinate our activities as a Council to ensure that we maximise the effectiveness of people's care by assessing and reviewing their health, care and wellbeing needs with them in the most effective way possible.

10.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care** Policy Committee:-

1. Endorse the update of the Working with People Delivery Plan.

2. Requests that the Strategic Director of Adult Care and Wellbeing continues to provide the Committee with updates on progress made against the Delivery Plan on a six-monthly basis.

10.3 **Reasons for Decision**

- 10.3.1 This is an update on a previously endorsed Delivery Plan in line with recommendations agreed at Committee.

10.4 **Alternatives Considered and Rejected**

- 10.4.1 This is an update on previously endorsed delivery plan in line with recommendations approved at Committee. No alternative options are available due to this.

## 11 **ADULT WORKFORCE STRATEGY DELIVERY UPDATE**

- 11.1 The Workforce Development Manager introduced the report which provided the Committee with an update on progress made with the Sheffield Care Sector Workforce Development Strategy 2023 – 2026 which was approved by the Adult Health and Social Care Policy Committee in March 2023. This update is in line with the cycle of assurance approved in June 2023.

- 11.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care Policy Committee:-**

1. Note the progress made with implementing the Sheffield Care Sector Workforce Development Strategy Delivery Plan 2023-2026.
2. Notes progress made with the development and implementation of the Health and Care Academy in Sheffield, hereby named Sheffield C.A.R.E.S.
3. Note the progress to develop a Sheffield Adult Workforce Celebration & Recognition Event in February 2025.
4. Note progress in implementing the Professional Development Plan and working to achieve the LGA Employer Standards for Occupational Therapists and Social Workers, Unison Ethical Care Charter and GMB Care Charter.
5. Notes the development of Care Sector Workforce Forums to involve and engage Social Care Providers, Voluntary Sector and Academia in further developing our approach to workforce development, wellbeing and including agreement of shared workforce standards.
6. Requests that the Strategic Director of Adult Care and Wellbeing continues to provide the Committee with updates on progress against the Strategy on a six-monthly basis, including updates made based on ongoing learning.

11.3 **Reasons for Decision**

- 11.3.1 The delivery plan gives a structured approach to delivery of workforce development improvements. Asking for regular updates and refreshes of the plan will keep the Committee, wider stakeholders, and the public the ability to

hold the Council to account for progress and provide an additional mechanism to input to future development.

11.3.2 Noting the planned Sheffield Care Sector Workforce Forums and Workforce Celebration & Recognition Event gives public commitment towards valuing our social care workforce.

#### 11.4 **Alternatives Considered and Rejected**

##### 11.4.1 Alternative Option 1

The strategy could have been a shorter-term vision. This was rejected because:

- there are significant challenges facing the social care system that are more long term in nature (such as training and recruitment of a quality workforce) so require longer term thinking.
- a shorter-term strategy would likely only be able to focus on the current challenges.
- market shaping needs a longer-term vision to allow local providers to develop the mix of services we're looking to deliver whilst remaining stable national drivers, such as new legislation, are in development but we cannot continue to wait for them to be finalised – we have a clear enough picture to be able to drive local transformation.

##### 11.4.2 Alternative Option 2

The strategy could have been smaller in scale, looking only to affect internal council services. This was rejected because:

- The scale of the challenges faced by adult social care need a system wide approach to be tackled effectively.
- Section 6 of the Care Act sets out the Council's duty to make arrangements for ensuring co-operation on the functions of relevant bodies in the local authority area relating to adults with needs for care and support and their carers. This includes those we have defined in the strategy as the adult social care system: the people and organisations that are involved in providing adult social care. Our strategy should reflect this approach.

## 12 **DASS REPORT**

12.1 The Assistant Director of Commissioning and Partnerships introduced the report which updated the committee on the Adult Care Strategy Delivery Programme and Performance.

Sheffield's Adult Health & Social Care Strategy was approved by the Cooperative Executive on 16th March 2022. This was the quarterly Strategy Delivery Update as part of the performance and Governance framework, last presented to committee on 19 June 2024, the paper:

- Provided a further scheduled update, aligned to the cycle of assurance, setting out the delivery progress and what's been achieved.
- Demonstrated how impact is being measured so that progress can be demonstrated in enabling citizens of Sheffield to live the life they want to live.

12.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care Policy Committee:-**

1. Note progress in delivering upon the Adult Care Strategy Living the Life You Want to Live.
2. Note progress with the Adults Partnership Board and collaboration with the Centre for Care Research Department at University of Sheffield and representatives from the Care Sector.
3. Note the performance milestones set out in Appendix 1.
4. Note the performance update and actions to deliver our expected standards.

12.3 **Reasons for Decision**

12.3.1 Asking for regular updates and refreshes of the Strategy Delivery Plan, Our Performance and CQC will keep the Committee, wider stakeholders, and the public the ability to hold the Council to account for progress and impact and will provide an additional mechanism to input to future development.

12.3.2 Approving the updated performance framework provides members with a framework to enable scrutiny of Adults delivery upon performance milestones and a clear framework to enable prioritisation and focus for improvement.

12.4 **Alternatives Considered and Rejected**

12.4.1 Alternative Option 1:

To not update the Performance Framework with Milestones. If the performance framework was not updated it would not enable a clear set of measures and a pragmatic trajectory towards delivering outstanding support for people of Sheffield.

12.4.2 Alternative Option 2:

To not provide an update to Committee. If an update is not provided to Committee, Members would not be able to be assured as to delivery in a transparent manner.

## **13 CARE HOME TRANSFORMATION AND S2A UPDATE REPORT**

13.1 The Programme Lead of the Commissioning Team introduced the report which sought approval for a Commissioning Strategy for Enhanced Care in Residential settings. This would include provision of Planned and Emergency Respite, Complex Care and Somewhere Else to Assess Discharge Provision.

13.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care Policy Committee:-**

1. Note progress in delivery of the Care Homes Transformation Plan.
2. Approve the Commissioning Strategy to develop and deliver Enhanced Care in residential settings to ensure sufficiency of provision for older adults aged 65 + who have a Complexity of Care Needs. This includes Enhanced Care, Planned and Emergency Respite Provision, and Somewhere Else to Assess Beds. For 24/25, the available budget for Older People's Care Homes is £52.6m. The development of Enhanced residential care and Planned and Emergency Respite will need to be delivered within the available resources.
3. Approve the associated high-level delivery plan for the next 2 years (2024-26) including the intention to re-procure, support, and sustain the market.
4. Approve a further extension for current providers on the Somewhere Else to Assess Contracts to the 30th September 2025.
5. Note that charging for Somewhere Else to Assess beds will begin from completion of the care and financial assessment, in line with the charging policy.
6. Request that the Strategic Director of Adult Care and Wellbeing provides the Committee with an update on progress against the Care Homes Transformation programme in six months.

### 13.3 **Reasons for Decision**

- 13.3.1 Ensuring provision of support for people with a complexity and acuity of care needs through having dedicated provision for complex care, somewhere else to assess and planned and emergency respite will make steps towards sufficiency, quality and value of care homes in the City.
- 13.3.2 Approval is sought for a commissioning strategy to develop and deliver enhanced care in residential settings to ensure sufficiency of provision for older adults aged 65 + who have a complexity of care needs. This includes long term complex care, planned and emergency respite provision, and Somewhere Else to Assess Beds.
- 13.3.3 Provision of updates to committee provides an assurance to Members of delivery and scrutiny of actions undertaken.

### 13.4 **Alternatives Considered and Rejected**

- 13.4.1 Do Nothing There is an on-going need for this provision, not commissioning new models and ending of these contracts would lead to an increased in spot purchasing, this is likely to create a significant operational challenge to manage effectively and increased budget pressures.
- 13.4.2 Have Separate Commissioning Strategies This would result in similar work with the provider market being duplicated, risking inefficiencies, confusion, and conflicting asks, as well as unclear distinctions between care pathways.
- 13.4.3 Recommissioning There is a need to ensure that the commissioning model is fit for purpose for people with a complexity and acuity of care needs, and new models with innovative solutions are implemented.

## 14 APPOINTEESHIP STRATEGY TO APPOINTEESHIP FUTURE DELIVERY MODEL

14.1 The Strategic Commissioning Manager for Direct Payments and Unpaid Carers introduced the report which detailed the position on Corporate Appointeeships, including issues with the current approach. The report made the case for change and highlighted potential options that were considered as part of an appraisal process.

14.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care** Policy Committee:-

1. Notes the review of Appointeeships and mitigations in response to the review.
2. Approves the proposal for the Council's in-house provider (Executor Services), to provide Corporate Appointeeships where appropriate, whilst making external purchases available where a best interest assessment, or other circumstance identifies this is required.
3. Notes that a progress review update will be brought to Committee within 6 months of this Committee meeting, as part of the Safeguarding Delivery Plan Update to Committee.

14.3 **Reasons for Decision**

14.3.1 Option 2

This offers the best balance between value for money, quality assurance, and operational efficiency and addresses risks identified. Executor Services is one of the best value options available, whilst providing the outcomes that DWP requires of Appointeeships. This option also enables integrated approaches across social care, housing, and health to easily share, and update information. Finally, in the current financial climate, it is vital that we get best value, option 2 provides this.

14.4 **Alternatives Considered and Rejected**

14.4.1 All alternative options were set out in section 2.3 above. Please refer to this section for detail.

14.4.2 Alternative Option 1 Do nothing - This is because this is the current situation and has inherent risks as noted above and is not providing best value and quality assurance regards provision of Corporate Appointeeships.

14.4.3 Alternative Option 3 Executor Services as a default option and external providers on a RPL as the secondary option. Although this option gives more quality assurance, it is more expensive as it does not control the cost of external providers and likely to not comply with council standards.

14.4.4 Alternative Option 4 External providers on a Framework – although a satisfactory option it is not as cost effective as option 2.

## 15 PROVIDING MARKET SUSTAINABILITY AND COMMISSIONING PLAN UPDATE, COMMISSIONING UPDATE



- 15.1 The Assistant Director of Commissioning and Partnerships introduced the report which provided the Committee with an update on Adult Care and Wellbeing Commissioning priorities in 2024/25.

The report sought to provide assurance on how Sheffield City Council are delivering market sufficiency responsibilities as set out in the Care Act 2014, covering progress made on commissioning strategies and planned activity to ensure that people living in Sheffield, who need care and support, continue to have a choice of high-quality provision available in the City.

- 15.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care Policy Committee:-**

1. Note the work underway on refreshing the Market Position Statement for 2025/26.
2. Note the progress made on our Living and Ageing Well Commissioning strategy, including the transition to our new model of home care: the Care and Wellbeing Service.
3. Approve commissioning intentions for Living and Ageing Well, including the intention to progress a 'Care Suites' model of provision.
4. Approve a contract variation with Carewatch to deliver Brunswick Gardens Extra Care provision
5. Note the ongoing work to meet our duties under the Care Act 2014 to ensure market sustainability with regards to quality assurance and fee rates
6. Request that the Strategic Director Adult Care and Wellbeing continue to bring regular commissioning strategy updates to the Adult Health and Social Care Policy Committee.

15.3 **Reasons for Decision**

- 15.3.1 The Market Position Statement creates an overarching commissioning strategy and helps providers to shape their business to support the Council's vision and identify how to develop their services to meet local needs and demand now, and in the future. It also supports providers to identify potential opportunities that they may tender for.

- 15.3.2 It is a key tool for local authorities to meet their Care Act 2014 duties around market sustainability.

- 15.3.3 The commissioning intentions for Living and Ageing Well, including the intention to progress a 'Care Suites' model of provision and to issue a contract variation with Carewatch to deliver Brunswick Gardens Extra Care provision ensure that the Council supports long term sustainability of our care provision for older people. In the case of Brunswick Gardens, it also ensures continuity of care for existing residents.

- 15.3.4 Regular updates to Committee provider assurances on how we are meeting our statutory duties and deliver upon our value of openness and transparency.

15.4 **Alternatives Considered and Rejected**

- 15.4.1 **Do Nothing:** Continuing only existing offers of care and support leads to a stagnant marketplace that stifles variety for the people of Sheffield. Additionally, this exacerbates existing operational challenges and increased budget pressures. Traditional models of care are showing a decline
- 15.4.2 **Commission New Models:** There is a need to ensure new innovative models and provision such as Care Suites are commissioned and that the commissioning offer is fit for purpose using innovative solutions for an ever-changing customer need.

## **16 ADULTS EARLY INTERVENTION AND PREVENTION STRATEGY AND UPDATE ON DELIVERY PLAN**

- 16.1 The Assistant Director of Living and Ageing Well introduced the report which provided the Committee with an update on early intervention and prevention activities, in line with priority 6 of the Strategy Delivery Plan.
- 16.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care** Policy Committee:-
1. Notes progress in implementing the early help and prevention arrangements to prevent, reduce and delay the onset of social care needs.
  2. Endorses that the refresh of the Adults Social Care Strategy Living the Life You Want to Live will continue to encompass and be the adults early help strategy.
  3. Agrees to the co-design and co-production of a broad partnership-based Adult's Prevention and Early Intervention Delivery Plan that will detail how the Care Act 2014 duties to 'prevent', 'reduce' and 'delay' the onset of social care needs is achieved across the Local Authority and its partners.
  4. Requests that the Strategic Director Adult Care and Wellbeing provides an update in 6 months on delivery of the programme.
- 16.3 **Reasons for Decision**
- 16.3.1 The Care Act 2014 set out a vision that the care and support system works to actively promote wellbeing and independence and does not just wait to respond when people reach a crisis point. Due to this, the Care Act 2014 sets out duties on the Local Authority to promote wellbeing, integrated working, provide information and advice and to prevent, reduce and delay the need for care and support.
- 16.3.2 Agreeing to the co-design and co-production of a broad partnership-based Adult's Prevention and Early Intervention Delivery Plan that will detail how the Care Act 2014 duties to 'prevent', 'reduce' and 'delay' the onset of social care needs is achieved across the Local Authority and its partners will provide assurance as to delivery and impact.
- 16.4 **Alternatives Considered and Rejected**
- 16.4.1 Do nothing: It would be possible not to produce a plan in relation to early intervention and prevention – but it would mean any activity would lack focus, coherence, and public accountability.