

SHEFFIELD CITY COUNCIL

POLICY COMMITTEE DECISION RECORD

The following decisions were taken on Monday 19 December 2022 by the Adult Health and Social Care Policy Committee.

Item No

7. **DEVELOPMENT OF A NEW INFORMATION, ADVICE AND GUIDANCE PLATFORM**

7.1 The Committee received a report which outlined and explained the work being undertaken by Adult Social Care and partners to develop a comprehensive city-wide approach to information and guidance for citizens of Sheffield regarding adult and young people's health and social care. Tim Gollins, Assistant Director Mental Health, Safeguarding and Access, presented the report.

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

Endorse the work being done to develop city-wide citizen facing information, advice and guidance for adults and young people in Sheffield.

7.3 **Reasons for Decision**

Endorsing the work being done and the future development of the city-wide platform for information, advice and guidance about social care, and health will enable further development to partnership working across health and social care, with the voluntary sector and people who use services and carers to provide a truly coproduced and relevant, cutting-edge information, advice and guidance service. It provides options to develop cost effective demand management functions over the next year in response to legislative changes.

7.4 **Alternatives Considered and Rejected**

7.4.1 The alternative was to remain with the old platform, but in discussion with all stakeholders, after due consideration it was agreed the platform was not fit for purpose, and a step change in our information and advice capability was needed.

7.4.2 Procurement options were considered and the national framework for information and advice organisations developed by ADASS was used to secure the leading provider. This was led by corporate procurement colleagues. All procurement rules were followed.

8. **APPROVE CITY WIDE UNPAID CARERS STRATEGIC DELIVERY PLAN (COMMITMENT 5,6 ASC STRATEGIC PLAN)**

8.1 The Committee received a report asking for approval of the multi-agency Carers Delivery Plan (2022-25). Mary Gardner and Lee Teasdale-Smith were in attendance to present the paper.

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

Approve the Carers Delivery Plan (2022-2025) signaling our continued support for people who are unpaid carers across the City

8.3 **Reasons for Decision**

8.3.1 Carers are vital to our health and social care systems. They provide care to some of the most vulnerable in our communities and in doing so, save the economy billions of pounds per year, however, being a carer can lead to social, educational and health inequalities.

8.3.2 It is therefore essential, that we recognise, value and support those in a caring role and prevent inappropriate caring, especially with young carers; a delivery plan will help us do this and that is why it is the preferred option.

8.4 **Alternatives Considered and Rejected**

8.4.1 No Update to The Delivery Plan - Not updating the delivery plan was rejected as an option. Now is a good time to be reaffirming our commitment to Unpaid Carers due to the negative impact of the pandemic and cost of living crisis on Unpaid Carers. Not refreshing our Delivery Plan sends out the wrong message. If we want Unpaid Carers to feel recognised and supported, what we are doing to make that happen needs to be obvious. The Delivery Plan is a great tool to show what organisations are doing to improve carers lives and outcomes and enable carers to feel valued.

9. **APPROVE ADULT SOCIAL CARE CO-PRODUCTION AND ENGAGEMENT STRATEGIC DELIVERY PLAN (COMMITMENT 4 ASC STRATEGY)**

9.1 The Committee's endorsement was sought on the approach to co-production and the development of involvement. Catherine Buntin, Head of Commissioning, Adults and Kate Damiral, Practice Development Co-ordinator presented the report.

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

- Endorse the approach to involvement and engagement set out in the delivery plan at Appendix 1.
- Agree that Adult Health and Social Care sign up to Making it Real as demonstration of our commitment to coproduction and personalisation.
- Request that the Director of Adult Health and Social Care bring back six[1]monthly updates on progress in relation to delivery upon the plan

9.3 **Reasons for Decision**

9.3.1 The report asks for an endorsement of our ambition to further develop our involvement offer for local people. We propose to create new ways to empower citizens to inform, have influence, and to hold Adult Social Care to account across its services; and to lead our approach to co-production and other forms of involvement.

9.3.2 It's aimed that this approach will promote continuous improvement, which can then provide assurance to Committee regards our impact on people in partnership with people.

9.4 **Alternatives Considered and Rejected**

9.4.1 Option 1 - Option 'to do nothing' and have no involvement framework. However, this would not enable citizens to be involved in shaping and continuous improvement of adult health and social care activity in an open and transparent way.

9.4.2 Option 2 – Delay request for approval and implementation of the framework to enable further learning, benchmarking, and engagement. It is planned that benchmarking, learning and engagement will take place on an ongoing and dynamic basis to ensure it delivers what matters to people of Sheffield and is responsive to changing circumstances.

10. **APPROVE DIRECT PAYMENTS AND PERSONALISATION STRATEGIC DELIVERY PLAN (COMMITMENT 5 ASC STRATEGY)**

10.1 The Committee received a report seeking approval for Sheffield's Personalisation and Direct Payment Strategy and Delivery Plan and to provide an update on progress made to date to improve the Direct Payments offer in Sheffield. Andy Buxton, Commissioning Officer for Direct Payments and Mary Gardner, Strategic Commissioning Manager for Direct Payments and Carers attended and presented the paper.

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

1. Approve Sheffield's Personalisation and Direct Payments Strategy and associated Delivery Plan.
2. Note the progress made to date to improve the Direct Payments offer in Sheffield.
3. Requests the Director of Adult Health and Social Care to bring back an update in relation to progress in delivering the strategy within six months.

10.3 **Reasons for Decision**

10.3.1 To ensure the Council is fully compliant in its duties and responsibilities around

Direct Payments and personalisation.

10.3.2 To ensure the achievement of the outcome in the Council's delivery plan to deliver a Direct Payments and Personalisation Strategy and Strategic Delivery Plan.

10.3.3 To make a commitment to fulfil the priorities co-produced with local people to develop, improve, and grow personalised approaches in Sheffield for people who use social care.

10.4 **Alternatives Considered and Rejected**

10.4.1 Do nothing

10.4.2 If the Council leaves Direct Payments and personalised approaches as they are this would result in the Council not being fully compliant with duties and responsibilities outlined in the Care Act (2014).

10.4.3 This option would mean the Council is unable to achieve the outcome in the Council's delivery plan to deliver a Direct Payments and Personalisation Strategy and Strategic Delivery Plan.

10.4.4 Proceed with Direct Payment Improvement Programme only

10.4.5 This option would result in a programme of improvement focussing on improving Direct Payments operating in isolation and without a clear strategy to co-ordinate and connect to other and alternative opportunities to improve personalisation in Sheffield.

10.4.6 Although this option would ensure the Council is compliant with some aspects of the Care Act (2014) around Direct Payments, there would still need to be further commitments made to be fully compliant with responsibilities around personalisation of care and support services.

10.4.7 This option would mean the Council is unable to achieve the outcome in the Council's delivery plan to deliver a Direct Payments and Personalisation Strategy and Strategic Delivery Plan.

11. **FAIR COST OF CARE EXERCISE**

11.1 The Committee received a report which provided an update on the position from Central Government in relation to the Social Care Reform and the Fair Cost of Care exercise. It included implications on the Grant and future reporting. Liam Duggan, Assistant Director, Governance and Inclusion and Catherine Bunten, Head of Commissioning – Adults presented the report.

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

1. Note the latest position from UK Government

2. Approve the proposals for use of the 2022/23 Market Sustainability and Fair Cost of Care Fund.

3. Approve that contributions for backdated fee increases are waived, with people being informed about the fee rate increase and impact on contributions on 10th January 2023, and the increase in contributions taking effect from 23rd January 2023

4. Approve the proposed process for fee setting in 2023/24

11.3 **Reasons for Decision**

11.3.1 The recommendations for the use of the Fair Cost of Care Grant are made to ensure compliance with the Grant conditions.

11.3.2 The Council will continue to monitor the costs and pressures facing each type of care provision to support a stable, quality and diverse market during a very challenging time for providers, for people who use services and for the Council and wider health and social care system.

11.4 **Alternatives Considered and Rejected**

11.4.1 The conditions of the Market Sustainability and Fair Cost of Care Fund dictate local authorities should use this additional funding to increase fee rates paid to providers beyond the level required to cover increases in core costs such as inflation, workforce pressures, National Living Wage, and National Insurance.

11.4.2 Funding must be spent within the designated financial year.

11.4.3 Therefore, the only other option would be to not allocate the Fund to providers. Given the risks and issues faced by providers, including those relating to financial stability, this is not recommended.

12. **EQUIPMENT AND ADAPTATIONS ELIGIBILITY CRITERIA UPDATE**

12.1 The Committee received a report seeking approval for the refreshed eligibility criteria for access to equipment and adaptations. It also set out refreshed guidance on access to the Disabilities Facilities Grant. Jo Pass, Assistant Director – Aging Well and Ian Menzies, Equipment and Adaptations Manager were in attendance to present the report.

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

Approve the Adult Health and Social Care Equipment and Adaptations Criteria at Appendix 1 and approve publication on the Sheffield Directory – the information and advice hub

Agree that updates in relation to expenditure on the Disability Facilities Grant will be provided through the budget update reports to Committee

on a six-monthly basis

Requests that the Director of Adult Health and Social Care brings an update in relation to implementation of the Criteria in one year.

12.3 **Reasons for Decision**

Reviewing and relaunching the Equipment and Adaptations Criteria gives a structured approach to the promotion of independent living through equipment and adaptations as well as how people can access the funding for their prescribed equipment and adaptations. It will also provide greater accountability and transparency of how will do this.

Asking for regular updates and refreshes of the Equipment and Adaptations delivery 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.

12.4 **Alternatives Considered and Rejected**

- 12.4.1 Not reviewing the Equipment and Adaptations Criteria and not reviewing the Disabilities Facilities Grant were considered. However, this would not provide the assurances required to ensure that we are striving towards a high performing and financially sustainable service.

13. **MONTH 7 - BUDGET MONITORING REPORT**

- 13.1 Liz Gough, Head of Service – Finance, presented a report to the Committee which provided an update on the Council’s financial position as at Month 7 2022/3

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

1. Note the Council’s financial position as at the end of October 2022 (month 7)

13.3 **Reasons for Decision**

- 13.3.1 This paper is to bring the committee up to date with the Council’s current financial position as at Month 7 2022/23.

13.4 **Alternatives Considered and Rejected**

- 13.4.1 The Council is required to both set a balance budget and to ensure that in-year income and expenditure are balanced. No other alternatives were considered.

14. COMMISSIONING OF CITYWIDE CARE AT NIGHT SERVICES

14.1 A report was presented to the Adult Health and Social Care committee which asked that an extension be granted for a further six months of the jointly commissioned Sheffield City Council and the South Yorkshire Integrated Care Board for the Sheffield Place arrangements of provision of the Night Care Visiting Service.

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

1. Note the extension of the current Care at Night Service until the 30th of September 2023.
2. Endorse the proposal for an options appraisal and agree that the outcomes of the options appraisal and proposals for recommissioning of Care at Night Services are progressed.

14.3 **Reasons for Decision**

14.3.1 The extension of the contract will enable organisations to undertake activities and actions and give full consideration through an options appraisal to determine the best, viable commissioning, and procurement Page 235 Page 8 of 8 model approach and, ensure minimal disruption to individuals and whilst other key commissioning activity of the new Care and Wellbeing service takes place.

14.4 **Alternatives Considered and Rejected**

14.4.1 The option of “do nothing” was considered. However, given that the current contract will end in March 2023 and a recommissioning of care and wellbeing services is underway there is no longer an option to do nothing.

14.4.2 The extension of the contract will provide the opportunity to review the current delivery model and build upon the learning and partnerships built over this last 5 years. It provides an opportunity to take account of the joint ambitions and priorities of the Council and ICB Sheffield as well as learning from the new city-wide Care and Well Being Service which will be implemented in summer of 2023.

17. IMPROVING WELLBEING OUTCOMES AND TACKLING INEQUALITIES THROUGH EARLY INTERVENTION, INTEGRATION AND PARTNERSHIP WORKING

17.1 Sandie Buchan of the Integrated Care Board (ICB) presented a collaborative report carried out by Sheffield City Council and the ICB which outlined joint working between health and social care in Sheffield and the ways in which this could improve outcomes and help to reduce health inequalities.

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

1. Note progress in relation to the Adult Health and Social Care Integrated Working Delivery Plan – Improving Outcomes through Tackling Inequalities through Integrated Working attached at Appendix 1.
2. Approve the Sheffield Wellbeing Outcomes Framework described at section 1.9.
3. Agree that Director of Adult Social Care brings back 6 monthly reports on progress in implementation of the Delivery Plan and Outcomes Framework.

17.3

Reasons for Decision

- 17.3.1 The report provides an update in relation to Improving Wellbeing Outcomes and Tackling Inequalities Through Early Intervention, Integration and Partnership Working theme in the Council's Delivery Plan. It also seeks approval for city wide health and wellbeing outcomes framework.
- 17.3.2 It's aimed that this approach will promote continuous improvement, which can then provide assurance to Committee regards our impact on people as a collaboration across health and care.

17.4 **Alternatives Considered and Rejected**

- 17.4.1 Option 1 - Option 'to do nothing' and have no outcomes framework. However, this would not enable citizens to see the impact of health and social care activity in an open and transparent way.
- 17.4.2 Option 2 – Delay request for approval and implementation of the framework to enable further learning, benchmarking, and engagement. It is planned that benchmarking, learning and engagement will take place on an ongoing and dynamic basis to ensure it delivers what matters to people of Sheffield and is responsive to changing circumstances.