

SHEFFIELD CITY COUNCIL

Adult Health and Social Care Policy Committee

Meeting held 19 June 2024

PRESENT: Councillors Angela Argenzio (Chair), Sophie Thornton (Deputy Chair), Laura McClean (Group Spokesperson), Matthew Dwyer, Julie Grocutt and Ruth Milsom

3. APOLOGIES FOR ABSENCE

3.1 Apologies of absence were received from Councillors William Sapwell, Mick Rooney and Steve Ayris.

4. EXCLUSION OF PRESS AND PUBLIC

4.1 No items were identified where resolutions may be moved to exclude the press and public.

5. DECLARATIONS OF INTEREST

5.1 A declaration of interest was stated by Councillor Julie Grocutt in regard to item 13 on the grounds that she is supporting a family with the process relating to this item.

6. MINUTES OF PREVIOUS MEETING

6.1 The minutes of the previous meeting held on **15 May 2024** were approved as a correct record.

6.2 The committee noted that the minutes from **20 March 2024** were not included in the reports pack and it was agreed they be reviewed in the next meeting, to be held on **18 September 2024**.

7. APPOINTMENTS TO SUB-COMMITTEES

7.1 The committee noted the appointments to Sub-Committees.

8. WORK PROGRAMME

8.1 The Chair introduced the report which contained the Committee's work programme for consideration and highlighted the recommendations to be agreed.

8.2 RESOLVED UNANIMOUSLY:

1. That the Committee's work programme, as set out in Appendix 1 be agreed, including any additions and amendments identified in Part 1;
2. That consideration be given to the further additions or adjustments to the work programme presented at Part 2 of Appendix 1;
3. That Members give consideration too any further issues to be explored by

- officers for inclusion in Part 2 of Appendix 1 of the next work programme report, for potential addition to the work programme; and
4. If items are referred from LACs, these should be highlighted to the Principal Democratic Services Officer to ensure they are dealt with appropriately.

9. HOSPITAL DISCHARGE AND URGENT CARE DELIVERY PLAN UPDATE REPORT

- 9.1 The System Discharge Lead introduced the report which outlined the overarching Adult Health and Social Care vision is for every Adult in Sheffield to be able to age well and live the life they want to live, with choice and control over the decisions that affect them.

The purpose of the report was to update the committee on the operational progress that has been made in delivering the hospital discharge and avoidable admission paper that was agreed by this Committee on the 31st of January 2024.

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

1. Notes the current performance in relation to discharge and progress in delivering phase one of the hospital discharge and urgent care delivery plan.
2. Agrees a 6-month extension to the Somewhere to Assess Temporary Care Home Beds.
3. Requests that the Strategic Director of Adult Care and Wellbeing provides the Committee with update on progress against the delivery plan in six month.

9.3 Reasons for Decision

- 9.3.1 As a partnership between agencies in Sheffield, we have made a commitment to admission avoidance and the development of a new operating model which focuses on building a partnership between primary and social care will aim in longer term to impact on admission avoidance.
- 9.3.2 The new discharge model aims to embed an approach where people discharged from an acute hospital bed are assessed at home or in another appropriate community setting where assessments about what care they need can take place. This approach is critical if we are to improve individuals and families experience of discharge, optimise individuals' wellbeing outcomes, maximise our workforce capacity and effectiveness and reduce avoidable demand.
- 9.3.3 The extension to the Short-Term Beds Contract by 6 months will enable the review of commissioned beds to be undertaken, a model proposed for Committee subsequent approval and retender completed.

9.4 Alternatives Considered and Rejected

- 9.4.1 Not Providing an Extension – Not providing an extension to the Somewhere to

Assess Short Term beds whilst work is underway to deliver future proposals may mean that, sufficiency is not available for discharge post September 2024.

10. SHARED CARE RECORD

10.1 The Head of Service for DI & ICT introduced the report which set out the arrangements for Sheffield City Council to participate in the Yorkshire Shared Care Record. This report also sets out the estimated costs of the system.

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

1. Approves Sheffield City Council's participation in the Shared Care Record at an estimated initial cost to the Council of £10k and a cost of £35k per annum.

10.3 Reasons for Decision

10.3.1 The decision will enable the Council to participate in a regional and national programme that will benefit people receiving care and treatment in Sheffield, across South Yorkshire and the Yorkshire and Humber Region. Eventually the benefits will be seen nationally.

10.4 Alternatives Considered and Rejected

10.4.1 Do nothing - This is not a viable option – the Council is a key partner of the Integrated Care System, who's Board have a responsibility to participate in this national programme. Not to participate would have an impact on the data available to other partners and fail to take advantages of capabilities that could improve the wellbeing of Sheffield residents.

10.4.2 Develop our own system. This would be a significant undertaking, requiring skills and resources that the Council does not have. Those resources would have to be retained for future updates and functional changes as statutory requirements and business needs changed. Integration with the wider YHCR would not be guaranteed and may indeed form a significant barrier to participation as well as vastly increased cost.

11. ADULT FUTURE OPTIONS:- COMMISSIONING PROGRAMME

11.1 The Strategic Commissioning Manager introduced the report which sought approval for a Commissioning Strategy for Emergency Overnight Short Breaks, Enhanced Care and Accommodation (aligned to the Learning Disability Strategy and our Recovery Plan) and Shared Lives. The report also summarised the Council's statutory duties and the importance of ensuring continuity for Emergency Overnight Short Breaks, Shared Lives and Enhanced Care and Accommodation, outlining proposals to deliver these services in a way that meets the needs of Sheffield citizens.

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

1. Notes progress in implementing the Adult Future Options Working Age Framework.
2. Approves the proposal to develop an Enhanced Care and Accommodation Framework to ensure sufficiency of provision for Emergency Overnight Short Breaks, Supported Living and Shared Lives in the City.
3. Requests that the Strategic Director of Adult Care and Wellbeing provides the Committee with an update on progress against the Adult Future Options delivery programme in six months.

11.3 **Reasons for Decision**

- 11.3.1 Increasing supply in Emergency Overnight Short Breaks, Shared Lives Carers and Accommodation with Care is a complex programme of work and requires a multifaceted approach, likely over several years.
- 11.3.2 As a first key step, approval is sought for a commissioning strategy to establish an Enhanced Care Framework which can enable recruitment to shared lives carers, a framework for emergency overnight short breaks, a framework for accommodation with care.

11.4 **Alternatives Considered and Rejected**

- 11.4.1 Do Nothing – Doing no planned developments would not ensure sufficiency of local provision, leading to poor outcomes for the individual and their families. Failure to increase the supply of local emergency overnight short breaks will increase the considerable distress such emergency situations cause and the long-term impact on both the individual’s health and wellbeing as well as exacerbating carer stress. In addition, Adult Care would require relying on commissioning costly options via a direct award, delivered by specialist crisis providers due to their urgency and complexity. This would pose an ongoing challenge due to the availability of very few specialist providers in the local market and may also lead to out of area placements.

Undertake A Commissioning Strategy Without Engagement – It is likely taking a direct approach without the involvement of individuals, carers, providers would not enable personalised solutions to be coproduced.

12. **CARE GOVERNANCE AND PERFORMANCE FRAMEWORK UPDATE**

- 12.1 To provide an updated Care Governance Strategy, Cycle of Assurance and Performance Management Framework for approval.
- 12.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care** Policy Committee:-
1. Approves the updated Care Governance Strategy.
 2. Approves the updated Performance Management Framework

3. Approves the updated Cycle of Assurance

12.3 **Reasons for Decision**

- 12.3.1 The updated Care Governance Strategy, Performance Management Framework and Cycle of Assurance, will ensure significant further improvements are made in the following areas:

People who use our services and family members and carers have a voice, are central to the planning and development of adult social care services.

Improving wellbeing and population outcomes, quality of life and experiences for individuals, their carers, and families remains central to our priorities and focus.

Our supports and services are high performing, compliant with legislation, of excellent quality and are positively received by individuals and families.

Our workforce is valued, engaged, and feels empowered to continuously develop practice and delivery of social care services.

Our resources are used effectively and efficiently across Adult Social Care.

We are prepared for pending CQC assessment which is being introduced in 2023.

12.4 **Alternatives Considered and Rejected**

- 12.4.1 Option 1 - Option 'to do nothing' and not update the care governance or performance management framework. However, this would mean that the frameworks do not evolve to meet the changing needs of the service or the people who use it.
- 12.4.2 Option 2 – Delay approval to enable further learning, benchmarking, and engagement. Benchmarking, learning, engagement, and review will take place on an ongoing basis to ensure it delivers what matters to people of Sheffield and is responsive to changing circumstances. Further changes will be captured in the next iteration of these frameworks.

13. ADULT CARE AND WELLBEING BUDGET, RISK MANAGEMENT AND FINANCIAL GOVERNANCE

- 13.1 The Service Manager for Business Planning and Governance introduced the report which provided an update on the financial position for Adult Social Care and associated governance improvements.

As part of the improved financial governance, the updates sought to provide analysis and transparency ensure that ongoing financial risks and issues remain visible. The report was intended to enhance understanding of the full budget position and the relative value of pressures, savings and ongoing commitments when making spending decisions. It also supported the priority to deliver a framework for measuring performance and quality so that people can hold SCC to account for the care services provided.

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

1. Note the update to the financial forecast for the delivery of savings in

2024/25.

2. Note outturn position 2023/2024.
3. Note overview of Adult Care Budget and Current Use of Resources.
4. Note Use of Resources Delivery Plan Update.
5. Note schedule of reporting 24/25 aligned to financial regulations.
6. Request updates on progress with implementation through our Budget Delivery Reports to future Committee.

13.3 **Reasons for Decision**

13.3.1 The recommendations are provided to enable Members to gain an understanding of the Adult Health and Social Care budget in totality, including pressures and current progress with the recovery plan and the actions underway to mitigate pressures.

13.4 **Alternatives Considered and Rejected**

13.4.1 Not applicable – this is an update on actions already agreed.

14. **DASS AND STRATEGY DELIVERY UPDATE**

14.1 The Service Manager for Care Governance and Improvement introduced the report which provided the quarterly Strategy Delivery Update as part of the performance and Governance framework, last presented to committee on 20 March, the paper:

- Provided a further scheduled update, aligned to our cycle of assurance, setting out our delivery progress and what's been achieved.
- Provided an overview of the draft CQC self-assessment for Adult Care, including the full assessment document as an appendix, and horizon scan.
- Demonstrated how impact is being measured so that we can demonstrate our progress in enabling citizens of Sheffield to live the life they want to live.

Sheffield's Adult Social Care Strategy was approved by the Co-operative Executive on 16th March 2022. The Strategy was developed through significant co-production and formal consultation, involving people receiving services, carers, providers, partners, and our social care workforce across the sector. An operating model to deliver on the strategy was subsequently approved by the Adult Care Policy Committee in November 2022.

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

1. Notes progress in delivering upon the Adult Care Strategy Living the Life You Want to Live.
2. Notes Strategy Delivery Programme at Appendix 1.
3. Notes Adult Care and Wellbeing performance.
4. Notes Adult Care and Wellbeing update in relation to complaints and compliments.
5. Notes progress in the consultation and engagement on the CQC self-assessment and our preparations.

14.3 **Reasons for Decision**

- 14.3.1 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.
 - 14.3.2 Noting the Strategy Delivery Programme at Appendix 1 enables Committee to undertake scrutiny of the service and strategy delivery plan in an informed and meaningful way.
 - 14.3.3 Asking for regular updates and refreshes of the CQC self-assessment, including wider assessment preparations and communications will enable Committee to have oversight and assurance that Adult Care know themselves and are able to drive forward service improvements, alongside the assurance that we are well prepared for the CQC assessment process.
 - 14.3.4 Noting the performance and complaints update, enables Committee to undertake scrutiny of Adult Care performance including strengths and areas for prioritisation, including the development of our Performance Management framework / cycle of Assurance, alongside our improvement plans in this area.
- #### 14.4 **Alternatives Considered and Rejected**
- 14.4.1 Do Not Provide an Update on The Strategy Delivery Plan Progress – When the Strategy Delivery Plan was approved by Committee in June 2022 the was a commitment to review the plan regularly and by not reviewing, we would not be meeting that commitment. Due to the significant amount that has been delivered on the plan, leaving it as it would make it harder to identify the priorities going forward.
 - 14.4.2 A different delivery plan - The real options for the delivery plan are around the individual elements, which will be worked through as part of the constituent pieces of work. These will be worked through in different ways, with many of them resulting in their own future reports to the Committee.
 - 14.4.3 Do not work in partnership / collaboratively – It is a statutory requirement to work in partnership with colleagues across the health, care and wellbeing system, as set out in the 2021 White Paper. The Statutory Duty to Involve also requires us to engage and involve people who use services, and unpaid carers in the design and delivery of care and wellbeing. We would not be meeting these requirements

if we did not work in meaningful partnership across, the system, and with all stakeholders.

- 14.4.4 Do not share the ACW CQC Self-Assessment with partners and in the public domain - To not share the self-assessment and ask for comment would go against the approach and principles we are embedding as business as usual in Adult Care. To have both credibility and relevance, it is vital that this is a report which provides an honest and transparent narrative for adult social care informed by the voices and experiences of staff, partners, commissioned providers, VCSE, and the people who access our services, their families, carers, and those with lived experience.
- 14.4.5 Not creating a Complaints Delivery Plan – Using learning from complaints demonstrate that we continue to respond to improve services and shows transparently our progress towards completing actions. To not create and share would be against our Sheffield City Council Values ‘People are at the heart of what we do’ and ‘Openness and honesty are important to us’.

15. CARE AND WELLBEING UPDATE

- 15.1 The Assistant Director of Commissioning and Partnerships introduced the report which:
- Updated Committee on the new contracts for the delivery of Care and Wellbeing Services for adults delivered within their own homes. These services are also known as ‘home care’.
 - Provided an overview of the transition and mobilisation to the new contracts following ‘go live’ on 3rd June 2024.
 - Asked the Adult Health and Social Care Policy Committee to approve the commissioning intentions for home care alongside the Care and Wellbeing Service contracts, which support aims to ensure timely care for the people we support, including as part of the Hospital Discharge and Urgent Care programme, and to ensure continuity of care.
 - Asked the Adult Health and Social Care Policy Committee to approve the commissioning of a TEC Monitoring Centre with the contract from the 5 September 2024 to the 7 September 2025.
- 15.2 **RESOLVED UNANIMOUSLY:** That the **Adult Health and Social Care Policy Committee:-**
1. Notes the outcome of the tender for Sheffield’s Care and Wellbeing Service Contracts and mobilisation and transition to the service, which went live on 3rd June 2024.
 2. Approves the commissioning of home care provision, to run alongside the

Care and Wellbeing Service contract, and to note that a tender process will follow. This will enable the Council to procure individual packages of home care for people living in Sheffield and, in the case of a provider exit, to tender for a Care and Wellbeing 'patch' in a timely way.

3. Approves the commissioning of a 12-month contract with the option to extend for an additional 12 months for the provision of 24/7 TEC Monitoring Services, and to note that a tender process will follow, and to further note that this will allow the necessary time to commission our new TEC Service Delivery Model which will be implemented subject to approval on Monday 8 September 2025.

15.3 **Reasons for Decision**

15.3.1 The Care and Wellbeing service contracts will provide the delivery of most of the home care in the City. However, the Council will need to ensure that additional contractual arrangements are in place for the following:

- A small number of individual packages where a different provider is appropriate.
- People whose care package did not transfer to a Care and Wellbeing provider

It is also important that the Council has a mechanism by which to rapidly tender for a patch within the Care & Wellbeing service model should any provider exit the market. To support our duties under the Care Act 2014 to have a sufficient and stable market offering continuity of care, and to allow us to maintain strong market oversight and deliver within best practice, the Council will need to have a readily available procurement route should any of the above situations arise.

15.4 **Alternatives Considered and Rejected**

15.4.1 If the Council did not pursue alternative contractual arrangements of packages of home care falling outside of the Care and Wellbeing Service contract, we would find ourselves having to use spot purchase arrangements. These present a higher risk to the council both in terms of cost and quality.

16. **PROVIDING SUPPORT, MARKET SUSTAINABILITY AND COMMISSIONING PLAN UPDATE**

16.1 The Assistant Director, Commissioning and Partnerships introduced the report which provided the Committee with an update on Adult Care and Wellbeing Commissioning programmes in 2023/24, and priorities in 2024/25. The report sought to provide assurance on how we are delivering our market sufficiency responsibilities as set out in the Care Act 2014, covering achievements and planned activity to improve sufficiency, stability, and quality assurance.

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

1. Note outcome of commissioning strategy decisions made at Committee

and progress with delivery on commissioning priorities at Appendix 1.

2. Approve Adult Commissioning Priorities for 2024 – 2026 at Appendix 2.
3. Approve a sleep-in rate for personal assistants of £77.95.
4. Note the development of a Living and Ageing Well Market Position Statement and Programme to bring together all commissioning and delivery programmes relating to Living and Ageing Well into one programme, inclusive of the care & wellbeing service development.
5. Note the work underway as part of all Adults Market Positioning Statement to market shape and to stimulate a diverse range of high-quality services both in terms of the types, volumes and quality of services and the types of provider organisation to ensure the market remains vibrant and sustainable.
6. Note how Quality Assurance will be assured in commissioned and in house provision and priorities for 24/25 including review and design of brokerage services and contracts to ensure quality, outcomes and safeguarding outcomes are met.
7. In 6 months time, requests that the Strategic Director Adult Care and Wellbeing continue to bring regular updates to the Adult Health and Social Care Policy Committee.

16.3 **Reasons for Decision**

16.3.1 In fulfilling our Care Act 2014 duties, local authorities must ensure good oversight and understanding of the local care market, based on the evidence, will support a quality, flexible and sustainable market, providing choice to those who purchase care. The commissioning priorities provide focus for ensuring that these intentions are met.

16.3.2 Approving a sleep-in rate for Personal Assistants will enable delivery on outcome of legal review and consistency in approach for people using direct payments.

16.4 **Alternatives Considered and Rejected**

16.4.1 Making no change to PA sleep-in rates is an option. This was discounted as the only benefit would be that it maintains the status quo.

17. **2023/24 FINAL OUTTURN POSITION**

17.1 The Head of Accounting introduced the report which presented the Council's final outturn position for 2023/24.

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

1. Note the updated information and management actions on the 2023/24

Revenue Budget Outturn as described in this report.

17.3 **Reasons for Decision**

17.3.1 To record formally changes to the Revenue Budget.

17.4 **Alternatives Considered and Rejected**

17.4.1 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.

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