

Adult Social Services Review Panel Agenda



To: Councillor Jane Avis (Chair)

Councillors Margaret Bird, Janet Campbell, Pat Clouder and Yvette Hopley

A meeting of the **Adult Social Services Review Panel** which you are hereby summoned to attend, will be held on **Wednesday, 29 January 2020** at **5.30 pm** in **F10, Town Hall, Katharine Street, Croydon CR0 1NX**

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Tuesday, 21 January 2020

Members of the public are welcome to attend this meeting.
If you require any assistance, please contact the person detailed above, on the righthand side.

N.B This meeting will be paperless. The agenda can be accessed online at www.croydon.gov.uk/meetings

AGENDA – PART A

1. Apologies for Absence

To receive any apologies for absence from any members of the Committee.

2. Minutes of the Previous Meeting (Pages 5 - 22)

To approve the minutes of the meetings held on 26 June 2019 and 6 November 2019 as an accurate record.

3. Disclosure of Interests

In accordance with the Council's Code of Conduct and the statutory provisions of the Localism Act, Members and co-opted Members of the Council are reminded that it is a requirement to register disclosable pecuniary interests (DPIs) and gifts and hospitality to the value of which exceeds £50 or multiple gifts and/or instances of hospitality with a cumulative value of £50 or more when received from a single donor within a rolling twelve month period. In addition, Members and co-opted Members are reminded that unless their disclosable pecuniary interest is registered on the register of interests or is the subject of a pending notification to the Monitoring Officer, they are required to disclose those disclosable pecuniary interests at the meeting. This should be done by completing the Disclosure of Interest form and handing it to the Democratic Services representative at the start of the meeting. The Chair will then invite Members to make their disclosure orally at the commencement of Agenda item 3. Completed disclosure forms will be provided to the Monitoring Officer for inclusion on the Register of Members' Interests.

4. Urgent Business (if any)

To receive notice of any business not on the agenda which in the opinion of the Chair, by reason of special circumstances, be considered as a matter of urgency.

5. Update on the proposed London ADASS - Safeguarding Peer Review (Pages 23 - 26)

6. Update on the Adults Annual Plan (Pages 27 - 30)

7. Exclusion of the Press and Public

The following motion is to be moved and seconded where it is proposed to exclude the press and public from the remainder of a meeting:

“That, under Section 100A(4) of the Local Government Act, 1972, the press and public be excluded from the meeting for the following items of

business on the grounds that it involves the likely disclosure of exempt information falling within those paragraphs indicated in Part 1 of Schedule 12A of the Local Government Act 1972, as amended.”

PART B

8. Minutes of the Previous Meeting (Pages 31 - 32)

To approve the Part B minutes of the meetings held on 26 June 2019 and 6 November 2019 as an accurate record.

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Adult Social Services Review Panel

Meeting held on Wednesday, 26 June 2019 at 5.30 pm in F10, Town Hall, Katharine Street, Croydon CR0 1NX

MINUTES

Present: Councillor Jane Avis (Chair);

Councillors Margaret Bird, Janet Campbell, Pat Clouder and Yvette Hopley

Also

Present: Nick Sherlock (Head of Adult Safeguarding and Quality Assurance)
Richard Eyre (Head of Innovation and Change)
Rachel Soni (Director of Alliance Programme)
Valentine Nweze (Interim Service Manager)
Tariro Chivende (Experienced Social Worker)
Nicola Buckley (Experienced Social Worker)

PART A

21/19 **Apologies for Absence**

Apologies for lateness were received for Councillor Clouder.

Apologies for absence were received for Guy Van Dichele (Executive Director for Health, Wellbeing and Adults).

22/19 **Minutes of the Previous Meeting**

The minutes of the meeting held on 24 April 2019 were agreed as an accurate record, with the following amendments:

- 1) Item 15/19 - Addition of the follow up report from Director of District Centres and Regeneration arising from the Special Sheltered Housing Item.
- 2) Item 15/19 – Page 2, Paragraph 1 – Correction: “The Panel heard that seven of these sites were run by Care UK, who had subcontracted to London Care”. This previously stated six sites.
- 3) Item 15/19 – Page 2, Paragraph 4 – Amended to reflect the whole Panel’s endorsement of moving all sites from ‘Good’ CQC ratings to ‘Outstanding’.
- 4) Item 15/19 – Page 4, Paragraph 4 – Addition of the line “The Panel raised concerns about whether it might be more beneficial for mental health patients to receive care in hospitals, or through the South London and Maudsley Trust”.

23/19 **Disclosure of Interests**

There were none.

24/19 **Urgent Business (if any)**

There were no items of urgent business.

25/19 **Adult Safeguarding Practice**

The first Experienced Social Worker introduced themselves, and informed the Panel that they had worked in the council Children's department for three years before moving to the Adults team, and went through the details of the first case study.

The case study concerned a 90 year old resident (Resident A). This had been a complex case which involved the challenges of meeting Residents A's wishes while dealing with issues of mental capacity and dementia, which had led to a decline in health. This case had been subject to an application to the court of protection, as the challenges had needed a legal framework.

In response to questions from the Panel about what could have been done to maintain Resident A's independence, Members heard that the court could have listed the case and responded faster. Members acknowledged the difficulties in dealing with cases of hoarding, with experience of residents hoarding in their wards. A Member informed the Panel that work had been done with the Head of Public Protection to negotiate with fire services and get houses cleared while avoiding the courts, and suggested this for future cases. Members agreed that residents admitted to care homes could become institutionalised very quickly, and queried what other options, such as assisted living, had been considered to help Resident A maintain independence. The Panel learned that other options had been considered.

The Head of Adult Safeguarding and Quality Assurance highlighted the complexity of the case, with Resident A having the capacity to state that he did not want his family involved, and the difficulty of deciding when to proceed as normal and when to involve the courts. Involving the courts did not always improve the situation, as all decisions then had to go through the court process which reduced flexibility and the ability to manage the case.

Resident A had two social workers (one from the locality team and one from the safeguarding team) and had a good relationship with both; however, he would not take advice from either. The environmental team had talked to Resident A following complaints from neighbours about flies, but he would not let them into the property for an assessment.

In response to questions about how common this kind of case was, the Interim Service Manager stated at the last Croydon Vulnerability and Risk Management Panel they had attended there had been six cases, and five of these had concerned self-neglect or hoarding. The Breakthrough counselling Group Project (discussed at the January 2019 meeting of the Panel) had been helping residents identified with hoarding tendencies in collaboration with Mind. The Head of Adult Safeguarding and Quality Assurance informed the Panel that funding for this project over three years had been secured. In response to queries from the Chair about the limited number of residents who could participate at once, and the waiting list to join, Members heard that the approach had been to develop a variety of options to help those struggling with hoarding, such as work done with Clouds End, to ensure responses were as effective as possible.

When asked whether court cases often took this long to progress, Members heard that it varied, with a case that had been referred to court recently only taking a number of weeks. The Head of Adult Safeguarding and Quality Assurance explained that normally only ten cases went to court a year.

The Chair praised the work done on the case, and stated that they were heartened that ultimately Resident A was able to make choices about his care, to the extent which he was capable. The Chair stated it was difficult to know who was right in these cases, but appreciated that social workers did everything in their power to allow Resident A to make decisions.

The Head of Adult Safeguarding and Quality Assurance informed Members that there had been a multi-agency audit of self-neglect cases and the relationship with the Legal department had improved. There had been participation with huddles throughout the borough.

The second Experienced Social Worker introduced themselves, and informed the Panel that they had joined the council in 2008 as an assistant care manager; they had been sponsored to do social care training and had qualified in 2014.

The case study concerned a man with multiple disabilities (Resident B), requiring 24 hour care. Resident B had been living with their mother, younger brother and younger sister in a council property. Resident B had attended a specialist school. A referral had been received over concern of neglect, and the case had been referred for a Section 42 Enquiry.

There had been concern about neglect and the mental health issues of the mother. The situation had come to a crisis and the mother had been admitted to hospital, and had later been sectioned. Resident B was also taken to hospital, as they were found to be unwell; Resident B's brother had been taken into foster care. This left a vulnerable 18 year old young person in the household who, in theory, did not meet the statutory criteria of either children's services or adult social care. This person was also in the middle of their A levels.

After exploring a number of options, a place with a family with children of a similar age had been found through Shared Lives. The sister had been supported in applying to university and for grants to cover full time accommodation for the duration of their studies; there were fears that if the mother had been discharged she would have prevented the sister attending higher education.

The Chair praised the work done for the young person, and for not letting her fall through the cracks; the Chair stated that the cracks should not be there, and that work done with a multiagency and locality approach would help to close these.

The second Experienced Social Worker stressed that there had been a lot of consideration as to whether the response had been proportional, but that it had ultimately been felt that actions had been taken in everyone's best interest. The multiagency response had been important and had a great impact.

Members agreed that the case had been very complex.

26/19 **Adapt Programme Update**

The Head of Innovation and Change introduced the item, and reminded Members that this would be the third update on the Adapt programme. The last update to the Panel had been in June 2018, and this report covered the 12 months following.

There had been some delay in implementing the new e-marketplace, although through the new Croydon Digital Service, the issues were being resolved. In response to questions about the timeline for completing this work, the Panel heard that the target had been November 2019, with testing on the e-marketplace, information and advice and community directory taking place in September 2019. It was planned to be a 'one-stop shop' for services, and Members would be shown how it worked to enable them to help residents.

There had been an improvement in provider engagement events, which had been attended by over 200 different suppliers. A key intention discussed was, where appropriate, to enable more people to live in supported accommodation, rather than unnecessarily being placed in residential care. Forecasts had suggested there needed to be an additional 280 units of supported living stock before 2024, and work would be done to figure out how best to deliver this; 38 units had been secured since June 2018.

Members learned that a consultation on a new Direct Payments policy had begun, and residents could give their views and get involved at the following link: www.croydon.gov.uk/directpayment_consultation. Carers, families and residents had been encouraged to engage with the consultation.

A Virtual Wallet system had been procured for direct payments, and would allow users to buy care and support services. The advantage of this would be that providers could be paid faster, which the market had been responding to. Testing would be done with managed accounts first, before being rolled out to the remaining direct payment users.

Members expressed concern about direct payments, with many elderly people not being online or using emails. Members had witnessed multiple launches of other direct payment schemes, and stated this caused them some scepticism in regard to this one. The Head of Innovation and Change responded that direct payments user groups, amongst other service user groups, had already been engaged following an equality impact assessment, and would continue to form a key element of the user testing for the virtual wallet before it went live. All direct payment users had been written to asking for comments on the current direct payments policy.

Following this, Members discussed whether the programme had engaged widely enough with the public on consultations, and cited the new charging policy engagement. Members were concerned that the letters that had been sent had discussed removing a subsidy, without enough information on what it meant for them, which had caused some residents to panic, as the communications had not kept the audience in mind. The Chair responded that a review of the letters would be undertaken, to ensure that they would be properly tailored to vulnerable people.

Members felt that there had not been enough engagement with the Croydon Adult Social Services User Panel, and that there had been a lot of concern from residents, some with dementia, over the new charging policy. Members stressed the importance of engaging with the right people, and for making it personal with engagement from family members or carers. Regarding the charging policy, the Head of Innovation and Change agreed to make sure phone numbers and email addresses were available to the affected residents.

The Head of Innovation and Change highlighted that direct payments were not being forced upon service users, with managed accounts and other support services still in place to reduce risk; it was agreed that the availability of telephone and in person contact was important. The council would also be going to the market for a Croydon adult support service, to work with current Personal Assistants, to develop new ones, and to support people who wanted to use direct payments for employing a Personal Assistant. There would be a Personal Assistant register on the e-marketplace and through direct payments, but also information and advice through the Croydon adult support service.

The Cherry Hub had been opened, and would be used as the benchmark for Active Lives, with the Autism Service located separately next door. The Hub would deliver sessional services on life skills and employability; the Brit School and National Autistic Association had been involved, and some users had been linked up with the Croydon Voluntary Services.

A new Outreach Service would be available from July 2019 to help move service users out of day services, where appropriate; the Transitions Team would be involved, and the service would help to move residents to supported living and teach them life skills.

Liquid Logic would be implemented by autumn 2020, with the aim of providing an improved client record system, and supporting health and care to achieve an integrated care system. This would link in with Community Led Support, and ensure the council had access to quality practice and data to direct services and workforce development. In response to questions from Members about whether Liquid Logic would integrate information from Croydon Health Services, the Panel learned that data from the health information exchange would be used to allow these systems to talk to each other. Members expressed frustration that the data from Liquid Logic was not as granular and informative as it could be, and learned that the localities work being done would assist in correcting this, and that a new financing system would feed data into the system to show how budgets should be split. The building blocks for achieving more detailed data were in place, and should produce the desired results soon.

Exit plans were being made from the current Special Sheltered Housing contracts, with the option of bringing this service back in-house being considered. This had been in the business planning stage.

The Panel praised the volume of work taking place, but queried what difference service users and residents would experience in their interactions with the council. The Head of Innovation and Change responded that in the past there had been a fractured service with many different teams who did not always communicate with each other, and these had been restructured into the Croydon Adult Support Team to start reflecting the Multi-Agency Safeguarding Hub (MASH); this would be part of the whole family approach and the work to provide a local offer.

Talking points in the Thornton Heath locality innovation site, which included social care, welfare benefits advice and local voluntary colleagues, had been available at Parchmore Church on Mondays and Thursdays as part of community led support; lessons learned here would be taken to the next locality site to see if they were effective in other localities. This would show the value of testing models in the community.

The Director of the Alliance Programme informed the Panel that there were plans to add a section to reports on 'what it meant for Doris'. There was acknowledgement that more engagement could be done across health and social care, and that the market for direct payments users needed to be developed.

Members reported incidents of residents not being able to get through to the right services when contacting the council by phone, and heard that there would be a dedicated line, with an emergency team on duty after 16.00. There would be efforts to ensure that staff were logged into their phones, and to

promote longer phone calls which could gather more information and result in more actions taken. Members heard that there would be an effort for that same people to stay in touch with the resident, and that the good conversation model, along with localities and community led support, would reduce waiting lists and improved outcomes for people. The Head of Adult Safeguarding and Quality Assurance added that there had been a day in Thornton Heath where the waiting list had been zero, and Members noted that there had been a drop in GP waiting lists.

Members queried whether locality work had only been undertaken in Thornton Heath, and learned that this was the pilot site for community led support, but that the older peoples workforce had been restructured across all six localities, and that the wider disability service would be, where appropriate, restructured to the model. Once the community led support pilot had proved successful, it would be introduced across the other five localities. The Chair commented that the evidence from the sites where locality work had begun indicated that these projects would be successful.

27/19 **Croydon Adults Peer Review**

The Director of Integration and Innovation introduced and summarised the report, which provided a progress update on the 'Borough Feedback' recommendations presented to Full Council in July 2018; these emerged from the June 2018 London Association of Directors of Social Services (ADASS) 'Use of Resources' peer review.

Members praised the work being done, and commented on how well projects seemed to be integrated, with everyone on the same page. The Panel queried how demand would be managed and how commissioning could be done where there was not enough supply to meet the demand, referring specifically to nursing staff, supported living stock and dementia support. The Panel queried whether this had been apparent during the Dynamic Purchasing System consultation.

The Director of Integration and Innovation responded that lessons had been learned from One Croydon, which had a good model, but which struggled to recruit to all its positions as the staff had not been there. Creative work had been undertaken to look at different types of roles and to link services together, with the example given of a hybrid role that had been made to appeal more to GPs. The possibility of pooling budgets would be looked into. Work to secure accommodation had involved looking at strategic partnerships, and utilising the alliance whilst building relationships with registered providers. There had been improvements to the workforce strategy, and new HR procedures would be implemented, alongside increased staff engagement.

Members commented that a recent Scrutiny Health & Social Care Sub-Committee meeting had revealed that Croydon Health Services (CHS) had been struggling to recruit to some roles, which could lead to patients being

discharged too soon, which would undermine the work of One Croydon. The Panel learned that the CHS director had set up a workforce committee that they had been keen for the council to participate in. Council and CHS HR had worked together, and would produce a shared workforce plan to aid recruitment and staff retention. It was also hoped that the cultures of the two organisations could be aligned. It was not possible to increase things like nursing supply, but it would be possible to make Croydon an appealing place to work. The Chair reminded the Panel that the social workers who had completed their assessed and supported year in employment (ASYE) and who had spoken at the Panel in January 2019 had fed back that the support they had received in Croydon had made them want to stay, despite not being local, and this was evidence that this could be achieved. The new way of working in Croydon had been attracting new staff, but it was understood there were still shortages of supply for some roles.

In response to queries from Members about the impact of moving to an all age model, the Panel heard that development through the locality development programme needed to continue to ensure a bespoke offer for residents.

28/19 Exclusion of the Press and Public

The following motion was moved by Councillor Bird and seconded by Councillor Hopley to exclude the press and public:

“That, under Section 100A(4) of the Local Government Act, 1972, the press and public be excluded from the meeting for the following items of business on the grounds that it involves the likely disclosure of exempt information falling within those paragraphs indicated in Part 1 of Schedule 12A of the Local Government Act 1972, as amended.”

The motion was put and it was agreed by the Committee to exclude the press and public for the remainder of the meeting.

29/19 Minutes of the Previous Meeting

The Part B minutes of the meeting held on 24 April 2019 were agreed as an accurate record.

30/19 Adult Safeguarding in Croydon

The Panel received an update on Adult Safeguarding in Croydon.

The meeting ended at 7.45 pm

Signed:

Date:

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Adult Social Services Review Panel

Meeting of held on Wednesday, 6 November 2019 at 5.30 pm in F10, Town Hall, Katharine Street, Croydon CR0 1NX

MINUTES

Present: Councillor Jane Avis (Chair);
;
Councillors Margaret Bird, Janet Campbell and Yvette Hopley

Also Present: Guy Van Dichele (Executive Director for Health, Wellbeing and Adults)
Annette McPartland (Director of Operations Adult Social Care)
Nick Sherlock (The Head of Adult Safeguarding and Quality Assurance)
Sean Rafferty (Category Manager)

PART A

31/19 Minutes of the Previous Meeting

The accuracy of the minutes of the meeting held on 26 June 2019 were discussed by the Panel.

Councillor Hopley felt the minutes did not accurately reflect the meeting and incorporate all of the points raised. Councillor Hopley secondly raised that materials promised to be attached to the minutes were absent.

The Chair informed Councillor Hopley that the proposed amended paragraph shared with the Executive Director for Health, Wellbeing and Adults and the Director of Operations could not be included in the minutes because the wording was not reflective of events and requested a meeting after the Panel be arranged to agree a revised paragraph. It was stated that the proposed wording lacked distinction between the aspects of Quality Care Commission (CQC) and London Care which should be amended to clearly establish the timeline of events.

The Panel agreed that the amended minutes of the previous meeting held on 26 June 2019 would be considered at the next meeting of the Panel.

32/19 Disclosure of Interests

Councillors Hopley and Campbell declared they worked with the Wellbeing Centre at the Whitgift Centre. Councillor Hopley worked with the Centre by helping support the set-up by providing advice as the Vice-Chair of the South East Cancer Help Centre. Councillor Campbell worked with the Centre by

helping open the Centre as part of the steering group of the BME Forum and would continue to support the Centre.

33/19 Urgent Business (if any)

There were no items of urgent business.

34/19 Extra care Housing (Special Sheltered Housing)

The Director of Operations Adult Social Care introduced the report and presentation which provided an update on the Extra care housing offer within Croydon including the progress and the future plans for insourcing the transformation programme. The moved in-house provision would commence on 4 January 2020 and council staff were already introducing and familiarising themselves with the contracted sites and staff. Tenant liaison had occurred which included communications with all tenants, evening tenant meetings and tenant reviews and full social worker allocation to residents.

In response to a Panel Member asking where service users were predominantly referred from and whether there were concerns with oversubscription, the Director of Operations Adult Social Care stated that housing services was the main pathway to care services and oversubscription did exist on particular sites.

In reference to housing issues that required improvement, a Panel Member raised that building repair work should be the council's responsibility and asked whether Mears or London Care had previously flagged the repair work needed. The Director of Operations Adult Social Care replied that the work was supported by volunteers and results were achieved by cross department efforts, the listed contractors had reported repair tasks which were now being delivered.

In response to the Chair stating that London Care had experienced a situation where kitchens were completely out of use due to regulation restrictions, the Executive Director for Health, Wellbeing and Adults said that those issues related to regulations surrounding standards of commercial vs communal kitchen spaces and they intended to get areas back in to use and to install kitchenettes into every communal area.

A Panel Member described that during end of life care there was a maximum of four visits per day for patients, which did not include night visits. This meant that patient care requirements would exceed this offer, becoming an unviable option, and therefore the patient's end of life care would be better placed in a hospice.

The Director of Operations Adult Social Care stated the improvements would initially look to all sites and then would focus on the needs of individual users. They were working with council employees and looking to engage with

London Care employees which would include transfer care and Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) arrangements. Approximately 150 employees would be eligible for TUPE however not all London Care employees may choose to transfer to the council, but high numbers were expected to opt in due to the favourable staff benefits offered by the council.

In response to a Panel Member asking whether meals would be cooked on-site in the new scheme, the Director of Operations Adult Social Care stated that currently meals were delivered to sites however commissioners were working with providers and analysing costs for on-site preparation to begin in the New Year.

In response to a Panel Member asking if there would be an exit charge for the council from the Care UK contract, the Director of Operations Adult Social Care stated there was no exit charge and Care UK profits were generated from residential care.

The Director of Operations Adult Social Care informed the Panel that a rolling cycle of pest control biannually was now in place in blocks and empty apartments were being treated before the homing of any new tenant. There were still some areas of concern for problem cases where enforcement, which had to be aided by social workers, was necessary to clear apartments due to breach of tenant contracts. There was a meeting planned with Housing to align the pest control strategy. In response to a Panel Member, the Director of Operations Adult Social Care confirmed that the pest problem was not related to the cleanliness of areas and in extreme cases hazmat suits were required.

A Panel Member asked what was available to tenants in terms of social prescribing including the status and levels of external support. The Director of Operations Adult Social Care replied that there were activities planned for all care units during December 2019, including school children visits, and when services came in-house the number of activities provided would be increased, such as hosting coffee mornings which would enable tenants to socialise. The Chair suggested that councillors should be encouraged to take part in the drive to support tenants in the homes.

Councillor Avis nominated Councillor Campbell to be appointed as Vice-Chair for the remainder of the 2019/20 municipal year. This was seconded by Councillor Hopley.

Councillor Jane Avis left the meeting at 6.29pm

Councillor Janet Campbell was thereafter the acting chair for the meeting.the acting chair for the meeting.

35/19 **Adult Social Services Direct Payments Update**

The Category Manager introduced the report and presentation which provided an update on the council's progress towards extending Direct Payments (DP) to more residents which supported the council's priority to enable Croydon people to live long, healthy, happy and independent lives. They noted that Croydon was behind to implement Direct Payments (DP) comparatively to other authorities.

The Category Manager explained that many people in Croydon wanted a PA, however they were low in number and Personal Assistant (PA) training was difficult to access. Policy and guidance for DP was dated, the last update being in 2010, and processes had changed which meant the system was in need for refreshing and modernising. The Panel noted that 56% of parents of children with a disability used DP therefore it was necessary to try and replicate this success for services to help adults live at home.

The council aimed to be in a position where they managed a lower number of adults by encouraging greater flexibility and choice to users enabling them to find care and support locally using the new directory. There would also be the Contract Personal Assistant Support Service which supported users to recruit and to employ PAs, therefore retaining their service. DP moving forward aimed to reduce red tape and would introduce an online system which would mean people could manage their own direct payments online paperlessly, without the need to retain receipts. This agency system had been tried and tested in other local authorities and was delivered by Independent Lives, a user led charity, who had won awards for their results. The agency commission was the council in partnership with the Croydon Clinical Commissioning Group (CCG) which meant that there was one market for PAs, removing competition and promoting integrated care.

The strategies would be implemented through a community led approach where residents would be supported in their individual choices by social workers working on a case-by-case basis. DP in the past had been working alongside the central service and the new scheme would enable integration of the whole process enabling continued relationships through each stage, particularly with social workers.

In response to a Panel Member asking where the Croydon Personal Assistant Support Service would operate from, the Category Manager stated that a face-to-face service could be offered homebased or in the Community Support Office, Cherry Hub. The service would initially use Crawley based staff, however throughout the transition period staff would be recruited from Croydon and would eventually lead to the employment, training and accredited status of 200 Croydon residents.

The Category Manager described the consultation for DP which was in effect widely through meetings and surveys from the guidance produced and respondents predominantly focussed opinions on the implementation of policies. Themes raised from the consultation would be incorporated in to the policy guidance and developing the implementation plan.

The online payment system was due to be introduced which would be connected to the directory and users were able to carry out cashless transactions using the Virtual Wallet. In response to Members asking how pre-paid cards would be integrated in to the system and whether users would be able to monitor their own balance, the Executive Director for Health, Wellbeing and Adults stated that the account would be connected to the online systems enabling users to check their accounts. Using the new system the council was better able to audit usage and officers were able to restrict transactions in particular circumstances, whereas currently with the pre-paid card users were able to overspend and the council would only be aware afterwards when receiving a statement. The Virtual Wallet was seen to be a user friendly platform however there were still further tests to be completed and this would be an optional service for users.

Members asked who would be managing the Virtual Wallet and the Category Manager responded that beyond January 2020 the support would be predominantly community led and social workers would set up the user profiles for residents. Members asked if there would be social worker audits and they replied that they would be included in part of the review to additionally include annual audits. The Executive Director for Health, Wellbeing and Adults told the Panel that resulting from the flexibility for residents to choose services suited to their needs, approximately £250,000 would be saved.

The Category Manager told the Panel that the Adults Social Services Users Panel (CASSUP) had the view that residents should have the choice in making a financial contribution towards the service and the Executive Director for Health, Wellbeing and Adults stated that lawfully there must be a financial assessment. There were other concerns raised that the council and DP needed to operate on a level playing field which would be reviewed.

Panel members commended the recent work to plan and implement the new arrangements, in comparison to previous years, by increasing the level of choice to complex groups. In response to a Panel Member asking whether Respite Centres were connected to DP, the Executive Director for Health, Wellbeing and Adults stated that they were, however the Centre was meant for residents who were not suited to mainstream services. There needed to be a culture change for more people to use mainstream services and normalise their requirements. A Panel Member agreed and stated that people should be supported in a complete capacity only when absolutely necessary. This was part of broader conversation about care provision and in their opinion a good model facilitated by the community was required, which would also consequently save costs.

The Category Manager described the ability to commission more creative activities for users. It was noted that Mencap residents were able to organise exciting trips or holidays that were an alternative to old fashioned institutional homes. A Panel Member added that there had been a mental cultural shift in recent years in what activities were deemed safe, secure or appropriate for vulnerable people. The Category Manager explained that the DP was

researched and developed throughout the 1990s-2000s and was already common practice in countries such as Australia and New Zealand.

In response to the Vice-Chair asking whether social workers were familiar with DP, the Director of Operations Adult Social Care stated that at this stage the system as it currently stood was too clunky and that they were still in the testing phase. The community led support was to encourage and inspire.

The Executive Director for Health, Wellbeing and Adults stated that in the past there was distrust between the council and providers which caused undesirable outcomes, the whole system needed a culture change to bring back the key aim to improve outcomes for users which would be supported by introducing new staff. In response to a Panel Member asking where carer centres fit into the picture, the Category Manager stated partner centres were in favour of the new system but supported the opinion that more ground work would be needed to perfect it. There was training planned for council staff which would be rolled out externally at a later stage; this meant that knowledge and advice provided to residents would be standardised across care providers.

36/19 **Annual Report of the Croydon Adult Safeguarding Report (CSAB)**

The Head of Adult Safeguarding and Quality Assurance introduced the Croydon Adult Safeguarding Adult Board (CSAB Annual Report 2018/19) and presentation. Key improvements identified over the last year were identified. There is still challenging in addressing the under representation in BME Communities.

Currently the national data had not been published, which couldn't allow the council to make comparisons with neighbours.

The report set out priorities to engage more with residents and users. Issues had been flagged with the online referral process which were being investigated and they would seek support from the Partnership Board.

The Executive Director for Health, Wellbeing and Adults informed the Panel that the report had already been to Health & Social Care Scrutiny Sub-Committee, Informal Cabinet and would be reported at 18 November 2019 Cabinet. The Head of Adult Safeguarding and Quality Assurance stated that guidance was unclear as to where the CSAB Annual Report should primarily report.

The Executive Director for Health, Wellbeing and Adults said that the Independent Chair for CSAB had been asked for synergy between the adults and the children's boards for future changes and improvements and told the Panel that the independent Chair of the Boards had been working closely.

Panel Members asked where the main priorities lay and where officers felt improvements could be made accounting for the fact that similar issues were

raised each year. They secondly raised concern over the statistic highlighted in the report that 3 in 5 were allegedly experiencing abuse from someone they knew. The Head of Adult Safeguarding and Quality Assurance agreed that statistics were worrying and added that 1 in 3 were allegedly experiencing abuse from a formal carer, which was a decrease of 1% compared to 2017-18, however still high. They stated that these issues were national problems, not unique to Croydon, and other complex difficulties were experienced such as domestic and financial violence.

37/19 Exclusion of the Press and Public

The following motion was moved by Councillor Campbell and seconded by Councillor Hopley to exclude the press and public:

“That, under Section 100A(4) of the Local Government Act, 1972, the press and public be excluded from the meeting for the following items of business on the grounds that it involves the likely disclosure of exempt information falling within paragraph 1 indicated in Part 1 of Schedule 12A of the Local Government Act 1972, as amended.”

The motion was put and it was agreed by the Committee to exclude the press and public for the remainder of the meeting.

38/19 Minutes of the Previous Meeting

The Panel agreed that the amended minutes of the previous meeting held on 26 June 2019 would be continued at the next meeting of the Panel.

39/19 Adult Safeguarding in Croydon

The Head of Adult Safeguarding and Quality Assurance introduced the update on key developments and current positions in Croydon on Adult Safeguarding in regard to Provider Concern Issues.

The meeting ended at 7.25 pm

Signed:

Date:

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REPORT TO:	ADULT SOCIAL SERVICES REVIEW PANEL 29 January 2020
AGENDA ITEM:	5
SUBJECT:	Adult Safeguarding in Croydon
BOARD SPONSOR:	Annette McPartland, Director- Health, Wellbeing and Adults Division
<p>CORPORATE PRIORITY/POLICY CONTEXT: Adult Safeguarding is a statutory function in the Care Act 2014 and is a part of the Health Wellbeing and Adults Service Plan. This report focuses on the Peer Review on Adult Safeguarding which is planned for late 2020</p> <p>This report is for information.</p>	
<p>FINANCIAL IMPACT</p> <p>There are no financial implications arising directly from this report. All activity resulting from the recommendations of the Peer Review in Adult Safeguarding, will be absorbed within current resources.</p>	

1. RECOMMENDATIONS

- 1.1 The Adult Social Services Review Panel (ASSRP) is asked to note the contents of the report and support the plan to undertake a Peer Review in Adult Safeguarding.

2. EXECUTIVE SUMMARY

- 2.1 The Executive Director, Health Wellbeing and Adults, has through the London ADASS office (Association of Directors of Adult Social Services) commissioned a Peer Review to focus on Adult Safeguarding to take place in late 2020. This paper outlines the process of a Peer Review, highlighting the benefits and the preparation needed.

3. DETAIL

Background to Peer Reviews

- 3.1 The aim of Peer Reviews is to support self-evaluation and service development. They are not inspections. They are directly commissioned by the Local Director of Adult Social Care (DASS).
- 3.2 The programme began in 2013 under a Sector Led initiative and this will be the third cycle which all London Boroughs have signed up to undertake .There are

three themes offered, with methodologies developed for each one:

- Safeguarding
- Commissioning
- Use of Resources

3.3 Previously in 2018 Croydon had a Peer Review focussing on 'Use of Resources' which was successful in identifying improvements and future steps.

Adult Safeguarding Peer Review

3.4 Since the implementation of the Care Act Adult Safeguarding has been a statutory function and is a major priority in adult social care and across all Agencies.

3.5 Over the last three years there have been significant changes implemented across adult social care, including the development of the Locality model supported by a specialist safeguarding function. A Peer Review is an opportunity to take stock and look at possible future developments. A Peer Review offers this opportunity with the support of independent expert advice from people working in a similar environment.

3.6 The Safeguarding Adults Peer Review methodology focuses on four key themes:

- a) Outcomes for, and the experiences of, people who use the services
- b) Leadership, Strategy and Working Together
- c) Commissioning, Service Delivery and Effective Practice
- d) Performance and Resource Management

3.7 The Review will be conducted over an intensive period of 3 days. A team of five / six reviewers from other London Boroughs will be selected by the ADASS office and will include:

- Review Leader, a Director of Adult Social Services (DASS)
- Safeguarding Lead
- Performance Lead
- finance lead
- Often a Principal Social Worker
- Review Co-ordinator

3.8 A typical Peer Review programme would involve:

Day 1- Scene setting session. Interviews/Focus Groups/visits

Day 2 - Interviews/Focus Groups/visits

Day 3- Team prepares Feedback to be presented to Croydon. Feedback is provided to Croydon in the form of a PowerPoint presentation.

- 3.9 Following the Review an action plan will be developed based on the recommendations from the feedback.

Preparation

- 3.10 For a positive peer review experience it is essential that there is thorough preparation and planning. To ensure this happens, a project group led by Head of Adult Safeguarding / Head of Innovation & Change is being established.

- 3.11 The Group will focus on some of the lessons learnt from previous reviews including:

- a) **The Review is full inclusive.** It is important that Safeguarding teams in Croydon work together to support and be part of the review. Although the Council is seen as the lead organisation for Adult Safeguarding – essentially adult safeguarding is a multi-agency / discipline activity. Therefore for the Peer Review to be successful all partners, including residents must feel part of the review. This will be reflected in the project group.
- b) **Focus of the Review.** The area of adult safeguarding is too broad for the short methodology of a peer review. Successful Peer Reviews have ensured that the subject area is focussed enough to allow reviewers to analyse sufficiently to give meaningful recommendations. Furthermore it should be an area which would enhance the development of the safeguarding system in Croydon. The Project Group will work with Croydon Safeguarding Adults Board (CSAB) and other interested parties including Member to ensure this happens.
- c) **Pre-review preparation.** The Council will be expected to submit a self-assessment to support the review and plan all the interviews, visits and groups. To be successful these will all have to be planned fully. Again the project group will lead on this.

Next Steps

- 3.12 There will be further discussions with partner agencies about the Peer Review at the CSAB development day and the CSAB quarterly meeting. This will help refine some of the issues. The outcomes of these discussions will be shared verbally with ASSRP as the CSAB Board meeting is the in afternoon just before the ASSRP meeting on 29/01/2020.

4. CONSULTATION

- 4.1 None specifically identified in this instance.

5. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

- 5.1 There are no financial implications arising directly from this report. All activity resulting from the recommendations of the Peer Review in Adult Safeguarding, will be absorbed within current resources.

Approved by: *Lisa Taylor, Director of Finance, Investment and Risk and Deputy S151 Officer*

6. EQUALITIES IMPACT

- 6.1 There are no specifically identified equalities impacts from this report, however the outcome of the review, and any recommendations, should inform objective setting for both the Croydon Adults Safeguarding Board and the Health Wellbeing and Adults service plans. Where relevant, equality impact assessments must be completed.

Approved by: *Yvonne Okiyo – Equalities Manager*

CONTACT OFFICER: Nick Sherlock, Head of Adult Safeguarding and Quality Assurance

APPENDICES TO THIS REPORT: None

REPORT TO:	ADULT SOCIAL SERVICES REVIEW PANEL 29 January 2020
AGENDA ITEM:	6
SUBJECT:	Adult Social Care Plan 2020
BOARD SPONSOR:	Annette McPartland Director- Health, Wellbeing and Adults Division

CORPORATE PRIORITY/POLICY CONTEXT:

This report provides an overview of 2020 plan for adult social care in Croydon; it addresses Outcome 1 of the Corporate Plan: supporting **People to live long, happy, healthy and independent lives.**

This report is for information.

FINANCIAL IMPACT

There are no financial implications arising directly from this report. All activity resulting from the Adult Social Care plans for 2020, will be absorbed within current resources.

1. RECOMMENDATIONS

- 1.1 The Adult Social Services Review Panel (ASSRP) is asked to note the contents of the report and support the adult social care plans for 2020.

2. EXECUTIVE SUMMARY

- 2.1 The vision for adult social care is to support residents and their families with care and support needs. Working in localities with system partners, we will focus on prevention and early intervention, maximise the life chances and outcomes for residents, based on a 'whole family, community led support approach' to services; through better coordination and integration of services.
- 2.2 This report sets out key deliverables, both mandatory and within the corporate plan, and Croydon health and care plan, including the principles of locality working, through proactive and preventative approaches.

3. LEADERSHIP AND RELATIONSHIP MANAGEMENT, INCLUDING HEALTH AND SOCIAL CARE INTEGRATION

- 3.1 Deliver strategic influence to the system leadership team; in particular development of the needs of vulnerable adults and social care needs, including making disability everybody's business, and within the localities.
- 3.2 Working with One Croydon Alliance to enable a whole population fully

integrated disability health and social care service. (See also January 2020 Cabinet report - [Health and Social Care Integration and South West London](#), see item 9).

- 3.3 Support the improvement action plan for integrated community mental health services.
- 3.4 Enable a high performing adult social care team culture; in particular, developing an action plan and responding to areas of development identified through staff conversations.

4. RESIDENTS AND CARERS FEEL LISTENED TO, INCLUDED AND VALUED

- 4.1 The voice of residents and carers is central in developing the community led support model. Maximising resident and carer independence, resilience, well-being and ability to make choices; reducing poverty and social isolation, and increasing employment.
- 4.2 Work with the Croydon Safeguarding Adults Board to ensure people are safeguarded.
- 4.3 Continue to ensure access to Advocacy supports residents, delivers our Care Act responsibilities and deliver the Joint Carers Strategy outcomes.

5. COMPASSIONATE CROYDON / MAKING DISABILITY AND DEMENTIA EVERYBODY'S BUSINESS

- 5.1 Talk to people with disabilities and find out what would improve the quality of their lives in Croydon.
- 5.2 To work with leading local voluntary and community sector disabilities focused partners to understand what their key priorities are; and act as an enabler to share this learning, and how it can impact service design and commissioning.
- 5.3 To take a similar approach to the successes of the Croydon Dementia Action Alliance, to enable Croydon to become and Autism Friendly Borough.

6. TO SECURE A FINANCIALLY SUSTAINABLE FUTURE

- 6.1 Deliver a locality focused, preventative and integrated service, that is sustainable; that links to the strategic work on mapped prevention spend; that delivers the savings expected to be agreed for 2020/21, and ensuring budgets deliver value for money.

7. ADULT SAFEGUARDING

- 7.1 Respond corporately to the Deprivation of Liberty replacement legislation, the Liberty Protection Safeguards; and ensure there is a system approach to implementing the changes.

- 7.2 Work with the Croydon Safeguarding Adults Board to ensure we have common thresholds for safeguarding, reviewing options to redesign a one system approach to safeguarding in health and social care.
- 7.3 Respond to the recommendations from the safeguarding review; and delivery a London ADASS safeguarding peer review (expected in Autumn 2020).

8. WORKFORCE, INNOVATION AND GETTING THE BASICS RIGHT

- 8.1 Work with residents and partners to develop our offer, enabling people with disabilities to remain in or near their local communities.
- 8.2 Develop a resident centred and supported staff culture and working practice, to deliver integrated and personalised care in service planning and delivery; linked to the Croydon Health & Social Care Plan and locality working.
- 8.3 Communicate and engage with staff to jointly design a clear expectation for our culture and accountability, to support this with a proportionate learning and development plan; and recruitment and retention plan.
- 8.4 Developing assessment and reviews with residents and carers using the community led support model, and ensuring this directly impacts the 'to be processes' of the new Liquid Logic system.
- 8.5 Deliver an innovation programme focussed on shift to integration, prevention and localities through transformation in workforce, market shaping, improving accommodation, information advice and guidance, increasing use of direct payments, data quality, resident need, enabling active lives, financial controls, value for money and efficiencies.
- 8.6 Prepare the organisation and residents for the expected social care white paper and analyse its potential impacts, aligned to the NHS Long Term Plan.
- 8.7 Ensure the newly insourced care and support across our extra care units is remodelled as a home for life, aspiring to be rated as outstanding by the Care Quality Commission, with a minimum standard of good; and that remains person centred.

9. CONSULTATION

- 9.1 None specifically identified in this instance.

10. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

- 10.1 There are no financial implications arising directly from this report. All activity resulting from the Adult Social Care plans for 2020, will be absorbed within current resources.

Approved by: *Lisa Taylor, Director of Finance, Investment and Risk and Deputy S151 Officer*

11. EQUALITIES IMPACT

- 11.1 There are no specifically identified equalities impacts from this report, however there are a number of changes proposed. In all instances, where there are future changes being proposed to services, strategy or policy, equality impact analysis will be completed, to inform evidence based decisions.

Approved by: *Yvonne Okiyo – Equalities Manager*

CONTACT OFFICER: Annette McPartland, Director of operations

APPENDICES TO THIS REPORT: None

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