



Adult Social Care Business Plan 2021-25

Introduction



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Executive Director
of Adult Social Care

In our 2019 Business Plan we set out our ambitions and priority programmes for Adult Social Care for the next four years. Since then, much has changed. The Covid-19 pandemic has had a profound impact both nationally and locally on people receiving and providing social care and the full effect on citizens, the care market and the workforce is still to be fully understood.

We know that there has been a tragic toll especially amongst older residents and working age adults with learning disabilities, a significant increase in requests to support people with mental ill health, and the fragility of the care provider market has become of serious concern.

At the outbreak of the pandemic in March 2020 the Adult Social Care workforce moved almost entirely to remote working and we suspended all but essential face-to face activity. Our operational focus was to keep people safe and ensure swift flow from acute hospitals. I am proud of the work that we did to support the shielding of vulnerable residents; to support care providers with infection control and managing outbreaks through new local care hubs; providing a range of financial and non-financial support to care providers; and rolling-out Carephone tablets to support 2,000 vulnerable people to protect them from social isolation.

When the Mid and South Essex health system declared a major incident in December 2020 we worked as a health and care system across greater Essex to respond, providing mutual aid and testing and enhancing our emergency response plans so that we could cope as a system with the unprecedented circumstances we faced.

Throughout the pandemic we developed a system-wide approach to gathering data and intelligence on flows through hospitals and bed occupancy so that we can better manage demand in the system. We will work with our partners to build on this legacy of improved quality and availability of system-wide data as we move forward. I am extremely proud of the way in which Adult Social Care responded to the pandemic and that, despite these many pressures, we continued to manage within our budget.

But the pandemic inevitably caused some delays to our planned activity of work and also created some operational backlogs. It created challenges to some of our ambitions and outcomes and we need to re-double our efforts now to ensure that we can best support people. As we begin the process of renewal it is right for us to re-evaluate our position and re-frame our business plan to reflect changed circumstances and new ways of working so that we can continue to respond to the pandemic when we need to, while also laying the foundations for our future ambitions of social care in Essex.

As a service we are committed to supporting the development of inclusion and diversity. We are working to fully understand the challenges and experiences that people face so we can ensure that diversity is continually embraced and there is inclusion for all.

It also necessary that we consider the requirements of the Health and Care Bill, which proposes to establish new statutory integrated care partnerships as well as introducing a new inspection regime for local authorities on Adult Social Care by the Care Quality Commission.

This plan sets out our ambitions; our areas of focus; and our response to these local and national strategic challenges.



Our vision

Putting communities at the heart of Adult Social Care: enabling people to live their lives to the fullest.

Adult Social Care needs to move to a more community-based model that is more local, more preventative, and more integrated with partners – helping to ensure that people can get the right support at the right time to maintain their independence and quality of life.





The outcomes we want people to enjoy

- ✓ Independence and wellbeing is maximised
- ✓ Choice and control over health and care
- ✓ Access to a place to call home
- ✓ Access to social and employment opportunities
- ✓ Positive experience of health and social care system
- ✓ Reduced inequalities and increased inclusion
- ✓ Kept safe

Our principles

Our mission is to enable people to live the best lives they can.

Our principles will guide the way we work.

Co-production with citizens and partners:

Local

We will do all we can to enable decisions to be made as close to residents as possible, trusting and empowering communities and individuals to play an active role, take on responsibility and use their expertise and resources creatively.

Prevent, reduce, delay

Prevention will be at the heart of everything we do: we will seek, identify and maximise every opportunity to prevent, reduce or delay the need for care.

Person-centred

We will work alongside people to ensure that wherever possible they plan their care and support and achieve their aspirations.

Collaborate

We will work with a range of organisations and individuals to break down boundaries of collaboration, identify shared goals and tackle common problems.

Evidence-based

Our decision-making will be deeply rooted in the evidence and insights we collect.

Continuous improvement

We will strive to always do better, embracing innovation and change where it can continuously improve outcomes.

Our financial position

Adult Social Care has been successful at living within its financial envelope in every year since 2017/18 and we must build on these solid foundations as we face unprecedented uncertainties and challenges.

Our forecast annual net budget requirement is set to grow by 19% (or by approximately £22m a year) over the period 20/21-23/24, a position that is not affordable within the Council's Medium Term Resource Strategy (MTRS). This requirement is largely driven by pressures on budgets for care and support, with spending on all client-types set to grow (pre-savings):

- The biggest driver of expenditure growth is forecast to be due to price increases, accounting for £21.8m of pressure in 21/22 alone
- Our current trajectory is contrary to the ambitions in our business plan and will see more spend on long-term care and less available for early intervention and prevention
- Our ambition is to ensure that we have sustainable finances so that we can not only balance our budget but also be able to afford to invest in improving and transforming services.

Adult Social Care	20/21 Provisional Outturn £000	21/22 Budget £000	22/23 Draft Budget £000	23/24 Draft Budget £000
Care and Support				
Older People	89,278	91,579	88,742	99,369
Learning Disabilities	198,640	213,538	227,813	242,116
Physical and Sensory Impairment	45,208	49,142	52,526	56,634
Mental Health	20,627	20,900	21,657	22,274
Total	353,753	375,159	390,738	420,393

Strengths

- **Outcomes are stable** and good in comparison with other LAs
- **Workforce numbers are up** and 6-day working now in place
- **Positive response** by all to demands of **Covid**
- **Good budget management** enabling financial stability
- Some **good progress with priority programmes** – some areas have accelerated delivery while others need to re-frame/re-focus
- **Improved coproduction**/collaboration with residents
- Strong internal/external **relationships**
- **Good talent in the teams and passionate frontline staff**
- Recognition of the **benefits of being in work** – increase in referrals and number of adults with disabilities being supported to access paid employment
- **Improved working with Adult Social Care and Health commissioners**

Weaknesses

- Priority to **support the workforce**, especially change management
- **Increasing demand and poor prioritisation** causing workforce pressures
- **Data quality issues** in getting accurate, timely, quality MI and using data to understand baseline and progress
- **IT system** is a key issue affecting quality of data, low staff retention and increased levels of administration
- **Lack of join up across ECC** in managing strategic relationships
- **Corporate resource offer** does not always meet our needs
- **Carers offer** needs strengthening
- **Choice and control** is not embedded in our practice
- **Siloed working** on initiatives and **lack of clear links and accountability to outcomes and measurement of impact** leads to duplication and confusion of effort
- Lack of co-ordinated **approach to change and transformation**
- **Practice quality** and interactions are of concern and need rethinking
- **Resources are not properly aligned to key programmes** and will not deliver planned savings

SWOT analysis

Opportunities

- Covid has accelerated opportunities for **place-based, whole system working** with health, districts/boroughs, voluntary and other partners
- **Integration** with Primary Care Networks (PCNs) to support capacity/complexity and cope with pressures of demand
- **Joint commissioning** for improved health and social care outcomes and person experience
- **Joint appointments** linked to practice and joined up working with health and social care
- Better use of **pathways out of hospital**
- **Technology** – especially since Covid
- To **shape the market** so it delivers what we need

Threats

- Fragility of the **care provider market** is a key concern, especially as government Covid funding is withdrawn
- **Further outbreaks of Covid** are highly likely, although the impact and timing is uncertain
- Unemployment and other fallout from Covid is likely to cause increased **demand for mental health support** and increase the employment gap for people with disabilities even further
- **Funding pressures**
- **Government reform plans** – both Local Government Reform and Adult Social Care/NHS could cause disruption
- The introduction of the **CQC inspection regime** in 18 months will require resourcing and planning

Our priority areas of focus

Essex County Council (ECC) has set out its four strategic aims and commitments. While these are cross-cutting, our main focus will be on improving health, wellbeing and independence outcomes for all ages.

ECC's four strategic aims and 20 commitments:

Economy:

- Good jobs
- Infrastructure
- Future growth and investment
- Green growth
- Levelling up the economy

Children and families:

- Education outcomes
- Family resilience and stability
- Safety
- Outcomes for vulnerable children
- Levelling up outcomes for families

Environment:

- Net zero
- Transport and built environment
- Minimise waste
- Green communities
- Levelling up the environment

Health, wellbeing and independence for all ages:

- Health lifestyles
- Promoting independence
- Place-based working
- Carers
- Levelling up health

These are the mission-critical areas that we must focus on:



Prevention & early intervention



Carers



Housing, employment, opportunities



Place-based working & Integration



Care Market



Practice



Digital & Technology

Our four year ambitions

To move towards our vision for Adult Social Care and delivery against ECC's strategic commitments we have identified seven immediate, mission critical areas that we must address in the next four years.

While we focus on these areas of change our commitment to safeguarding, to listening to the views of people who are experts by experience, and putting the people we support at the heart of all we do will be integral to our plans.



1. Develop a prevention and early intervention offer to help reduce or delay the onset of health and care needs.



We will have worked with health and public health colleagues to achieve reductions in dependency on social care, with health issues being resolved at primary care/community care level.



2. Improve our support offer to carers to ensure that people get the support they need in their caring roles, while enabling them to enjoy a good quality of life.



Essex will have a first-class, all-age offer with carers feeling well-supported by the system and know where to go to be able to access the information and support they need as and when they need it.



3. Improve access to housing, employment, and meaningful opportunities ensuring we promote an inclusive society that addresses inequalities in access which has an adverse impact on quality of life, independence, and health outcomes.



All partner housing authorities across Essex have a clear understanding of demand and therefore the supply requirements for specialist housing to meet the needs of adults with disabilities and those with poor mental health. Essex will have a vibrant, inclusive job market and the disability employment gap is reducing. All adults can join in with the lifestyle, social and leisure activities they choose.



4. Implement place-based working and integration working in multi-disciplinary teams with partners to improve people's experience of the health and care system.



There will be five strong and mature alliances across the Essex geography with effective coordination devices, and a shared understanding of those solutions best created a local level, at Integrated Care System (ICS) level, and at Essex level.



5. Support and shape the care market so that care provision is viable and sustainable going forward.



Quality, choice and viability of the care provider market exists in all parts of Essex. We will have achieved much higher recognition of the value of social care workers across the county and enhanced their feelings of wellbeing.



6. Improve quality of practice

to fully embed a strengths-based approach that promotes independence, choice and control and dignity.



Essex has an engaged, high-performing social care workforce delivering high-quality practice standards in meeting their statutory responsibilities. The workforce knows and can measure the quality of its work and practice and is delivering transformational change through social care activity.



7. Improve digital and technology infrastructure

to ensure we have the right support for people with care needs to live independently, to support the workforce to work as efficiently as possible and to support the care market.



Digital health and social care guidance and services will be simple for adults to access and intuitive to use; our technology will make it easy to work from wherever we need to; we will have complete, trustworthy data at our fingertips to support decisions; our technology platforms will support collaboration and shared information with partners; and it will be easier for providers to link with our IT systems reducing processing time and costs.

We will have achieved a shared care record for health and Adult Social Care.



Enablers

We have identified six enabling strategies that will support delivery of the business plan.

People Strategy

- Improve recruitment and retention
- Support care market
- Aligned Health and Care Workforce Strategy

Financial Strategy

- Achieve sustainability
- Shift spend towards early intervention and prevention
- Develop place-based budgets
- Invest to save

Market Shaping Strategy

- Refresh market position statement
- Commissioning intentions from ECC and NHS partners
- Stimulate innovation and address gaps in market offers

Data, Analytics and Insight

- Improve data quality
- Develop approaches to population health management
- Listen to, and use, Citizen Insight and Lived Experience

Digital and Technology Strategy

- Opportunities to support workforce, market and service users and carers
- Develop four year pipeline of digital and technology priorities

Operational Delivery

- Address operational backlogs and pressures
- Develop quality of practice
- Prepare for new inspection regime
- Joint place-based working



Reporting

Area of focus	Increase access to housing, employment and meaningful opportunities					
Objective	To ensure we promote an inclusive society that addresses inequalities in access which has an adverse impact on quality of life, independence, and health outcomes					
By 2025...	...all partner housing authorities across Essex have a clear understanding of demand and therefore the supply requirements for specialist housing to meet the needs of adults with disabilities and those with poor mental health. ...Essex will have a vibrant, inclusive job market and the disability employment gap is reducing. All adults can join in with the lifestyle, social and leisure activities they choose.					
Outcomes	Independence and wellbeing is maximised	Choice and control over health and care	Access to social and employment opportunities	Positive experience of health and social care system	Access to a place to call home	Reduced inequalities and increased inclusion
Initiatives	HOUSING & ACCOMMODATION				EMPLOYMENT / MEANINGFUL OPPORTUNITIES	
	ACCOM SOLUTIONS	MLM ★	PI	MH ★	MLM ★	
Measures 2021-22	180 new L/R/CI housing units will be delivered by 2024/25	Develop 8 In-Community and residential complex needs services by 2025	70 people move from residential into supported living by 2025	New model for MH supported accommodation goes live Oct 2022	80 people will access employment via the LIVE service by Mar 23	45 less people attend Day Services due to Stay Connected alternative virtual offer by Mar 22
	1 Increase average occupancy from 80% to 85% in schemes where ECC has nomination rights	Develop 12 profiles for each district by December 2022, then update quarterly.	50 people access rehabilitation services to support move from healthcare by 2025	12 people per year move on from supported accommodation into independence.	Reduce by 27 people attending day services due to employment via LIVE by Mar 23	
	Occupancy at the end of Jan was 78%.	Increase the number of adults living in a Shared Lives placement from 44 to 58 by March 2023.		70% reduction in the number of cases supported admitted to hospital or into their homes	Increase of 50 people accessing employment via Realise Futures by 31 Mar 23	
	The extra-care scheme in Braintree has now opened.	Cabinet approval April 22 of new contract for complex needs residential service		30 people in sustained employment at the end of 2023 due to business grant funding process		

Reporting cycle:

- Monthly check-ins/status updates on **all programmes and delivery teams** to update scorecard
- Monthly scorecard report and exceptions reporting to **Programme Board** which monitors and reviews progress and has oversight of changes
- **Strategy and Business Planning Board** meets quarterly to review and re-align the business plan and drive the next planning cycle of business plan, budget and MTRS
- **Adult Leadership Team** receives quarterly progress report and reviews progress.

Our commitments – Adult Social Care

Strategic Performance Measures	Baseline	Targets (indicative in 23-24 and 24-25)				Data Source	Area of focus
		2021/22	2022/23	2023/24	2024/25		
Percentage of older people (aged 65+) who received reablement/rehabilitation services after hospital discharge	2.9%	3.6%	4.2%	4.2%	4.2%	Connect measures (people benefitting from reablement)	Prevention & early intervention
Number of adult social care users in receipt of care technology	N/A	2877	4195	5566	6444	Care Tech contract performance metrics	Prevention & early intervention/ Practice/Digital & Technology
Number of adults with a learning disability known to social services in paid employment	323	344	391	456	537	MLM-ECL Live contract metrics	Housing, employment, opportunities
Number of adults with a learning disability known to social services who secure new employment	N/A	86	115	144	173	Realise Futures contract	Housing, employment, opportunities
% adults known to secondary mental health services in paid employment	15.6%	Increase	Increase	Increase	Increase	From Mosaic	Housing, employment, opportunities
% of adults with a learning disability that transition into adult social care in residential care	18%	Decrease	Decrease	Decrease	Decrease	From Mosaic national measure but the calculation we are using is different to the statutory measure	Prevention & early intervention/ Practice
The proportion of adults in contact with secondary mental health services living independently, with or without support	72.9%	Increase	Increase	Increase	Increase	Data from EPUT	Housing, employment, opportunities
The percentage of adults who are self caring post reablement on discharge from hospital	48%	50%	52%	54%	55%	Connect measures	Prevention & early intervention/ Practice

Measures where further development work is required:

Stability and development of the workforce - we are looking to develop an appropriate measure to track changes in the care workforce to ensure that this continues to support a strong care market and the provision of quality services.

ASC Strategic Planning Framework

Vision, outcomes and principles

Our vision: Putting communities at the heart of Adult Social Care: enabling people to live their lives to the fullest

The outcomes we want to see for adults and their carers:

Independence and wellbeing is maximised

Choice and control over health and care

Access to social and employment opportunities

Positive experience of health and social care system

Access to a place to call home

Reduced inequalities and increased inclusion

Kept safe from harm

Our principles:

Person-centred

Place-based

Early intervention and prevention

Collaborate

Continuous improvement

Evidenced-based

Business Plan

Our priority areas of change focus:

Develop a prevention and early intervention offer

Improve support offer to carers

Increase access to housing, employment and meaningful opportunities

Implement place-based working and integration

Support and shape the care market

Improve quality of practice

Improve digital and technology infrastructure

Objectives: Initiative & KPIs

Our change activities

Objectives: Initiative & KPIs

Our enablers:

People Strategy

Market Shaping Strategy

Data, Analytics & Insight Strategy

Digital Strategy

Financial Strategy

Operational Delivery Plan

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