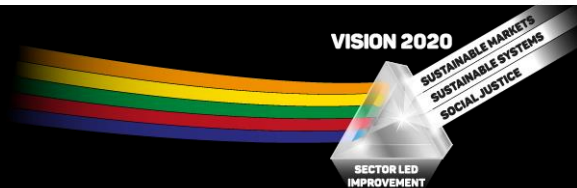# Coventry Peer Challenge Adult Social Care

3rd to 5th March 2020

West Midlands Peer Challenge Context

- Sector Led Challenge and Continuous Improvement Offer
- Onsite Peer Challenge are part of wider wider offer of support and development work by the West Midlands ADASS Branch
- 2018-2020 West Midlands programme involves all councils
- Range of support for councils includes access to subject matter experts, networks of good practice, participation in specific areas for development, peer challenge training, practice reviews and now widening into the involvement of NHS partners
- Exploring different ways of involving local people and their families who use services in the onsite activity
- Runs alongside national offers such as CQC and LGA focused sector led improvement activity e.g. DTOC reviews
- Subject area and length of peer challenge is chosen by the council
- Formal feedback letter is published and 6-month action plan follow up

Focus/Key Lines of Enquiry

A number of changes have been made to how we support people at home in recent years. We want the peer challenge team to consider what else could be done in order to reduce our levels of residential admissions and support people in their own homes

The work to develop our promoting independence approach is on-going and this will always be the case. Can the peer challenge team advise how we might improve further in this area and tell us what opportunities for improvement exist through working closer with internal and external stakeholders

Summary

- The 'One Coventry' approach to breaking down silos internally is refreshing
- The Corporate Leadership Team and Chief Executive are very committed and open to be more engaged by the adult social care directorate
- Adult social care has done an excellent job in managing resources and improving outcomes over the last few years with strong leadership from the directorate management team
- The team heard that public health is working on community development, but the connection to adult social care is not clear
- It is unclear what the community development/asset development offer is, and how it is going to be developed
- Co-design and involvement is a real issue.
- There appears to be a lack of strategy around the range of accommodation and flexible support currently and going forward
- The Practice Review demonstrated the move to strengths-based practice
- There has been development and investment in performance management, with a great performance management team
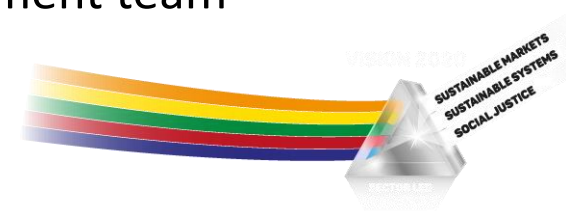
Practice Review Methodology

- Practice Review undertaken by 3 Principal Social Workers co-ordinated by the WM ADASS Practice Review Lead in October 2018 (pilot for the new arrangements)

- Practice Review updated by one of the Principal Social Workers and WM ADASS Practice Review Lead in January 2020 (due to gap between original review and peer challenge)

- The Practice Review update consisted of meetings with the Director of Adult Social Care, host Principal Social Worker, Managers and Social Workers

- In addition, they reviewed a range of documentation, including the action plan to address issues for consideration from the Practice Review undertaken in October 2018

Practice Review Summary

The summary of the ratings below is based on Principal Social Workers reviewing eighteen case files in October 2018. These ratings are made based on components of good strengths-based practice they have identified and their experience. In total there were 216 questions rated (18 x 12 questions)

- Outstanding   6 (3%)

- Good   141 (65%)

- Requires improvement   98 (26%)

- Inadequate   12 (6%)

Practice Review Findings

Strengths

- Huge amount of work undertaken and good progress made since the Practice Review undertaken in October 2018

- Excellent documents/tools produced and implemented (Adult Social Care Practice Framework and Strengths-Based Practice Handbook)

- Practitioners and managers understand strengths-based practice

- Good examples of where strengths-based practice has been used well

Practice Review Findings

Opportunities

- Embedding strengths-based practice and using the tools produced
- Developing the Quality Assurance Framework and ensuring it is business as usual across adult social care
- Increasing and developing practice auditing across teams
- Developing a performance framework to sit alongside the Quality Assurance Framework to begin to measure the impact of strengths-based practice
- Embedding reflective practice and peer group supervision
- Examining and revising safeguarding documentation

Some of the voices we heard

We need more community working

Pete is a real system leader

Mobile night service is working well

What we need is to start planning sooner – we need more ambition for young people

Adult social care need to shout louder

We support people in a kind of a bubble - what happens when they need to go to the shop

KLOE 1 A number of changes have been made to how we support people at home in recent years. We want the peer challenge team to consider what else could be done in order to reduce our levels of residential admissions and support people in their own homes

- Strong management team, and a well resourced and effective performance management team
- Management and focus on the provision of formal services is very impressive given the pressures within the health and care system
- Senior management and middle management have embraced a performance development approach, but has this reached front line staff so that they can deliver personalised alternatives for all ages
- Do you have sufficient data and customer insight in one place to be confident that you understand the funded nursing care and continuing health care pathway?
- It appeared that there were some community resources that were under-utilised
- It is not clear if the system health and care plans for out of hospital care set out in 2016 and other plans, including integrated multi-disciplinary teams, have been delivered

KLOE 1 A number of changes have been made to how we support people at home in recent years. We want the peer challenge team to consider what else could be done in order to reduce our levels of residential admissions and support people in their own homes

- Politicians, commissioners and operational staff that we met all like working for Coventry and are very open to feedback and self improvement, and they want to do the best for the residents of Coventry
- Bed-based pathways from hospital do not appear to be working effectively and may be a significant factor in your numbers of people in residential and nursing care
- In the overall pathway their appear to be gaps in the range of support on offer outside of formal services that would result in better outcomes for people and their carers, including helping to manage the numbers of people requiring residential and nursing care
- The work of public health and social care commissioners needs to align more effectively to manage demand on the social care system and to support the strengths-based offer
- Some very positive feedback about the emerging partnerships with health, including how to make best use of the available resources across health and social care to achieve better outcomes and avoid admissions to hospital

Some of the voices we heard

Develop a trusting relationship with providers

We need to bite the bullet with integrated teams

The council is open to new ideas and services

I don't think we know where to start with involvement

Professionals made me feel small

KLOE 2 The work to develop our promoting independence approach is on going and this will always be the case. Can the peer challenge team advise how we might improve further in this area and tell us what opportunities for improvement exist through working closer with internal and external stakeholders

- The re-shaping and improvement work of promoting independence is impressive and is delivering some tangible results – some areas would describe this as significant transformation
- Commissioning is very process and procurement driven, and the focus appears to be on re-procuring current service models, rather than a range of options
- There is good micro-commissioning demonstrated by practitioners, but there is an opportunity for commissioners to promote community assets to assist practitioners further
- There appears to be a gap in the accommodation offer, which is mainly about supported living, residential and nursing care. There is a lack of clarity about whether other alternatives are being explored and/or developed
- The development of community broker in the front door is encouraging, but their role, focus and capacity requires some clarity
- The relationships with the voluntary sector and community groups do not appear to be prioritised by commissioners and need to be developed, including a place where they can share experience and ideas

KLOE 2 The work to develop our promoting independence approach is on-going and this will always be the case. Can the peer challenge team advise how we might improve further in this area and tell us what opportunities for improvement exist through working closer with internal and external stakeholders

- There appears to be a disconnect between public health activity and the adult social care promoting independence work, which may be resulting in missed opportunities

- There appears to be insufficient transformation resource in place within adult social care to connect with the corporate transformation programme and health system transformation. This is hampering progress at pace on delivering an integrated people and place transformation plan

- The adult social care digital strategy as part of the wider council strategy is not clear and needs to be further developed

- There needs to be a plan to develop a broader and more bespoke range of accommodation for the immediate future and the longer term that includes different tenures and types, focused on promoting interdependence for all ages in local communities, particularly those who are currently living outside the city due to gaps in local provision

Some of the voices we heard

WM ADASS
flipping adult social care
http://wm-adass.org.uk

More thinking outside of the box

All paths lead to Pete

There is a focus upon the professional take on interventions

Be more ambitious for younger adults

Local communities involvement in change in adult social care is nominal at the moment

SUSTAINABLE MARKETS
SUSTAINABLE SYSTEMS
SOCIAL JUSTICE

Future Focus

- Embrace the 'One Coventry' focus, involving communities, the voluntary sector and other providers in a holistic transformation plan for adult social care

- Develop a philosophy of involvement and co-design with people and their families who use services, and start commissioning from a position of co-production and involvement

- Develop the commissioning approach with public health and re-orientate activity towards developing more diverse community based assets and shaping the voluntary and community market

- Consider a rapid improvement approach to focus on practice around patient/service user flow through the entire system to reduce the high usage of residential care and ensure personalised care

- Accelerate a clear digital strategy for adult social care and integrate it into the 'One Coventry' transformation priorities

- Address the range of accommodation and support available today and for tomorrow to ensure residential care is only used for those that need it, and that greater provision for independent living is made for younger adults as well as those with a wide range of support needs

- Review the resources allocated to transformation to improve connectivity with the council wide 'One Coventry' ambition and re-invigorate the delivery of integrated care with health

Thank You

The Peer Challenge Team would like to thank all of you who have met with us this week

All of those who we haven't met, but have worked so hard to provide all of the information available

And lastly Ceri, and all those who have helped over the three days. Thank you so much for your patience, organisational skills and kindness