

# Coventry City Council's Adult Social Care Self Assessment 2023/2024





# COVENTRY





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# Introduction

## Welcome to our Adult Social Care Self Assessment for 2023/2024

This report details how we are delivering Adult Social Care services in Coventry against the four themes and quality statements of the Care Quality Commission (CQC) assessment criteria for local authorities. It contains information on overall performance and finance, how our pattern of support is evolving in response to changes in the make-up of the city and areas we are focussing on for further development. The Self Assessment is intended to be read in conjunction with our Annual Report (Local Account) as this includes a wide range of case studies and evidence supporting the information contained within this Self Assessment.

## Coventry – the city

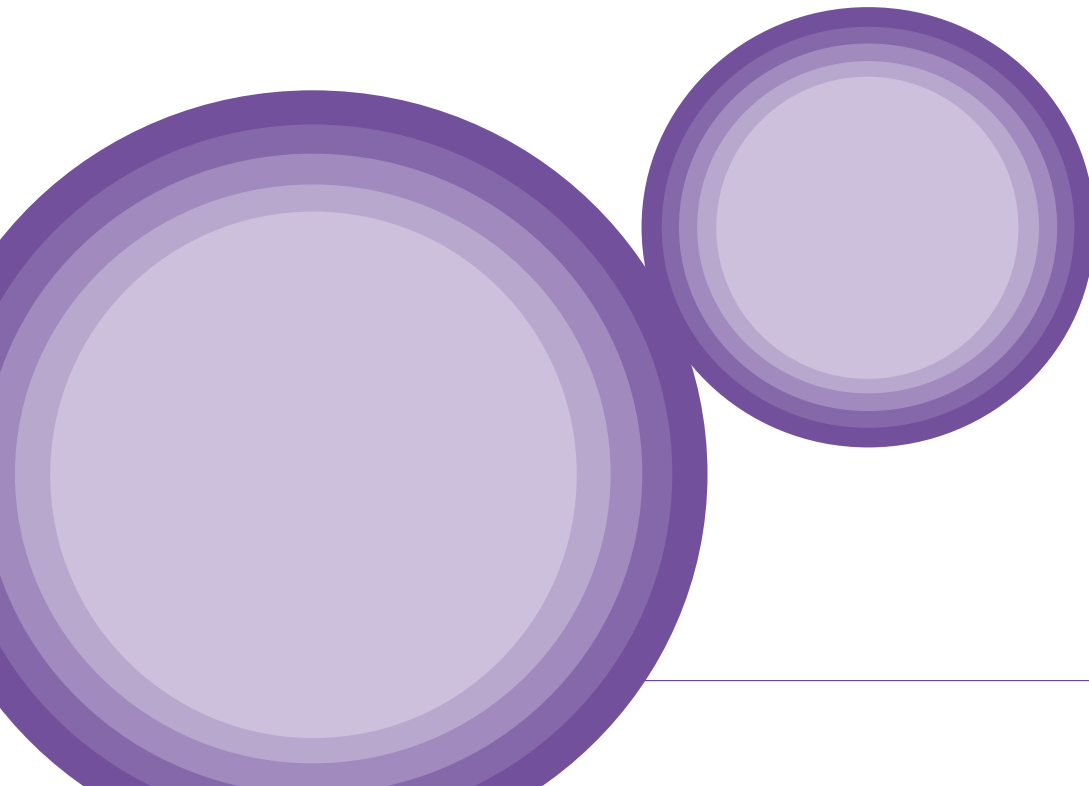
Coventry is the ninth largest city in England and the twelfth largest in the United Kingdom. It is a diverse city in respect of both ethnicity and religion and a city of relatively high deprivation and low life expectancy. These factors combined, effect demand for services across a range of Council service areas including Adult Social Care.

We take our responsibilities towards our most vulnerable residents very seriously. We have stayed true to our responsibilities to protect the most vulnerable whilst developing and improving the city for all our residents.

Coventry City Council is a Labour run Council of 18 wards and following the 2024 local elections comprised 40 Labour, 12 Conservatives and 2 Green Party Councillors.

There is one major hospital within the city, University Hospital Coventry and Warwickshire which has 1005 beds and provides both emergency and elective care and specialises in cardiology, neurosurgery, stroke, joint replacements, in vitro fertilisation (IVF) and maternal health, diabetes and kidney transplants. The Hospital is also a designated major trauma and cancer centre.

Coventry is also home to two universities, Coventry University and Warwick University with a combined student population of 67,255 (2021 census) of which 36,000 are living in Coventry. The 2021 census estimates that 9,730 of students living in Coventry are international students.



Some of our key city statistics are as follows:

### Size

A population of 345,325 as of the 2021 Census, making it the second largest Local Authority in the West Midlands. Coventry's population has grown by 8.9% over the last 10 years.

### Age

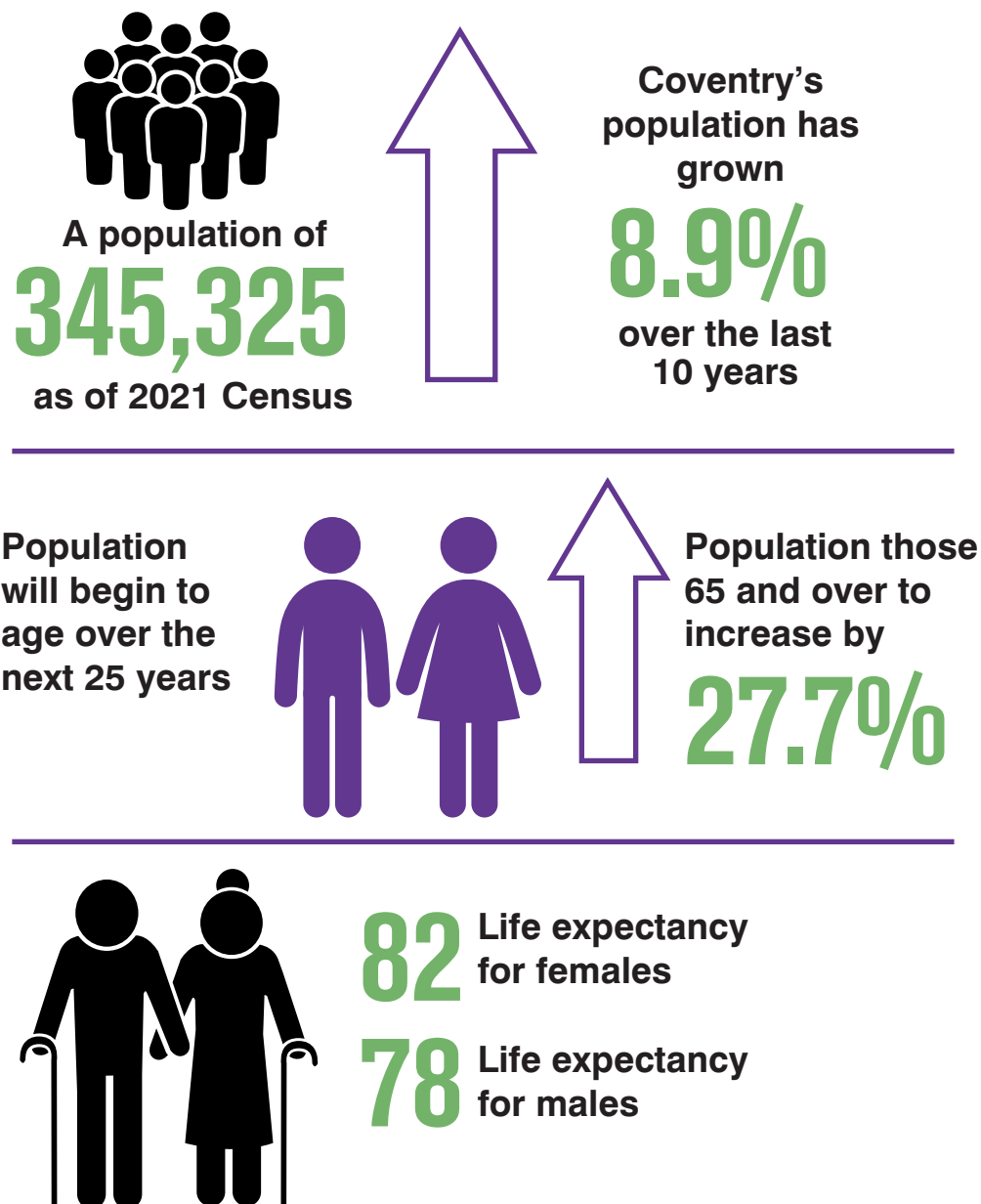
The median age of the population has increased by one year since the 2011 Census to 35, which is a full five years lower than that of the region and England at 40.

According to the 2018-based sub-national population projections, the population will begin to age over the next 25 years. Indeed, it is projected that the population of those aged 65 and over is to increase by 27.7% by the year 2043.

13% of the population are aged 65 or over and, despite the relatively young age compared to the region, the 55-59 age group has seen the biggest increase in the decade since 2011; this age group has increased by 27.5%.

### Life expectancy

Life expectancy in the city remains lower than the national and regional averages. For females this is 82 years and for males 78 years. Significant health inequalities across our neighbourhoods and in more deprived areas mean adults spend a greater proportion of their lives in ill health. Indeed, healthy life expectancy is 64 years for females and 61 years for males. As such, females live proportionally longer in ill health than males.



## Diversity

Coventry has been an asylum dispersal city for asylum seekers and more latterly a “city of sanctuary” in respect of migrant populations. The diversity of the city is higher than regional and national statistics. Post Pandemic, we have seen this population expand, with the requirement to address health inequalities a key priority for this and other groups within the city. Of note is the increasing number of migrant families coming to the city and the increasing demands on education particularly for those with Special Educational Needs (SEN).

65.5% of people in Coventry identified their ethnic group within the ‘White’ category (compared with 73.8% in 2011). 18.5% identified their ethnic group as ‘Asian, Asian British or Asian Welsh’ category (16.3% in 2011).

The diversity in spoken languages is also increasing, with English as a first language decreasing from 86.1% in 2011 to 82.5% in 2021. Within Coventry, Polish (2.3%), Punjabi (2.3%) and Romanian (2.1%) are the three most popular main languages spoken aside from English.

The religious affiliation of Coventry is also diverse. 30% of residents are recorded in the Census 2021 as having ‘no religion’, an increase from 23% in 2011. Being religious is more prevalent in Coventry than the national average as 37% of people across England have no religion. While Coventry has a lower proportion of Christian residents than the national average, 44% (England 46%) down from 54% in 2011; most other major religions are more commonly followed in Coventry. 10% of Coventry residents are Muslim, an increase from 7% in 2011; 5% are Sikh and 4% are Hindu.



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## Deprivation

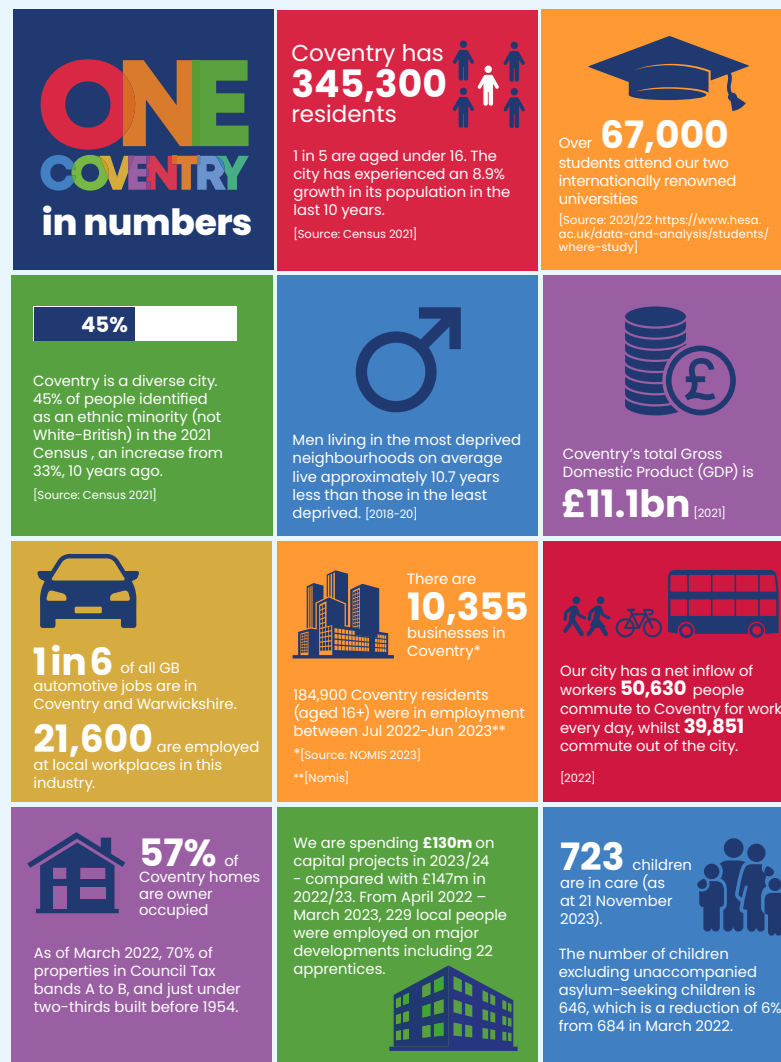
Deprivation within the city has decreased in more recent years and following on from becoming a Marmot City, the percentage of Coventry neighbourhoods that are amongst the 10% most deprived in England reduced from 18.5% to 14.4% between 2015 and 2019. However, over a quarter (25.6%) of neighbourhoods are amongst the most deprived 20% of areas (the most deprived 'quintile'), a particular focus for the health system for tackling inequalities (the 'Core20').

## Financial

Like many local authorities Coventry is facing funding challenges, with £30m of planned savings to deliver its balanced budget position in 2024/25 and a projected £14m budget shortfall in 2025/26. This reflects a combination of factors including funding received from central government coupled with rising demand and costs in social care and inflationary pressures. We need to ensure we spend every penny wisely – investing in efficient and effective services that focus resources to the front-line, prioritising those who need our support the most. This is the focus for our One Coventry Transformation Plan, which will transform how we deliver many of our services in 2024 and beyond. The local authority estimated that in 2023/24, its total budget would be £260.5m. Its actual spend for that year was £262.3m which was £1.8m more than estimated.

- The local authority estimated that it would spend £102.8m of its total budget on adult social care in 2023/24. Its actual spend was £107.8m, which is £4.9m more than estimated.
- In 2023/24, 39% of the budget was spent on adult social care.
- The local authority has raised the full adult social care precept for 2023/24 and 2024/25.

## About Coventry



## Adult Social Care

Our approach to Adult Social Care can be simply stated as 'maximising independence' through providing support in a way that enables people to remain as independent as possible.

We do not have a separate Adult Social Care strategy but work to support the delivery of the Integrated Care System strategy and support the aspirations of the One Coventry Plan. Our Adult Social Care Offer describes how we aim to deliver our services and what people can expect from us.

As a core principle though at every level we intend to provide support to the residents of Coventry, in the least intrusive and restrictive manner possible, based on the assets, resources and abilities available to them. Our focus is on the promotion of independence, and this continues to be at the heart of the way we work and provide support. Progressing this overarching objective is delivered day in, day out through the many interactions between our staff and people with care and support needs and through a series of improvement developments.

In undertaking our work we adopt a strengths-based approach to practice in all of our interactions, which is embedded in the principle that the people we are working with are experts in their own lives and their experience of receiving support is integral to the way in which we develop and improve our services.

In line with our One Coventry approach, partner organisations form part of 'our extended team' as we work together to deliver complex improvement programmes and discharge our safeguarding responsibilities.

Our Health and Care Partnership Vision is "we will do all that we can to enable people across Coventry and Warwickshire to pursue happy healthy lives and put people at the heart of all we do."

How we will do this: Our work in Adult Social Care, at every level, intends to provide support to the residents of Coventry, in the least intrusive manner possible, based on the assets, resources, and abilities that are available to them.

### Our commitments to people who need to access our services



#### Taking a strength-based approach

We are committed to enabling people to live as independently as possible, drawing on people's own strengths and doing the things that are important to them, making use of what's available in local communities.



#### Helping people to stay at home

We will look at how we can adapt people's homes and provide equipment or if unable to do so explore alternative accommodation to enable people to live an independent life more easily.



#### Living and ageing well

We will help people think about the support they need and plan for how they can live the best life possible both now and into older age. We will enable people to find solutions that work best for them.



#### Making the best use of resources

We will aim to provide the right amount of support to meet people's needs and outcomes. In providing appropriate support, we consider costs and will look at innovative ways to deliver care and support.



#### Joined up care and support

We will work closely within the Council and with different organisations, including the NHS, to support people to achieve what is important to them. We will work with organisations providing support to ensure safe and quality services.



#### Keeping people safe

We will help people stay well and safe from harm and abuse, working alongside other organisations when we need to, and supporting people to make their own choices.



#### Carers are at the heart of all we do

We recognise, value and support the vital role of unpaid carers and will support them in their caring role, as well as supporting them if their caring responsibilities change or end.



#### Committed workforce

We have a valued and respected Adult Social Care workforce and will support and develop our own and those of our partners, equipping them with the skills, knowledge and values to provide effective care and support.

For full details of Coventry's Adult Social Care Offer or to request information in another language or format please email [getinvolvedasc@coventry.gov.uk](mailto:getinvolvedasc@coventry.gov.uk)



Under each of the four themes of the inspection framework we cover the operational information required to meet the quality statement standards. For each theme we have summarised our key strengths and areas for development. However, in overall terms we would assess our key strengths and areas for development as being:

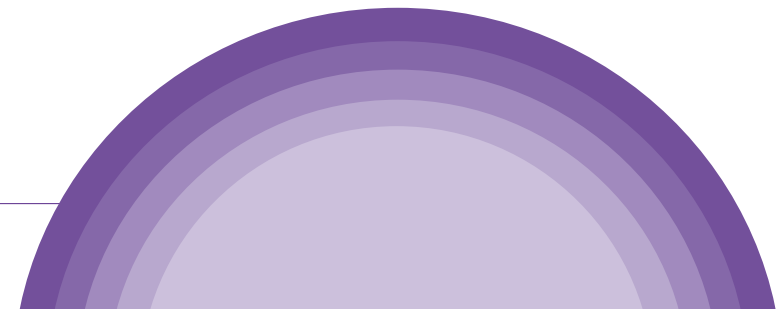
## Strengths

- Workforce - Our workforce is committed and stable with workforce surveys providing positive feedback on Coventry as a place to work.
- Market - Our market is able to respond to demands for care- we can source care for hospital discharge and for demand from the community quickly in most cases although challenges exist for some groups such as younger adults with particularly complex needs.
- Partnership working - NHS organisations in mutual improvement programmes such as Improving Lives and Mental Health Transformation, and with CV Life in developing activity programmes.
- Promoting independence - Our promoting independence approach focuses on supporting people at home using Occupational Therapy to support (top quartile performance.)
- Carers Information and Advice - Our provision of information and advice for carers is ranked upper middle quartile nationally indicating that people find it relatively easy to find information related to support for unpaid carers

## Areas for development

- Improving the diversity of options to choose from in relation to how identified outcomes are delivered - We can source care and support for people quickly in the majority of cases. However, there can be an over-reliance on regulated provision due to an absence of apparent alternatives within the city to provide alternatives in meeting needs.

- Uncompleted work (with continued involvement) - We have open safeguarding cases, incomplete assessments and support plans (with continued involvement), DoLS authorisations, financial assessments, DFG applications and review performance 55.6% for 2023/24. We are transparent through Cabinet Member reporting and Scrutiny and have processes in place to manage risk.
- Supporting carers - Locally through our carers networks carers indicate satisfaction with how they are supported, the information they receive and that carers feel involved in decision making. However, surveys indicate that carers do not feel as well supported as we want them to be. To start to address this a revised Carer's Action Plan was produced in December 2023 setting out the steps we will take over the next two years to improve our support to carers.
- Supporting a diverse community - Equalities runs across all areas. With an increasingly diverse demographic our challenge is how we reach out to and communicate so people feel equipped and able to approach social care when they need to and are met with a culturally appropriate response. We have increasingly reached out to communities in 2022 and 2023 through community engagement sessions and have good examples of where our approach supports people from diverse communities but there is more work to be done.



## Our approach to improvement

We are committed to continuous improvement and have recently delivered improvements across a number of areas including workforce, reviewing, resident voice, diversifying the social care market and use of technology.

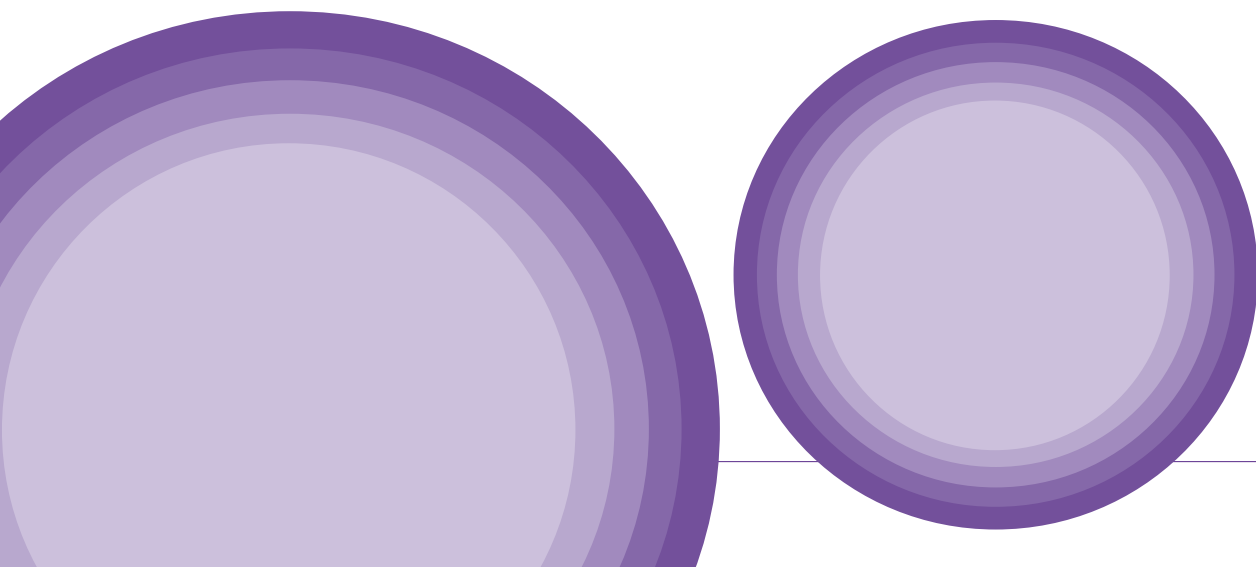
For 2023/24 we have also seen improvement across thirteen ASCOF indicators, with three seeing no movement and three declining.

We have a clear and focussed improvement plan for 2024/25 covering eight priority areas of Adult Social Care.

## Schedule of improvement delivery and action plans

Priority	Key aims of plan
Ensuring our workforce develops to meet the diverse and changing needs of the city	Ensure new entrants to the social care workforce are appropriately skilled, trained and supported, especially in the light of international recruitment Improved attendance, through supporting the wellbeing and resilience of the workforce Create development opportunities and improve succession planning in order to retain experience staff Improve the capacity of our workforce to respond to the diverse needs of our residents
Developing community based alternatives to regulated care and support	An improved menu of support options and improved ability for flexible support to be available in people's communities A reduction in the volume of regulated care and support required to meet peoples' care and support needs (increased use of Direct Payments will support this)
Improve our processes and joint decision making regarding the application of the Continuing Healthcare (CHC) framework	To have a robust approach to training and delivery of the CHC framework Oversight of the financial impact of CHC and joint funding on the Community purchasing budget Adherence to the disputes process
Unpaid carers and delivering our carers plan	Support for carers (right support at right time) to maintain them in their unpaid caring role Deliver actions within our Carers Action Plan by 31st March 2026. Use additional funding available through Accelerating Reform Fund to support the actions within the plan

Priority	Key aims of plan
Continually evolve our social work practice to ensure personalised care and support	<p>Consistency in standard of practice reflecting the commitments included in the Adult Social Care Offer and a strengths based approach to assessment, care and support planning</p> <p>Practitioner's consideration of alternatives to traditional care as standard, before packages of care are put in place – including thoroughly understanding what is important to the person and what they want to achieve</p> <p>Increased learning from experience, feedback and reviews – sharing best practice and improving knowledge</p>
Develop our ability to meet the diverse needs of the city	<p>Improved information and data and understanding of this to support provision of appropriate services to diverse groups</p> <p>To identify and remove any barriers to accessing services</p> <p>Ensure workforce have the skills and awareness required to support the diverse needs of Coventry residents</p>
Ensure our Direct Payment offer is appropriate to make it attractive to people with care and support needs and their unpaid carers	<p>Increase accessibility of information and advice offered to support take-up of Direct Payments</p> <p>Ensure staff are fully trained and confident in the promotion of Direct Payments</p> <p>Consider the availability of Personal Assistants and work with relevant partners to explore opportunities to support growth in supply</p>
Implement the revised social interventions approaches in mental health services	<p>Increase access to social interventions and develop community based approaches</p> <p>Ensure staff are supported to deliver social interventions and that training is available to them</p> <p>Develop equity in approaches to maximising independence</p>





# Theme 1: How Local Authorities work with people

*In this theme we describe our approaches to assessing needs, how we support people to live healthier lives and how we seek to understand people's experiences*

## Summary

Our work in Adult Social Care, at every level, intends to provide support to the residents of Coventry, in the least intrusive manner possible, based on the assets, resources and abilities that are available to them.

Promoting or maximising independence is at the core of our interventions. It is strengths based, therapy led and is well established and operates across all service areas and at all stages of the assessment process. The principles adopted are consistent, but delivery models differ to accommodate the different requirements of people requiring our support. The overall approach is supported by short term services which promote recovery and rehabilitation. Where ongoing care and support is required these services also use short term and promoting independence approaches to ensure this philosophy of care and support is consistent throughout our services.

## Key strengths

1. Responsive when people come to us in crisis with promoting independence at the core of our approach
2. Working across the Council and with health partners, supporting people to live healthy lives
3. Engaging with the views of people, including the use of our real time survey and community engagement sessions

## Areas for development

1. To further develop our promoting independence for people with mental health problems
2. To continue develop our workforce and support offer to meet the diverse range of needs in our communities
3. To ensure we are getting the most out of the DFG (Disabled Facilities Grant)

## How does Adult Social Care work in Coventry?

By Phone 024 7683 3003	By Professional / Carer Referral Online Referral	By Online Self-Assessment Online Self-Assessment
<b>Adult Social Care Direct</b>		
Customer services will take any initial information regarding a referral, such as contact details, key information, and the reason for the referral. They may be able to provide signposting advice and information advice at this stage.		
<b>Initial Contact and Duty Teams</b>		
The initial contact team gather more information about new referrals and the duty team support any incoming queries through Adult Social Care, for people that are in receipt of support.		
<b>Short Term Support</b>		
<b>Local Integrated Teams</b>		
Integrated teams with three geographical bases across the city working with older people and people with physical disabilities to develop their independence and daily living skills and develop a greater understanding of long term/ongoing care and support needs.		
<b>Promoting Independence – Learning Disabilities</b>		
A multi-disciplinary team that works with adults with learning disabilities and autism to promote independence. The team provide support such as travel training, occupational therapy and support to use assistive technology.		
<b>Community Discharge Team</b>		
Based at University Hospital Coventry and Warwickshire, supporting people to be discharged. The team works across the 7 day week and with extended hours.		
<b>Occupational Therapy and Equipment Services</b>		
Providing a range of advice and support about equipment, adaptations and solutions to make every day tasks easier for you, this includes telecare equipment such as personal trigger alarms, movement detectors or medication dispensers as required.		
<b>Long Term Support</b>		
<b>Mental Health</b>		
Working with health colleagues at Coventry and Warwickshire Partnership NHS Trust as part of a S75 Agreement to support adults with mental ill health. The supports the Crisis Care pathways and community based services.		
<b>Older People's Assessment and Case Management Team</b>		
Work with adults over 65, they will explore the provision of support such as home support, day opportunities, supported housing, respite, residential care.		
<b>All Age Disabilities Team</b>		
Support adults turning 18 (or over). They will explore the provision of support such as home support, day opportunities, supported housing, respite, residential care.		

## Quality Statement One

**Assessing needs: We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.**

### Assessing needs

Our objective is to support people to be independent and use the assessment and support planning process, where appropriate, to understand what they need to reach their maximum level of independence.

Our assessments start with our initial contact team which is occupational therapy led. This is a deliberate approach from the outset and throughout our promoting independence approach to assessment to consider issues presented from a wide perspective. Advice, guidance, information and assessment happens irrespective of financial circumstances and therefore our offer extends to those we will and those we won't financially support in the provision of their care.

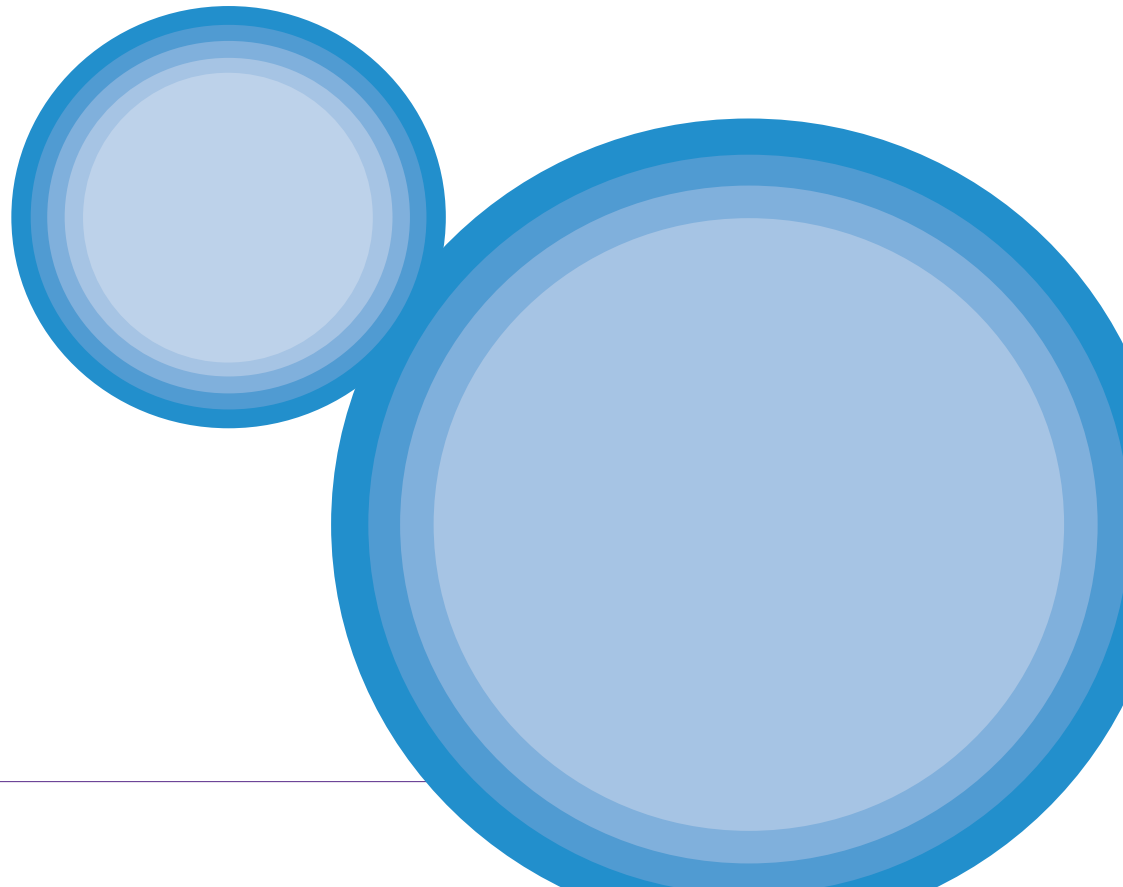
Dependant on the risk identified at this initial information gathering stage (which is where the assessment starts), appropriate interim care and support can be arranged temporarily while the strength and needs assessment (Care Act assessment) is completed. This is to ensure that people who need support are not left without the care and support they require whilst an assessment is completed. The effectiveness of interim care and support subsequently forms part of the assessment.

A significant number of people who contact us do not require assessment beyond the Initial Contact Team as we are able to resolve their support needs through information, guidance, advice or a low-level intervention, including aids and equipment.

In 2023/2024, 5% of contacts required further allocation to a social worker. 57% of contacts were allocated directly to Occupational Therapy or the Promoting Independence Team in 2023/24.

Our approach of often providing support while an assessment is being completed and assessing the effectiveness of that support as part of the assessment results in only 5% of those who make contact initially going on to receive long term support. Our 'support as part of assessment' approach does contribute to the relatively high proportion of people who do not need ongoing support following assessment which improved from 65.1% in 2021/22 to 75% in 22/23, to 76.7% in 23/24.

This way of working does result in a significant number of assessments being commenced but not completed at any one time. In 2023/24, assessments were completed with a median of 57 days and 8 days for a carers assessment. As at 31 March 2024 there were 403 people with an uncompleted assessment.



Improving our completion of assessments timescales is an important area for us, and one which we are on an improvement trajectory of 125 days completion in 2021/22 reducing to an average of 93 days in 2022/23 and further reducing to 67 days in 2023/24.

The presence of this number of uncompleted assessments does not mean that people are left without support as indicated above and our Market Sustainability and Improvement Fund (MSIF) return demonstrates a 16 day average timescale between initial contact and care being provided. Although skewed by shorter times to facilitate hospital discharge these measures combined do demonstrate that although people may be undergoing a live assessment (for in some cases) a number of months, people are not left without care and support if it is needed while an assessment is completed. In addition, we have contact assessment workers within our team who maintain contact with those awaiting the completion of assessment on a schedule of contact to understand if circumstances have changed and to reprioritise accordingly.

### Care, support planning and reviews

We aim to co-produce assessments, care, and support plans with individuals and their informal carers. As part of the support planning process we discuss with people the part they wish to play in organising the support required, whether this is via Direct Payment or City Council arranged support or a combination of both. Wherever appropriate family members and unpaid carers are engaged in this process.

Support is co-ordinated across different agencies and service and therefore decisions and outcomes are transparent.

Our priority for reviews is ensuring that all people in receipt of ongoing care and support do not have an interval of more than two years between reviews. During 2023/24 we completed 55.6% of reviews for everyone who had been open for over 12 months. We approach reviews as opportunity to stimulate change through understanding what would be required to reduce the reliance on statutory services for any individual although the

opportunity for change has been limited. However, our learning from reviews is informing how we need to develop alternatives to regulated care and support to create more options for people to choose from.

Aside from the review performance we have additional assurance of our oversight of peoples care and support, and that this is changing in response to care and support needs, through Deprivation of Liberty Safeguards (DoLS) approaches. As at December 2023, 1300 people had a minor service change in response to a request from them and/or their carers and families.



## Hospital discharge

We also have a social work team based at University Hospital Coventry and Warwickshire, operating seven days a week and working alongside ward staff and the hospitals discharge team. The team has assessment processes in place to support discharge from acute hospitals, whether physical or mental health. Contact assessment activity takes place within the hospital setting to enable patients/residents to be directed to the right level of support on discharge. Our normal service principles of reablement and the use of short-term provision are embedded within this multi-agency model so that the strengths and needs assessment takes place following therapy intervention and recovery. In limited cases we do organise long term care, but these are limited in number (5.1% in the 2023/24 financial year).

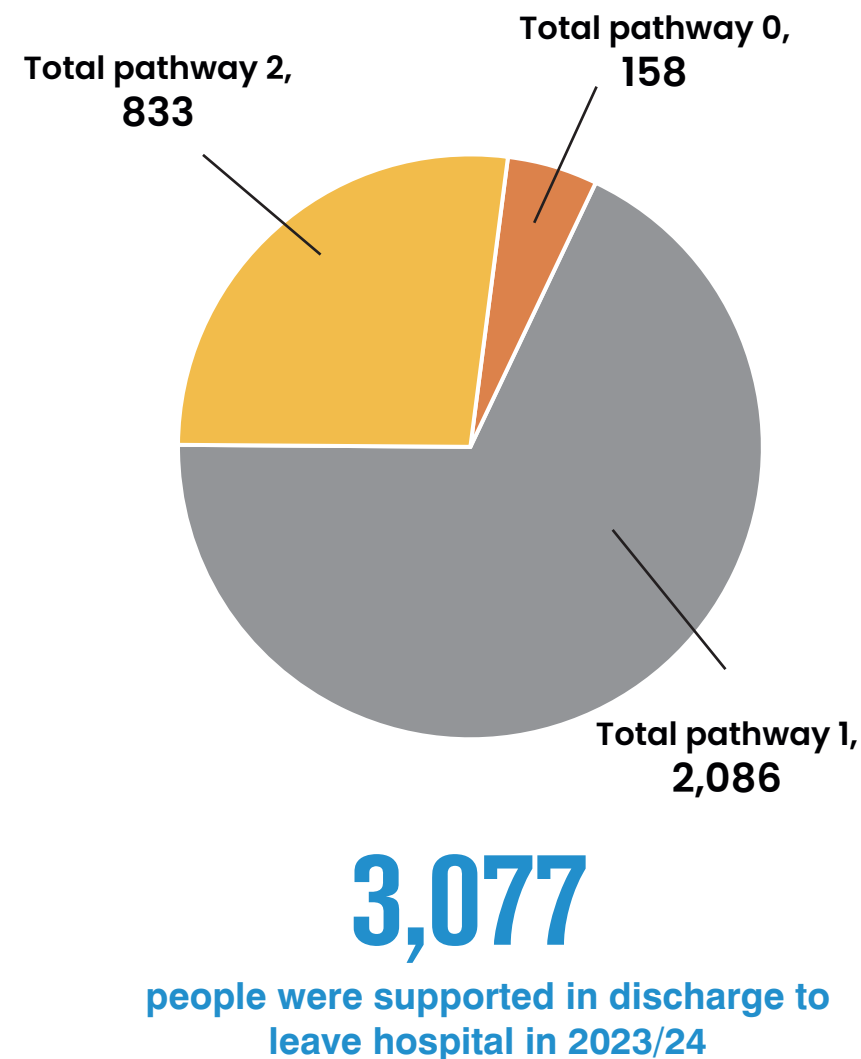
## Carer's assessment

The latest census data highlights that 27,083 people in the city identify themselves as being a carer. We had 1,340 carer contacts in 2022/23 and 1,479 contacts in 2023/24.

Carers are offered an assessment of their needs when a case is allocated, with a choice around how they would like their needs to be assessed either jointly or as a separate carers assessment. On-going training around meeting carer's needs is in place to encourage thorough assessment of carers needs.

We work in partnership with Carers Trust Heart of England who complete carers assessments and young carers needs assessments on behalf of the local authority for carers who are not in receipt of support from Adult Social Care. The partnership with the Carers Trust Heart of England works well as the service proactively identifies carers who require an assessment through targeted work such as working with primary care, the hospital, employers, food hubs and often meet needs through their existing services and support mechanisms. The service is also able to provide and administer Direct Payments to carers. This means a much wider reach and remit and carers have their needs assessed, sometimes at a much earlier stage in their caring journey. Often conversations can be pre-emptive, helping carers plan for the long-term such as considerations around power of attorney,

## Discharges for 2023/2024



## Using technology to support practice

Practice is supported wherever possible and appropriate by the use of technology. Included in the range of digital options available are: a mobile dictation tool which some practitioners choose to utilise to support with case recording, the Widgit tool used to support communication, a digital learning hub and learning alerts, and an on line Direct Work toolkit holding a range of tools to support practice.

## Charging for care and support

The completion of financial assessments is supported by the use of the BetterCare online tool allowing individuals to self-serve their social care financial assessment. This offers choice for the individual of completing an online financial assessment at their own convenience.

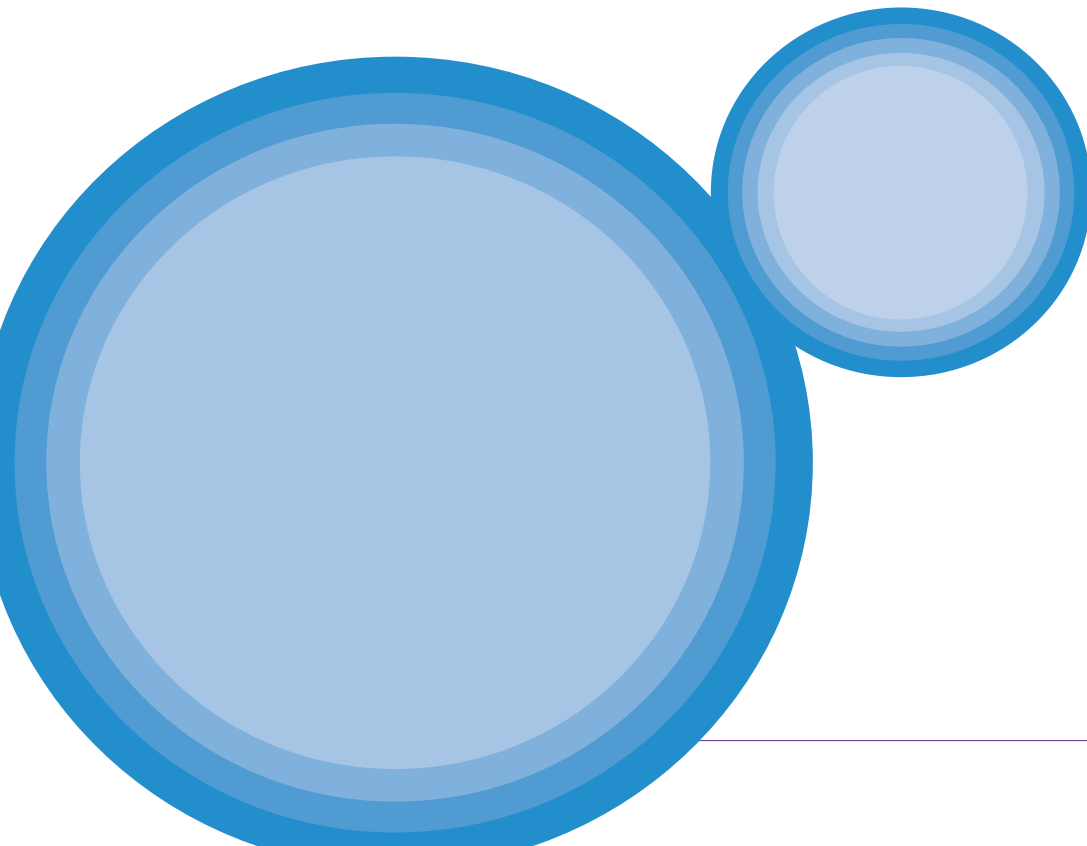
## Support to self-funders

The Council has a number of ways in which it supports self-funders with social care needs. We provide assessments for self-funders, our short-term service does not require a contribution and the support provided by the voluntary sector does not discriminate on whether a person is a self-funder or not. Support is available for older people provided by Age UK, Alzheimer's Society and Good Neighbours (befriending) as well as specialist support for a number of specific groups e.g. family carers through Carers Trust Heart of England and people with sensory impairment (e.g. Earlsdon Centre for the Blind/Birmingham Institute for the Deaf.)

Providers within our social care market generally provide support to a combination of local authority and self-funded individuals. Whilst our quality assurance approach (as detailed in our Quality Assurance Framework) covers commissioned providers only, support is to both commissioned and non-commissioned providers through information available on our website, for example our Provider Support Pack. In event of a safeguarding concern with a non-commissioned provider, checks and quality support would be undertaken in line with the specific requirements of the safeguarding concern.

Our website also supplies a wealth of information about the range of support services available including mainstream services (e.g. care homes, home support, day services etc.) and a range of community and preventative support available in the city detailed in our Community Directory. Regular engagement events held within the community also welcome and provide information for self-funders.

Where people are a self-funder but have 'depleted funds' we undertake an assessment and discuss support options where the local authority is required to pay for the support. We do not move people to other services as routine where funds are depleted but do take cost effectiveness into account.



## Strength-based practice – our approach to social work

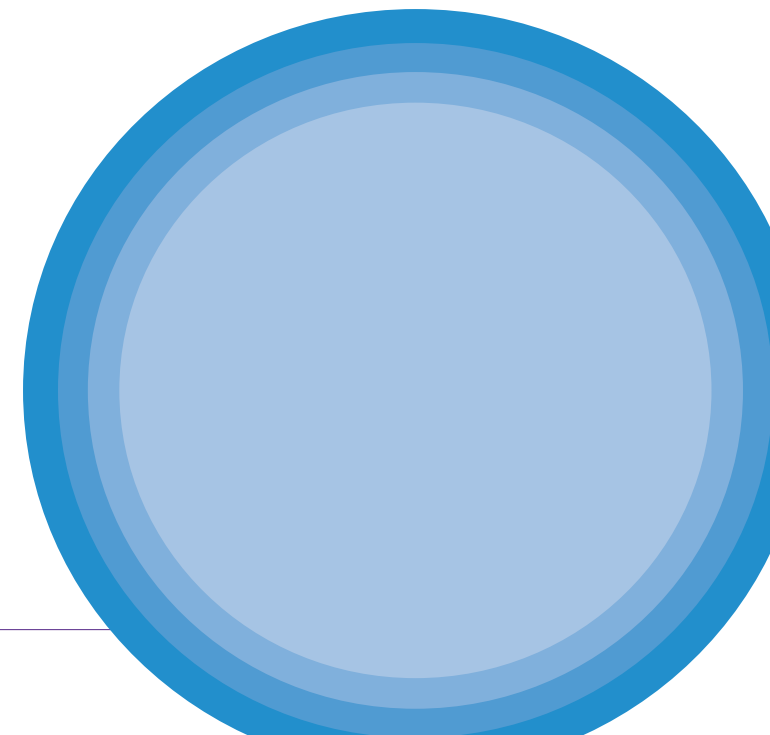
Our approach to social work is one of strength based practice where we start from the point of what people can achieve using their own assets, abilities and resources. The practice framework we have in place through our 'People at the Heart of Practice' framework is a continued journey to strength-based working provide some context to how we work with people to support them to live the lives they want.

This strength-based approach is supported by a range of tools and techniques;

- Access to training in strength-based approaches and outcome focused support planning and review to embed understanding and application of strength-based practice.
- Motivational interviewing techniques to develop a focus on strength-based conversations, so people can tell their story in their own words, through the use of open questions, to encourage reflection.
- Complex Case and Risk Enablement Panels that support practitioners working with risk through providing challenge, advice, recommendations, and validation when faced with significant risk in order to take a positive approach.
- Making Safeguarding Personal (MSP) with a key set of tools and resources to use in working with people at risk of abuse so that they achieve the outcomes they identify.
- Direct work toolkits, communication tools and access to specialists e.g. Visual and Hearing Impairment Team and Deafblind Assessors

These tools are complemented by a focus on practice conditions, including a monitoring of caseloads, a focus on practice quality assurance, effective supervision and support, developing peer, group and reflective supervisions, a refreshed and continually reviewed learning and development offer with an emphasis on current practice issues, providing access to learning and knowledge resources such as Community Care Inform, Care Knowledge and Social Work Connect.

We have dedicated practitioner roles supporting practice education and newly qualified social workers. Established practice forums and organisational health check arrangements are in place. The use of practice quality assurance frameworks ensures we remain focused on practice quality. Professional autonomy is supported through 'self-authorization' and the ability for trusted practitioners to close their own assessments. There is active engagement with Universities through the West Midlands Social Work Teaching Partnerships (of which Coventry is lead authority) and involvement in fast-track Social Work schemes. For seven years we have held an annual practice week with children's services in which we welcome a range of leading academics and speakers to Coventry to share their expertise. Coventry is committed to pre and post qualifying development, including the use of degree level apprenticeship schemes for social work and occupational therapy. As a result of this five people have achieved a social work degree and 8 people are currently undertaking or due to undertake the social work apprenticeship. For the Occupational Therapy apprenticeship 1 person has completed this year and another two are undertaking the degree.





## Practice Quality Assurance

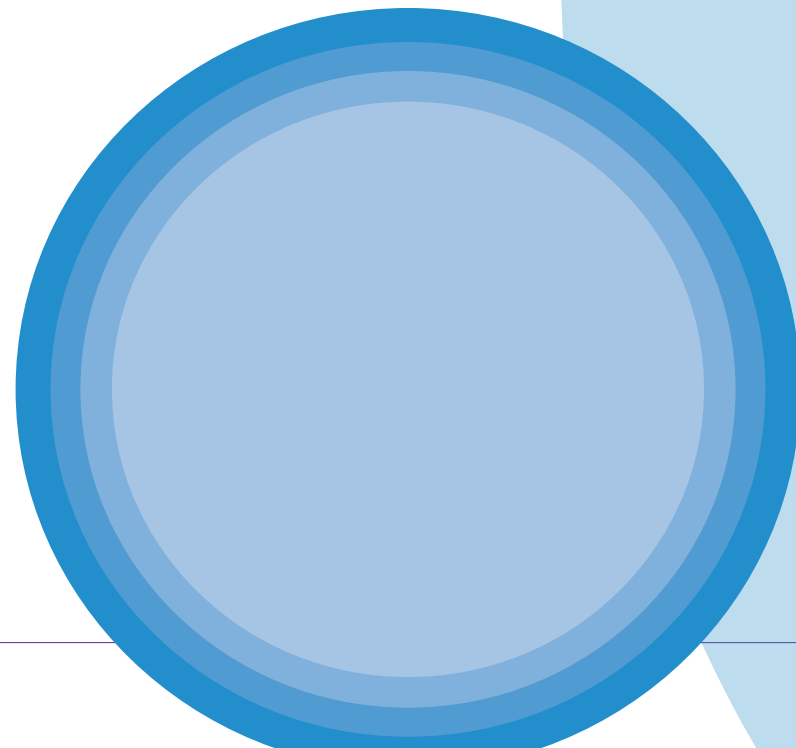
In assessing needs it is also important to understand the quality of the assessment work completed. This enables us to devise strategies to improve our social care practice and understand how the work we have done on social work frameworks and strength-based working is translating into on the ground interactions.

To undertake this, we have a Practice Quality Assurance framework in place. In 2023/24 across our teams the completion across the different elements of Practice Audits, Observations and Supervision Audits took place. Our Practice Quality Assurance Framework provides an opportunity to provide direct feedback to staff on their work, address any areas of development but also any organisational trends or training needs for example leading to the commissioning of additional training linked to strength based practice and 'seeing' the person in our assessments.

Our Practice Quality Assurance framework also supports professional autonomy through 'self-authorization' and 'closing own assessments' approaches where qualified workers can self-authorise, signing off their own documentation and close records without being required to seek managerial approval (excludes support planning and safeguarding elements).

Part of the role of the management team within Adult Social Care is to undertake quarterly case audits and make contact with people who have received support from Adult Social Care. This provides a direct line of sight and a line of contact between the management team and users and carers and creates first hand visibility and awareness of peoples care and support experiences and outcomes. This supplements the case file audit work undertaken by team leaders and feedback from people via the real time experience survey.

We also engage with and support a long-standing approach to West Midlands regional 'Practice Reviews'. These Practice Reviews concentrate on adult social care practice and involve two Principal Social Workers from other authorities and the Principal Social Worker from the host authority. They are supported by the Associate Consultant from West Midlands ADASS and involve; case file auditing, discussions with staff, managers and people receiving support resulting in feedback on strengths and recommendations for practice.



## Quality Statement Two

**Supporting people to lead healthier lives: We support people to manage their health and wellbeing so they can maximise their independence, choice and control. We support them to live healthier lives and where possible, reduce future needs for care and support.**

As a Marmot City, we particularly appreciate the impact of inequalities on life expectancy and good health.

Deprivation issues are at the core of our approach to improving outcomes and tackling inequalities. The Council has a long history of working to identify and addressing issues early with active partnership and collaboration being at the heart of our One Coventry approach.

### Prevention and supporting people to live healthier lives

Our specific responsibilities for preventing and delaying social care needs are underpinned by our Promoting Independence approach which promotes recovery and rehabilitation, through e.g. the provision of equipment and adaptations and travel training which can have a transformational effect on the lives of adults with learning disabilities.

Our voluntary sector plays a significant role in preventing and delaying the onset of social care needs. A range of services are secured through the use of the Preventative Support Grants made to the voluntary sector and other partner organisations such as Sky Blues in the Community, Coventry Moves CV Life, the Dementia Hub (a collaboration of a number of agencies) and the POD which specialises in support to those with mental illness.

Examples of the numbers of people supported through these programmes include:

- Good neighbours - delivers a 1:1 befriending service, support and social groups since 2016 and has supported over 2000 people in that time in addition to recruiting over 1000 volunteers. The organisation produces Activity Guides which are used by other agencies and reach many more Coventry citizens through that route.
- Age UK Coventry and Warwickshire is the go-to place for many older people in the city who benefit from the support given to help them to continue living independently in their own homes. Age UK Coventry and Warwickshire responds to approximately 4000 referrals per annum.
- Help and Connect is for people living in Coventry over the age of 18 with a learning disability and or autism who do not receive support from or via Coventry's Adult Social Care services. The service supports with staying healthy and improving health, staying safe and developing the skills needed to live safely and independently, getting into work, training or education, and building networks of support in community through recreation, belonging and friendship. Help and Connect supports approximately 120 people.
- Sensory support through our Visual and Sensory Impairment Team which completed 476 assessments in 2023/24.
- Dementia support including peer support for people living with dementia and peer support for carers of people living with dementia serves approximately 400 people per annum. The Coventry Partnership Dementia Hub created in 2023 is at the heart of the dementia support offer.
- Mental Health Drop in Centres, Community Support and Wellbeing Courses offered by Coventry and Warwickshire MIND supports approximately 1500 people per annum.
- Carers Trust Heart of England – The Carers Trust Heart of England work with over 2000 people providing unpaid care per year. Supporting carers in a range of ways such as training, peer support, activities, information and advice. The service is a one-stop shop for people with caring responsibilities, identifying the need for assessments and more specific support such as counselling and therapies. The service also work extensively to promote carer identification across the city working with partners, such as GPs, Mental Health Trusts, Employers and Hospitals to raise awareness of carer related needs.

## Reablement

Our reablement and promoting independence offer is at the core of our delivery of Adult Social Care. Most new people accessing our services (whether via the community or hospital discharge) follow our reablement offer ensuring that everybody can fulfil their potential and reduce the need for formal care and support. We have a joint working model between Occupational Therapists, Social Workers and short term home support providers, taking a multi-disciplinary approach throughout. Our therapy led initial assessment ensure functional strengths and abilities are built upon and appropriate goals are set. With specific objectives set by therapy staff, the short-term home care providers are able to deliver support with a reablement focus to work with people to build confidence, stamina, strengths and general functional abilities in relation to self-care. The multi-disciplinary team works together to provide outcome focused solutions often signposting to community assets and voluntary organisations. If the multi-disciplinary team agrees a person has long term needs a Social Worker will then complete a Care Act assessment. This approach is also taken within Case Management and for those people with existing services in place.

## Aids, equipment and adaptations

Within our Therapy offer we have a joint approach to equipment that is delivered within a partnership with the Integrated Care Board (ICB). We also have an integrated approach to the Disabled Facilities Grant (DFG) with the Housing Improvement Team integrated with the Occupational Therapy Team.

By having OTs engaged in working with people from the initial contact stage we can organise low level equipment more readily and utilise resources available in the city to provide the support needed as quickly as possible.

We recognise that people may wait longer than we would like for some adaptations. Following a review we are implementing an improvement plan including changing our approach to delivery by organising ourselves differently and revising our standard specifications.

All lift and hoist installations are delivered through a separate process and funded from the DFG allocation. The delivery of these adaptations offer a good service to residents and installations are timely. The scheme is very cost effective as it effectively recycles lifts and hoists of all types.

## Direct payments

Arrangements for offering a Direct Payment are in line with the Care Act 2014 and Statutory Guidance. Our Direct Payment policy is available on the Council Direct Payments web page. Two new Direct Payment videos to promote the uptake of Direct Payment have been produced which are also available to view on the Council direct payment web page.

A range of Direct Payment literature is available too including translated formats into Punjabi, Gujarati, Urdu and Arabic. 795 people received a Direct Payment in 2023/24 from which a disproportionately higher number were from ethnically diverse communities.

Direct Payments are set up via a Prepaid Card, a Managed Account with a third-party organisation (Penderels Trust or SOLO) or as an Individual Service Fund (ISF). Auditing and Monitoring takes place by the Independent Living Team. In 2024 we developed a new survey for Direct Payments recipients or their representatives to seek feedback on their experiences and ask if people wanted to get involved in shaping our approach to Direct Payments.

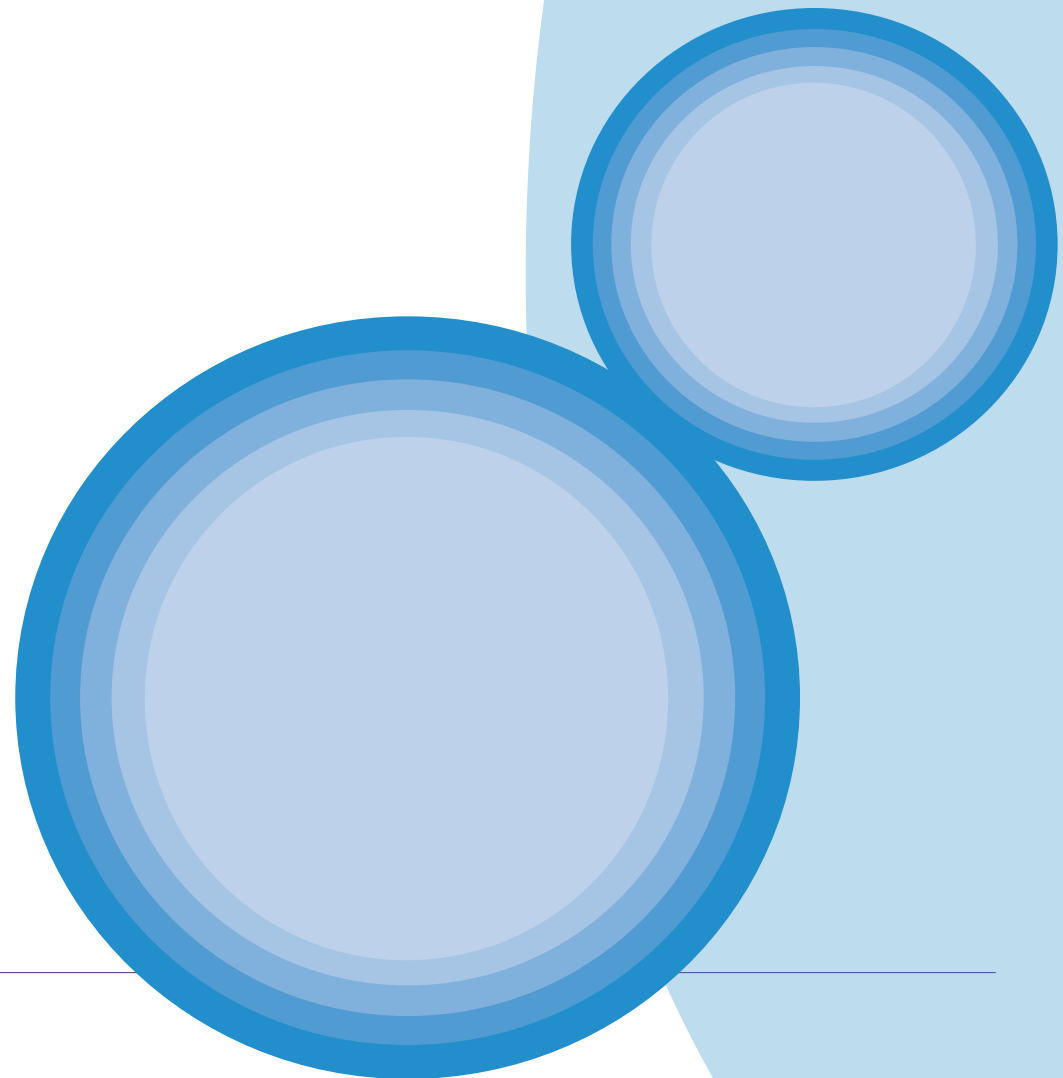


## Information and advice

The provision of advice and guidance to support prevention is a key part of our offer. As well as commissioned support through the voluntary and third sector and City Council provided information and advice, we also undertake engagement events at various locations within the city in order to engage directly with communities. The events, held in conjunction with the voluntary sector, help raise awareness of Adult Social Care and other support services available and can focus on key issues such as support with the cost of living. These events are particularly useful for communities who may not know how and when to contact the City Council, or partner organisations for support. The number of people who have been signposted to other services as a result of our information and advice offer was 3,274 in 2022/23.

Resolving the issue that someone presents with at source, through our information and advice offer results in approximately 41% of contacts being resolved without the need for further input in 2023/24.

Our information and advice offer is not just at first contact as a 'single event' it is offered throughout the customer journey. Often, as someone starts to understand more about their needs and the support available the need for appropriate information and advice increases. We have a range of information available including the website, leaflets and our Adult Social Care Offer that support people to understand what we can offer as a council and in Adult Social Care and what else may be available in the city to assist.



### Quality Statement Three

**Equity in experiences and outcomes: We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this.**

The Joint Strategic Needs Assessment (JSNA) provides overall population information which enables us to understand the overall changes in population. Beyond this, we have an understanding of the barriers experienced to care and support based on feedback from people from different backgrounds who require support from Adult Social Care. We are improving our understanding of how different minorities make contact with Adult Social Care and how they are supported when compared to the population of the city as a whole.

### Diversity, inclusion and addressing barriers

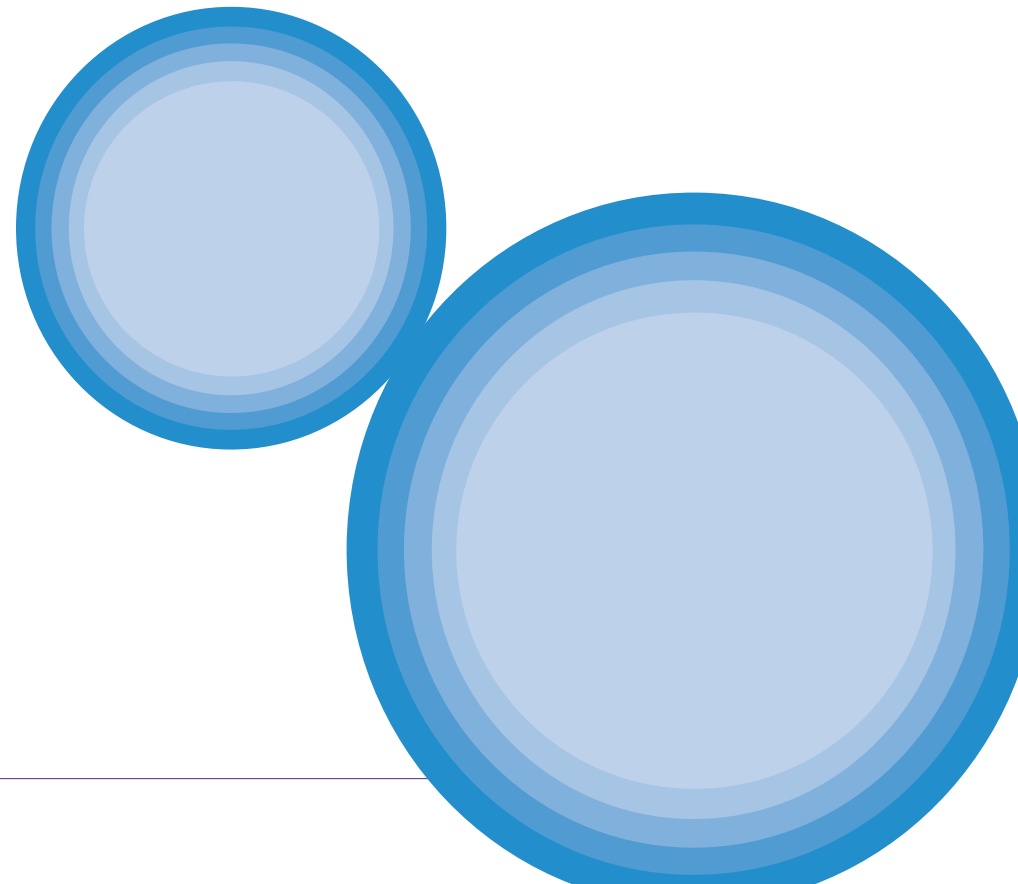
We know that a disproportionately low number of people from ethnic minorities make contact with and receive support from Adult Social Care. In order to improve this position, we have access to a live demographic performance dashboard, using this information combined with our knowledge of languages used in the city we have produced safeguarding information and advice in Arabic as a language spoken and understood in written form by a significant number of our residents.

In terms of service provision our ethnic profile of people accessing Direct payments shows over representation from ethnic groups when compared to the city population, this indicates to us that Direct Payments are a more attractive option for minority groups and to aid awareness of direct payments as an option our Direct Payment information has been translated into Punjabi, Gujarati, Urdu and Arabic.

Recognising the barriers to access as a result of sensory impairment we are training and developing our deafblind assessors on how we meet the needs of deafblind people and assist with their communication needs. We

have a visual and hearing impairment service that supports the rehabilitation of adults including those who are deaf/blind working alongside specialist assessors that enable care act assessment and support planning to take place.

A Communicator Guide service is available to support deafblind or dual sensory impaired individuals of all ages within the city. This service enables Deafblind people to have a fully qualified Communicator-guide who can provide effective communication, safe guiding and essential support to allow deafblind people to actively take part in everyday activities, such as accessing information, going shopping, attending social/educational activities in the community with control and choice. The service is provided by Deafblind Enablement (DBE) who have an established presence in the city.



In order to further address the barriers to accessing care and support the following are also in place:

- Our 'Involvement, Engagement and Co-production Approach' Our Approach explains our commitment to involving the residents of Coventry in the development of services across Adult Social Care. This approach was co-produced with our Adult Social Stakeholder Group and is supported by a reimbursement policy for fees and expenses for persons with lived experience.
- A Vulnerable Persons Group within our Housing Service which was implemented to specifically focus on support solutions for people known to our housing and homelessness services who frequently access health and care services.
- The SiCol (Social Interventions Collective) service seeks to redress the inequalities that exist for those experiencing enduring mental illness and has enabled people to get back to work, secure housing and live productive lives in their communities.
- Mental Health practitioners have been embedded into the City Council's migration services as asylum seekers/refugees are 5 times more likely to experience mental ill health. A number of service developments have been designed to address the deprivation and inequalities within the city and we have a real time dashboard that shows us who is accessing the service.
- A service is in place to support adults with learning disability to increase their skills in daily living and to offer support that enables them to access local communities via our Jenner8 Service.
- Faith Partnership Forum – a group that consists of faith leaders and designed to support people of different faiths and enhance community outreach of diverse communities.
- The Pod, our joint health and social care offer to adults in the city, operates a food union, time union and social brokerage that reduces the need for statutory intervention.

## Interpretation and translation

Coventry Interpretation and Translation Unit (CITU) provide interpretation and translation services in more than 62 languages. In 2023/24 they undertook 733 interpreting sessions.

If someone has a speech impairment is deaf or hard of hearing, they can contact Adult Social Care using Next Generation Text (also known as Text Relay and TypeTalk)

## Use of advocacy

Advocacy support is critical to enable people to have a voice, to have their rights represented and their opinions heard and to represent this within our processes. We have a local advocacy service that offers range of advocacy approaches:

- Care Act Advocates- supporting people to be an active part of the assessment and support planning process and/or in safeguarding matters.
- Independent Mental Capacity Advocates- supporting those where decision making is impaired.
- Independent Mental Health Advocates (IMHA) to support those detained or subject to the provisions of the Mental Health Act.
- Independent Domestic Violence Advocate (IDVA) helping to assess risk or discuss protective measures and plans.
- Independent Sexual Violence Advocate (ISVA) working closely with those subjected to rape or sexual assault.
- From 1 January 2024 to the 30 June 2024 there were a total of 876 advocacy referrals resulting in 713 cases supporting 560 separate individuals (some people required more than one period of advocacy in 2024).

## Workforce development

Ensuring we are able to meet the diverse needs of communities is supported by developing a workforce that is skilled in its ability to effectively interact with and support the diverse communities of the city. The Council is committed to becoming a diverse and inclusive organisation. We have introduced positive action leadership programmes such as Ignite for minority and ethnic employees, Calibre for those with a disability and Amplify for those who identify as LGBTQ+. These are underpinned by a Workforce Diversity and Inclusion Strategy, Values and Behaviours frameworks which will continue to embed this commitment in our everyday work.

To underpin our commitment to equality we have also:

- become an early adopter of the Race Equality Code,
- signed the Halo Code
- created a Workforce Menopause Pledge
- signed the Race at Work Charter
- are a Disability Confident Leader (Level 3) employer
- are a member of the ENEI (Employers Network for Equality and Inclusion)
- have initiated new employee networks
- have created a Diversity and Inclusion Board to drive further and continuous change.

In addition to the above there is ongoing learning and development activity including anti-racism training in social care teams and additional training in relation to 'social graces' (key features that influence personal and social identity), Older LGBTQ+ people and religion, belief and spirituality.

Our involvement in the Social Care Workforce Race Equality Standard (SC-WRES) and improvement programme with Skills for Care will also enable us to improve our demonstration of progress and evidence of race equality for our workforce.

This work is vital, to not only create a fairer organisation, but to make greater demonstrable progress towards our goal of having a workforce that reflects the people we serve and make us a more accessible and approachable Council for all.

We are also proud as a council to have recently been awarded Disability Confident Leader (Level 3) status, this means we:

- commit to recruiting and retaining disabled people and ensuring this is reflected in job adverts at all levels/grades
- provide a fully inclusive and accessible recruitment process
- ensure other opportunities that might lead to employment, such as apprenticeships, are available to disabled people
- use our Disability Confident badge in job adverts to ensure applicants know we are an inclusive employer
- offer an interview to disabled people who meet the minimum criteria for the job
- are flexible when assessing people so disabled applicants have the best opportunity to demonstrate that they can do the job
- proactively offer and make reasonable adjustments
- encourage suppliers and partner firms to be Disability Confident
- ensure employees have appropriate disability equality awareness training
- provide an environment that is inclusive and accessible for staff, clients and customers
- support employees to manage their disabilities or health conditions
- value and listen to feedback from disabled staff
- record and report on disability, mental health and wellbeing in the workplace.



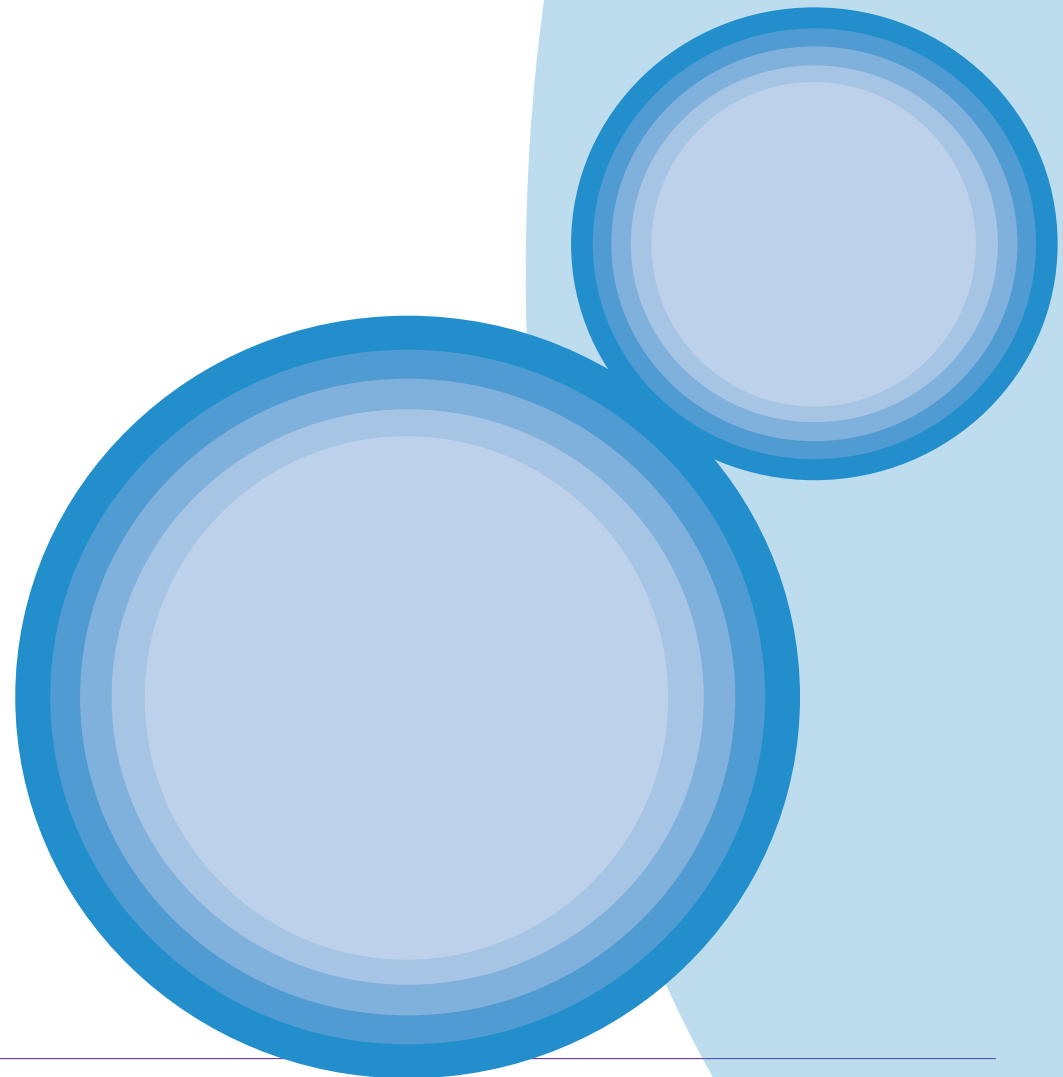
## Engaging with the views of people

We actively involve people who have experienced inequalities to participate in decision making and governance, examples of this include our learning disabilities and autism partnership board which are co-chaired by a board member with lived experience.

Some of the other mechanisms we have in place to gather feedback and stimulate improvements include:

- The Real time experience survey - in order to receive ongoing feedback, changes and not solely rely on annual survey results we have introduced a Real Time Experience survey to be shared at the point of service being provided. The feedback received is monitored on a quarterly basis. People can also request to receive our Adult Social Care or Carers Bulletins (1,330 and 3,800 people subscribe retrospectively as of 9 May 2024).
- Senior Manager Quality Audits – members of the Adult Social Care Management Team complete quarterly audits of casework, incorporating conversations with people accessing our services and/or family carers. The feedback received is shared with operational teams to support service improvement.
- Complaints and Compliments – we review complaints regularly and provide an annual report to Cabinet on the numbers of complaints and compliments, key themes and learning required including compliance with action plans and any Ombudsman enquiries received and responded to. We value compliments as a means of learning from things that have gone right within our services.
- The Adult Social Care Stakeholder Group – the group is well established and meets regularly. Led by the Principal Social Worker and co-chaired by a group member with lived experience it comprises people who access our services, informal carers and representatives from partner agencies including the voluntary sector.

- Regular engagement and information events held within community settings to enable Adult Social Care and associated groups and services to hear first hand from people with regard to their experiences of our services, requirements and how well we provide information.



## Theme 2: How Local Authorities provide support

*In this theme we describe our approaches to providing support, developing the adult social care market and how partnership working helps us to ensure we meet the diverse needs of people and communities.*

### Summary

How we provide support is aligned to our Promoting Independence approach. We have a resilient home support market to support people to remain at home, and we offer supported housing and Housing with Care schemes that enable people to retain as much independence as possible alongside residential and nursing care for those with higher levels of need.

We are proud of how we work with the market, how we have supported the market on key issues of recruitment and retention and when the standard of service is not as we would expect we work as a joint team with integrated Care Board (ICB) nurses to support providers to improve. Despite these efforts we do not have as many providers rated as good or outstanding as our comparators although when issues are identified through CQC inspections of care providers we work with the provider in question to ensure that remedial action is taken promptly so in reality it is likely that we have more providers operating at the level of good that CQC data would suggest.

We are also able to source care and support for the majority people within short timescales. Timescales can be longer where there are unique requirements associated with an individual, but these cases are very much the minority.

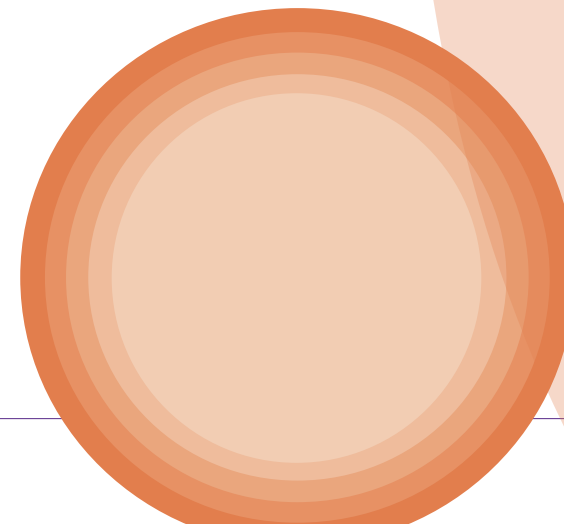
We recognise that there is more to be done in relation to developing the market beyond regulated social care provision and we are working with our colleagues across the City Council to deliver the aspirations of the One Coventry plan in ways that are more localised and community focussed and in doing so are realistic on the extent to which complex care needs can be met through community led solutions.

### Key strengths

1. Our social care market is able to respond to the majority of needs for care and support in a timely manner.
2. A joined up approach to quality management with the Integrated Care Board (ICB) including care home nurses supporting the market to develop and improve.
3. Our engagement with the provider market and support to the whole Adult Social Care workforce.
4. Partnership based large scale improvement programmes – including Mental Health Transformation, Coventry Partnership Dementia Hub and Improving Lives.

### Areas for development

1. Work on ensuring greater diversity in provision to support the development of alternatives to regulated care and support.



## Quality Statement Four

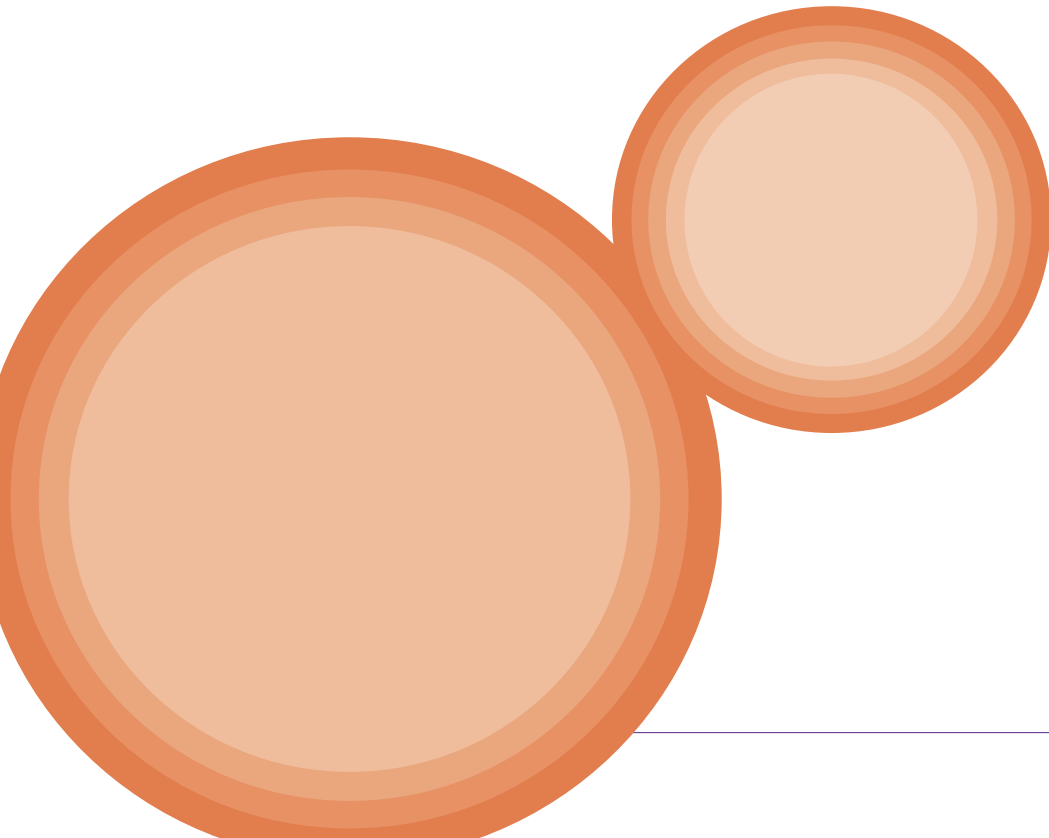
**We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.**

### Our approach to commissioning

The JSNA provides key information to help us understand population needs within the city and the demands that a changing population will have on Social Care in the years to come. Although we do not rely solely on the JSNA, through its use, we are clear that there is a growing number of people with complex needs in the city and as such our market planning and commissioning is geared towards ensuring sufficiency of provision and reduced reliance on out of city services.

Examples of how our commissioning approach is responding to the growth in demand for complex services include:

- The development of a supported living services - 15 self-contained one bedroomed apartments opened in May 2022. A further 19 self-contained apartments opened in September 2023 which included adaptations for people with physical disabilities including wheelchair access to the first floor. The provision will enable a number of adults with learning disabilities, autism, dual diagnosis, mental health needs and physical disabilities to have a flat each.
- Working with a provider to develop a hybrid residential/ supported living mental health model to provide better opportunities for recovery and independence for people requiring residential care (26 new places have been provided via small developments since 2021).
- Conversion of a standard residential home to an eating disorders specialist provision after identification of a need for this type of support across the ICS.
- The commissioning of 55 more supported living places between 2022 and 2024 with a focus on those providers capable of managing very complex needs and risks.
- Providing a specialist training programme to upskill supported living providers to meet more complex needs confidently.
- Supporting a provider to fund and develop their own move on accommodation when a need for mainstream accommodation with a little support, (not through Adult Social Care) especially for people from ethnic minority communities, was identified.
- Commissioning 2 short term dementia specific Housing with Care places to support discharges from hospital, with the aim of supporting people to live as independent lives as possible in the community and avoid residential care home admissions.



## The Coventry social care market

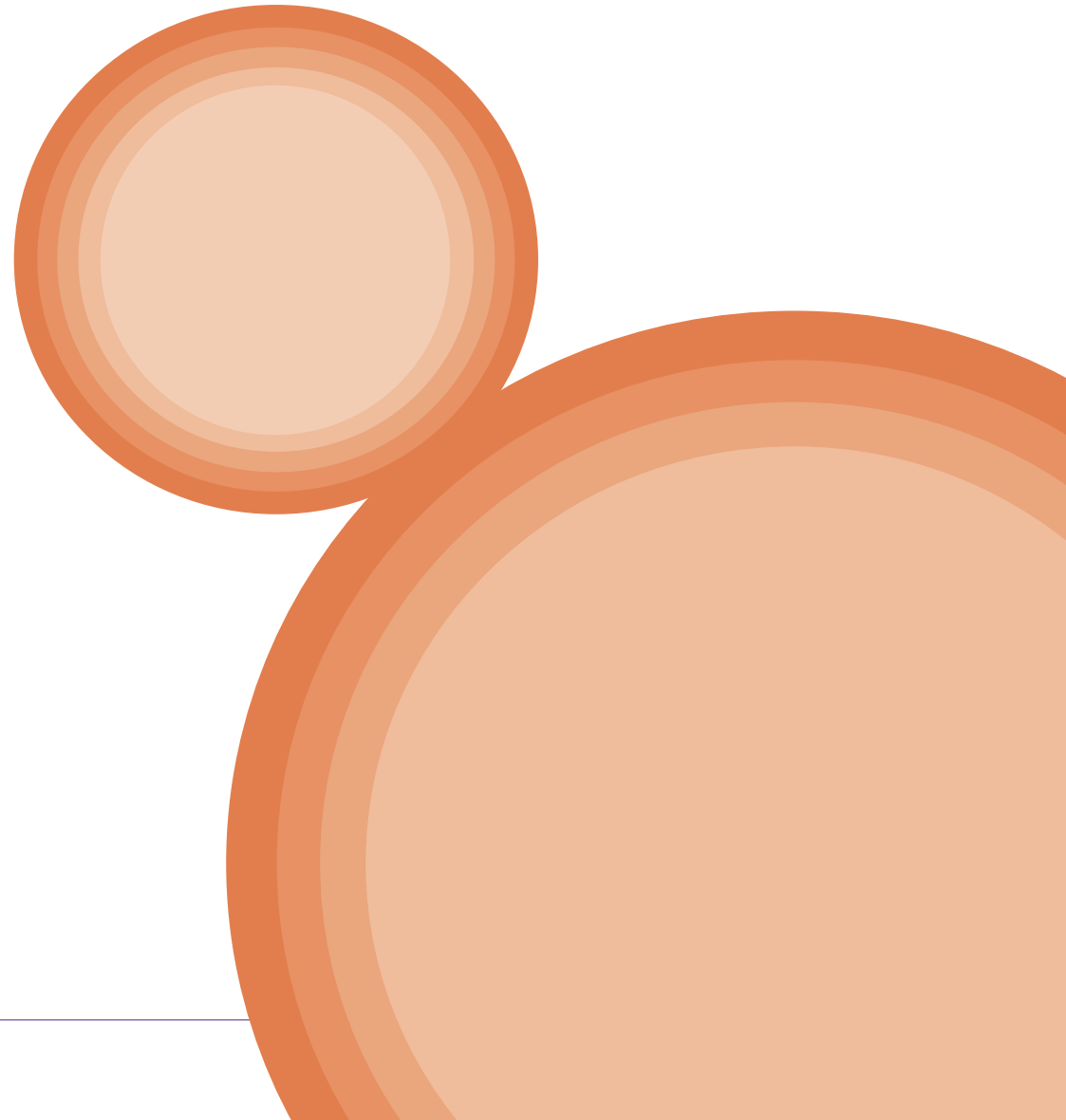
Within Coventry, registered social care providers make up the majority of the social care market. As our support model is geared towards supporting people to be as independent as possible our market development activity has been focussed on the provision of enabling/re-abling home support services, ongoing home support for people who require it and housing with care and/or supported living.

We are working with the wider market to diversity the range of options to choose from and have the following initiatives in place to underpin this:

- 'Shared Lives' recruitment – using the Accelerated Reform Fund to increase our capacity within the 'Shared Lives' provision.
- Voluntary Sector enhancement – one of our key voluntary sector partners (Grapevine) deliver a 'Help and Connect' service for people with Learning Disabilities who are not in receipt of social care and support services. 'Help and Connect' is developing a pilot to work alongside our Promoting Independence service to actively engage with people with Learning Disabilities identify and establish community support alternatives.
- The 'One Coventry' programme – the City Council's 'One Coventry' transformation programme is aimed at supporting people through community infrastructure as well as, alongside, or instead of cor services.
- The promotion of community support options - community alternatives are promoted via our information directory which aims to support people's wellbeing, increase support networks and reduce the risk of isolation and loneliness.

Through our commissioning team we raise the profile of the voluntary sector and how the support offered can play a role in helping people to achieve their desired outcomes. In 2023 we held two Voluntary Community and Social Enterprise (VCSE) events which had attendance from 150 health and social care professionals with a further event held in June 2024 which

was attended by over 100 practitioners. The events facilitated opportunities for workers and VCSE organisations to network and discuss opportunities for partnership working moving forwards. Building on the success of these events which have received positive feedback from attendees a further event is scheduled for December 2024.

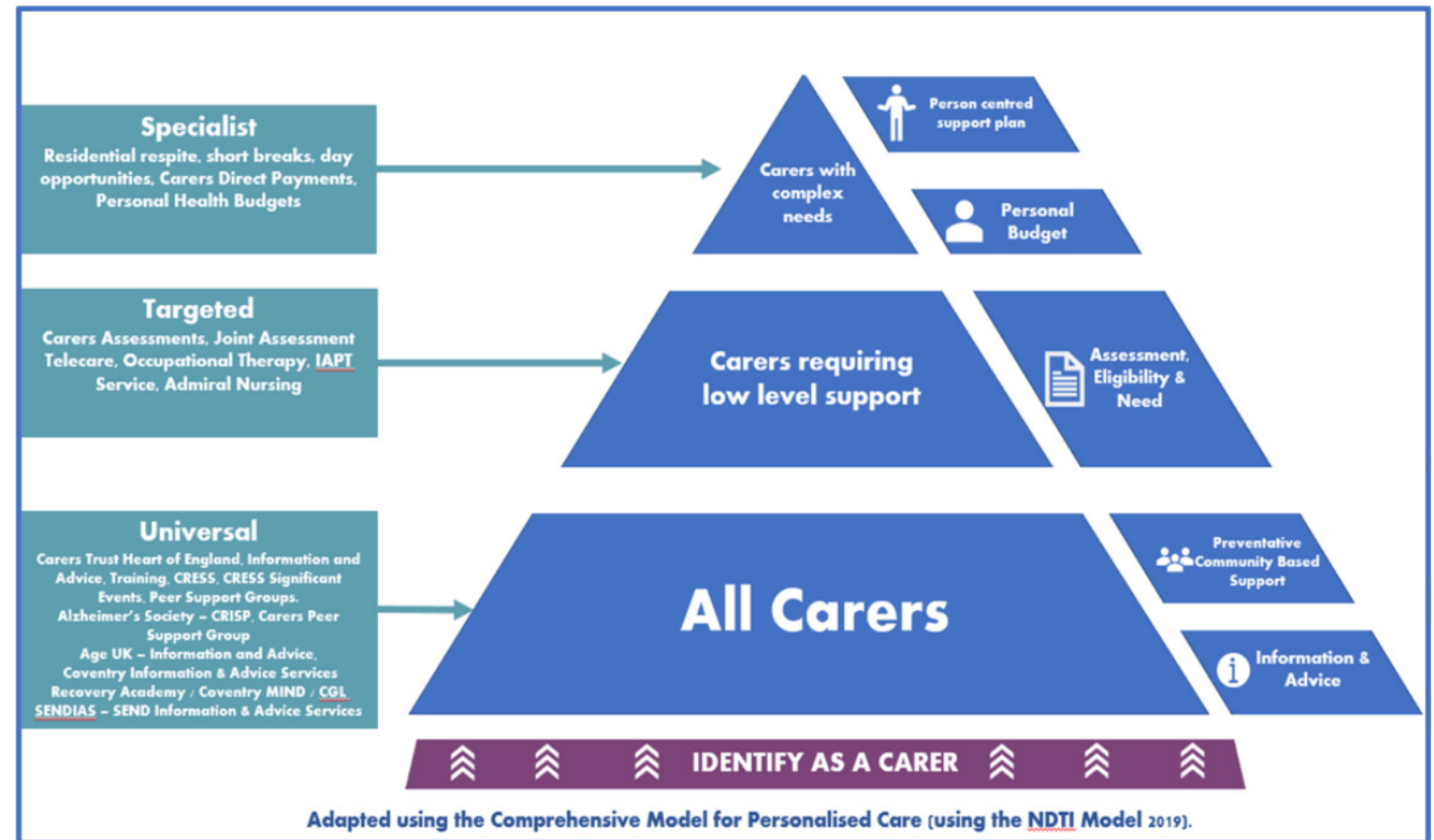




## Our services and support to carers

The requirements for carers to continue and be sustainable in their caring role can vary widely. In recognition of this there is a range of support available. We work in close partnership with the Carers Trust Heart of England to deliver carers wellbeing services which include:

- Carers Emergency Response Service (CRESS) – Contingency Planning
- Carers Significant Events Breaks Service
- Information & advice
- Group activities
- Training
- Mental health carers support
- Outreach support at hospital
- Working carers support
- Primary care support



The Carers Trust Heart of England also work in partnership with Adult Social Care to deliver carers assessments, as a delegated responsibility, aimed at those carers who are unknown to Adult Social Care. This works well as, in partnership with wider commissioned services, a holistic approach to support for carers can be taken. Often carers find their needs met within the wider Carer Wellbeing Service.

## The Carers' Action Plan 2024–2026

Following extensive engagement with unpaid carers to understand their experience of caring and particularly their experience of receiving breaks we have developed a new approach to how we deliver carers breaks and this is a priority outlined in the Carers' Action Plan 2024-2026 which focuses on three priorities:

1. Empower carers with flexible respite options, ensuring they can take breaks.
2. Deliver the right support, at the right time, and in the right place.
3. Maximise the reach of carers assessments to benefit more carers

### Progress to date against the priorities

1. Empower carers with flexible respite options, ensuring they can take breaks.

Through our use of the Accelerated Reform Fund we will be developing a model of support that helps connect carers with wellbeing activities, such as hotel breaks, afternoon teas, relaxation therapies. The support aims to help carers prioritise taking breaks and promote self-care alongside building carer awareness in the city.

We are also reviewing our approach to respite and plan to implement a revised model of respite provision in 2025.

2. Deliver the right support, at the right time, and in the right place.

Through listening to unpaid carers are redesigning our carer support services with the intention of our carers support services with the intention of being in place for April 2025.

As part of the Accelerated Reform Fund we will also be implementing a pilot with Bridget Care (or a similar provision) which is an information portal for carers to explore self-help options. We also intend to use this for online Carers Self-Assessment. The aim is to have completed the procurement process by summer 2024.

We are also working with NHS partners to understand the support pathways for unpaid carers during hospital discharge, including reviewing paperwork to ensure that carers needs are identified through pathway activity. We have also commenced work with the hospital to develop a carers information resource and support the development of a carers network within UHCW.

3. Maximise the reach of carers assessments to benefit more carers.

A number of internal workshops have been held with practitioners across Adult Social Care to improve approaches to carers assessments and support planning for carers. Induction sessions for new staff are being held bi-monthly.

We have a regular peer support group with the Carers Trust Heart of England Wellbeing Advisors who undertake Carers Assessments. We've used these sessions to explore subjects such as eligibility under the Care Act 2014, Direct Payments, CQC preparedness and how to develop support plans. The sessions are bi-monthly and are scheduled for the rest of the year. The sessions have been well attended and feedback from the sessions has been positive. We held a support planning workshop in July 2024. We have also shadowed a number of assessments conducted by the Carers Trust Heart of England.

We saw an increase in the utilisation of Carers Direct Payments in 2023/24. A total of 84 people received a Carers Direct Payment in 2024. We are seeing more range in the use of carers direct payments indicating more person-centred practice. We are also seeing more alignment with the eligibility criteria and a clear rationale around why the direct payment has been provided. A new Carers Direct Payment leaflet has been published and is available for practitioners.

We will monitor the effectiveness and impact of the above activity through the various measures (national and local) in place and will continue to engage with carers directly to obtain their views.

## Engaging with the market

Most people with eligible care and support needs receive support in a timely fashion with minimal wait times. Our Home Support market is able to respond and our housing with care and residential services generally have capacity to ensure that people are not waiting excessive periods for a service to start.

Our commissioning planning provides an understanding, based on a range of intelligence, of the likely capacity required to meet demand across service types (further details contained in Information Return Data Pack) for volume anticipated against those commissioned since 2021/22. This intelligence is then used to ensure that enough capacity exists in the market to meet forecasted demand recognising that there is often a gap between forecasts and reality.

To ensure we are supporting the provider market appropriately and effectively, all commissioned providers were asked to complete an online survey in December 2023 covering several areas. A total of 63 responses were received. (approx. 103 potential providers, 61% return rate). The findings included;

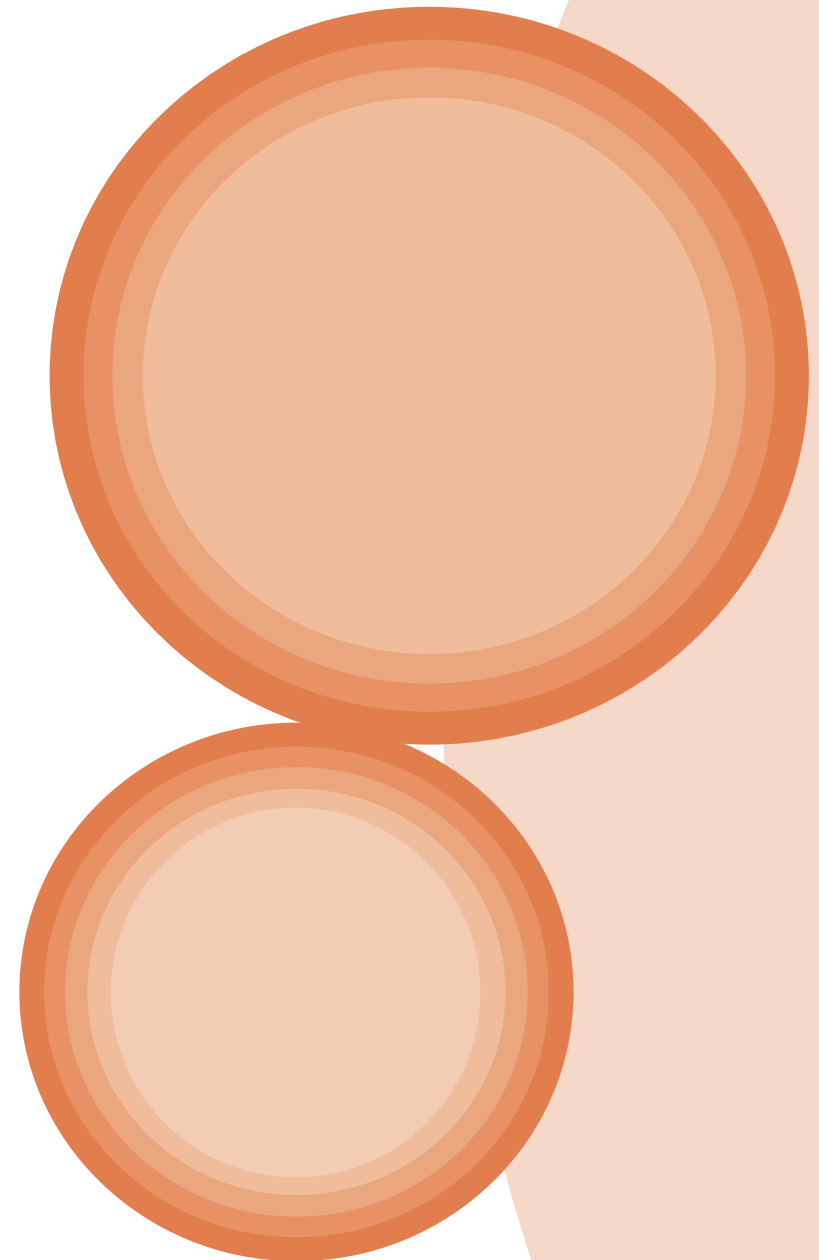
'83% of providers who responded reported the local authority supported them extremely or somewhat well'

'78% of providers who responded found quality assurance visits to be extremely or 'somewhat' useful'

'87% of providers who responded were aware of who their contract officer is'

In response to the survey the following actions have been completed:

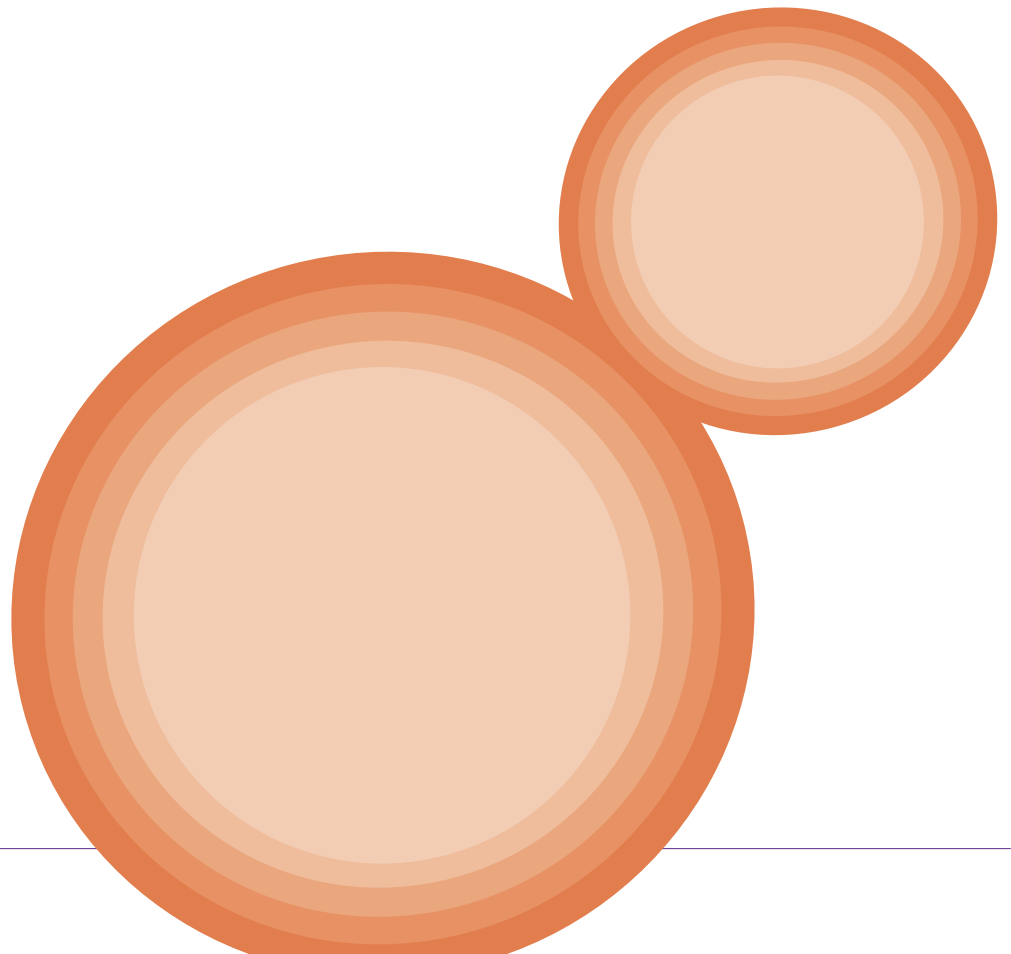
- An escalation process for providers in-relation to safeguarding, finance and commissioning queries has been implemented
- Information from the provider survey has informed the Market Position Statement
- Two providers have been identified to be part of a future safeguarding stakeholder group.



## Addressing inequalities and commissioning for diversity

A range of approaches are in place to ensure that support available can meet the diversity of Coventry citizens.

- All services are commissioned with requirements to provide tailored support for adults reflecting diversity. This is evident during the initial needs analysis, Equality Impact Assessment stage and through service specification, tender questions /requirements and through contract monitoring and quality assurance.
- Specific providers are commissioned to respond to the needs of minority groups. For example; a consortium arrangement through Mind provides bespoke information, advice and support for adults from minority ethnic groups (Sahil and Tamarind) and a specialist mental health service catering for South Asian communities provides supported accommodation (Anjuman).
- Carers Trust Heart of England provide support to informal carers including; African Caribbean, South Asian and Chinese minority ethnic communities. Preventative Support Grants are used to support adults with sensory impairments through specialist support services. Age UK provides support to people from nineteen different minority ethnic groups.
- The Council's information and advice offer, including the Community Directory signposts people from diverse communities to culturally appropriate community support.
- Our Occupational Therapy led hoarding service assists in safeguarding adults with hoarding behaviours.
- Through connections with the Faith Partnership Forum – a group that consists of faith leaders and designed to support people of different faiths and enhance community outreach of diverse communities.
- Promoting good practice amongst directly provided and commissioned provision in supporting older people from the LGBTQ+ community, for example signposting providers to the Skills for Care coproduced Framework for working with LGBTQ+ people in later life and guidance available from Age UK.
- Our digital inclusion team provide free devices, data and training to enable people to access services and information.
- We employ experts by experience in some of our mental health services, offering employment opportunities and a chance to use their experience to help others and help us develop services that work for the people who use them.





## Market shaping

As well as day to day market management to meet the demands of today we engage with the market and stakeholders to commission for future demand. Our engagement with the market takes place through provider forums, a regular provider bulletin and a commissioning microsite that provides a one-stop information point for providers of social care in Coventry. This enables engagement on key developments which recently has included fee increases, safeguarding and inspection.

We also seek third party feedback on support provided to help shape future requirements. An example of which is our work with a Warwick University post graduate student to understand how well supported care providers in Coventry and Warwickshire felt during the pandemic. The findings showed that providers felt generally well supported and particularly well supported around infection prevention and control.

Market wide engagement has supported the completion of our Market Sustainability Plan and the Market Position Statement (MPS) which has been produced in partnership with providers. Our MPS has been refreshed in 2024 to take account of changing need and demand, different service models as well as expectations around the quality of care.

We recognise the important role our voluntary sector partners play in the delivery of social care in the community and maintain positive relationships with these partners, not only given their role in providers of support, but also in assisting in shaping the market and delivery across the health and care sector. A Voluntary, Community Social Enterprise Forum is in place with the aim of forming closer working relationships to increase use of community support options for new and existing people to social care.

## Ensuring a sustainable and affordable market

To gain a deeper understanding of sustainability issues facing the market a provider survey was undertaken in order to understand sustainability issues beyond the issue of fees alone. For care homes, the highest reported priority concerns were in relation to the recruitment of staff, followed by staff retention and utility costs. For nursing provision, their most notable challenge was utility costs, followed by insurance costs and the recruitment of staff.

The results of this survey informed our revised market support offer which includes number of actions aiming to make a meaningful impact on the sustainability issues raised:

- Recruitment of new workers into the sector through monthly job fayres, access to an employment hub, advertising tips and support from Coventry's 'Job Shop' and 'Employers Hub.'
- Recruitment campaigns working alongside Coventry's Migration Team, aiming to promote a career in care to individuals who may be unaware of the opportunities available in the sector.
- Guidance on bid writing and funding applications, recognising independent businesses may not have the expertise or resources available to respond to tenders. Our support will assist in ensuring our contracting process supports all businesses in accessing opportunities available.
- Resources and tips to reduce business costs.
- Assistance and guidance to improve CQC ratings.
- Resources, including accessing group sessions, to promote wellbeing at work for existing staff. This aids with recruitment and retention strategies and supports the health of our workforce.
- Effective digital market techniques
- Guidance on co-production, specifically the benefits this can have on the business and on an individual's outcomes.

Information about the areas outlined above are all included in our Provider Support Pack which is available to all providers (both commissioned and non-commissioned) and is on our website.

Information on the cost of living and wellbeing support is provided monthly for providers to cascade to their staffing groups. The intention is to provide support to stop people leaving the care sector for financial reasons alone.

For younger adults our market assessment (MSIF Capacity template return June 2023) highlights some limitations to capacity within the city in relation to younger adult accommodation. This includes younger people transitioning from Childrens Services and working age adults. Our market development plans for LDA/MH and our Market Position Statement has identified this area as a commissioning priority.. To start to address this gap the Council has been successful in developing a number of larger, core and cluster style supported living schemes with an additional 56 learning disability units available within the city in the last three years through call-off procedures via our Dynamic Purchasing System framework. An additional 5 mental health providers equating to 32 units have also joined the framework in this time.

### Quality of provision

We have a clear approach to quality assurance, this is a joint Coventry City Council and Integrated Care Board (ICB) approach and includes an escalation framework to support providers with quality concerns which contains five levels (zero to four) of escalation, from 'No Known Concerns' to 'Persistent Serious Concerns'.

This approach provides assurance and oversight, clear processes and escalations to manage concerns around a care providers quality and enables early identification of possible provider failure. This also ensures consistency across all service areas and utilises available contractual remedies and enforcement options to effect change, where required. Our multi- agency Provider Escalation Panel process, which focuses on risk levels 3 and 4, includes representation from various functions within the Council (e.g. commissioning, safeguarding, the Deprivation of Liberty

Safeguards (DoLS) Team as well as health and local CQC representatives. This ensures the oversight of the quality of social care provision which is causing most concern and ensures co-ordination of corrective action including recommendations for contractual action where appropriate.

Our Care Home Support Nurses, who are part of our Quality Management Team, and who are jointly employed by Coventry City Council and the ICB are an excellent demonstration of how the provider market is supported to develop and improve. The team provide practical support and leadership on quality of care issues and train and work alongside staff and managers within care homes to improve standards. The remit of the joint team is to work with health and social care partners to maintain safe systems of care and ensure continuity and quality of care, with the aim of ensuring a sustainable market of good quality care provision. The team also works closely alongside the Care Quality Commission (CQC) to improve the quality of care in Coventry.

### Out of City services and arrangements

Our Out of City process outlines our quality assurance approach to out of city placements, however specific action may be led by the host local authority who will lead on investigations, as Coventry does when we are the host of out of city placements by other authorities.

We have defined arrangements for 'Out of City' placements. This process applies to all care home, supported living, and housing with care placements made outside of Coventry City Council tax boundaries. This is to ensure we are meeting needs and have improved oversight of safety and wellbeing of adults from our community living outside of Coventry.

## Supporting the wider social care workforce across the whole market

The workforce is critical in our ability to deliver a range of sustainable and diverse services for now and in the future. This is reflected in our Adult Social Care Workforce Strategy which applies to the internal and external Adult Social Care workforce. This strategy outlines our ambitions for supporting the independent sector market as well as our internally provided services.

In April 2024, to further understand the provider workforce profile and its progress over the last 12 months, a survey on recruitment and retention (linked to the Market Sustainability and Improvement Fund) was completed which produced an 87% response rate. This high return rate is a good indicator of strength in the workforce and represents an increase from the 2023 survey return rate of 73%.

We are also proactive in supporting the local workforce to develop in both capacity and capability, examples of which include:

- In partnership with DWP job shop and local providers our Commissioning Team have developed processes to support local recruitment activities. This has extended to support for international recruitment including providing opportunities for migrants and asylum seekers who are permitted to work in the UK and which is facilitated with our Migrant Team.
- An initiative to improve employment opportunities was jointly undertaken by the Commissioning Team and Adult Education Team. This project was launched in June 2023, with the goal of enhancing recruitment prospects for individuals in Coventry with an Educational Health and Care Plan (EHCP). This includes people with a learning disability, mental ill health, autism, and physical disabilities.
- Improving the rates of paid employment for adults with a learning disability or mental ill health by increasing opportunities to support individuals into employment. This includes placing interns for employment with adult social care providers.
- Providers are being encouraged to become 'Disability Confident Employers'.
- We have recently been successful in attracting grant funding administered through West Midlands ADASS to support International Recruitment and ensure appropriate treatment of international staff and support to those displaced by sponsorship licence revocation and have worked with DHSC on a pilot to provide a support offer to international recruits impacted by licence revocation or suspension
- We work effectively with regional Skills for Care. We ensure that our local care market is informed of developments through our provider forums, provider bulletins and other modes of communication. In June 2023 we supported a Coventry and Warwickshire workforce planning event run by Skills for Care.
- We share job vacancies (from providers) on a regular basis to recruiting agencies and the job shop.
- We promote care jobs with young carers, care leavers, people with a disability, migrants and refugees and have held recruitment events.
- We work actively with providers on how they can improve retention of care staff (covered in provider support pack).

## Quality Statement Five

**We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.**

Partnership working takes place at all levels within Adult Social Care, from the Social Worker engaging with a GP and community nursing team to understand and co-ordinating support around an individual, right up to the strategic partnership forums that oversee the delivery and improvement of Health and Care for the population of the city.

Some of the specific groups in place within Adult Social Care to ensure partnership working is effective include:

- Learning Disability and Autism Collaborative. A key focus of this group is to bring together a range of professionals, the voluntary and community sector and experts by experience to oversee the development of a robust response to the admissions and discharges for those with learning disabilities and/or Autism.
- Autism Partnership and the Learning Disability Partnership Boards. Bringing together the statutory, voluntary and community sector and experts by experience to formulate priority actions and monitor the effectiveness and the impact of the local strategies across Coventry and Warwickshire.
- Mental Health Collaborative group. Brings together a range of statutory providers with voluntary and community sector providers and experts by experience to coordinate, monitor and address common issues relating to the delivery of mental health services. An example of joint delivery has been the use of the Mental Health Inequalities fund.

## Working in partnership

As well as our joint quality assurance team the Council works closely with Coventry and Warwickshire Integrated Commissioning Board to manage commissioning and the quality of provision. Our main vehicle for this is the Adult Joint Commissioning Group which has the remit of:

- Acting as the Board for the agreement and oversight of section 75 provisions in relation to the Better Care Fund.
- Facilitating collaboration, joint working, and joint commissioning for adults with health and/or social care needs.
- Endorsing, overseeing and making recommendations for strategic and operational joint commissioning strategies and plans.

We have a number of joint commissioning arrangements in place with the ICB including:

- Long and short-term home support – including support for the Urgent Care Response in the Community by ensuring home support capacity is available to enable step down from Urgent Care.
- Supported living framework for adults with Learning Disabilities and Autism and Mental Health are all jointly commissioned with Coventry City Council as the lead agency.
- Transforming care provision which is jointly commissioned with the ICB and also with Warwickshire County Council.
- Two lead commissioning posts for Mental Health and Learning Disabilities.
- Contributing to systemwide quality improvement through input to the ICS System Quality Group and monthly Quality Surveillance Group.
- Collaboration with infection control nurses to ensure safety of care home residents. Initiatives such as the Say No to Infection accreditation scheme has enabled 54% of older people care homes to become accredited.



## Innovation and improvement

Our work to continuously improve and innovate within Social Care requires coordination with other agencies and services. Examples of how we have worked in partnership to delivery improvements include:

### Mental health transformation

The Transformation of Mental Health has provided an opportunity to radically rethink all areas of Mental Health delivery. Local commitment to partnership working enabled a joined-up bid to NHSE resulting in additional funding for Adult Social Care and delivery in mental health. The focus was on different mental health needs including perinatal, forensic, eating disorders and for those of older adults. There has also been additional funding to broaden the offer of social intervention into community provisions to supplement the existing offer in Crisis Services. The submission was received positively by NHSE and the then social care advisor to the Department of Health who saw it as one reflective of partnerships and collaboration.

The Community Mental Health Transformation Programme is bringing together experience and support from all sectors across Coventry and Warwickshire to drive improvements across mental health services. Notable achievements include embedding trauma informed practice, working with Experts by Experience as equals and building specialist pathways including new care models, new assessment processes and strengthening partnerships with external agencies.

Recent achievements include:

- Training for My Care Record has commenced with nine sessions being held between March and April 2024. 300 clinicians, managers and medical professionals have attended with further sessions planned.
- Older Adults Mental Health service is now in place.
- Mentalisation Based Therapy (MBT) is available in all localities.
- Over 20 clinicians have now been trained to conduct dissociative identity disorder assessments using SCID-D.
- Over 200 people have accessed Dissociative Disorder online training.
- Exploring how Pharmacist Independent Prescribers roles can be delivered as part of patient-facing pharmacist clinics.

The focus for 24/25 will be:

- Delivery of the S75 agreed priorities across Coventry and Warwickshire.
- Transitions and increasing integrated working between community mental health, urgent care and inpatients.
- Building Multiple Professional Teams and expanding new roles into mental health services.
- Recruitment retention (particularly for core teams).
- Training for clinicians to be upskilled in across patient cohorts of personality disorder and psychosis.
- Protecting best practice of Flexible Assertive Community Treatment (FACT model) for patients with psychosis.

## Coventry Partnership Dementia Hub

In July 2023, following a thorough co-production and engagement approach Coventry opened the Coventry Partnership Dementia Hub. This is one of a very small number of “one stop” Hubs in the country offering people with Dementia and their family carers; guidance, support and activities from the first stages of identification before diagnosis through to end of life.

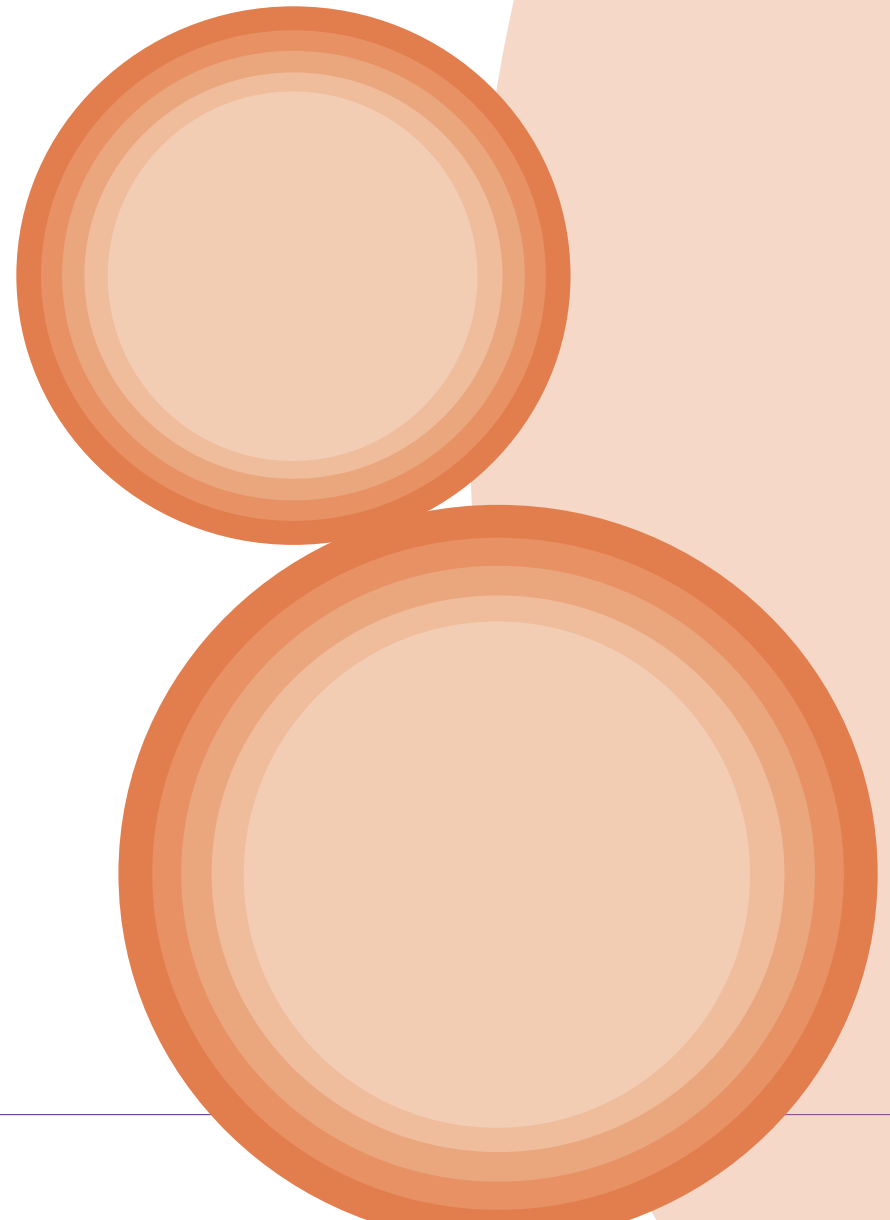
We are extremely proud of the partnership approach taken to responding to the feedback and needs identified by people with lived experience through our engagement. Health, voluntary sector and council services are working together to improve experiences and outcomes for people, encouraging peer support and independence and offering a safe space for those affected. Outreach support, group activities and the use of digital are some of the approaches used to support people in this new model.

## Improving Lives programme

This is a programme of work led through the Coventry Care Collaborative, which commenced in 2021, which aims to make a series of improvements across the urgent and emergency care system in Coventry. Work is focussed on the levels of acute attendances, emergency admissions and emergency readmission for adults over 65 in Coventry and the resulting demand on adult social care services as a result of hospital attendances.

The programme is a collaboration between the City Council, the ICB, University Hospital Coventry and Warwickshire and Coventry and Warwickshire Partnership Trust. The programme aims to deliver a minimum of £13.6m of value across the four organisations and we have engaged Newton Europe as a delivery partner for the programme.

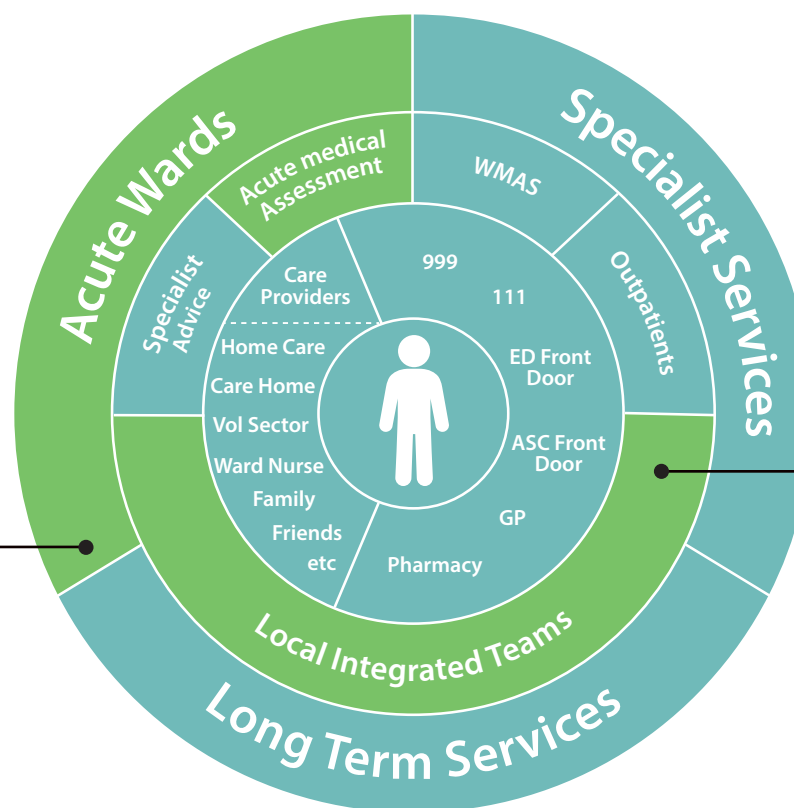
Alongside the financial benefits the programme will support improving outcomes for people. Simply put, reducing avoidable admissions to hospital is more likely to lead to people retaining a higher level of function and independence.



## How did we want our services to be arranged?

We will start to break down the barriers between services by initially focussing on the highlighted areas:

We will improve flow, simplify discharges and ED outcomes by working on processes in the hospital which don't rely on the wider system.



We will be building local integrated teams with single operational management across Coventry. These teams will handle all urgent health and social care needs for residents, either directly providing the support or coordinating specialist teams. The resident will be on one caseload.

These teams will be connected through human and digital interfaces to a wide range of people from care providers to WMAS, to those working in discharge & the front door

To deliver the programme three workstreams were established as follows:

#### 1. Hospital processes

This workstream focusses on Emergency Department, ward processes and the Integrated Discharge Team to improve efficiency and reduce time taken during hospital visits and discharges.

#### 2. Interfaces

This workstream focusses on referral routes, community visibility of demand, how the Emergency Department connects to services and Discharge connection to services.

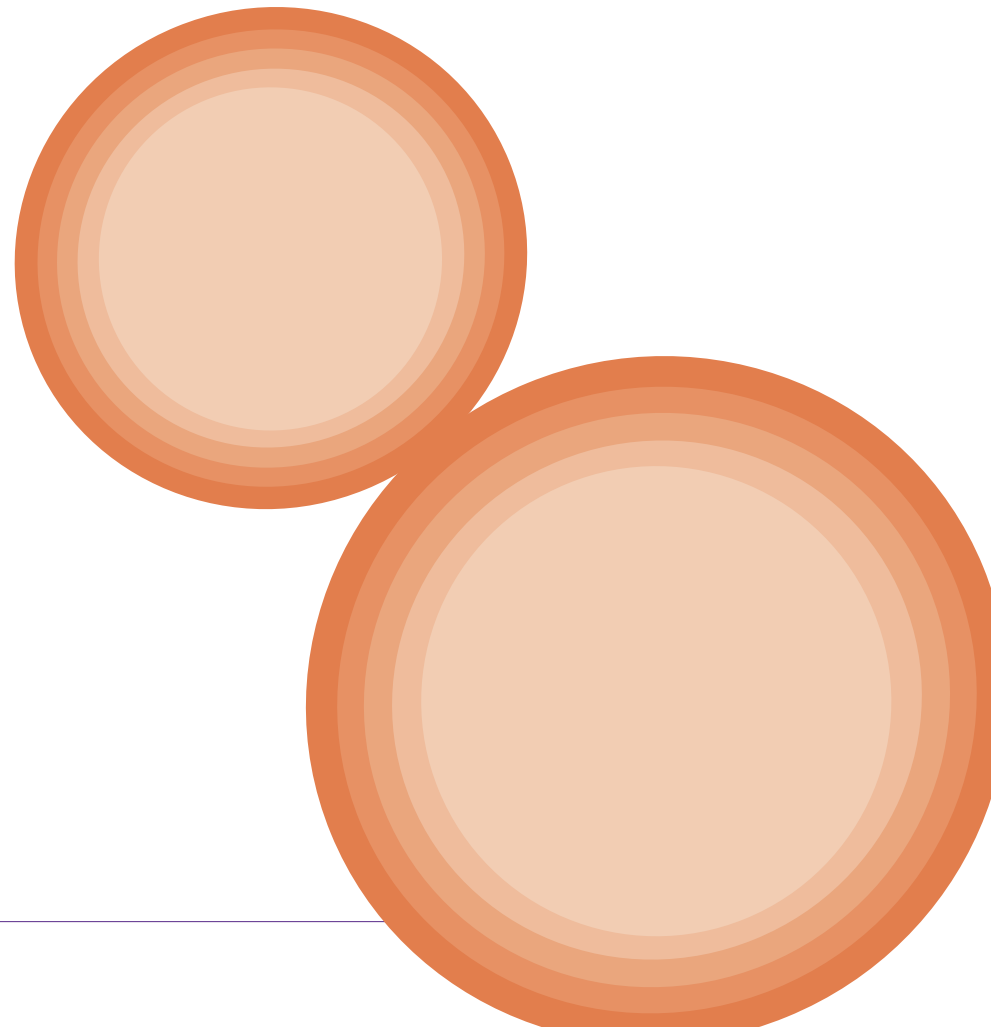
#### 3. Integrated locality teams

This workstream focusses on the integrated care model, working with specialist teams, the ability to intervene proactively in the community, community ownership of discharge from admission, community residential beds for discharge, and the appropriate use of Pathway 3 beds. (Pathway 3 focusses on those with such complex needs that they are likely to require 24-hour bedded care on an ongoing basis following an assessment of their long-term care needs).

In 2023 trials of, new models of, working were put in place and over 2024 the ambition to achieve city wide roll-out of Integrated Locality Teams is now realised and roll out of new hospital processes is in place.

Some of the impacts realised from the work include:

- Support on discharge is more coordinated between agencies and patient feedback positive.
  - Discharge activity has improved across the trial wards with a focus on developing nursing led discharge over 7 days.
  - The multi-agency response wrapped around the hospital is supporting change in a new way and is different to any other attempts to support change in discharge practices that have not had a multi-agency approach.
- Early signs of the benefits to patients and residents, reflected in the trials to date, and feedback has been encouraging.
  - Staff across the system have been largely positive about making the changes across organisations.



## Theme 3: How Local Authorities ensure safety within the system

*In this theme we describe about our approaches to safeguarding and how we work with people and our partners to establish and maintain safe systems of care*

### Summary

Safeguarding adults is a primary factor in all our interventions. We do not have a separate safeguarding team as have an approach rooted in safeguarding being everyone's business with safeguarding responses being led by professionals who may already know the person or are familiar with the context of where the person lives and the local community.

Where we receive a contacts where safeguarding is stated, indicated or implied these are directed straight to the Intake Team and are fast tracked for early intervention, review and decision making.

In 2022/23, we received 6,278 safeguarding concerns with a 17% conversion rate to enquiry. As of the 31st March 2024, we had 6,796 safeguarding concerns for the 2023/24 financial year with a conversion rate to enquiry of 20%. A previous practice review gave confidence in our conversion of concerns to enquiries.

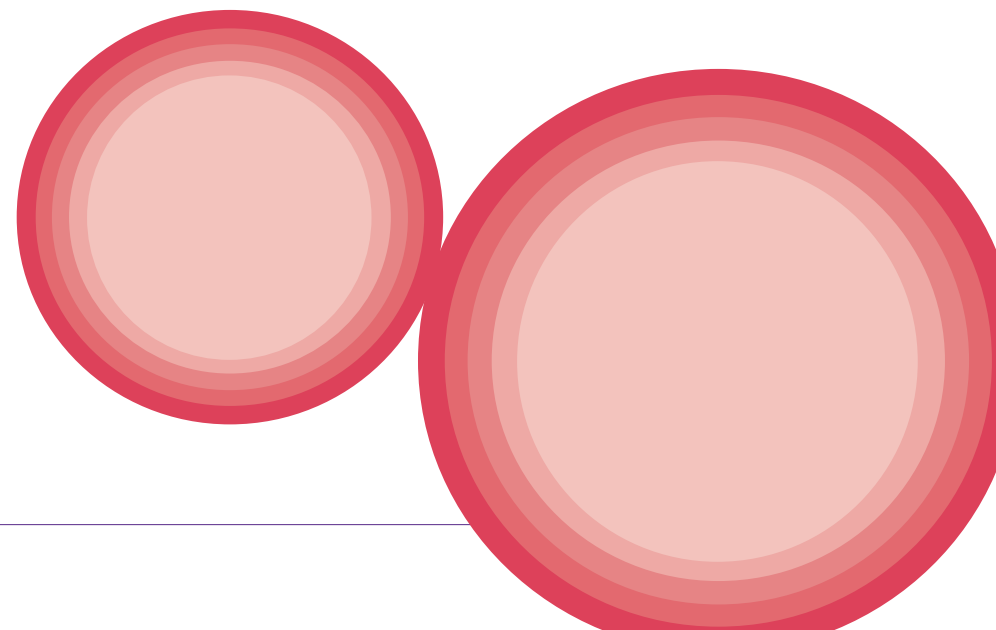
We adopt a Making Safeguarding Personal approach where during 2023/24 87% of people were asked about their outcomes, with 96% fully or partially achieved. This compares to 90% being asked their outcomes and 94% fully or partially achieved in 2022/23.

In terms of progressing open safeguarding to conclusion 77% of 2023/24 enquiries are concluded within 0-3 months, some more complex cases will take longer but all safeguarding open over 6 months is reviewed via audit by the Safeguarding Adults Coordinator. As well as an assurance

role in providing confidence that safeguarding open for over six months is legitimate these reviews also enable us to identify themes relating to issues that impact on timeliness of intervention, sources of concern and common matters impacting on resolution. In 94% of enquiries where risk was identified, risk was reduced or removed.

Our Coventry Adult Safeguarding Board provides the oversight, assurance and strategic leadership for Adult Safeguarding in Coventry and undertakes Care Act 2014 audit reviews to ensure we are delivering our responsibilities in respect of adult safeguarding.

We work with local partner agencies including the Police, Health, Fire, voluntary organisations and across Council to ensure safety and have a range of multi-agency forums are in place to ensure a joined-up approach to supporting people to ensure and respond to issues of safety.





## Key strengths

1. Strong focus on partnership working within the Coventry Safeguarding Adults Board.
2. West Midlands wide safeguarding policies and procedures supported by Coventry specific guidance.
3. Our approach to transitions 'Preparing for Adulthood' recognised as 'Good' in the Childrens Services Ofsted Inspection (June 2022) identifying positive joint working with adult social care to ensure a smooth transition.
4. Our response to provider issues and service failure

## Areas for development

1. Clearer transitions pathways between Health and Social Care where individuals require both health and social care support as an adult
2. Systemically using feedback from people experiencing safeguarding enquires to further improve
3. Continuing to develop our capabilities in challenging areas o safeguarding activity including Self-Neglect

## Quality Statement Six

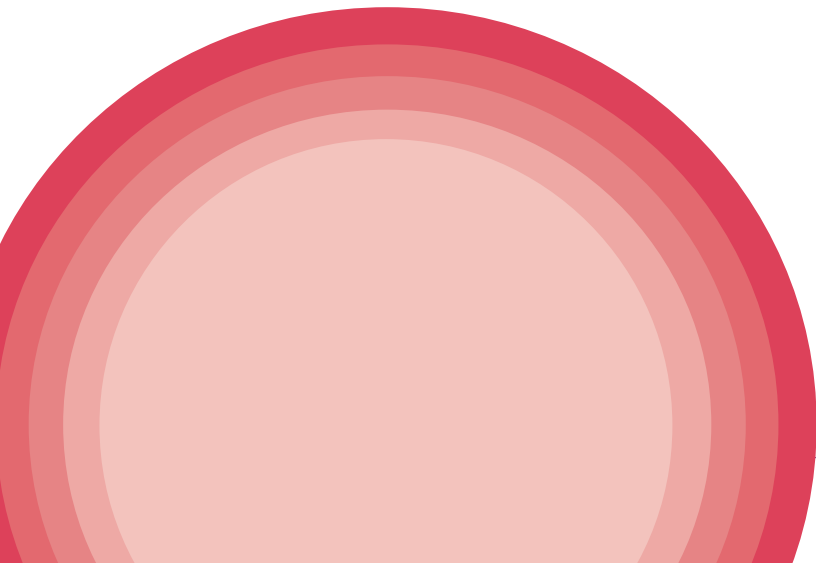
**Safe Systems, Pathways and Transitions. We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.**

### How we ensure safe systems of care

Keeping people safe is a fundamental element of the work of Adult Social Care and a City Council priority. It is fundamental to all aspects of our assessment and review activities including how we commission care and support and the quality of it. To that end we have a range of policies, escalation processes and legal and risk enablement panels that support our decision making. At the same time there is a recognition that an adult has the right to take risks where they can and where they chose to do so.

We don't do this in isolation; we work with local partner agencies including the Police, Health, Fire, voluntary organisations and other departments of the Council to support safety within the system. Our safeguarding responsibilities are key within this process and our leadership of the Coventry Safeguarding Adults Board, demonstrates the importance of safeguarding for the organisation.

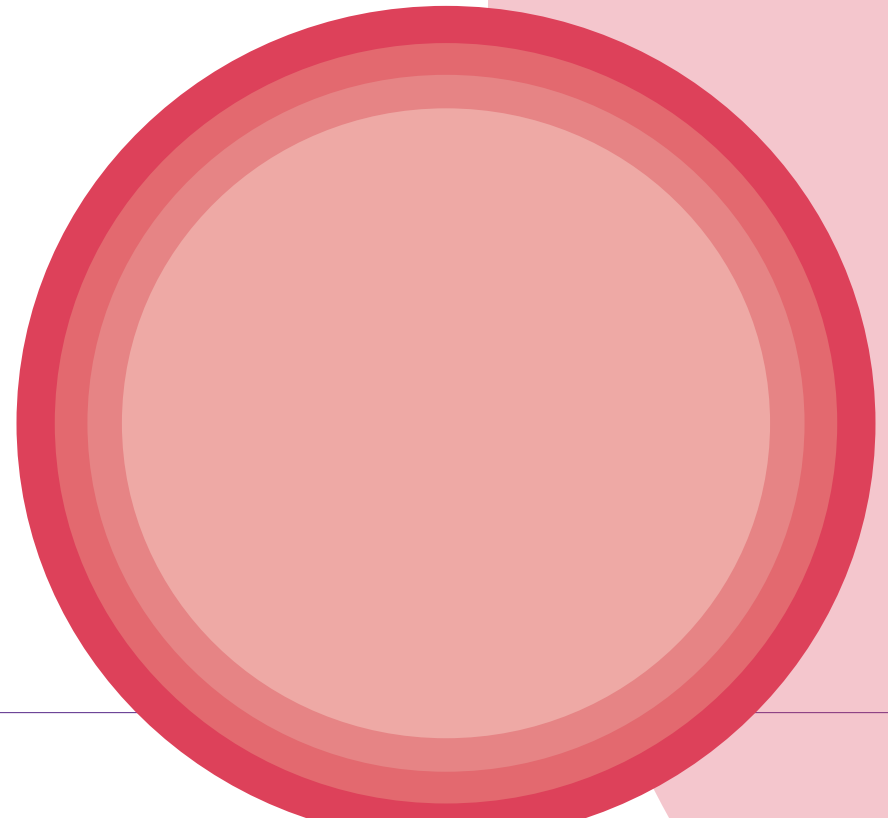
A culture of openness is supported by a 'I have a concern' page on our Intranet which makes it clear to all colleagues what options are available to raise a concern. Our workforce surveys have also demonstrated that people who work for Adult Social Care feel able to speak to managers and raise concerns.



## Examples of how we work with partners to ensure safe systems

Within Coventry a range of multi-agency forums are in place to ensure a joined-up approach to supporting people to live in safety including:

- The Channel Panel (as part of Prevent duties).
  - Harm reduction forums to discuss complex multi-agency work with individuals.
  - Complex case and risk enablement panels and legal panels to focus on specific individuals.
  - Multi-agency public protection arrangements (MAPPA). Brings together Police, Council, probation and Mental Health services to formulate comprehensive plans under single agency plans and multi-agency plans including deployment of resources.
  - Multi-Agency Risk Assessment Conference (MARAC). A multi-agency conference focussing mostly on perpetrators and their victims in situations of domestic violence.
  - Domestic Homicide Reviews. To enable lessons to be learned from homicides where a person is killed as a result of domestic violence and abuse.
  - Offensive Weapon Homicide Reviews. To ensure that when a homicide takes place, local partners identify the lessons to be learnt.
  - Safeguarding Adult Reviews (SARs)
  - Learning Disability Mortality Reviews (LeDeR). To identify any potentially avoidable factors that may have contributed to the person's death.
  - Safeguarding practice forum. Engagement forum for those practitioners and managers engaged in undertaking adult safeguarding activity in Coventry.
- Modern Slavery forum. A forum to develop our response and practice led by the Councils Modern Slavery Lead. Transitioning between services - The Principal Social Worker leads a group to discuss and share any issues being experienced with the interface and referral management between Coventry and Warwickshire Partnership NHS Trust (CWPT) and Coventry City Council Adult Social Care.



## Ensuring safety when moving between services and areas

We recognise that points of change can introduce risk to people's safety and therefore have the following specific arrangements in place to support safety at points of change:

### ● Transition and Preparing for Adulthood

The 'Preparing for Adulthood Guidance' is an approach developed and owned by Adults and Childrens Services for the Council which seeks to minimise the impact on young people transitioning into adult services. Significant work was undertaken to develop a joint approach which was noted in the OFSTED report in 2022 as follows:

"For disabled children, transitional planning begins at age 16. This leads to comprehensive pathway plans that address need. There is also positive joint working with Adult Social Care in the local authority to ensure a smooth transition."

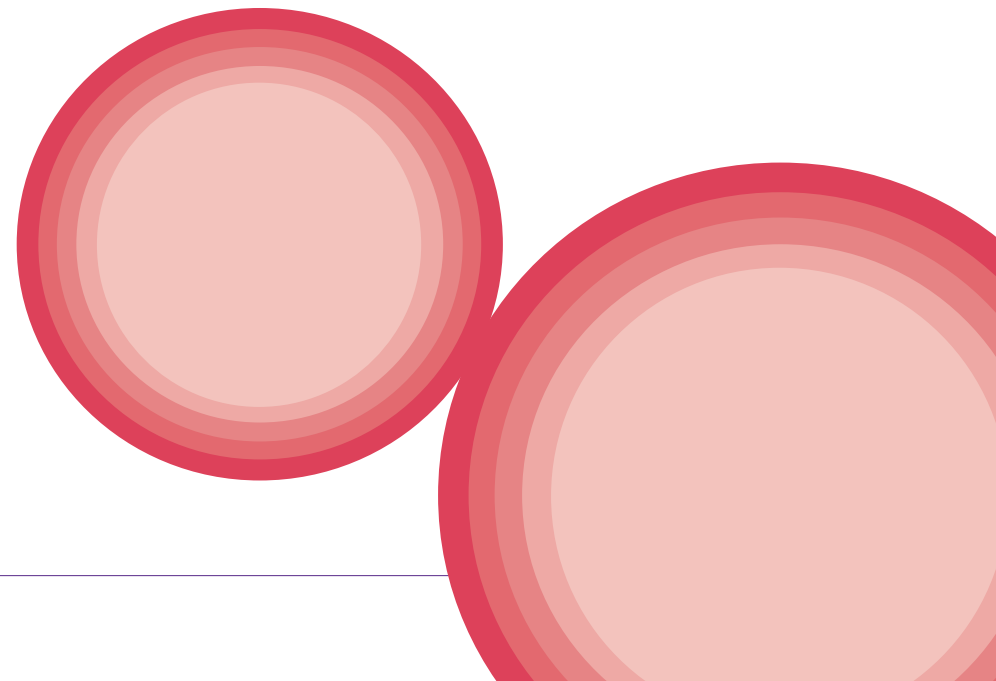
Approx 40 young people per year transition into adult services and we work alongside colleagues in children's services to develop smooth transition plans. The dedicated Transitions team within ASC works closely with the Children's Disability Team to identify young people who are likely to receive a service. The allocated transitions social worker works directly with the young person and their family alongside the children's worker to ensure person centred transition being clear that risk factors and safeguarding matters are a core part of the work. The service receives young adults from both Children's Social Care and Education Teams therefore ages at which transition takes place is variable dependent on need and educational status.

Transitions from Child and Adolescent Mental Health Services (CAMHS) are managed through the Section 75 agreement that exists between the Council and Coventry and Warwickshire Partnership Trust (CWPT). Social care team leads within the arrangements regularly attend the Complex Needs panels for children to ensure transitions are managed effectively and appropriate pathways into services or universal provisions are negotiated to ensure

good outcomes for the individual.

### ● Hospital discharge arrangements

Our approach to discharge recognises core skills that exist within the Hospital and on that basis, both REACT (Emergency Duty and the Front Door) and the Integrated Discharge Team (IDT - health), are trusted assessors. They have access to essential reablement and temporary provision to support the discharge of patients. This is complimentary to the Adult Social Care based services at the Hospital that support residents known to us and those where care concerns or safeguarding concerns have been raised. The Hospital based team provide the central point for all Ambulance concerns due to their ability to respond 7 days a week. Our arrangements in this area have recently changed through the implementation of the Improving Lives programme to provide community led discharge through the roll-out of a 'pull' model.



### ○ **Support for adults with mental ill health**

Care Act delivery in Mental Health is delegated via a Section 75 agreement with CWPT. Staff are seconded from the Council to the Trust to operate within multi-disciplinary teams. To achieve joined up support a joint health and social care assessment takes place, supplemented by a strength and needs assessment, if statutory service provision is required. Operational guidance to support the process is extended to those staff within the Adult Disability Team specialising in the delivery of Transforming Care.

Joint working arrangements and intelligence derived from the JSNA have enabled the development of specific roles that support work within our Mental Health services. These include:

- A social worker, that spans Coventry and Warwickshire, (hosted by Coventry City Council in perinatal services).
- A worker specialising in Autism within the Intensive Support Team.
- A social worker in Migration Services.
- An Approved Mental Health Practitioner (AMHP) to support children in crisis via the Child and Adolescent Mental Health Services (CAMHS).

Planning a model of intervention that would deliver good outcomes for adults with mental illness has started with initial trials emerging from practitioners based in the Mental Health Crisis Team as part of the urgent care response. The trials have been successful with initial review indicating that in a 6 month period, they actively supported 73 adults identifying a total of 125 social care needs, avoided 95% of admissions to acute care and in doing so worked alongside 49 different services. This transformed and significantly improved our collaborative approach, across agencies, to those people facing admission to hospital due to mental health crisis. The approach taken uses a social rather than medical model and by operating in a joined-up holistic way removes barriers and enables a person's needs and wishes to really be heard. It uses strength based practice as it's core and has demonstrated the way in which independence can be taken forward within Mental Health Services and particularly at times of crisis.

The trial informed the overarching transformation programme for Mental Health and the learning from the trial has enabled us to secure additional funding and to develop pathways across our internal provisions to support people. This is a model we are now looking to build on within the Community Mental Health Team as part of our ongoing improvement cycle.

### ○ **Adult Services and NHS Continuing Healthcare Team**

A dedicated team and Lead Officer have been in place since 2012. The team coordinate and participate in complex Continuing Healthcare assessments and reviews of eligibility where the individual does not have an allocated social worker. Team members and the lead officer also provide case related advice and support to practitioners and managers across the service where they are involved in work relating to NHS Continuing Healthcare, and also provide more formal training for all practitioners.

We have well established and long standing joint working arrangements between the Local Authority and the ICB, which include robust processes to ensure the Local Authority is notified and invited to participate in CHC assessments and eligibility reviews, as well as a joint decision making process for the ratification of recommendations regarding Primary Health Need from the assessment or Multi Disciplinary Team meeting. A joint dispute resolution process has been in place since 2012 and has recently been updated and incorporated within the ICB Memorandum of Understanding for Continuing Healthcare.

A well established joint hospital discharge process (Discharge to Assess model) has been in place since 2018 and this has supported the ICB in eliminating the majority of CHC assessments taking place in an acute setting, thereby comfortably achieving NHSE targets in respect of this.

### ○ Providing support to Adults with Learning Disabilities

Coventry and Warwickshire health and social care systems came together to ensure delivery of the Transforming Care Programme, led by Coventry and Warwickshire Partnership Trust. Significant work has been undertaken to address the admission avoidance and discharge of those in hospital with a diagnosis of LD and Autism.

Collaborative working is in place to ensure the programmes aims are delivered, securing better outcomes for those with learning disabilities and/or Autism while ensuring safeguarding and risk is properly considered and managed in partnership with the individual and/or their advocate.

The Head of Adult Social Care and Support currently acts as one of the Deputy Senior Responsible Officer (SRO's), for the programme in Coventry, working collaboratively to secure reduce admissions and effective discharges from hospital. We have arrangements in place that secure a joined-up approach for those at risk of admission and where discharges are delayed. Our Adult Disability Team focusses on the Transforming Care cohort led by an Approved Mental Health Practitioner to progress the response.

The multi-agency group that leads this work is locally named as the 'Learning Disability and Autism Collaborative'. The collaborative expanded to include Experts by Experience and led to the development of the Autism Partnership Group and the Learning Disability Partnership Group, co-chaired by experts by experience.

In Coventry there are 11 patients admitted into specialist NHSE beds and 11 in ICB commissioned beds (as at 26 June 2024). 1 is considered delayed discharge (provider withdrew) and 1 has an active plan in progress.

To support multi-agency working there are relevant cross agency agreements including a Memorandum of Understanding for finance, discharge pathways and escalation processes.

### Working with risk and complexity

Much of the work we undertake is complex and, in many cases, a legal process is required to support and protect people. When this applies, we use our internal Complex Case and Risk Enablement Panels and our Legal Panels to determine how best to ensure people are protected and supported. This involves working closely with stakeholders across the system to secure the least restrictive and best option in the individual situation. At any one time we can expect to have approximately 35 cases in legal process. These cases include DoLS S21a proceedings (where the individual is objecting to being deprived of their liberty, objecting to their current care arrangements, personal welfare applications, deputyship applications and Community DoL).

### Mental Health Act 1983 and use of guardianships

Whilst we do have a Section 75 arrangement in place for Care Act activity this does not extend to our duties under the Mental Health Act. To support delivery we have an Approved Mental Health Practitioner (AMHP) Lead officer, AMHP forum and training and a robust programme to secure AMHP training including our own in house first year development plan. We have an AMHP rota that covers community and crisis areas of practice that is in place 365 days a year.

S117 is subject to scrutiny by a multi-agency panel including the ICB and CWPT which considers least restrictive practices, needs and outcomes separately to funding agreements which are considered by the ICB and Adult Social Care in a joint funding meeting.

We use Guardianship to keep people safe, support recovery and ensure continuity of care. Through the use of Guardianship orders, we have enabled adults to remain in the community and outside of hospital for longer periods of time. Guardianships, all of which are used to support continuity of care in local communities, as opposed to long term hospital admission. As of June 2024, we have 4 people subject to Local Authority Guardianship.



## Deprivation of Liberty Safeguards (DoLS)

The service has seen year on year increases in activity. To support the process we do have a discreet service offer supplemented by the use of contracted agency assessments. The service utilises the ADASS tools and have a robust triage to identify and resolve urgent requests. The national data available has shown that we do receive a higher number of applications but that we do complete more within the year than regional and national averages.

A protocol has been developed for practitioners to help determine if the level of restriction or restraint within the provision of care and accommodation for clients amounts to a deprivation of their liberty in the community. This includes use of a risk assessment so due consideration can be given to intensity, duration and impact of the deprivation on the person.

8 people are subject to a Community Deprivation of Liberty (Community DoL) as of April 2024.

## Quality Statement Seven

**Safeguarding: We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.**

### Coventry Safeguarding Adults Board (CSAB) setting strategic priorities

The CSAB is independently chaired and is responsible for publishing our Strategic Plan setting out how as a partnership we work in partnership to meet our safeguarding objectives.

The Board Strategic Plan for 2024-2027 focuses on 4 themes;

- Making Safeguarding Personal (MSP)
- Prevention and Early Intervention
- Engagement and Communication
- Development and Assurance

The Board has the following subgroups;

- Business Executive
- Policy and Workforce Development
- Safeguarding Adult Review
- Quality Audit and Performance

To ensure all partners work together to provide safe systems of care the Coventry Safeguarding Adults Board (CSAB) produces an annual report on key safeguarding performance, progress in reducing or preventing harm and priorities for the following year.

## **Our system approach to safeguarding – Making Safeguarding Personal**

Through the CSAB all partner agencies have adopted a Making Safeguarding Personal (MSP) approach to safeguarding in order to take a person-centred and outcome focused approach to safeguarding adults.

This board ambition for an MSP approach translates into practice through involving professionals who may already know the person or are familiar with the context of where the person lives and their local community.

MSP is also a key strand of our Adult Social Care Practice Framework supported by a range of resources and toolkits to support front line practice. As part of our safeguarding work we capture peoples' wishes and outcomes for example 'I want to feel safer', 'I would like the return of my property/money' or 'I want others to be protected'. In 2023/24 87% of people were asked about their outcomes, with 96% fully or partially achieved

In support of MSP the Complex Case and Risk Enablement Panel, chaired by the Principal Social Worker is in place to support staff in developing care and support plans in cases where there is a significant or perceived substantial risk to the individual. The Panel provides a clear process for discussion, and shared decision making to support both staff and individuals in considering potential consequences of any decisions.

To help ensure the individual is heard and the outcomes they want to achieve are taken into account we have reviewed our previous approaches used 'My Safeguarding Experience' due to low uptake and introduced a new anonymised online survey form from April 2024 to be given to people after the conclusion of the s42 enquiry (with the option to provide details for direct contact if required by the person). An initial trial demonstrated increased uptake compared to previous surveys and as a result the methodology deployed in the trial has now been mainstreamed.

## **A joined-up approach to policy, procedure and learning**

The CSAB (and therefore all member organisations) have adopted the West Midlands Adult Safeguarding Policy and Procedures produced in 2019 (updated 2024) for the region. The policy sets out the approach taken across the West Midlands and the approaches to be taken to make this real for our communities. It requires that Section 42 safeguarding enquiries are carried out sensitively and without delay, keeping the wishes and best interests of the person concerned at the centre of decision making.

A suite of documentation is in place to support safeguarding work and captures performance information, last reviewed in July 2021 (further review in progress). This includes a Record of Concern, Enquiry and Closure (SG1), Safeguarding Plan (SG2), Safeguarding Minutes/Planning Discussion (SG3), Lead Enquiry Officers Report (SG4).

Procedural documents are supported by a range of information leaflets and posters about safeguarding adults and the process people can expect. This includes easy read information which is produced by the CSAB and Adult Social Care. Safeguarding posters have also been translated into the 6 main languages used in Coventry (Polish, Punjabi, Urdu, Arabic, Romanian and Tigrinya). Adult Social Care safeguarding Information, public leaflet and abuse type posters from the Safeguarding Board are also available in Arabic as this is one of the main languages requested to be translated.

Board audit activity is carried out via scheduled enquiry panels over the course of the year and associated multi-agency learning events, are undertaken to ensure that guidance and its application is understood, reflect on practice and that practitioners continue to develop their learning in its' application. These audits have included Safeguarding in Care Home NICE Guidance, Mental Capacity Act, Self-Neglect and Safeguarding Adult Review Toolkit Enquiry Panel.

## Adapting to new and emerging safeguarding risks

In order to ensure we continue to improve our approach to safeguarding and how we support people involved in safeguarding practice to develop their approach, in 2023 the Coventry Safeguarding Adults Board (CSAB) produced guidance in response to emerging issues such as rising safeguarding concerns and self-neglect which have included;

- A 'Practice Tool to Aid Decision Making' - to assist agencies working with adults with care and support needs to identify if/when a safeguarding concern should be raised with the Local Authority. This was in response to rising numbers of concerns. This tool can also assist social care staff to assess the seriousness and level of risk associated with the concerns being received.
- A 'Hoarding Best Practice Framework and Toolkit' - in response to rising cases of self-neglect, including hoarding, this framework and toolkit provides approaches and methods of working that can be utilised and adapted by organisations to meet the needs of the individuals they work with.

## Learning from cases of serious abuse or neglect and taking action to remove future risks

To support learning the CSAB commissions a Safeguarding Adult Review (SAR) for any case which meets the criteria as identified in law supported by regional and local guidance and toolkits. The SARs we have undertaken are all published on the Board webpages as executive summaries.

We have undertaken 2 SARs in the last 2 years, one of these concerned a person who was experiencing self-neglect and the other a person with learning disabilities who was the responsibility of a local authority outside of Coventry who experienced neglect as part of a discharge from hospital into a care home in Coventry. Every SAR undertaken has an action plan to address any recommendations and learning from the review.

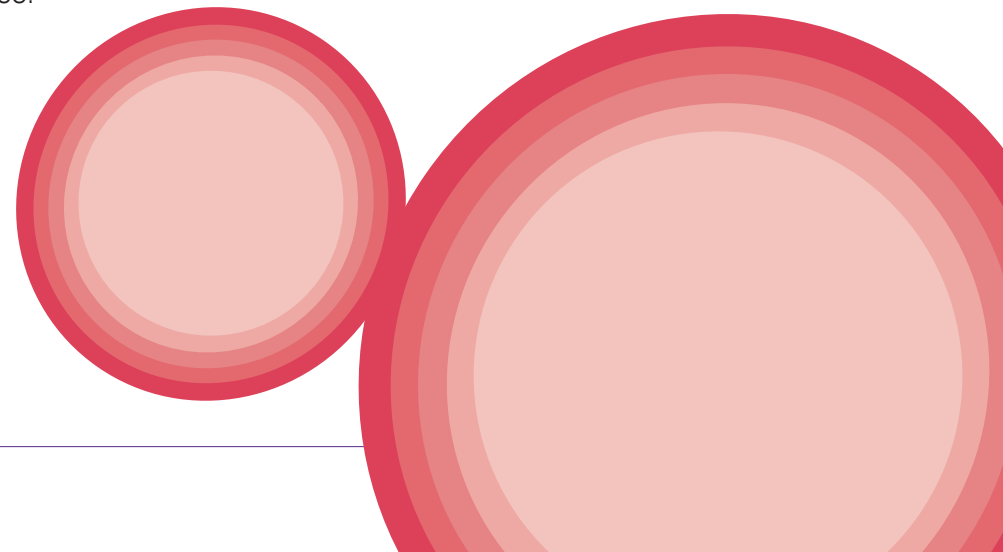
## Safeguarding duties under Care Act 2014 – How we respond to concerns

When the City Council receives a safeguarding concern, this can come through several routes but is generally through Adult Social Care Direct (the name of our 'front door'), the Councils Customer Service Team, the Hospital Team or directly into practitioners undertaking direct casework where a safeguarding concern arises.

Once received the referral and decisions in relation to safeguarding concerns and the requirement to undertake enquires are primarily led by our Intake Team (the team who deal with referrals where there appears to be a need for social care involvement relating to the community) and the Hospital Team (for referrals from hospital staff and West Midlands Ambulance Service).

Mental Health safeguarding concerns are progressed, and enquiries completed where appropriate, by our social work staff seconded to CWPT.

We work in accordance with the West Midlands Adult Safeguarding Policy and Procedures and a local 'Responding to Needs Assessments Requests' Operating Procedure specifies the steps to be taken in receiving, recording, and processing any referrals including safeguarding concerns. This procedure applies to all service areas and helps to ensure consistency in practice.



## Supporting and developing our workforce in strong safeguarding practice

The whole workforce of Coventry City Council is required to receive basic mandatory training with respect to awareness that abuse can take place and the duty to report safeguarding issues. For social care employees and managers, a training programme, including more specialist training, is in place for those responding to safeguarding concerns and dealing with safeguarding enquiries. Our Safeguarding Adults Co-ordinator delivers induction sessions for all new starters which provide an overview of the safeguarding processes, recording forms, the training offer and the range of resources in place to support practitioners. The Safeguarding Adults Coordinator chairs a safeguarding practice forum and holds regular briefings on key aspects of adult safeguarding including lead enquiry reports and safeguarding plans.

In 2023, Adult Services safeguarding mandatory training compliance was at 92%. Oversight and compliance checks by safeguarding business support is routinely undertaken. Data is used to target those who haven't undertaken training and there is a requirement that a refresh of training is undertaken every 3 years following the initial core training.

We also employ a specialist practitioner for mental capacity to support practitioners and staff in the application of the Mental Capacity Act 2005 including production of our own website for adults, carers and providers of health and social care services living and working in Coventry.

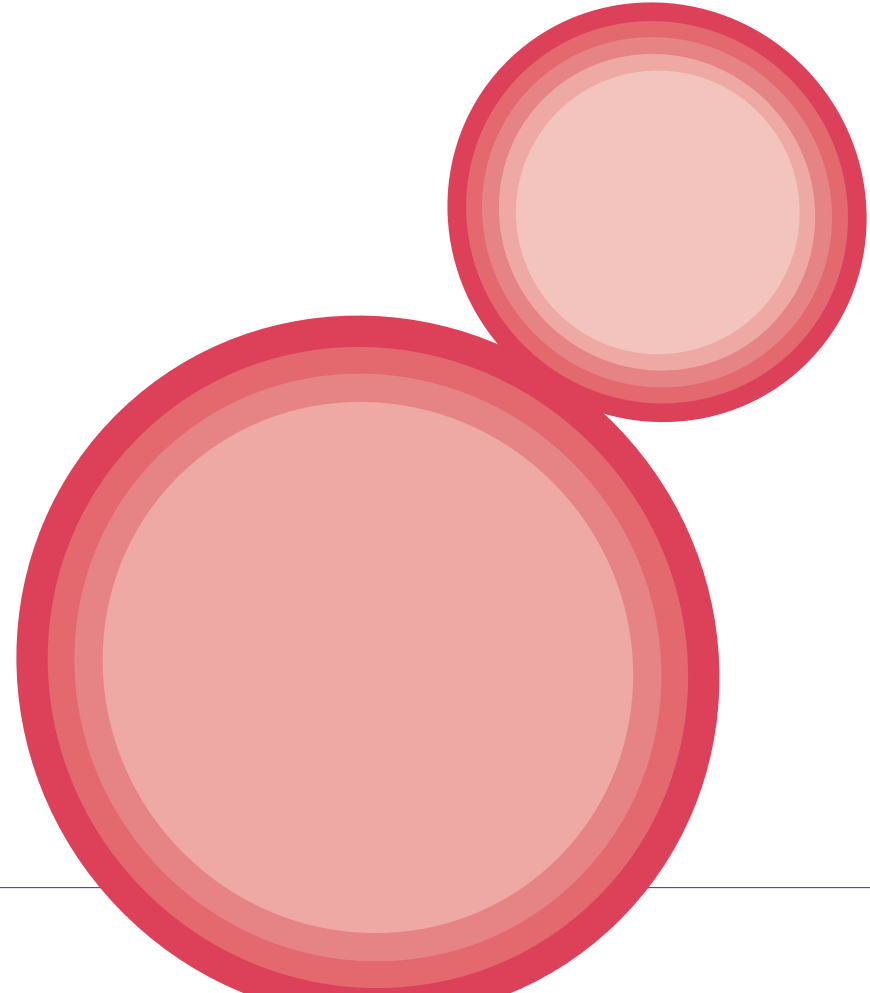
[www.umccoventry.co.uk](http://www.umccoventry.co.uk)

## Safeguarding and mental health under our Section 75 agreement

A Section 75(S75) Partnership Agreement with Coventry and Warwickshire Partnership NHS Trust (CWPT) exists for the delivery of integrated mental health services and includes delegated work undertaken in respect of the Care Act 2014.

CWPT has its own safeguarding policy which recognises these delegated duties. As part of the governance arrangements a S75 safeguarding group is in place which is now chaired jointly by Coventry and Warwickshire Councils to enable oversight of adult safeguarding activity. Each Principal Social Worker has a place on the Section 75 Board.

Quantitative data on safeguarding activity and performance is received by the S75 safeguarding group and S75 Board. This data has been revised to be more in keeping with data included in the Safeguarding Adults Collection Return. The CWPT Safeguarding Team also develops an Audit Plan and findings are received by the group.



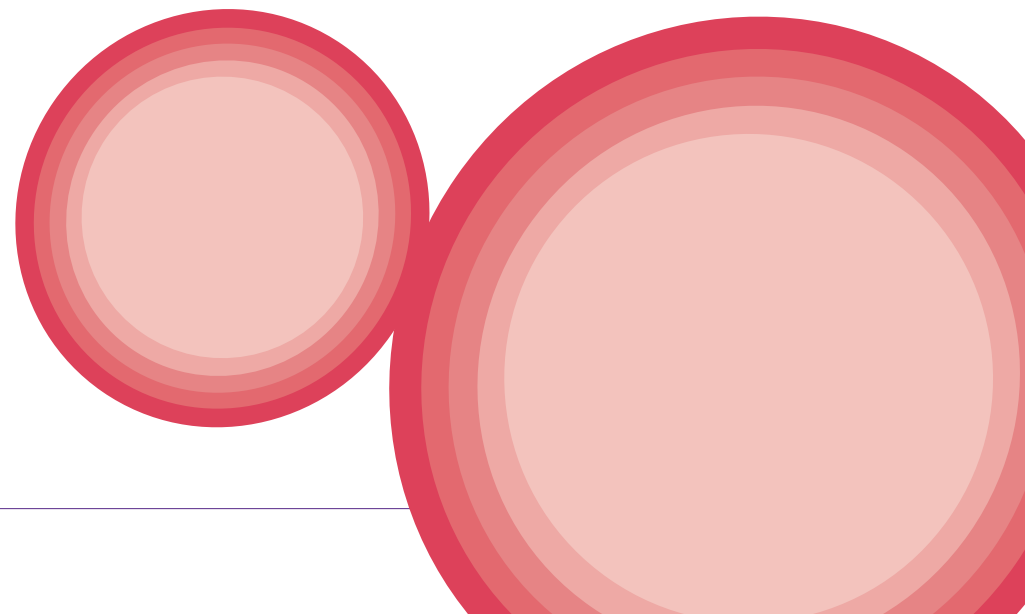
## Quality and practice improvement

To further ensure consistency, maintain standards and embed learning we have a 'Safeguarding Team' which is led by the Principal Social Worker (Head of Practice Development and Safeguarding) and includes a Safeguarding Adults Coordinator who provides support to practitioners and managers undertaking safeguarding practice in Coventry. This provides for the identification of themes and patterns in safeguarding and the engagement with other services, both internal and external on any matters arising.

The collection and reporting of safeguarding activity, performance and the extent to which outcomes are met is supplemented by audit and assurance activity undertaken by our safeguarding team focussing on the following areas:

- **Repeat enquiries** - the purpose of which is to ensure safety planning for repeat safeguarding enquiries. There are *routine reviews of cases where there have been more than 3 separate safeguarding concerns raised in relation to the same individual within the previous 12 months.*
- **Responsive audits** - people who lack capacity and there is no record of the person being supported by an advocate - the purpose of which is to ensure use of an advocates to enable people to fully participate in the safeguarding process. *Audits evidence that the absence of advocacy support is low.*
- **Open concerns audit** - the purpose of which is to ensure enquiries are logged where required and enquiry work is not completed at the concern stage. A series of dip samples is undertaken regarding the conversion rate (concern to s.42 safeguarding adult's enquiry). *This work improved the position which has been sustained for the last two reporting years and takes our conversion rate above WM median rate.*

- **Data quality** - the purpose of which is to ensure appropriate and accurate inputting. *Routine Data Quality is undertaken, including following up and seeking progress updates on enquiries open. For example, case open over 6 months audit by the Safeguarding Adults Coordinator to ensure no drift in enquiries, reason for cases remaining open and timely closure.*
- **Scheduled monthly audit activity** - the purpose of which is to ensure safeguarding activity is progressing and quality assurance of records is evident. *Monthly audit activity across the whole end to end safeguarding process is undertaken to support the identification of good practice and areas for improvement. This includes undertaking dip sample audits at key stages of the safeguarding process including open concerns and enquires.*
- **Engaging with experience via a new anonymised online survey form** - from April 2024 to be given to people after the recent conclusion of the s42 enquiry (with the option to provide details for direct contact if required by the person).





## Theme 4: Leadership

*In this theme we describe our approaches to planning our work, our governance and accountability arrangements and how we are learning and improving*

### Summary

There is stable leadership within the City Council which provides a strong foundation for effective leadership of Adult Social Care. The Director of Adult Social Services (DASS) has been in position since 2016, the Leader has also been in place since 2016 and a new CEO was appointed in June 2023 after a tenure of 13 years of the previous CEO. The Cabinet Member for Adult Social Care was appointed in 2023 and brings extensive experience across a diverse range of political leadership within the city.

We are outward looking and have a proven ability to develop and learn from research. This is demonstrated through both our work with West Midlands Association of Directors Adult Social Services (WM ADASS) and the Coventry Health Determinants Research Collaboration (HDRC) led by our public health team.

### Areas of strength

1. Leadership Board (Chief Executive led) has a strong performance and outcome focus.
2. Oversight and monitoring of risk through e.g. Service and Corporate Risk Registers
3. Focus on improvement programmes including Improving Lives and Mental Health Transformation.

### Areas for development

1. Improved use of data, intelligence and insight to inform improvement activity.

### Quality Statement Eight

We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

### Strategy and Planning

Adult Social Care operates as part of a system and as such does not have standalone Adult Social Care strategy, as we are invested in contributing effectively to broader strategies and plans including:

#### One Coventry Plan

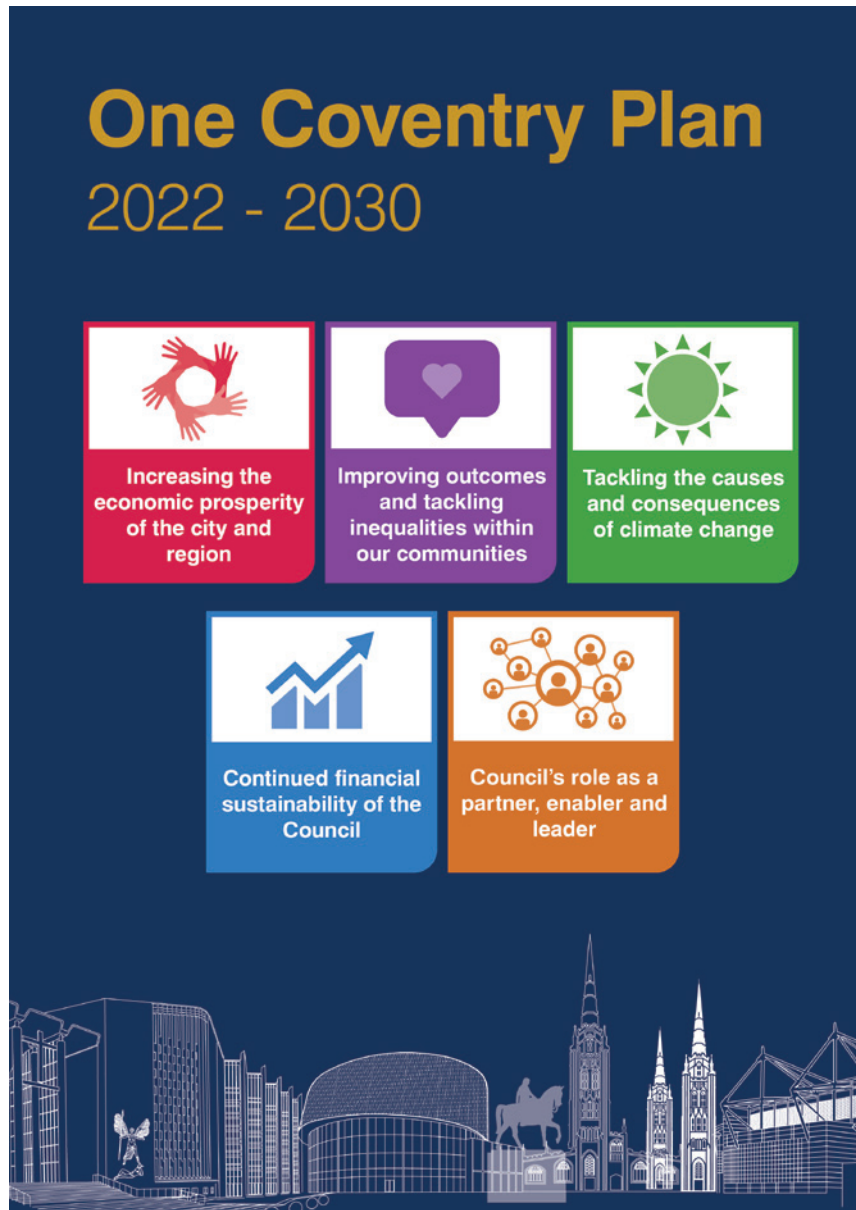
In 2022 the City Council launched its 'One Coventry Plan'. This plan is the overarching strategic document which sets the following key strategic aims:

- Increasing the economic prosperity of the city and region.
- Improving outcomes and tackling inequalities within our communities.
- Tackling the causes and consequences of climate change.

Adult Social Care is accountable for contributing to the delivery of these overall Council objectives through specific performance measures including the:

- Number of people supported in ongoing care services.
- Effectiveness of short-term services.
- Satisfaction with social care.

These indicators are specifically selected as supporting the 'improving outcomes and tackling inequalities within our communities' priority. They are considered reasonable overall indicators of peoples' ability to live independently, within their communities, without the need for support from social care on an ongoing basis, and their satisfaction in taking this approach.



**Integrated Care System Strategy** *'We will enable people across Coventry and Warwickshire to start well, live well and age well, promote independence, and put people at the heart of everything we do'.*

The strategic priorities within this system strategy are:

- Prioritising prevention and improving future health outcomes through tackling health inequalities.
- Improving access to health and care services and increasing trust and confidence.
- Tackling immediate system pressures and improving resilience.

Coventry Adult Social Care have a direct accountability for the delivery of this system strategy through the Supporting People at Home area of focus which has a system level accountability for the Improving Lives programme (a core programme of change across the City Council UHCW, CWPT and the ICB).

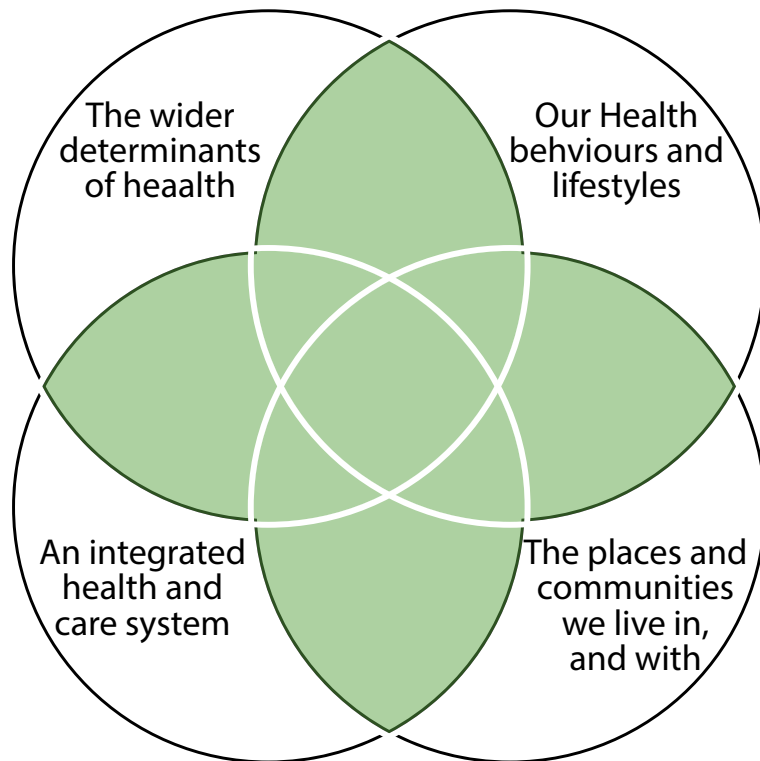
### Health and Wellbeing Board Strategy

The Coventry (Health and Wellbeing Board) HWBS Strategy vision is that - 'We will do everything in our power to enable people across Coventry and Warwickshire to pursue happy, healthy lives and put people at the heart of everything we do.'

And focus on these three initiatives in respect of this:

- People are healthier and independent for longer.
- Children and young people fulfil their potential.
- People live in connected, safe and sustainable communities.

A four-quadrant model (below) based on the Kings Fund model is in place to support the delivery of these outcomes which supports the raft of work across health and care integration (our Improving Lives programme being a key delivery item) and the development of community based support.



## Political leadership

The Council has a clear framework for formal decision-making by Members and officers. This is supported by working arrangements between officers and members which inform the development and delivery of the Council's strategic priorities and ensure Adult Social Care is accountable for the outcomes it delivers.

A quarterly performance report is produced and presented to the lead Cabinet Member for Adult Social Care to give a direct line of visible accountability between the Cabinet Member and service leadership.

Through this process the Cabinet Member holds the team to account on key performance during the quarter, any issues arising from these updates, and recommended next steps. This quarterly reporting also includes our work on involvement and engagement over the same period to evidence how we are involving and listening to people who come (or may come) into contact with Adult Social Care. This demonstrates and creates accountability to the lead member in understanding people's experience of adult social care and the outcomes achieved.

The Leader of the Council and the CEO have regular performance and risk reviews with the DASS and Cabinet Member to further ensure oversight and accountability.

A Local Account (Annual Report) is produced and has done so since 2011. This document covers both annual performance information, and real-life stories of people who have experienced Adult Social Care. This use of real-life case studies, along with performance data, ensures a more rounded view of, and ability to understand people's care and support experience and outcomes. Our Annual Report is now available in an easy read format. The Local Account (Annual Report) is taken through Scrutiny, Cabinet and Council. This gives the maximum level of visibility and ensures accountability for the delivery of Adult Social Care to the most senior level within the local authority.

Scrutiny also plays a crucial role in ensuring the delivery of Care Act responsibilities, quality, and experience and outcomes. Specific items considered within the Scrutiny environment since 2022 include:

- Quality assurance and market failure
- Customer experience and engagement
- Keeping people safe
- Managing referrals and assessments
- Annual performance against ASCOF indicators

## Performance, data quality and insights

Performance is routinely monitored by the Adult Social Care Management Team using Key Performance Indicators linked to the One Coventry Plan, National Performance Frameworks and service improvement plans.

Through the Performance and Insight Team we have developed dashboards to enable accessible and accurate operational data to be produced. These are utilised to inform work planning and resource deployment.

## Risk management arrangements

Within Adult Social Care a comprehensive Risk Management plan is in place which focuses on the key risks and mitigating actions that can prevent Adult Social Care from delivering good outcomes for the residents of Coventry.

The risks are kept under review on a monthly basis and include areas such as resources (finance and workforce), demand management and quality and sustainability. There is a clear process for escalation and de-escalation of risks, including consultation with the councils Insurance Manager.

## Workforce engagement

The Adult Social Care leadership team is regularly engaging with the adult social care workforce in a number of ways including; regular service-wide newsletters, Let's Talk Adult Social Care briefing sessions led by the management team and other ad hoc briefings and presentations. Feedback received on these is positive and attendance is on the whole good. Teams are encouraged to present their own best practice examples, learning and developments through these forums.

Annual Celebration events take place during which staff are presented with 'awards' nominated by colleagues, acknowledging the additional attributes, expertise and personality colleagues recognise in each other. These have been welcomed and the opportunity to feedback and give praise and recognition boosts morale.

Across the City Council there is the Spire Awards and Cheers for Peers initiatives in place to provide a mechanism for recognition achievements delivered by the workforce.

## Leadership and workforce development

Coventry's Adult Social Care workforce is diverse with people working for the independent sector, local authority and for people in receipt of direct payments. Within Coventry City Council we employ over 900 staff and the wider Adult Social Care Workforce in Coventry amounts to 10,500 jobs (2022/23) (Skills for Care data).

Our Workforce Strategy 2023-2026 focuses on this whole workforce with key themes including recruitment, workforce and culture, learning and development, employee relations and health and wellbeing.

We have a considerable range of learning and development opportunities on offer to staff in all roles and grades which is subject to review and updating to ensure relevance and support our application of Care Act 2014 and Mental Capacity Act 2005.

We work closely with our local universities in the design and delivery of qualifying programmes and ensure access to post qualifying opportunities for succession planning. We have dedicated support to our Assessed and Supported Year in Employment (ASYE) programme. We have a strong commitment to apprenticeship including the degree level apprenticeship for social work and occupational therapy.

Employee surveys are held across the City Council (Speak Up & Speak Out Staff Survey 2023) and we also undertake Adult Social Care Organisational Health Checks Staff surveys, the findings of which are published on our webpages. Workforce surveys provide positive feedback on Coventry as a place to work.

We hold exit interviews with staff leaving the Council to ensure that any learning can be applied to improve the experience of our workforce and have developed approaches such as stay interviews to identify why people remain working with us.

## Quality Statement Nine

**We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.**

Improvement through continuous learning is embedded within how we do our work as demonstrated through:

### System transformation programmes

Our Improving Lives programme and Mental Health Transformation, as previously referenced are larger scale programmes incorporating innovative ways to improve outcomes and experiences for those who access Mental Health and general Health services.

### Peer challenge and sector-led improvement

Through West Midlands ADASS we have actively participated in the peer challenge programme since its inception and contributed to the delivery of peer challenges in other authorities so that we can help them learn and continue to learn from others ourselves. The last peer challenge in Coventry took place in March 2020. We have also more recently participated in West Midlands ADASS readiness reviews which are aimed at supporting us in identifying areas for improvement for inspection readiness.

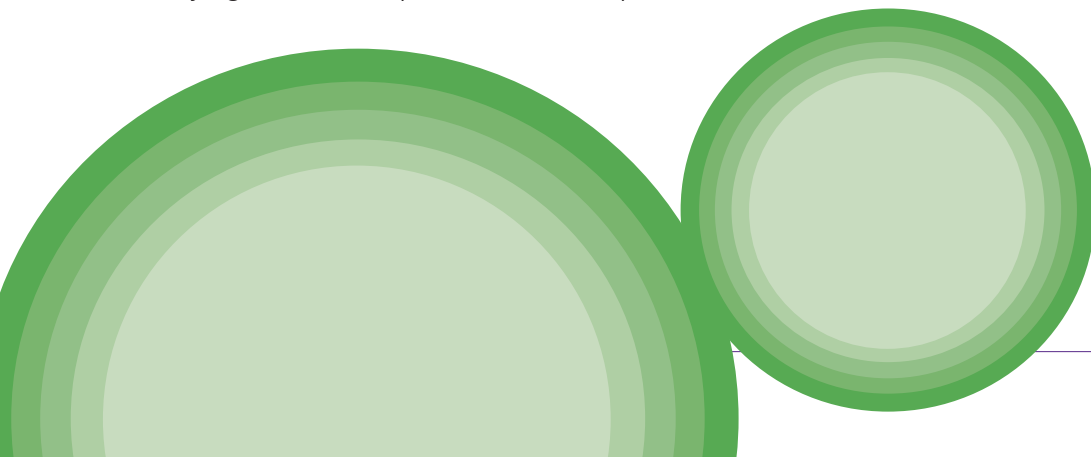
## Quality frameworks and continuous learning and improvement

Across the City Council we work to develop a culture of performance and continuous improvement, which identifies the things we do well, celebrates success and takes action to improve where required. Within Adult Social Care we take a similar approach where we are to continuously learn and improve taking on board feedback from source including; Complaints, Ombudsman Enquiries, Safeguarding Adults Reviews, practice quality assurance, audits and experience feedback. Our Complaints Team ensure a consistent approach to complaints management and ensure we identify learning and actions. We also have internal processes for reviewing serious incidents and undertaking Individual Management Reviews.

We support a culture of continuous learning, this is underpinned by staff appraisals and team meetings. This enables everyone to play their part in improving the quality of services provided.

We have a Practice Development, Learning and Improvement framework enabling the systematic identification of organisational wide learning, areas of improvement and sharing best practice across the organisation. This includes the use of Practice Learning Alerts, providing timely information, direction and informed judgments about a specific piece of practice for sharing with staff and discussion in team meetings.

Through using our Quality Assurance mechanisms including thematic practice reviews we are able to explore the quality of practice relating to a specific area where we identified a need to improve and develop practice. This will include areas of practice linked to Care Act 2014 duties. An annual cycle of themes for practice reviews will be produced. This will include themed areas over the course of a twelve month period.



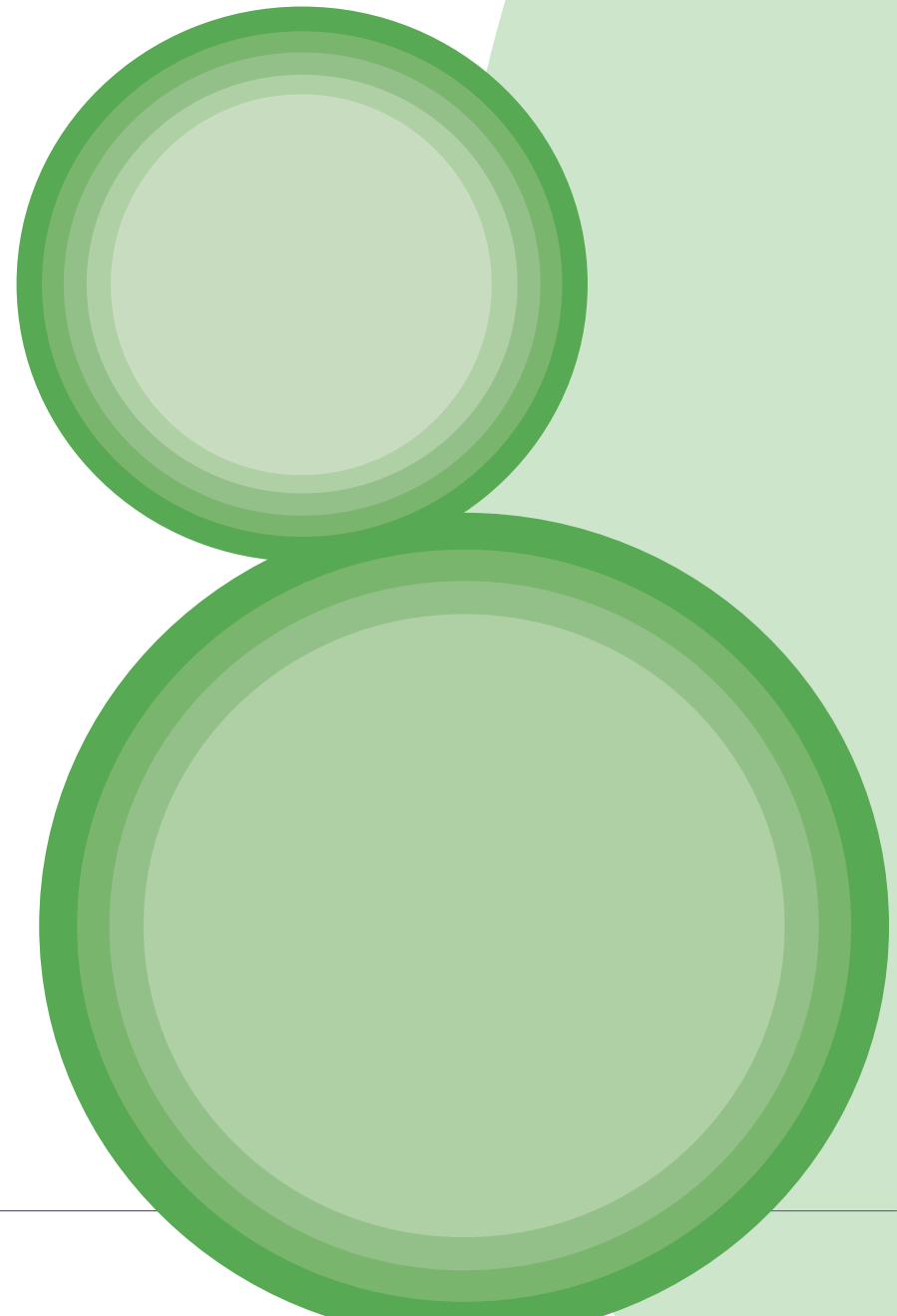


## Engaging with research and evidence

The West Midlands Adults PSW network are supporting WM ADASS in building a research culture for adult social care. This work, supported by our Principal Social Worker included over the last 18 months, the appointment of three research champions (one of which is a Coventry social worker), undertaking a research study based on research mindedness in adults social care, supporting development of Local Authority research engagement plans, engagement with the West Midlands Social Work Teaching Partnership to create research dissemination models via research seminars, hosting dedicated research engagement events, developing a NICE guidance resource for social work practice and access to British Journal of Social Work for all Local Authorities.

In Adult Social Care we participate in research and provide access to knowledge and learning resources to enable staff to learn from research, evidence and best practice. In 2024 we started to host 'Research Circles' which brings together practitioners and academics to attend a reflective session to read and review a piece of research which has been recently published.

The Council's commitment to research is evident by the Coventry Health Determinants Research Collaboration (HDRC) led by our public health team. The HDRC Coventry is a collaboration between Coventry City Council, Coventry University, University of Warwick and a range of partners within the community and voluntary sectors, with support from UHCW NHS Trust and University College London. This is providing opportunities to develop research skills, research ideas and next generation of research leaders.



## Delivering improvement

We have delivered improvement across a range of areas in 2023/24 including:

### Workforce development

Although our workforce survey indicates that people feel well supported and valued by Coventry City Council. Where we have turnover, this is particularly within the first two years of service (although a large proportion of our workforce remain with us for over five years). Listening to our workforce and developing our workforce skills in order to appropriately support the population we serve is a key priority.

Improvements include:

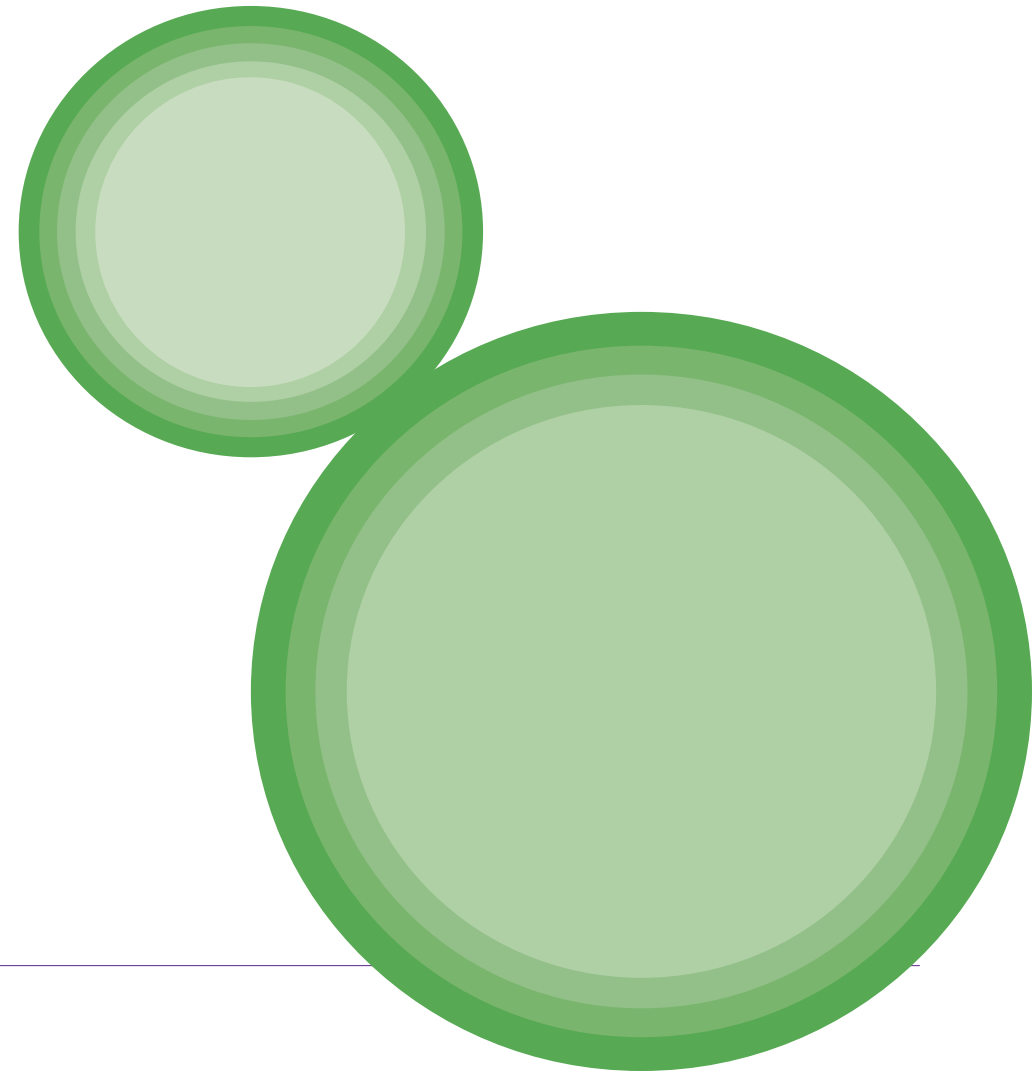
- Our recruitment - by including supportive video's particularly for mental health where recruitment was most challenging. The videos featured an expert by experience talking about her experience of our services alongside a social worker.
- Links with migration services - to recruit from those moving to Coventry from new communities.
- The Implementation of 'stay interviews' - so we understand what makes people stay working for Coventry rather than just why people leave.
- Undertaking council wide focus groups with employees from visible ethnic minorities - to understand and improve, where required, on their experiences as employees working for the city council.

### Our reviewing approach

As well as providing an essential check as to whether someone's care and support needs are being appropriately met our approach to undertaking reviews has evolved to also be an opportunity for change in how we promote choice, control and independence in the way we deliver our services.

Improvements include:

- Revising our processes to maximise reviewing opportunities.
- A core group has been established to build on the choice and control offer.
- Using feedback from reviews to identify market gaps to inform commissioning arrangements.



### The voice of the resident

The more we understand the experience of the diversity of residents who seek support from Adult Social Care the better able we are to develop our services and approaches and our workforce development.

Improvements include:

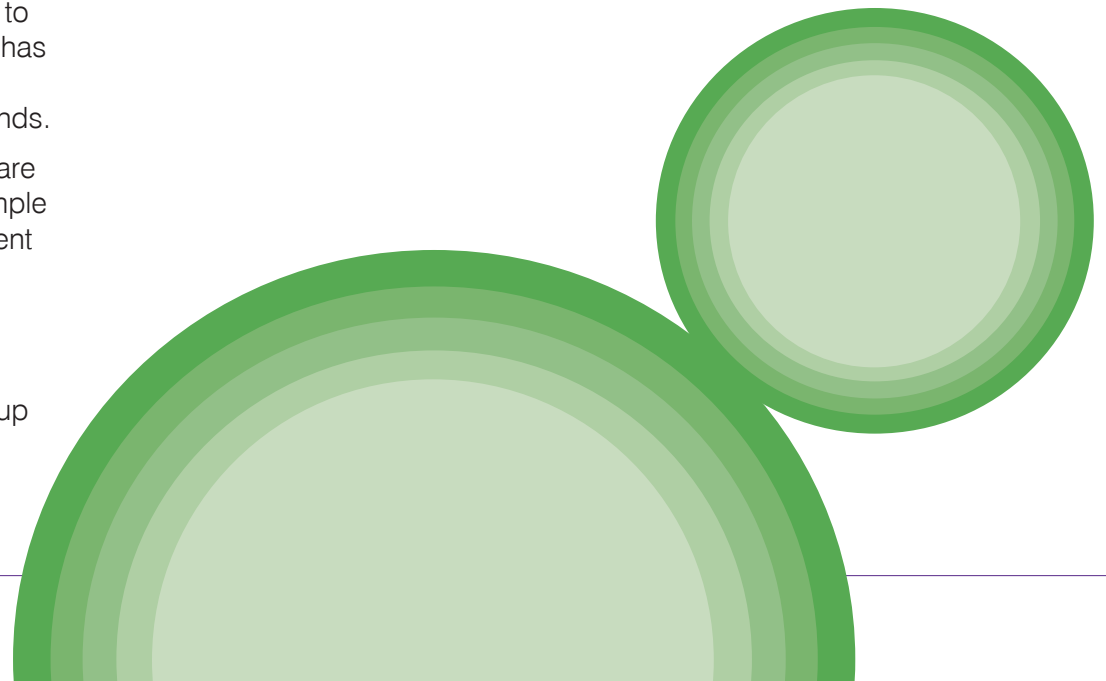
- Holding community engagement events, which started at the end of 2022, and have now become a mainstream part of how we engage (specifically within neighbourhoods and communities whose voices are seldom heard, for example connecting with Faith Forums).
- Using our real time customer survey to help us gather feedback on people's experience.
- Establishing closer working relations with the Council's Migration Team leading to specific posts being created to support those experiencing mental illness.
- Developing information materials to include a wider range of the main languages spoken in Coventry.
- Developing a "We asked, you said and we did" page on our web site to share examples of our responses to feedback - an example of which has been sharing feedback with providers of care to ensure their staff are trained in meal preparation for people from varying cultural backgrounds.
- Contacting those people who subscribe to our regular Adult Social Care news bulletin and ask if they would like to be more involved. For example in the development and commissioning of services, policy development and our information and advice offer.
- Increasing the frequency of experts by experience being present on recruitment panels and in selection processes.
- Increasing the membership of our Adult Social Care Stakeholder Group to improve the range of voices heard in this group.

### Developing the social care market

Improving the range and quality within the social care market is an ongoing programme of work to ensure our support offer meets the needs of an increasingly diverse community, as well as the requirement to offer choice, in how care and support requirements are met.

Improvements include:

- Establishing a "creative options" panel of practitioners to enable consideration of alternatives to traditional methods of care at the point of support planning.
- Creating partnerships with local Voluntary and Community Sector Groups to support those people who come to us with needs that do not meet Care Act eligibility criteria to help with the delay and prevention of decline and need.
- Exploring ways to increase the use of Direct Payments to enable greater independence e.g. improving our information and advice offer and ensuring staff are fully trained and confident in the use of Direct Payments.



### **Our use of technology in the delivery of care and support**

We are supporting the adoption of Integrated Care Records, digital social care records and are exploring and implementing innovative ways to support falls prevention within care home settings.

Improvements include:

- Secured funding through the Digital Transformation Fund via NHS England (NHSE) and employed a Digital Transformation Officer to work towards ensuring 80% of the Adult Social Care provider market implement Digital Social Care records by 2025. Year one and two targets have been reached with a plan to move into year 3 during 2024/25.
- Secured £169,000 over 2023/24 – 24/25 from Department for Science, Innovation and Technology (DSIT) by working with WM5G to support, identify, design and deliver real-world technology solutions and change management that deliver transformative benefits with a viable return on investment (ROI). The focus for Coventry will be on sourcing digital solutions to support Adult Social Care delivery and efficiencies.
- Implemented Integrated Care Records for Adult Social Care, working as part of the Integrated Care System (ICS) to deliver better outcomes for individuals, minimising the number of times people need to reshare their information and enabling professionals to work in a more integrated way.
- Created an Adult Social Care choice and control working group to offer the time and space to share learning and opportunities across the city to support people in alternative ways, for example through the use of funded technology and networks to enable people with mental health challenges to stay connected with their community and to access on-line support tools.

