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Dear Member

**SCRUTINY ADVISORY BOARD – ADULTS TUESDAY 25 JANUARY 2022**

Further to the agenda for the above meeting, please find attached presentations for Agenda Item No 6 – Adult Social Care Strategic Position and Item No 8 – Local Government Reorganisation and Item 9 Safeguarding Adults At Risk From Abuse and Neglect.

Yours sincerely

*A Farrar*

A Farrar  
Democratic Services Officer

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Cumbria County Council

**ASC Update**  
**24<sup>th</sup> June 2022**

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# Current Position

- Cumbria experience reflective of national picture
- Consistently higher demand than pre pandemic
- Recruitment and retention challenges
- Fragile social care sector
- Volatile fast moving environment - covid surges
- ✦ Staff wellbeing - increasing level of stress related absences

# Adult Social Care Current Position

	Q4	Q3
Contacts	1,300	1059
Assessed and waiting start of package of Care at Home	399	328
Home Care Hours needed	3946	3558
Safeguarding	38% increase in referrals since this time last year. 140 contacts, 577 open cases w/c 6.6.22	
Hospital (No medical criteria to reside)	10.6.22 - 227 people awaiting appropriate support/service to facilitate discharge from hospital (166 in N.Cumbria, 61 in S.Cumbria)	

# System Coordination

- Strong strategic engagement and partnership working countywide
- Good representation at strategic and operational system board and meetings
- Robust processes in place to mitigate risks associated with unmet need
- North and South reset sessions – agreed short, medium and long term priorities & plans

# Residential Care

Establishment	COVID adjusted beds (Registered beds)	Average Occupancy of COVID adjusted beds	Number of beds out of commission (average May)	Average occupancy of available beds
Applethwaite Green	25 (27)	45%	12	85%
Bridge House	37 (37)	55%	13	85%
Burnrigg Court	59 (60)	75%	14	98%
Christian Head	25 (28)	56%	11	98%
Croftside	32 (33)	68%	9	95%
Elmhurst	38 (40)	76%	9	100%
Eskdale House	Refurbishment program			
Grisedale Croft	10 (13)	60%	3	80%
Inglewood	38 (40)	76%	9	100%
Lapstone House	23 (23)	78%	5	100%
Maudes Meadow	Temp dormant			
Moot Lodge	19 (19)	89%	1	94%
Park Lodge	14 (15)	68%	0	68%
Parkside	Refurbishment program			
Parkview Gardens	58 (60)	69%	18	100%
Richmond Park	28 (29)	70%	9	100%
Riverside House	30 (32)	93%	2	100%
The Gables	57 (60)	67%	9	79%
<b>Totals</b>	<b>493 (516)</b>	<b>70%</b>	<b>122</b>	<b>93%</b>

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# Support at Home Services Cumbria Care

- Service performance is starting to return to a pre pandemic level

∞

Outcomes (completed cases)	Measure following Reablement intervention	South			West			East			Cumbria		
		2019-2020	2020-2021	2021-2022	2019-2020	2020-2021	2021-2022	2019-2020	2020-2021	2021-2022	2019-2020	2020-2021	2021-2022
	No. No further care needs	688	525	384	558	354	449	329	190	290	1575	1069	1123
	No. Care needs reduced	242	237	163	80	116	79	121	166	104	443	519	346
	No. Care needs remained the same	61	143	95	54	53	69	80	99	101	195	295	265
	No. Care needs increased	5	15	11	19	1	13	14	23	15	38	39	39
	Total No. Completed	996	920	653	711	524	610	544	478	510	2251	1922	1773
	% cases no further care needs	70%	57%	59%	78%	68%	74%	60%	40%	57%	70%	56%	63%



# Day Services CC

## **Post Lockdown**

Easing out of the Covid-19 restrictions resulting in more incidents/outbreaks in services.

Day Services staff still supporting Supported Living services which has an impact on staffing levels in day services.

## **Resuming Services**

Services struggling to reach pre-pandemic capacity levels. The South East has experienced more pressures due to more staffing placed in supported living than other areas and the refurbishment of the day centre building

In the north a landlord gave notice on a building we are trying to secure a lease for a different location

Some people choosing not to return to Day Services.

## **Opportunity to re-model**

Opportunity to re-model. We are learning from Covid-19 and model future practice and community opportunity offer as other Local Authorities. E.g. Further develop virtual and digital offer.

# Day Services – Independent Sector

- **Day Opportunities** many people have not yet returned to all the activities they enjoyed before the pandemic as COVID 19 guidance recommends that there should be a limit on group size based on the room/building size, layout and ventilation
- **Staff** – recruitment and retention challenges impacting on capacity.
- **Transport:** Availability of suitable vehicles & drivers/escorts to support people to access day opportunities on the days/times requested.
- **Providers** The combination of challenges currently being faced by providers is having a significant financial impact for some with risks around viability.

# Commissioning Update – Independent Sector

## Homecare Services

- Unmet Demand for Independent Homecare Services - 3,818 weekly hours (350 people).
- Current level of delivery stable around - 20,400 weekly hours (1,860 Service Agreements)
- 42 contracted providers are registered on the Homecare Framework, but only 28 have picked up new homecare packages of care in the last 3 months

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## Residential & Nursing Services

- 15.6.22 - Number of Care Homes in an Active Outbreak has reduced to 6 homes.
- Currently 238 vacancies recorded across the county, primarily in the North (178), compared with the South (60)

# Commissioning Update – Market Challenges

- **Care Staff Employed** continues to decline - number employed in Care Homes decreased from 4,250 to 3,870 (reduction of 380) and Community decreased from 3,880 to 3,640 (reduction of 240).
- **Staff Recruitment and Retention** - Reducing capacity in the sector.
- **Overseas Recruitment** – limited success
- **Increased Travel/Fuel Costs** negatively impacting Providers and Care Staff.
- **Travel Support Grant Programme** established by Commissioners as temporary support to homecare providers to assist with increased travel costs.

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# Commissioning Update – Market Challenges

- The additional temporary **Financial Support** offered to Care Homes and Community Providers through the national support grants (such as the Infection Control & Testing Fund and Workforce Recruitment and Retention Fund) and the Council's Market Sustainability Grant Fund has now ended.
- ↪ • The cessation of additional national financial support available to the Council to support providers is now impacting on some providers ability to support care staff to meet the increased cost of living.
- Commissioners are working with providers and finance colleges to identify alternative short-term measures (such as the Travel Support Grant) to maintain service delivery.

## Commissioning Update – Fair Cost of Care (FCOC)

- All councils in England are required to complete a Fair Cost of Care (FCOC) exercise to gain an understanding with providers of the local cost of providing care as part of Market Sustainability and Fair Cost of Care Fund.
  - Cumbria County Council is currently working with authorities in the North East and North West of England to understand how best to comply with completing this exercise, and to identify a Fair Cost of Care (FCOC) for 65+ Care Homes and 18+ Domiciliary Care.
- 14
- The council will be looking at using both the Care Home Cost of Care Tools commissioned by the Local Government Association (LGA)
  - The council will then be required to publish a Market Sustainability Plan in October detailing how they plan on working towards the Fair Cost of Care (where this is not already being paid) over the next 3 years.

## Social Care and NHS plans

- Winter 2021/22 plans ceased
- Winter planning 22/23 underway
- ASC Promoting Independence Programme Relunched – oversight at Executive Director level with Assistant Director Leads for each workstream.
- North and South social care and NHS reset sessions held – actions built into Promoting Independence Programme
- The ASC Winter Plan replaced with Promoting Independence Programme to provide ongoing strategic direction and leadership for Adults for the next 12 months in delivering the joint work with health partners

# ASC into Promoting Independence

## Managing Demand

- Development of models to support D2A and admission avoidance
  - ToC
  - 2 Hour Crisis Response
  - True D2A model
- Re-ablement Capacity
- Identify Gaps and barriers
- Alternatives to Regulated Care
- Direct Payments – continuation of Hospital Discharge Grant & review of longer term care policy
- Quality and Improvement Framework – CQC
- MH Community Transformation
- Learning Disability Transitions

## Workforce

- Workforce strategy for social care to retain/attract/develop social care workforce
- Joint working with health system to identify shared workforce actions/strategy
- Proud To Care Campaign
- Workforce Benefits – wider benefits for SC workforce
- Streamlined recruitment – CC pilot learning across Adults
- Social Care Workforce – continue to progress area groups and links to DWP
- Mobilisation of non SC workforce – CCC volunteers
- Overseas Recruitment for hard to recruit posts

## Market Sustainability

- Winter Sustainability Funding & Impact of Uplifts for 22/23
- Provider Stability and hand back of packages
- GDC Review – review of GDC packages to free up social care capacity
- Improve use of AT to support delivery of care packages
- Demand modelling for community care
- Identification of gaps in commissioned services and alternatives for regulated care



# Thank You

# Questions

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Scrutiny  
Advisory  
Board -  
Adults

LGR Update



**Keith Cheesman**, LGR Strategic Lead, Adults  
**Catherine Whalley**, Assistant Director, Adults

Developing two unitary authorities for Cumbria - putting **Adults** at the heart of everything we do

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## Adults

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- Summary of scope
- Programme shape
- Workplan
- Disaggregation
- Opportunities
- Key challenges

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**Keith Cheesman**, LGR Strategic Lead, Adults  
**Catherine Whalley**, Assistant Director, Adults (Deputy DASS)

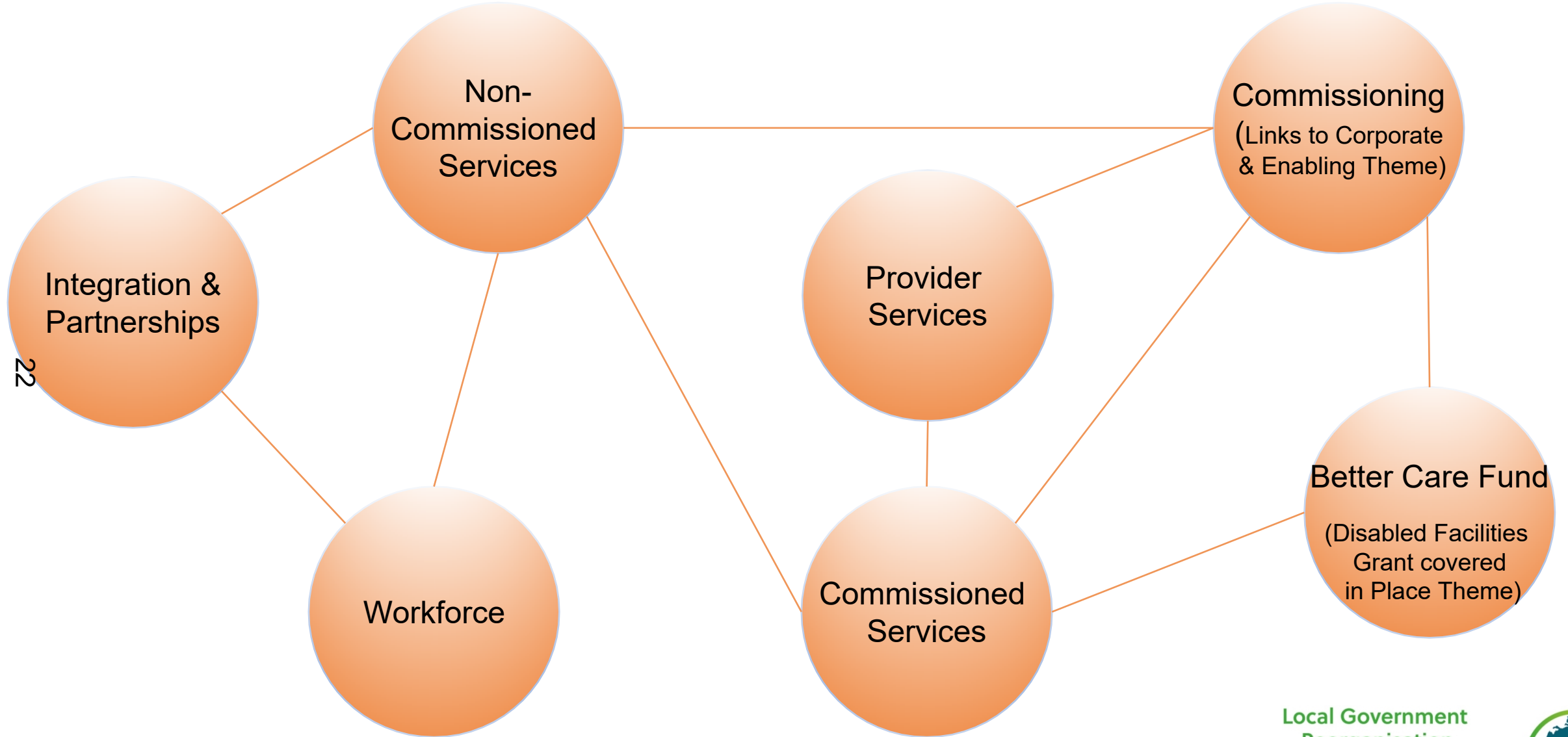


# What's in Scope



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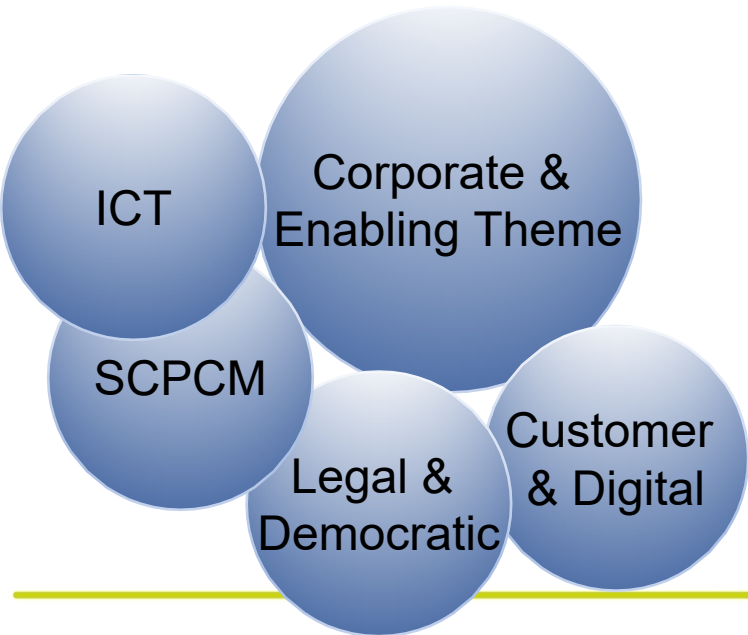
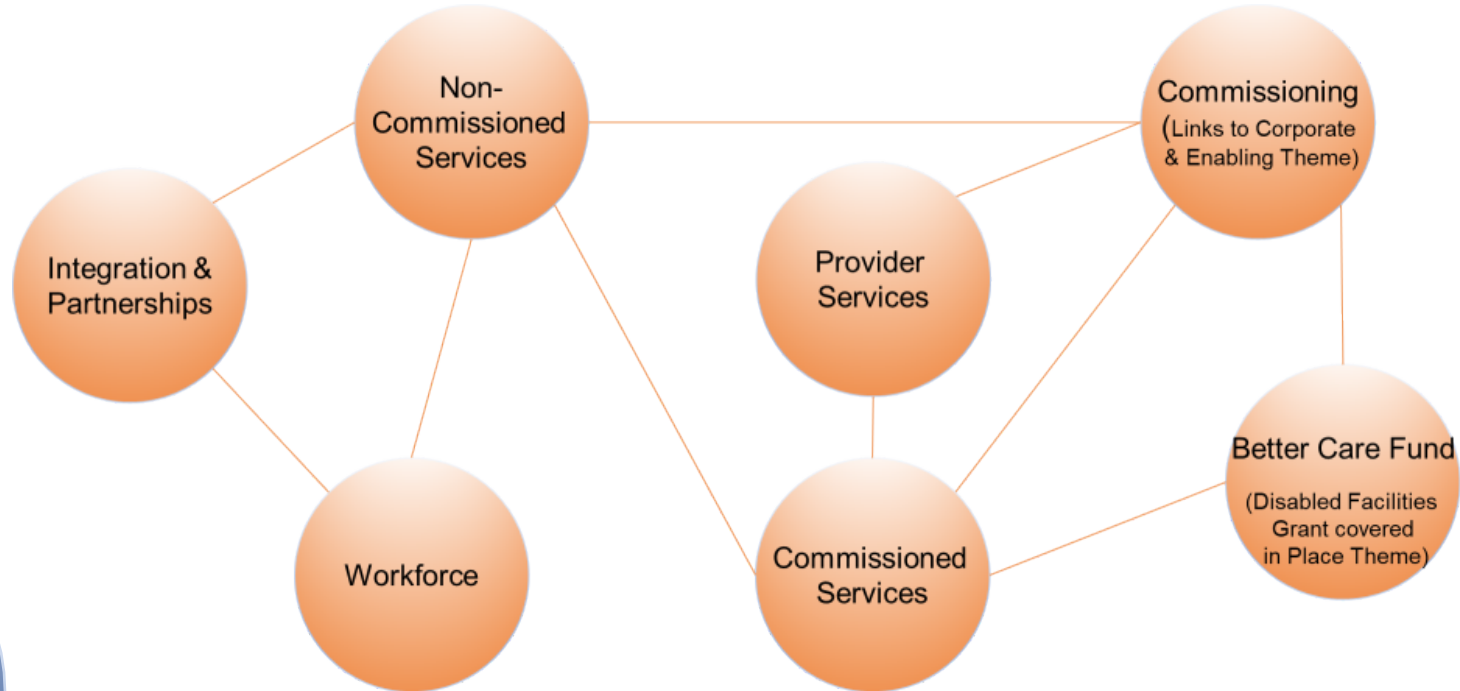
# Adults Programme Breakdown



# Adults Programme Breakdown – LGR Programme Interfaces

Finance and Commercial Theme

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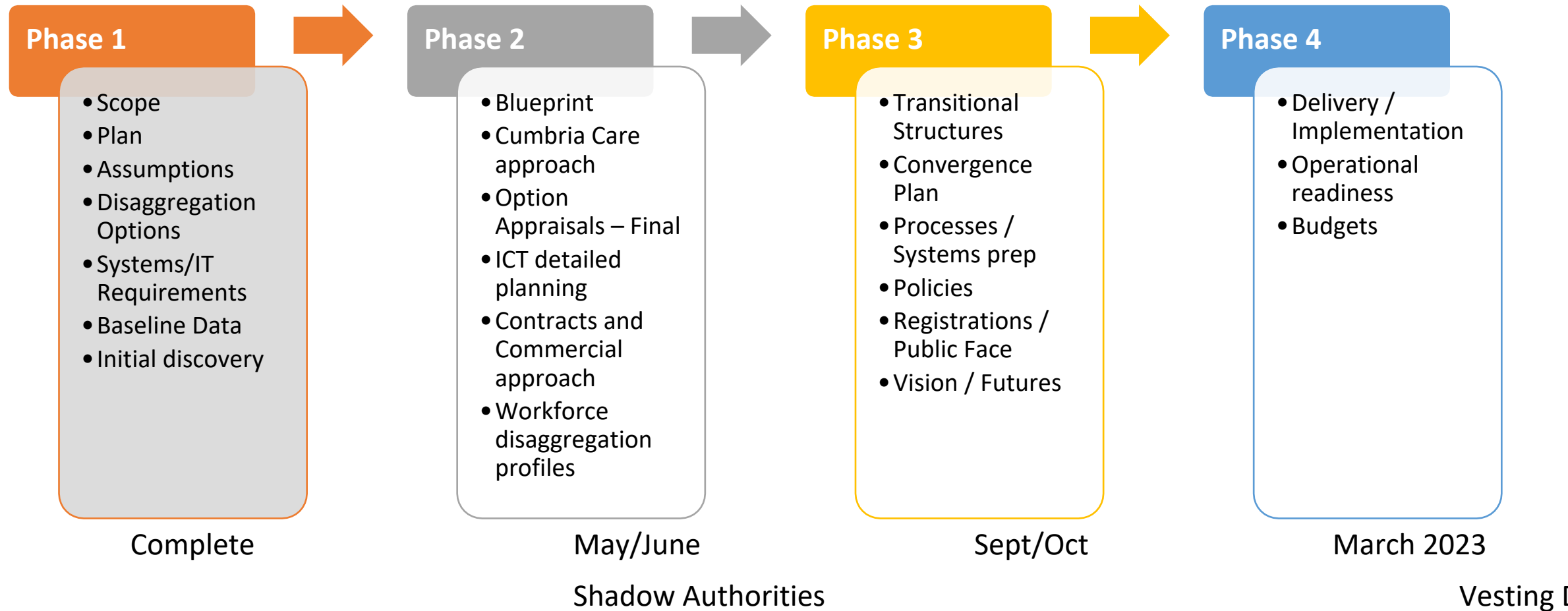


Workforce Theme



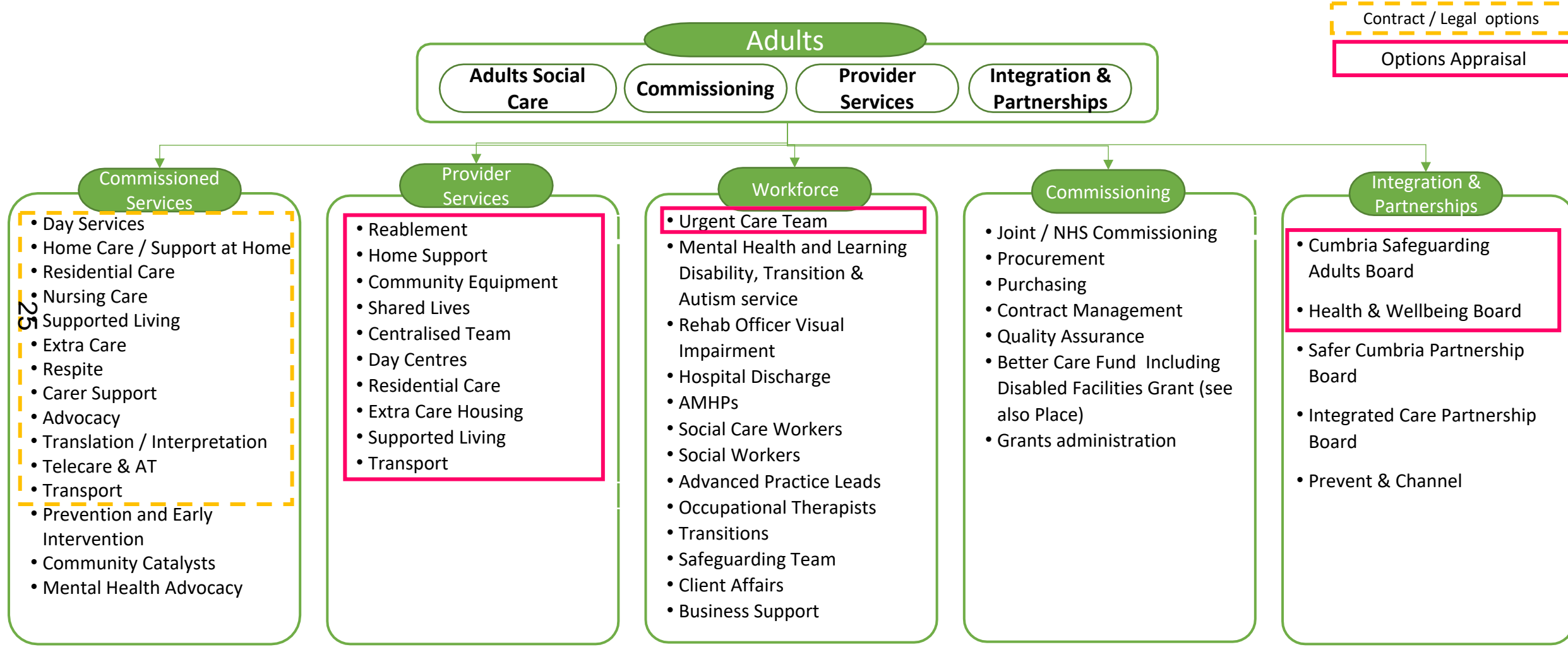
# Timeline

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# Disaggregation Options - Adult's Services



# Adults - Opportunities

## **Flexibility and Effectiveness:**

- Early intervention and prevention service planning
- Increased economies of scale, particularly for small teams coming together

## **Workforce:**

- Skills mix and workforce development, adaptability and flexibility
- Rightsizing and developing the workforce

## **Simplification:**

- Public understanding, 'Front Door'
- 26 • Customer at the heart
- Chance to reset and develop services further

## **Housing:**

- Stronger connection between housing strategy, policy and planning for accommodation, particularly Extra Care / Supported Housing / Supported Living

## **Health System:**

- Different approach to 'wrap around' the hospitals / health systems locally



# Key challenges and priorities - next few months

1. Working across Health and Social Care system to lead and implement change
2. Funding reforms and new burdens
3. Market sustainability and smooth transition
4. Workforce recruitment, retention and transition
5. Managing increasing demand across system whilst leading change
6. Liberty Protection Safeguards and Inspection Framework in parallel
7. Living With Covid-19

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# Safeguarding Referrals – Q4 – 21/22



<b>SCRUTINY ADVISORY BOARD – ADULTS</b>
<b>Meeting date: 24<sup>th</sup> June 2022</b>
<b>From: Sarah Joyce Service Manager Safeguarding Adults</b>
<b>And Bethan Hill- Gorst</b>

## **SAFEGUARDING ADULTS AT RISK OF ABUSE AND NEGLECT**

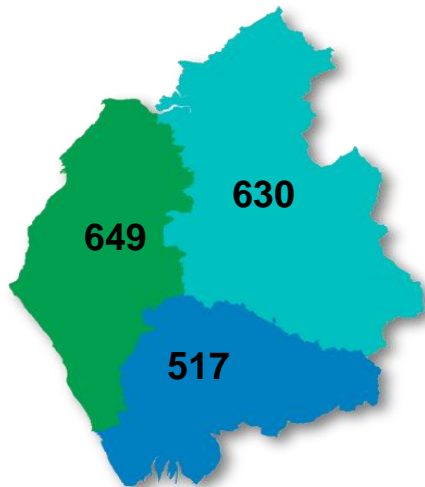
### **1.0 PURPOSE OF REPORT**

- To provide an update and analysis of adult safeguarding activity for the Quarter 4 2021/2022.
- To brief Members on progress against the key areas of performance relating to Making Safeguarding Personal.
- To describe the actions planned to strengthen and consolidate improvements in Adult Safeguarding in Cumbria through Cumbria Safeguarding Adults Board.
- The report is intended to be in an accessible format allowing an overview of the Safeguarding pathway in Cumbria.

Sarah Joyce

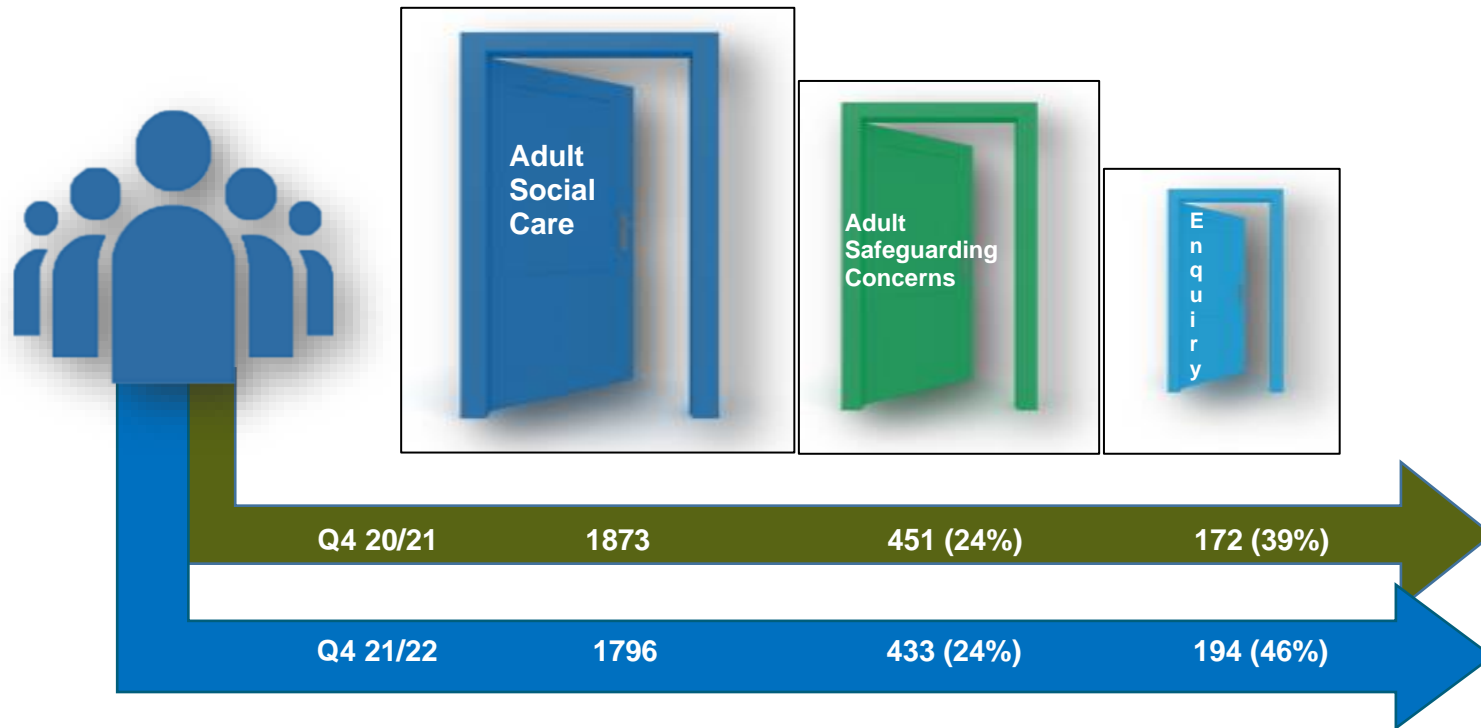
Service Manager | Safeguarding Adults |

[sarah.joyce@cumbria.gov.uk](mailto:sarah.joyce@cumbria.gov.uk)



Referrals by Location

District	Number of Concerns
Allerdale	456
Carlisle	441
Copeland	236
Eden	151
South Lakeland	298
Barrow-in-Furness	214
Total Referrals	1796



## SECTION ONE: Referrals

Fig 1 illustrates the Location of Safeguarding Adults referrals within Q4 2021.

- Requested breakdown of individual district referrals.
- Under LGR the referrals volume split would be approximately – Cumberland at 1133 (63%) and Westmorland and Furness at 663 (37%).

Fig 2 illustrates the triage process for Safeguarding Adults referrals.

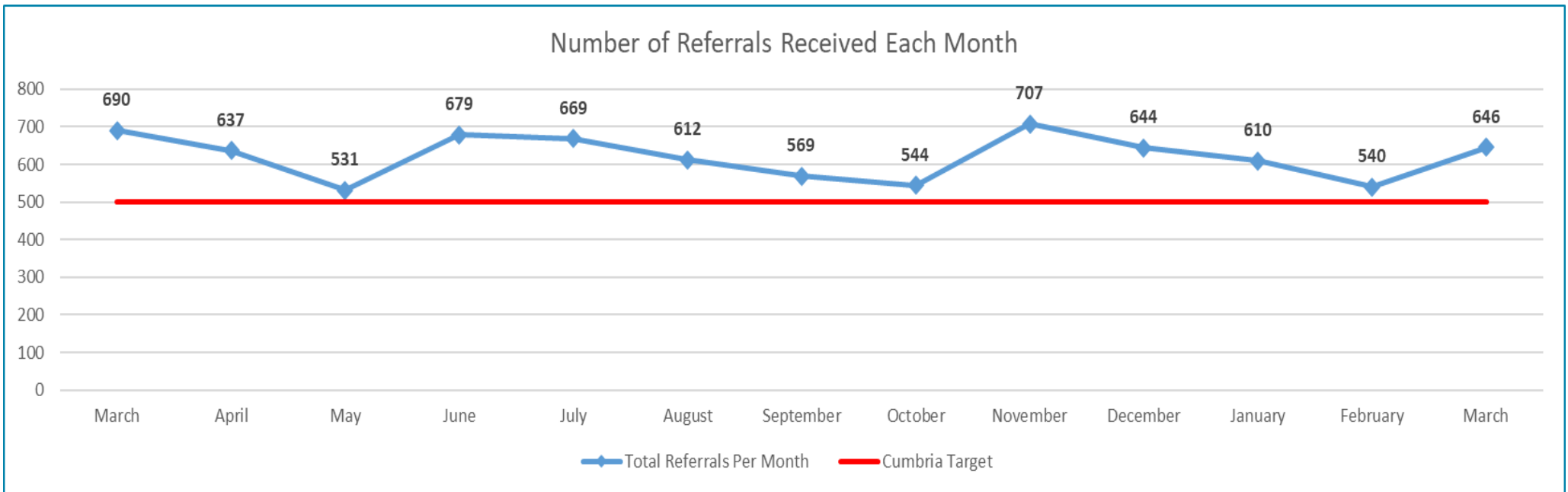
- Whilst the quarterly total of contacts received is 77 less than the comparable period last year. The total contacts received in the 2/22 period is in fact 17% greater at (7375) than 20/20 and 35% greater than that of 19/20.

Progression rates have increased from 41% in Q3 to Q4 46% - see also 3-year comparison to show increase.

Fig 3 below illustrates the overall increase in monthly referrals.

- The indicative base line figure of 500 referrals per month provides a basic reference point for the volume of referrals. This figure continues to be exceeded and demonstrates the increased number of referrals from across the system and since November 2021 has averaged at around 630 per month.

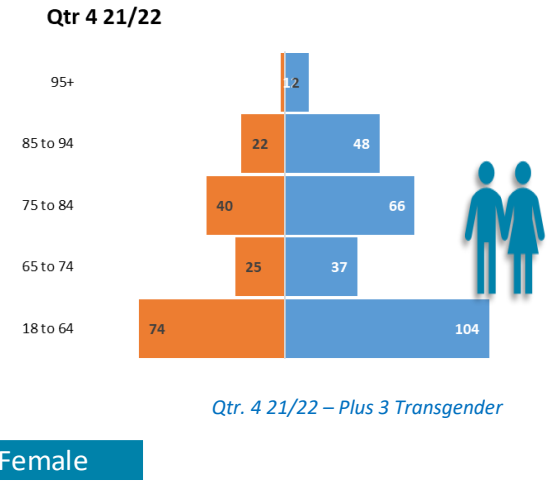
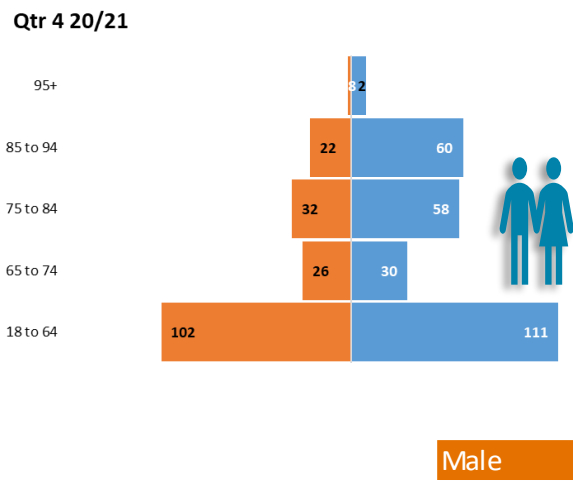
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Average Open Active Cases Qtr. 4 20/21	Average Open Active Cases Qtr. 4 21/22
259	395

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Qtr. 4 21/22 – Plus 3 Transgender

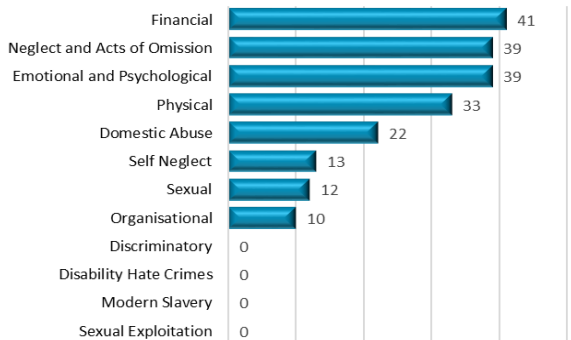
Age and Gender Comparison

SECTION TWO: Benchmarking

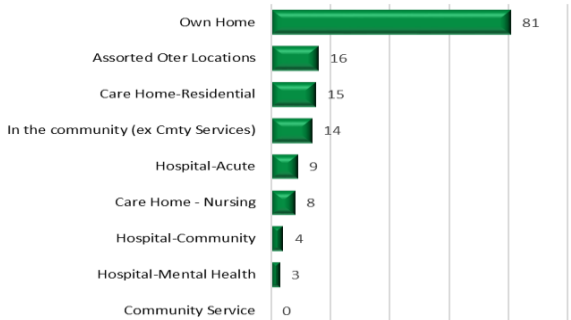
- Interesting (although low) that the % is broadly similar for the same period. It would suggest despite the increased volume the teams have been working consistently.
- The team continue to focus on responding to referrals which are prioritised as High risk and those which are Medium risk but with no immediate safety plan in place. High risk concerns are allocated within 24 hours in order for information gathering to commence immediately.
- The steady influx of referral rates seen in figure 3. have a direct correlation on the service's ability to meet the 48 hour response time target. We anticipate the necessity to review this 48 hour target which is not a national measure of performance.
- The rise in referrals has meant the number of open active enquiries has risen by 52% from the previous Q4 21/22 period reporting and an 8% increase on Q3 21/22.
- Females continue to represent an average of 61% of the persons at risk.



Types of Abuse



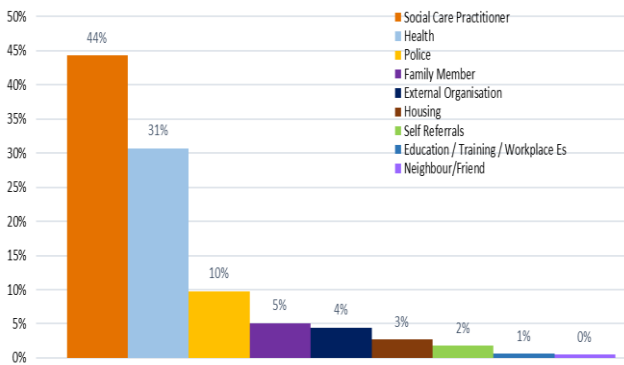
Location of Abuse



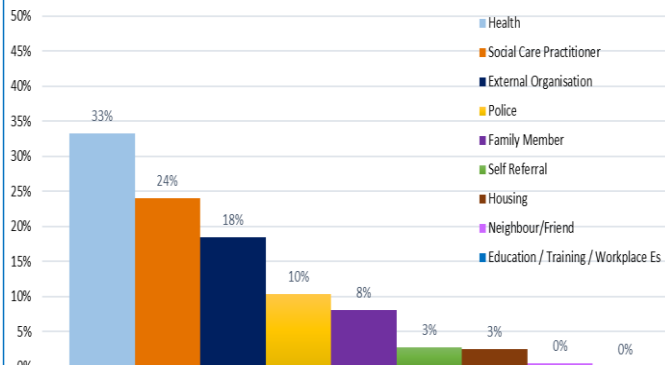
Types of Abuse	Qtr 4 20/21	Qtr 4 21/22
Financial	43	41
Neglect and Acts of Omission	52	39
Emotional and Psychological	53	39
Physical	50	33
Domestic Abuse	7	22
Self Neglect	15	13
Sexual	14	12
Organisational	5	10
Discriminatory	1	0
Disability Hate Crimes	0	0
Modern Slavery	0	0
Sexual Exploitation	0	0

Location of Abuse	Qtr 4 20/21	Qtr 4 21/22
Own Home	112	81
Assorted Oter Locations	3	16
Care Home-Residential	27	15
In the community (ex Cmty Services)	25	14
Hospital-Acute	11	9
Care Home - Nursing	6	8
Hospital-Community	0	4
Hospital-Mental Health	4	3
Community Service	0	0

Source: Qtr 4 20/21



Source: Qtr. 4 21/22



SECTION THREE – Concerns by Location/Type and Source of referrals.

Types of Abuse:

- Slight change in patterns of identified abuse.
- Of note, abuse type is open to some interpretation by the referrer e.g physical/emotional/domestic abuse and neglect act of omission/ organisational.
- Upon undertaking the enquiry work more than one abuse type may also become evident.
- Concerns of neglect and acts of omission continue to be the highest reported abuse type with emotional and psychological exceeding physical in 21/22. No significant change here.

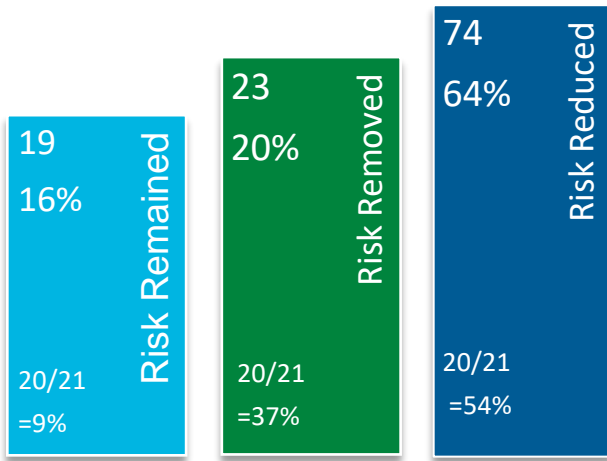
Location of Abuse:

- The Location of abuse is consistently a person's own home.

Source of Contacts:

- Matched graph colours between the two years, but see position swaps e.g. source Health and SW – what is of interest is the pickup of other sources so there is no steep drop off after second top source like last year.
- The lowest source of reporting continues to be from the community – neighbour/friend.
- Police referrals evidence a like for like pattern of reporting.
- The Multi-Agency Safeguarding Threshold tool continues to be an effective tool for internal and external partners to refer SA concerns and the tool has been promoted through National SA week and the CSAB bulletins. This is important to try to ensure we receive the right referrals.

## RISK MANAGEMENT

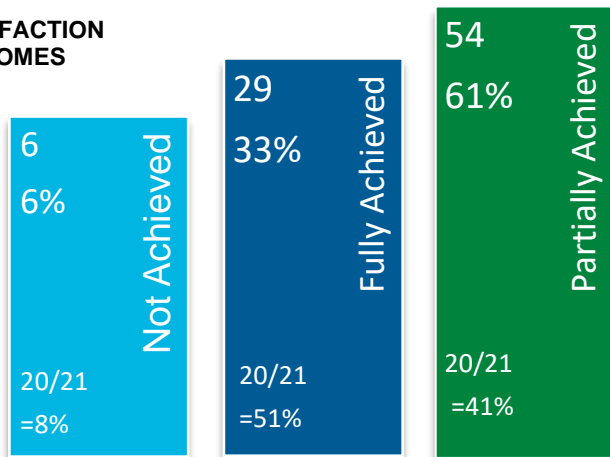


## MAKING SAFEGUARDING PERSONAL



% Asked  
 20/21 Q4 = 100%  
 21/22 Q4 = 100%  
 Cumbria is consistently the top outlier when comparing with the North West.

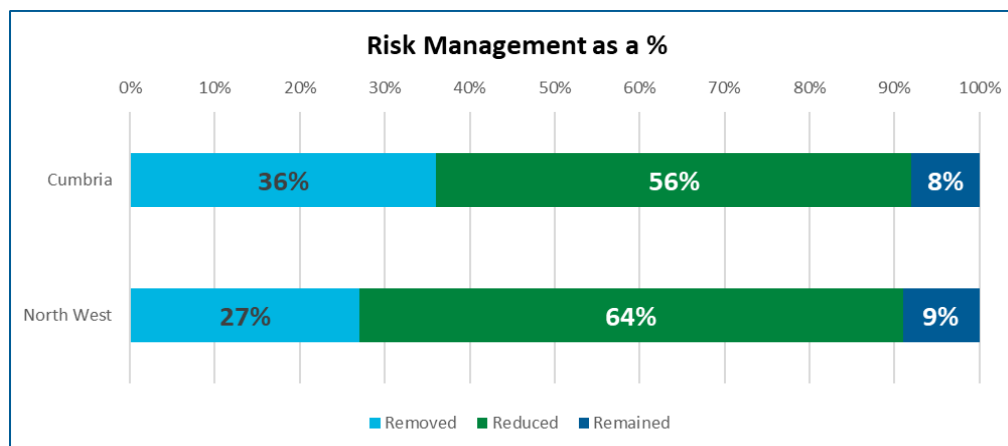
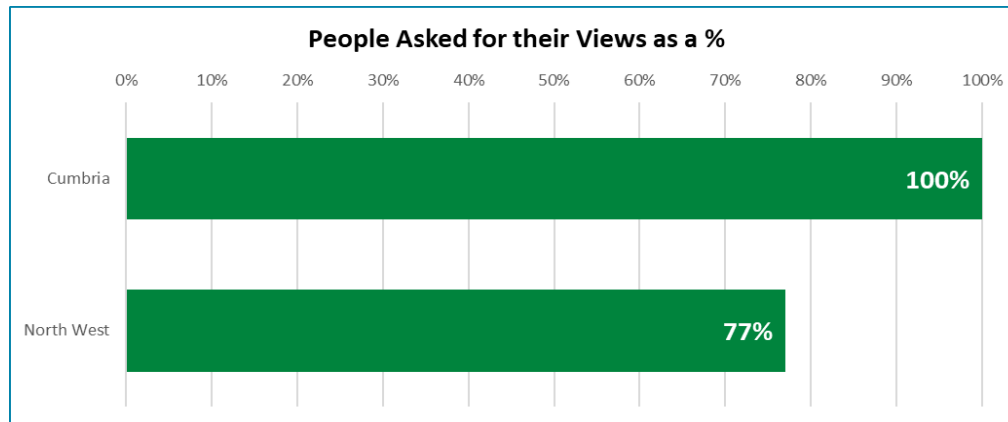
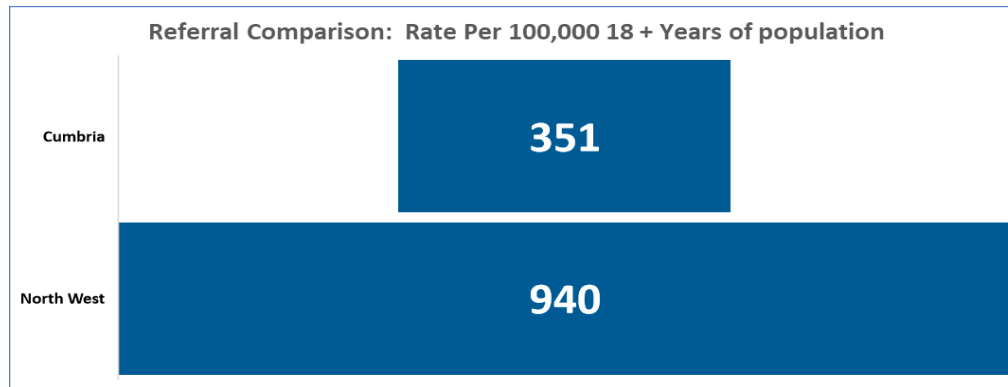
## SATISFACTION OUTCOMES



## SECTION 4: Impact and outcomes

- These proportions continue to evidence the work in removing and reducing risk. The comparison over three years demonstrates the average for these two elements remains at an average of 82% leaving an average of 8% where the risk has not been able to be removed or remains at the choice of the adult at risk.
- Removal of all risk is always desirable; however, this is not always achievable.
- Risk management will always be led by both the individuals' or their representatives' views and wishes and by the multi-agency Safeguarding Action Plan that seeks to remove those identified risks and mitigate.
- During Q4 100% of enquires saw the MSP questionnaire being completed, this is despite the increased referral pressures.
- Satisfaction – swap between fully and partially when comparing per quarter, however, 21/22 saw an increase to 95% in the fully or partially elements over the 87% of 20/21 and 19/20.
- We continue to see more enquires realising fully and partially achieved satisfaction outcomes from those persons affected by abuse or harm.

## Comparison with North West Performance Group (ADASS) to Quarter 3 21/22



### North West Comparators are available for Quarter 3 21/22.

*Quarter 4 21/22 are not available at the time of reporting.*

*This is last quarters results for your information.*

#### Referral Rates:

Our rate per 100,000 appears at roughly 33% to the overall rate for NWPL. The caveat to this data is that each local authority may have different pathways on how to respond and record each safeguarding referral. Within Cumbria we have an effective and consistent triage process which allows us to determine which referrals require a safeguarding response and which may actually require a different response such as additional community response. This reflects the safeguarding principals with the Care Act itself.

#### People Asked for the Views:

Our regional partners are now beginning to improve on their MSP. Cumbria's continues to show its effectiveness in ensuring the voice of the person is captured during the enquiry all enquires.

#### Risk Management:

Cumbria in comparison with the North West region is reporting a higher proportion of risk removed which is a strong position to hold.

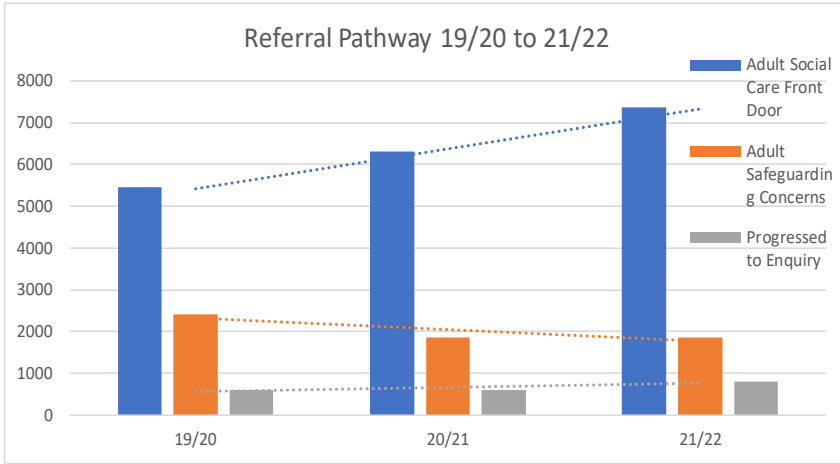
## Update from Cumbria Safeguarding Adults Board (CSAB) June 2022

### *Key highlights during the Quarter 4 period January – March 2022;*

- CSAB launched new [Complaints Policy](#) for the Safeguarding Adults Board.
- CSAB have introduced a new resource tool, A Quick Guide to... which is intended to support staff and practitioners. Following the introduction of the new tool CSAB have published [A Quick Guide to... Making a Safeguarding Referral](#). This was followed by [A Quick Guide to... Financial Abuse](#), further to an increase locally and nationally in financial abuse and scams.
- CSAB recruited a new Independent Chair for the Board, who is expected to start mid-June 2022.
- A Panel was convened for the Safeguarding Adult Review (SAR) [Pauline & George](#) which was recently published supported by a [Learning Briefing](#).
- The Communication & Engagement (C&E) sub-group launched a new animation, [Tricky Friends](#). The short, animated video is aimed at all individuals, groups and organisations who support people with learning disabilities and autism, to raise awareness of issues like **exploitation, county lines, cuckooing**. It will help people to understand what good friendships are, when they might be harmful, and what they can do.
- A Task & Finish Group was established by the SAB with the brief to develop a proposal which could support improving professional curiosity. A programme of activity will be delivered during 2022 in collaboration with Safer Cumbria and CSCP acknowledging this is a theme identified across all reviews.
- The Safeguarding Adults Board received a “story to the board” shared by a Safeguarding Team Manager, evidencing Making Safeguarding Personal and excellent multi-agency collaboration to support an individual at the end of their life.
- The Safeguarding Adult Review (SAR) sub-group received a SAR referral following a fire fatality which whilst it didn't meet the criteria for a s44 review identified actions for the partnership to increase awareness of the fire risks associated with the use of emollients. This included the publication of a [5-minute briefing](#) in collaboration with Cumbria Fire and Rescue Service.
- The Learning & Development (L&D) sub-group have developed an audit tool to seek assurance from the partnership in relation to organisational MCA policy, arrangements and training compliance.
- The Performance & Quality Assurance Group (P&QA) received a presentation from Cumbria Police in respect of the Mental Health Street Triage Pilot and the positive impact the multi-agency approach is having for those adults in mental health crisis and also the multi-agency services involved.
- The P&QA sub-group received a comprehensive assurance report from HMP Haverigg regarding internal safeguarding reporting arrangements for prisoners including those with care and support needs.
- CSAB received the final report and recommendations following an independent Peer Review of the Board structures, systems and processes. This will inform future direction, strategic planning and continuous improvement of the SAB.
- CSAB continue to receive update and assurance in respect of the system pressures, risk mitigation and safeguarding arrangements alongside the system wide changes concerned with ICS and LGR.
- In line with the role and function of the SAB to seek assurance the Board received assurance from;
  - ✓ Recovery Steps Cumbria in relation to new structures and safeguarding
  - ✓ University Hospitals of Morecambe Bay Trust following CQC inspection
  - ✓ Commissioners following the publication of NICE guideline; Safeguarding in Care Homes
- North and South Cumbria Clinical Commissioning Groups presented highlights from their 2020/21 LeDeR Annual Reports to the SAB following reviews concerning the death of individuals with a learning disability in Cumbria.

# Cumbria Adult Safeguarding: Comparison Over Three Years:

April 2019 to March 2022

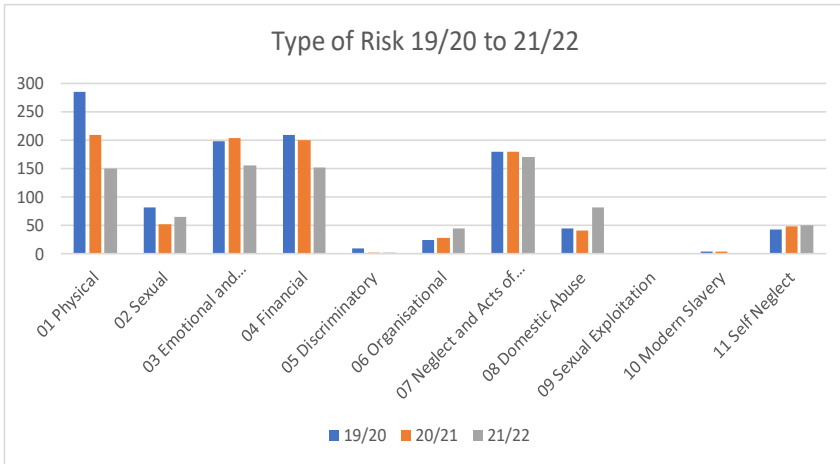


The referral pathway shows an ongoing increase in the number of contacts raised where the reason was thought to be Adult Safeguarding.

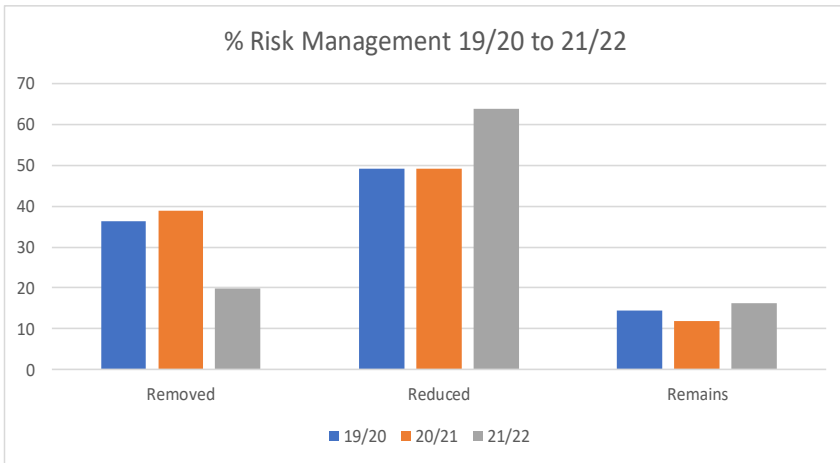
The effect of the triage team is seen as the number of contacts passed to safeguarding is dropping, and of those received in the period a greater amount progress to enquiry.

Below show patterns of change over the last three years.

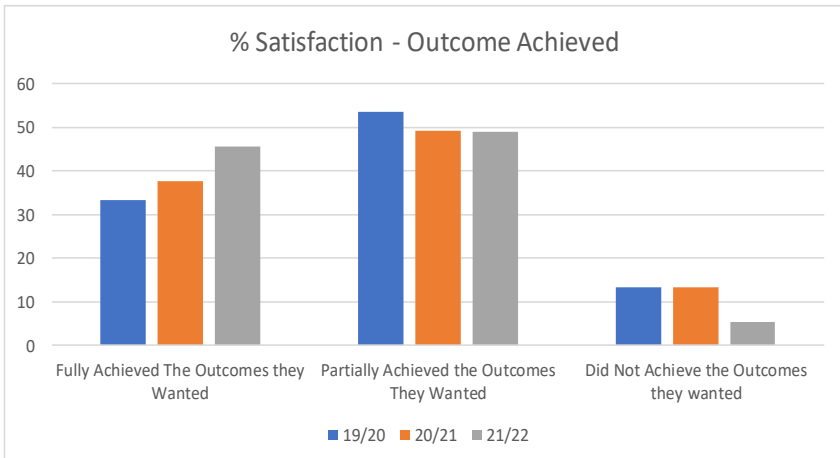
Type of Risk



Risk Management



And MSP Satisfaction levels



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