

29 January 2020

ITEM: 17

Council

Report of the Cabinet Member for Children’s and Adult Social Care

Report of: Councillor Sue Little, Cabinet Member for Children’s and Adult Social Care

This report is public

1. Introduction

I am honoured to deliver my fourth Cabinet Member report to Council as Portfolio Holder for Children’s and Adult Social Care. The report gives me the opportunity to reflect on what both my departments have achieved over the last year and detail the future of the services.

I am very proud of the progress we have made over the last year with an Ofsted Inspection rating of GOOD being achieved by Children’s Social Care and impressive progress continuing to be made on Adult Social Care Transformation.

I would like to thank both Director’s past and present and the staff across my senior officer team and all staff for their fantastic commitment to improving services for the people of Thurrock.

2. Children’s Social Care

I have been the Portfolio Holder for Children’s Social Care since May 2016, I inherited a service that had been judged by Ofsted to be ‘Requiring Improvement’.

As a member of the Fostering and Adoption Panel I understand the strengths and vulnerabilities of the service well and I am totally committed to ensuring that we deliver the best possible services to vulnerable children and their families. I attend the children’s social care development board on a monthly basis, something I championed as best practice, which ensures that I provide both challenge and support to the service, which helps to ensure best possible outcomes for vulnerable children. I have every confidence that my officers have the commitment and drive to continue to move the service in the right direction.

This confidence has been vindicated in the very recent Ofsted full inspection of children’s social care services during the weeks 11–22 November 2019. The external independent regulator, Ofsted, gave the service a resounding GOOD across all four judgement categories – a copy of the Ofsted report is included as an appendix to this report. This is particularly pleasing given the negative publicity the service and individual Officers have endured over the last 2 years. This adverse and

negative reporting of the service has not been supported by the independent regulator, Ofsted who have described:

‘Effective and stable senior leadership has led to considerable improvement in the quality and impact of social work practice for children in need of help and protection, those in care and care leavers since the Ofsted 2016 single inspection.’

‘The assistant director and the recently retired director of children’s services have shown remarkably strong leadership in, addressing considerable deficits in practice reported at the last inspection. Together with the unstinting support of the current Interim DCS, the Chief Executive, elected members and strategic leads, they have created a culture of high expectation, support and challenge. Listening to children and acting on their views are practices that are becoming strongly embedded in practice.’

Since I became Portfolio Holder in May 2016 I have achieved the following:

- An improved Ofsted judgement for children’s social care from Requires Improvement to Good
- Increased the number of permanent social workers and reduced the use of agency social workers;
- Increased the number of in-house foster carers and enabled more Thurrock children to be placed with Thurrock carers;
- Joined the Eastern Region Adoption Alliance to ensure pooling of resources and increasing the number of adopters available for Thurrock children;
- reduced the number of unaccompanied asylum seeking children from a high of 103 down to 25 and
- Safely reduced the number of children in care and the number of children with a child protection plan; improved educational outcomes for looked after children.
- Paragraph 27 of the Children’s Social Care Ofsted report acknowledges the fact that 26 looked after children are currently studying at University.

3. Context

The Children & Social Work Bill (2016), published in May 2016, provided a wide-ranging and significant change in legislation for the social work profession. The Bill covers the care system, adoption, corporate parenting and rights of care leavers.

In addition, it includes the introduction of a Child Safeguarding Practice Review Panel; significant changes to social worker accreditation, regulation, registration, and training; as well as publication and sharing of information, and a duty for agencies to co-operate when children are at risk of harm.

There is clear evidence nationally that the demand for children’s social care services continues to rise, with domestic abuse, parental mental ill health and substance misuse being key drivers behind the rise in the number of children with a child protection plan and children in care.

Thurrock continues to have high rates of children being supported by social care but numbers have dropped in the past year to bring us more into line with our statistical neighbours. We have seen a decrease in the number of contacts and referrals, and the number of children in care has reduced from a high of 353 in 2016 to the current number of 287. The number of children with a child protection plan has reduced from 293 to 164, as a less punitive and more strengths based approach has been adopted by the department and its partners. Further work will be undertaken by officers with partners to further safely reduce the number of children with a child protection plan and the number of children in care.

Ofsted reflected that:

'Appropriate action is taken to safeguard and protect children who are at immediate risk of significant harm.' *'Assiduous management reviews and close monitoring of children's cases where child protection plans have been in place for more than a year have resulted in the number of plans appropriately reducing.'*

For looked after children, Ofsted said:

'Children and young people benefit from help and support provided by dedicated, ambitious and determined professionals who work well together, helping children to remain safe and achieve well in life.'

Most importantly Ofsted reflected that;

'The local authority is a highly ambitious corporate parent. There is a palpable sense that staff across all directorates want to do the right thing.' Also that *'Elected members are ambitious for children and young people in their care and have ensured that their vision for outstanding quality services is underpinned by appropriate financial resources.'*

4. Service Developments

Unaccompanied Asylum Seeking Children

The last 3 years has seen an unprecedented rise in the number of refugee children arriving in Thurrock and entering care.

Young people generally enter the UK via the ports at Purfleet and Tilbury. As they present themselves in Thurrock they automatically become the responsibility of the authority. The Home Office has sent out guidance suggesting that local authorities should be able to accept a number of refugee's equivalent to 0.07% of their overall child population. In Thurrock's case, this should be 28 children. In 2016 resources were being stretched to the limit supporting over 100 children which is over 3 times the threshold.

So it is positive to note that tremendous progress has been made in reducing the number of unaccompanied asylum seeking children looked after by the council. Under my direction and leadership, officers have worked with colleagues in the

Eastern Region authorities to establish a transfer protocol so that the financial burden of looking after refugee children would be shared equally across all authorities in the region. As a result at the time of writing this report there were only 25 Unaccompanied Asylum Seeking Children in our care with numbers continuing to fall month by month. Down from 35 in my last report.

5. The Social Care Workforce

One of the key areas of concern from our 2016 Ofsted Inspection was the instability of the social care workforce. The high number of agency social work staff was also contributing to an unacceptably high overspend in Children's Services.

I am delighted to report that we have made great progress in recruiting more permanent social workers while at the same time reducing the rate we pay the remaining agency staff. In July 2016 we employed 70 agency staff with 56 paid over the Memorandum of Cooperation rate. Today we have employed 39 agency social workers and only 2 are paid over the Memorandum of Cooperation rate. This is positive news for both Thurrock and the region as a whole, as together we have been able to reduce spending on high cost agency social workers.

Ofsted in the recent inspection commented;

'Successful workforce planning and staff development in Thurrock have increased the number of frontline practitioners supporting children. This has increased capacity to sustain a good-quality service and is a substantial improvement since the last inspection.' *'Newly qualified social workers receive exceptional support. A strong emphasis on developing and nurturing all staff encourages more to remain the authority. A diverse workforce of practitioners and managers who reflect the community is a real strength, leading to better engagement by young people and their parents.'*

Ofsted also reported that;

'Staff consistently feel well supported in their work and their professional development by highly visible, approachable and involved managers at every level. Senior leaders take the time and trouble to nurture talent. There is a tangible culture of professional accountability and respectful challenge devoid of blame across teams. Morale is good. Supervision is frequent and mostly effective.'

Social workers and managers are fittingly proud of the work they are doing in Thurrock. They know their children and families very well and speak with passion and enthusiasm about the often exemplary work they undertake with them. They work in an environment where caseloads are manageable and where leaders support them to do their jobs effectively.'

Creating this culture within the service, is making us an employer of choice for social workers and social work managers.

6. Service Reviews

Since my last report we have reviewed the operation of key parts of the service which have resulted in improvements in the quality of our provision. Ofsted commented on the impact of these services;

'Leaders and managers have facilitated a range of evidence-based improvements, making a discernible difference to helping vulnerable children and their families sustain change. For example, additional investment in solution-focused 'families first' team, and in 'families together' edge of care team, is resulting in persistent relationship-based work that is making a positive difference, enabling very vulnerable young people to remain living securely with their families. This effective and authoritative practice, while recent, adds value and leads to better experiences for children.'

These developments include:

- **Adoption Service** – The main focus on this business case is to concentrate on the adoption service currently provided and will change the approach at Thurrock and increase the staffing resources in Children's Service
- **Edge of Care** - This service has been developed as part of our early intervention and prevention strategy to provide support to enable more children and young people to remain safely within their families. The service is based on schemes that have been successfully implemented in other authorities. As part of an Early Help strategy to intervene early when families are in difficulty to offer evidence based support and help in order to improve outcomes for children and young people and also reduce demand for high cost children's social care statutory services.
- **Fostering** – Our key focus will be on developing and growing our in-house fostering service and reduce our dependence on high cost independent fostering agencies. It specifically seeks to provide up to 100 extra in-house places for looked after children to reduce Independent Fostering Agency purchases and associated costs
- **Signs of Safety** – Is a strengths based social work practice model which enables social workers to work more collaboratively with parents and ensuring that their views and the views of their children are a key part of any care planning. It is an internationally respected model of practice and has been implemented in numerous Local Authorities across the UK during the past 10 years. It is already being used by a number of local authorities in the UK and worldwide, and is an innovative approach to statutory children's social work. We plan to adapt it and make it our own, with our own front-line experts shaping how and when it is used.
- **Two for One** – This is an innovative new initiative to support recruitment of permanent social workers. The service receives many applications from newly qualified social workers. Through this scheme, new inexperienced staff will be supported by experienced agency staff up to the point where

they are able to hold a full caseload. This has accelerated our success in recruitment of permanent staff.

7. Fostering and Adoption

Ofsted commented very favourably on our adoption and fostering services;

'Children and carers benefit hugely from highly experienced and dynamic social workers and senior managers in Thurrock's fostering and adoption services. Staff take great pride in their work. Foster carers and adopters are positive about the support they receive. Excellent therapeutic support is available for foster carers and adopters. Trauma-based learning is integral to the authorities extensive fostering and adoption training programmes.'

'Since moving its adoption service back in-house in 2018, the local authority has widened the adoption options available for all children who need them, not just babies and toddlers. A creative, far-reaching recruitment strategy is increasing the range of placements available to meet children's diverse needs. The assessment process is well organised and responsive. Senior managers listen to and regularly consult with foster carers. Foster carers use their expertise to influence the organisation in a positive way. Their input during training and recruitment events, initial visits and mentoring of new carers is invaluable. Extensive investment in life-story work is greatly appreciated by adopters and birth families. This work is being extended to children living with special guardians and foster carers.'

However, fostering recruitment continues to be a priority for the service. There were 16 new fostering household approvals between April 2018 and March 2019. Between April 2019 and December 2019 there have been 14 fostering household approvals and 5 households will be presented to panel within the next month with a recommendation of approval. The fostering recruitment team is now fully staffed which is supporting our ambition to place more children in or close to Thurrock so that they can continue to access local services and remain close to their families and communities.

During the recent inspection, Ofsted commented;

'A creative far reaching recruitment strategy is increasing the range of placements available to meet children's diverse needs'

The Fostering and Placement Service has been successful at maintaining the reduced number of children and young people placed at a substantial distance from the borough. In 2018/2019, 83.9% of children looked after were placed within a 20 mile radius of their home. Those children not placed in the Borough of Thurrock are generally placed in neighbouring authorities such as Essex, Southend, London Boroughs of Barking and Dagenham, Havering and Redbridge. Placements over 30 miles tend to be of a specialist nature where there are few providers available to meet specific needs.

We are continuing in our drive to improve permanence for children in care including securing permanence through Special Guardianship and Child Arrangement Orders which allow children to be cared for within their family or wider network and through matching children with their foster carers long term.

Where adoption is the final care plan approved by the Court we strive to find an appropriate adoptive placement. 14 children were adopted in 2018/19, an increase from 8 in 2017/18. Between April 2019 and December 2019 12 children have been adopted and a further 4 children have been matched and placed in an Adoptive placement awaiting a final order. Thurrock ended our partnership with Coram in September 2018 and brought the adoption service back in house. 5 Adoption households have been approved since April 2019 and a further 13 households are at various stage of the assessment process.

We have increased access to the Adoption Support Fund for children who are adopted or who have Special Guardianship Orders from £85,000 in 2018/19 to £290,000 between April and November 2019. The Adoption Support Fund helps to pay for therapies for children who have been adopted or subject to an SGO when they need it. The Adoption Support Fund helps adoptive and Special Guardianship Orders families provide support they otherwise couldn't provide on their own to improve relationships; engagement with learning; emotional regulation, confidence and behaviour management.

8. Child Sexual Exploitation

Child Sexual Exploitation continues to be understood and addressed across the service in collaboration with partner agencies.

An extensive training programme has continued to be coordinated by the Child Sexual Exploitation Manager in children's social care. Centrally, this acknowledges the contextual nature of exploitation, and importance of engaging with partners in the identification of, and response to exploitation in the borough and across Essex and Southend.

To this end, bespoke Child Sexual Exploitation, and trafficking awareness training has been written and delivered in collaboration with Essex Police, Open Door and South Essex Rape Incest Crisis Centre to a range of professionals. This includes a total of 356 Children's Social Care staff to date, and 108 Thurrock Foster Carers in 2019 alone.

Elected Members are key partners in identifying potential perpetrators as well as victims of exploitation, and in understanding and communicating locations of concern in the Borough. Training has sought to reinforce existing knowledge, and reinforce reporting pathways for Elected Members. Commitment to collaborating with Thurrock Licenced Taxi Operators, Drivers and Passenger Assistants remains strong: 406 licensed Taxi drivers have been trained; the currently 16 remaining new drivers will be trained via sessions scheduled for 2020. It remains a condition of Thurrock Taxi Drivers to be trained within 3 months of their attaining their license in the Borough.

Staff in two local Hotels have received training with the Child Sexual Exploitation Manager to raise awareness regarding exploitation, missing children and trafficking within their industry's context. To check application in practice, the Child Sexual Exploitation Manager Piloted an Operation with Grays Police and Thurrock Licensing in Thurrock. Assessed impactful, this pilot Operation was replicated across Southend, Essex and Thurrock between September and November 2019. The findings are informing a unified partnership approach to embedding sustained collaboration with Hotel staff across Southend, Essex and Thurrock with a view to improving our safeguarding response to exploitation in the community.

A five year Southend, Essex and Thurrock Missing People Strategy has been written for Southend, Essex and Thurrock by the Child Sexual Exploitation Manager in collaboration with partners. This forms part of suite of four inter-connected Strategies, including Gangs and Exploitation. Reflecting national recognition of the importance of identifying and protecting adults as well as children who go missing and at times are vulnerable to exploitation, the Strategy includes adults as well as children in its scope. Currently being signed off, the Missing People Strategy will be launched in early 2020.

An innovative, multi-agency development to supporting children aged thirteen plus, who are at risk of exploitation, but who may feel currently unable to provide an evidential account to the Police or to access the services of the Sexual Assault Referral Centre, is being Piloted in Thurrock. Project Goldcrest is being piloted for up to 18 months by Thurrock Children's Social Care in collaboration with Essex Police and the Brentwood Sexual Assault Referral Centre. At its heart, it gives children and young people choice and control, also focusing upon disruption of potential perpetrators. Project Goldcrest will be independently evaluated, and if successful, extended across Essex and Southend, and potentially nationally.

At Thurrock Children's Social Care request, Essex Children's Services were invited to Thurrock in September 2019, to undertake a Child Sexual Exploitation, Child Exploitation and Missing 'Deep Dive Diagnostic' of our response to these interlinked areas of harm. The Inspection of Local Authority Children's Services (ILAC) then took place in November 2019. These findings combined, are being used to inform our thinking and response around the alignment and effectiveness of systems which support children at risk of criminal and sexual exploitation and children missing from home and care. At the heart of our response, will be enabling children to tell their stories. To achieve this, from January 2020, a full review of the service and its delivery will be undertaken.

9. Youth Offending Service

Despite increasing pressure in relation to gang related offending, and consequently an increasingly higher risk cohort, Thurrock Youth Offending Team continues to perform well across its key performance indicators especially its reoffending rate.

The Youth Justice Board data summary for April to September 2019 confirms that the latest aggregated reoffending rate for Thurrock Youth Offending Team is 28.9% This evidences strong performance especially when we compare this to the national average of 38.9%. When we compare the performance against the Eastern Region

at 37.2% and the Youth Offending Team Family benchmark at 35.5% it further evidences Thurrock's position as one of the best performing youth offending teams in the region.

Our actual number of first time entrants into the youth justice system for 2018/19 was 43 which equates to a rate per 100,000 of 244. Although our performance in this domain is relatively static due to the good work done by our out of court disposal team this is an improvement on last year's figure of 46 and stronger than the Youth Offending Team Family average.

Thurrock Youth Offending Team saw 8 young people sentenced to custody in 2018/19 this equates to a rate per 1000 of 0.45 and is a slight increase from the previous year. If we compare it to the Youth Offending Team family average of 0.41 we are slightly underperforming. However, if we compare this to our nearest geographical YOT Family member, Havering, we have significantly outperformed their custody rate of 1.01. It is important to note that due to the very small numbers in this cohort our custody rate can be volatile.

Thurrock Youth Offending Team remains central to the coordination of the Gang Related Violence work ensuring an effective multi agency approach to managing offenders involved in gang related crime. Recently this work has been identified by the Youth Justice Board as good practice and is now published nationally in their Effective Practice Library.

Youth Offending Team continues to work with victims by offering support and the opportunity for restorative justice to all of those affected by youth crime in the borough. Additionally, we continue to support the local community by supervising young people to complete reparation projects. We also work closely with the community by recruiting volunteers who live and work in the borough to meet with our young people and discuss ways in which they can repair the harm they have caused, this is facilitated through our Youth Offender Panels.

Thurrock Youth Offending Service was last inspected in April 2015, with an outcome graded as Good. We can expect a Youth Offending Service Inspection at any time and Youth Offending inspections are randomly selected. The Youth Offending Service inspection will begin with a phone call to the Council on a Friday from Her Majesty's Inspectorate of Probation (HMIP). There will then be 3 weeks of planning and preparation before the field work part of the inspection starts on week 4 after the notification of the inspection.

10. Brighter Futures

The prevention agenda of Brighter Futures continues to develop across the partnership and has brought together a wide range of services to provide help to children and families in Thurrock as their needs emerge. Brighter Futures offers a range of preventative services to support families in Thurrock, allowing children and young people to achieve their full potential. It supports the education, health and wellbeing of children and young people in a coordinated way, preventing problems from developing and, when they do, intervening early to stop them from escalating.

Ofsted commented;

‘Judicious, targeted investment in the newly reconfigured locality-based preventative and support service (PASS) as part of Thurrock’s Brighter Futures strategy means that early help is carefully prioritised for the most vulnerable families. The pathway into the preventative and support service is clear: a ‘team around the family’ and well-being model takes a holistic, multi-agency perspective in addressing families’ needs. As a result, children and families get the right level of help and protection at the right time, delivered by caring and skilled professionals, and this is making a difference to their day-to-day lives and protecting them from harm.’

The revised Brighter Futures Strategy and Governance brings together all of Thurrock Council’s universal and targeted prevention services for children and young people and their families. The Core elements of Brighter Futures include:

- Brighter Futures Children’s Centres: open to all families offering a range of education, health and play activities;
- Brighter Futures Healthy Families: includes, among other things, Health Visitors who give advice and guidance to all new parents in Thurrock, and School nurses work to keep children healthy in schools;
- Brighter Futures Prevention and Support Service: provides targeted help to families which have specific needs encompassing issues such as parenting support, domestic abuse, sexual violence and continues to focus on families where worklessness, poor school attendance, parental physical and mental health issues and Anti- Social Behaviour are featured.

Families all have an allocated Lead Professional who knows the family best and regular Team Around the Family Meetings are held to ensure that individual, time limited, task focussed plans make a real difference to the lives of families. Feedback from families accessing brighter futures services, undertaken independently by Healthwatch Thurrock, was overwhelmingly positive about the service provided directly to families.

11. The Way Ahead

Whilst delighted, I am not complacent about the Ofsted outcome and I remain committed to obtaining outstanding services going forward. I endorse the comment Ofsted made, when they wrote;

‘There is no complacency. Instead, a strong culture of continuous learning, professional accountability and responsibility enables staff to flourish in a safe but challenging environment.’

There were three areas to improve in the Ofsted report and we are already working on making those improvements. We will continue to strive to ensure our services provide excellent outcomes for vulnerable children in Thurrock. I would like to thank our foster carers and staff for their hard work and dedication they’ve shown over the past year, I am truly grateful for their dedication and passion.

Financial Information

Children Services

Service	2018-19 Outturn £'000	19/20 Revised Budget £'000	19/20 Forecast Outturn £'000	Variance £'000
Central Administration Support and Other	1,044	1,464	1,418	(46)
Children and Family Services	31,084	31,189	31,928	739
Head Start Housing Service	25	598	670	72
Learning & Universal Outcomes	3,173	4,195	4,180	(15)
School Transport	2,597	2,552	2,774	222
Grand Total	37,923	39,998	40,970	972

Adult Social Care

12. Adult Social Care

Moving onto Adult Social Care, for 2019-20 Adult Social Care was provided with £2.038m new funding which comprised:

Improved Better Care Fund (pooled with the NHS)	£0.825m
Winter Pressures Gant	£0.654m
Social Care Support Grant	£0.559m*

*(split between Adults & Children's Services, total allocation £1.117m)

There was also £0.250m of funding carried forward through the Better Care Fund which we have used to support timely discharge from hospital through the provision of the Bridging Service based at Basildon Hospital. This has helped us to manage our waiting lists and also have one of the best delayed discharge from hospital performances in the region.

The overall funding has helped us to mitigate the growing demands for adult social care, continue to support stabilisation of the market through continued funding for domiciliary and residential care but also to meet some of the rising costs of providers for such increases as the rise in the National Living wage. There remains considerable budget pressures within the provision of external placements which we are working hard to mitigate through a combination of both individual package reviews and also overall process reviews.

Funding levels announced for 2020-21 include the option to raise the Adult Social Care precept to the value of £1.336m. This funding will be essential for us to be able to meet current demand and also future demographic growth. An additional £2.6m has also been made available in the form of a social care support grant which will be allocated between Adult & Children's Services.

13. Place Based Working

I remain as steadfast as ever to ensuring that Thurrock's communities are resilient and self-supporting, ensuring that the people living within them are able to achieve a good life regardless of whether or not they require our help and support.

I am also committed to ensuring that when people do require our support, they receive a response that focuses on improving their health and wellbeing and not solely a plan to meet their immediate needs. I believe that this is best achieved by taking a place-based approach to the design and delivery of health and social care.

We continue to work in close partnership with Thurrock's Voluntary and Community Sector to identify and maximise the strengths that exist in our communities and to identify how those strengths can play an important part of any solution we offer. Focusing on the strengths and assets held by communities is helping us to transform Health and Social Care as part of our Better Care Together programme, ensuring

that our approach embeds a place-based approach that builds a responsive and flexible system that wraps itself around people and communities.

This section of the report details Place-Based working highlights for 2019-20.

Social work

Our social work teams are our professional leads in adult social care. They support and protect some of the most complex and vulnerable adults in Thurrock. We continued to maintain a low turnover of qualified social work staff and that stability has a positive impact on the lives of those we support. In September 2019 Skills for Care published their state of social care workforce data. This estimated turnover in adult social work at 13%. Thurrock has a turnover of only 4%. This is one of the lowest in the Country. We continue to 'grow our own' and offer opportunities to our social work staff that contributes to keeping our turnover low. As part of this approach, in October 2019 we successfully created two social worker apprenticeships posts. We are pleased to offer two of our support planners the opportunity to become qualified social workers over the next three years. We successfully recruit, retain and progress our social workers which in turn leads to consistency of care and the ability to offer long term support through building strong relationships with those who need their support.

The main development in the delivery of social work over the past year has been the further strengthening of strength-based social work – ensuring that people requiring additional support have solutions that help them to achieve what matters most to them. Starting in October 2018 with a 'test and learn' pilot in Tilbury and Chadwell, we are now in the process of shifting all adult social work to a 'Community-Led Support' model. Teams are located within the community and are easily accessible – offering regular drop-in sessions known as 'Talking Shops'. Team members are encouraged to be innovative – providing a service when required, but looking first at the role assets within the community can play, friends and family, and technology. The approach has been extremely successful with a second team launched at the start of November 2019 (South Ockendon, Aveley and Purfleet). The remaining two teams covering Grays and Stanford and Corringham will be delivered in the first half of 2020.

Finally, last year I proudly reported that Fran Leddra, our principal social worker for Adult Social Care, had been asked to chair the National Principal Social Worker Forum. This year I can go one better by proudly reporting that Fran has become Chief Social Worker for England – jointly with Mark Harvey from Hertfordshire County Council. Fran and Mark are jointly carrying out the role for a year whilst the existing Chief Social Worker (Lyn Romeo) takes a career break. Fran's achievement cannot be underestimated with this being the most prestigious post in the Adult Social Care world. Whilst I am delighted for Fran, I'm equally delighted that Thurrock has the opportunity to influence at a national level and I know that Fran is keenly flying the Thurrock flag.

Shared Lives

This scheme enables adults with complex needs to live in a family setting in the community, avoiding a residential home placement. Residential placements for adults with complex needs are few and far between – with some being available only ‘out of borough’ at a very high cost. The Shared Lives scheme is part of our strategy to build capacity, flexibility and diversity in the adult social care market place.

The Shared Lives Contract has been in place since March 2017 and 4 Shared Lives care arrangements have been made. Successfully developing Shared Lives schemes has taken time and growth has been slow. In September, following discussions with the Shared Lives provider, Ategi, it was mutually agreed that the contract would be terminated as it was no longer financially viable given the low number of arrangements.

The Council remains committed to having a Shared Lives scheme in Thurrock and as an interim arrangement, we have asked Bettertogether to manage the scheme whilst we explore our options for the scheme. Bettertogether is a Community Interest Company that has recently been spun out from Newham Council following a number of years as an established in-house service. The scheme has an ‘excellent’ rating from CQC.

The transfer of service users and carers has taken place and has been carried out in collaboration with the council and both providers.

Micro Enterprises

When I introduced my report last year, I spoke about how we were aiming to provide people with greater choice and control through expanding the market place for care and support with the introduction of Micro Enterprises.

At the time of writing last year, we had helped 18 Micro Enterprises to be established. I’m extremely pleased to say that this initiative is continuing to prove extremely successful for a number of reasons. We have now helped to establish 106 Micros (at the time of writing) and these numbers are continually increasing with an expanding range of services being made available.

Residents do not have to be eligible for social care support to access the wide range of services that are offered by a Micro however many eligible residents do use a Direct Payment to purchase the services that they need. There are a wide range of services on offer from home care to counselling, gardening, companionship and pet sitting to name just a few and they all contribute towards ensuring that local residents have a wider choice of services which in turn supports their independence.

Our work to help Micros to form has enabled the establishment of 68 paid employment opportunities and 35 volunteering opportunities. Micros are self-employed and this factor means that this way of working suits many people who wish to work flexibly, maybe through personal choice but sometimes also due to caring commitments or due to health-related reasons. Micros offer very personalised services and can tailor their offer to meet the needs of the people employing them.

Therefore they can often help to fill gaps in service provision. Much of the feedback from residents using express high levels of satisfaction based on these factors.

14. Care Home Development

In January Cabinet gave approval for a new residential care facility to be built on the Whiteacre / Dilkes Wood site in South Ockendon.

The new facility will provide social care and nursing care in a specialised setting. It will include 45 self-contained dwellings for single people and couples. Additionally 30 ensuite bedrooms for intermediate care will be provided. The facility will also include shared lounges, a restaurant, laundry room, and treatment rooms as well as accessible dementia friendly gardens.

The development is progressing well. A design team has now been appointed and the necessary ground surveys are being undertaken. I am pleased to report that work is now about to start to engage with potential service users to ensure that the new facility can fully meet their requirements.

Following consultation with the potential service users initial plans will be created for public consultation before a planning application is submitted later in the year.

15. Integration With NHS and community partners

Last year I reported that our Better Care Fund (consisting of Adult Social Care and Thurrock Clinical Commissioning Group budget) for 2017-18 was £42 million and that having previously focused on Older People, with the development of a place-based approach to the delivery of health and social care, the focus of the Fund would be broadened to include all adults.

This year, the Fund grew to £48.6 million. Whilst a significant amount of the Fund's focus is still on older people, we have expanded our approach – for example using some of the Fund to provide a greater focus on prevention and early intervention.

We have had examples of real success during 2019-20 as a result of our integrated approach to deciding how available resource should be deployed. One such example is the way we've continued to lower Delayed Transfers of Care numbers – making us the best performing area in the region and also significantly below the national average. The way we have invested Better Care Fund monies into the services that help to ensure people can leave Hospital when fit to do so has made an impressive impact. These investments include a 'Bridging' Service – where people are fit to leave Hospital but not fit to return home; additional investment in domiciliary care to ensure that we have sufficient capacity for people coming home; and also a successful pilot service called 'By Your Side'. By Your Side is run by Thurrock Community and Voluntary Service and provides people with practical support when they leave Hospital – for example making sure they can get the shopping they need and turning the heating on. It's often these small things that mean that people are unable to return home or return to hospital quickly after returning home.

As we move towards 2020-2021, we will continue to develop how we use our Better Care Fund so that it can continue to impact on our ability to prevent, reduce and delay the need for care and support.

16. Better Care Together Thurrock - New Model of Care

I spoke to you last time about our integrated Health and Social Care Programme known as Better Care Together Thurrock. Better Care Together Thurrock's purpose is to redesign Thurrock's health and care system – with a focus on shifting the system towards prevention and early intervention and on working as one with the community to ensure that our processes and systems deliver outcomes and solutions – focusing on what matter to people.

We have moved forward considerably over the last year and I want to highlight some of the successes of our approach to you:

Community Led Support

As I have already mentioned, we are now in the process of rolling-out Community Led Support Social Work Teams to all areas of the Borough. Due to the success of our Tilbury and Chadwell pilot team we have recently launched our second team and they are actively making strong connections in the area they cover – South Ockendon, Aveley and Purfleet. The final two teams will be launched during the first half of 2020. We have very positive results from our first team, and I'm extremely excited about the difference this approach will make to our communities.

Wellbeing Teams

We are piloting Wellbeing Teams as a means of testing an alternative model of delivering care in the home. This is in the response to the ongoing fragility of the domiciliary care market and the desire to shift away from the existing 'time and task' model.

We have launched two pilot teams – one in Chadwell and one in Tilbury. The benefit of launching the teams in Tilbury and Chadwell is that they can make strong links with our other pilot approaches and help to develop the right approach to health and social care from the ground upwards. The teams deliver care requirements to people who would ordinarily have received a service from a domiciliary care provider, but they use the hours allocated to the individual flexibly and also look to build a relationship with the person receiving support - find out what matters to them. They also look to reduce the reliance on a service but using resources creatively – seeing what can be provided from the community itself, family and friends, and also the application of technology.

People receiving a service from the two teams have been extremely pleased with the experience and we will continue to evaluate its impact over the life of the pilot. Our next steps include looking at how we can develop the teams so that they could carry out some tasks currently carried out by health colleagues – reducing the number of visits by professionals to one individual. We also envisage the teams, who operate in a very small geographical patch, identifying and providing connections and

support to those people not in receipt of a service. It is imperative that we always look at ways to prevent crisis and to keep people away from needing services wherever possible.

Technology Enable Care Solutions

I am pleased to report that as a result of our drive to raise awareness of Technology Enabled Care solutions, we have seen an increase in people using technology enabled care including the more traditional range of falls sensors and care alarm pendants as well as newer products on the market such as Brain in Hand.

With the Community Led Solutions Team and Wellbeing Teams up and running, from January 2020 they will be increasingly putting Technology Enabled Care solutions at the centre of their conversations with residents in Tilbury and Chadwell. These conversations will explore what matters most and what gets in the way of achieving the things that matter. And, if it is felt that technology has a role to play – whether the more traditional assistive or a newly developed app might be relevant, the Community Led Solutions and Wellbeing teams will discuss these options and help people to both obtain them and ensure they know how best to use them. This new approach is to be trialled and evaluated in the first part of next year, before making decisions about rolling it out.

I am also pleased that a pilot project using an app call Brain in Hand has made a significant impact on young people's lives. Ranging from 17 -25 years old, our Brain in Hand users have been helped to gain confidence in navigating day to day activities including travel to college, shopping and cooking, living independently, as well as taking up volunteering. The pilot project is due to be independently evaluated.

17. Provider Market

The social care market in Thurrock remains fragile but manageable. Although a great deal of work has been done to stabilise the market and increase capacity, we are now grappling with a significant increase in both the numbers of people requiring care and the complexity of their need.

Older People entering residential care are far more complex than they were a decade ago (80% of service users have both a physical and cognitive impairment compared with only 47% ten years ago). As a result of this, we are now responding to a much higher number of safeguarding events within older people residential care due to this complexity and the homes ability to meet this growing need.

Our contracts for home care are now well embedded and I am pleased to advise that our in-house service, Thurrock Care at Home, received a CQC rating of GOOD following being inspected on 20 November 2019. However, I should also advised that this year has seen another homecare provider withdrawing from the local market. To combat some of this pressure, a home from hospital scheme is helping us to discharge people from hospital in a timely manner. However, this year has found us delivering an additional 1000 hours of home care to 125 more people as a result of demand in the community. A recent review has shown that home care is

mirroring residential care, in that we are supporting increasing complexity within people's own homes.

We recognised some time ago that the location of specialist schools in-borough for young people with disabilities would result in additional demand for services when they transitioned to adulthood. We are in the process of opening a purpose built supported housing scheme for people with autism in response to that identified need. We are trying to encourage a greater variety of provision and type of providers (including successfully growing the number of micro providers) to meet the needs of an increasing number of young adults with complex learning disabilities who will be coming into adult social care every year.

It has been a challenging year, with increasing demand in both older people and adult services putting significant pressure on the whole system. However, we are trying to meet this challenge not only with new services such as the purpose built supported accommodation scheme but by reviewing our current pathways, removing unnecessary bureaucracy and introducing new and innovative ways of working.

Recruitment and Retention

One of the continuing challenges for adult social care is the ability to meet demand particularly concerning domiciliary care. This is compounded by a high turnover of care staff, and difficulty recruiting and retaining those essential staff members. In turn this places significant pressure on the sustainability of the domiciliary care market. Recent analysis by Skills for Care shows that turnover of care staff in Thurrock stands at 50% per year.

We are taking an approach as part of our transformation programme that looks at how we can address the workforce challenge. We are doing this as a local authority, but also in conjunction with the NHS through the Sustainability and Transformation Partnership (STP) and in conjunction with other local authorities across the region. We need an integrated and cohesive approach to tackling some of the workforce issues that currently exist – which means looking at addressing a number of aspects including: the branding of carer roles – making working within the care sector a profession and a profession that young people in particular aspire to; career pathways – including across and into the NHS; terms and conditions – looking at the factors that contribute to a person staying with a particular employer or in a particular role.

In Thurrock, our work to change how care is provided in the home (Wellbeing Teams) provides us with an opportunity to contribute towards the workforce challenge. For example testing a self-management model and placing staff on salaries and fixed shifts as opposed to hourly pay and split shifts. With Wellbeing Teams, we also changed our recruitment approach – focusing on values as opposed to skills. This approach attracted a greater mix of people with a different range of experiences.

Work will progress throughout the year and I will report on progress made next year.

Delayed Transfers of Care (DToC)

Delayed Transfers of Care (or DTOCs) are where someone is medically fit to leave hospital but there is no-where for them to move to.

Although DTOCs are an issue Nationally, Thurrock is performing very well in this area. We are currently the BEST performing authority in the region. Thurrock's rate of 3.5 per 100,000 population, is significantly better than the national (10.5) and regional (9.6) averages.

This has been achieved by the whole health and social care system working together. However, to achieve this high level of performance, significant investment was required.

18. Thurrock Integrated Care Partnership

There are a number of existing and forthcoming changes to the NHS structure – in response to the NHS Long Term Plan published in January 2019 and I remain concerned about NHS England's proposals to merge the existing five Clinical Commissioning Groups across the Mid and South Essex Sustainability and Transformation Partnership footprint. I, alongside other members of Cabinet, believe that the current local arrangements of a single Clinical Commissioning Group which is conterminous with a single Unitary Local Authority area provides the optimum structure for Health and Care integration and transformation.

It is therefore essential that we secure the arrangements that provide our residents with the best outcomes. Our ambition is to provide an integrated Health and Social Care system for Thurrock. Achieving this means establishing strong integrated governance and partnership arrangements that will provide strategic direction as well as representing Thurrock's interests on the Mid and South Essex Sustainability and Transformation Partnership. We have done this by implementing an Integrated Care Partnership (ICP) for Thurrock. Our Integrated Care Partnership includes senior executives from Adult Social Care, Public Health, Thurrock Clinical Commissioning Group, our Community Health Provider, North East London NHS Foundation Trust (NELFT), our Mental Health Provider Essex Partnership University NHS Foundation Trust, and Basildon and Thurrock University Hospital Foundation Trust. The Voluntary and Community Sector are also represented through Thurrock Community and Voluntary Sector to ensure that the interests of our communities are reflected in decision making. Our Integrated Care Partnership will also be the main focus for local, placed based developments.

Partners will work to build a Population Health System which aims to reduce the number of unplanned hospital and residential care admissions; reduce avoidable Accident and Emergency attendances; reduce the number of delayed transfers of care; keep people as independent as possible for as long as possible; and move more services out of hospital and into the community. Much of this will be achieved through the ongoing development and delivery of our Better Care Together health and social care transformation programme.

19. Safeguarding (LPS)

Safeguarding adults who may be at risk of abuse or harm has long been an absolute passion of mine and remains a priority for adult social care. The statutory Board led by Thurrock Council, the Clinical Commissioning Group and Essex Police is now well established and the Safeguarding Team provide skilled and person-centred interventions.

In 2018-19 we received a total of 835 safeguarding alerts, which is a noticeable increase on the 628 alerts received in the previous year. But, I am pleased to inform you, we continue to work closely with individuals, local communities and other agencies to ensure that those at risk have the support they need to live lives free from harm or abuse. The Board, of which I am a member, actively promote the Making Safeguarding Personal agenda, and, as is evident in our activity report, and, in 9 out of 10 cases individuals supported have achieved their desired outcomes.

The Safeguarding Team is also responsible for managing the Deprivation of Liberty Safeguard Service. Our main focus going forward will be implementing the new Liberty Protection Safeguards scheme, which is due to replace the Deprivation of Liberty Safeguard Service in October 2020. The two schemes will run alongside each other for the first year post implementation. The team are currently in the process of putting the necessary systems and processes in place to ensure effective implementation of this new scheme. Thurrock Council have always been proactive in ensuring that the necessary procedural safeguards are in place for those at risk of being deprived of their liberty; and we are confident that this strong Human Rights based practice will continue under Liberty Protection Safeguards.

20. Preparing for Adulthood Strategy

We know that effective preparation for adulthood for disabled young people has a very positive effect on prevention, helps young people and families manage change and promotes independence.

I am pleased to advise that we are currently working in partnership with Thurrock Coalition, young people and their families and other agencies to co-produce a Preparing for Adulthood Strategy.

The Thurrock preparing for Adulthood Strategy will be a 3 year plan that is relevant for all agencies and staff who work with disabled young people between the ages of 14-25 years in Thurrock.

This Strategy will be guided by the principles of the children and families Act, Care Act and the guidelines recommended by the National Institute for Health and Care Excellence (NICE), which provides national guidance and advice to improve health and social care. It will be supported by an action plan on to ensure positive outcomes for our disabled young people, their families and carers.

I will be launching the Strategy later this year.

21. Mental Health Service Transformation

The challenges faced within our support offer to residents with poor mental health were well-documented in [a report presented to Cabinet](#) in March 2019. The findings of this report have underpinned the programme of adult mental health system transformation. Appointment to a new Strategic Lead position to work with colleagues across the Council has enabled a greater level of focus on this agenda, which has included several specific work programmes:

Improving urgent and emergency mental health care

I am delighted to be able to inform you of improvements to our Mental Health Crisis Responses services achieved through working in close collaboration with colleagues in the Mid and South Essex Sustainability and Transformation Partnership. This service is based upon one implemented successfully in Cambridge and Peterborough, and we will be monitoring the success of its launch in Thurrock. The programme is on track to go live from 1st April 2020, with Thurrock hosting one of the newly-funded mental health Sanctuaries.

Integrated Primary and Community Care Mental Health

This is another exciting programme of transformation, looking to focus mental health care on prevention, resilience and early intervention, and bringing together clinical and non-clinical services to work in a more person-centred approach, initially in Tilbury & Chadwell, and Aveley, South Ockendon & Purfleet. Complimenting this is the *Open Dialogue* pilot, which a number of our social workers within Essex Partnership University Foundation Trust are taking part in. Open Dialogue is a Finnish holistic strengths based approach to treating people with psychosis that is currently being piloted in the UK. It is humanistic and non-hierarchical, and medication is kept to an absolute minimum. This is due to commence in January 2020, and will be undertaken with support from researchers from University College London.

Mental Health Social Work

We have been working to develop a new Section 75 Agreement with Essex Partnership University Foundation Trust based on a longer term contract. This is underpinned by a revised performance and budget framework, which provides an improved view of activity and outcomes. An action plan is being developed to develop social work practice in line with the [Social Work for Better Mental Health](#) principles, as well as integrating the approach with the Community Led Support teams.

We have also successfully re-procured our Floating Support service to enable those with mental ill-health to remain living independently. The Floating Support service provides a flexible service that adapts to meet individual needs. The new service commenced within October 2019.

Earlier identification of poor mental health

In July 2019, Thurrock's Health and Wellbeing Board pledged to sign the national [Prevention Concordat for Better Mental Health](#), meaning our focus on prevention and reducing inequalities in mental health support was nationally recognised. We have also worked on identifying opportunities in non-mental health settings for introducing depression and anxiety screening tools, with an onward referral pathway to the local IAPT (Improving Access to Psychological Therapies) service if required. Finally, this year has also seen the secondment of a mental health social worker into the Housing Solutions team, in order to better upskill the front line housing staff regarding recognising and supporting those with poor mental health who present to the team, and to improve awareness of wider support options.

I trust you will agree that this amounts to an exciting and innovative set of new developments that should significantly improve the support available to Thurrock residents who experience episodes of mental ill-health.

And finally.....

I continue to be extremely proud of what Thurrock staff have achieved to support our Children's Social Care Ofsted Inspection outcome and to transform the way in which Adult Social Care is provided to the people of Thurrock to improve health and wellbeing outcomes.

Financial Information Adult Social Care

Service	2018/19 Outturn £'000	2019/20 Revised Budget £'000	2019/20 Forecast Outturn £'000	Variance to Budget £'000
Assistive Equipment & Technology Total	568	559	459	(100)
Commissioning & Service Delivery Total	2,749	3,529	3,133	(395)
External Placements Total	23,319	23,877	24,764	887
Fieldwork Services Total	3,074	3,351	3,324	(28)
Provider Services	5,872	5,827	6,042	215
Grand Total	35,583	37,142	37,722	580