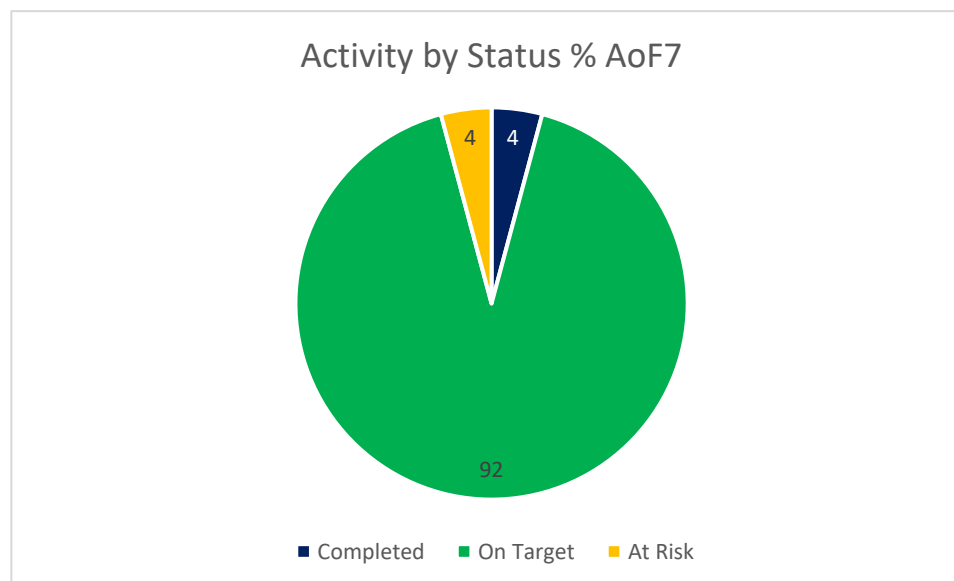


## 1. Adult Social Care OSC Progress on the Integrated Delivery Plan Quarter 1

### 1.1 Key Insights for Quarter 1 2023/24

Of the 206 actions within the Integrated Delivery Plan, 24 are attributable to the Adult Social Care OSC. There is positive progress within this Quarter with 92% of activities being on track to achieve their objectives within the set timeframes, with 4% being At Risk. Four percent of activity closed this Quarter.



#### Completed activity:

The following activity has been completed this Quarter;

- **Deliver our Special Educational Needs and Disabilities (SEND) Inclusion Change Programme and Written Statement of Action (WSOA) following the Ofsted and Care Quality Commission (CQC) inspection to deliver against the key requirements and milestones: Re-tendering the Warwickshire Special Education Needs and Disability Information, Advice and Support Service (SENDIASS).**  
Service retendered - new contract live 1st July 2023 with Barnardo's.
- **Undertake a review of service provision for Short Term Vulnerable Adults, including a revised referral process, that supports a recommissioning of provision aligned to the Housing Related Support Offer.**  
Referral approach has been reviewed and referrals can now be completed via the Customer Contact Centre and relevant operational team. The retender of this service will now align with the recommissioning of Housing Related Support Offer.

## 1.2 Support people to live healthy, happy, and independent lives and work with partners to reduce health inequalities

Activity	Status	Commentary
Embed a continuous improvement approach across the Benefits Assessment and Income Charging teams, which will support the on-going redesign of core processes: Embed Better Care Finance self-service portal for financial assessments.	At Risk	BetterCare Finance portal is live but resourcing issues in the Financial Assessments team are delaying full rollout. Discussions have started with Agilisys to progress automated transfer of financial assessment data to the Abacus Charging System.

## 2 The following activities are On Track

Activity
Implement the Market Sustainability Plan across all adult social care markets, constructed as part of the Fair Cost of Care exercise.
Develop a strategic plan for accommodation-based care services for adults, informed by a needs assessment, the Adult Social Care strategy, the national Cost of Care requirements and funding programmes.
Support the development of Integrated Pathways including services and interventions for vulnerable people to include Falls, Stroke, Frailty, dementia and Hospital to Home: <b>Propose and implement changes to the current Warwickshire health and social care discharge arrangements to reflect national hospital discharge policy and meet operational requirements.</b>
Support the development of Integrated Pathways including services and interventions for vulnerable people to include Falls, Stroke, Frailty, dementia and Hospital to Home: <b>Commencement of the “Living Well with Dementia” strategy Delivery Plan and work with key partners and stakeholders to deliver the Year 1 priorities, overseen by the Delivery Board.</b>
Improve the offer of Assistive Technology (AT) solutions to support people in Warwickshire to stay safe, healthy and independent to include: <b>Implementing and reviewing 2 pilots that can demonstrate the range of opportunities to support customers to regain and maintain their independence.</b>
Improve the offer of Assistive Technology (AT) solutions to support people in Warwickshire to stay safe, healthy and independent to include: <b>Expanding the Assistive Technology offer in Warwickshire through procurement of a service to deliver a wide range of AT solutions, including life-line provision and self-assessment for customers wishing to purchase their own equipment.</b>

Support partners with the implementation of the Warwickshire Homelessness Strategy, including the continued commissioning of the Homeless Physical Health Nursing service and completing the Pathway Needs Assessments for all the local NHS trusts.

Promote the benefits of healthier lifestyle choices and provide effective services and support to enable people to make sustained improvements: **Support the continued implementation of the national diabetes prevention programme working with partners and key stakeholders.**

Promote the benefits of healthier lifestyle choices and provide effective services and support to enable people to make sustained improvements: **Mobilise the new Healthier Lifestyle services to improve access and deliver a one stop shop approach. This new service will incorporate smoking cessation services.**

Improve the mental health and well-being of adults living in Warwickshire: **Support the refresh and delivery of the multi-agency suicide prevention strategy for Coventry and Warwickshire.**

Establish the strategic role of Extra Care Housing and Specialised Supported Housing in the Council's wider strategies for housing with support and its Adult Social Care Act duties to include: **Developing a 5-10 year plan for Council commissioning of Extra Care Housing and Residential/Nursing Homes that address issues of balance of services; projections of future demand; adequate capacity in key localities; affordability; innovative design e.g. to include ' Care Villages' & use of Council Capital/Land.**

Establish the strategic role of Extra Care Housing and Specialised Supported Housing in the Council's wider strategies for housing with support and its Adult Social Care Act duties to include: **Reviewing the impact of the Extra Care Housing (ECH) and Specialised Supported Housing (SSH/SHAD) programme to date and plan/commence Phase 2.**

Deliver the significant service provision changes that will be needed to meet the new Mental Capacity (Amendment) Act 2019, and its new Liberty Protection Safeguards (LPS) scheme that will supersede current consent arrangements for vulnerable people.

Review the Hospital to Home Service with partners in health to understand impact and make recommendations for future delivery and commissioning.

Develop a Community Recovery Service jointly with health partners as part of the national discharge Front Runner to ensure that all people with all people in hospital, who need further support at home to recover, will have access to effective therapeutic intermediate care services within 24 hours of no longer meeting the criteria to reside in hospital.

Implement required processes, capability, staff resources and skillsets to successfully manage increased service demand and administer Care Cap.

Prepare and be suitably resourced for CQC inspection of the Adult Service.

Support the delivery of the National Drug Strategy by reviewing the drug and alcohol services to ensure they meet statutory requirements and recommendations from the Needs Assessment; also deliver the Drug and Alcohol Strategic Partnership requirements.