

Scrutiny Health & Social Care Sub-Committee Agenda



To: Councillor Eunice O'Dame (Chair), Councillor Robert Ward (Vice-Chair), Adele Benson, Patsy Cummings, Sherwan Chowdhury, Holly Ramsey, Gordon Kay and Yusuf Osman

Reserve Members: Sue Bennett, Mark Johnson, Humayun Kabir, Ellily Ponnuthurai, Helen Redfern and Manju Shahul-Hameed

A meeting of the **Scrutiny Health & Social Care Sub-Committee** which you are hereby summoned to attend, will be held on **Monday, 22 January 2024 at 6.30 pm** in **Council Chamber, Town Hall, Katharine Street, Croydon CR0 1NX**.

Katherine Kerswell
Chief Executive
London Borough of Croydon
Bernard Weatherill House
8 Mint Walk, Croydon CR0 1EA

Klaudia Petecka
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www.croydon.gov.uk/meetings
Friday, 12 January 2024

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AGENDA – PART A

1. Apologies for Absence

To receive any apologies for absence from any members of the Committee.

2. Minutes of the Previous Meeting (Pages 5 - 14)

To approve the minutes of the meeting held on 3 October 2023 as an accurate record.

3. Disclosure of Interests

Members are invited to declare any disclosable pecuniary interests (DPIs) and other registrable and non-registrable interests they may have in relation to any item(s) of business on today's agenda.

4. Urgent Business (if any)

To receive notice of any business not on the agenda which in the opinion of the Chair, by reason of special circumstances, be considered as a matter of urgency.

5. Adult Social Care and Health Directorate 23-24 Budget, Savings and Transformation (Pages 15 - 22)

The Health and Social Care Scrutiny Sub-Committee is asked to:

1. To note 2023/24 Period 6 (September 2023) budget and savings position.
2. To note the updated performance position for the Directorate against the newly published Use of Resources report.
3. To note the update on strategic transformation, including the progress of the Strategic Delivery Partner.

6. Update from Healthwatch Croydon (Pages 23 - 24)

To receive an update from Healthwatch Croydon Co-optee, Gordon Kay, on the latest report from his organisation.

7. Scrutiny Work Programme 2022-23 (Pages 25 - 30)

The Health & Social Care Sub-Committee is asked to: -

1. Note the most recent version of its Work Programme, as presented in the report.
2. Consider whether there are any other items that should be provisionally added to the work programme as a result of the discussions held during the meeting.

PART B

8. Exclusion of the Press and Public

The following motion is to be moved and seconded where it is proposed to exclude the press and public from the remainder of a meeting:

“That, under Section 100A(4) of the Local Government Act, 1972, the press and public be excluded from the meeting for the following items of business on the grounds that it involves the likely disclosure of exempt information falling within those paragraphs indicated in Part 1 of Schedule 12A of the Local Government Act 1972, as amended.”

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Scrutiny Health & Social Care Sub-Committee

Meeting held on Tuesday, 3 October 2023 at 6.30 pm in Council Chamber, Town Hall,
Katharine Street, Croydon CR0 1NX

MINUTES

Present: Councillor Eunice O'Dame (Chair); Councillor Robert Ward (Vice-Chair);

Councillors Adele Benson, Patsy Cummings, Sherwan Chowdhury and Mark Johnson (reserve for Holly Ramsey)

Co-optees: Gordon Kay (Healthwatch Croydon) and Yusuf Osman (Resident Voice)

Also Present: Councillor Rowenna Davis (Chair of Scrutiny and Overview Committee; virtual), Janet Campbell (Shadow Cabinet Member for Health & Adult Social Care; virtual), Yvette Hopley (Cabinet Member for Health & Adult Social Care), Margaret Bird (Deputy Cabinet Member for Health and Adult Social Care)

Apologies: Councillor Holly Ramsey

PART A

25/23 **Minutes of the Previous Meeting**

The minutes of the meeting held on 20 June 2023 were agreed as an accurate record.

26/23 **Disclosure of Interests**

Councillor Ward declared non-pecuniary interest in the item 'Update on the Delivery of the Transformation Programme', as he was involved in the procurement of the strategic delivery partner through his role as a Deputy Cabinet Member.

27/23 **Urgent Business (if any)**

There were no items of urgent business for consideration of the Health & Social Care Sub-Committee at this meeting.

The Sub-Committee considered a report set out on pages 13 to 60 of the agenda which provided an overview of the work performed by the Croydon Safeguarding Adults Board between 1 April 2022 to 31 March 2023. The purpose of the Croydon Safeguarding Adult Board (CSAB) Annual Report was to detail the activity and effectiveness of the Board. It ensured that the statutory partners (Council, Health and Police), residents and other agencies were given the opportunity to provide objective feedback on the work and effectiveness of local arrangements for safeguarding adults. The report covered the 2022/23 priorities demonstrating what had been achieved and the work which needs to continue throughout 2023/24.

The Independent Chair of the CSAB, David Williams; the Council's Corporate Director for Adult Social Care & Health, Annette McPartland; the Council's Director of Adult Social Care Operations, Simon Robson; Sally Innis from NHS South West London and Fiona Martin from the MET Police attended the meeting for this item, to introduce the report and answer questions arising.

David Williams commended and introduced the report to the Sub-Committee, highlighting that it was an independent, multi-agency report and had been approved by the CSAB as required by the Care Act. It was also acknowledged that officers working on the report had a meeting with Sub-Committee members and all suggestions, especially concerning accessibility, made by the Members were agreed and would be implemented before the report was published.

Annette McPartland added during the introduction of the report that Nick Sherlock, Head of Safeguarding had retired recently and that the Council had successfully recruited an officer to take over the role. The recruitment process was a multi-agency one and people with lived experience were involved in the process. The newly appointed officer started their work on 3 November 2023. Annette McPartland also thanked Nick Sherlock for his hard work and contribution to Croydon.

Following the introduction of the report, the Sub-Committee had the opportunity to ask questions on the information provided. The first question concerned the lack of Prevention of Future Death Notices received. In response it was acknowledged that this was a borough-wide issue. The CSAB had been working with the Coronial Practice to identify issues that were stopping the relevant stakeholders from receiving them. It was further clarified that the notices should be delivered and in response it was assured that the CSAB was working to resolve this issue. In response to a question about the timescale for resolving the obstacles and receiving the notices, it was advised that this would be investigated, and a response would be provided. It was also

explained that at the moment the CSAB had identified it need to improve its understanding of the reporting process.

The next question concerned the number of Safeguarding Adult Reviews (SARs) over the year. It was confirmed that in the 2022-23 only two SARs were completed. The process usually took around six months to complete. In addition to that the process could be slowed down by deaths that occurred in the Borough.

It was questioned how the Sub-Committee could be assured that the recommendations deriving from SARs were being cascaded and embedded in the services. It was explained that the CSAB used a live action plan which was reviewed on a regular basis with the executive partners. Also, each action was monitored through an assigned RAG (Red, Amber Green) rating. Part of the assurance process was asking executive partners to provide examples for relevant actions. For example, on the implementation of new roles in the Croydon Health Service NHS Trust (CHS) which were developed to fill the gaps identified in transitional safeguarding.

The next question focused on the voice of the people in relation to temporary housing arrangements (e.g., B&Bs) and the elevated risk of exploitation. It was explained that housing and homelessness was very challenging in Croydon. The Council was actively trying to minimise the risk for individuals who went through appropriate assessments and had special needs (especially mental health-related). It was highlighted that supported housing and housing differ considerably in terms of managing the markets. When there were any safeguarding concerns, the dedicated quality assurance team would investigate the provider and improve the living situation.

As a follow up, it was questioned what was being done to improve the quality of service provided by the eight housing service providers in the borough who were identified as being inadequate. It was confirmed that there was close cooperation with the commissioning team that would or would not place residents in with these providers. It was also highlighted that some of those inadequate service providers were not operating anymore. However, they could not have been removed from the list until they were deregistered with the Care Quality Commission (CQC). In addition, Councillors were provided on a monthly basis with a report covering any concerns raised in relation to the providers. There was a protocol for provider concerns and there were quality monitoring officers who worked closely with the CQC. There was also evidence that the development system worked resulting in some of the providers improving over time. It was noted that there were many care agencies registered in Croydon, but the Council did not use the services of many of them.

Further reassurance was provided by the Cabinet Member for Health & Social Care, Councillor Yvette Hopley, who explained that she reviewed this area

regularly and was assured that there was a very strong team in place to monitor placements. Also, as many inadequate providers had been removed from the list in recent years, it meant that there were more 'good' providers in the Borough.

The next question asked for further information on the number and response time of safeguarding referrals and how it compares to the national average. It was advised that the response time had been reduced in comparison to the previous year. It was highlighted that it was a statutory responsibility for the CSAB, and it was delivered through joint work with stakeholders like FJC (formerly Family Justice Service). It was very important to ensure that help was delivered in a timely manner, for those people who met the statutory threshold.

As a follow-up, it was questioned what support was available for someone who did not meet the statutory criteria. It was advised that this would depend on an individual's needs. For instance, a social care or healthcare worker may be assigned to them, to ensure that they were signposted to available support and to provide a follow-up check on them. It was highlighted that it needed a partnership approach to ensure the appropriate level of support was provided. Reassurance was given that the questions around this topic were asked routinely, and there was Red Threat support available.

A question was asked about the ethnicity of those being referred and the significant gap in regard to the British Asian population in the borough. It was confirmed that CSAB were aware of this gap and was planning to work with third sector organisations such as the Asian Resource Centre to address the issue. There were also plans to make sure resources were presented in a more accessible way.

Further information was requested on the changes made to arrangements for police interventions in regard to mental health crises. Assurance was given that there would be more police attendance than had been represented in the media, but there would be considerable changes which would be in place by the end of October. The Police worked very closely with stakeholders like local authorities and mental health agencies. The change would ensure that the right professionals were available to respond to a person experiencing a mental health related crisis, while ensuring that they were not criminalised. However, the Police would still attend if there was an immediate threat to an individual or the public. In the upcoming weeks there would have conversations about what it meant in practice for the relevant stakeholders.

It was confirmed that South London and Maudsley NHS Foundation Trust (SLAM) supported this new approach and that it was being delivered through a partnership approach. However, where concerns were raised, there would be further work with the Police to ensure that everyone in the partnership felt confident about the changes. The Sub-Committee acknowledged that the

issue of police intervention in these circumstances was controversial and that there were two schools of thought – some preferred the Police not to be the first respondents, while others preferred the Police to be available to ensure that there was no risk for others. SLAM provided training around the Mental Health Act, which was agreed should be available to the Police.

At the conclusion of the item, the Chair thanked the attendees from the Croydon Safeguarding Adults Board for their attendance at the meeting and their engagement with the questions of the Sub-Committee.

Actions

Following its discussion of this item, the Sub-Committee agreed the following action to be followed up outside of the meeting: -

1. That an update on the timeline for the Prevention of Future Death Notice implementation will be requested.

Conclusions

Following its discussion of this item, the Sub-Committee reached the following conclusion:-

1. Following its review of the Croydon Safeguarding Adults Board Annual Report, the Sub-Committee concluded that there was reasonable evidence to provide reassurance that the partners were working well together.
2. Following the changes to the mental health interventions, the Sub-Committee welcomed confirmation that mental health training provided by South London and Maudsley NHS Foundation Trust would be available to Police officers.

29/23 Update on the delivery of the Transformation Programme

The Sub-Committee considered a report set out on pages 61 to 72 of the agenda which provided an update on the budget and saving process in the Adult Social Care and Health.

Annette McPartland introduced the report that covered the Directorate's performance in period 3 (April-June 2023). It was also noted that the report included information on preparation for the Local Government Association peer challenge due to happen in November 2023.

The first question considered the financial performance tables included in the report. It was explained that some figures were estimates based on (i) the costs that already occurred, and (ii) forecasts based on historical data. *Actual to Date* figures reflected what had been spend in period 3. *Forecast Variance*

indicated the end-of-year prediction, which forecasted an overspend of £1.2 million. A supplementary question was asked about how the officers determined the spending predictions, and how the actual spending figure for period 3 compared to the last year prediction. It was explained that the officers looked at relevant economic factors, including market conditions and inflation. Also, it was stressed that different periods would have different funding, e.g. period 4 would have a larger budget due to the winter pressures, and that managing the markers and predicting the future spends was a very challenging tasks as the trends could change rapidly. When the market situation changed, the Council might need to adjust its activities. It was assured that there were robust processes in the Council to ensure that the overspend would not increase considerably.

The next question considered the impact of the forecasted working-age adults overspend in Croydon. It was explained that the overspend was expected to drop as a result of managing the demand. As in many other local authorities there was an underspend in staffing cost. This helped to balance the budget, however, it hindered the delivery of services. Recently, the Council recruited a considerable number of newly qualified social workers. In addition to that, the Council was successful in delivering various medium-term financial savings. Delivery of the disability provision savings have been challenging, however, a designated group was established to support it and to ensure compliance with the Care Act. Also, the Council introduced *care cubed* – a funding matrix to identify benchmark values to ensure value for money - to ensure that the service provider did not increase their prices by unjustifiable amount. In addition to that the Council worked on developing an alternative to the traditional form of care. However, it would take six to twelve months to implement. It was assured that the situation was generally positive.

It was highlighted that the working-age adult demand was not only higher, but also the cost per capita was higher. The question was asked whether the Council anticipated a decrease in number of adults who needed the required support or in the cost of the necessary support. It was explained that it was supposed to be a mixture of both. For many adults that were currently receiving support, other forms of support would be more appropriate. Also, it was assured that they worked closely with different departments (including transition and housing teams) to ensure that the savings would be delivered.

A question was asked about the risks and amount of case work for newly qualified social workers. It was assured that the workload was being constantly monitored. A supplementary question was asked about the capacity for complicated and multi-faceted cases. It was assured that there was sufficient capacity. However, it was added that the complexity of cases had been increasing. Therefore, a priority was to ensure that the right funding is available.

The next question considered the deep-dive exercises mentioned in the report. It was explained that those deep-dive exercises were aimed at providing a better understanding of the services and what would be a path of a service user. The pathway review included not only Council-provided

services, but also signposting and services provided by the Council's partners. This has been an ongoing piece of work that was necessary to transform and improve services. Another question considered how autism and broader neurodiversity fitted into the pathway mapping, and what was the impact of the Council's autism strategy. It was explained that a lot of work had been done on autism and neurodiversity. One of the areas of focus was transitions for residents with learning disabilities, with an ongoing piece of work with learning disabilities teams from South West London and Croydon.

The final question asked about the internal assessment for the Care Quality Commission (CQC). It was explained that it was an internal document which was used to have a better understanding of the service areas, identify strengths and weaknesses, and to determine the plan of actions to improve those areas. In addition to that a Peer Challenge organised by the Local Government Association (LGA) was scheduled for November this year.

Action

Following its discussion of this item, the Sub-Committee agreed the following action to be followed up outside of the meeting: -

- That further information on the self-identified strength and weaknesses of adult social care and health services is provided to the Sub-Committee.

30/23 Update from Healthwatch Croydon

The Sub-Committee considered a report set out in the agenda supplement which set out reports produced by Healthwatch Croydon.

Gordon Kay introduced two Healthwatch Croydon reports covering – (i) [Young People's Mental Health](#); (ii) [London Ambulance Service strategy](#).

The Young People's Mental Health report was similar to a report conducted pre-Covid. It was acknowledged that there were some differences between pre- and post-Covid studies. However, the fundamentals were relatively unchanged. The main findings from the report include (i) recognition of signposting significance – there should be more targeted information about mental health support that was tailored for young people, as the research found that they were not fully aware of the available professional mental health services; (ii) most young people rely on friends and family as a source of support; (iii) face-to-face connections were very important and that it was young people preference over digital options.

The London Ambulance Service (LAS) strategy report concluded that LAS' resources were sufficient to deliver services and service users acknowledged

that challenges caused by the demand and issues with transferring patients into hospital. However, there were many challenges in delivering services such as first response provider. As a result, LAS changed parts of its strategy to consider more individualised care (especially in regard to neurodivergence and mental health), better communication, and more education about urgent emergency services.

During the focus group for LAS Health Watch Croydon identified that younger participants have significantly lower level of knowledge about urgent emergency services.

The first question asked whether enough had been done to ensure that people knew where to access defibrillators. It was mentioned that in the past there was a piece of work focused on mapping defibrillators in the Borough.

It was also stressed that there was a high number of Bleed Control Kits across the Borough and there could be a focus on promoting them and ensuring that people know or could easily find out where they were located.

It was acknowledged that it could be valuable to analyse the locations where heart attacks occur and locate new defibrillators based on these insights. It was added that that a potential obstacle to that can be the maintenance cost that could increase if the defibrillators are spread more sparsely.

Action

Following its discussion of this item, the Sub-Committee agreed the following action to be followed up outside of the meeting: -

- Jack Bedeman to provide more information on the Council's work on defibrillators (including mapping and raising awareness).

31/23 **Scrutiny Work Programme 2023-24**

The Sub-Committee considered a report on pages 73 to 78 of the agenda, which presented the work programme for review.

The Chair noted that the update on transformation programme and service deep-dives would be added to the work programme.

Resolved: That the current work programme for the Health & Social Care Sub-Committee is noted.

32/23 **Exclusion of the Press and Public**

This motion was not required.

The meeting ended at 9.00 pm

Signed:

Date:

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LONDON BOROUGH OF CROYDON

REPORT:	SCRUTINY HEALTH AND SOCIAL CARE SUB-COMMITTEE
DATE OF DECISION	22 January 2024
REPORT TITLE:	Adult Social Care and Health Directorate 2023-24 Budget, Savings and Transformation
CORPORATE DIRECTOR	Annette McPartland Corporate Director Adult Social Care & Health
LEAD OFFICER:	Bianca Byrne Director of Commissioning, Policy & Improvement Adult Social Care & Health
LEAD MEMBER:	Councillor Yvette Hopley Cabinet Member for Health and Adult Social Care
AUTHORITY TO TAKE DECISION	ASC Transformation has been identified as a priority in the Sub-Committee Work Programme
WARDS AFFECTED:	All

1 SUMMARY OF REPORT

- 1.1 This report continues the regular budget and savings progress updates to the Scrutiny Health and Social Care Sub-Committee. It provides the Adult Social Care & Health (ASCH) Directorate's financial performance at Period 6 (September 2023), and current transformation progress in relation to the 2021/2024 Medium Term Financial Strategy (MTFS) and future 2024/2027 MTFS.
- 1.2 On transformation performance, the core focus has been on 2023/24 delivery within the strategic managing demand programme, this will be enhanced by the Strategic Delivery Partner commencing January 2024.
- 1.3 Finally, the report sets out the indicative strategic transformation plan being developed for the new medium term financial strategy period, April 2024 /March 2027.

2 RECOMMENDATIONS

- 2.1 For the reasons set out in the report, the Sub-Committee is recommended:
 - 2.1.1 To note 2023/24 Period 6 (September 2023) budget and savings position.
 - 2.1.2 To note the updated performance position for the Directorate against the newly published Use of Resources report.
 - 2.1.3 To note the update on strategic transformation, including the progress of the Strategic Delivery Partner.

3 DIRECTORATE GENERAL FUND REVENUE BUDGET SUMMARY

Table showing the revenue forecasts for the directorate

Net Budget	Actuals to Date	Forecast	Forecast Variance	Prior Month Forecast Variance	Change in Forecast Variance
(£m)	(£m)	(£m)	(£m)	(£m)	(£m)
141.0	85.6	141.2	0.2	1.4	(1.2)

Table showing the directorate variances

Division	Net Budget	Actuals to Date	Forecast	Forecast Variance
	(£m)	(£m)	(£m)	(£m)
Adult Social Care Operations	120.9	74.1	121.7	0.8
Adult Strategic Commissioning, Policy & Improvement	18.2	10.5	17.7	(0.5)
Central ASCH	1.9	1.0	1.8	(0.1)
Total ASCH	141.0	85.6	141.2	0.2

- 3.1 At period 6 the ASCH Directorate has a forecast overspend of £0.2m (0.1%) against a budget of £141.0m which is an improvement of £1.2m.
- 3.2 The ASCH Directorate has challenging savings targets totalling circa £10m to deliver in 2023-24 on placements and care packages through demand management, commissioning and review of care packages. Adult Social Care Operations - Forecast overspend of £0.8m
- 3.3 Operations has an overspend of £0.8m on care packages and support which is mitigated by underspends in Strategic Commissioning, Policy and Improvement and Central ASCH.

Risks

- 3.4 Risks continue in the provider market from inflation including higher fuel, labour and property costs which may result in claims for increased fees and/or financial instability with the potential for 'handing back' contracts.
- 3.5 The potential reprovisioning costs if providers exit the market could be significant. It should be noted that this risk is already materialising. Providers are requesting increases in costs for existing care packages and new placements are increasing in costs. These are included in the forecast and are hardest felt in the working age adult cohort.

Opportunities

3.6 Savings achievement is improving and will support the forecast going forward for the ASCH directorate.

4 PERFORMANCE

4.1 In January 2023 the Directorate provided this Sub-Committee with positive key analysis of the year on year performance movement between 2020/21 and 2021/22.

4.2 In November the Local Government Association published its 'Use of Resources (2022/23)' benchmarking report for adult social care. This allows us to provide an updated Croydon position to Scrutiny.

4.3 What should also be noted, our 2021/24 performance objectives were set as below, reducing activity/expenditure to:

- The English average or below for older adults by March 2024.
- The London average or below for younger adults by March 2024.
- Whilst fulfilling all our statutory responsibilities.

4.4 Moving forward, as part of the Exit Strategy for the Improvement and Assurance Panel (March 2025); activity and expenditure targets for the Directorate have been agreed against London averages only.

4.5 The tables below provide the 2022/23 performance against the London benchmarking.

4.6 65+, spend per Adult in Long Term Support

Year	Croydon	London Mean	Variance
2021/22	£879.81	£994.76	- £114.95
2022/23	£1,103.57	£1,109.01	- £5.44

- Cost per head position has **got worse** since 2021/22 when it was below the London mean.
- **Analysis indicates this is a swing due to how the data return treats NHS Income; i.e. 21/22 was likely artificially suppressed by £10m additional NHS income due to Covid.**
- Cost per head in London and England has increased by 9% and 12% respectively.
- Analysis of the underlying gross spend on Over 65s (before income adjustments), means Croydon has increased by 4%.
- Compared to London, Croydon is still **just below** the London mean.
- Ranking for long term spend has **not improved**, the NHS income is a factor, and the lessons learned from this have been considered for future submission.
- Rank 21/22 = 60, Rank 22/23 = 35, (1 = highest spending LA).

4.7 65+, the percentage of population in Long Term Support

Year	Croydon	London Mean	Variance
2021/22	6.74%	7.22%	- 0.48%
2022/23	5.78%	7.40%	- 1.62%

- Activity **continues to decrease** as a percentage of the relevant population.
- In absolute terms, activity decreased by 14% year on year.
- This is equivalent to 510 people.
- Croydon is **supporting less people as a percentage of the population** than London Mean, which is increasing.

4.8 18-64, spend per Adult in Long Term Support

Year	Croydon	London Mean	Variance
2021/22	£246.13	£205.68	£40.45
2022/23	£262.46	£227.02	£35.44

- Cost per head position is **improving**, Croydon is **moving closer** to the London Mean but it is still **not** where it needs to be for cost.
- Based on Actual cost per head, the cost per head went up slower in Croydon (7%) than in London (11%) and England (11%).
- Ranking for long term spend **improved**.
- Rank 21/22 = 61, Rank 22/23 = 77, (1 = highest spending LA).

4.9 18-64, the percentage of population in Long Term Support

Year	Croydon	London Mean	Variance
2021/22	0.94%	0.81%	0.13%
2022/23	0.92%	0.81%	0.11%

- Activity continues to decrease as a percentage of the relevant population.
- Croydon continues to move to the London Mean but requires improvement.
- In absolute terms, activity decreased by 2.58% year on year.
- This is equivalent to 60 people.
- Numbers in residential and nursing care remains the highest rate in London.
- The Strategic Delivery Partner will review the residential and nursing data during the diagnostic.

5 MANAGING DEMAND TRANSFORMATION 2023 – 2024

5.1 The programme is complex and ambitious with a number of interdependencies and enablers. The focus areas in 2023/24 have been:

- Prevention: improving Information, Advice and Guidance (IAG) both digitally and in the community.
- Establishing a comprehensive front door, with a view to longer term integration.
- A capacity and demand model for out of hospital care (also known as the Front Runner programme).
- Intermediate care (inclusive of but wider than reablement).
- Long term care and support – principles of promoting independence and progression for all client groups.

5.2 Information Advice and Guidance (IAG) - Prevention

- Structural changes have been made to ASCH webpages and now moved to business as usual.
- A section for Providers is being mapped and will be finalised in February 2024.
- User testing will continue to ensure the changes made have improved the customer journey.
- Croydon Digital Services about to embark on complementary changes to Housing webpages.
- Future phase will include a video of how Adult Social Care works in Croydon and how hospital discharges work.

5.2 Portals

- Referral Portals have been developed and implemented, resulting in better quality referrals being received. Text boxes are mandatory and automatically populate LiquidLogic Adult System forms, a good level of information is being received resulting in better triaging.
- End-to-end video has been distributed to the Adult Early Intervention and Support Service for guidance.
- Single-sign on is still undergoing testing. Roll-out will be no earlier than late-January, however it is slow process.
- In preparation for project closure, the Digital Systems Team are now dealing with technical issues or changes to the Portal.

5.3 Front door pathway reviews

- Pathway reviews that have mapped out the processes and pathways into ASCH have finished. There is a need to revisit the Housing related pathways and embark on a Safeguarding pathway review now the new Head of Service is in post.
- Clearer and faster routes to services and support have been identified. For example Dementia Day Services can now be accessed from Adult Early Intervention and Support Service Team.

5.4 Face to face support in the communities

- Local Voluntary Partnerships (LVP) Board has agreed to focus on four hubs to robustly trial the operating model and measure the impact of the new ways of working. The four hubs are:
 - Age UK Croydon, Scratchley Hall, Brigstock Road (north)
 - Woodside Baptist Church (central)
 - New Addington Pathfinders, The Octagon (south)
 - Fieldway Family Centre (south)
- In addition to the four hubs, the Health Communities Together (HCT) programme is supporting other hubs in Croydon to improve access to community support. Their social activities underpin our Community Hub model which is measuring its outcomes by the number of people we support to become active in their community.
- HCT is about to implement Upshot, a cloud based tool to monitor and track the outcomes achieved across the programme.

5.5 Technology Enabled Care

- Adult Social Care and Health Directorate (ASCH) has identified that Technology Enabled Care (TEC) is integral to supporting residents to live safely in their own homes and to help maintain their independence for as long as they can. This includes keeping pace with technological developments and maximising available resources to improve their quality of life, preventing escalation of needs and reducing the risk of social isolation.
- A specification has been developed and is currently moving through governance. The specification is for a Technology Enabled Care (TEC) specialist diagnostic review to be carried out across ASCH and associated service areas across the London Borough of Croydon.
- The Council is seeking a suitably qualified TEC Delivery Partner to work with its ASCH Directorate to enhance our managing demand transformation programme through a phase 1 TEC review and recommendations, and then phase 2 design and implementation.

6 2024 – 27: UPDATE ON THE DIRECTORATE TRANSFORMATION PLAN

6.1 The 25 October 2023 Cabinet [Public Reports Pack](#) set out an update on the 2024-28 Medium Term Financial Strategy.

6.2 For Adult Social Care and Health, the Appendix B document detailed savings required from the Directorate, shown below.

Savings

	2024-25	2025-26	2026-27	2027-28
	£m	£m	£m	£m
Adult Social Care and Health	5.0	4.0	4.0	0

- 6.3 The savings to be delivered in 2024-25 will be the responsibility of the Directorate, with evidence based plans already in place, and achieving against the target. The current forecast is that the full savings will be achieved through reducing operational budgets. This continues to use the successful methodology of reviewing packages of care and managing demand, that achieved savings in the 2021-2024 Medium Term Financial Strategy.
- 6.4 In respect of savings to be delivered in 2025-27, in January 2024 the Directorate will complete its procurement of a two-phase contract of a strategic deliver partner, to support delivery of the transformation and savings required over the next 3 years. The programme of work being delivered will enhance the pace of delivery within the existing Strategic Managing Demand programme.
- 6.5 The programme is expected to be delivered over 20 – 30 months. The successful partner will work alongside the Directorate Management Team; through a two-phase process, with a 'go / no go' gateway between phases, they will deliver:
- 6.5.1 **Phase 1:** An end to end operating model diagnostic to identify opportunities to further transform our services, significantly improve the outcomes and independence of our residents and deliver annualised financial benefits.
- 6.5.2 **Phase 2:** Design and implement the new structures, processes and ways of working; enabling delivery of our statutory duties and a sustainable budget reduction.
- 6.6 A sample of the opportunities to be reviewed are to include:
- The assessment and reablement offer so that working age adults and older people can become more independent and receive a more consistent offer at the end of the assessment process.
 - Across older people and working age adults, of the residents who go onto a long-term package of care; how can these individuals be systematically identified and initially referred to short-term support packages maximising their independence.
 - Across older people and working age adults there is the opportunity to reduce / step down inappropriate residential placements, which is anticipated to substantially enhance their independence.
 - Opportunities for improving our provider market and commissioning new services.
 - Opportunities with the Housing Directorate.
 - Staff ways of working will be improved with a view to reducing duplication and administrative tasks and enabling an increase in productivity and contact time with residents (including alignment with the What Good Looks Like digital framework).
 - A legacy of skills transfer and development to encourage the delivery of this and future programmes.

- 6.7 Phase one is a hard stop, go/no go stage. To move into the phase two design and implementation; there must be Directorate, Corporate and Executive Mayor sign off on the proposed performance and savings metrics; and the blueprint for the operating model. All of the above must maintain delivery of our statutory duties. The delivery partner will also lead on the implementation and then transition of the services to business as usual, aligned to a strict benefits realisation governance process, and in line with our Strategic Managing Demand programme.
- 6.8 The procurement of a strategic delivery partner is a core strategy for the Directorate to identify and enable evidenced savings to be agreed and delivered; as well as a substantial transformation of the core service model.
- 6.9 Please note that Appendix B of the Cabinet [Public Reports Pack](#), confirms the savings figures for 2025-26 and 2026-27 are indicative only at this stage and will be reviewed next year following completion of the diagnostic work.
- 6.10 Where there is an opportunity to achieve savings identified for 2025-26 and 2026-27 at an earlier stage, this will be considered. However, the 2024-25 savings target of £5m would need to have been achieved first.

Demand Pressures

- 6.11 Appendix B of the [Public Reports Pack](#) also set out the Demographic Growth provision for the Directorate. This provision is based on national growth advice provided by the Association of Directors of Adult Social Services (ADASS), and the Local Government Association’s improvement agency – Partners in Care and Health.

	2024-25	2025-26	2026-27	2027-28
	£m	£m	£m	£m
Adult Social Care and Health	4,530	4,712	4,900	5,096

7 NEXT STEPS

- 7.1 Following receipt from Sub-Committee Members on further areas for focus, officers will prepare detailed reports for presentation at the designated future meeting.
- 7.2 In particular, is anticipated by the Directorate that the Scrutiny Health and Social Care Sub-Committee will wish to be updated on the developments of the work of the Strategic Delivery Partner, and the Diagnostic report to inform the final decisions taken of the implementation of a new operating model for the Directorate.

CONTACT OFFICER:

Annette McPartland
Corporate Director, Adult Social Care & Health

LONDON BOROUGH OF CROYDON

REPORT:	Health & Social Care Scrutiny Sub-Committee
DATE:	22 January 2024
REPORT TITLE:	Update from Healthwatch Croydon
PERSON LEADING AT SCRUTINY MEETIN:	Gordon Kay Co-optee Sub-Committee Member, Healthwatch Croydon
ORIGIN OF ITEM:	The Health & Social Care Sub-Committee's is regularly updated on latest reports from Healthwatch Croydon to inform its work programme.
BRIEF FOR THE COMMITTEE:	Cllr Eunice O'Dame, Chair of Health and Social Care Sub-Committee
AUTHORITY TO TAKE DECISION:	The Health & Social Care Sub-Committee is asked to note the update from Healthwatch Croydon.
PUBLIC/ EXEMPT:	Public

1 Update from Healthwatch Croydon

- 1.1 The Health & Social Care Scrutiny Sub-Committee has been provided with recent reports published by Healthwatch Croydon. The reports cover the following topics: (1) Asylum seekers health and wellbeing survey; (2) Mystery shop of Croydon's GP websites.
- 1.2 The Health & Social Care Sub-Committee is asked to note the update from Healthwatch Croydon.

2 Links to Healthwatch Croydon Reports

- 1.3 [Asylum seekers health and wellbeing survey](#)
- 1.4 [Mystery shop of Croydon's GP websites](#)

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LONDON BOROUGH OF CROYDON

REPORT:	HEALTH AND SOCIAL CARE SUB-COMMITTEE	
DATE OF DECISION	22 January 2024	
REPORT TITLE:	Health & Social Care Sub-Committee Work Programme 2023-24	
CORPORATE DIRECTOR / DIRECTOR:	Stephen Lawrence-Orumwense, Director of Legal Services	
LEAD OFFICER:	Simon Trevaskis, Senior Democratic Services & Governance Officer Email: simon.trevaskis@croydon.gov.uk Telephone: Extn:27207	
LEAD MEMBER:	Cllr Eunice O’Dame, Chair of Health and Social Care Sub-Committee	
AUTHORITY TO TAKE DECISION:	The Health & Social Care Sub-Committee is able to review and suggest updates to its work programme.	
KEY DECISION?	No	REASON: Not applicable
CONTAINS EXEMPT INFORMATION?	No	Grounds for the exemption: Not Applicable
WARDS AFFECTED:	ALL	

1 **HEALTH & SOCIAL CARE SUB-COMMITTEE WORK PROGRAMME 2023-24**

- 1.1 This agenda item has been included on the agenda to give the Health & Social Care Sub-Committee the opportunity to consider its work programme for the 2023/24 municipal year.
- 1.2 Set out in Appendix 1 is a copy of the work programme for 2023-24, which at this time, has only be provisionally planned until the next meeting. Following this meeting, further work can be undertaken to scope the areas suggested to allow the further development of the work programme.
- 1.3 At its meeting on the 6 June 2023, the Scrutiny & Overview Committee set the following principles as a guide for setting work programmes in the year ahead. The three principles are:-
 - 1. **The Public’s Money.** Scrutiny wants reassurance that taxpayers’ money is put to best use. At a time when the Council is making cuts to balance the books, it has no money to waste. In the middle of a cost-of-living crisis, every pound of public money should be valued. Scrutiny will aim to look at the impact of any financial decisions on the public and the Council’s finances, including knock-on effects.

We will aim to research best practice and to provide suggestions as well as criticism.

2. **The Public's Services.** Scrutiny wants reassurance that services are improving. This is about leadership, culture and organisation as much as it is about budgets. We will seek reassurance that even in difficult financial circumstances, we are still meeting our duty of care to the most vulnerable. Scrutiny will listen and learn from the public's experiences of service performance to guide its work on Croydon's transformation.
3. **The Public's Voice.** Scrutiny wants to make sure that the Council is transparent, open and engaging with the people it exists to serve. Scrutiny will monitor the planned improvements in governance for Croydon's local democracy, as well as inviting public voices into the Scrutiny process itself. The Mayor was elected on a mandate to "listen to Croydon" and Scrutiny will hold the executive to account for this pledge.

1.4 From an initial discussion with the Corporate Director for Adult Social Care & Health, The Chair and Vice-Chair, were advised that the key priority areas for the service were:-

- Delivering the required savings, while making sure they did not have a detrimental impact on residents.
- Delivering the Transformation Programme.
- Preparing for the CQC Assurance process.
- Croydon Adult Safeguarding Board – Annual Report.

1.5 The Sub-Committee has the opportunity to discuss any other items that it wishes to may wish to add to its work programme related to either health or social care.

1.6 The Sub-Committee is able to propose changes to its work programme at any time during the year, but in line with Constitution, the final decision on any changes to any of the Committee/Sub-Committee work programmes rests with the Chairs & Vice-Chairs Group, following consultation with officers.

2 RECOMMENDATIONS

2.1 The Health and Social Care Sub-Committee is recommended:

- 1 Note the most draft version of its Work Programme, as presented in the report.
- 2 Consider whether there are any other items that should be provisionally added to the work programme for scoping as a result of the discussions held during the meeting.

3 REASONS FOR RECOMMENDATIONS

3.1 Setting a work programme provides an opportunity for the Sub-Committee to ensure it is focussed on high priority issues affecting the services provided to residents.

2. WORK PROGRAMME

2.1 The proposed work programme is attached at Appendix A.

Additional Scrutiny Topics

2.3 Members of the Sub-Committee are invited to suggest any other items that they consider appropriate for the Work Programme. However, due to the time limitations at Committee meetings, it is suggested that no proposed agenda contain more than two items of substantive business in order to allow effective scrutiny of items already listed.

Participation in Scrutiny

2.4 Members of the Sub-Committee are also requested to give consideration to any persons that it wishes to attend future meetings to assist in the consideration of agenda items. This may include Cabinet Members, Council or other public agency officers or representatives of relevant communities.

Appendices

APPENDIX A: Work Programme 2023/24 for the Health & Social Care Sub-Committee.

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Health & Social Care Sub-Committee

The below table sets out the working version of the Health & Social Care Sub-Committee work programme. The items have been scheduled following discussion with officers and may be subject to change depending on any new emerging priorities taking precedent.

Meeting Date	Item	Scope	Directorate & Lead Officer
22 January 2024	ASCH Budget deep-dive	The Health and Social Care Sub-Committee is asked to review the information provided on budget proposals.	Adults Hannah Balzaretta
	Update on the Transformation Programme	The Health and Social Care Sub-Committee is asked to review the Transformation Programme progress and plans.	Adults Hannah Balzaretta
	Healthwatch Croydon Update	The Health & Social Care Sub-Committee is asked to note the update from Healthwatch Croydon.	Healthwatch Croydon Gordon Kay
12 March 2024	CQC Assurance	To receive an update on the CQC Assurance process.	Adults Hannah Balzaretta

Areas to schedule

The following items haven't been scheduled into the work programme but have been previously identified as areas of scrutiny to be scheduled during the year ahead.

Unallocated Items	Notes
A review of the cost of out of borough placements	Arising from the discussion on mental health provision in the borough
Commissioning for Community Sexual Health Services	To feed into the commissioning process of community sexual health services by the Public Health team.
Dementia Strategy	
CAMHS & SLAM	A review of the mental health services available for young people focusing on the transition between services.
Menopausal Health Services	To review the availability of menopausal services in the borough
Integrated Care System	To review the impact of the new ICS approach to services in the borough.
Dental Services	To review the provision of dental services in the borough.
Prostate Cancer Services	
South West London – consultation and reorganisation	
Immunisation	
Ongoing work with hospitals and commissioning	
Prevention of unhealthy and promotion of healthy behaviours	