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Adult social care:

Delivering and innovating through difficult times





About COUNTY SPOTLIGHT

At the County Councils Network (CCN) one our core objectives as a national representative body is to share the innovative work our councils are doing on a daily basis to provide vital frontline services, support local economies, and create thriving communities.

This regular publication seeks to shine the spotlight on the most recent best practice and innovative solutions being put forward by our member councils across a range of different policy areas. Alongside this, it provides an update on the national policy landscape and commentary from our lead members and strategic partners.

To find our more about future themes, or to recommend a case study, please contact ian.burbidge@local.gov.uk.

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View from the CCN

Adult social care, without doubt, is one of the

most important service areas for the County

Councils Network's member councils. The ability

CCN



to shape and improve people's lives for the better is something that I and my colleagues are hugely passionate about.

For many of us in local government over the last decade has been 'doing more with less', and that is particularly true in adult social care where a decline in core funding has been at a time when demand has increased.

CCN member councils have responded to the challenge – transforming services to ensure that those in care live fulfilling and independent lives wherever possible.

The sector stepped up during the Coronavirus pandemic to protect and support the most vulnerable in our societies and in recent years we have ramped up our efforts to integrate health and care services and reduce pressure on the NHS.

As this publication today shows, there is a significant amount of ground-breaking work going on in adult social care services across England's counties, whether that be investing in brand new technology – a European first - to help care users with daily tasks, pioneering accommodation schemes for adults with learning disabilities, or by digitising care records so it speeds up decision-making and takes pressure of the NHS.

This excellent work from CCN's members shows that without doubt, the best place for social care is in the hands of democratically elected councils across the country.

But it is fair to say that substantial challenges still remain.

Cllr Martin Tett

CCN Adult Social Care Spokesperson

On average, county authorities are spending close to half their entire budgets on adult social care – and a sizeable amount of that budget is spent on working-age adults with severe learning disabilities, who are thankfully living longer.

These demographic changes will only go one way, which is why it is vital that the CCN will continue to press the case for fair and sustainable funding in adult social care in the future. Only a few weeks ago, our advocacy bore fruit with CCN being one of the leading voices in arguing for resource for inflationary pressures in social care from the Autumn Statement.

The network was also at the forefront of successfully arguing for a delay to the government's forthcoming adult social care charging reforms, which are now postponed until October 2023. We all support the premise of these reforms but introducing them next year with services creaking at the seams was a recipe for disaster.

I know that colleagues will use the extra funding provided by the Chancellor effectively over the next few years, as this report sets out. This is not only in easing the pressure on the wider health system, but in continuing to innovate and being unafraid to try different things to improve the lives of those requiring care.

Strategic Partner View

Last month we heard some positive news for adult social care; an additional £2.8bn of funding, rising to £4.7bn the following year, and, crucially, a delay to the implementation of charging reform policy of two years.

Broadly I think most will welcome the delay, and this was something CCN lobbied for based on the analysis we conducted together for our report *Preparing for Reform*, to allow more time to carry out the transformation necessary to implement charging reform sustainably.

However, adult social care services continue to work through an incredibly ambitious programme of other reforms - reform of Liberty Protection Safeguards, the implementation of CQC assurance and the move to Integrated Care Systems. This is alongside recovering from the pandemic and developing new ways of working to manage its legacy, as well as delivering existing transformation priorities to tackle underlying challenges in the sector. Yet further pressure is caused by the state of the national economy, which is leading to high inflationary costs.

While the funding is therefore extremely welcome, and probably more than expected, given the change and challenge around us, this money is not a silver bullet by any means. However, it does provide some breathing space to refocus efforts on transformation; to stabilise and improve service resilience; and continue the great progress already being made.

With this brief respite, counties have an opportunity to redouble efforts to sustainably tackle wicked issues such as rising demand for social care assessment and reviews, increased pressure on the workforce, and instability in the provider market.

NEWTON



While so far overlooked by central government, there is also the potential to locally reform how to best support the working age adult population, who now account for over half of local authority spending on adult social care.

We know that many county authorities are already leading the way through transforming and innovating in adult social care – whether around the prevention agenda, digital transformation, or their workforce strategies, and we welcome the opportunity to work alongside many of you to explore new models of service delivery. It is in this context that we welcome this timely 'Spotlight' to share good practice.



The latest policy landscape

Challenging times in adult social care



In adult social care this year, arguably the biggest policy focus has been on the government's proposed charging reforms. Over the past 12 months, CCN has been at the forefront of understanding the potential impact of the proposed reforms.

In May, our report with Newton produced the first independent and regional analysis on the impact of means-test, cap on care and operational implications of the reforms.¹

This built on separate CCN research, published in March with LaingBuisson, on the potential costs of implementing a new 'fair cost of care' and Section 18(3) of the Care Act; the duty to allow self-funder to ask councils to arrange care on their behalf.²

The analysis contained in these reports showed that the costs of the reforms could far outstrip government estimates by at least £10bn over the next decade, with CCN member councils facing the largest shortfall.

Most importantly in the short-term, these reports also revealed the scale of the operational and workforce challenges presented by implementing the reforms over the next 12 months. Councils would need to recruit almost 4,000 additional staff to carry out an estimated 200,000 new care and financial assessments each year. This would come at a time when there is already 542,000 people waiting for care packages, assessments, or direct payments and thousands social worker vacancies in England.³

CCN consistently outlined that we support the principles underpinning charging reforms. But, we also argued that stabilising social care by tackling existing pressures within the system had to be the immediate priority.

These pressures are undoubtedly worsening. Councils and care providers are facing a perfect storm of rising demand, fewer care home beds, chronic staff shortages and acute inflationary pressures. Previous CCN analysis has shown higher inflation would add £3.7bn in additional costs this year and next, double the expected rise.⁴

New analysis contained in this document shows that demand for services is also rising, particularly in counties; with the number of service requests growing 6.2% since 2019 higher than the national average of 3.4%. Critically, the number of those requesting support from local authorities with their care needs that do not receive any formal care service has grown and remains at 58% of all requests for council support. This illustrates the level of unmet needs due to funding pressures leading to a rationing of access to care.

That is why CCN led calls for the reforms to be delayed, arguing for the funding to be retained and reprioritised to meet inflationary pressures. ⁵ The Chancellor responded to our advocacy – and in October's Autumn Statement announced a two-year delay to the reforms, and importantly, that £3.2bn of previously earmarked funding for the changes would be retained and spent on immediate pressures. In addition, £2.7bn of additional funding was made available for councils and the NHS to commission more care packages, address workforce pressures, and improve hospital discharge times.

The pause in reform and welcome investment creates valuable breathing space for councils to stabilise the existing system in the face of the multiple challenges described above, while also working with the health system to successfully deploy newly announced discharge funds to get more people out of hospital quicker.

^[1] CCN and Newton - Preparing for Reform (2022) https://www.countycouncilsnetwork.org.uk/new-analysis-reveals-the-regional-impact-on-local-councils-of-the-governments-

flagship-adult-care-reforms/ [2] CCN and LaingBuisson - Impact Assessment of the Impelementation of Section 18(3) of the Care Act (2022) https://www.countycouncilsnetwork.org.uk/new-analysis-warns-

government-has-seriously-underestimated-the-costs-of-adult-social-care-charging-reforms/

[3] Association of Directors of Adult Social Services - Waiting for Care (2022) https://www.adass.org.uk/waiting-for-care-adass-report-may-2022
[4] CCN - Five Point Plan for County and Unitary Authorities (2022) <a href="https://www.countycouncilsnetwork.org.uk/councils-call-on-prime-minister-to-deliver-on-her-promise-to-deliver-on-her-promis

provide-more-funding-for-social-care/
[5] CCN - Five Point Plan for County and Unitary Authoriities (2022) https://www.countycouncilsnetwork.org.uk/councils-call-for-delay-to-flagship-social-care-reforms





To successfully achieve this, it imperative that councils are given as much local flexibility as possible to use newly announced resources, while also ensuring that funds are distributed jointly across both health and social care to tackle the root causes of the challenges in social care not just pressures facing the NHS.

But while charging reforms have rightly been delayed and councils focus on immediate pressures this winter, the imperative for system reform is as important as ever.

The previous government's White Paper, People at the Heart of Care, alongside CCN's *The Future of Adult Social Care* ⁶ set out a wide range of proposals beyond charging reforms that could ultimately become a comprehensive plan for reforming the social care system. However, future investment needs to go hand in hand with the opportunities for service improvement and transformation which drive down long-term care costs through better demand management, prevention, and new approaches to service delivery.

As this County Spotlight publication illustrates, despite challenging times in adult social care, CCN member councils are already innovating in their programmes and service delivery to make services better for the future.

Counties want to continue to work in tandem with government to deliver wider system reform to ensure a sustainable and high-quality adult social care system.

These include reducing workforce pressures; managing the market transition away from traditional institutional forms of residential care towards preventative forms of community based care; and investing in rapidly advancing technologies which will both reduce costs, and improve efficiency and productivity across the social care system.

Key to delivering this vision will be reinforcing the anticipated increase in the use of domiciliary care over residential settings and the better use of short-term support such as reablement to prevent the escalation of long-term care needs.

Rebalancing could be a positive step in reducing the number of individuals being placed in high dependency settings prematurely.

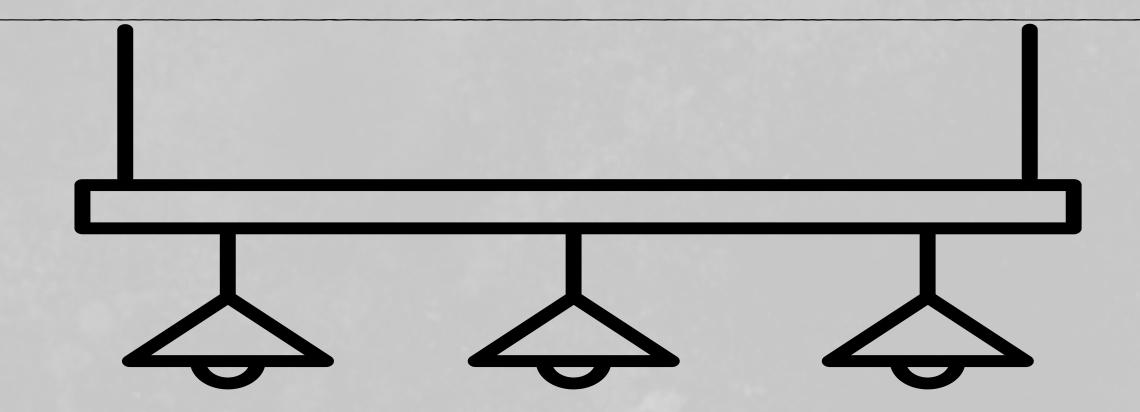
Data contained in this report shows that there are already steps being taken in this direction, with the most recent adult social care activity data in counties showing an increase in community-based care, short term support, and a continuing reduction in residential care.

But it is clear we need to go further. Our research with Newton showed at least 18% of the 60,000 older adults that move into a publicly funded care homes each year could be supported in a more independent setting, such as their own home or in an extra care development. This change of setting would offset spending requirements on long-term care by an estimated £178m per year. In addition, the research showed that 90,000 more older people could benefit from more effective use of short-term services, reducing long term care costs by £867m per year.⁷

Although there is more that can achieved if councils have the right resources and powers to optimise local delivery, there is a lot that local government can be proud of in delivering social care during difficult times and preparing for wide-ranging system reform.

As this report shows, CCN members have shown they are adept at innovating and transforming services, so they are not only sustainable but that they work better for care users; improving their independence and wellbeing – and ultimately improving their lives.

THE COUNTY CONTEXT



Expenditure

Annual expenditure on adult social care services



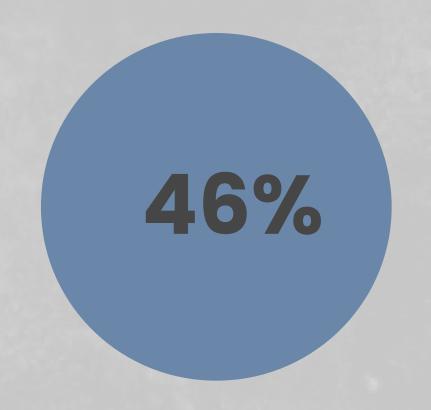
47% of all council spending on adult social care

Annual average expenditure by a CCN council



Compared to an upper-tier average of £139m

Average proportion of a CCN council budget



Compared to **37%** in the average Metropolitan Borough

Proportion of expenditure on younger adults (18-64)



Despite only 33% of those in long-term care younger adults

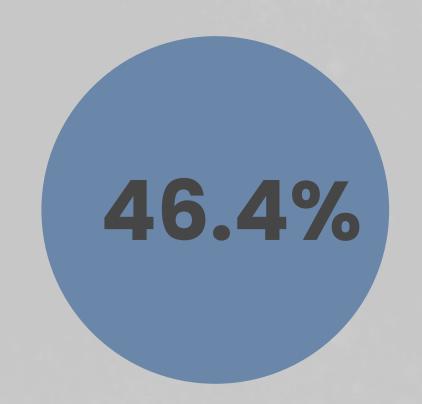
Demographics

Residents aged 65 and over in 2021



1m more over 65s since 2011 - a 23.3% increase

Average % of self funders in care homes



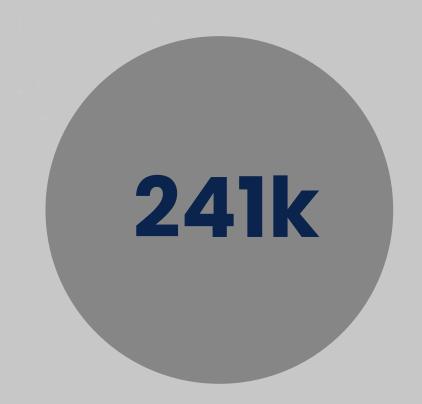
With 11 CCN member councils having a rate above 50%

Number of care homes



55% of all care homes in England

Number of care home beds



An average of **5,483** beds per CCN member council

Service Users

Number of service requests per year in an average CCN Council



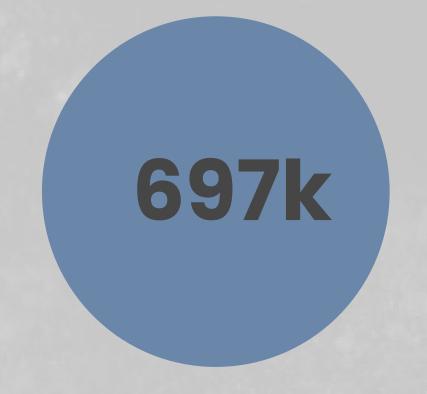
An average of **70** requests per day per CCN council

Increase in number of service requests 2020-2022



85% of all the increase in service requests nationally

Service requests from older adults (65+) in 2021/22



51% of all service requests nationally in this age group

Service requests from younger adults (18-64) in 2021/22



41% of all service requests nationally in this age group

What does the latest service request data tell us about adult social care in CCN member councils?

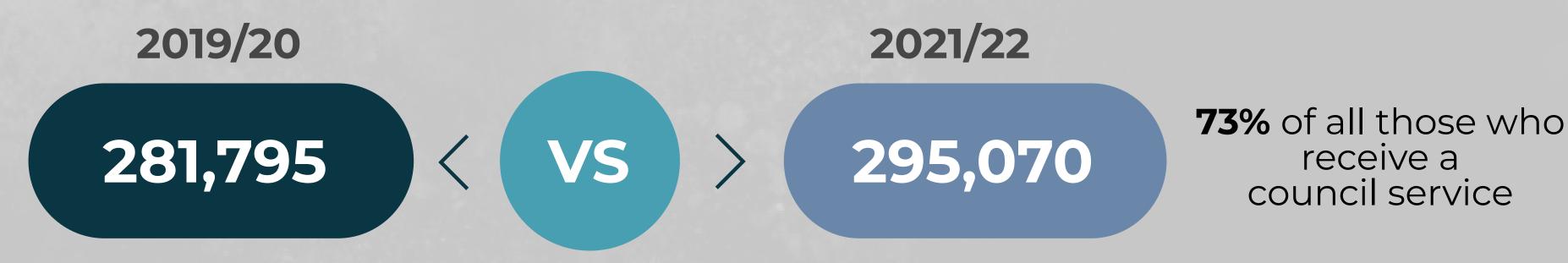
Demand for social care is growing faster in counties...





The number receiving short-term support is increasing...

Number of requests resulting in services to maximise independence, low level or short term support



And the number of those receiving community care is also increasing....





15% of all those who receive a council service

6.2% increase

compared to

3.4% nationally

While the number going into residential or nursing care is decreasing....

Number of requests resulting in long-term residential or nursing care



4% of all those who receive a council service

But, due to funding pressures, the number receiving no support remains the most likely outcome of a service request.

Number of requests resulting in no service, signposting or universal services



58% of all those requesting a service do not receive one

THEME 1: Enhancing care users' lives Helping to ensure those in care live fulfilling and independent lives

At its core, social care should be viewed as empowering, not debilitating. Adults who require care should be given as many opportunities to maximise their independence and live as fulfilling lives as possible while receiving residential, nursing or informal care.

CCN members have consistently aspired to achieve this – wrapping services round the individual's needs and trying to ensure that as many people are able to live as independently in their communities as possible, unless they have acute needs.

For a number of years, local authorities have grappled with the twin forces of declining core funding and rising demand in adult social care – with CCN members particularly exposed owing to their populations ageing more rapidly.

But despite this, county and unitary councils in CCN membership have shown their resilience and ability to innovate, and there are numerous examples across counties where councils have transformed services and maximised resource to ensure that care users live better and more independent lives.

As the case studies in this section show, these could be from the creation and commissioning of extra-care housing schemes that allow elderly people to live in the same development as on-site carers – maximising their freedom and independence while providing them with the support they need. For adults with learning disabilities, other tailored and innovative schemes include temporary and adaptable accommodation with on-site care so individuals can live independently outside of traditional care settings.

Social care should also be aspirational. CCN member councils want to give adults with learning disabilities the best start in life and have set up bespoke schemes to support these individuals into employment, offering them tailored support and employers training.

For those entering the system, going onto a personal budget can be confusing and daunting at a very distressing time. CCN member councils recognise this and have begun rolling out schemes to give people more choice on how their personal budget is spent on care services and activities, as well as making the process simpler.

These examples are only the tip of the iceberg, with each of the 36 CCN member councils setting out proposals and plans to maximise independence, freedom and personal choice for those in care.

These kinds of approaches not only benefit the care user, but also a more preventative focus to service delivery will make the system sustainable over time – reducing demand later down the line on acute hospital care and relieving pressure on councils' and the NHS's budgets.



Surrey County Council

Ambitious plans to build 730 extra-care housing schemes

Surrey County Council has ambitious plans to build 730 affordable extra-care housing schemes over the next eight years – and last month unveiled plans for a 50-property complex in Banstead.

Extra-care housing, or retirement communities, allow people to live independently in their own property but within a community that has on-site carers as well as a wide range of services and amenities.

The council has submitted an outline planning application for the retirement community which, if approved, will be built on a former day centre and will contain 50 one-and two-bedroom properties.

The new properties will be flexible enough to adapt to individuals' needs and would be accessible to those in wheelchairs. Retirement communities promote greater independence for care users and are seen as a preventive way to reduce pressure on the NHS as well as freeing up housing for young people.

Find out more here

Norfolk County Council

Supporting those with learning disabilities in employment

More than 50 adults with severe learning disabilities and autism in Norfolk are being supported to find employment as part of a new scheme.

Norfolk County Council says it hopes to give adults with learning disabilities the best chance to live independent lives and will support around 60 individuals to find employment across the county, as well as working with businesses to make them more inclusive employers.

The council has recruited three job coaches to support those adults with learning disabilities seeking work, with help on and off the job. The scheme will include engagement with employers to help them understand individuals' needs, and use of the Place, Train and Maintain model, supporting the employee at each stage.

The council received £210,000 for the scheme as part of a successful bid to the Department for Work and Pensions.



Dorset Council

Pioneering scheme helps adults live more independently

A pioneering scheme in Dorset – the first of its kind in England - has helped dozens of adults with learning disabilities live more independent lives.

Dorset Council's Supported Living Scheme in Wareham enables these adults with disabilities, mental health issues and physical impairments to take their first steps to independent living through temporary and adaptable accommodation with on-site care.

A council report in 2019 found that there was a shortage of suitable accommodation for working-age adults with care needs. The council commissioned the complex subsequently and in 2020 17 modular, moveable, self-contained apartments and bungalows opened.

There are 4,035 adults with a social care package of support in Dorset Council. Around 24 per cent have a learning disability.

The council supports 392 people with a learning disability to live in a supported living setting, such as the one in Wareham

Find out more here

Cambridgeshire County Council

Supporting those with learning disabilities in employment

A new system to give care users greater choice on how their personal budget is spent is to be rolled out to hundreds of people in Cambridgeshire.

Cambridgeshire County Council has introduced Individual Service Funds, which are then overseen by third-party organisations that hold money on behalf of a social care user and then agree with them which activities, services, and support they would like to access over time.

This is similar to the current system except it takes away the burden of managing the finances from the individual, making the system simpler. It is also seen as a more efficient option than leaving it to the council to commission care on a person's behalf.

The county council aims to set up 75 new Individual Service Funds a year, totalling 375 by 2027, and forms part of the authority's Care Together campaign.

THEME 2: Creating a sustainable workforce

Helping to attract and retain staff to create a vibrant social care workforce

Adult social care has experienced workforce pressures for a number of years now. Latest data from Skills For Care shows that there are currently around 165,000 vacancies across the sector – which is almost a 10% vacancy rate.⁸

This poses several challenges for local authorities. It makes them more reliant on agency staff who are more expensive, and it means that services have to cope with significant workforce turnover. For care users, it means that the relationships built up with social workers – so important for their wellbeing – are sometimes too temporary.

Working in social care can be hugely rewarding for people, with a significant amount of personal pride attached to the role. However, far too many people are leaving the profession due to burnout and low-often national minimum wage rates, that means social workers earn less than supermarket workers. This creates a vicious circle: with more people leaving the profession, and leaving extra demand on those who stay.

Although the National Living Wage is set nationally, CCN member councils do have levers to pull to address their situations and have come up with inventive ways to attract and retain workers.

Many have changed their own local pay policies in order to incentivise workers to not only become a social care worker but to stay in the profession. This includes offering bonuses on joining the workforce and further incentives to stay there, as well as one-off 'thank you' payments during the Coronavirus pandemic.

As care market managers in their areas, CCN member councils can use their influence to try and retain staff.

Many have proposed significant uplifts this year to social care providers to address inflationary costs and National Living Wage increases – with some only proposing these rises to those directly contracted by the council in order to incentivise more to join and reduce reliance on agency staff.

Other councils have worked with their local health partners on substantial recruitment campaigns for overseas workers – collaborating with local stakeholders to successfully market their county and their organisations to overseas workers in order to plug the gaps in the workforce market.

Knowing that you can progress and develop is another major reason why individuals stay in a profession – and councils recognise this. CCN members have put in place schemes whereby social workers can have development and training opportunities – helping them feel like they can progress in the profession and incentivising them to stay in it.

As we head into the New Year, CCN members will continue to do all they can to attract and retain a vibrant and sustainable social care workforce.



North Northamptonshire Council

Care providers receive 6.5% fee uplift this year

Care providers in North Northamptonshire received a substantial fee uplift of 6.5% this year to address rising costs and workforce pressures.

The unitary council agreed the fee uplift to its contracted providers in March in order to help them with increased costs, fuelled by rising inflation and National Living Wage increases. The council said this uplift would help providers both attract and retain staff.

At the same time, the council declined to provide an increase in funding to other providers who are not directly contracted to the council who deliver ad-hoc care packages.

These arrangements are disproportionally more expensive but have been increasing in the county because contracted suppliers have had difficulty retaining staff. The council hopes that by paying its contracted suppliers more, it could encourage more providers to join the council's long-term contract, making it less reliant on ad-hoc packages.

Find out more here

Derbyshire County Council

Retention payment of £1,000 to help fill 200 vacancies

Derbyshire County Council is offering substantial financial incentives for social care community staff to retain staff and try and fill 200 vacancies.

The county council agreed in October to offer current community care workers who care for people in their own homes £500 immediately and £500 after a further 12 months – and new employees will be offered £500 when they begin employment and another £500 after a year.

The authority has changed its pay retention policy to allow these payments because of staffing and workforce pressures, with a significant number of vacancies in Derbyshire – in line with the rest of the country. It is hoped this imaginative proposal will help fill 200 vacancies in the coming months.

The council, which set aside £270,000 for the scheme, is also offering staff £100 every time they successfully refer someone to a care worker community role.

Devon County Council

Overseas recruitment campaign sees 1,000 applicants

A recruitment campaign targeting experienced and trained overseas social care staff has so far been hailed a success in Devon.

Led by NHS Devon, Devon County Council has worked with Plymouth and Torbay Councils and Devon Alliance for International Recruitment under the banner of One Devon, in what has been called a 'game-changing' campaign in partnership working and sharing best practice. It aims to help bridge the gap of experienced nurses and social care workers in the county, whilst continuing to work hard to recruit locally.

With a requirement that workers have a high standard of English, and government immigration rules relaxed for 'shortage occupations', the campaign is set to exceed its target, having had 1,000 applications, and will look to recruit around 150 people, with the new workers arriving in late 2022 and early 2023.

They will be working in care homes and in a range of community settings.

Find out more here

Staffordshire County Council

Care providers offered support to train staff

Care workers in Staffordshire are being offered opportunities to aid their personal and professional development in a new scheme designed to help to retain staff.

Staffordshire County Council is co-ordinating a local Workforce Development Fund, which offers care providers funding to help with the costs of training their staff.

The fund allows providers to claim back money towards the costs of staff completing a broad range of adult social care qualifications, learning programmes, and digital modules, as well as apprenticeships.

It is hoped that the new scheme, launched in November, will give care workers a chance to progress professionally and aid their personal development – so they stay within the sector. Nationally, adult social care has a high turnover rate. The funding has been made available through the government's Skills for Care programme.

THEME 3: Reducing pressure on the NHS Working in close collaboration with health partners to reduce pressures on the NHS

Health and social care are two sides of the same coin. When one is under pressure, the other one is impacted. When both are performing well and are sustainably funded, there are fewer system pressures.

This is seen most vividly in hospital discharges. Due to care market pressures and providers exiting the market, there are fewer beds in the community for people who are healthy enough to be discharged from hospital but are waiting for a care package in the community or care home. This has a knock-on effect on the NHS – impacting on bed availability in hospitals and 'front door' services such as ambulance handover times.

The government recognises this and over the last few years, has made available funding to improve hospital discharges during pinch points, such as the winter period. Counties have successfully worked with their health partners to implement schemes locally to alleviate pressures and will be doing so again this winter.

Many of these schemes are innovative; responding to local challenges, such as CCN members working with their NHS partners to help facilitate 'informal care' – where care is delivered by a family member or a friend for those with less acute needs – helping to free up hospital beds.

But CCN member councils' collaborative efforts with NHS partners go much further than just focusing on hospital discharge. They have worked with their partners to ensure that adults with learning disabilities are supported in these settings – in the community rather than in hospital, which is sometimes inappropriate for their needs.

By investing in prevention, we ultimately can reduce the pressure on the NHS by keeping people out of hospital in the first place. CCN members have worked with their health partners and integrated care systems to roll out ambitious modernisation plans, including the use of emerging technologies in adult social so people with acute needs such as dementia to help them live more independent lives.

With the Chancellor's Autumn Statement giving councils and the NHS ringfenced funding to improve hospital discharges, partnership working between the two will be more key than ever in what has been dubbed one of the most challenging winters in recent memory for health services.

Across the country, CCN members are stepping up to work with their health colleagues – whether on data-sharing to identify pinch points, assisting with hospital discharge, or putting in support to stop people from needing acute healthcare in the first place.



Lancashire County Council

Scheme frees up hospital beds and saves over £600,000

A scheme that helped to allow family and friends provide informal care to individuals helped support dozens of people to return home from hospital quicker – freeing up over 2,000 hospital bed nights and supporting almost 200 people to return home since its launch.

The Lancashire Hospital Discharge Home Recovery Scheme, a partnership between Lancashire County Council and local NHS and health organisations was launched last winter - aimed at people who need support to recover from a hospital stay which could be provided informally. It enabled friends and family to support those who needed care by offering them a one-off grant of £1,200 – meaning employment and other factors become less of a consideration, freeing that person up to provide informal care. The scheme also had the option of purchasing items at short notice, such as white goods, to help people leave hospital quicker.

Since it commenced in winter 2021 it has helped 196 people return home, reducing their stays in hospital, residential rehab and placements, with an estimated cost avoidance of £626,331 - and freed up 2,043 bed nights.

Find out more here

Nottinghamshire County Council

Joint project to keep reduce hospital stays for adults

Nottinghamshire's Transforming Care Programme – a joint project between Nottinghamshire County Council, the city council and health partners – aims to reduce the number of adults with learning disabilities and autism staying in hospital.

The partnership has supported 21 patients to be discharged from Hospital since April 2022, facilitated in part by the development of new specialist community care services. In October 2021 the partnership funded specialist commissioning officer posts to support with planning and developing new service provision to support additional discharges in the coming year and make robust plans around future housing needs.

The county council continues to manage the contracts for unplanned care beds which people with learning disabilities who are at risk of hospital admission can access in emergency to provide urgent care, assessment and treatment and in June 2022 saw the launch of a pre diagnostic support service which is available to people who are awaiting a diagnosis for autism.

Somerset County Council

Ambitious plans to transform dementia care

Somerset County Council has this year unveiled ambitious plans to transform care for thousands of people in the county with dementia, including investing in technology to help improve the lives of people.

The county council began a two-year consultation with local residents earlier this year on the plans, which have been put forward in conjunction with local integrated care systems, the NHS and charities. The plans, if approved, will see a redesign of nursing and residential homes, investment in new technologies to help those with dementia live in their own homes, keeping them out of hospital settings.

New technology could include GPS tracking to keep people safe and give families peace of mind, Oyster Watches and Rosebud Alarm clocks. Importantly, the council aims to consult with the 9,400 people with dementia in Somerset and their families so services are designed around their needs, including open days where they can try out new technology.

Find out more here

Shropshire Council

Sharing data to manage demand over winter

Earlier this month NHS Shropshire, Telford and Wrekin launched its 'Winter Control Room', which uses shared data to manage demand and capacity in local health and care services in the county in what experts are suggesting could be one of the most challenging winters in recent memory.

The control room is a partnership between the NHS, Shropshire Council, and the local integrated care system, where all three use and share data to respond to pressures across the system.

Data collated includes A&E waiting times, care home beds, hospital occupancy, staffing levels, and ambulance handover times. Staff will be able to see this data in real time to give them the best possible chance of responding to particular pressures across the system and allowing them to respond to these quickly.

THEME 4: Innovation & Transformation

Using new technology to innovate services and improve care for those who need it

Over the last few years, there have been a number of technological advances that have helped make services work better for care users and more efficient for local authorities.

In an era of declining resource for local government, CCN member councils have been ensuring that funding they spend on social care services is used in the most effective way, whilst improving the lives and experiences of those within care. A key plank of this is in greater use of technology.

New technologies available to councils include tablet devices so people living in residential or those in nursing care can keep in touch with their friends and family – as well as ensuring care workers can remotely check up on individuals, saving travel time.

It could include greater digitisation of care assessments to make it simpler for people and to cut down on social worker time – vital when reforms to expand eligibility in social care, as touched on in the policy overview in this document, are to be introduced in three years time. It may not even be traditional technology as we know it – such as colour coded knives for people with learning disabilities.

Councils have been using technology and data to support residents to have easier access to the information they need to make choices about their care, and greater access over the ownership of their records. But equally digitisation is not a 'one size fits all' and services are not being replaced by technology, instead are being enhanced by it - as CCN's recent report with Tunstall showed.⁹

In this area, CCN member councils are trailblazers. They have invested in technology used in other countries to aid care; helping people with day-to-day tasks and cutting down on social worker time.

They have worked with health partners to roll out greater digitisation of care records, stored and compiled ethically, to try and ensure medical and social worker decisions over care are taken quicker, improving the experience for those in care.

Other CCN member councils have won awards for their use of technology during the pandemic in helping combat loneliness and isolation for care home residents, while others have begun unveiling ambitious digital transformation strategies.

Across the CCN membership, county authorities have not been afraid to innovate and invest in new technology. This has allowed them to transform parts of their adult social care services, improving the experience for care users whilst cutting down on social worker time and freeing up staff to focus on a greater number of people.



[9] CCN and Tunstall - Employing Assistive Technology is Social Care (2021) https://www.countycouncilsnetwork.org.uk/new-report-calls-for-assistive-technology-to-become-mainstream-in-adult-social-care-services/

Hampshire County Council

First council in Europe to use 'Cobots' to improve care

Hampshire County Council was the first local authority in Europe to trial the use of 'Cobots' – collaborative robots – in care settings.

Following the successful trial, the county council committed to leasing Cobots over three years as part of its social care transformation programme. Cobots are worn around the lower back and actively support carers in moving objects or supporting people. Sensors in the Cobot analyse human movements and the technology responds to assist the person to move safely. Using electrodes, Cobots can also detect electrical signals between the wearer's brain and their muscles and convert this into motion. Watch a video of them in action here.

First used in Japan, the use of a Cobot has shown that people with complex needs who need the care of two people can, in some instances, have their care delivered by a single carer. This frees up carers to focus on other people in care, rather than having two staff members looking after one person – making the system more productive.

Find out more here

Kent County Council

Videophone project for care users wins national awards

A Kent County Council project which launched during covid has equipped people to draw on care and support with videophones so they could talk to friends, family and carers has won two national awards.

The council's digital care programme, Kara, saw 1,700 adults given easy to use Carephones to keep in contact with loved ones and professionals during the pandemic at a time when residents were most at risk of loneliness. They are a 'one-touch' secure tablet device which allowed care users to call their support network or order essential supplies online. This project was rolled out by virtual care company Alcove.

The project won an award at the Health Tech Digital Awards in August, coming first in the "Best COVID-19 Solution for Safeguarding the Vulnerable" category. Learning from this project has informed the requirements for a county wide innovative Technology Enabled Care service, with an aim to have the contract awarded by Summer 2023.

North Yorkshire County Council

Using shared medical information to speed up care

North Yorkshire County Council was the first local authority in Yorkshire to go live on a pioneering partnership that could free up time for social workers and GPs.

The council introduced The Yorkshire and Humber Care record in its area at the start of 2022, which gives authorised care workers easier access to medical information for those in care, which is stored ethically on an online portal.

Before the launch of the programme, a social care worker who needed medical information about a person they were caring for would need to call that person's GP practice and wait to speak to someone – delaying action by the care worker and using GP staff time.

The project aims to relieve pressure on the system by breaking up system logjams, with quicker access to a person's medical records, improving the quality of care received by that person. In time, the portal will expand to include hospital and social care records.

Find out more here

East Sussex County Council

Strategy set out how tech can support care users

East Sussex County Council's Being Digital strategy outlines how digital technology can be used to support adults in care across the county.

The three-year strategy, adopted in 2021, includes 30 projects that could potentially improve care and help with access to services, and sets out ways these can be rolled out.

The projects outlined in the strategy include the introduction of online financial assessments, which could cut down the amount of time staff spent on these – as well as technology that provides real-time information about services and pressure points. The strategy also outlines how the council and providers can benefit from remote working, such as video assessments from staff and telecare.

The aim of the strategy is not to replace current options with digital technology, but enabling those than can use technology to improve the lives of care users, keeping them more independent – and cutting down on hospital stays.

Alocal perspective

Undoubtedly the biggest issue facing health and

increased demand placed on frontline services

and staff, combined with related pressures on

adult social care and the wider NHS. Whilst this

social care teams at this time of year is the

inevitably peaks in the winter, we know it is

increasingly a year-round concern.

COUNTY COUNCILS NE

CCN



Rachael Shimmin

ACCE Lead for Adult Social Care and Chief Executive of Buckinghamshire Council

In Buckinghamshire we are taking a proactive and collaborative approach to tackling these issues. Our aim is to work together with our partners and providers to develop a new hospital discharge model, a shared vision that not only reduces the length of time patients wait to be discharged but also draws on the strengths and experiences of all our partners and builds on the trust between us.

The lynchpin to this vision is the development of our Trusted Assessor model which will streamline and fast track the process for discharging hospital patients needing long-term care. Other areas are already using a similar model, but we are taking it one step further, using it to address some of the wider challenges facing the health and social care sector, strengthening relationships and promoting enhanced collaboration and trust.

By creating a system whereby assessments for patients leaving hospital and transferring to onward care are completed by one professional rather than multiple assessments by multiple professionals, we are speeding up the process, omitting duplication, saving time and money and making the whole experience better for everyone involved. We are committed to making this a fully co-produced model, working with our providers as partners. It can only be successful with by-in from all parties. Our aim is to eradicate some of the distrust across the sector that built up during the pandemic and create solid new foundations and trusted partnerships.

Our Trusted Assessor model will be complimented by a new Transfer of Care Hub – an integrated team of clinicians, therapists, social workers and case managers working together to discharge patients effectively and manage the patient journey end to end. This will include an integrated shared digital programme that will manage and track the flow of patients through the system.

Ultimately our aim is to get residents home, or to the setting best suited to their needs, as soon as possible once they are medically fit to leave hospital and ensuring they have the smoothest journey possible through the health and care system which should result in the best patient experience, improved staff experience and the best use of health and care resources combined.





COUNTY COUNCILS NETWORK

Founded in 1997, the County Councils
Network is a network of 23 county councils
and 13 unitary authorities that serve county
areas. The network is a cross party
organisation, expressing the views of
member councils to the Local Government
Association and to the government.

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