



Telford & Wrekin
C O U N C I L

Addenbrooke House Ironmasters Way Telford TF3 4NT

HEALTH & ADULT CARE SCRUTINY COMMITTEE

Date **Tuesday, 18 December 2018**

Time **2.00pm**

Venue **Meeting Room G3-G4, Addenbrooke House, Ironmasters Way, Telford, TF3 4NT**

Enquiries Regarding this Agenda:

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Committee Membership: Councillors M Boylan, **A J Burford (Chair)**, S P Burrell, E A Clare, N A Dugmore, V A Fletcher, L A Murray, T J Nelson, and R J Sloan
Co-optees: Mrs J Gulliver, Mrs C Henniker, Ms H Knight and Mr D Saunders

AGENDA

1. **Apologies for Absence**
2. **Declarations of Interest**
3. **Minutes** Appendix **A**
To confirm the minutes of the meeting of the Health & Adult Care Scrutiny Committee held on 16 October 2018.
4. **Adult Care Performance, Budget & Savings & Cost Improvement Plan 2018-19 – Adults with Learning Disabilities** Appendix **B**
To receive the report of the Assistant Director: Governance, Procurement & Commissioning; and the Assistant Director: Early Help and Support
5. **My Choice Report – July to September 2018** Appendix **C**
6. **Chair's Update**
 - GP Perspectives on Neighbourhood Working
 - Update on Unmet Needs Survey

HEALTH AND ADULT CARE SCRUTINY COMMITTEE
Minutes of the meeting of the Health & Adult Care Scrutiny Committee
held on 16 October 2018 at 2.00pm in Quaker Room, Meeting Point House,
Southwater Square, Telford, TF3 4HS

Present: Cllrs A Burford (Chair), M Boylan, L A Murray, T J Nelson, R J Sloan; Co-optees C Henniker, D Saunders

In Attendance: S Dillon– Assistant Director: Adult Social Care, A Hammond – Deputy Executive for Commissioning and Planning (Primary and Integrated Care) (Telford and Wrekin CCG), L Mills – Service Delivery Manager Prevention & Health Improvement, R Purvis - Team Leader Projects, Policies & Quality, Service Improvement & Efficiency, Adult Social Care, S Worthington, Senior Democratic and Scrutiny Services Officer.

HACSC-09 Apologies for Absence

Co-optee J Gulliver

HACSC-10 Declarations of Interest

None.

HACSC-11 Minutes

Resolved – that the minutes of the meeting of the Health & Adult Care Scrutiny Committee held on 9 July 2018 be confirmed and signed by the Chairman.

HACSC- 12 Building Community Resilience and Neighbourhood Working

The Committee received the joint report of Telford & Wrekin Council and the CCG. It was noted that the report had previously been to the Health & Wellbeing Board and progression had been made in some areas since the report was written. A new integrated team had been funded by the CCG who would design new ways of working as an exemplar team. Funding had been received from the British Heart Foundation to undertake a project around hypertension and high blood pressure in the community.

The Committee raised questions and the following discussion ensued.

How much impact had the programme had, and how much more of an impact could there be if there were additional resources available.

It was noted that the CCG and the Council had invested in the programme and recognised the need to grow capacity within communities. As an example, a scheme of work had been undertaken around diabetes, improvements in clinical outcomes had been seen following this

Was this programme still part of the STP.

It was confirmed that the programme remained part of the STP and had been adopted as

one of the workstreams. There had been regular reporting to the STP, and it was agreed that this could be shared with the Committee.

How long would it take for the programme to roll out across the Borough?

Members noted that the approach was based on community development, building on what was present. The team were proactive in regards to looking for grant funding, which built in sustainability. It was noted that there were already resources in the system, and that many schemes were already Borough wide, for example, the Healthy Lifestyle support. Other schemes, such as the care home support team, were based on need and not geographical area.

Excess weight and obesity were a major health concern, what work was being put into these areas.

The focus of the Annual Public Health report for 2018/19 had been on excess weight and obesity. Within the report there had been a number of recommendations and a real commitment had been made to addressing this area of concern.

A discussion was held regarding the aging population and their future financial planning.

Integrated teams had been discussed for some time, what had been put in place now to ensure this was a success?

The integrated team were an entirely new team, who had been recruited to be part of this team. It was noted that this team was still in the early stages and a further report would need to be made in a few months' time. Members noted that that management and leadership were particularly important in teams like this and stated they were interested in seeing how this team developed.

Had a plan been developed for the programme, and where there performance indicators.

Project plans had been implemented for the programme and performance was regularly reported to the STP, which would ensure that the right projects were in place. The development team were involved with the voluntary and community sector.

How many Healthy Lifestyle Practitioners were there?

It was confirmed that there were 3 practitioners, who worked across the Borough. The public health team were around 6 months after a restructure, which was focused around this programme. It was noted that the report only contained a small percentage of the work that the team undertook.

Was there confidence in the momentum of the programme.

The programme had been running for a few years and there had been a change in the way it was working locally. The community were very engaged with the programme. Members noted there needed to be more successes advertised, so that the public became more aware of what was happening.

HACSC- 13 Adult Care Performance, Budget & Savings & Cost Improvement Plan 2018-19 – Older People

The Chair welcomed the Assistant Director: Adult Social Care. The Committee had requested information focused on Older People in terms of budget, performance and activity. It was noted that the needs on the Adult Social Care service were growing and changing.

The Committee raised questions and the following discussion ensued.

CHC funding was at a low level.

The Assistant Director; Adult Social Care stated that good progress had been made on this and there had been an increase in the number of CHCs within the Borough.

A discussion was held regarding readmissions.

It was noted that there were a number of readmissions to hospital, however, these were not at a level of concern. The population was aging and work was being undertaken to look at implementing a frailty team at SATH.

What was the situation locally in regards to domiciliary care.

The Assistant Director: Adult Social Care stated that the Council were working closely with providers and it was important to ensure that the capacity within the system was used in the correct way. The Council were working closely with SATH regarding assessment on discharge.

Who was responsible for care of people with dementia when they were unable to live at home.

The Assistant Director: Adult Social Care stated that this was a grey area, however, in practice, the Council and the NHS worked together. Services were in place, for example, Admiral Nurses to work with people who have dementia. It was noted that there was one dementia ward at Redwoods, which also offered outreach support. Members noted the importance of early diagnosis and support and advice for family members and friends on the early signs of dementia.

HACSC- 15 Update on Unmet Needs Survey

The Chair circulated a draft version of the Unmet Needs Survey. The survey aimed to receive feedback from users of Adult Social Care, the survey was designed to be part of a face to face interview and not directly completed by the service user. A workshop was planned for November. The survey would enable the committee to see if anyone was slipping through the net and if people accessing the service were given the support they need.

HACSC – 16 Chair’s Update

The Chair advised the committee that at their September Board meeting, SATH had agreed to the overnight closure of the Princess Royal Hospital, due to a workforce shortage. SATH have stated that to avoid action, they would need to employ an additional 7 middle grade doctors and 15 registered nurses. It was estimated that the loss of income to SATH would be around £3.5million per annum, with a worst case figure of £5.4million per annum.

Members discussed the impact of the ED closure on adult social care in the Borough. There were also concerns raised regarding the impact on the ambulance service and other public services, such as the police. A discussion was held regarding the sharing of information by SATH in regards to the CQC notice.

Members noted that the Secretary of State was monitoring the situation, and requested sight of the monitoring information. Members raised their concerns that members of the public would wait until the 8am opening of A&E, which would cause a backlog.

A discussion was held regarding the potential merger of Telford & Wrekin CCG with Shropshire CCG. It was noted that the two populations had different needs.

The Consultation Report following the Future Fit consultation was due for publication in December. There had been nearly 18,000 responses to the consultation and the JHOSC had requested sight of the raw, anonymised data.

The meeting ended at 16.27pm.

Signed:

Date:

TELFORD & WREKIN COUNCIL**HEALTH AND ADULT SOCIAL CARE SCRUTINY COMMITTEE – 18th DECEMBER 2018****ADULT SOCIAL CARE & COMMISSIONING IMPROVEMENT PLAN 2018/19****REPORT OF THE ASSISTANT DIRECTOR, ADULT SOCIAL CARE****1 Purpose**

To enable the Health & Adult Social Care Scrutiny Committee to consider the management of the Adult Social Care Budget and Statutory Services.

2 Recommendations

For the Committee to consider and agree any recommendations or further actions

3 Introduction

The Committee have asked that this report focusses on Adults with Learning Disabilities in terms of budget, performance and activity.

A learning disability is a reduced intellectual ability which can sometimes affect everyday activities, such as household tasks, socialising or managing money – which affects someone for their whole life.

People with a learning disability tend to take longer to learn and may need support to develop new skills, understand complicated information and interact with other people. The level of support someone needs depends on the individual for example someone with a mild learning disability may only need support with things like getting a job. However, someone with a severe or profound learning disability may need full time care and support with every aspect of their life, they may also have physical disabilities.

There are different types of learning disability, which can be mild, moderate or severe. In all cases a learning disability is lifelong.

It is important to remember that with the right support, most people with a learning disability in the UK can lead independent lives. We provide the following care and support services to help people live as independently as possible:

- Help young people transitioning from Children's Specialist Services & Safeguarding
- Assessing people under the Care Act 2014 and determining the level of eligible care and support needs they may have
- Looking at ways in which individuals be supported in their own homes using local community resources and focussing on employment as an outcome for those who can.

If the level of needs cannot be met in other ways we would look to potentially arranging care and support such as:

- Supported Living
- Direct Payments
- Community Support
- Continuing Health Care
- Residential Care
- Nursing Care

It is unusual for people with a learning disability to be referred into day services now unless they have Profound & Multiple Learning Disability (PMLD) as most people can choose to undertake activities in their local communities or seek further training and employment opportunities

4 KEY INFORMATION

As with all age groups in the borough, the proportion of working age adults who report having a long term illness or disability is higher than the national average, nearly 16,000 adults. The rate also increases with age, rising from 7.6% of 25-34 year olds to 29.6% of 55-64 year olds. It is estimated that around 10,700 people aged 16-64 have a moderate or serious physical disability and around 17,400 have a common mental health disorder.

The below data shows adults with a long term health problem or disability that limits their daily activities

	Aged 16-64						% Daily activities limited - All ages	
	Daily activities limited a little		Daily activities limited a lot		Total: Daily activities limited			All usual residents
Lakeside South	2,354	8.8%	2,070	7.8%	4,424	16.6%	26,698	19.6%
Hadley Castle	3,612	7.8%	2,778	6.0%	6,390	13.7%	46,547	18.3%
The Wrekin	2,773	7.9%	2,351	6.7%	5,124	14.6%	35,106	18.2%
Telford and Wrekin	8,739	8.1%	7,199	6.6%	15,938	14.7%	108,351	18.6%

Source: Office for National Statistics, 2011 Census, LC3207

The below data shows estimated numbers of people with moderate or serious physical disabilities by locality

Locality	Moderate		Serious		Total disability
	16-44	45-64	16-45	45-64	
Lakeside South	700	1,300	200	400	2,600
Hadley Castle	1,300	2,200	300	800	4,600
The Wrekin	1,000	1,800	200	600	3,500
Telford and Wrekin	3,000	5,300	600	1,800	10,700

Counts have been independently rounded to the nearest 100

Source: Prevalence rates- www.pansi.org.uk; Population counts - Office for National Statistics, 2015 Mid Year Estimates by Output Area

The below information shows the estimated prevalence of the number of people with learning disabilities and the prevalence rates

Locality	Baseline learning disability			Moderate or severe learning disability		
	15-44	45-64	65+	15-45	45-65	65+
Lakeside South	400	200	100	100	100	-
Hadley Castle	700	400	300	200	100	-
The Wrekin	500	300	200	100	100	-
Telford and Wrekin	1,700	1,000	600	400	200	100

Counts have been independently rounded to the nearest 100.

Source: Prevalence rates- www.pansi.org.uk, www.poppi.org; Population counts - Office for National Statistics, 2015 Mid Year Estimates by Output Area

Age	Baseline	Moderate or severe
15-19	2.8%	0.68%
20-24	2.7%	0.60%
25-29	2.5%	0.53%
30-34	2.5%	0.54%
35-39	2.5%	0.61%
40-44	2.5%	0.62%
45-49	2.3%	0.56%
50-54	2.4%	0.48%
55-59	2.3%	0.55%
60-64	2.20%	0.43%
65-69	2.01%	0.36%
70-74	2.34%	0.34%
75-79	2.07%	0.23%
80+	1.89%	0.18%

In Telford and Wrekin it is estimated that 4,000 residents have a learning disability. The majority, 3,300 have a Baseline Learning disability, the remaining 700 having a moderate or severe learning disability.

The number and prevalence of learning difficulty decreases in those aged 45 & over. There were estimated to be 1000 residents aged 45-64 with a baseline learning difficulty, an estimated prevalence in the population of 2.3%.

Note: These numbers have been estimated using national prevalence rates and applied to our estimated population. Higher or lower numbers in a particular area are purely reflective of the larger or smaller population in that locality, not a higher rate. These numbers should be used as indications of prevalence only

Source: Eric Emerson & Chris Hatton 'Estimating Future Need/Demand for Supports for Adults with Learning Disabilities in England', 2004; taken from www.poppi.org.uk and www.pansi.org.uk

Cost Pressures

Given the population increases across all areas the 2015 Spending Review Submission by the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS) provided a detailed analysis of current and predicted future pressures on social care core costs, arising from inflation, the National Minimum Wage (NMW), the introduction of the National Living Wage (NLW) for workers aged 25 and above, Deprivation of Liberty Safeguards and the close of the Independent Living Fund.

For further information the LGA Green Paper for adult social care and wellbeing can be accessed here <https://futureofadultsocialcare.co.uk/the-green-paper/>

Our Performance, Operational Development & Continual Improvement

See Presentation slides for Adult Social Care

Adult Social Care & Commissioning Partnership Working

We continue to work through with individuals with a learning disability who are in residential placements and we are looking to enable individuals to have their own tenancies with support where this is needed. Operational teams and commissioners are working together to match the right care and property that best meets the needs of individuals. We have developed a trajectory for the transfer from residential to supported living and we use this to monitor our progress

Notwithstanding this wider piece of work there has been some re-modelling of contracts and placements for individuals resulting savings planned for approx. £102k across a range of block contracts

Where individuals remain in residential care settings we will start a round of price levelling/fixing in December 2018 – linking closely with the regional cost benchmarking work being undertaken by IEWM/ the Regional ADASS Commissioning Group to ensure a joined up approach across the region.

Extra Care Schemes & Supporting Housing

Work is continuing with the Extra Care Schemes on access and referral processes and we are reviewing our current arrangements as most of the contacts in place expire July 2019.

New Schemes to support people with Learning Disabilities

This year we have had new schemes come available enabling individuals to live independently with their own tenancies and with care and support in place. New developments include:

- **Scheme 1**, 14 beds available and 4 tenancies have been secured, 10 individuals are being reviewed for suitability
- **Scheme 2**, 7 beds available, 4 tenancies secured and we are identifying more individuals for review and possible moves
- **Scheme 3** – we have secured all 5 tenancies

5 FINANCIAL/VALUE FOR MONEY IMPACT – Our 5 year Strategic Model

The budget for 2018/19 for learning Disability is £19.88m and the period 7(end October) forecast outturn is around £20.9m, including externally provided and internally provided services, spot and block provision. This budget provides care to around 661 Learning disability clients.

The externally purchased care on spot contracts is projected to provide the following activity:

Type of Care Supported(external providers)	Forecast activity 2018/19
Residential and Nursing	26,600 days
Homecare	321,700 hours
Direct Payments	46,300 days
Day care	6,500 days
Shared Lives	17,700 days
Respite	230 days

The projected pressure/overspend against budget in 2018/19 of around £1m is mainly the sum of the following: the budget was based on a movement of individuals from residential care to supported living accommodation, this work progresses but the lead time has proved longer than expected hence the costs of care to those who were to move has remained higher than expected creating a pressure of around £470k over budget; pressure is also accruing due to savings expected from reduced use of day services, the lead time has proved longer than expected and work is continuing to review the transformation, the pressure being around £514k.

6 LEGAL ISSUES/DEBT RECOVERY

Nothing to report on legal issues/debt recovery

Report Authors:

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Tracey Smart, SDM, Finance

Jonathan Eatough, AD, Governance, Procurement & Commissioning

Version: v2

Approved 07/12/2018

Health & Adult Social Care Scrutiny Committee Adults with Learning Disabilities 18th December 2018

Sarah Dillon

Assistant Director, Adult Social Care



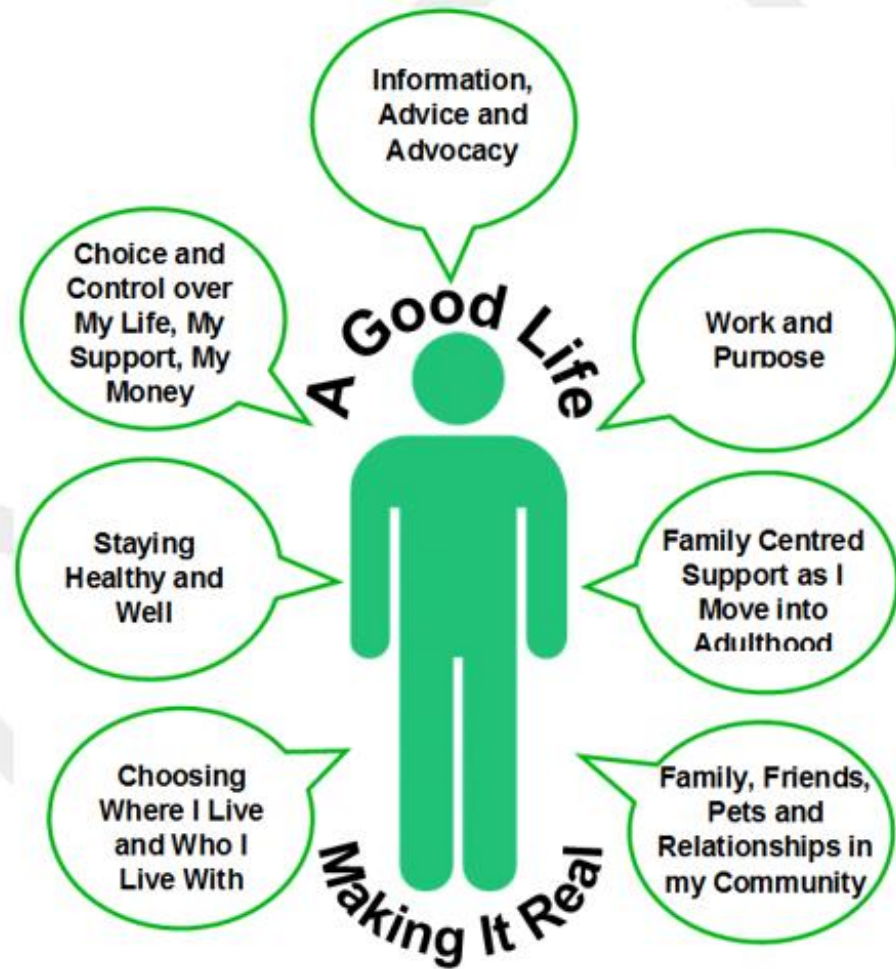
Our Learning Disabilities Progression Model: OUR AIM:

- To provide quality support in a personalised way so that people with a learning disability their families/carers can receive the assistance they need in a way that enhances their independence and enables them to lead meaningful and valued lives within their own communities

Our approach is underpinned by:



Our Learning Disabilities Progression Model: KEY PRIORITIES:

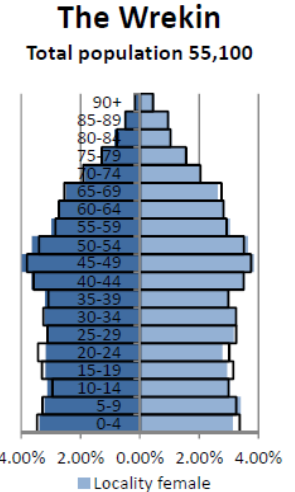
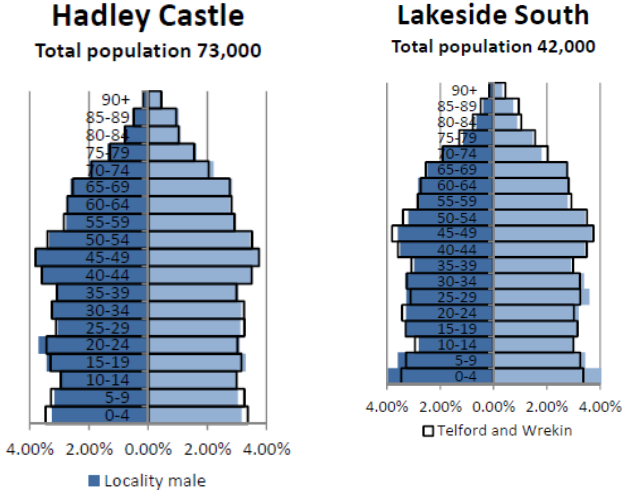


We have developed a number of key priorities that reflect what people with a learning disability and their families/carers have told us so far.

***Life not a service
Good lives happen when
people have good support and
a voice that is
valued, respected
and listened to***

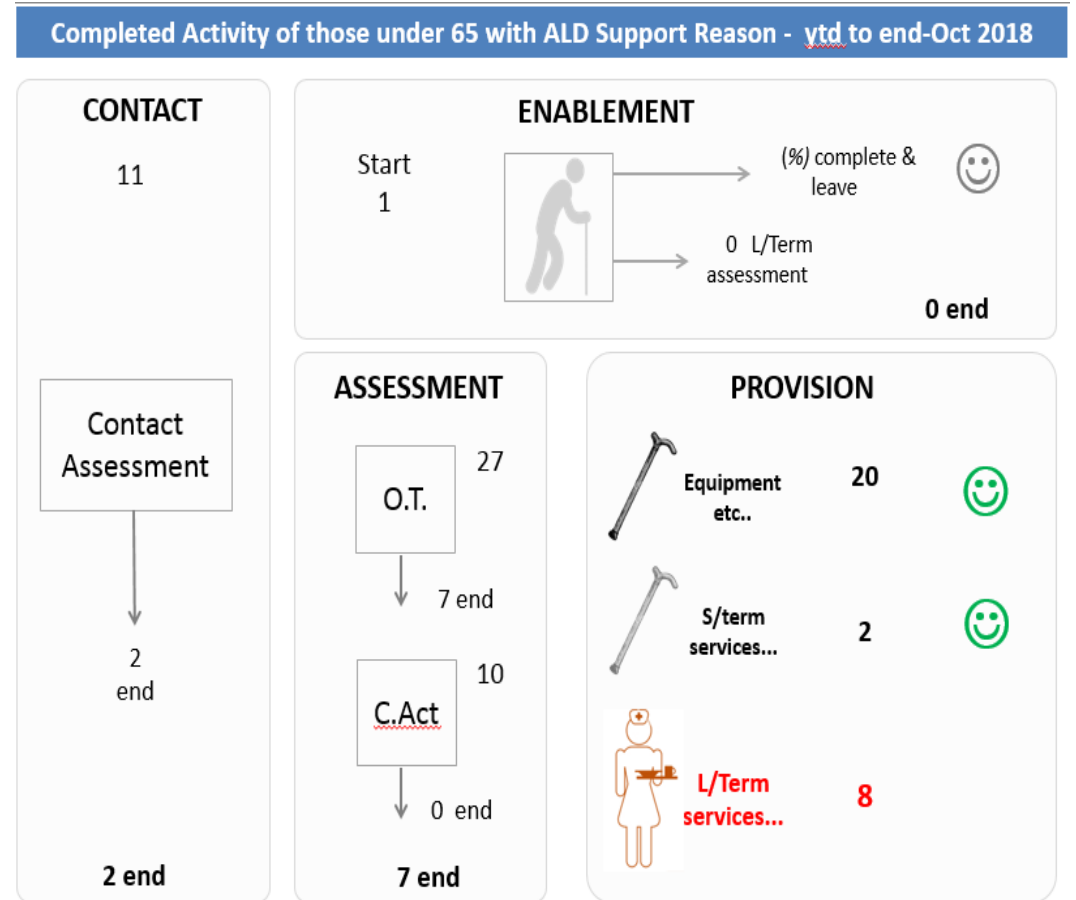
We have the following ALD individuals in each of the Localities in receipt of long term learning disability support services.

- **122 in Hadley** – this locality has the largest population of the 3 localities, around 73,000 residents (43% of the population)
- **135 in Lakeside** – this locality has the smallest population of the 3 localities and it has around 42,000 residents (25% of the population)
- **128 in Wrekin** – this locality contains nearly a third of residents which is 55,000 residents (32% of the population)



Our Performance

Our performance continues to show we are supporting more people to remain in their own homes. We have had 11 new contacts year to end – October 2018, 2 of the contacts resulted in no further action, with the right advice and support provided. One contact went on to have some reablement services and 27 contacts had occupational therapy services of which 7 of those with the right help and support ended. 10 contacts received a Care Act Assessment of which 3 ended. Since the start of the financial year, we have only had 8 new contacts in receipt of long term services.



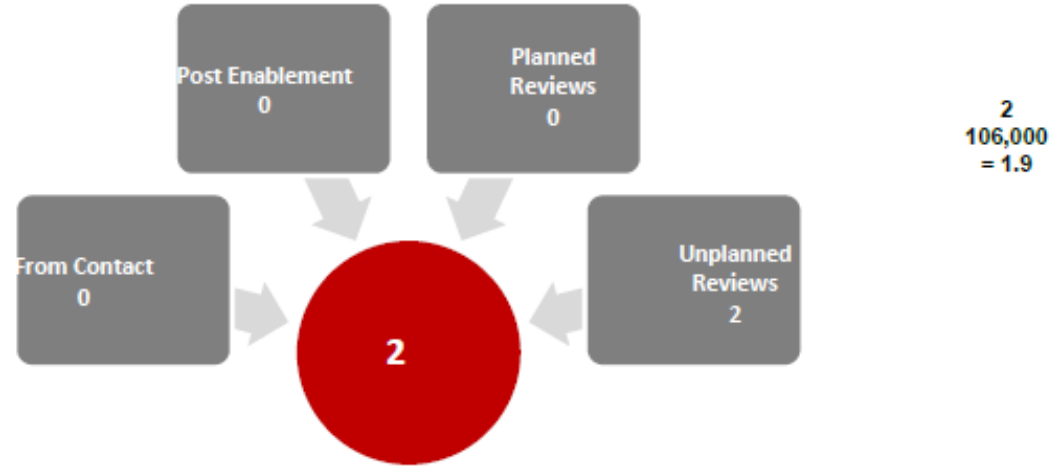
Adult Social Care Outcomes Framework (ASCOF)

- Our ASCOF performance compared to the regional and national targets shows that out of 21 comparable measures, we have improved in 14 of them.
- Our areas of strength are around permanent admissions to residential care. For more information the comparative data can be accessed here [ASCOF Comparitors 2017/18](#)
- Our strengths as recorded in the ASCOF data include:
 - ALD settled accommodation
- Our challenges as recorded in the ASCOF data include:
 - ALD employment.
 - Direct payments

Residential & Nursing

We are continually below the national target of residential placements for 18-64 age category

2A(1) - Long Term Support Needs Met by Admission to Residential and Nursing Care Per 100,000 Population (18-64)



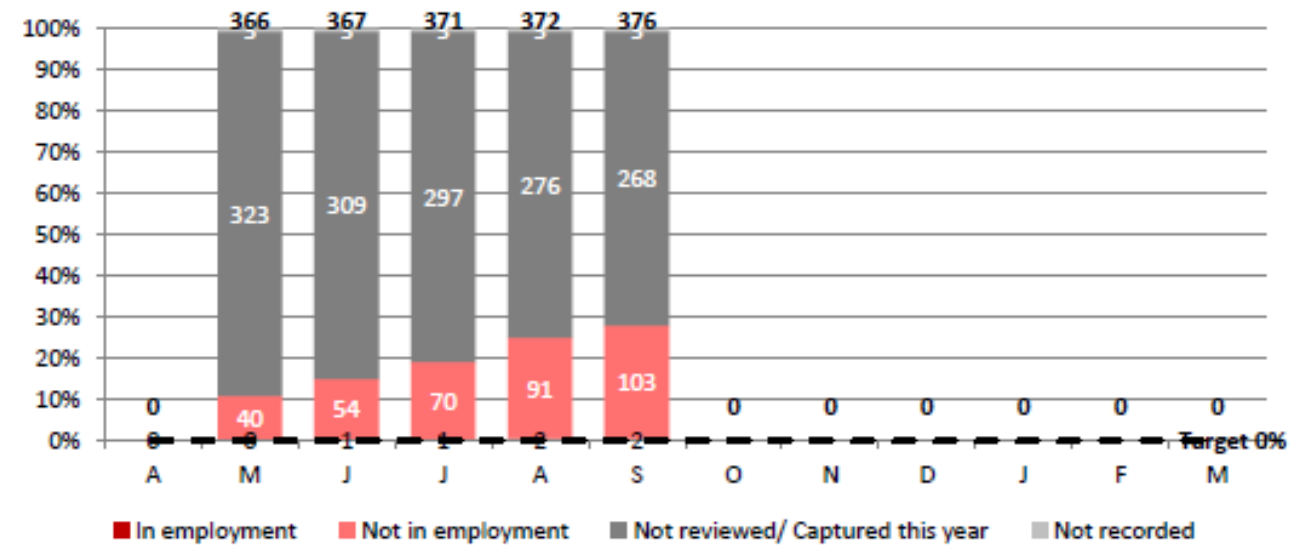
Previous Performance	2014-15	2015-16	2016-17	2017-18	2018-19
Telford & Wrekin	8.7	1.0	4.8	5.8	1.9
National	14.2	13.3	12.8		

Employment

Our current performance is at 2% against the national target of 5.7% target.

We are working closely with My Options and their Stepping into Work Programme supporting individuals back into paid and/or voluntary work

1E - ALD Employment



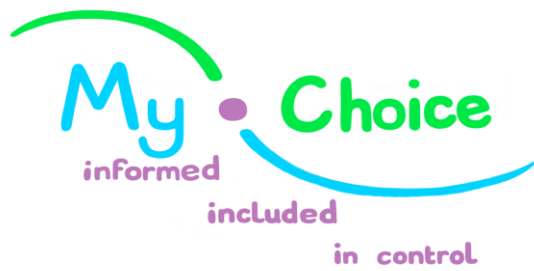
Previous Performance	2014-15	2015-16	2016-17	2017-18	2018-19
Telford & Wrekin	2.0%	2.3%	1.0%	2.0%	0.5%
National	6.0%	5.8%	5.7%		

Development & Continual Improvement for ALD

- Continuing with our training programme with NDTi
- Working with Children's colleagues for Young People transitioning to Adult Social Care
- Working with My Options & the Community Participation Team to support individuals with employment opportunities
- Developed a Progression Model to help individuals to live independently where possible and appropriate to do so in their Communities, the model includes levels of support dependent on need
- Commissioning of Autism training
- Developing Social Care Housing Strategy with a focus on ALD individuals
- Increase the use of Assistive Technology and Digital initiatives and solutions including Alexa and other voice activated devices
- Develop Forums to include the voice of Parents and Carers
- Increase relationships between Care Providers, Landlords and Developers
- We are continuing to work with our CCG Colleagues to ensure that individuals are getting the right support and funding from ASC and CCG
- As part of the Transforming Care Programme (TCP) we are working with specialist learning disability health services and other agencies to ensure proactive, planned and co-ordinated support for people with a learning disability and/or autism who display behaviour that challenges, including those with a mental health condition.
- We continue to forge strong working relationships with our Specialist learning disability health colleagues with a greater understanding of their role and how a joint approach can support individuals and provide better outcomes

Case Studies

- Helen Cottrell – Senior Assistive Technology and Sensory Impairment Officer talking and demonstrating Grand Care kits
- Good practice video from Social Worker Emily Melaniphy - <https://youtu.be/5ecpflXwJyc>
- Tom has been supported by the My Options Services, who have helped him via the Stepping into Work Programme to find work. Tom has been successful in securing employment with Café Go and is supported by his mum at home. **Play Video**



My Choice Report July to September 2018



Caro Hart

Citizens Advice Telford & the Wrekin

October 2018



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1. Summary

The My Choice service offers clients a range of services tailored to their needs. The Tier 1 first-point-of-contact service dealt with 1,935 clients in this quarter which is lower than the previous quarter, probably due to the holiday period. Around two-thirds of queries were answered at this stage with information and signposting and the remaining queries were referred, mainly to the My Choice Tier 2 services.

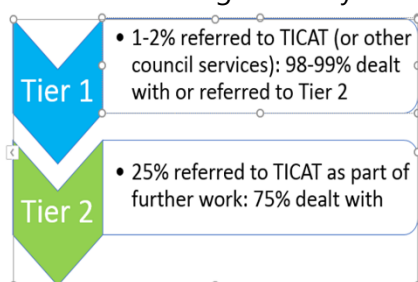
The Tier 2 services dealt with 600 clients and were able to offer a wide range of information and advice. How to get aids and equipment was the most popular query (34%), followed by people asking for welfare benefits advice (29%) and about statutory community care and care services (18%). The Trusted Assessors followed up with people needing aids and equipment to help in the home and did 55 assessments and issued 140 pieces of equipment to clients.

Where clients have mental ill-health or learning disabilities or are otherwise incapable of speaking for themselves, we can offer advocacy services. Where they are undergoing a care needs assessment or have a safeguarding problem, they are entitled to representation under the law. Our Tier 3 services provided general advocacy to 55 clients and 15 with Care Act advocacy. In closely related work (under other funding) our partners did more than 60 Paid Reps visits. Where a person is living in a Care Home or a Hospital under a Deprivation of Liberty Safeguard order (DoLs) they have a legally appointed Paid Rep who visits regularly to make sure that the restrictions are fair and that they are happy. They may also have help with making legal challenges and we are working with six Court of Protection cases.

Client feedback on the services gathered by the My Choice, My Voice team were extremely positive. All those questioned said that the call or visit had been useful and that they felt listened to. Almost 94% agreed that; "I have the information and support I need in order to remain as independent as possible".

The work of raising awareness about My Choice reached more than 1,000 (and more through online and social media). Partners took My Choice leaflets and flyers into more than 20 local community venues, had a stand at Princess Royal Hospital, attended the Telford Senior Citizens Forum, attended the Newport Dementia Conference and the Wellbeing Hubs Network event and much more.

One of the strengths of My Choice is in the other services provided by the partners which



complement the My Choice services and add value to the service provided under the terms of the contract.

Additional value is also demonstrated through 500 hours of volunteering contributing more than £4,000, benefits gained for clients putting almost £250,000 into the local economy and a considerable saving in resources for Telford & Wrekin Council departments.



2. Service model

2.1 Levels of advice

My Choice is a service providing information, advice, and advocacy to members of the public who may have health and social care needs. By phoning a single telephone number, clients can obtain simple advice or be referred for more help and support.

At the first point of contact at Tier 1 clients can obtain information via leaflets or signposting to the organisations and council departments they need. Those clients who have more detailed requirements are then referred to Tier 2 Advisors and Advocates so that they can obtain advice and advocacy. They can obtain more detailed information and advice on what the options may be.

Where they need extra support, someone will be able to speak or advocate on their behalf. Care Act referrals for advocacy are via the My Choice telephone number and they are sent directly to Tier 3 advocacy services. Age UK, SIAS and Taking Part provide general advocacy when more specialist intervention is required.

Referrals to Tier 2 and Tier 3 services are internal processes to My Choice and partnership working ensures that these are as easy as possible for clients.

2.2 Partnership working

This service is provided within a partnership consortium arrangement. Citizen's Advice Telford & the Wrekin (CAT&W) are the lead body and manage the contract.

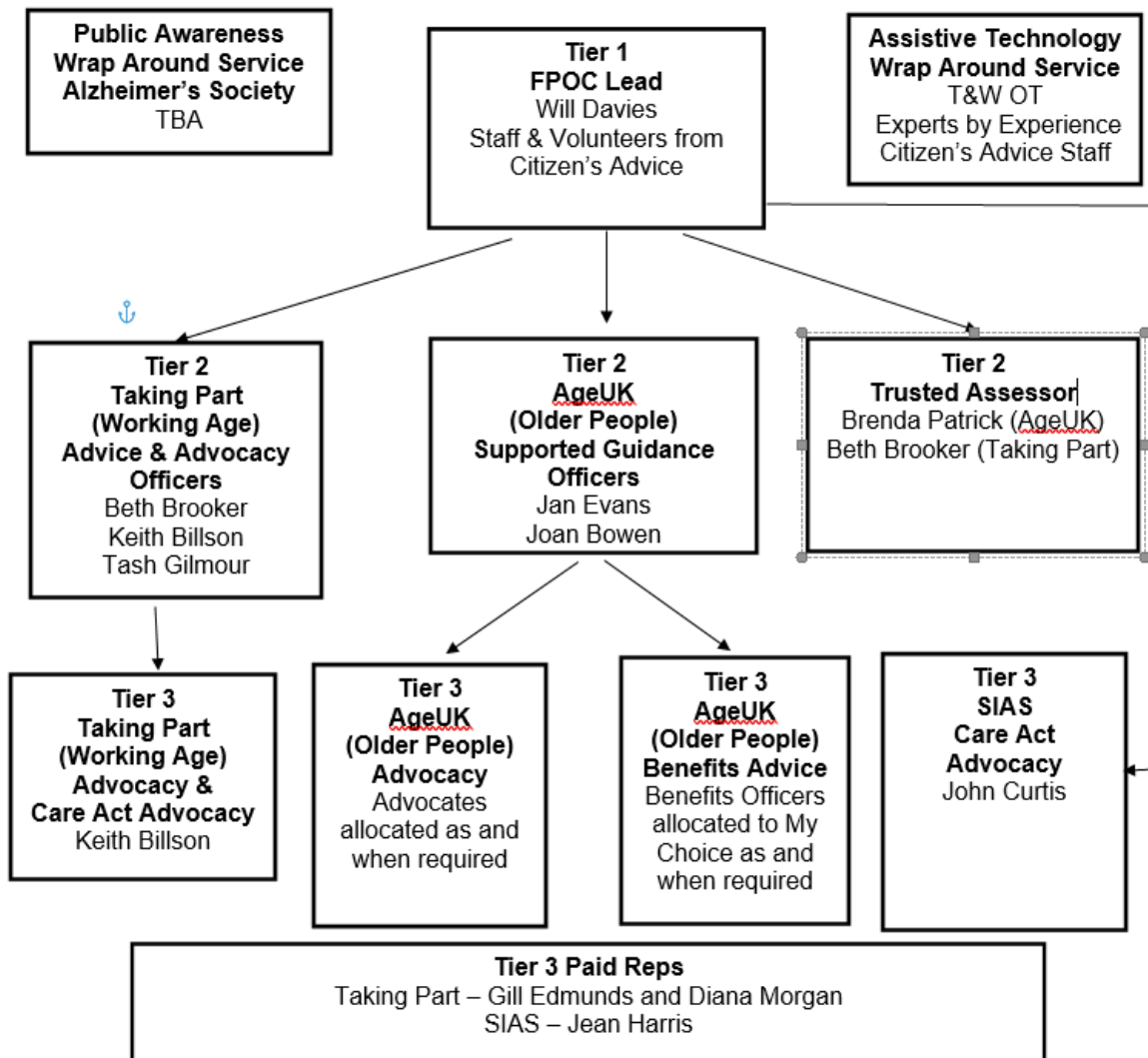
- Tier 1 support is managed by CAT&W.
- Tier 2 Advice and Advocacy support is provided by Taking Part (working age clients) and Age UK ST (older people).
- Tier 2 low level assessments for aids and equipment (less than £1000), are carried out by Age UK and Taking Part
- Tier 3 Care Act Advocacy is provided by Shropshire Independent Advocacy Scheme (SIAS). Where the client has a learning disability, then Taking Part maybe approached to carry out the Care Act Role.
- Tier 3 General Advocacy services provided by Age UK, SIAS and Taking Part.
- Plus: Requests for Paid Reps for clients who are deprived of their liberty is are also received through My Choice and they are forwarded to Taking Part and Shropshire Independent Advocacy Scheme (SIAS) as appropriate.



- Plus: Alzheimer’s Society are part of the partnership consortium providing promotion and public awareness of this service through a variety of methods
- Plus: Citizen’s Advice also provide Assistive Technology ‘drop-in’ sessions on a weekly basis working in partnership with Telford & Wrekin OT services.

2.3 My Choice flow chart

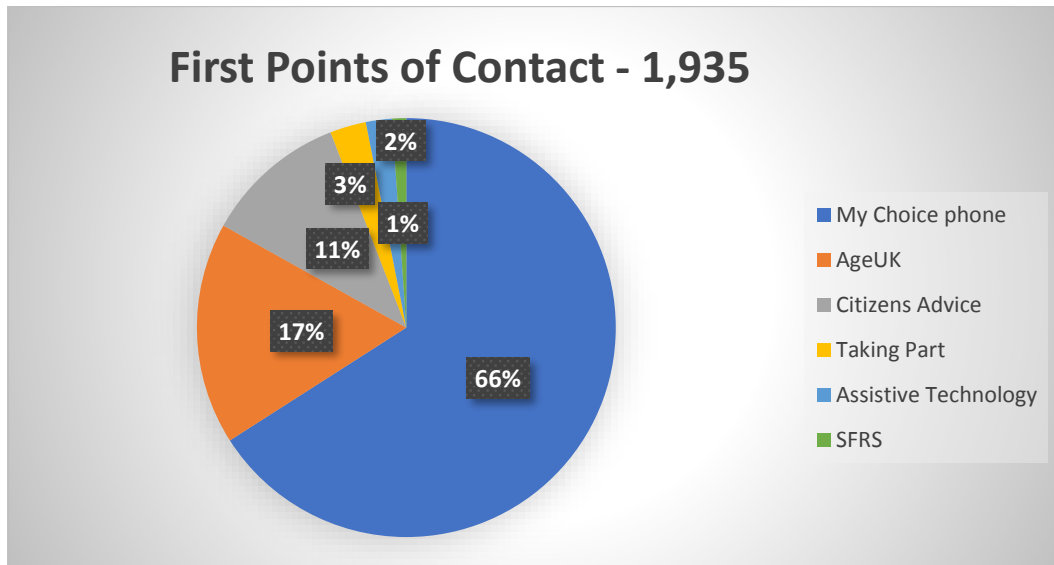
My Choice Flow and Organisational Chart



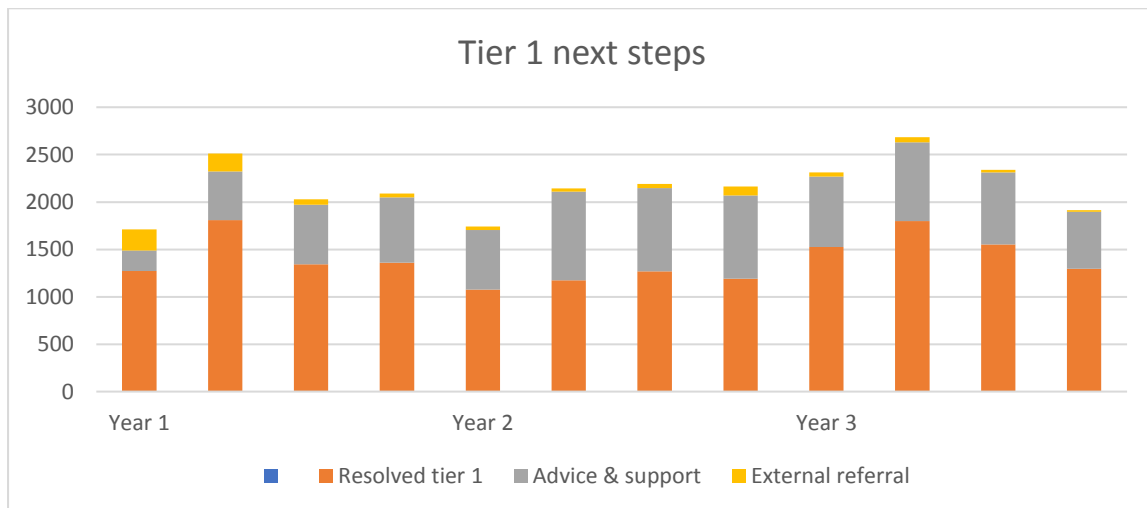
3. Outcomes

3.1 Tier 1 - First point of contact

This was a slower quarter as it was across the holiday period. We dealt with around 1,935 enquiries during the quarter. Of these 67% came through the My Choice phone line and referrals from Shropshire Fire and Rescue and the rest came from Partners' other services and the Assistive Technology drop-in.

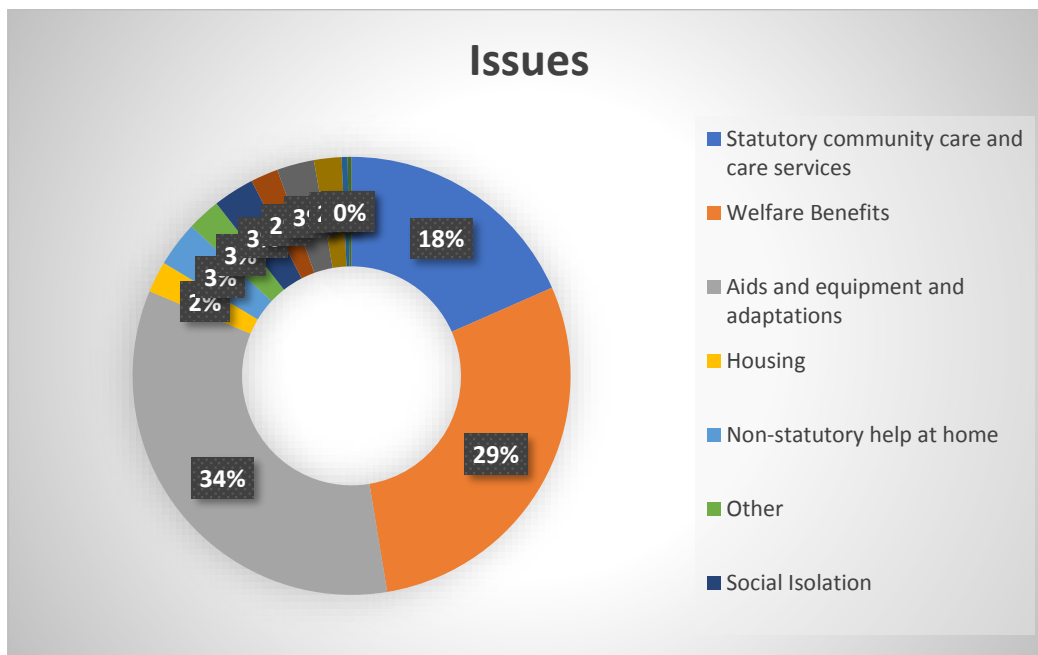


From 1,935 first point of contact, about 1,296 were resolved at Tier 1 through provision of information and signposting. Exactly 600 were referred to Tier 2 services and just over 1% were referred externally at this stage. As can be seen below, the ways in which Tier 1 contacts are resolved can vary a great deal in a quarter.



3.2 Tier 2 - Enquiry issues

From Tier 1 some 600 clients were referred to My Choice partners' Tier 2 services for a wide range of things. How to get aids and equipment was the most popular, closely followed by people asking for benefits advice.



3.3 Tier 2 - Assistive Technology & Trusted Assessors

Enquiries about aids and equipment is the largest category of calls. CAT&W continues to host the Assistive Technology surgeries each Wednesday.

In addition, we have the Trusted Assessor project which is where staff from Age UK and Taking Part, trained by the Occupational Therapy (OT) department at Telford & Wrekin Council, do assessments in the home for small aids and adaptations costing under £1,000 and then liaise to get the equipment delivered very quickly. This was designed to relieve the OT's waiting-lists for low-level assessments.

The Trusted Assessors did 55 assessments in the quarter and issued 140 pieces of equipment to clients. As defined by the Care Act 2014, the outcomes were:

- 89% of the people assessed were able to make better use of their home safely
- 56% of the people assessed were able to better maintain their personal hygiene
- 31% of the people assessed were able to better manage their toilet needs
- 2% of the people assessed were able to better manage their nutrition

As noted in section 7 below, this scheme will be extended in October 2018 with additional funding.



3.4 Tier 3 - Advocacy

Several partners provide advocacy at Tier 3.

- General advocacy is provided by Taking Part and Age UK working with clients with a range of vulnerabilities and issues on a one-to-one basis. They supported 55 clients many of whom had who had mental ill-health or learning disabilities.
- Taking Part supported 11 clients this quarter with Care Act advocacy and SIAS took 4 referrals. Clients are referred for Care Act advocacy, which is their statutory right where they are undergoing a care assessment, or reassessment, and they lack the capacity to represent themselves or if there is a safeguarding issue. If they do not have someone with their best interests in mind, they can have an advocate under the Care Act.

3.5 Additional services: Paid Relevant Person's Representative (Paid Reps)

While it is not directly funded under the My Choice contract, the funding was obtained for the Paid Reps because we have that contract. It is therefore reported here as added value to the range of advocacy services.

Where a person is living in a Care Home or a Hospital under a Deprivation of Liberty Safeguard order (DoLs) they may have their freedom of action limited so that they do not come to harm. If they do not have a family member or other person looking out for them, they have a legally appointed Paid Rep who visits regularly to make sure that the restrictions are fair and that they are happy. Where the person disputes the DoLs or disagrees with their placement, then the Paid Rep has a duty to present this to the Court of Protection, to attend hearings with the person and be the person's legal representative. These cases can be very long and complex.

This quarter, Taking Part received 12 new referrals and did 61 client visits. At the end of the quarter, Taking Part had 45 cases outstanding and SIAS have 18.

There are currently six cases progressing through Court of Protection (five with Taking Part and one with SIAS). The Court has been extremely busy during the reporting period and we are awaiting Court listing dates on all of the new cases referred.

The Paid Reps continue to build very positive working relationships with the social work team and with the DoLS team. They are being invited to more case review meetings, as well as CHC funding review meetings, and this proves useful for all parties. In many cases the Paid Reps have more contact with the relevant persons than the social workers, so we are able to offer valuable information based on our meetings with our clients. The feedback we have received from the DoLS team and, in particular, about our involvement in such meetings, has been very positive.



3.6 Awareness Raising

It was a successful quarter for the awareness-raising done by Alzheimer's Society. They took My Choice leaflets and flyers into more than 20 local community venues, had a stand at Princess Royal Hospital, attended the Telford Senior Citizens Forum and more. They reached more than 700 people with the work. (See Appendix One for more information.)

Taking Part represented My Choice at:

- The Newport Dementia Conference on 3rd August which was attended by some 150 delegates.
- Taking Part also supported a My Choice Stand at the Wellbeing Hubs Network event at the Lakewood Court promotion day on 1st September 2018 which was attended by around 60 people.
- The Suicide Prevention Conference on 11th September attended by 100 people.

They also sit on the Making it Real Board and Telford & Wrekin Safeguarding Board (see section 6).



4. My Choice, My Voice

Think Local Act Personal (TLAP) is the sector wide commitment to transform adult social care through personalisation and community-based support. It committed over 30 national organisations to work together and to develop, as one of the key priorities, a set of markers. These markers are being used to support all those working towards personalisation. The result is Making it Real, a framework developed by the whole Partnership. Making it Real is built around "I" statements. These express what people want to see and experience; and what they would expect to find, if personalisation is really working well.

While it used to be funded as part of My Choice, this has continued subsequently, resourced by Taking Part volunteers. They ring up former My Choice clients and ask them the TLAP questions. In the last quarter they contacted more than 30 clients after they had accessed My Choice services:

My Choice - Think Local Act Personal Questions (TLAP)

Statements	Yes	No
I have the information and support I need in order to remain as independent as possible.	30	2
I have access to easy-to-understand information about care and support which is consistent, accurate, accessible and up to date.	8	2
I can speak to people who know something about care and support and can make things happen	17	2
I have help to make informed choices if I need and want it.	22	1
I know where to get information about what is going on in my community.	18	3
Additional Questions:		
Has this call/visit been useful?	34	0
Would you call us again?	25	1
Did you get the information/advice you wanted?	18	1
Do you feel listened to and/or helped with this call/visit?	33	0

The 'No' responses in TLAP statements are because clients have not received what they perceived themselves needing or they have not yet received their assessments.

The results overall are an extremely positive response to using My Choice services. All those questioned said that the call or visit had been useful and that they felt listened to.

5. Demographics

5.1 Clients by age vs Post Code

The greatest numbers of clients come from TF1 and TF2 which include areas of deprivation such as Donnington, Dawley and Wellington. The greatest concentrations of people enquiring about adult social care are, perhaps unsurprisingly, in the older age brackets as can be seen below. However, there are a significant number of older working-age people accessing the service.

	TF1	TF2	TF3	TF4	TF5	TF6	TF7	TF8	TF10	Totals
18-25	3	1	0	2	0	0	1	0	0	7
26-30	5	2	3	4	0	0	0	0	0	14
31-35	3	2	1	4	0	0	1	0	1	12
36-40	5	3	3	4	0	0	1	0	1	17
41-45	7	0	3	5	0	0	2	0	1	18
46-50	6	5	1	0	0	0	2	1	0	15
51-55	5	4	2	2	1	0	1	0	1	16
56-60	5	5	3	3	1	2	5	1	0	25
61-65	10	4	7	4	0	1	4	0	2	32
66-70	8	13	8	12	3	2	5	1	2	54
71-75	29	10	6	8	1	3	18	1	7	83
76-80	20	19	15	12	1	3	9	0	18	97
81-85	21	32	4	8	4	3	10	2	8	92
86-90	17	19	11	6	3	11	10	6	6	89
Over 90	6	6	1	3	1	0	6	4	2	29
Totals	150	125	68	77	15	25	75	16	49	600

5.2 Clients' demographics

The following demographic information was collected at Tier 2. This indicates that at less than 2%, BAME local people seem to be under-represented amongst service users.

5.2.1 People by gender

Male	Female	Transgender
256	344	0

5.2.2 People by Ethnicity

White	Asian	Mixed Race	Black	Unknown
354	2	2	3	198



In addition, we monitored information as follows. This shows that more people are referred by friends or family or professionals than refer themselves, which has interesting implications for how the My Choice service is marketed and promoted

5.2.3 People by Carer Status

Yes	No	Unknown / Not recorded
9	263	187

5.2.4 People by Receipt of Council Funded Services

Yes	No	Unknown / Not recorded
87	155	217

5.2.5 People by referral source

Self	Family	Friend	Professional
217	156	7	79

5.3 Clients' vulnerabilities

My Choice clients have a range of vulnerabilities as shown below (please note that clients may identify more than one issue):

Vulnerabilities		Other	
Sensory Impairment	20	Aspergers / Autistic Spectrum / ADHD	8
Does not have English as 1st Language	1	Cardio Vascular (non-stroke)	36
Socially Isolated	9	Diabetes	15
Limited Physical Mobility	440	Acquired Brain Injury / Cognitive impairment	1
Learning Disabilities	23	Epilepsy	8
Mental Health Issues	26	Spinal/Back Issues	3
Dementia	25	Cancer	26
Have Experienced Strokes	24	MS	7
Having Caring Responsibilities	11	Heart Problems	4
Unknown / Not Recorded	52	At risk of abuse	2
Other	73	Memory-loss	1
		Arthritis	9
		Fibromyalgia	2

The main cause of needing adult social care is limitations in physical mobility for 73% of Tier 2 clients, but 10% of clients have had a stroke or have other cardio-vascular issues. It is thought that social isolation, especially in the older age groups may be under-reported.



6. Added value

One of the strengths of My Choice is in the other services provided by the partners which complement the My Choice services and add value to the service provided under the terms of the contract. For example; the Dementia Companion pathway, CAT&W's MASDAP debt unit or Age UK's day-centres and groups. We also provide added value in different ways:

6.1 Additional funding

As noted above, the funding for the Paid Reps work is additional to the My Choice contract.

The community engagement from the My Way to Wellbeing project around community engagement on a Centre for Independent Living is being used, amongst other things, to inform development of current My Choice services.

6.2 Volunteer contribution

Age UK deploy a team of volunteers to help fill in benefits forms or help to resolve issues face to face that cannot be resolved over the phone. Taking Part uses volunteers for their My Choice, My Voice work. CAT&W has trained volunteers working with staff on the Tier 1 work.

Altogether, the partners' volunteers contributed around 500 hours towards the contract. This is worth almost £4,000 (based on the minimum wage).

6.3 Social media

All the partners promote My Choice on their websites and through Twitter and Facebook. Age UK STW is one of the top 20 most visited local Age UK websites this year.

	Twitter	Facebook	Website
Age UK	2,459 followers	558 likes	4,670 visitors 15,901 page views
Taking Part	595 followers	355 followers	1,200 hits
CAT&W	1,716 followers	164 followers 159 likes	3,553 visitors 7,642 page views
Alzheimer's	Org. 499 followers Staff 1603 followers	651 likes	
Totals	Almost 7,000 people get tweets about My Choice	Almost 700 people see posts about the My Choice services	More than 13,000 people access information on services



6.4 Benefit to the local economy

As an example: Age UK closed a total of 70 cases in the Benefits department during the quarter which derived a confirmed annual benefit revenue of £243,746. These awards of benefits are a clear outcome to the clients we have supported and the £243,746 has been brought in to the local economy of Telford & Wrekin.

6.5 Partnership working

All the My Choice partners work closely together, and we have excellent links with Telford & Wrekin CVS and the Carer's Centre as well as the wider networks. The Chief Executive Officer of CAT&W is the Chair of the Telford Crisis Network.

Taking Part continue to be involved in the following pieces of work and projects specifically for clients with learning disabilities:

- Transforming Care Programme (TCP) We are currently working with families who have children up to the age of 25 to ascertain their experiences of services when they have a family with behaviour challenges. This work will be completed in October 2018.
- Learning Disabilities Mortality Review (LeDeR)
- NHS England Advisory Group
- DIAG and LIAG West Mercia Disability Groups

Taking Part represented the My Choice Partnership My Choice at Telford and Wrekin Safeguarding Adults Board (T&WSAB) including the Joint Strategy, Communications and Planning sub group. A presentation was given by Taking part at the September T&WSAB with regards to Care Act Advocacy and referrals for Safeguarding which remains at zero. This was taken onboard and is going to be investigated by the Safeguarding Team Manager. They also reported that, since the start of the contract My Choice have received 104 referrals for Paid Reps and there are 64 active cases as at mid-September.

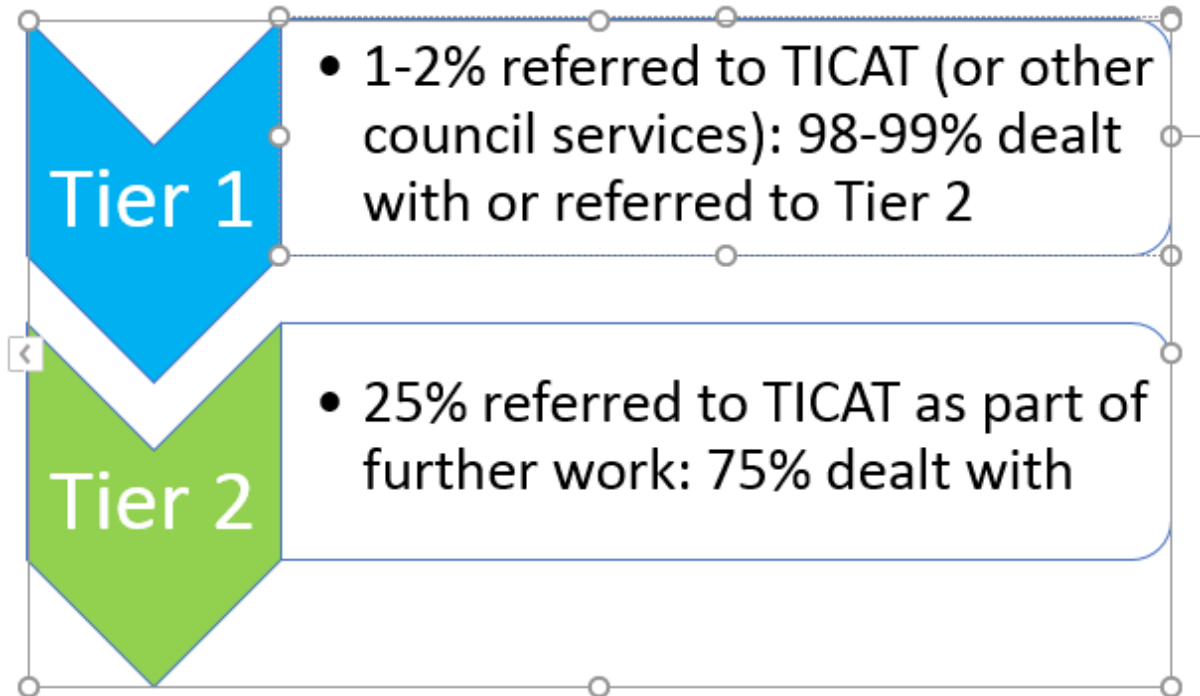
As part of the formal representation of My Choice and the clients we support, Taking Part's Information & Advice Officer is on the Making It Real Board.

6.6 Benefit for Telford & Wrekin Council services

In the previous quarter, 1% of calls were referred directly to TICAT (or other council services) and of the 600 people who were referred for Tier 2 services 92 were referred to TICAT by Age UK and 59 by Taking part which is roughly 25% of Tier 2 referrals. These referrals were made after initial help, information and advice was given and so are of clients who understand the processes and options much better than they did initially.

Of 1,935 enquirers, we ultimately referred 168 to Council Departments, mostly TICAT.

This can be shown as follows:



This means that at Tier 2; 75% of clients were provided with advice, advocacy and information relating to their issues and needs, in a more preventative way than being referred into Adult Social Care.

- Of the referrals into Tier 2 received about getting an OT Assessment (47% of total referrals received) under half of these were passed on to TICAT for formal OT Assessment - this means that 51% were given advice and information for seeking alternative solutions encouraging self-help or signposted to alternative non-statutory services.
- Of the referrals into Tier 2 wanting Care Assessments (32% of total referrals received) some 44% were passed to TICAT for a formal Care Assessment request. This means that 66% clients requesting for Care Assessments were given advice and information for alternative services or self-help.

This represents a considerable saving in time and resource for Telford & Wrekin Council.



7. Future developments

7.1 Funding Developments

CAT&W was awarded a grant of £36,200 by the Nationwide Trust to develop the Trusted Assessor work starting in October 2018. This will mean an increase in hours for Brenda Patrick (Age UK) and for Beth Brooker (Taking Part) and the opportunity to work more closely with the Shropshire Fire and Rescue Service to identify people needing the service. It is anticipated that this service will reduce the number of referrals into TICAT.

With the local roll-out of Universal Credit in November 2018, it is expected that there will be an upsurge in welfare benefit queries. Universal credit will affect people who are not job-seeking or who are on Disability Living Allowance or Attendance Allowance, as it will replace, Housing Benefit and Child Tax Credit. Citizens Advice nationally has obtained a £31m contract to deliver Universal Support which includes a range of help for Universal Credit Claimants. There will be a substantial award to support local provision imminently.

7.2 Telford & Wrekin Council Scrutiny Committee

The My Choice partners are all contributing to a review of unmet need amongst people with adult social care needs. CAT&W is sitting on the steering group of this piece of work which is being lead by Telford & Wrekin Health Watch. We are disseminating questionnaires and conducting in-depth interviews to gather data. From 1st November to 10th December, My Choice clients will be asked both at Tier 1 and Tier 2 whether they want to contribute. The report will go to Scrutiny Committee in February 2019.

7.3 Tier 1 development

The training and supervision on the Tier 1 First Point of Contact has been refreshed and re-organised to raise the quality of the response. However, plans are being made to co-locate the Tier 1 and Tier 2 services from January 2019. The partners think that this is a natural development of the partnership model which has many benefits:

- Even more seamless referral for clients
- Increased interaction between Tiers 1 and 2 and cross-fertilisation of ideas
- Better access to Tier 2 staff for professionals, producing quicker responses to queries

We are also hoping to work closely with Telford & Wrekin CVS and the Carers' Centre in this model. A detailed plan will be discussed with commissioners in due course.



8. Who we are

There have been personnel changes within the partners over recent months. The people working on My Choice are as follows:

Citizen's Advice

- Caro Hart – CEO (Started July 2018)
- Will Davies – My Choice FPOC Lead

Taking Part

- Julie Mellor – CEO
- Beth Brooker, Keith Billson and Tash Gilmore – Information, Advice and Advocacy Officers
- Beth Brooker – Trusted Assessor – Aids and Equipment Advisor

AgeUK

- Heather Osbourne – CEO
- Rob Smith - Information & Advice Manager
- Jan Evans & Joan Bowen - Supported Guidance Officers (Job share)
- Brenda Patrick – Trusted Assessor - Aids & Equipment Advisor
- Sue Hughes – Benefits Adviser

SIAS

- Stephen Novick – Service Director (Started October 2018)
- Lynda Curtiss – Senior Advocate
- Amanda Mills – Advocate
- John Curtis – Advocate
- Jean Harris – Advocate
- Emma Harris – Advocate
- Tammy Cotton – Administrator

Alzheimer's Society

- Dianne Beaumont – Service Manager
- Charlotte Williams – Information Worker (left September 2018)

Appendix One: awareness-raising work

Alzheimer's Society - Monitoring 1st July to 17th September 2018

Activity	Target audience	No of contacts (may be estimated)	Subjects/key messages
<i>Group awareness session</i>	<i>carers</i>	<i>12</i>	<i>Dementia awareness</i>
Visited Muxton village Hall (2/7/18)	General public	3+	Left leaflets and poster in foyer, spoke to caretaker and 2 volunteers
Coffee morning at leegomery community centre (2/7/18)	General public	11	General conversation and flyers handed out, poster on community board
Dawley Bank Community Centre (3/7/18)	General public	2+	Left leaflets and poster in foyer, spoke to 2 people
Donnington Community Centre (3/7/18)	General public centre manager, café volunteer and customers	5+	Left leaflets and poster in foyer
Telford Senior Citizens forum (4/7/18)	General public	40	General conversation (Dementia support leaflets & My Choice flyers given out)
PRH stand (9/7/18)	General public, patients & staff	24	General conversation (Dementia support leaflets & My Choice flyers given out)
Speaker at Towns Womens Guild, Wellington (10/7/18)	Local community	42	Speaker, General conversation (Dementia support leaflets & My Choice flyers given out)
Meeting at Sutton Hill Community Centre (11/7/18)	Local community	10	Leaflet on notice board. Dementia support information & My Choice flyers left
Visit to Oakside Centre, TF4 3EG (18/7/18)	Local community	40+	Leaflet on notice board. Dementia support information & My Choice flyers left
Stand at Southwater (19/7/18)	General Public	25	Leaflets/general Conversation...



Activity	Target audience	No of contacts (may be estimated)	Subjects/key messages
Drop in at meeting point house café	General Public	20	General conversation, My Choice and Dementia Support Leaflets given out
Oak Tree Centre meeting (23/7/18)	Local community	3	General conversation (Dementia support leaflets & My Choice flyers left in foyer)
Meeting at Brookside Community centre, TF3 1ND (23/7/18)	Local community	5	Leaflet on notice board. Dementia support information & My Choice flyers left
Reverend Matthew Lefroy St Johns Church, Muxton - (24/7/18)	Local community	2	Poster displayed and leaflets left
Donnington Community Centre open Day (25/7/18)	Local community	42	General conversation and leaflets given out.
Hollinswood community centre stand (30/7/18)	General public	29	General conversation request to display Dementia support leaflets & My Choice flyers
Lawley Community Centre, Arleston (31/7/18)	General Public	8	Posters on Community notice board and general conversation
Randlay Community Centre (1/8/18)	Local community	20	General conversation request to display Dementia support leaflets & My Choice flyers
Dementia Friendly talk to St Georges Parish Council (6/8/18)	members	8	Dementia support leaflets & My Choice flyers given out. Poster displayed and leaflets left
Hub on the Hill visit to café (7/8/18)	general public	15	General conversation request to display Dementia support leaflets & My Choice flyers
Dementia Friends to great Dawley Parish Council (8/8/18)	members	12	Dementia support leaflets & My Choice flyers given out. Poster displayed and leaflets left



Activity	Target audience	No of contacts (may be estimated)	Subjects/key messages
Brookside community centre meeting (12/8/18)	Manager	1	General conversation regarding my Choice and Dementia awareness
Brookside Community Centre - Hamner lake fun day (13/8/18)	General public	23	My Choice poster displayed and leaflets left after session and dementia support postcards in foyer
Stand at Court Street Medical Practice (20/8/18)	Local community	12	General Dementia awareness and My choice contact and remit (Dementia support leaflets & My Choice flyers left)
Visit Community centres and restock leaflets and ensure posters still displayed (4/9/18)	General public		Poster displayed and leaflets left
Meeting with Donnington Parish clerk (5/9/18)	staff	1	General conversation regarding my Choice and Dementia awareness
Madeley Dementia Friends (10/9/18)	Staff	9	Dementia support leaflets and poster left, My Choice poster displayed
PRH stand monthly	General public, patients and staff	Approx 50	Table - My choice contact and remit. Dementia awareness. Verbal conversations, leaflets handed out.
Updating permanent display boards in outpatients and fractures at PRH (ongoing)	General Public and Staff	30 leaflets	Dementia awareness and My choice contact and remit
Set up weekly tweets & Facebook posts about My Choice (ongoing)	General public	Approx. 200	My choice information on a social media platform
700 approx			