



NOTICE OF MEETING

CABINET MEMBER FOR HEALTH, WELLBEING & SOCIAL CARE

THURSDAY, 10 MARCH 2022 AT 10.00 AM

COUNCIL CHAMBER - THE GUILDHALL

Telephone enquiries to Anna Martyn 023 9283 4870
Email: Anna.Martyn@portsmouthcc.gov.uk

If any member of the public wishing to attend the meeting has access requirements, please notify the contact named above.

Information with regard to public access due to Covid precautions

- Following the government announcement 'Living with COVID-19' made on 21 February attendees will still be requested to undertake an asymptomatic/ lateral flow test within 48 hours of the meeting until the end of March (This guidance will be updated at that point). Around one in three people who are infected with COVID-19 have no symptoms so could be spreading the virus without knowing it. Asymptomatic testing - getting tested when you don't have symptoms - helps protect people most at risk by helping to drive down transmission rates.
- We strongly recommend that attendees should be double vaccinated and have received a booster.
- If symptomatic we encourage you not to attend the meeting but to stay at home, avoid contact with other people and to take a PCR test in line with current UKHSA advice.
- We encourage all attendees to wear a face covering while moving around crowded areas of the Guildhall.
- Although not a legal requirement, attendees are strongly encouraged to keep a social distance and take opportunities to prevent the spread of infection by following the 'hands, face, space' and 'catch it, kill it, bin it' advice that also protects us from other winter viruses.
- Hand sanitiser is provided at the entrance and throughout the Guildhall. All attendees are encouraged to make use of hand sanitiser on entry to the Guildhall.
- Those not participating in the meeting and wish to view proceedings are encouraged to do so remotely via the livestream link.

Membership

Cabinet Member for Health, Wellbeing & Social Care
Councillor Jason Fazackarley (Cabinet Member)

Group Spokespersons

Councillor Jeanette Smith

Councillor Lewis Gosling

Councillor Kirsty Mellor

(NB This agenda should be retained for future reference with the minutes of this meeting).

Please note that the agenda, minutes and non-exempt reports are available to view online on the Portsmouth City Council website: www.portsmouth.gov.uk

Deputations by members of the public may be made on any item where a decision is going to be taken. The request should be made in writing to the contact officer (above) by 12 noon of the working day before the meeting, and must include the purpose of the deputation (for example, for or against the recommendations). Email requests are accepted.

AGENDA

Meeting information: Risk assessment for Council Chamber

1 Apologies for absence

2 Declarations of interest

3 Adult Social Care Safeguarding overview (Pages 7 - 12)

Purpose

To give an overview of Portsmouth Adult Multi-Agency Safeguarding Hub, (Adult MASH) the safeguarding team at Portsmouth City Council.

4 Transition into adulthood (Pages 13 - 16)

Purpose

To update the Portfolio holder and spokespeople of the needs, protocols in place and ambition to provide a transition pathway for all young people who will be in need of adult social care.

5 Meals delivery in Portsmouth (Pages 17 - 20)

Purpose

To update the cabinet member and Health, Wellbeing & Social Care spokespeople as to the plans for a meal delivery service when the current contract expires in April 2022.

6 Adult Social Care inspection overview (Pages 21 - 22)

Purpose

1. To update the Portfolio holder and spokespeople of the intention for

the Care Quality Commission, (CQC) to inspect the provision of adult social care in Local Authorities and the potential impact on the Council.

2. To set out the intention to bring a cabinet briefing paper once inspection criteria have been published.

7 Management information and data in Adult Social Care (Pages 23 - 26)

Purpose

To update the Cabinet Member and HWBSC spokespeople how Adult Social Care (ASC) can meet its statutory obligations to provide data for national returns and how business critical management information can be supplied to managers.

8 Covid-19 intelligence update (Pages 27 - 28)

Purpose

To provide an update on the latest position regarding Covid-19 data and intelligence for Portsmouth.

Members of the public are permitted to use both audio visual recording devices and social media during this meeting, on the understanding that it neither disrupts the meeting nor records those stating explicitly that they do not wish to be recorded. Guidance on the use of devices at meetings open to the public is available on the Council's website and posters on the wall of the meeting's venue.

Whilst every effort will be made to webcast this meeting, should technical or other difficulties occur, the meeting will continue without being webcast via the council's website.

This meeting is webcast (videoed), viewable via the council's livestream account at <https://livestream.com/accounts/14063785>

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Coronavirus Risk Assessment for the Council Chamber, Guildhall

Date: 25 February 2022 (based on Living with Covid - February 2022)

Review date: 31 March 2022

Author: Lynda Martin, Corporate Health and Safety Manager, Portsmouth City Council

Coronavirus Risk Assessment for the Executive Meeting Room, Guildhall

Manager's Name and Job Title completing Risk Assessment:	Lynda Martin Corporate Health and Safety Manager	Risk Assessment Dept:	Corporate Services	Date:	25 February 2022	Signature:	
		Location:	Council Chamber, Guildhall				

Hazard	Who could be harmed and how	All controls required	How controls will be checked	Confirmed all in place or further action required
Risk of exposure to Covid-19 virus - Ventilation	Staff, contractors and attendees	<ul style="list-style-type: none"> There are no longer capacity limits for the Guildhall Chamber. Face coverings are advised to be worn in busy and crowded places and should only be removed when addressing the meeting. The actions to maximise ventilation in the Guildhall Council Chamber remain in place: <ul style="list-style-type: none"> The removal of internal casement secondary glazing windows. Large casement windows will be opened. Pedestal fans - positioned in each of the wing areas and along the back wall behind the pillars, maximum speed and modulation setting. High level doors and window - the double doors to the high-level galleries and the gallery corridor window will be opened. 	Staff will ensure windows are open and fans switched on.	In place
Risk of transmission of virus - Risk mitigation	Staff, contractors and attendees	<p>The Guildhall has the following measures in place:</p> <ul style="list-style-type: none"> Face Coverings – as per government guidance, we encourage you to continue to wear a face covering whilst in the venue & crowded places especially when walking around the building. Enhanced Sanitisation & Cleaning – we will carry out enhanced cleaning procedures between shows and we ask that you sanitise your hands on entry and regularly throughout your visit at the sanitisation points provided. 	The Guildhall Trust and PCC Facilities Team to implement and monitor.	In place
Risk of transmission of virus - Hygiene and prevention		<ul style="list-style-type: none"> Although not a legal requirement, attendees are strongly encouraged to keep a social distance and take opportunities to prevent the spread of infection by following the 'hands, face, space' and 'catch it, kill it, bin it' advice that also protects us from other winter viruses. Wash hands for 20 seconds using soap and water or hand sanitiser. Maintain good hygiene particularly when entering or leaving. Hand sanitiser and wipes will be located in the meeting room. No refreshments will be provided. Attendees should bring their own water bottles/drinks. All attendees should bring and use their own pens/stationery. Attendees are requested to undertake an asymptomatic/ lateral flow test within 48 hours of the meeting (requirement in place until the end of March 2022). It is recommended that attendees should be double vaccinated and have received a booster. 	The Guildhall Trust and PCC Facilities Team to implement and monitor.	In place
Financial Risk	Staff, contractors and attendees	<ul style="list-style-type: none"> The council meeting may need to be cancelled at short notice if the Covid-19 situation changes due to local outbreaks, local sustained community transmission, or a serious and imminent threat to public health. Technology in place to move to virtual council meeting if required and permitted by legislation. 	Financial commitments minimised wherever possible.	In place

Updates

- This risk assessment is a live document and will be updated as new information becomes available.
- All managers should feel free to adapt the measures contained within this risk assessment when assessing the risks for their own department's work activities/ premises.

Further information

- Further government information on support during the coronavirus pandemic can be found [here](#)
- HSE guidance, on working safely during the coronavirus pandemic can be found [here](#)
- Staff wellbeing advice during the coronavirus pandemic can be found [here](#)

Agenda Item 3



THIS ITEM IS FOR INFORMATION ONLY

(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

Title of meeting: Health, Wellbeing & Social Care Portfolio Meeting.

Subject: Adult Social Care Safeguarding Team

Date of meeting: 10th March 2022

Report by: Laura Ternofsky, presented by Andy Biddle

Wards affected:

1. Requested by

Cllr Jason Fazackarley, Cabinet Member for Health, Wellbeing & Social Care

2. Purpose

To give an overview of Portsmouth Adult Multi-Agency Safeguarding Hub, (Adult MASH) the safeguarding team at Portsmouth City Council

3. Information Requested

How the Council supports adults in need of safeguarding

4. Statutory basis for safeguarding activity

The legislation the safeguarding team works under is Section 42 of the Care Act 2014.

A Section 42 safeguarding enquiry is triggered when an adult:

- i) Has care and support needs as defined by the Care Act 2014 *and*
- ii) Is experiencing or at risk of experiencing abuse or neglect *and*
- iii) As a result of their care and support needs, is unable to protect themselves

Care and support needs are defined by the following eligibility criteria which is determined by the local authority

- Condition 1 - The adult's needs for care and support result from a physical or mental impairment or illness, not other circumstantial factors
- Condition 2 - As a result of their needs the adult is unable to fulfil two or more outcomes specified in regulation, including (but not limited to): maintaining personal hygiene, being appropriately clothing, managing toileting, making use of services in the community, maintaining a habitable home
- Condition 3 - As a result of being unable to achieve these outcomes, there is likely to be significant impact on the adult's wellbeing

The categories of abuse and neglect, as defined by the Care Act Statutory Guidance are:

- Physical abuse - *hitting, punching, scalding, force-feeding, use of restraint*

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- Neglect and acts of omission - *failure to provide food, medication, medical care*
- Domestic abuse - *physical violence, coercive behaviour, emotional, financial*
- Sexual abuse - *non-consensual penetration and touching, non-consensual photography*
- Psychological abuse - *intimidation, humiliation, enforced social isolation*
- Financial or material abuse - *theft, fraud, scams, misuse of benefits, misuse of Power of Attorney*
- Modern slavery - *human trafficking, domestic servitude, forced labour*
- Discriminatory abuse - *verbal abuse including derogatory remarks, denying rights*
- Organisational abuse - *insufficient staffing, lack of leadership, failure to respond to complaints, lack of dignity and respect*
- Sexual exploitation - *escort work, prostitution, pornography*
- Self-neglect - *lack of self-care to the extent it threatens safety, failure to seek help*

5. Service delivery in Portsmouth

The safeguarding team in Portsmouth receive safeguarding concerns via email and telephone calls from a wide range of sources including hospitals, care homes, members of the public, family members, emergency services, and councillors. These concerns are recorded and reviewed by the small team of qualified Social Workers. Social workers have access to a range of information including GP records and assess the concern against the Section 42 criteria described above.

If the concern meets the Section 42 criteria, an enquiry will be initiated. This will be allocated to the most appropriate person - ideally a keyworker, someone who knows the person. The safeguarding team will hold enquiries where there is no suitable alternative worker. The purpose of the enquiry is to review what action needs to be taken to reduce the risk to the adult, with the views and wishes of the adult being at the forefront.

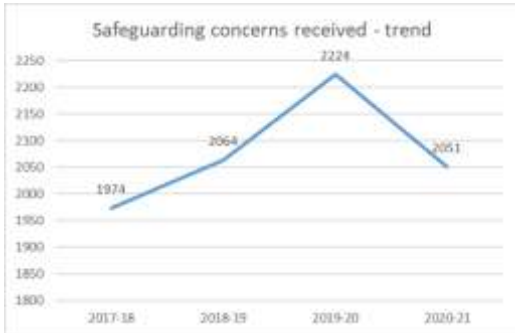
If the concern does not meet the Section 42 criteria but the risk is very high, a Non-Statutory Enquiry or the Multi-Agency Risk Management (MARM) framework may be initiated, both of which also aim to reduce risk. In cases where a concern does not initiate an enquiry or MARM, the team may signpost to other agencies, liaise with allocated workers to follow up on concerns, make referrals to other services, and give general safeguarding advice.

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6. Data, trends, national comparison

The number of concerns received by the team had been steadily increasing year on year until 2020-21 when there was a sharp decline in referrals during the initial lockdown period. Referral rates have now returned to normal rate and by the end of this reporting year, it is likely that the team will have received over 2,300 safeguarding concerns in 2021-22.



The most apparent theme in concerns has been an increase in concerns relating to self-neglect. In the last reported quarter (Q2 2021-22) concerns about self-neglect accounted for 16% of total concerns received.

Portsmouth has a higher number of concerns per 100,000 people than the national average - in 2020-21, Portsmouth had 1200 concerns per 100,000 people, compared to 1121 concerns per 100,000 people nationally. Portsmouth carried out 422 Section 42 enquiries per 100,000 people in 2020-21, compared to a national average of 343 Section 42 enquiries per 100,000 people.

In addition to safeguarding concerns, the team also receives notifications from the police (Public Protection Notice, PPN1) when officers are concerned about adults. PPN1s have been increasing in number over the last eighteen months, with 919 received in Q2 2021-22.

Covid impact

The team have experienced a fluctuation in the number of concerns received. During the initial lockdown period (Q1 2020-21) the number of concerns received was 31% lower than the number received in the same quarter the previous year.

Referrals received have tended to be more complex in nature, requiring more input from the team and a notable increase in referrals where significant self-neglect and associated issues including substance abuse have been apparent.

7. Case Study

The case study below highlights the use of the MARM (Multi-Agency Risk Management) Framework, safeguarding adults at risk who have capacity. This case study is included in the Portsmouth Safeguarding Adults Board annual report 2020-21.

Case study: MARM framework (Peter*)

Peter was a man in his 50s, living in homelessness accommodation in Portsmouth. He had a long history of substance misuse, self-neglect and had been diagnosed with a life limiting condition. Due to his complex needs, previous lack of engagement with support services, and the unsuitability of his current living situation, a MARM was initiated to bring all the people involved in Peter's care together to risk-assess and plan next steps.

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During his MARM, Peter was asked about his views and wishes. He said his main wishes were to be nearer to his family and that he did not want to die in homeless accommodation. A number of MARM meetings were held involving health professionals, social workers, housing officers and representatives from the local authority where Peter's family lived.

*The outcome of the MARM process was that Peter was assessed formally via a Care Act Assessment, a package of care was put in place, and thanks to cooperation between local authorities, Peter was moved to more suitable accommodation near his family, fulfilling his wishes.
Name changed to protect identity

8. Continual professional development and governance

In addition to triage and casework, the safeguarding team also provide outreach and education. The team offers bespoke training sessions covering topics such as Section 42 criteria, how to make referrals and consent to share information.

The team hold 'Virtual Safeguarding Clinics' every fortnight, offering staff from Adult Social Care and PCC Housing Neighbourhoods & Buildings colleagues the opportunity to speak to a practitioner about anything related to safeguarding adults. Various members of the team have been involved in Members Training, including social workers, managers and the manager of Portsmouth Safeguarding Adults Board (PSAB).

The team have a strong commitment to governance, holding quarterly governance meetings which include members of the management team and attendees from other agencies to ensure external oversight. The main focus of these meetings is to review the team development plan, and to review the findings of local audits. As well as participating in formal audits initiated by the Portsmouth Safeguarding Adults Board, the safeguarding team regularly independently audit aspects of the workflow to ensure quality and identify areas of learning. The most recent independent audit reviewed the accuracy of information included on case notes compared to the information given to managers when making a triage decision.

9. Conclusion

The work of the team conforms to the ASC strategy:

- Personalise care and support responses to individuals and their circumstances
- Work more collaboratively with communities and individuals to enable them to exercise choice and control
- Outcome focused services, that keep people independent and safe

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Signed by (Director)

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Appendices:**Background list of documents: Section 100D of the Local Government Act 1972**

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

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Agenda Item 4



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(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

Title of meeting: Health, Wellbeing & Social Care Portfolio meeting

Date of meeting: 10th March 2022

Subject: Transition into Adulthood

Report by: Rachael Roberts, presented by Andy Biddle

Wards affected: All

1. Requested by

Cllr Jason Fazackarley, Cabinet Member for Health, Wellbeing & Social Care

2. Purpose

To update the Portfolio holder and spokespeople of the needs, protocols in place and ambition to provide a transition pathway for all young people who will be in need of adult social care.

3. Information Requested

An outline of the arrangements to ensure person centred transition

4. Background & Context

For children and young people who have disabilities and support needs which mean they are likely to require support as they become adults, there should be a planned entry into adult social care, (ASC) provision.

This is enshrined in legislation under the Care Act 2014 and The Children Act 1989. For those with Special Educational Needs, the Children and Families Act 2014 also requires organisations and services to work together to support these young people as they move into adulthood. This working together should be detailed in an Education Health and Care plan (EHCP) brings together education, children's social care, adult social care and health service support in one document.

The term "Preparing for Adulthood" (PfA) is used to describe the process of moving from young adulthood into adult life. It takes place for young people with care and support needs when a young adult moves from children's social care to adult services, or when young people start to think about what they want to do as an adult. This usually happens between the ages of 14 and 25.

The Department for Education (DfE) fund the Preparing for Adulthood programme and their mission is that young people with Special Educational Needs and Disabilities, (SEND)

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have equal life chances as they transition into adulthood. For example, paid employment, housing, independent living, choice and control, friends and relationships.

There is also a group of young people who have particular difficulty in accessing the assessment and support services that they are entitled to under the Care Act due to autism/neuro-diversity. Whilst there is disagreement about terminology, the young people who engaged in helping to write the Portsmouth Children's Trust draft Neurodiversity strategy have chosen the terms as defined below:

Neurodiversity is a way of saying that everyone's brains are organised in a different way. Different people think, feel and behave differently - not just because of differences in culture or life experience, but because of variations in the way that brains are "wired".

Neurodivergent is a term used to describe a person who has atypical neurological development. Some people have brains which are organised in a very different way, sometimes people may have a diagnosis like Autism, Learning Disability, ADHD, Dyslexia, Dyspraxia, Dyscalculia, Tourette syndrome but sometimes the differences don't fit neatly into a diagnosis.

Neurotypical is the opposite of neurodivergent

Neurodisability is an umbrella term for conditions associated with impairment involving the nervous system and includes conditions such as cerebral palsy, autism and epilepsy; it is not uncommon for such conditions to co-occur.

5. Service provision

5.1 Preparing for Adulthood Group

The Preparing for Adulthood group consists of representatives from teams across the Council, Schools and colleges, community resources, young people and parents. This group meets alternate months, sitting under the Portsmouth SEND strategy:

"Preparing for Adulthood: Ensuring young people with SEND develop independence, achieve good health, make and maintain positive relationships, be included in their local community and receive support, where necessary to successfully prepare for employment." There is a Preparing for Adulthood delivery plan which promotes 'effective preparation for adulthood and smooth transitions to adult services.'

5.2 Transition Protocol

This policy is issued to ensure that young people and their families know what to expect (when preparing for adulthood) from professionals across education, health and social care from 14-25 years. The aspiration is for this process to be:

- Well planned
- Integrated
- Person centred

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- Discussions will take place with the young person, their family / carer / significant others regarding their future.

The protocol sets out how the transition process should work in Portsmouth. It outlines that children's services should be making a referral to adult services when the young person turns 14 and keep the adult's team updated if there are any significant changes to the young person's circumstances.

It gives direction as to who should be the lead professional in each academic year from year 9 (age 13-14 years) up to the young person turning 18, and the actions to be completed at each stage.

Adult services should have completed their assessments and confirmed eligibility so they young person can transition to the respective adult team when they reach their 18th birthday.

6. Governance and Audit

In May 2019 Portsmouth Safeguarding Children Partnership (PSCP) and Portsmouth Safeguarding Adults Board (PSAB) published reviews regarding 2 young people at the same time, due to the number of shared themes which highlighted learning needs for those working with young people in transition.

As a result of this PSCP and PSAB are delivering a multi-agency audit of young people moving from children's social care to adult social care. The audit will include young people with complex medical needs, physical disability and/or learning disability. It will also include people who are, or have been, looked after children. This work will help to understand the experience of young people and their families going through this transition and learning from this will inform future development work.

7. Service development

In November 2021, adult social care appointed a Transition Lead, a new role with a strategic focus on the Transition Pathway. The transition lead will be working with colleagues across adult services, children's social care and education, working with teams to develop understanding of the needs of young people and their families in the transition from children's to adult services and to foster good practice.

The lead will develop data and intelligence on the number and profile of young people due to enter adult social care to enable service and financial forecasting and development and work with commissioners where there are gaps in service provision to explore solutions and promote development of resources and opportunities.

The initial focus for the lead will be:

- Building links across the teams and services.
- Meeting with young people and families to enable the audit

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- Develop and implement a single referral process which will support those making referrals, improve reporting and forecasting, ensuring referrals are sent to the right team to facilitate early joint working.
- Recruitment to social work posts
- Developing the information available on the Local Offer website.

It has also been identified that adults who are neurodivergent may struggle to access support and this requires some dedicated work to address. The transition lead will therefore also work with the Portsmouth Autism Community Forum and link in with existing work to establish mechanisms for identifying neuro-divergent young adults who may require support and develop a transition pathway so these young people can access support and achieve their aspirations. This will require the recruitment of dedicated Social Work posts to work with this group.

8. Conclusion

This approach to service provision conforms with the aims of the ASC strategy:

- Deliver individual services to people that meet their needs and help them achieve outcomes they want to achieve, while keeping them safe
- Personalise care and support responses to individuals and their circumstances
- Work more collaboratively with communities and individuals to enable them to exercise choice and control
- Develop a wide range of support options that meet varied needs

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Signed by (Director)

Appendices:

Background list of documents: Section 100D of the Local Government Act 1972

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Agenda Item 5



THIS ITEM IS FOR INFORMATION ONLY

(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

Title of meeting: Health, Wellbeing & Social Care Decision meeting

Subject: Meals on Wheels

Date of meeting: 10th March 2022

Report by: Mark Stables, presented by Andy Biddle

Wards affected: All

1. Requested by

Cllr Jason Fazackarley, Cabinet Member, Health, Wellbeing & Social Care.

2. Purpose

To update the cabinet member and Health, Wellbeing & Social Care spokespeople as to the plans for a meal delivery service when the current contract expires in April 2022.

3. Information Requested

An outline of the arrangements to ensure continuity and development of the service.

4. Background & Context

The traditional 'Meals on Wheels' service in Portsmouth has been provided for many years by Apetito, a national supplier. Portsmouth residents are referred to the scheme by Social Workers and other professionals and the service offers a combination of food provision and 'checking in' on residents' wellbeing.

The service is currently provided to 160 people who pay £5.50 for a standard meal. Portsmouth City Council, (PCC) offer office, kitchen and parking facilities to Apetito. With the expiry of the current contract, Apetito have informed PCC that the company no longer wish to provide the service and no other provider has shown interest in providing the service. To continue providing the service, Apetito stated that increased food prices meant the charge would have to go up to £8 per meal to be viable; this wouldn't be viable for residents.

5. Service provision from 1st April 2022

The tender documents for this service included an emphasis on environment, welfare standards and supporting the local economy. Alongside the current providers withdrawal, this has led Adult Social Care, (ASC) to explore local options and to think about how a service can be provided in a way that better supports the clear direction of the ASC Strategy and the wider priorities of the Council.

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Specifically

- Tapping into strengths of community and creating greater local resilience
- ASC acting as a facilitator in partnership with provision
- Moving beyond limited eligibility criteria to develop low level preventative supports that reduce crisis
- Supporting the local economy and protecting the local environment

As a result, ASC contracts management invited a number of prospective partners to a meeting having provided a description of the service and asked them to consider how they might address 3 outcomes

- Providing nutritious meals
- Addressing social isolation and loneliness
- Provision of welfare checks

The discussion was positive and was followed up by a questionnaire and individual meetings with interested parties. All so far are enthusiastic about being part of the scheme and have significant experience, are already providing meals and/or befriending and/or practical help. Once this process is complete a 'contract' will be produced based on mutual expectations, business continuity requirements and allocation of post codes for provision. This will form the basis of a two-year pilot scheme.

5.1 Service detail

- Partners will have allocated areas of the city but be encouraged to offer mutual support to each other
- The 'Community Builder' post, (in ASC) will act as a central point of contact and will evaluate the outcomes of the service with ASC offering support and advice around policy creation, training etc.
- Partners will be expected to manage significant growth in demand, anticipating that needs around nutrition/isolation will extend beyond 160 people in a city the size of Portsmouth
- Partners will allocate more time to visits than previously to carry out 'guided conversations' regards any issues the person may be having. They will either provide additional help themselves; for example, the pub (a community resource) currently will clean, complete DIY, shop, or refer to ASC/HIVE front desk or directly to other community groups
- Innovative approaches will be trialled for example creating virtual dining rooms via iPads so that people do not eat alone
- Post pandemic confidence-building leading where possible to people accessing lunch clubs
- Where there is existing social care provision, (e.g., Domiciliary Care) for residents, the meals provision will integrate with this service
- Ingredients will be sourced locally (not frozen foods transported longer distance as is current practice)
- The price will be lower to the customer

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- All requirements in terms of hygiene standards, adapted meals, labelling, etc will continue
- It will be a service provided for the people of Portsmouth, by the people of Portsmouth

6. Outcomes/forward planning

The main outcomes anticipated are that many more people will use the scheme and those people, if they wish it, will receive help and support in a number of areas dealing with issues that are significant to them but relatively easy to resolve. People will be better connected and better fed.

The main output of the pilot will be a Report that sets out the tangible benefits to both Health and Social Care and makes recommendations regarding a way forward.

7. Conclusion

This approach to service provision conforms with the aims of the ASC strategy:

- Building capacity in our communities with a range of solutions
- Commission from outcomes and output measures
- Deliver safe and good quality services through a sustainable market
- Commission responsive care, personalised to individual need
- Work collaboratively with communities and individuals allowing them to exercise choice and control in all aspects of service design and delivery

.....
Signed by (Director)

Appendices:

Background list of documents: Section 100D of the Local Government Act 1972

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Title of document	Location

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Agenda Item 6



THIS ITEM IS FOR INFORMATION ONLY

(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

Title of meeting: Health, Wellbeing & Social Care Portfolio Meeting

Subject: Adult Social Care Inspection & Assurance

Date of meeting: 10th March 2022

Report by: Sharon Smith, Principal Social Worker

Wards affected:

1. Requested by

Cllr Jason Fazackarley, Cabinet Member for Health, Wellbeing & Social Care

2. Purpose

To update the Portfolio holder and spokespeople of the intention for the Care Quality Commission, (CQC) to inspect the provision of adult social care in Local Authorities and the potential impact on the Council.

To set out the intention to bring a cabinet briefing paper once inspection criteria have been published.

3. Information Requested

An outline of the decision making and process for inspection and the preparation required.

4. Requirements

The [Health and Care Bill](#) 2021 creates a new duty for CQC to independently review and assess the performance of local authorities in delivering their adult social care, (ASC) functions, as set out under part one of the Care Act 2014. The criteria against which ASC will be assessed has not yet been set out as of February 2022.

5. Self-Assessment

As part of preparation for the inspection ASC in Portsmouth will be assessing service provision against:

- The Southeast Principal Social Worker network 'Preparing for Inspection self-assessment tool'
- The 'Toward Excellence in Adult Social Care' risk assessment tool

The aim of using these tools is to set out known areas of good practice and identify where new information may be needed and where the service needs to develop practice. ASC will collaborate with regional neighbours through the Association of Directors of Adult

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Social Services, (ADASS) for peer reviews and to learn together in preparation for inspection.

6. Developing Practice

The inspection process is likely to commence from April 2023, however CQC have not yet published the framework, this is anticipated during 2022. The process is likely to be based on data submitted through existing returns, self-assessment, sector-led improvements and an annual inspection exercise.

ASC are developing the service Quality Assurance Framework and strengthening governance arrangements in oversight of service provision. The work will be managed as a project and have a central point of knowledge and improvement work through a governance group. The service has developed practice tools to support a consistent approach to quality assurance across the service.

ASC has an ongoing project to refine data collection and improve data capture through the System1 recording system. This will be essential in being able to meet data return requirements from CQC/DHSC. Practice and recording reviews are in place and learning panels are being established with practitioners. Reviewing practice quality, and focussing learning and development on improvement, will enable us to know our areas for development and action plan.

The last national inspection of ASC was over 10 years ago and, in the intervening period, savings decisions have been made which has affected the capacity of the service to prepare for and respond to inspection. The service will be recruiting a performance manager to strengthen our preparation, given the limited management capacity in ASC.

Given the position of ASC as the largest financial commitment in the Council, when the full inspection framework is published, the service will seek to bring a paper to the Council's Cabinet. The purpose of this is part of good governance, to provide assurance to the Council on how well prepared the service is for inspection.

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Signed by (Director)

Appendices:

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location

Agenda Item 7



THIS ITEM IS FOR INFORMATION ONLY

(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

Title of meeting: Health, Wellbeing & Social Care Decision meeting

Subject: Information Management & Data in Adult Social Care

Date of meeting: 10th March 2022

Report by: Sam Midgely, presented by Andy Biddle

Wards affected: All

1. Requested by

Councillor Jason Fazackarley, Cabinet Member for Health, Wellbeing & Social Care

2. Purpose

To update the Cabinet Member and HWBSC spokespeople how Adult Social Care (ASC) can meet its statutory obligations to provide data for national returns and how business critical management information can be supplied to managers.

3. Information Requested

To outline the current data management project and how this impacts on preparation for the national inspection of Adult Social Care by the Care Quality Commission, (CQC)

4. Background and context

The recent draft strategy "Data Saves Lives: Reshaping Health and Social Care with Data" sets out the Secretary of State's vision and action plan to make better use of integrated data to save lives. Gaining actionable data insights which support quality and sustainability has never been more important to help plan, commission and improve care services. Data driven products and services are viewed as critical innovations to allow for a robust risk-based, intelligence-led approach when managing the demand for services.

However, with year-on-year reductions to resources, information management and data collection has lacked the investment necessary to automate, modernise and enable data to be used to better inform ASC activity. There is a need for the improvement of our data capture systems to ensure we can meet the demands for more timely, detailed, accurate and higher quality data for analytics and service management. The demand for data has increased and mandated national returns will undergo fundamental changes in the 2022 calendar years. Changes to NHS Digital requirements and the need for ASC to be more data driven and meet new performance requirements is a priority objective to support interoperability.

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5. Current Challenges

The necessary information is held across different case management and finance systems including SystmOne (the key case recording system) but much of it is recorded in the form of "free text". This means a person can read an individual case but applying automation to the data to gain a more strategic view is not currently readily accessible. Additionally, data is also held in different instances of SystmOne by our partner organisations. For example, NHS Solent record for people with a learning disability and working age adults with a mental health need and we need to co-ordinate requirements with our colleagues to submit data for various joint returns.

6. Priorities

NHS England have substantially changed collection requirements and datasets nationally to provide "Patient-Level Data" (PLD) for Continuing Health Care from April 2022 and supply "Client Level Data" (CLD) for NHS Digital from April 2023 for the rest of ASC. This means practitioners need to be recording several set pieces of information throughout the lifecycle of our involvement with a resident, so that a clear picture of services provided, and outcomes can be reported on.

The Care Quality Commission will reintroduce inspections of ASC departments from 2022/2023 and data submissions will be a vital part of this.

Health and Care Portsmouth require data for strategic planning and decision making to maximise use of resources. The service will be more data driven to inform its activity and commissioning and identify where efficiencies can be made.

7. Key outcomes

Provision of accurate and timely information to support statutory reporting, service day-to-day reporting, operational management, and future strategic decision-making. Enabled by:

- Design and deployment of the right cloud technical infrastructure as identified in corporate IT roadmaps and strategies
- Design of standardised datasets created as part of data warehouse and ASC data governance initiatives
- Successful and scalable data warehouse implementation and of a 'single version of the truth' through collaboration and knowledge sharing between partners and professional services (IT, HR etc.)
- Automation of report creation, no longer relying on key individuals and manual manipulation of data

7.1 Pre-requisites for success

- Selection and investment in appropriate analytical tools, training and staff
- SystmOne configuration, workflows and validations are in place to improve data quality
- Data quality is part of social care practice and meets both national and local standards

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- Everybody has ownership and responsibility to capture high-quality data at source (right first time)
- The appropriate training and guidance are in place to ensure everyone has the necessary skills and knowledge in relation to data quality
- Clear governance of responsibility and accountability for data and its processing is visible and understood

7.2 Plan to achieve

- Appointment of a Project Manager to collaborate with Corporate IT on the definition and design of an ASC Information Management and Data Strategy/Programme
- Identification and planning of distinct ASC Projects within a wider Corporate Reporting Programme (June 2022)
- Design and develop the automated supply of regular Business Information
- Appointment of a Data Lead and Business Analyst (November 2021) to carry out a gap analysis and undertake the necessary SystemOne reconfiguration in conjunction with the SystemOne Support Team. (This has started with CHC and will then move into all other areas of ASC)
- Working closely with NHS Digital (as a Pilot Authority for the CHC Client Level Data Set) who will support us and assist in reducing the burdens
- Technical discussions with The Phoenix Partnership (TPP) who we contract with to provide SystemOne
- Technical discussions involving PCC IT department around future provision of a data warehouse

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Signed by (Director)

Appendices:

Background list of documents: Section 100D of the Local Government Act 1972

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Agenda Item 8



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(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

Title of meeting: Health, Wellbeing and Social Care Portfolio
Subject: Covid-19 Intelligence Update
Date of meeting: 10 March 2022
Report by: Matt Gummerson
Wards affected: All

1. Requested by Director of Public Health

2. Purpose

2.1 To provide an update on the latest position regarding Covid-19 data and intelligence for Portsmouth.

3. Information Requested

3.1 Key data on Covid-19 in Portsmouth is summarised and updated weekly on the council website at [Latest coronavirus figures for Portsmouth - Portsmouth City Council](#). The latest available information will be presented at the meeting.

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Signed by (Director)

Appendices:

Background list of documents: Section 100D of the Local Government Act 1972

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