

Title of Meeting: Health Overview and Scrutiny Panel

Date of Meeting: January 2024

Subject: Adult Social Care Update

Report By: Andy Biddle, Director of Adult Social Care

1. Purpose of Report

To update the Health Overview and Scrutiny Panel on issues arising from the scrutiny of the Adult Social Care, (ASC) report presented to HOSP in November 2023.

2. Recommendations

The Health Overview and Scrutiny Panel note the content of this report.

3. Overview

Portsmouth City Council Adult Social Care, (ASC) reports on the activity undertaken by the service and outcomes for the residents of Portsmouth every six months. When the [last report](#) was presented in November 2023, panel members raised a number of issues and the Chair requested that a report be brought back to the next panel to answer these points.

4. Tables of characteristics/identity of residents who access services, (p 23/24 of the [November report pack](#))

4.1 Issue: There is not a category for people of Jewish origin, they should be considered an ethnic minority.

The ethnicity categories used are the same as currently used by the Office of National Statistics (ONS) and this is standard practice within public organisations. There is no separate category for Jewish Origin, rather respondents can use the category they feel best matches their ethnicity e.g. they can tick "Other" and specify further or they can tick White British. The ONS categories are as follows:

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese

- Any other Asian background
- Black, Black British, Caribbean or African
- Caribbean
 - African
 - Any other Black, Black British, or Caribbean background
- Mixed or multiple ethnic groups
- White and Black Caribbean
 - White and Black African
 - White and Asian
 - Any other Mixed or multiple ethnic background
- White
- English, Welsh, Scottish, Northern Irish or British
 - Irish
 - Gypsy or Irish Traveller
 - Roma
 - Any other White background
- Other ethnic group
- Arab
 - Any other ethnic group

4.2 Issue: A large number of residents do not have their age category identified, can the table be more accurate in the future?

The Independence & Wellbeing Team, (IWT) undertake regular data cleansing and will endeavour to have more robust data in the future. Not all our residents accessing services agree to share personal information such as age, sex, ethnicity etc. Under Article 7.4 of the General Data Protection Regulation, consent must be freely given and not be a requirement to access our projects¹. Therefore, the data may continue to have a large number of 'unspecified' entries in future reporting.

4.3 Issue: On the ethnicity table, there is a low level of respondents classing themselves as black African, black Caribbean and black other, this could indicate we are not reaching out/ignoring that community.

As set out, some residents do not wish to divulge personal data like ethnicity. The IWT are in the process of updating the directory of community-based groups and are planning to increase community outreach especially in marginalised communities².

¹ " When assessing whether consent is freely given, utmost account shall be taken of whether, inter alia, the performance of a contract, including the provision of a service, is conditional on consent to the processing of personal data that is not necessary for the performance of that contract." [GDPR](#)

² Further information is contained in Appendix 1

Portsmouth has several very active black African/Caribbean community groups and Portsmouth residents from these communities may engage with these groups directly rather than IWT groups. The IWT therefore take a strength-based, collaborative approach and work with existing community groups whereby they are the lead provider and IWT are a professional partner. IWT are developing a reporting mechanism to reflect the community outreach undertaken by the service to evidence engagement and outcomes with Portsmouth residents from an ethnic minority³. Part of the report due to Hosp later in 2024 will evidence the work the service has undertaken.

More detailed information around the work of the IWT within Adult Social Care and the breadth of activity and Portsmouth communities involved is attached as Appendix 2.

5. Portsmouth residents with a mental health need, (p 20/21 of the November report pack).

5.1 Issue: Concern over the challenge with obtaining a Psychiatric assessment.

Consultants are not required to undertake Mental Health Act Assessments, (MHAA) as part of their working contracts with the Trust. Doctors' roles and responsibilities have changed over time leading many to choose not to undertake MHAA at all while some may undertake them for the residents they know. Those working alongside the consultants such as Specialist Registrars will take assessments if they are on call for the area as part of their work. This can create the situation where a person subject to an assessment who is a patient of Solent NHS Trust may not have a doctor from the trust present for their assessment. The Approved Mental Health Professional, (AMHP) will always seek to locate a Doctor from the Trust but if all doctors contacted decline we then locate 2 [section 12 approved doctors](#) who can be either independent or work for a different trust.

The AMHP team also utilise a system called [Section 12 solutions](#) that holds a data base of Doctors that can be called on subject to their availability and speciality. Good practice guides the team to seek Doctors who have knowledge in areas of practice that are relevant for the person being assessed, for example; older persons, residents with a learning disability, children & young people and substance misuse and where possible previous acquaintance with the person being assessed.

³ [Writing about ethnicity - GOV.UK \(ethnicity-facts-figures.service.gov.uk\)](#)

Where there are time restrictions due to the [Section of the Mental Health Act](#) relevant to a person, it is not always possible to identify a Doctor with previous acquaintance or with specialist knowledge so the assessment will proceed with a different Doctor.

5.2 Issue: Concern over the AMHP team receiving low numbers of referrals from the breathing space programme, is this because of the eligibility criteria?

Eligibility for this programme is [outlined](#) by the Treasury and states the person must be subject to the Mental Health Act and in crisis at the time of the referral. Of the referrals received by the team, many do not meet this eligibility at the time of the referral and so are rejected. This does not prevent any resident them accessing support for the [30 day programme](#) as that is available to anyone in need.

6. Graphs relating to domiciliary and care homes, (p 28/29 of the November report pack).

6.1 Issue: The report references an increase in need, more than 12 months' data would be needed it would need to show more than a year to show an increase.

Tracking trends over a longer time period and being able to compare changes in demand across years and seasons allows the service to better understand fluctuations in demand, what is driving that demand and whether the increased is temporary or sustained. In Q3 of 2023/24 two new recruits started in data and business analyst posts in ASC, these roles are critical in providing the capacity and expertise to build business insights. This capacity will support data analysis over a longer period and inform action.

For domiciliary care demand, the provided data covers a period of 14 months, although this cannot evidence a trend per se, a direct comparison of Sept/Oct 2023 to Sept/Oct 2022 does show an increase, with a marked increase across the period from June 2023. Future reports will include data over a longer timeframe, similar to that for residential and nursing care homes⁴.

Appendices

⁴ NB - demand data for services across 2020/21 2021/22 would have been skewed due to the impact of Covid, so even when provided should be regarded with caution in comparative analysis.

Appendix 1 Community Outreach Plan 2024/25



Appendix%201%20
WT%20Equalities%20

Appendix 2 IWT Groups and reach



Appendix%202%20
WT%20groups%20an