



02 December 2016

Peter Hay  
Strategic Director for People  
Birmingham City Council  
PO Box 16466  
B2 2DP

Dear Peter

**Birmingham City Council Adult Social Care Peer Challenge – 14<sup>th</sup> -16<sup>th</sup> November 2016**

I write to give you formal feedback following the peer challenge on **Maximising the independence of adults in a financially challenged environment**. This builds on the provisional feedback we shared with you on 16<sup>th</sup> November 2016. (A copy of our presentation is attached as an appendix).

I was pleased to lead the peer challenge and I was joined by Pete Jackson, programme manager, Anne Clarke (assistant director Worcestershire County Council), Paul Smith (commissioning manager Wolverhampton City Council), Kerrie Allward (assistant director Walsall Council), Steve Corton Better Care Fund manager West Midlands), Keymn Whervin (expert by experience), Councillor Ken Meeson (Cabinet member and chair Solihull health and wellbeing board) and Mark Taylor (director of finance City of Wolverhampton Council). The team met over 90 people in 30 separate sessions and at 11 different locations in the 3 days we were on site.

The process also included a case file audit and this was led by Mark Godfrey for Improvement & Efficiency West Midlands, and undertaken by members of the West Midlands Principal Social Worker Network.

I would like to thank you for putting Birmingham forward to host this peer challenge at a time when you like many other councils face large challenges and pressures. Specifically, your strong recognition of the value of sector led improvement as a process for improving performance and outcomes. The flexibility the council demonstrated in responding to requests for additional information and also the quality and breadth of the data that was provided ahead of the visit was also very much appreciated

I would also like to thank all the people who use services, carers, staff and partners, the leader of the council, cabinet member for adults, and scrutiny members who participated in the challenge. We were made welcome and our thanks go to Mike Walsh and Mary Grant and the administrative team in your office for their organisation before and during our visit.

There were many positive areas of good practice and policy that we will take away from our visit and in particular the commitment and enthusiasm of staff at all levels in the organisation to provide great care for the citizens of Birmingham.

Ahead of the peer challenge you provided a detailed self-assessment and a focused set of documents that assisted the team in understanding the position of adult social care in Birmingham. This demonstrated a high degree of self-awareness of the challenges that you face. We felt that your use of the 6 domains of risk was particularly helpful in providing an overview and the team used this throughout the challenge to check alignment between your self-assessment and the evidence and commentary that we saw on site. I have attached a summary of our reflections on these areas in the appendix attached.

You asked for the peer challenge to focus on “Maximising the independence of adults in a financially challenged environment” and in particular to help your social care staff to best maximise the independence of adults.

In particular, to look at the effectiveness of your: -

- social care assessments and care packages
- care and support planning
- front line 'joint working' arrangements within health

Additionally, given the issues highlighted in your self-assessment, you requested that the team review: - whether Birmingham adult social care is facing a severe financial risk and if you are doing enough to mitigate this risk?

**Starting with the financial risk** the team identified this as the key challenge facing Birmingham 's adult social care services and the scale of financial challenge can be summarised in your self-assessment: -

“Since 2011 ASC budget has reduced by a cumulative total of £152m, the Transformation programme agreed in 2008 – 10 year saving of £200m has now stretched to £400m, there has been a reliance on reserves to balance the budget and the transfer of funding from health of £50m has a shortfall for 2016/17 of £28m, and there has been a failure to deliver previous budget targets.”

To mitigate these risks, you have instigated: -

- Fortnightly budget meetings with the CEO to monitor monthly trends and spend,
- Work to better understand the financial interactions with health
- The development of a clearer strategy for the provision of specialist care services
- The development of the Maximising Independence for adults' programme
- A review of value for money of in-house provision
- A review of financial controls, including panels and resource allocation system
- A Finance and Operational Management Audit Report which makes key recommendations such as:
  - Better availability of budget information for budget holders
  - Engagement with finance and operational management
  - Care package forecasting
  - Expenditure reports

What else should you be considering?

- The importance of getting an overall grasp of the financial challenges faced is urgent and the forthcoming Local Government Association Stress Test will require detailed work to be undertaken to present a credible narrative of the financial position.
- There is an urgent need to align financial monitoring systems between adult social care and corporate finance.
- The lack of ownership of budget savings at team and group manager level and the availability of accurate budget monitoring information is severely hampering the ability of front line staff to contribute to efficiencies and savings.
- There is a need for corporate 'ownership' of the adult social care budget targets – and a much better collective view of where they sit in the list of overall council savings priorities.

### **Social care planning, assessments and care packages**

Strengths

- Responsiveness of the Standard service.
- Access to enablement.
- Use of telephone assessment.
- Strengths identified in the case file audit included:
- Self-authorisation of assessments
- Quality of case recording
- Good learning and development through reflection.

### **Social care planning, assessments and care packages**

Areas for consideration

- Extent to which an asset based approach is embedded in all teams.
- Consistent practice in process for agreement for personal budgets.
- Consideration for options for support planning other than being social work led.
- Additional areas for consideration identified in the case file audit included:
- Extent to which strengths based work is embedded in all teams
- Having a stronger focus with regard to complying with the Care Act duty around promoting wellbeing
- Reviewing the approach to managing risk and reliance on institutional care.

### **Front line 'joint working' arrangements within health –**

Strengths

- Strong strategic commitment across partners.
- Degree of progress in the last 12 months.
- Growing understanding of the interface between health and social care.
- Actively engaged in the Sustainability and Transformation Plan (STP) process.
- Good frontline working relationships between health and social care.
- Growing joint working on pathways and shared protocols.

### **Frontline 'joint working' arrangements within health -**

City of Wolverhampton Council  
Civic Centre, St Peter's Square,  
Wolverhampton WV1 1RL

 [wolverhampton.gov.uk](http://wolverhampton.gov.uk)

 @WolvesCouncil

 WolverhamptonToday

### Areas for Consideration

- Separate budgets and relationships across health and social care impacts on ability for partners to work and commission collaboratively.
- Better Care Fund programme is not central to health and social care partnerships and is seen as a 'Health Plan'.
- Reviewing the potential for risk and benefit share arrangements.
- Increased use of data and intelligence to inform decision making.
- Vision for future integrated health and social care front door services not clear.

Given the breadth of the feedback that the team has provided I believe it would be helpful to highlight 6 areas where we recommend that you focus attention in your own planning and improvement processes. We have posed these as objectives in the expectation that you will wish to translate them into an action plan to respond to the areas we have suggested that you consider.

### Areas recommended for further action: -

1. strengthen your grip on the financial monitoring and delivery of efficiencies/ savings requirement given the scale and urgency of the budget challenges faced.
  - a. work closely with corporate finance on the current and future savings proposals to ensure deliverability and that the implications of any saving proposals put forward are fully owned by the service and the corporate centre
  - b. implement the findings of the recent Finance and Management Audit report
2. strengthen the relationship between the commissioning for excellence unit & with your delivery of frontline services and improve their engagement with stakeholders including carers
3. increase the pace and scale of transformation required by the Maximising Independence Programme to have a much stronger focus on the delivery of improved outcomes for service users
4. translate your initial thinking into a credible vision for an integrated place based health and care system in Birmingham and outline how relationships with health can be improved at the front door
5. upscale and maximise the potential offered by an asset based approach with the voluntary and community sector to transform your traditional Social work model placing a particular emphasis on your narrative and your actions in relation to prevention
6. strengthen the interface between adult social care and the corporate centre to realise the ambition for Birmingham to become "a city that cares" and a great city to grow old in.

### Conclusions

The team recognised the significant work the council has been undertaking and scale of the challenges that are faced given the size of the population, the levels of deprivation and the external attention that the council has received following the Kerslake review. We were very impressed by the commitment demonstrated by frontline staff and the determination of the council leadership team and politicians to move forward in a planned way to improve the independence overall of citizens and in particular the outcomes for those growing old in the city as part of the council's vision and plan for 2026.

Finally, we have sought to make the findings of the peer challenge constructive and helpful to the council and also to strike an appropriate balance between support and challenge. In line

with the west midlands peer challenge approach, we would ask that the council considers the recommendations, develops an action plan in response, and in March 2017 a review of progress takes place through a discussion between the Lead Director of Adult Social Care (DASS) and myself. It is also agreed in the West Midlands that councils will publish their peer challenge final letter and subsequent action plan to demonstrate its commitment to sector led improvement.

We hope that you regard the comments and recommendations the Team has made as being constructive and helpful. The regional Improvement manager Pete Jackson and Ian James the care and health improvement advisor for the LGA are resources that are available to support councils to develop action plans to drive change as a result of a peer challenge. We have learnt from the process ourselves and we have really appreciated the opportunity to take away some good examples of care and support that we can share with councils across the West Midlands.

On behalf of the Team, I would like to thank you for hosting this peer challenge and for working so positively with us. I hope that you will agree this has resulted in a helpful and constructive outcome and if you have any points that you would like clarifying please do not hesitate to contact me

Yours sincerely



Linda Sanders  
Strategic Director - People  
City of Wolverhampton Council  
01902 555300  
linda.sanders@wolverhampton.gov.uk

CC Mark Rogers, Cllr Paulette Hamilton, Martin Samuels, Ian James, Peer Challenge team

## Appendix 1

Birmingham City council self-assessment

### Leadership

#### Strengths

- Strategic Director of People is seen to be approachable and credible with a strong strategic vision.
- Cabinet member is seen as a committed and positive leader with visible leadership of the Maximising Independence of Adults Programme Board.
- Leader and Scrutiny Chair see Health & Social Care as a priority - "Care is what this City does".
- Chief Executive has demonstrated strong system leadership on behalf of the Sustainability and Transformation Plan (STP).
- A new city vision and plan has Older People as one of the four priorities - "A great city to grow old in".

### Leadership

#### Areas for consideration

- Encourage a whole council approach to the Adult Social Care agenda – aligning objectives and effort.
- Maximise opportunities for evidence based learning and encourage staff to review best practice elsewhere.
- Systematic approach to prevention.
- Strengthen the system leadership narrative and forum for integration – focus on outcomes.
- Need to develop a shared understanding of the challenges, opportunities and motivation to further develop trust in partnerships.

### Performance and outcomes

#### Strengths

- Impressive performance recovery on Deprivation of Liberty Standards back log (2500 March 15 - 150 November 16) excellent use of risk register.
- Clear programme management approach with political leadership for the Maximising Independence of Adults programme.

### Performance and outcomes

#### Areas for consideration

- High use of institutional care. Consider personalisation and empowerment through the use of direct payments.
- Delayed transfers of care – the position has been described as 'stabilised' but what are the current trends and could the Better Care Fund be used as a vehicle for partnership innovation?
- The performance in relation to the Adults Social Care Outcomes Framework does not benchmark well against regional and national comparators and represents a reputational issue for the council.
- Adults Community and Access Point – review demand management in relation to reablement and resilience/capacity (turnover/gaps through training & volume).

- Need fundamental review of interface with Carers and their engagement in co-production of services.
- Increase visibility and transparency of performance information to demonstrate and monitor progress and drive change.

### **Commissioning and quality**

#### Strengths

- Well-resourced team with capacity and capability to support the transformation of Adult Social Care
- Direct Payments Board Communications Strategy fully co-produced with service users
- Integrated and recovery based single system recommissioned re substance misuse services well aligned with social care and with good outcomes
- Scope for harnessing Public Health intelligence and expertise in Adult Social Care commissioning

### **Commissioning and quality**

#### Areas for consideration

- Clear disconnect between commissioning and delivery.
- Birmingham Care Wage may be unaffordable.
- Review outcomes delivered and value for money of internally provided services.
- Review the Adult Social Care profile of expenditure to match the aspiration in MIA.
- Development of a commissioning strategy to invigorate the third sector to support the MIA programme and reduce dependency on traditional services.
- Care Act was soundly implemented in 2013 but council may wish to consider current compliance with broader duties particularly carers, wellbeing and Market Shaping.

### **National priorities and partnerships**

#### Strengths

- Excellent Extra Care scheme independently evaluated by Aston University in 2015
- “Feels like the partnerships are coming together” BCF/HWBB/STP
- ‘No wrong door’ an excellent example of partnership led by BVCS to help support people with complex needs
- Leadership of the Health & Wellbeing Board and its clear strategic priorities
- Better Care Fund plan regarded as a good plan, approved with no conditions
- Transforming Care Board good governance established

**National priorities and partnerships**

## Areas for consideration

- “relationships with carers, regarded as being good two years ago have been neglected and as a result we feel undervalued, under supported and underserved”
- Long way to go towards co-production, review if structures are in place to support
- Need to understand the evaluation of the Shred Life Plus programme undertaken in 2015 and implement lessons as part of MIA programme
- Market sustainability - maintain focus given the ongoing fragility of the market

**Workforce management**

## Strengths

- Staff that we met were positive, enthusiastic, knowledgeable in their field and open to scrutiny and challenge
- The case file audit found:
  - Social Workers are generally positive about working in Birmingham.
  - Good support for students and the Assisted Supported Year in Employment Programme.
  - Philosophy of investment in people.
  - Well-resourced development programmes.

**Workforce management**

## Areas for consideration

- Workforce delivery split – clarity of accountability/affordability.
- How well are the costs understood for in house services?
- The case file audit found:
  - Review make safeguarding personal
  - Focus on developing asset based approach