

Public Document Pack

NOTTINGHAM CITY COUNCIL

HEALTH SCRUTINY COMMITTEE

MINUTES of the meeting held at Ground Floor Committee Room - Loxley House, Station Street, Nottingham, NG2 3NG on 20 September 2018 from 1.30 pm - 3.21 pm

Membership

Present

Councillor Anne Peach (Chair)
Councillor Ilyas Aziz (minutes 29 to 31 inclusive)
Councillor Chris Tansley
Councillor Adele Williams
Councillor Eunice Campbell-Clark
Councillor Brian Parbutt (minutes 30 to 33 inclusive)
Councillor Ginny Klein
Councillor Andrew Rule
Councillor Mohammed Saghir
Councillor Cate Woodward
Councillor Nick McDonald (minutes 27 to 31 inclusive)

Absent

Councillor Merlita Bryan
Councillor Georgia Power

Colleagues, partners and others in attendance:

Councillor Sam Webster	- Portfolio Holder for Adult Social Care and Health
Alison Challenger	- Director of Public Health
Catherine Underwood	- Director of Adult Social Care
Helen Carlin	- Transformation Programme Manager, Adult Social Care
Jane Garrard	- Senior Governance Officer
Catherine Ziane-Pryor	- Governance Officer

27 APOLOGIES FOR ABSENCE

Councillor Georgia Power – personal (Councillor Nick McDonald substituting)
Martin Gawith, Healthwatch Nottingham and Nottinghamshire

28 DECLARATIONS OF INTEREST

None.

29 MINUTES

The minutes of the meeting held on 19 July 2018 were confirmed as a true record and signed by the Chair.

30 SCRUTINY OF PORTFOLIO HOLDER FOR ADULT SOCIAL CARE AND HEALTH

Councillor Sam Webster, Portfolio Holder for Adult Social Care and Health, was in attendance with Alison Challenger, Director of Public Health, Catherine Underwood, Director of Adult Social Care, and Helen Carlin, Transformation Programme Manager, Adult Social Care.

A presentation on the progress against the Council Plan objectives since 2015, additional achievements, remaining challenges and future challenges was delivered and is included in the initial publication pack of the minutes.

The following points were highlighted in addition to the information provided in the presentation, and members' questions responded to:

- (a) The focus on smoke free areas continues and discussions are ongoing about making bus stops formally non-smoking areas, supported by the principal that children should be protected from smoke;
- (b) Following the need to reduce funding from the telecare budget, a more commercial offer is being developed and will provide citizens with a choice of services;
- (c) The social care services provided directly by the City Council are rated as 'good' by the Care Quality Commission but more is required with longer-term planning to ensure that standards are maintained;
- (d) Citizens are encouraged to visit the 'Time to Change' website and consider what volunteering they could provide or promote;
- (e) In the drive to help prevent illness and identify conditions at an early stage, there has been a proactive drive to encourage citizens to have health checks and assessments. This also supports longer term social care planning by providing adaptation equipment for supporting people to remain living in their own homes;
- (f) Previously the preventative focus has been spread too broadly to have any significant impact in any one area so for now the focus will be on smoking, obesity and alcohol issues. Funding of preventative work is complicated but by far the most efficient and beneficial approach;
- (g) Community connections play an important role in ensuring that citizens can easily be directed to the appropriate services;
- (h) Reducing the teenage pregnancy rate to the target of 24.8 per 1,000 has not yet been achieved but the latest provisional data for the year quarter 2 indicates that the reduction is continuing;
- (i) Reducing smoking during pregnancy continues to be a difficult challenge but new smoking cessation services are being commissioned and will target the wards where rates are highest;
- (j) In an effort to help support a sustainable workforce with career opportunities, the City Council will only purchase home care services from providers which are contracted to pay their staff for travelling time and pay the living wage. There is ambition to develop a joint venture or arm's length arrangement to improve terms and conditions for care workers to address the progressively worsening issues around staff recruitment and retention in that there are not enough care workers to meet the current need and the position is likely to worsen following Brexit. Ideally, if terms and conditions can initially be improved, there may then be potential to look longer term at how care work can become a career with apprenticeships, higher level qualifications and career development pathways available;

- (k) Mental health is important and social awareness is rising. Access to mental health services is to be examined by the Health and Wellbeing Board as although progress has been made, investment in services isn't progressing at the same pace;
- (l) Homelessness, social isolation, mental health and addictions can be interlinked in several combinations;
- (m) A range of services have stated that when they find people at mental health crisis point, there is no clear point of contact to engage with. It is a top priority that there is clearer information regarding the access to the mental health 'front door' point for signposting and providing support to partners and citizens;
- (n) There are front line staff who are trained to recognise and initially support citizens with mental health issues until the specialist mental health teams can be contacted but it is vital that the wider health workers are aware of the mental wellbeing;
- (o) An in-house home social care service model would be preferable and the best option with the City Council providing the whole care service, but it is prohibitively expensive so other ways of operating are being considered, alongside building the long-term resilience of care staffing by improving terms and conditions, even if that is with a partner organisation. Development is still at an early stage but the model must be affordable. Profit is what potential partner organisations will consider. It is a difficult industry and all options must be considered;
- (p) A staff recruitment campaign is underway, including on social media, so it would be appreciated if members could promote it.

Councillor's comments included:

- (q) Addressing social isolation also needs to be considered as a priority for social care and all aspects of housing to respond to. There are a lot of single people living on their own who may benefit from the companionship of sharing accommodation. This is an accepted practice in Holland where it works very well;
- (r) Community connections is still fairly new but should be reviewed after 12 months of launching to ensure that it is working as anticipated;
- (s) It is vital that services plan ahead for the increased aging population and associated needs;
- (t) There has been a lot of discussion around the future model for the City's home care provision and whether a co-operative /partnership arrangement with a care provided should be progressed. However, the conclusion will depend on the factors considered. There are so many potential elements for consideration including supply and demand, getting the right staff and retaining them, and paying the living wage. However, it's not clear what the main factors are which are preventing the development of an in-house model and why there is such a reliance on the private sector. If the private sector can operate and achieve a profit by charging £15 per hour and paying £10 per hour to staff, it would surely be cheaper to provide an in-house service;
- (u) A different model for home care is interesting but services must meet a core standard. Currently the City Council is right at the edge of what it can provide and there is absolutely

no slack in the system/funding to afford an arm's length model. An in-house model may be preferable but financially it isn't possible and it's not clear at this point how a partnership would operate;

- (v) From a family member's positive experience, care models along the lines of the Carer's Trust service should be examined as examples of good providers;
- (w) During the 1990s all social care was in-house but as the demand started to significantly rise, the Local Authority had to diversify and changed the terms and conditions of workers. The current workforce is changing but there still needs to be a more people focused approach;
- (x) A crisis point must be avoided where the City Council is forced to bail out care providers which are unable to recruit and retain staff. It is vital that the social care workforce is stabilised and care provider becomes a desired career. If a co-operative model is chosen, then it's the people who provide the service who own it and have a personal investment and if profit is achieved, then they get their share, but the staff engagement in the model must be appropriate. A clearly defined co-operative arrangement will provide better outcomes but will be difficult to establish;
- (y) Providing a social care service where employees feel valued and are rewarded is important for recruitment and retention.

RESOLVED to note the update and the on-going challenges, particularly around adult social care.

31 DEVELOPMENT OF BETTER LIVES BETTER OUTCOMES: A NEW STRATEGY FOR SUSTAINABLE ADULT SOCIAL CARE IN NOTTINGHAM

Councillor Sam Webster, Portfolio Holder for Adult Social Care and Health and Catherine Underwood, Director of Adult Social Care, were in attendance to inform the Committee of the development of the Better Lives Better Outcomes strategy to achieve sustainable adult social care in the City and the consultation being carried out on the draft strategy.

Catherine Underwood delivered a PowerPoint presentation, which is circulated with the initial publication of the minutes.

The following points were highlighted:

- (a) the current public consultation on the strategy ends on 30 September 2018 and the final strategy will be presented to Council in November. The full consultation pack which provides the detailed proposed strategy is available online, has been shared with adult social care partners and is available in libraries;
- (b) The funding available cannot support the current model of social care and as the population lives longer but with more complex health issues and illnesses, it is vital that a sustainable model for adult social care is adopted;
- (c) A fresh approach has been taken with a framework of considerations that supports decision-making and engages citizens and partners;

- (d) There is no option other than to move away from the assumption of residential care, unless it is absolutely necessary;
- (e) Looking into the future, a huge increase in demand is predicted and while the under 65 years old population increase slows down, it is anticipated that people will live longer but with longer term needs, many of which will be complex such as early age dementia;
- (f) The vision to improve outcomes for citizens within resources is: 'we will enable all older and disabled citizens in Nottingham to live as independently as they can, with a connection to their communities. Where formal care and support is needed, its aim will be to retain and restore independence. No one will live in residential care unless all other options are exhausted';
- (g) Currently too many people are relying on residential care at an earlier stage than may be necessary;
- (h) Better Lives Better Outcomes focuses on four themes: prevention, community connections, independent lives, choice and control;
- (i) The key areas of focus to support more independent living are outlined in the presentation including engaging with a variety of healthcare providers and services, but also social partners and embracing new technologies;
- (j) To date there have been approximately one hundred representations submitted and a stakeholder event held. There is a general indication of agreement with the proposals to move to the new strategy, but with questions on how the changes will happen and where the funding will come from.

Councillors' comments included:

- (k) With less funding available and higher demand anticipated, it is vital that the position is transparent and that citizens are made fully aware of the necessity for services to change. A new approach must be taken but it will need to be fully embraced and supported by all health and social care services;
- (l) Housing is an important issue and whilst it is right that people should be able to live independently in their communities, it is a concern that there is a shortage of suitable housing available for older/less mobile people. As a result some older people may be expected to remain in houses which are inappropriate, don't meet their needs, are far too big and difficult to heat and maintain. It would be sensible to encourage people to move to appropriate accommodation at an appropriate point in advance of necessity. To meet the known predicted need, the city's housing strategy needs to be reviewed and consideration given to the future increasing demand for bungalows;
- (m) The 'scheme' in the currently branded 'independent living scheme' has very old-fashioned connotations so it would be worth considering a new more positive title;
- (n) The expectations of citizens need to change. Most people prefer not to enter residential care but appropriate accommodation must be available;

- (o) Changes in society need to be considered and reflected in the approach to development planning. In areas where shops have been vacant long-term, consideration should be given to demolition and permission for the building of bungalows;
- (p) Integrated working between the National Health Service and social care, along with housing providers, needs to improve greatly if the strategy is adopted and successfully implemented.

The Committee agreed to submit a response to the consultation based on the comments made at this meeting and other evidence that it has regarding adult social care. Committee members were asked to forward any additional comments to Jane Garrard, Senior Governance Officer, who will draft a response which will be circulated to Committee members for comment prior to submission.

RESOLVED to

- (1) note the presentation and members' comments with regard to the broader impact if the strategy is implemented;**
- (2) submit a response to the consultation on the development of the new strategy for adult social care;**
- (3) delegate authority to the Chair of the Health Scrutiny Committee to approve the final consultation response.**

32 REVIEW OF CARER SUPPORT SERVICES

The Chair introduced the report of the Carer Support Services Review that had been undertaken by a study group on behalf of the Committee.

Jane Garrard, Senior Governance Officer, informed the Committee that the study group carrying out this review had identified several areas for improvement and the recommendations for change were set out in the report. It is intended that the study group will meet again in December 2018 to review progress on areas identified for improvement and report back to the Committee in January 2019.

RESOLVED to

- (1) note the findings and recommendations arising from the review of carer support services;**
- (2) approve the recommendations for referral to the organisations specified in the report; and**
- (3) receive an update on progress in implementation of recommendations at the January 2019 meeting.**

33 HEALTH SCRUTINY COMMITTEE WORK PROGRAMME

Jane Garrard, Senior Governance Officer, introduced the report which sets out the proposed work programme for the remainder of the municipal year, and lists topics which the Committee have identified for further scrutiny.

The following requests were made and points raised by Committee members:

- (a) With regard to the item reviewing Nottinghamshire Healthcare Trust's work in relation to its Quality Improvement Priority on waiting times item, the focus should be on mental health crisis team, child and adolescent mental health services, eating disorders and the trauma services provided at Mandala House on Gregory Boulevard;
- (b) whilst members have been assured that children in care get priority mental health care support from CAMHS, further information is required on the access to services by older children and into adulthood and whilst working;
- (c) in July the Committee discussed a potential future agenda item regarding Bilborough Medical Practice. It is understood that the Practice has addressed a lot of the requirements of the Care Quality Commission (CQC) and that it will be reassessed shortly. Therefore it would not be timely for the Committee to review performance of the Practice at this time. This position will be reviewed in light of the forthcoming CQC inspection;
- (d) A meeting of Health Scrutiny Chairs from across the East Midlands was held on 11 September 201 to hear from NHS England about a review of head and neck cancer services that is being carried out. NHS England had requested that a joint committee be established to engage with them on this issue but it was subsequently agreed to not establish a joint committee for this purpose and therefore this Committee will be consulted on proposals as part of the consultation process, which is likely to take place in autumn/ winter 2018.

RESOLVED to note the work programme.

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Adult Social Care & Health Council Plan Priorities

Report to Health Scrutiny Committee, 20th September 2018

Cllr Sam Webster

Minute Item 30



Nottingham
City Council

Achievements since 2015

Campaign to make sure Nottingham is at the front of the queue for lung cancer screening and continue to ensure that people from all our communities access cancer screening.

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- 2016 Be Clear on Cancer campaign saw an increase in referrals for suspected lung cancer.
- This campaign was also effective in encouraging more patients with symptoms to see their GP.
- Funding granted by Roy Castle Lung Foundation for planning for Aspley, Bilborough and Strelley.



Achievements since 2015

Deliver a rolling programme of smoke free public places where people want them.

- Liaison meetings about Smokefree Summer family events across the City promoted as smokefree including: the Beach and children's areas at Riverside and Splendour.
- Consultation documents devised on introduction of smokefree bus and tram stops across the City.
- Developing options in relation to encouraging children and young people's sport and leisure clubs to be smokefree – meeting with City Council Sport and Leisure colleagues.

Achievements since 2015

Extend the telecare and telehealth services so that 6000 more people were supported to live independently.

- Total number of citizens who have been supported to live independently from April 2015 is 10,215 - 269 ahead of target
- The Assistive Technology Service is developing a commercial offer which will enable those citizens who want equipment, but are not eligible, to be able to self-fund at competitive rates.
- Further training is being made available to social care, health, housing and third sector organisations to keep up awareness levels of how citizens can be supported.

Other Achievements

- All City Council social care provision rated 'Good' by CQC, including home care, reablement, shared lives, day services and residential homes.
- Nottingham Time to Change Hub:
 - 123 local citizens interested in becoming Time to Change Champions.
 - 15 local employers are in the process of completing the Time to Change Employer Pledge.
- Successful bid for LGA/NHS Digital funding to develop a proposal for technology to support social care – our Independence Pathway App.
- Our proposal for social investment to support people with complex mental health problems to have their own tenancies has been supported by Life Chances Fund
- Successful trial of digital weight management app to support weight loss over a 12 week programme. Over 300 Nottingham citizens have signed up, with an average weight loss of 5% in week 8.

Other Achievements

- Community Together Surgeries (CTS) have been rolled out in Aspley, Clifton and the Meadows.
- Council-wide conversations to consider Council-wide approaches to key public health issues and how we support a healthy workforce.
- Work with GP providers has seen a 29.5% increase in the number of Nottingham citizens invited for a health check and a 12.2% increase in the number receiving these in Q1 2018/19- largest increases in East Midlands
- We have dramatically reduced delays in social care assessments, where previously people were on a waiting list.
- Click Nottingham staff have been brought in house.
- Number of Older People requiring adult social care support enabled to remain in their own homes rather than residential care is increasing.

Challenges Remaining - Red & Amber Indicators

Reduce teenage pregnancy by a third – expected outcome = amber.

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- Conception rates per 1000 15-17 year old girls = 26.5, compared with target of 24.8.
- Good progress has been made but achieving the target will be a challenge.
- Nottingham has the third highest rate of the 8 Core Cities.



Nottingham
City Council

Challenges Remaining - Red & Amber Council Plan Indicators

Reduce smoking during pregnancy by a third

- 17.1% of mothers smoking at time of delivery, compared with target of 12.2%
- No significant change in numbers since 2010/11- unlikely to improve significantly over the next year.
- Decommissioning of local stop smoking services has impacted on plans of Smoking in Pregnancy Steering Group
- Planning underway to run a comms campaign in the wards with the highest rates of smoking in pregnancy.

Challenges Remaining

Drive up the quality of home care services by only buying services from providers that pay their staff for travel & pay the Living Wage.

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- All contracted Home Care providers are currently contractually required to pay travel time and the National Living Wage. The new tender will again include these requirements with a commitment to move towards the Living Wage.
- Requirement of new Lead provider agreement that they must pay travel time and Living Wage. If a provider is deemed to be in breach of this requirement they will be in breach of contract

Future Challenges

- Ongoing cuts to funding in both Adult Social Care & Public Health.
- Increasing demand for ASC services- people living longer and with more complex conditions.
 - New ASC strategy in response to this.
- Tackling the three most significant causes of health inequalities – smoking, obesity and alcohol misuse.
- Ensuring prevention is embedded throughout the system.



Better Lives Better Outcomes:

a new strategy for sustainable
adult social care in Nottingham
DRAFT



Message from Councillor Sam Webster, Portfolio Holder for Adult Social Care & Health

Nottingham needs a sustainable social care system to help people live better lives.

Despite a growth in demand for health and social care services, funding to councils from Government has fallen significantly in recent years and so maximising the effectiveness of the money we spend is more important than ever.

To be sustainable we need to be:

- Supporting people to do what they can for themselves
- Helping friends and families to provide the best possible support for each other
- Providing connections to others who can help from within Nottingham's caring communities.

Where people do need more support, that support will promote wellness and maximise independence. For those who can pay for and arrange their own services, we will signpost them where necessary.

This strategy sets out how we intend to better support adults in Nottingham. At the heart is the development of a financial strategy to enable a sustainable social care system. We are calling our strategy **Better Lives Better Outcomes**, which reflects our ambition for Nottingham to be one of the best cities for adults in need of support to live well.

The four themes in the strategy will underpin our approach and we are inviting citizens, communities and other partners to work with us in this new framework:

- 1) **Prevention:** promoting healthy lifestyles and intervening early when people's wellbeing is at risk to avoid crisis and loss of independence.
- 2) **Community Connections:** ensuring citizens can connect to the resources and support in their local neighbourhoods, ensuring no one is socially isolated and lonely.
- 3) **Independent Lives:** supporting personal and community resilience, strengths and resources, reducing dependence on council-funded support where possible.
- 4) **Choice and Control:** seeing the citizen in the driving seat, shaping solutions around the outcomes that matter for individuals.

The Strategy for Adult Social Care

Our Vision

We will enable all older and disabled citizens in Nottingham to live as independently as they can, with a connection to their communities. When formal care and support is needed, its aim will be to retain and restore independence. No one will live in residential care unless all other options are exhausted

Our Culture

We will promote independence. We will work with citizens, recognising individuality and diversity and that people are the experts in their own lives. We believe that an independent life is a better life. We will challenge ourselves, and others, to be creative in finding ways to achieve outcomes that reduce reliance on formal care and support services.

Better Lives, Better Outcomes



Our approach will have four themes that reflect principles set out in the Care Act:

Prevention is at the heart of the Council's offer. It is set out in Nottingham's Health and Wellbeing strategy '*Happier, Healthier Lives*' which aims to increase healthy life expectancy in Nottingham and make it one of the healthiest cities. The Council provides a range of services that promote health such as parks and leisure facilities, places to come together such as libraries and community centres or those that protect people from harm such as those that deal with rogue traders or anti-social behaviour in our community protection services. Our approach will be underpinned by acting to 'prevent, reduce or delay' need for care and support. Early intervention is key to preventing need from increasing unnecessarily.

Community Connections and friendship can reduce need and promote wellbeing far better than any 'service-based' intervention. We know that loneliness is damaging for health and wellbeing and drives need for care and support services. We will develop our 'Community Together' surgeries and a team of community connectors across the city, working with partners to connect people to available support and activities. Communities already provide a range of support from looking out for neighbours to more organised arrangements such as self-help, voluntary or faith-based groups and we will continue to build on this as well as initiatives such as Age Friendly Nottingham.

Independent Lives are more fulfilling lives. All of our interventions will be enabling in nature. Our reablement service and occupational therapists are experts in helping people to access equipment to support independence. We will also build skills with people who may never have had the opportunity to develop them, for example supporting people with a learning disability to learn skills to live more independently. We will also focus on real and meaningful employment or voluntary opportunities for working age adults through the work outlined in our 'Employment strategy for disabled people'. Equally, where employment is not an option, we will signpost people to benefits to which they are entitled. We will only support a move into residential care when all other options are exhausted.

Choice and Control We will focus on outcomes that matter to the individual. People should be able to define what they want to achieve and have choice and control over what happens to them and how support meets their needs. This will be balanced against ensuring support is proportionate to need and limited resources. Where people are at risk of harm, in protecting them from abuse and neglect we will keep their desires and wishes at the heart to enable the outcomes that they want to be achieved.



Key areas of focus

Information and advice

Citizens should come to the Council for signposting to trusted sources of advice on a range of issues, including how to source care and support.

LION – Local Information Online Nottingham – is the city’s community directory and the go-to place for information and advice in our communities. We will continue to develop this website to provide the information that helps citizens connect to community resources, find trusted sources of advice and choose the services they want to use.

Place-based planning

Independent lives are lived in Nottingham’s diverse neighbourhoods and communities. We will work with people and resources in local areas to understand what people need, what works for them and what the available opportunities are. The Council invests in neighbourhoods through local libraries, community protection officers and a whole range of activities and services.

We want to develop place-based plans with local areas where we can identify the key ingredients to support independence and work out how we bring these together in the best way for the citizens in each local area.

Supporting carers

Some people choose to become a carer; looking after a person you care about is something many of us want to do. However taking on the responsibilities of caring can have a major effect on an individual’s life, often leading to isolation and exhaustion. For adult carers it can affect their ability to work and may lead to ill health. For young carers it can delay their educational progress and limit their social development.

Carers also play a significant role in supporting some of our most vulnerable people in society. Not only does this positively impact on the quality of the life of these people, but also significantly reduces the demand for services, both in the reduction of care packages for those living in the community as well as avoiding or delaying the use of residential care.

The Council is committed to a conversation with carers to revise and develop the Carers Strategy to ensure a robust local offer driven by carers’ experiences, needs and the outcomes they seek in their caring role.

Whole Life Disability

The Council is committed to creating a Whole Life Disability Programme to support children, young people and their families.

The Whole Life Disability service supports disabled children, adults and their families to improve and maintain independence at the key points in their life. It will reduce the impact of transition between different ages and stages of life by working with individuals, their families and others who support them, to create a seamless experience. From birth, it will ensure that disabled people and their families will have access to the right information and support to be actively included within their communities. It will support them to develop the skills they need to lead a more independent life through employment or becoming active contributors in their community. A strengths-based approach will take account of informal as well as formal networks of support to link people into their own community capacity rather than wrap services around them.

By taking this whole life approach, we will support people when they really need it, but in ways which will retain their independence.

A new plan for own care provision

The Council provides an extensive range of direct care and support services including reablement, day services, specialist home care, residential and respite care. We are committed to our own services being driven by outcomes and supporting independence. For example, our new Nottingham Pathway team supports people with a learning disability to develop the skills and confidence to meet their outcomes within their communities, whether that is moving from residential care into supported living or taking on voluntary work and joining a community group as an alternative to attending a day service.

As part of our Strategy, we will develop the Council’s own direct care and support services, building on the changes they have already put in place to create the most impact for wellbeing.

Care and support providers

The Council funds care and support services for people who have eligible needs and cannot afford to fund them. The Council also ensures there is a sufficient ‘market place’ of care services in the city, which is diverse and of good quality, regardless of who is funding the services. We have set up new contracts that commit providers to meeting outcomes that support independence. This will help people to develop or regain the skills that make a difference to their lives. We will work with care and support providers to ensure the services we arrange focus on promoting independence and outcomes and that they always offer best value for money.

Quality Matters

We will drive out poor quality providers and those that pay low wages to ensure the workforce receives a decent wage and terms and conditions, whilst managing the market effectively to end unreasonable cost. Now our resources are stretched, we will continue to work

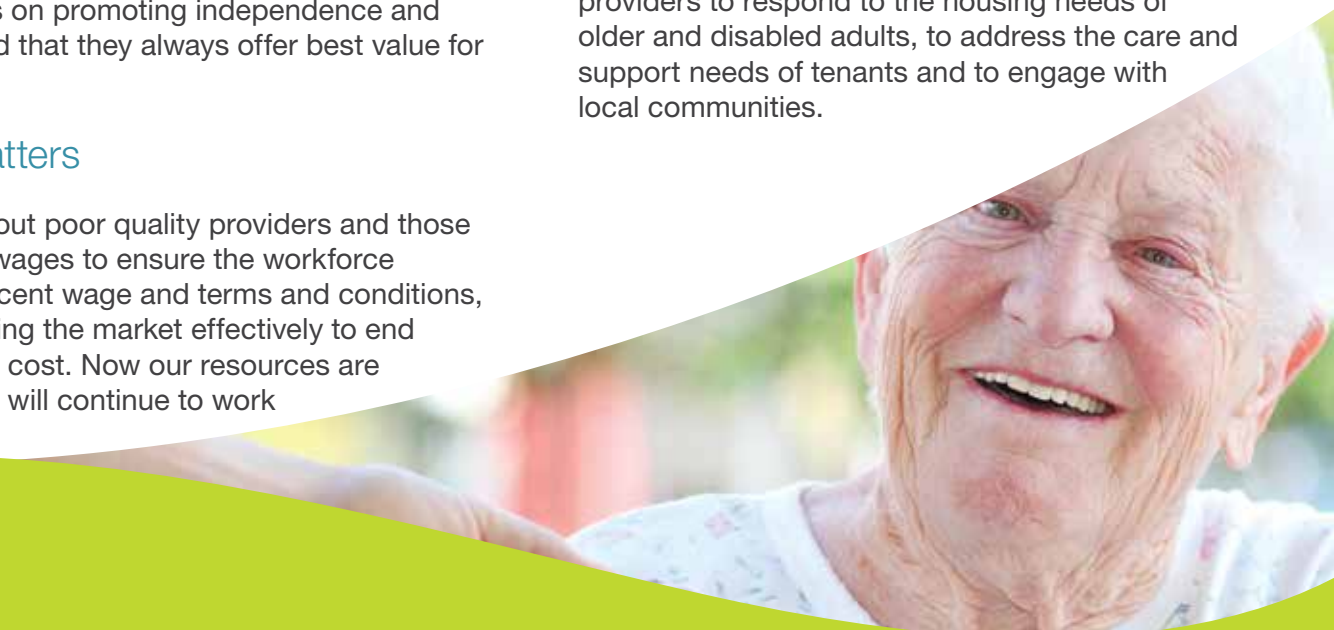
closely with the Care Quality Commission and our Clinical Commissioning Groups to maintain a robust oversight of quality in care and support services through the Quality Improvement Framework. This allows us to identify concerns early through shared intelligence and to work with providers to ensure local services are safe, effective, caring and responsive.

Housing

A good home underpins independence and wellbeing. Adults with care and support needs should, where possible, live in their own home and only to move to residential care when all options are exhausted. We are committed to developing solutions that support young people with disabilities to find a home and to have the skills or support to manage it.

Nottingham’s Housing Strategy, ‘*Quality Homes for all*’, recognises the importance of appropriate housing for people with care and support needs, especially older adults and adults with disabilities. It commits to improving access to suitable housing, such as bungalows, and lifetime homes suitable for older people, as well as developing new independent living schemes, tackling fuel poverty and homelessness and better supporting tenants to engage with their communities.

Nottingham City Homes (NCH) provides housing for around one fifth of households in the city. We will work together with NCH and other housing providers to respond to the housing needs of older and disabled adults, to address the care and support needs of tenants and to engage with local communities.



Employment

Our local economy needs to draw upon all of the skills and talents in Nottingham. We often fail to see the assets disabled people bring to the workplace. It is vital that everyone can develop to their full potential and that we create an inclusive city where disabled children and adults are not marginalised.

People who are more distant from the employment market, because of a life-long or acquired disability, must also be a priority. The *'Nottingham Health, Disability and Employment Strategy'* outlines our intention to support people with the most significant disability-related barriers to work to achieve genuine paid employment. We will embed employment in our approach to promoting better outcomes for adults, including recognising the importance for carers to sustain or gain employment.

Digital and technology in adult social care

We will make sure we are making the best use of technology in our work with citizens by:

- Making information easily available across services and to citizens
- Enabling people to interact with services through digital channels
- Promoting independence and wellbeing through digital technology and devices
- Working better together with the health services through analysing data together
- Using technology to support colleagues in their work

We will also work with care and support providers to ensure their services make good use of technology to promote dignity, quality and efficiency.

Working with the health services

Adult social care has long-established partnerships with NHS bodies in Nottingham and has already integrated services where we can better support citizens who have health and care needs:

- Nottingham Health and Care Point provides an integrated contact centre
- Care Delivery Groups embed social workers in GP practices
- We make investments from a shared £36m Better Care Fund with the NHS
- We arrange joint packages of care with the NHS, including within the Transforming Care programme for people with learning disabilities/autism and behaviour which challenges.

We will continue to work closely with our local health services to develop integrated health and care. Our priorities for the next three years will include:

- Supporting urgent and emergency care by strengthening the way people are discharged from hospital
- Using data to support better, more consistent medical decision-making
- Identifying funding sources to support further innovation
- Strengthening our ability to identify people at risk and to intervene with effective solutions

Approach to funding

We will get the best value from the funding we have for social care. This does not mean paying low prices, it means paying the right prices. We expect good value, but Nottingham will also make sure the funding of care services means employees are properly paid. We will seek efficiencies or use technology to remove unnecessary cost so that we can prioritise staff. We will also ensure that we use our available funding fairly between citizens – based on need, on what other support options

are available and on people's ability to fund their own care. We will consider value for money in all care and support we fund, either through services we pay for or through Direct Payments for citizens to make their own arrangements. We will regularly review needs and care and support plans so that we can adjust arrangements over time.

Our approach to meeting care and support needs

There are key ingredients to maintaining a good quality of life and independence. We will develop ways to ensure these are checked at every contact:

- Social – tackling social isolation
- Physical activity – being active for health and wellbeing
- Finances – maximising income, planning for the future
- Housing – suitable home, planning for the future
- Technology – assistive technology, digital inclusion

Excellence in social care practice

The commitment and knowledge of social care staff is essential. We will use our expertise to find creative solutions, to signpost to sources of support and, where needed, we will assess needs and agree care plans with citizens. Social care colleagues will ensure they protect people's rights, such as safeguarding, where capacity to make decisions is limited and detention under the Mental Health Act.

Financial Strategy

We have seen a significant reduction in funding since 2012/13, which will continue. Our strategy will demonstrate a model for financial viability by:

- Securing best value in the services we purchase, working with providers to deliver excellent value
- Challenging ourselves to be at the forefront of efficiency
- Shifting investment into prevention
- Maximising external funding, attracting investment into Nottingham, including opportunities afforded by the Greater Nottingham partnership
- The Council's work to develop the economy of Nottingham, to attract inward investment and thriving business all contributes to fund the care Nottingham citizens will need in the future
- Making the case to Government for Nottingham and for social care.

Without adequate Government funding, Nottingham must make tough decisions about what services it can afford to fund.



What we offer... and what we ask

We believe that achieving good outcomes within the resources we have available will depend on all of us working differently together.

Our offer is:

- We will do everything we can to help you live independently. When you need support we will ensure we help you to live your life, meet your caring responsibilities and remain independent
- If you come to us for help, we will treat you as someone with unique talents and strengths which we will help you to identify and use
- If you come to us in crisis, we will work with you to restore your independence and avoid making any permanent decisions until the crisis is over
- We will recognise the caring nature of Nottingham's people and communities and work to connect people and unblock obstacles for our citizens who reach out to help others
- Where people are at risk of harm or neglect we will take account of what you would like to happen in keeping you safe
- Where services are needed, we will ensure that they are of good quality

Our ask is:

- Look out for others who might be vulnerable and tell us if you think someone is at risk of harm or neglect
- Tell us about anything you are doing or want to do to help others so we can help you to connect others or unblock obstacles
- If you approach us for support, work with us to identify your personal assets and resources as a starting point to meeting need
- If you receive services, tell us if they are not helping you to live your life or if you have any concerns about quality





**We welcome your
feedback on our draft
strategy. Please email
engage@nottinghamcity.gov.uk
with any comments you have.**

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