



County Offices
Newland
Lincoln
LN1 1YL

29 August 2023

Adults and Community Wellbeing Scrutiny Committee

A meeting of the Adults and Community Wellbeing Scrutiny Committee will be held on **Wednesday, 6 September 2023 at 10.00 am in the Council Chamber, County Offices, Newland, Lincoln LN1 1YL** for the transaction of the business set out on the attached Agenda.

Yours sincerely

Debbie Barnes OBE
Chief Executive

Membership of the Adults and Community Wellbeing Scrutiny Committee (11 Members of the Council)

Councillors C E H Marfleet (Chairman), A M Key (Vice-Chairman), T A Carter, M R Clarke, Mrs N F Clarke, R J Kendrick, K E Lee, Mrs M J Overton MBE, S R Parkin, M A Whittington and T V Young

**ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE AGENDA
WEDNESDAY, 6 SEPTEMBER 2023**

Item	Title	Pages
1	Apologies for Absence/Replacement Members	
2	Declarations of Members' Interests	
3	Minutes of the meeting held on 28 June 2023	5 - 10
4	Announcements by the Chairman, Executive Councillor and Lead Officers	
5	Lincolnshire Safeguarding Adults Board Update <i>(To receive a report by Justin Hackney, Assistant Director of Specialist Services, which provides an update on the current position of key areas of work being undertaken with the Lincolnshire Safeguarding Adults Board (LSAB).</i>	11 - 30
6	Day Services Update <i>(To receive a report by Justin Hackney, Assistant Director of Specialist Services, which provides an update on the progress in delivering the ambitions outlines in the In-House Day Services plan 'Living Life to the Full')</i>	31 - 48
7	Service Level Performance against the Corporate Performance Framework 2023-24 Quarter 1 <i>(To receive a report by Caroline Jackson, Head of Corporate Performance, which summarises the service level performance for quarter 1 of 2023/24 for the Adult Care and Community Wellbeing directorate)</i>	49 - 68
8	Acute Hospitals - Admission to Discharge Care Pathway and Winter Planning 2023/4 <i>(To receive a report by Andrea Kingdom, Head of Service – Hospital Social Work Teams, Prison and Brokerage and Afsaneh Sabouri, Assistant Director – Adult Frailty and Long Term Conditions, which provides an update on the Acute Hospitals – Admission to Discharge Care Pathway)</i>	69 - 76
9	Adults and Community Wellbeing Scrutiny Committee Work Programme <i>(To receive a report by Simon Evans, Health Scrutiny Officer, which invites the Committee to consider its work programme)</i>	77 - 84

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Please note: for more information about any of the following please contact the Democratic Services Officer responsible for servicing this meeting

- Business of the meeting
- Any special arrangements

Contact details set out above.

Please note: This meeting will be broadcast live on the internet and access can be sought by accessing [Agenda for Adults and Community Wellbeing Scrutiny Committee on Wednesday, 6th September, 2023, 10.00 am \(moderngov.co.uk\)](#)

All papers for council meetings are available on:

<https://www.lincolnshire.gov.uk/council-business/search-committee-records>



**ADULTS AND COMMUNITY WELLBEING
SCRUTINY COMMITTEE
28 JUNE 2023**

PRESENT: COUNCILLOR C E H MARFLEET (CHAIRMAN)

Councillors A M Key (Vice-Chairman), T A Carter, M R Clarke, Mrs N F Clarke, K E Lee, S R Parkin, T V Young, N Sear and P A Skinner

Councillors: Mrs S Woolley attended the meeting as an observers via Microsoft Teams

Officers in attendance:-

Simon Evans (Health Scrutiny Officer), Emily Wilcox (Democratic Services Officer), Pam Clipson (Head of Finance, Adult Care and Community Wellbeing), Lucy Gavens (Consultant - Public Health), Simon Gladwin (Programme Manager - Public Health), Caroline Jackson (Head of Corporate Performance), Richard Proctor (Chairman of the Lincolnshire Safeguarding Adults Board), Afsaneh Sabouri (Assistant Director - Adult Frailty and Long Term Conditions), Linda Mac Donnell (Head of Safeguarding - Adult Care and Community Wellbeing) and Carl Miller (Commercial and Procurement Manager - People Services)

12 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received by Councillor R J Kendrick and Councillor M A Whittington.

It was reported that, under Regulation 13 of the Local Government (Committee and Political Groups) Regulations 1990, Councillor N Sear be appointed as a substitute for Councillor M A Whittington and Councillor P A Skinner be appointed as a substitute for R J Kendrick for this meeting only.

13 DECLARATIONS OF MEMBERS' INTERESTS

None were declared.

14 MINUTES OF THE MEETING HELD ON 24 MAY 2023

RESOLVED:

That the minutes of the meeting held on 24 May 2023 be approved as a correct record and signed by the Chairman.

15 ANNOUNCEMENTS BY THE CHAIRMAN, EXECUTIVE COUNCILLOR AND LEAD OFFICERS

The Chairman had recently visited three local Adult Day Care Centres in Boston, Sleaford and Stamford and commended the staff involved and their dedication which was evident through the happiness of the service users.

The Chairman observed that if Day Centres, had their own minibuses, it would enable the service users to attend for full day sessions and asked if there was a means of undertaking simple repairs to the facilities at low cost. The Executive Support Councillor Adult Care and Community wellbeing thanked the Chairman for his feedback and would pass it on.

The Vice-Chairman had also attended the Boston Day Centre and commended and the enthusiasm of the staff, the inspiring manager, and the amazing projects undertaken by the service users.

16 KEEPING PEOPLE SAFE – THE LINCOLNSHIRE SAFEGUARDING ADULTS BOARD PREVENTION STRATEGY 2023-2026

Consideration was given to a report by the Independent Chair – Lincolnshire Safeguarding Adults Board and the Head of Safeguarding – Adult Care and Community Wellbeing which invited the Committee to consider the prevention strategy of Lincolnshire Safeguarding Adults Board (LSAB), as set out in the report.

Consideration was given to the report and during the discussion the following points were noted:

- The six safeguarding principles were at the core of all work by the LSAB and were widely known and promoted with partners and were taken from the Care Act 2014.
- Anyone at immediate risk of a safeguarding concern would be directed to call 999 for an urgent response.
- The Committee raised concerns over the large number of Serious Clinical Incidents relating to pressure ulcers, which had been ongoing for many years. Assurance was provided that all providers should undertake training on how to prevent pressure sores and incidents were measured through performance monitoring. Health and Social Care partners universally recognised the risk of pressure sores and were engaging in preventative action. The LSAB acknowledged the concerns raised and would ensure that they liaised with the Lincolnshire Safeguarding Children Board, who were undertaking the same preventative measures for pressure sores.
- The routes into safeguarding were well known by local organisations and assurance was provided that LSAB would continue to communicate with local banks to raise awareness of possible financial safeguarding incidents and how to report them.

- Concerns were raised that approximately 37% of all adult safeguarding enquiries related to residential care, nursing care or hospital settings. However, many of these enquiries did not lead to a s.42 enquiry.
- In relation to the key prevention focus for Continuous Improvement in the Quality and Safety of Residential, Nursing and Hospital Care and the aim to encourage safer recruitment initiatives across the Integrated Care System workforce leads, it was recognised that the LSAB could only encourage safer recruitment initiatives, as recruitment was not directly the LSAB's responsibility, but was the responsibility of each partner.
- The Committee were assured that making safeguarding personal was a core value of the Board and a key influence in all decisions.
- The Committee emphasised the difficulties of providing support to victims of abuse who were not willing to accept support.
- It was suggested that difficulties accessing GP services were a barrier to addressing some safeguarding concerns.
- Although the importance of making safeguarding personal was important, it was suggested that this should not be at the expense of looking at the wider situation.
- The prevalence of suicide risk, particularly by males under 40 was highlighted as an issue for consideration in future. The Chairman felt it was important to ensure that suicide risk was considered when implementing safeguarding procedures.

RESOLVED:

That the report be noted.

17 SUBSTANCE MISUSE SERVICES RE-COMMISSIONING

Consideration was given to a report by the Consultant in Public Health, and the Commercial and Procurement Manager, which invited the Committee to consider the proposals to the Executive on the Substance Misuse Services Re-Commissioning, as set out in the report to the Executive at Appendix A.

The Board supported the recommendations to the Executive and during the discussion the following points were recorded:

- The Committee were advised that the number of dependent alcohol users in Lincolnshire is estimated at 7,000 and the number of crack cocaine and opiate users was at 4,000. It was felt that these estimates were likely an understatement of the level of need and that the service was only be able to 'scratch the surface' in terms of tackling needs. However, the existing constraints on expenditure were acknowledged.

ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE
28 JUNE 2023

- Assurance was provided that the figure of £60,000 of public health grant for the substance misuse family support service did not represent the expected level of expenditure on this service.
- The committee were concerned that signposting to services was not clear within communities and emphasised a need for professionals and communities needing to be aware of the services offered and signposting to be clear. This included digital routes into the service and the facility of self-referral. Challenges surrounding the stigma of accessing support were acknowledged and assurance was provided that the new service would focus on a visible and accessible branding and marketing strategy. Clear and simple pathways (including self-referral) into the service would be key.
- It was estimated that £1 of expenditure on treatment services equated to £4 of savings from reduced demand on other services. The Government is developing ways to capture the range of benefits from investment in substance misuse services as part of the national strategy, which when available Lincolnshire would follow. Irrespective of these figures, the Committee concluded that service represented a direct investment in the wellbeing of people and communities.
- The Committee welcomed the development and implementation of the key performance indicators, as outlined in paragraph 9.5 of the report which was hoped would provide a high level overview of the service.
- The Committee were advised that there was a residential rehabilitation unit operated in Scarborough which worked well and provided good results. The Committee suggested that a rehabilitation service within Lincolnshire would be beneficial.
- Despite challenges with recruitment across the sector, the service had been successful in obtaining supplemental grant funding for specialist staffing posts and had been successful recruiting to a number of those posts. The focus was now on building the expertise and training of those staff over the coming months. There were clear expectations on staffing set out within the terms of the contract.
- The service provided to individuals was dependent on their circumstances and always needs led.
- The Committee acknowledged that the needs of the population for North and North-East Lincolnshire were different to that of Lincolnshire County Council, and it had therefore been decided to procure contracts separately.
- It was agreed that a broader approach to support for addictive behaviours was needed, as many issues of addiction were linked. For this reason, the importance of known routes and pathways were reiterated.
- The Committee were assured by the shift in young people's approach to drinking alcohol, with only 1 in 4 young people reported to drink alcohol.

RESOLVED:

1. That the recommendations set out in the Executive report be supported;
2. That a summary of the comments made be passed on to the Executive as part of their consideration of this item.

18 ADULT CARE AND COMMUNITY WELLBEING FINANCIAL POSITION 2022-23

Consideration was given to a report by the Head of Finance, Adult Care and Community Wellbeing, which invited the Committee to consider the Adult Care and Community Wellbeing Financial Position 2022-23, as set out in the report.

Consideration was given to the report and during the discussion the following points were noted:

- The Committee welcomed the 298 additional care workers employed under the better care fund. In response to a question raised, Officers agreed to liaise with care providers on the possibility of recruiting college students to home care roles.
- The Committee welcomed the report and commended officers for their good financial management; however, the Committee were concerned that there was a level of unmet need within communities which was not being addressed. A need for more preventative measures and support to reinvigorate community resources lost through covid was emphasised.
- Members were assured that the work of the directorate was not purely financially driven, and support would be made available to those in need, in line with statutory requirements.
- Councillor K E Lee wished it to be recorded that she supported the comments made in relation to unmet need and highlighted the lack of free support due to the impact of staffing reductions in the Citizens' Advice service and lack of health care appointments and provision.
- Overall, the finances for the service were roughly that of other localities, although there was a slightly higher number of people in residential care. The Council continued to invest in extra care housing to manage this.
- In relation to the Public Health and Community Wellbeing underspend of £1.418m it was suggested that closer working with District Councils to support with health checks in order to utilise the funds could be beneficial.

RESOLVED:

That the report be noted.

19 SERVICE LEVEL PERFORMANCE REPORTING AGAINST THE SUCCESS FRAMEWORK
2022-23 QUARTER 4

Consideration was given to a report by the Head of Corporate Performance, which invited the Committee to consider the Service Level Performance Reporting Against the Success Framework for Quarter 4 of 2022-23, as detailed in the report.

Consideration was given to the report and during the discussion the following points were recorded:

- **PI 60 – Permanent admissions to residential and nursing care homes aged 65+ -** Despite a reduction in admissions, many residential care places had been at a higher cost than previously anticipated due to an increase in more complex cases.
- **PI 116 – Concluded safeguarding enquiries where the desired outcomes were achieved** – a change in the wording to include the addition of ‘of those who were asked their outcomes’. This would ensure that the data presenting was not misleading.
- **PI 123 – People that report that services help them have control over their daily life** – the national average was 76%. The 80% target was set as being an achievable target above the national average.
- **PI 31 – Percentage of alcohol users that left specialist treatment successfully** – in relation to the low target, it was explained that given the challenges expected and the fact that the complexity of clients were increasing and the support provided to lower level needs, the target was the minimum that would be expected. The importance of showing performance in numbers and percentages was acknowledged and reassurance was provided that both numbers and percentages would be monitored.

RESOLVED:

That the report be noted.

20 ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE WORK
PROGRAMME

Consideration was given to a report by the Health Scrutiny Officer, which invited the Committee to consider its work programme.

The Committee was advised that there were no changes to the work programme set out in the report.

RESOLVED:

That the work programme be noted.

The meeting closed at 12.47 pm



**Open Report on behalf of Glen Garrod,
Executive Director – Adults and Community Wellbeing**

Report to:	Adults and Community Wellbeing Scrutiny Committee
Date:	06 September 2023
Subject:	Lincolnshire Safeguarding Adults Board Update

Summary:

This report provides the Adults and Community Wellbeing Scrutiny Committee with an update on the current position of key areas of work being undertaken within the Lincolnshire Safeguarding Adults Board (LSAB).

Actions Required:

The Adults and Community Wellbeing Scrutiny Committee is asked to consider this information provided within this update report.

1. Background

The Care Act 2014 identifies that the Safeguarding Adults Board must develop and publish a strategic plan setting out how they will meet their objectives and how their member and partner agencies will contribute. Following the completion of a joint needs assessment exercise to supply an evidence-based evaluation of the key areas of Adult Safeguarding together with an in-depth analysis of the Lincolnshire Safeguarding Adults collection data the LSAB have completed and published their Strategic Plan for 2022 to 2025. The plan identifies an overarching priority of **Prevention and Early Intervention** where the LSAB will focus upon delivery of 'Keeping People Safe', the LSAB Prevention Strategy 2023-2026, which recently was presented to this committee together with focusing upon 3 specific areas to meet the LSAB objectives in relation to

- **Making Safeguarding Personal,**
- **Learning and Shaping Future Practice and**
- **Safeguarding Effectiveness.**

2. LSAB Strategic Plan

Priority 1: Prevention and Early Intervention

The LSAB has identified suitable individuals from across the partnership to lead multi-agency subgroups to deliver actions that will focus on keeping people safe by mitigating safeguarding risks before they escalate. Priority areas of focus include:

- Continuous improvement in the quality and safety of Residential and Nursing Care;
- Preventing and or limiting the impact of Pressure Sores (Across NHS and Independent sector providers);
- Tackling the Domestic Abuse of older adults;
- Preventing Financial Abuse;
- Safeguarding Adults with Complex Needs through the introduction of phase two of the Team Around the Adult approach.

Priority 2: Learning and shaping future practice.

The LSAB ensures that the learning from all Safeguarding Adult Reviews and assurance activities is shared and embedded within partner agencies to reduce the risk of repeat incidents or causes of harm.

LSAB has one currently commissioned Safeguarding Adult Review where part of the learning process has included using the learning from the case to test the current Self Neglect protocol.

The LSAB have led on thematic case reviews to examine the cases of 3 women with care and support needs where it was reported their partners had been obstructive to agencies in attempting to provide care making engagement extremely challenging. The review identified several learning points including the need to consider households holistically when considering how to support individuals with care and support needs, together with the requirement for professionals to display professional curiosity when individuals are cancelling appointments.

Key areas of focus continue to be :

- Trailing innovative approaches to Safeguarding Adult Reviews (SARs);
- Completing Assurance Activities to inform the continuous improvement of safeguarding practice across all partners;
- Identification of themes and trends to drive training and awareness input both locally and nationally e.g. Professional curiosity, Mental Capacity;
- Build on our ability to evaluate that system wide change that has taken place as a result of the learning;
- Supporting all stakeholders to improve the quality and impact of their safeguarding activity to improve the outcomes for adults who are abused;
- Establish a constant cycle of learning and improvement at a local and national level.

Priority 3: Safeguarding Effectiveness

The LSAB is ensuring the effective operation and continuous improvement of the governance, scrutiny, and business processes in place to support the board to work effectively and has recently undertaken a review of several of its policies, procedures, and terms of reference to ensure these are current and improve effectiveness of process.

The LSAB has recently refreshed its communication strategy to ensure it is current and relevant together with developing its co production activities which has led to the recruitment of an “expert by experience” to help inform the work of the LSAB.

The LSAB has recently reviewed and enhanced its Quality Assurance Processes by adding a rolling programme of peer review to gain assurance as to the effectiveness of safeguarding arrangements across the partnership.

Keys areas of focus continue to be :

- Develop further our flexible and effective communications and co production strategy, including a review of the LSAB Information and advice offer, including accessibility;
- Ensuring our Quality Assurance process is robust, identifying any challenges, sharing best practice, and hearing the voice of service users.
- Ensuring an effective risk/issues management process and the Boards policy
- Data collection and analysis to ensure our work is always based on evidence. This will include the development of an enhanced Assurance Dashboard for the LSAB Executive.

Priority Four: Making Safeguarding Personal

The LSAB in support of the delivery of this priority have coordinated meetings with LCC Adult Safeguarding and Lincolnshire Police to provide clarity as to when the police are required to raise a Safeguarding Concern as per Section 42 of the Care Act 2014.

The LSAB have coordinated meetings with the CQC and LCC to provide clarity as to what equates to a Quality Incident in a residential setting and when there is a requirement to raise a Safeguarding Concern as per Section 42 of the Care Act 2014, together with securing their support for the use of the Quality Incident form to ensure all such incidents are recorded appropriately.

The LSAB have coordinated meetings across the East Midlands Safeguarding Adults Partnership with the East Midlands Ambulance Service (EMAS) to provide clarity as to when EMAS are required to raise a Safeguarding Concern as per Section 42 of the Care Act 2014.

Key areas of focus continue to be ensuring that all LSAB Partners can consistently evidence a Making Safeguarding Personal (MSP) approach to safeguarding practice. In particular:

- Partners can evidence that they have spoken to the person at risk prior to raising a safeguarding adult concern;
- That all partners will encourage the person at risk (or their advocate) to confirm what outcomes they wish to be achieved;
- That we will seek to achieve the outcomes expressed in a personalised way;
- That partners will work together to keep people safe and prevent safeguarding risks from escalating;
- Implementation of the LSAB MSP action plan.

2. Conclusion

The LSAB continues its strategic work to ensure its partners are focused on the safety of adults living in Lincolnshire to the best of their abilities and resources.

This report identifies key areas of safeguarding adult work undertaken by the LSAB and seeks to assure the scrutiny members that the work is evidence based and achievable.

3. Consultation

a) Risks and Impact Analysis

n/a

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	LSAB Strategic Plan 2022-2025

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Richard Proctor, LSAB Independent Chair who can be contacted on Richard.proctor@lincolnshire.gov.uk

Lincolnshire Safeguarding Adults Board Strategic Plan 2022 - 2025



LSAB

Making safeguarding personal



Independent Chairs Introduction

The Lincolnshire Safeguarding Adults Board (LSAB) has a statutory duty as detailed within the Care Act 2014 to publish a strategic plan outlining what its objectives are and how it will achieve those objectives.

As the newly appointed Independent Chair of the LSAB it is a priority for me to ensure the actions we undertake are based on solid intelligence and evidence so we can maximise the impact of our resources and if delivered will result in the greatest positive outcomes for those Adults potentially at risk in Lincolnshire. Hence the objectives we have set are ones based upon sound analysis where as an LSAB we have worked with our colleagues in the Lincolnshire Safeguarding Children’s Partnership, the Domestic Abuse Partnership, and the Safer Lincolnshire Partnership to undertake a joint needs assessment analysing adult abuse types, primary locations, profiles of victims and alleged perpetrators. Further analysis of the Lincolnshire Annual Safeguarding Return was additionally utilised to compliment the work undertaken through the joint needs analysis which has resulted in the establishment of the objectives for this newly created strategic plan.

It will be my task now as the Chair to work with the partners of the LSAB, together with the community, service users and carers to turn this plan as identified within the accompanying delivery plan into tangible outcomes which can make a true difference to the people of Lincolnshire.

Richard Proctor
Lincolnshire Safeguarding Adults Board
Independent Chair.



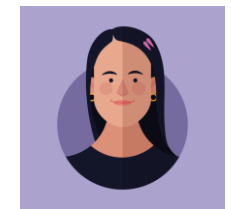
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Lincolnshire – Demographics

Lincolnshire is the 4th largest county in England covering an area of 5,921 sq. km. It is predominately rural, with some of its urban areas sitting within the highest levels of deprivation in the UK. These characteristics combined with a higher proportion of older residents gives us a population with proportionally higher levels of safeguarding challenges and vulnerabilities than in most other areas of the UK.



751,171
total population



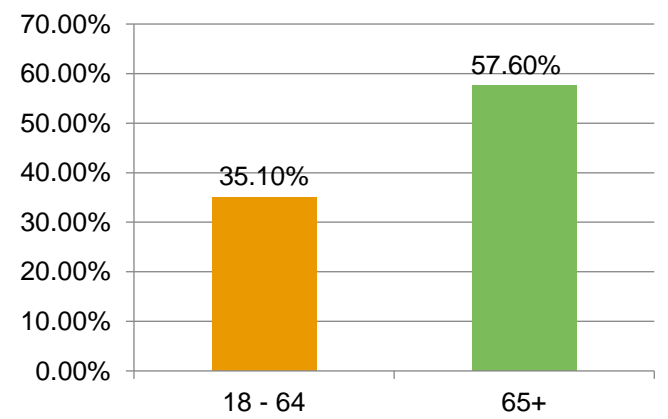
51%
Female



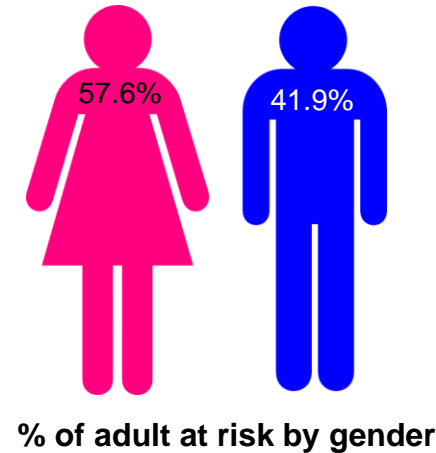
49%
Male

Safeguarding enquires data 2020/21

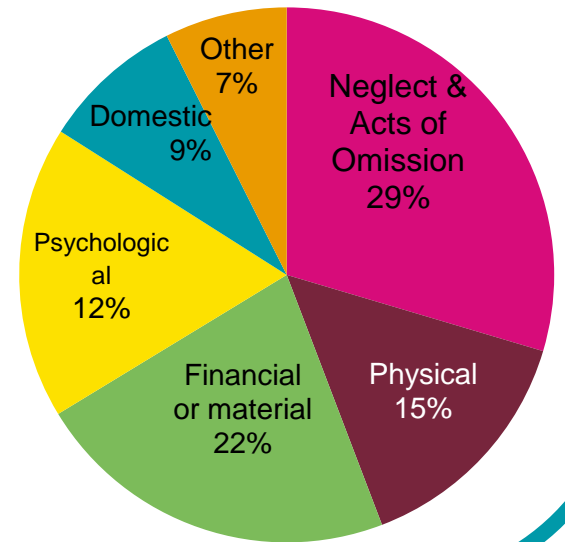
Age of adult at risk



Nearly 65% of all safeguarding enquiries occurred in the victims own home



Types of Abuse 2020/21



A white map of Lincolnshire is centered on a teal background. The map shows the county's irregular shape, including its coastline and internal boundaries. The text 'Vision' and 'Mission' is overlaid on the map.

Vision

Lincolnshire – a place where adults feel safe, secure and free from abuse and harm

Mission

LSAB's mission is to oversee and co-ordinate the effective delivery of safeguarding arrangements across the county with partner agencies

What does the Safeguarding Adults Board do?

The Lincolnshire Safeguarding Adults Board (LSAB) has a responsibility and a legal duty to ensure that Lincolnshire has effective multi-agency arrangements for safeguarding and preventing abuse for our most vulnerable adults.

The board has a statutory responsibility to have a three-year strategy that reflects identified areas of concern in Lincolnshire and to report back on its work each year in an annual report.

The board has a statutory duty to carry out reviews of cases where an adult at risk has died or sustained serious abuse or neglect and there are concerns as to how board partner agencies worked together to protect that individual ensuring that lessons are learnt, and good practice is shared to ensure a more joined up partnership approach to safeguarding.

What is adult safeguarding?

Safeguarding adults means protecting their health, wellbeing and human rights, enabling them to live in safety, free from abuse, harm or neglect.

The aims of adult safeguarding are:

- To prevent abuse, neglect and harm
- To reduce the risk of abuse and neglect
- To focus on improving life for the person in question
- To address the cause of any abuse or neglect that occurs
- To support adults in making their own choices and having control in how they live
- Safeguarding adults should be person centred and outcomes focused.
- To increase public understanding so communities can play a role in safeguarding alongside professionals
- To provide advice, information and support about how to stay safe and how to raise a safeguarding concern

Adult safeguarding seeks to protect those who:

- Have care and support needs
- Are experiencing, or are at risk of, abuse or neglect
- Are unable to protect themselves from the experience or risk of abuse or neglect due to their care and support needs

- [Categories and definitions of abuse](#)



The six principles of safeguarding adults

Empowerment

People supported and encouraged to make their own decision and informed consent.

Prevention

It's better to take action before harm occurs.

Proportionality

Aim for the least intrusive response that is appropriate to the risk presented.

Protection

Provide support and protection for those in greatest need.

Partnership

Services should work with their communities to provide local solutions.

Accountability

Practices in safeguarding adults should be accountable and transparent.

Making Safeguarding Personal

Making Safeguarding Personal (MSP) is the approach that should be taken to all safeguarding work. The key principle of MSP is to support and empower each adult to make choices and have control about how they want to live their own life. It is a shift in culture and practice in response to what is now known about what makes safeguarding more or less effective from the perspective of the adult being safeguarded.

MSP is about having conversations with people about how responses to safeguarding situations can be made in a way that enhances their involvement, choice and control as well as improving their quality of life, well-being and safety. It is about seeing people as experts in their own lives and working alongside them to identify the outcomes they want.

MSP focuses on achieving meaningful improvements to people's lives to prevent abuse and neglect occurring in the future, including ways for them to protect themselves. People are individuals with a variety of different preferences, histories, circumstances and life-styles; so safeguarding arrangements should not prescribe a process that must be followed whenever a concern is raised, but instead take a more personalised approach.

The Lincolnshire Safeguarding Adults Board makes it clear throughout our policy, procedures, business plans and priorities that the aims of MSP must be embedded throughout all the work we do.

Making Safeguarding Personal

Ask

- Understand the situation from the person's perspective and gather the facts using a strength's-based approach.
- What are their views and wishes?
- What are they worried about?
- What do they want to happen? What outcomes would the person like to achieve?
- What's working well? Discuss the person's strengths and what helps them to be safe.
- What needs to happen next?

Listen

- Listen carefully to what they are saying.
- Consider how the person usually communicates and any tools that may assist them in this.
- Give the person time and space to share what they feel is important information.
- Listen with empathy and respect and without judgement.
- Try to record what the person is saying in their own words.
- Pay attention to non-verbal communication.

Offer Choice

- Empower them to make their own choices.
- Consider the person's capacity to make relevant decisions, when they may need support with this, and who can provide this support.
- Ask who they would like to be involved?
- Be open and honest about when consent is needed and when action may be taken without consent.
- Be clear about what safeguarding is, who will be involved and what information will be shared with who.
- Be honest about what can be achieved.

Work Together

- Build and maintain a positive relationship with the person and work in partnership with them to achieve their desired outcomes.
- Ensure the enquiry is conducted at the person's pace.
- Establish how the person, or their advocate, wants to be involved and agree how this will be achieved.
- Share information with the person at every stage and check what they would like to happen next at every stage.
- As the enquiry progresses, assist the person to review risks and rethink the outcomes if required.
- Discuss and agree when the outcomes have been met as far as possible and confirm when safeguarding support will end.
- Feedback, did we meet their desired outcome?

Strategic Priorities

The Boards overarching priority of the next 3 years

Prevention and Early Intervention

The areas of work we intend to focus on over the coming years can be defined into 3 areas

Making
Safeguarding
Personal

Learning and
shaping
future
practice

Safeguarding
Effectiveness

Enablers

These are the tools and programmes we will use to deliver the focused work

Prevention and Early Intervention

A focus on keeping people safe by mitigating safeguarding risks before they escalate. Priority areas for focus will include:

- Further improvement in the quality and safety of Residential and Nursing Care;
- Preventing and or limiting the impact of Pressure Sores (Across NHS and Independent sector providers);
- Tackling the Domestic Abuse of older adults (includes opportunity for joint working the other three statutory boards);
- Preventing Financial Abuse (includes opportunity for joint working with the other three strategic board);
- Safeguarding Adults with Complex Needs buy piloting phase two of the Team Around the Adult approach.

To ensure that the learning from all our reviews and assurance activities is shared and embedded within partner agencies to reduce the risk of repeat incidents or causes of harm. Key areas of focus will include:

- Trailing innovative approaches to Safeguarding Adult Reviews (SAR's)
- Completing Assurance Activities to inform the continuous improvement of safeguarding practice across all partners
- Identification of themes and trends to drive training and awareness input both locally and nationally e.g. Professional curiosity, Mental Capacity
- Build on our ability to evaluate that system wide change has taken place as a result of the learning
- Supporting all stakeholders to improve the quality and impact of their safeguarding activity to improve the outcomes for adults who are abused
- Establish a constant cycle of learning and improvement at a local and national level

Learning and shaping future practice



Safeguarding Effectiveness

Ensuring the effective operation and continuous improvement of the governance, scrutiny and business processes in place to support the board to work effectively. Key areas of focus will include:

- To develop a flexible and effective communications and engagement strategy, including a review of the LSAB Information and advice offer;
- Ensuring our Quality Assurance process is robust, identifying any challenges, sharing best practice and hearing the voice of service user. This will incorporate the completion of the Local Assurance Framework by LSAB partners;
- Ensuring an effective risk/issues management process and the Boards policy and procedures including a review of the LSAB's risk register;
- Data collection and analysis to ensure our work is always based on evidence. This will include the development of an enhanced Assurance Dashboard for the LSAB Executive;
- Develop a service user and community engagement plan that will help us to further embed our co-production ambitions.



Making Safeguarding Personal

Ensuring that all LSAB Partners can consistently evidence a Making Safeguarding Personal (MSP) approach to safeguarding practice. In particular:

- Partners can evidence that they have spoken to the person at risk prior to raising a safeguarding adult concern;
- That all partners will encourage the person at risk (or their advocate) to confirm what outcomes they wish to be achieved;
- That we will seek to achieve the outcomes expressed in a personalised way
- That partners will work together to keep people safe and prevent safeguarding risks from escalating.
- Implementation of the LSAB MSP action plan





LSAB's financial resource allocation and deployment for 2022 onwards are set out below.

Finance

Income

LCC – ASC	£	45,000
Lincolnshire Clinical Commissioning Group		45,000
Lincolnshire Police & Crime Commissioner		<u>45,000</u>
		<u>135,000</u>

Expenditure

Staff costs/fees		<u>135,000</u>
		<u>135,000</u>

Human Resources

1 x	Independent Chair *
1 x	Deputy and Chair SIRG(A) *
1 x	Business Manager
1 x	Audit and Policy Officer
1 x	Administrator
1 x	Training Officer
* Engaged under contract for employment for fixed terms as per Memorandum of Understanding (MOU)	

Conclusion

In recent years, the Board and its partners have adapted to a changing environment which included adopting safeguarding practice that was consistent with the National requirement during the pandemic.

During 2021 a large piece of work was undertaken to assess the needs of the population across Lincolnshire, which was complimented by detailed work undertaken by the LSAB. This intelligence was considered by the partnership at several assurance events to inform the priorities set out in this three year strategy and the related delivery plan.

Governance arrangements will monitor our progress against expected outcomes and partners will be kept informed of progress together with the activity undertaken reported upon within the Boards annual report.

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**Open Report on behalf of Glen Garrod,
Executive Director - Adult Care and Community Wellbeing**

Report to:	Adults and Community Wellbeing Scrutiny Committee
Date:	06 September 2023
Subject:	Day Services Update

Summary:

This report is to provide an update to the Adults and Community Wellbeing Scrutiny Committee on progress in delivering the ambitions outlined in the In-House Day Services plan, ' [Living Life to the Full](#) 'Living Life to the Full' summarises the strategic direction and confirms priority actions for the development of the service up to 31 March 2024. The Service Plan aligns with the Corporate Plan, making an important contribution to its overall vision for Lincolnshire.

Actions Required:

The Adults and Community Wellbeing Scrutiny Committee are asked to note the contents of this report.

1. Background

The Adults and Community Wellbeing Scrutiny Committee previously endorsed the In-House Day Opportunities plan "Living Life to the Full". The Committee requested regular updates in relation to achieving the ambitions set out within the plan. This report provides the most recent update on progress:

Places we can be proud of

Capital Investment - Ancaster Day Centre

The refurbishment and modernisation of key care, hygiene, and reception areas within Ancaster Day Centre is progressing well. The project will provide modernised WC's and a hygiene suite, a care corridor with enhanced functionality and a completely remodelled reception area for service users and their families. These changes will the service to operate more effectively and to contribute to an improved quality experience for people using the facilities and to make the building more suited to community use.

Phase 1, which are the outlined internal developments started in late July with an October completion expected. There was a short period of closure required by the service, but the

service continued to operate from Pheasantry, a Lincoln St Francis School site, during this time. People that use the service and their families were supported through this short disruption.

Phase 2 of this project is also beginning feasibility review. Phase 2 will seek to make external improvements which will create more community integration and gain more outside space for people using the service. Corporate Property colleagues are working closely with the Day Service to understand the options available.

Repairs and Maintenance

Corporate Property and Day Services managers have agreed access and training to Concerto and an escalation process to ensure that outstanding repairs and maintenance is completed and actioned quickly.

Service Structure Modernisation

Committee were advised that a restructure was underway within the service, that the consultation period had been concluded and an implementation plan for the new structure has been completed. The new structure was implemented on 01 January 2023.

The reorganisation of the staffing structure and the consultation prompted significant engagement across the county from staff within the service and their recognised trade unions. Lincolnshire is a large rural county and so involving everyone in the process was complex, however substantial efforts were made to ensure opportunity for maximum engagement in the consultation process for all concerned. The views and opinions expressed by staff were welcomed, valued and carefully considered.

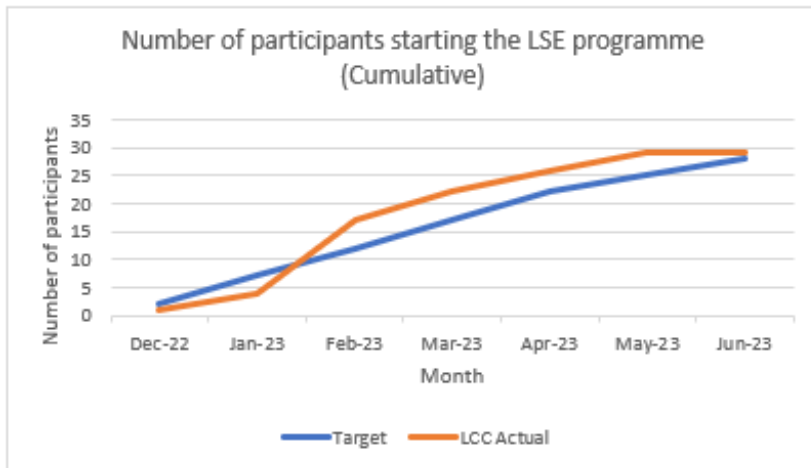
The changes to the former Day Opportunities, now Day Services, staffing structure were introduced to ensure the service is best placed to meet the services exciting and ambitious aims. This structure has been operating successfully for 6 months with positive impact for the service.

Local Support Employment (LSE)

The Local Supported Employment (LSE) initiative is a DWP funded programme aimed to support adults with Learning Disabilities and/or Autism, to move into employment and to help them maintain that employment.

The 3 job coaches, in place since January 2023, have had some excellent success. Audit by DWP in July resulted in positive feedback specifically citing the budget and staff time, "system looks robust to track all staff time and expenditure to LSE specific activity".

The graph below shows performance is as expected and has already resulted in 4 individuals finding paid employment. This is reported by DWP to be performing better than other local authorities participating in the project.



Volunteering and Employability

The Quad recently celebrated its first anniversary and was favourably mentioned by CQC following their recent visit. Day Services colleagues and people who support the service provided excellent catering throughout.

Building off the back of the success of The Quad, the Day Service is incredibly proud to have re-opened the café at the Lincolnshire Life Museum providing further community benefit and opportunities for people that use the service. Louth Day Centre is now running the local kiosk, Spout Yard Park Kiosk, within the community and providing catering and the service maintains the garden areas too.

Boston Scott House has benefited greatly from a vehicle and driver being available to through Transport Connect Ltd, the Council's Teckal transport company. The Day Service has been able to expand their offer with the autonomy to travel between different sites and venues. Opportunities they access due to having transport include; volunteering at a farm and at a horse centre, maintaining an allotment, being able to attend events out of regular hours and promotion of microenterprise by selling concrete items at fairs.

Transport

Day Services have agreed the following with Transport Services Group (TSG) to address transport issues raised by several stakeholders:

- Dedicated capacity of TSG operational staff member.
- Dedicated capacity of Fieldwork Team Manager for training and guidance for operator staff i.e. securing wheelchairs and understanding requirements of drivers and passenger assistant.
- Dedicated capacity of Fleet Team Manager for guidance for vehicle arrangements.
- To ensure expectations of drivers and PAs as well as vehicle related maintenance and management are met by providers.

TSG in conjunction with Day Service are reviewing the existing contracted routes to identify any potential efficiencies including; aligning days of attendance, reviewing times of attendance and passenger information accuracy.

A positive development which has become available through TSG is access to their Independent Travel Training Team. Travel training is a short-term, intensive instruction designed to teach people with disabilities how to travel safely and independently on public transportation. TSG have agreed the dedicated capacity of a Travel Options Officer for travel training.

Ancaster Day Centre has already identified individuals that could benefit from this training. This may potentially remove their need for bespoke transport but also, evidence from the program which was run for education transport for several years shows, that travel training can; increase independence and self-confidence, improved social skills and provide greater access to opportunities.

A pilot is intended to take place later in 2023 which would provide transport to and from the Day Service having a vehicle available throughout the day. Costs for these arrangements would be offset by replacing expensive transport that is provided to allow people to access community activities.

No Smoking Sites

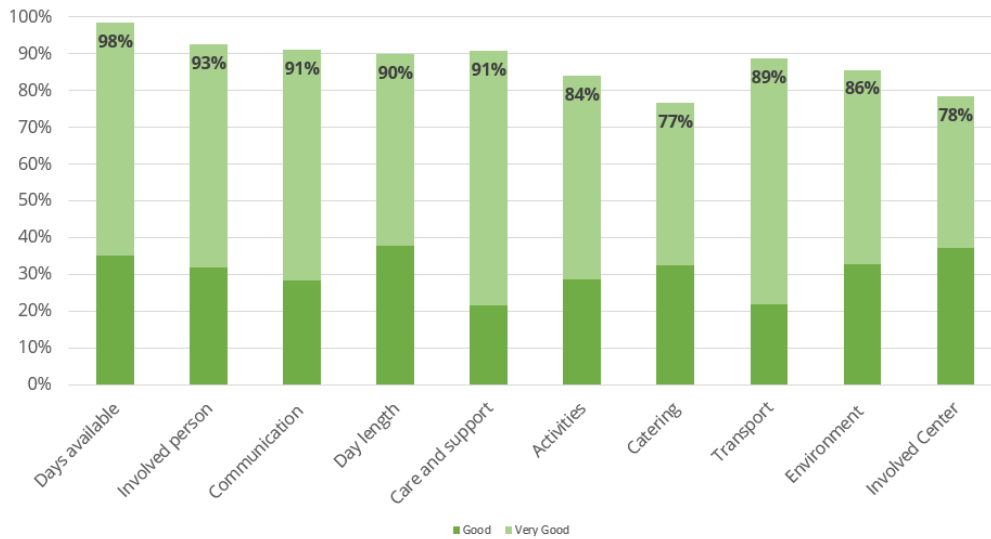
The day service has a role to play in promoting healthy lifestyles and supporting where possible good health outcomes for service users. Small changes to locations of smoking shelters to make them less accessible has already reduced the amount of onsite smoking. It is anticipated making all sites no smoking will nudge behaviour change towards further reduced smoking.

Forging new and more active partnerships with Families

An ambition for the service is to forge new and more active partnership with families and people we support by establishing a partnership group in each area. In Louth a regular parent and carers forum takes place every 3 months. There is great involvement with parents and carers in the ongoing development of the service and they feel that they have a voice. Parents and carers are now involved in interview for new staff and have had the opportunity feedback on annual health checks and the self-assessment referral form. The service is also making use of staff, parents and carers skills and talents skills and experience to provide additional activities within the centre.

There has been a survey with carers of people who use the Day Service in April and May 2023. There was a 75% response rate with the following feedback and overall 88% of carers found the service to be Good or Very Good

Family Carer experience of the Day Service May 2023: Good or Very Good

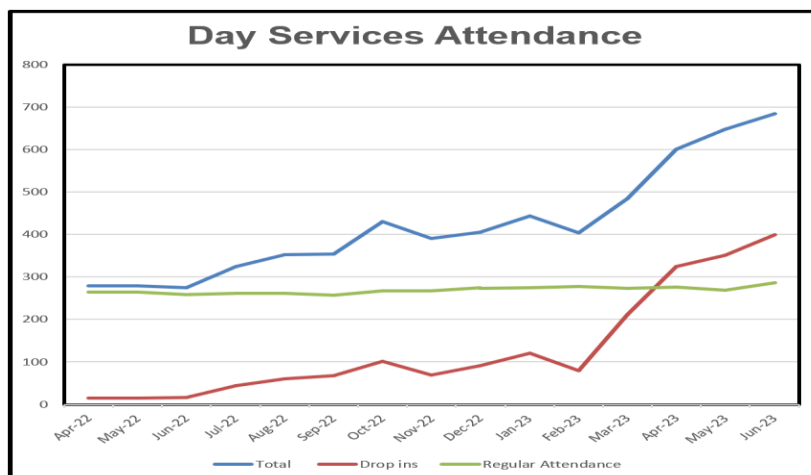


Voiceability, an independent self-advocacy support group, have undertaken a series of workshops around the county to gather feedback from people who use the services, and the service is looking forward to receiving their findings from them.

Drop-In Sessions

The Day Services have been running successful drop-in activities which enhance what's available locally. Aimed at supporting and promoting community wellbeing and connections and to combat isolation the sessions are open to all, older people & others.

Drop-in visits are proving to be a sought-after activity with around 400 drop-ins in June 2023. The service is using the drop-in activity to bolster support for individuals with dementia with support from partner agencies.



Louth Day Services has been carrying out person-centred planning (PCP) reviews and people with complex needs have been given a voice and opportunity to be involved in their own reviews. A great example is a non-verbal individual having their family and support group contributing to their review and being enabled to contribute through voice-recording of people that care from him, his parents, and using props and sensory and

tactile mechanisms including recording of his facial expression and reactions to develop a person-centred plan. PCP’s reviews will take place with everyone using the service and these will be individualised, in the approach taken, to ensure that they are able to contribute.

2. Conclusion

The Day Service is continuing to deliver on all aspects of the Service Plan with multiple projects taking place across every site and strategically. There is a real positive energy around these developments with partners and agencies working more closely with the Day Service in all aspects of provision.

These developments are to ensure a person-centred, strength-based approach is taken and these updates outlines the process and changes that the service has undertaken to deliver on this ambition.

3. Consultation

a) Risks and Impact Analysis

N/A

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	Presentation to Adults and Community Wellbeing Scrutiny Committee

5. Background Papers

The following background papers as defined in the Local Government Act 1972 were relied upon in the writing of this report.

Document title	Where the document can be viewed
Adults and Community Wellbeing Scrutiny Committee Report	Agenda for Adults and Community Wellbeing Scrutiny Committee on Wednesday, 30th November, 2022, 10.00 am (modern.gov.co.uk)

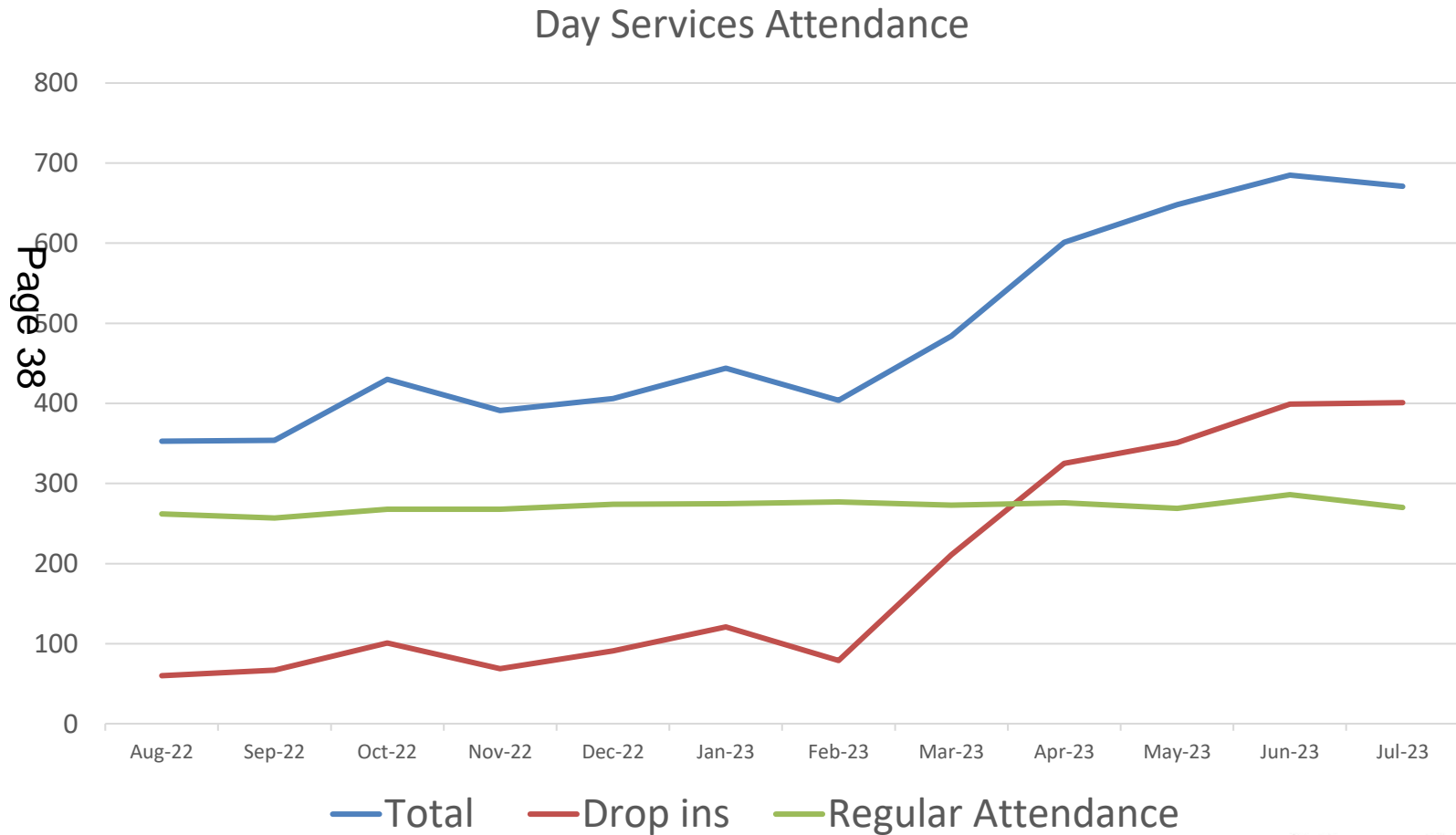
This report was written by Gareth Maddison, who can be contacted on 07423 463813 or Gareth.Maddison@lincolnshire.gov.uk.

Living life to the full.

Day Services update August 2023



Day Service attendance figures 2023

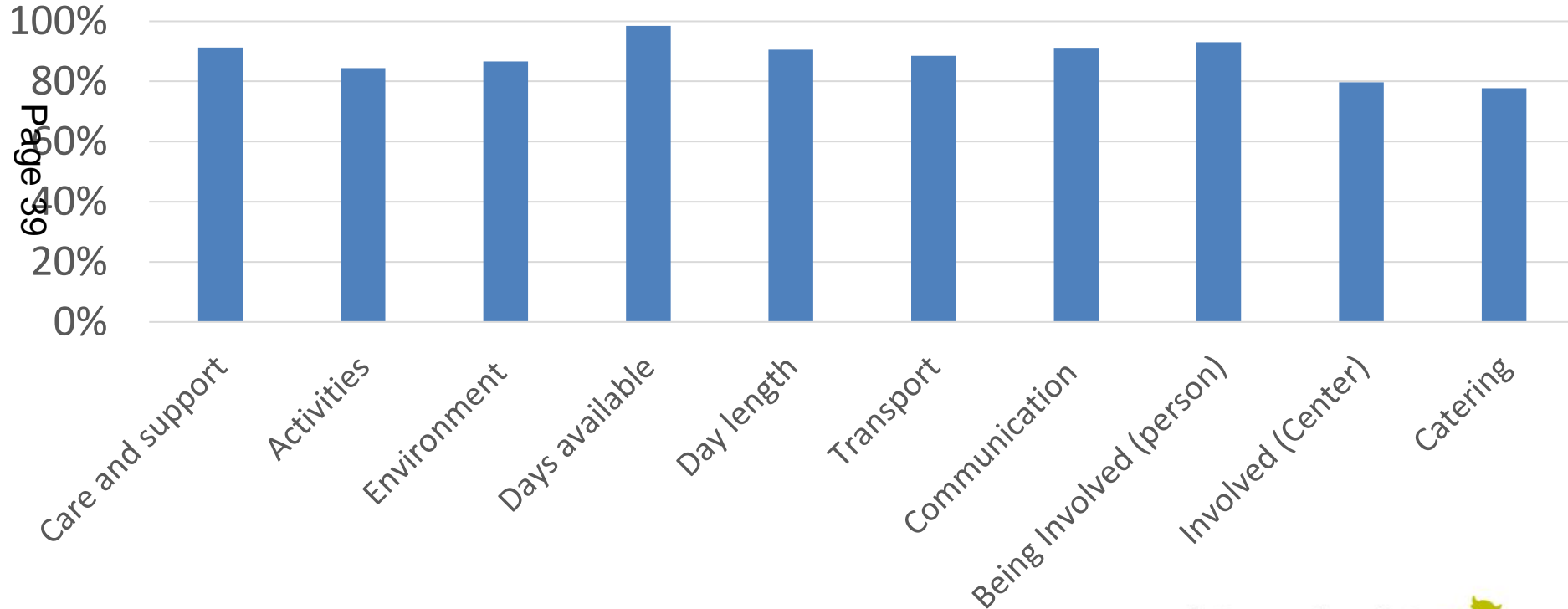


Survey of Family Carers

Average 88% Satisfaction

Thinking about your experience of the day service over the last year how would you describe the following?

Aspects of services rate good or very good by carers



228 responses (76%)

Supporting people to contribute to their community:

Market Rasen:

Improving the garden for a local nursing home

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Supporting people to contribute to their community:

Gainsborough:

Helping out in the grounds of John Copeland Hospital

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Supporting people to contribute to their community:

Boston:

Creating a trail of nature themed art installations across the town.

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Supporting people to live healthier more active lives:

Grantham:

Learning a new sport and helping keep the club courts in good order.

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Supporting people to live healthier more active lives:

Stamford:

Sport for all accessible sailing.



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Promoting healthy eating:

Lincolnshire Show:

Encouraging visitor to try a healthy fruit smoothie .

Page 45



Supporting people to contribute to their community:

Horncastle:

Helping host the Wolds Festival, community arts and open air theatre.

Page 46



Supporting people with complex needs :

Louth:

Equine-assisted therapy has been shown to improve communication and interaction in people who are otherwise withdrawn.



Page 47

Work experience and learning opportunities.

Lincoln:

A year on from re-opening The Quad Restaurant



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**Open Report on behalf of Glen Garrod,
Executive Director - Adult Care and Community Wellbeing**

Report to:	Adults and Community Wellbeing Scrutiny Committee
Date:	6 September 2023
Subject:	Service Level Performance against the Corporate Performance Framework 2023-24 Quarter 1

Summary:

This report summarises the Service Level Performance against the Success Framework 2023-24 for Quarter 1. All performance that can be reported in Quarter 1 is included in this report.




Full service level reporting to all scrutiny committees can be found here: [Corporate plan – Performance data - Lincolnshire County Council](#)

Recommendation(s):

To consider and comment on the Adult Care and Community Wellbeing Service Level Performance for 2023- 24 Quarter 1.

1. Background

This report details the Service Level Performance measures for the Adults and Community Wellbeing Scrutiny Committee that can be reported in Quarter 1.

- 2 measure that exceeded their target 
- 12 measures that achieved their target 
- 4 measures did not meet their target 
- 1 measure that does not have a target (contextual)

1.1 Adult Care

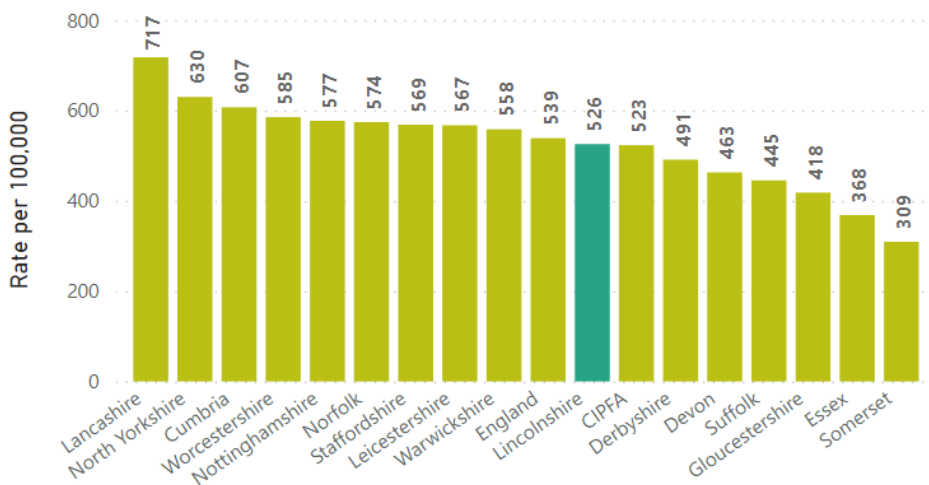
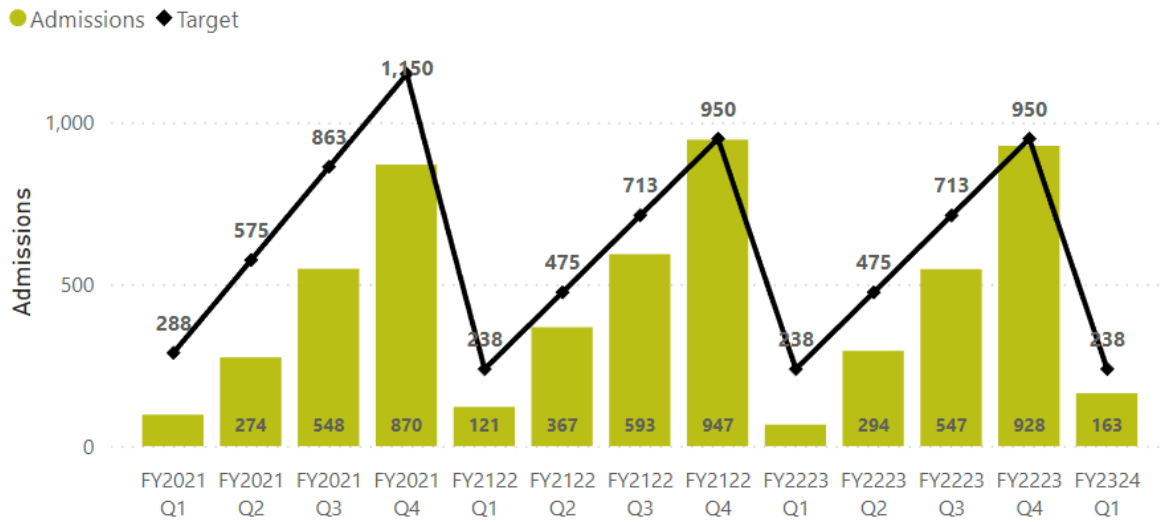
1.1.1 Measures that exceeded their target

PI 60 Permanent admissions to residential and nursing care homes aged 65+ ☆
 April 2023- June2023

Actual: 163

Target: 238

There were 163 permanent admissions which is lower than predicted, but it should be noted that the actual number will be slightly higher as there is a known delay in entering information into the system. 84% of the new admissions have a physical support need. 23% are aged 90+. Clients living in the South Holland area has seen the largest increase of admissions to residential care (29).



Statistical Neighbours

Benchmarking period April 2021 – March 2022

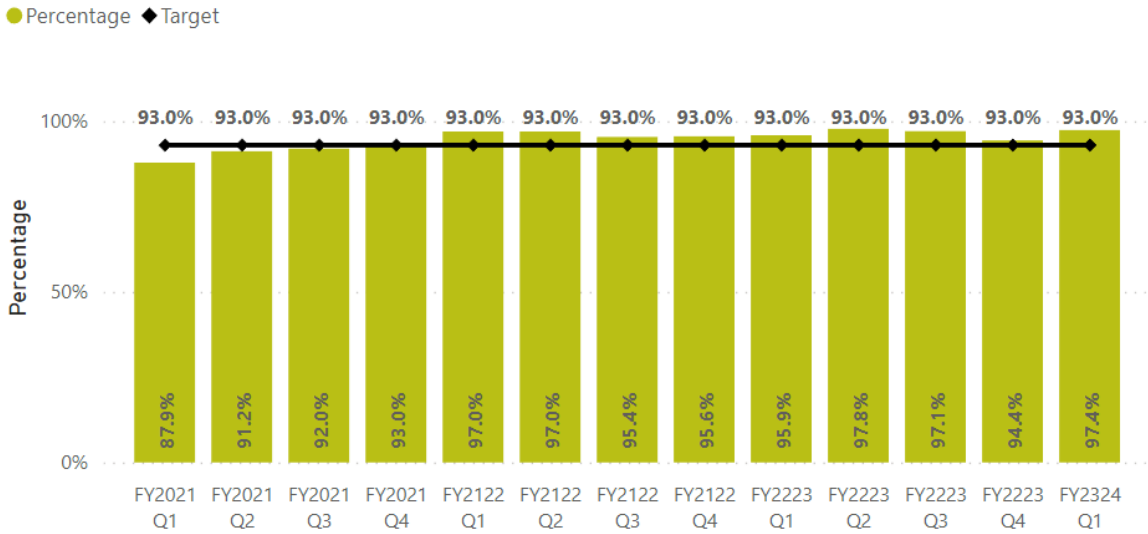
PI 122 Requests for support for new clients, where the outcome was no support or support of a lower level ☆

April 2023- June 2023

Actual: 97.4

Target: 93

We continue to exceed the target. This measure reflects the proportion of those new clients who received short-term services during the quarter, where no further request was made for ongoing support. Since short-term services aim to reable people and promote their independence, this measure provides evidence of a good outcome in delaying dependency or supporting recovery and short-term support that results in no further need for services. We usually perform well above national and the region.



This PI is a local measure for the 65+ age group, so benchmarking data is not available. Benchmarking information is available for the 18+ age group.

1.1.2 Measures that achieved their target

PI 63 Adults who receive a direct payment ✓

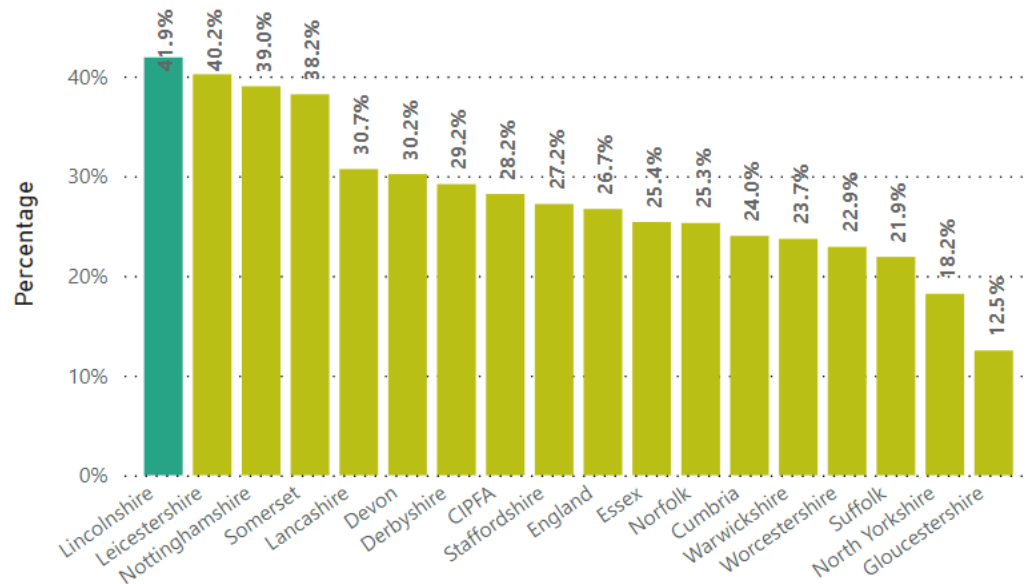
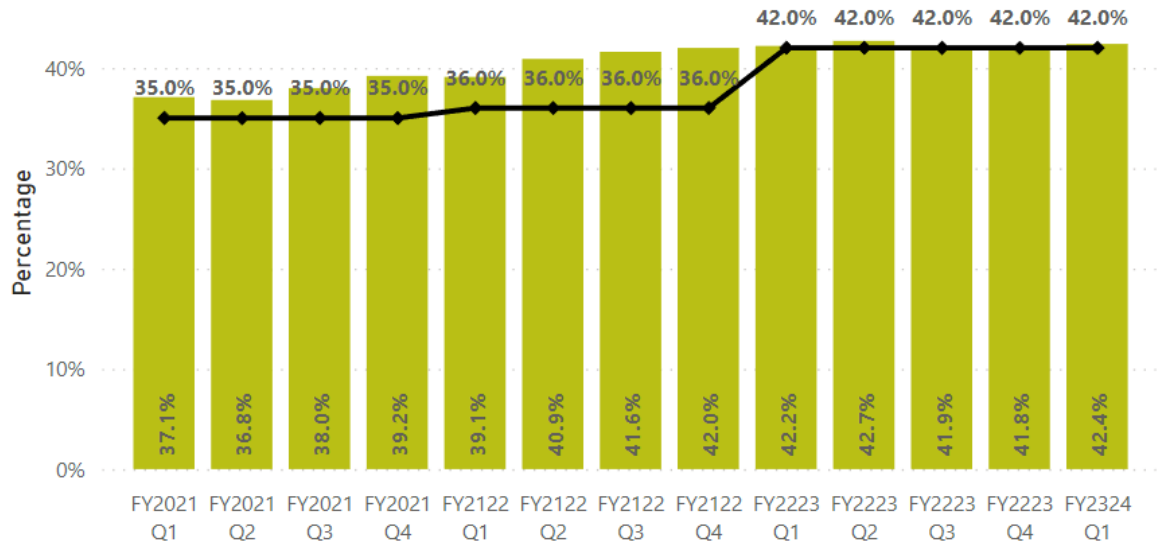
As at June 2023

Actual: 42.4

Target: 42

We continue to provide a consistent number of clients with a direct payment which enables them to have more control over how their own care and support is provided, and gives more freedom of choice over the care they need. Quarter 1 performance is above the previous quarter and the target has been achieved. Performance against this measure is usually well-above the national average.

● Percentage ◆ Target



Statistical Neighbours

Benchmarking as at March 2022

PI 65 People in receipt of long term support who have been reviewed ✓

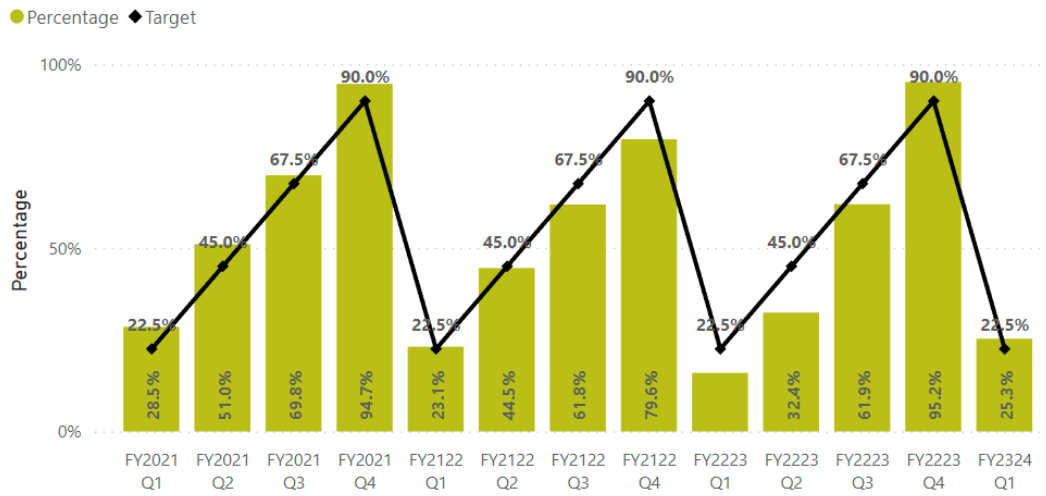
April 2023 – June 2023

Actual: 25.3

Target: 22.5

All teams across Specialist Adults Services and Adult Frailty & Long Term conditions teams have achieved the target for Quarter 1 and are on-track to achieve the end of year target. As well as ensuring that planned reviews are completed our monitoring of quality practice

standards also tells us that our assessment and care management practice is of good quality.



Benchmarking data has been removed as we use a different cohort definition which does not match the national definition. However, our definition will change in 2023-24 to match the national definition and benchmarking information will be available in future reports.

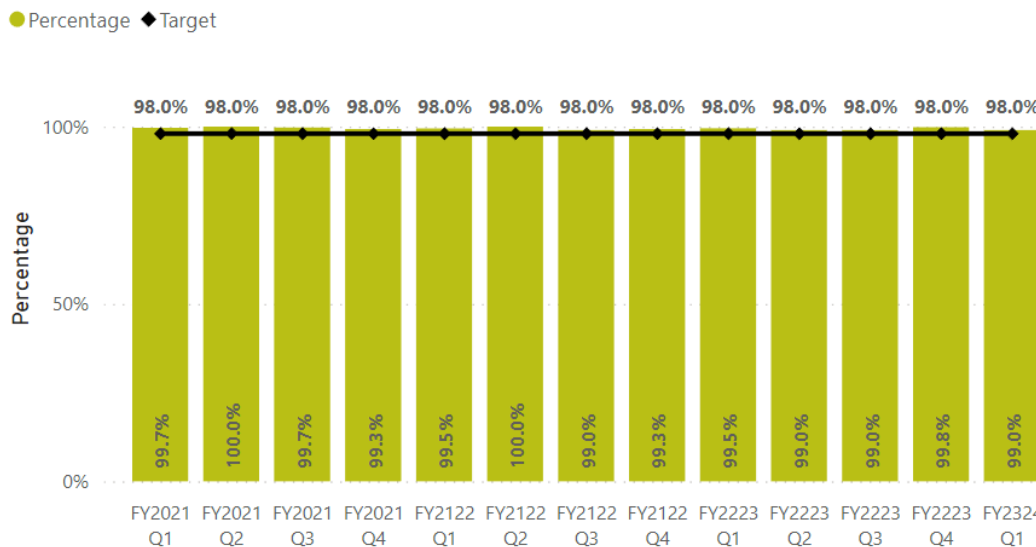
PI 113 Emergency and urgent deliveries and collections completed on time ✓

As at June 2023

Actual: 99

Target: 98

The service remains incredibly busy but is meeting the targets set. This is done in the backdrop of mobilising the new service and an imminent move to the new premises in Sleaford.



This PI is a local measure so benchmarking data is not available.

PI 124 Completed episodes of Reablement, where the outcome was no support or support of a lower level ✓

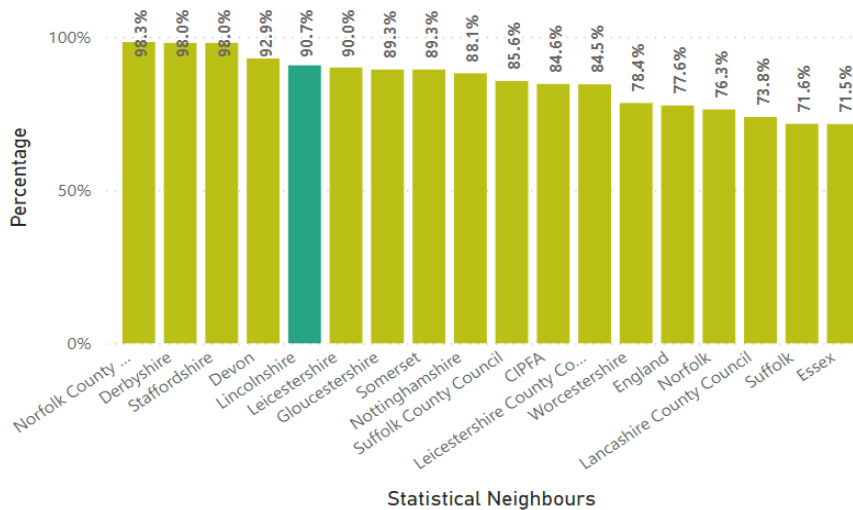
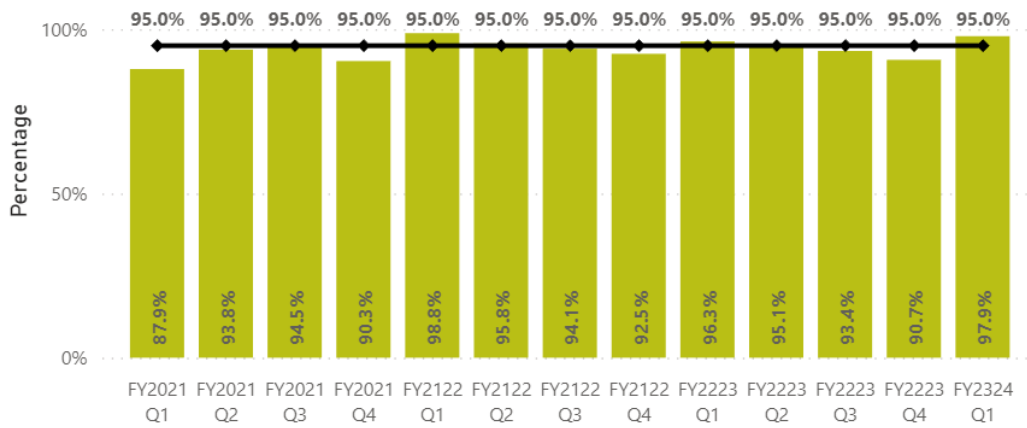
April 2023 - June 2023

Actual: 97.9

Target: 95

The reablement service Libertas continues to provide care and support that allows clients up to a maximum of 6 weeks reablement care in their own home. Due to the care and support these clients are receiving 97.9% of all episodes of reablement have resulted in clients not going on to receiving a long term adult care service.

● Percentage ◆ Target



Benchmarking period April 2021 – March 2022

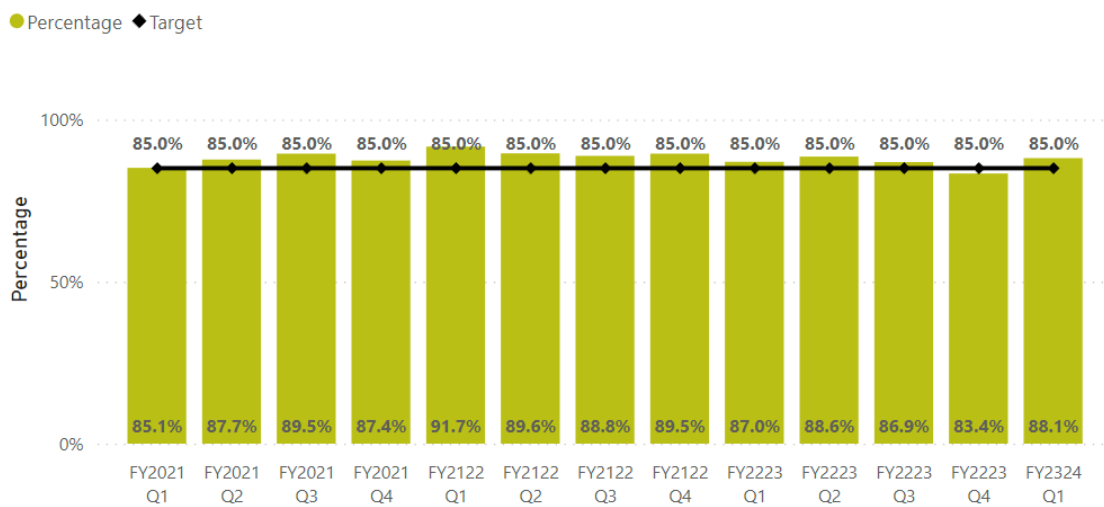
PI 158 For adults discharged from hospital, the percentage who remain at home 91 days after discharge ✓

As at June 2023

Actual: 88.1

Target: 85

The target has been achieved which is positive, evidencing that people have received an appropriate assessment of their needs to ensure they remain at home following discharge from hospital. Of the 1341 discharges that are at home after 91 days, 264 of these are at home receiving a long-term support service (e.g. home care). Of the 181 clients not at home on the 91st day, 105 of these are now in Long Term residential care.



Benchmarking data is not available as we use a local definition (which is different to the national comparator).

1.1.3 Measures that did not meet their target

None in Quarter 1

1.2 Specialist Adult Services

1.2.1 Measures that exceeded their target

None in Quarter 1

1.2.2 Measures that achieved their target

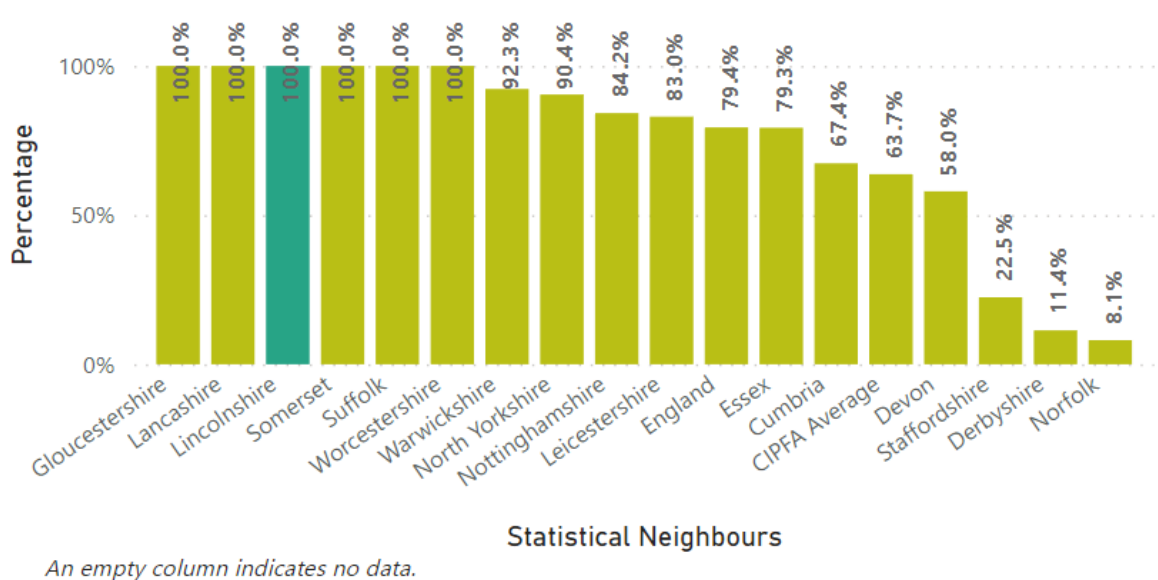
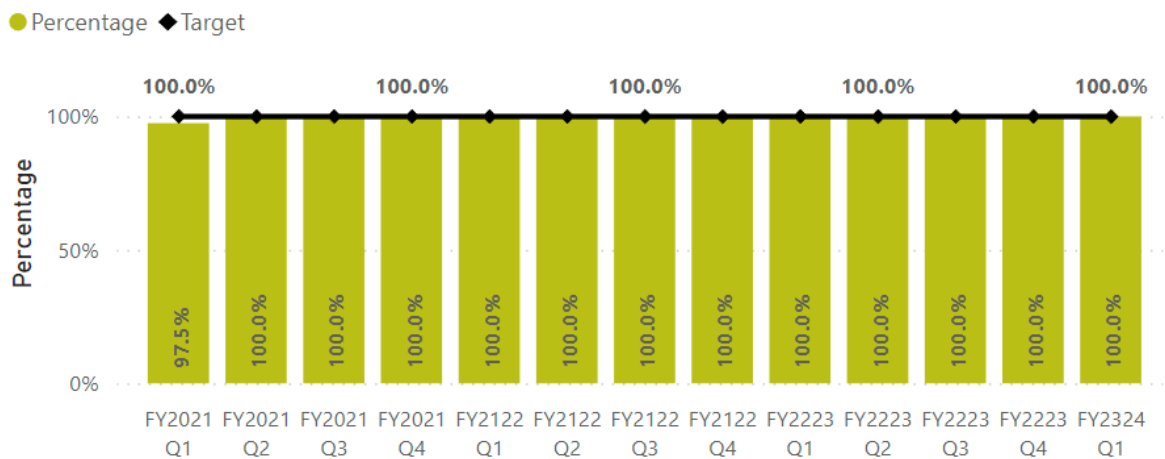
PI 28 Safeguarding cases supported by an advocate (where appropriate) ✓

April 2023 – June 2023

Actual: 100

Target: 100

This measure is consistently met and demonstrates that individuals are provided with the necessary support to share their views and wishes.



Benchmarking period April 2021 – March 2022

PI 116 Concluded safeguarding enquiries where the desired outcomes were achieved ✓

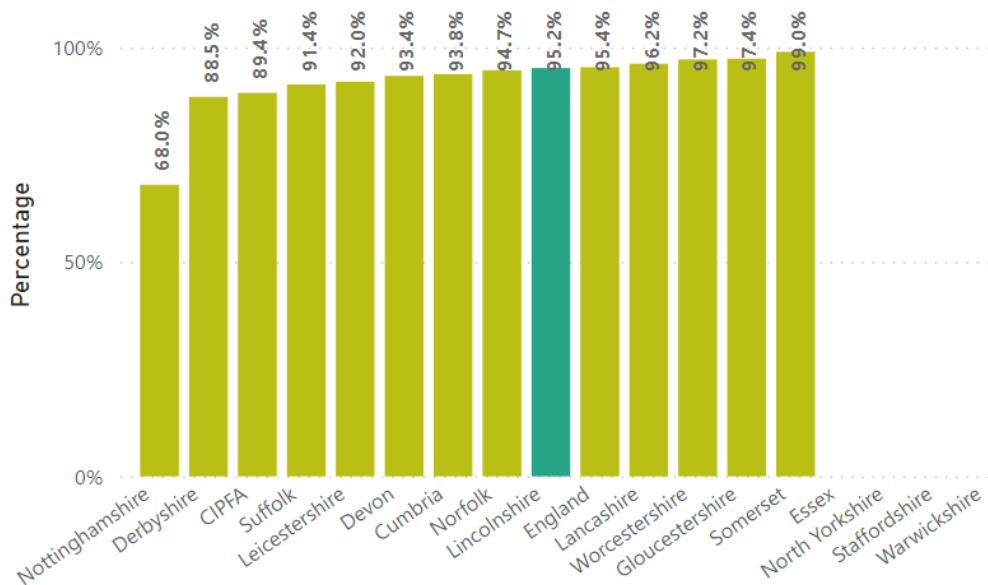
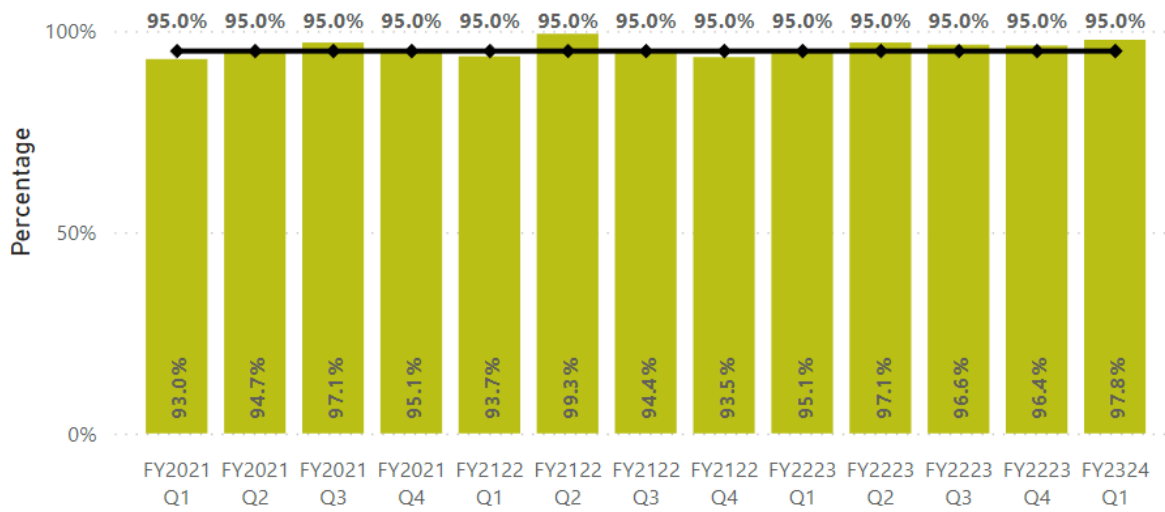
April 2023 – June 2023

Actual: 97.8

Target: 95

This target has been met. Understanding what being safe means to the individual and working with them to attain this supports independence, choice and control, helping to build resilience which can prevent further risk.

● Percentage ◆ Target



An empty column indicates no data.

Statistical Neighbours

Benchmarking period April 2021 – March 2022

PI 163 Percentage of people who were asked what outcomes they wanted to achieve during an Adult Safeguarding enquiry ✓

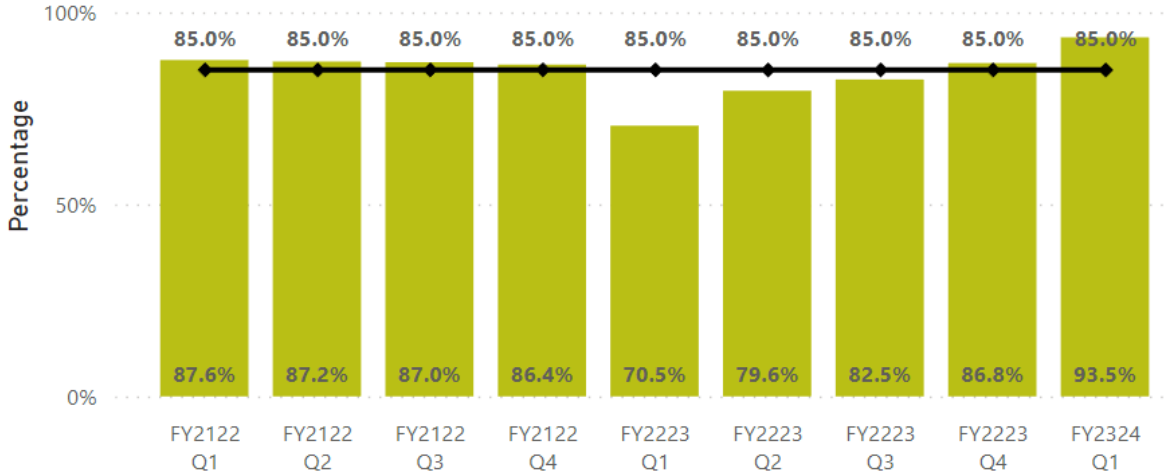
April 2023 – June 2023

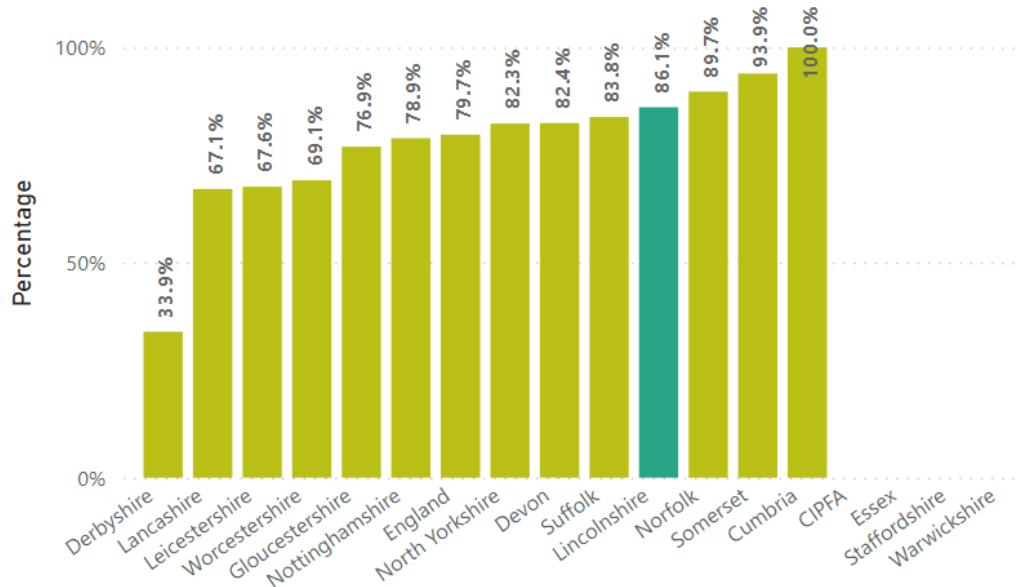
Actual: 93.5

Target: 85

Work has been undertaken with the Lincolnshire Safeguarding Adults Board (LSAB) to ensure that all safeguarding activity starts with a conversation with the person. As a result, the target has been achieved, with a 7.7% increase since the last quarter. This work with the LSAB will continue to ensure that the principles of Making Safeguarding Personal are understood and embedded across Lincolnshire.

● Percentage ◆ Target





An empty column indicates no data.

Statistical Neighbours

Benchmarking period April 2021 – March 2022

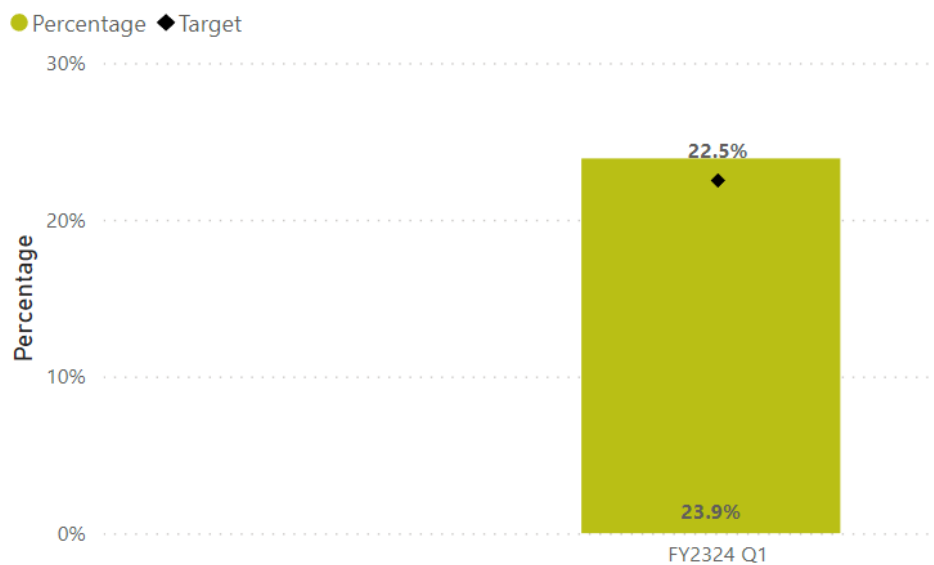
PI 174 Proportion of adults with a learning disability or a mental health need in receipt of long-term support who have been reviewed ✓

April 2023- June 2023

Actual: 23.9

Target: 22.5

A review in Adult Social Care is a process that looks at the care and support needs and considers whether support in place is meeting the individual's identified needs and outcomes. Specialist Adults Services review performance covering adults with a mental health need or a learning disability is above the Quarter 1 target and on-track to achieve the end-of-year target of 90%. As well as ensuring that planned reviews are completed our monitoring of quality practice standards also tells us that our assessment and care management practice is of good quality.



No benchmarking information is made available by NHS England to allow comparisons with other Councils.

1.2.3 Measures that did not meet their target

None in Quarter 1

1.2.4 Measure that does not have a target (contextual)

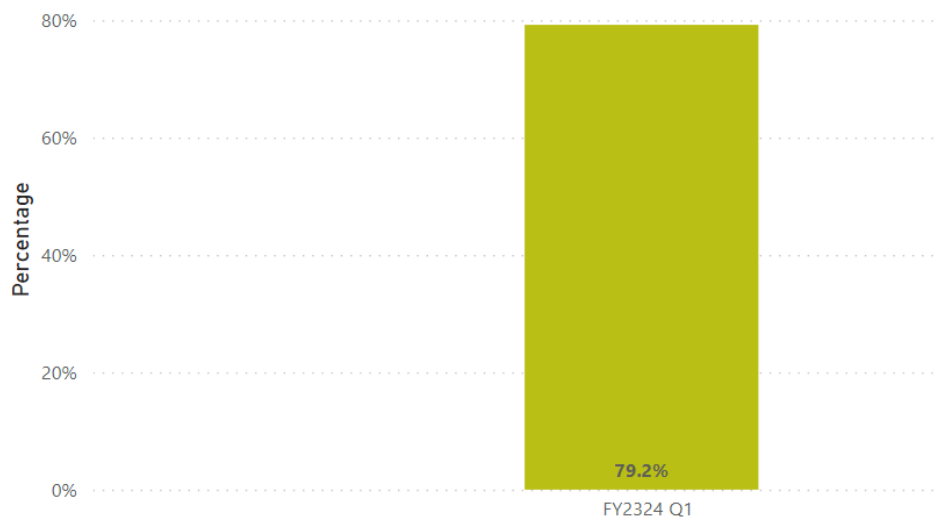
PI 173 Proportion of adults with a learning disability who live in their own home or with their family

April 2023- June 2023

Actual: 79.2

Target: n/a

This measure is intended to improve outcomes for adults with a learning disability by demonstrating the proportion in stable and appropriate accommodation. The nature of accommodation for adults with a learning disability has a strong impact on their safety and overall quality of life and the risk of social exclusion. In Quarter 1 79.2% live in their own home or with their family. This compares to the 2021/22 national figure of 78.8% and the statistical neighbours figure of 75.8%. A lot of work is done by the Learning Disability Team to support adults with a learning disability to remain at home or with their family.



Benchmarking data will be updated in Quarter 3

1.3 Public Health and Community Wellbeing

1.3.1 Measures that exceeded their target

None in Quarter 1

1.3.2 Measures that achieved their target

PI 33 Percentage of people aged 40 to 74 offered and received an NHS health check ✓
As at March 2023

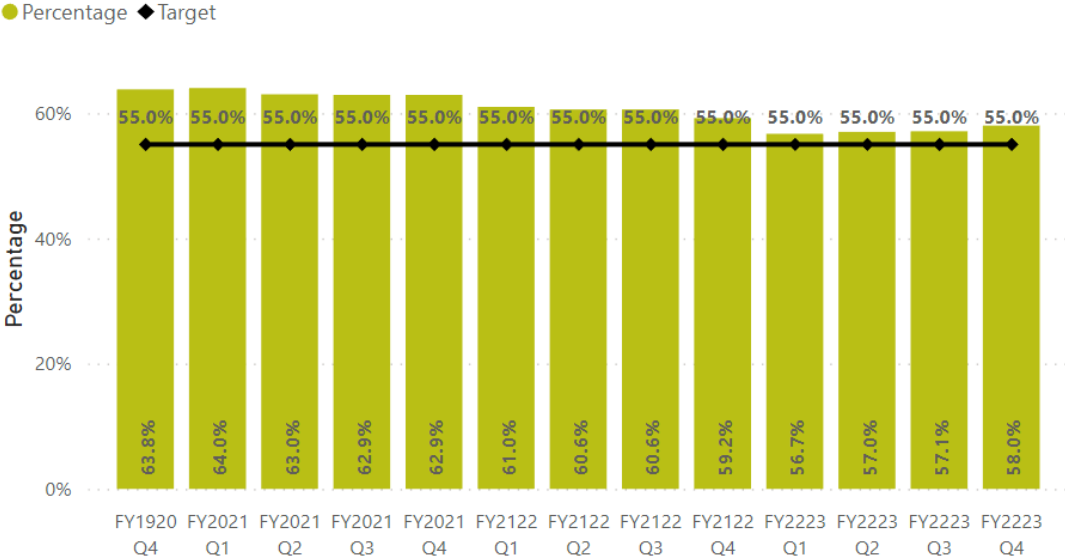
Actual: 58

Target: 55

Local Authorities collect information on the number of NHS Health Checks offered and the number of NHS Health Checks received each quarter and return this to the Office for Health Improvement and Disparities (OHID). The latest OHID published data is Quarter 1 2018/19 – Quarter 4 2022/23.

In Lincolnshire during this period 124,688 people have been invited for an NHS Health Check and 72,307 people have taken up the invite. The overall percentage of people taking up an NHS Health Check invite was 58% (compared to 42.3% in England and 51.5% in East Midlands). Lincolnshire has the highest percentage amongst its 'CIPFA nearest neighbours'. The NHS Health Check programme aims to help prevent heart disease, stroke, diabetes and kidney disease. Everyone between the ages of 40 and 74, who has not already been diagnosed with one of these conditions, will be invited (once every five years) to have a check. A high take up of NHS Health Check is important to identify opportunities for early interventions.

The NHS Health Check Programme supports the delivery of the Better Lives Lincolnshire Integrated Care Partnership (ICP) Strategy, specifically the 'population health and prevention' priority enablers and the 'working age' and 'ageing well' themes.



Benchmarking period April 2018 – March 2023

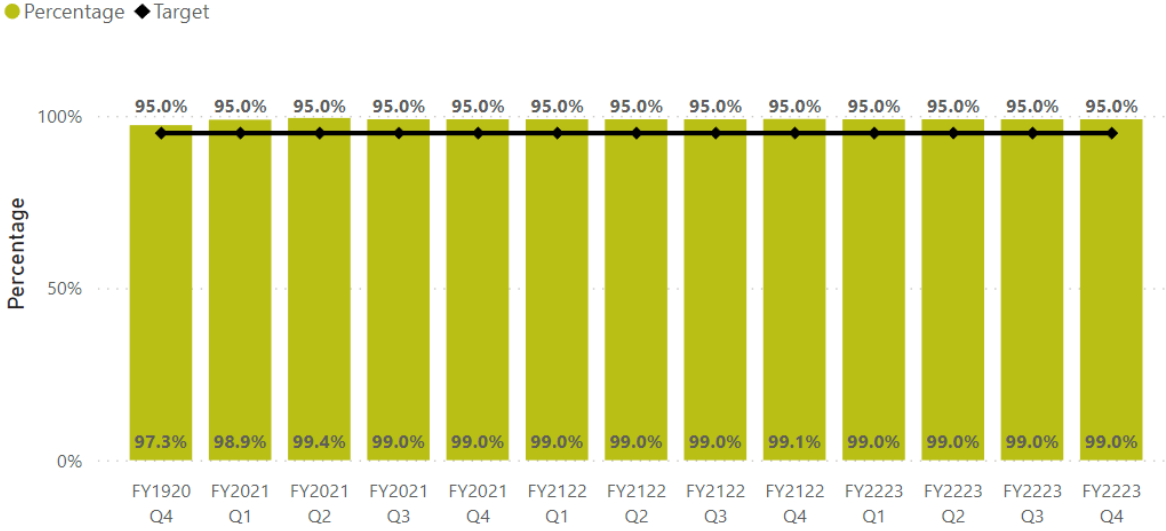
PI 110 Percentage of people supported to improve their outcomes following Wellbeing intervention ✓

As at March 2023

Actual: 99
Target: 95

Due to the time delay on this measure to account for the up to 12 weeks of support interventions available, this data is for Quarter 4 2022-23. During this period the service experienced the highest quarterly demand for 2022-23 with the highest referral volumes

seen during the month of January as has been seen in previous years. Despite the volumes seeking support, the service continues to maintain its consistently strong performance in this self-determined outcome measure indicating 99% of individuals made improvements in their overall outcomes following service intervention.



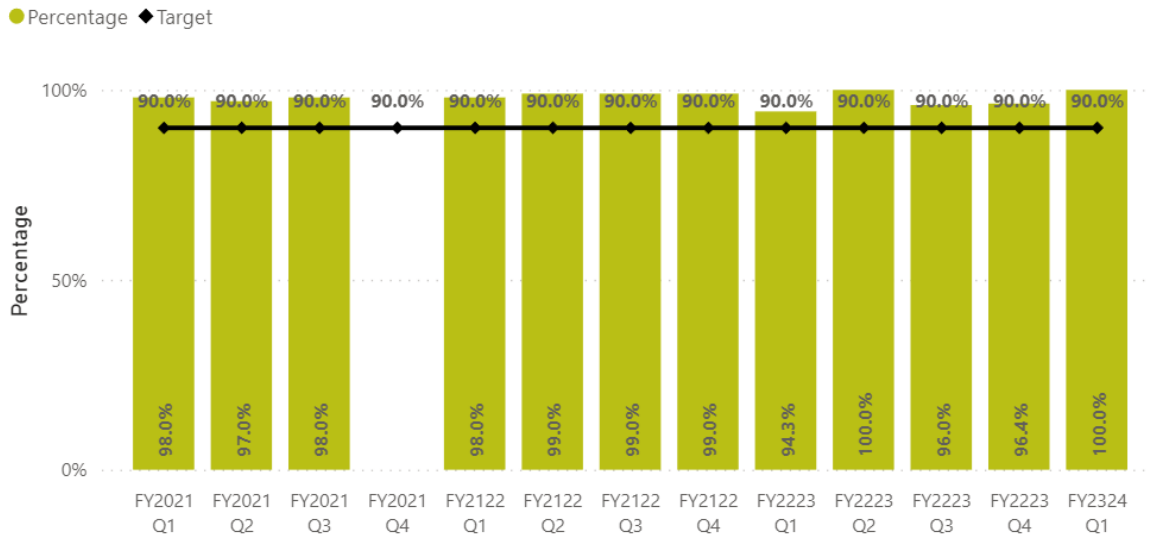
This PI is a local measure so benchmarking data is not available.

PI 112 People supported to maintain their accommodation via Housing Related Support Service (HRSS) ✓

June 2023

Actual: 100
Target: 90

100% has been achieved for this quarter for accommodation services. The Provider continues to support service users to achieve an overall improvement across their outcomes. 98.6% has been achieved for the floating support service element which has exceeded its target of 90%. Areas of support focus on improving the health and wellbeing of services users, along with sustaining tenancies and enabling service users to live independently. The service is currently delivering the Supplemental Substance Misuse Treatment and Recovery Housing Support Grant (SSMTR-HS), which enables service users with substance misuse issues to improved access to, and sustainment of suitable accommodation.



This PI is a local measure so benchmarking data is not available.

1.3.3 Measures that did not meet their target

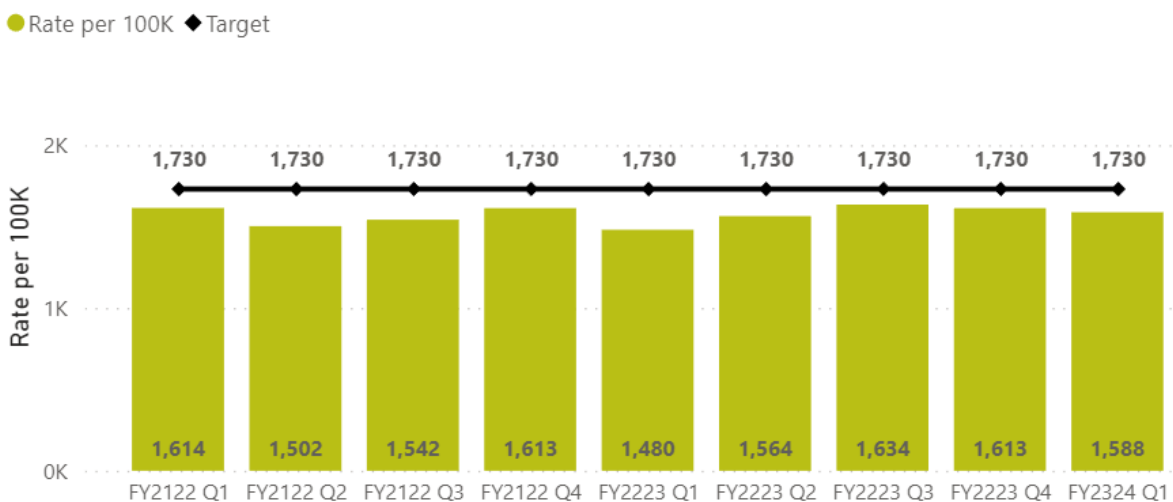
PI 59 Carers supported in the last 12 months ✖

July 2022 - June 2023

Actual: 1588

Target: 1730

While the target has not been met, 12,067 carers were supported over the last 12 months. This number breaks down to 9,561 Adult carers of adults and 2,506 Young Carers. We can be confident that the carers that we are reporting are receiving substantive support and we expect the numbers to increase over time. Of the 9561 adult carers supported; 819 received a Direct Payment, 8239 were offered Info & Advice and 503 no direct support (respite provided to carer for adult).



This PI is a local measure and no national benchmarking data is available.

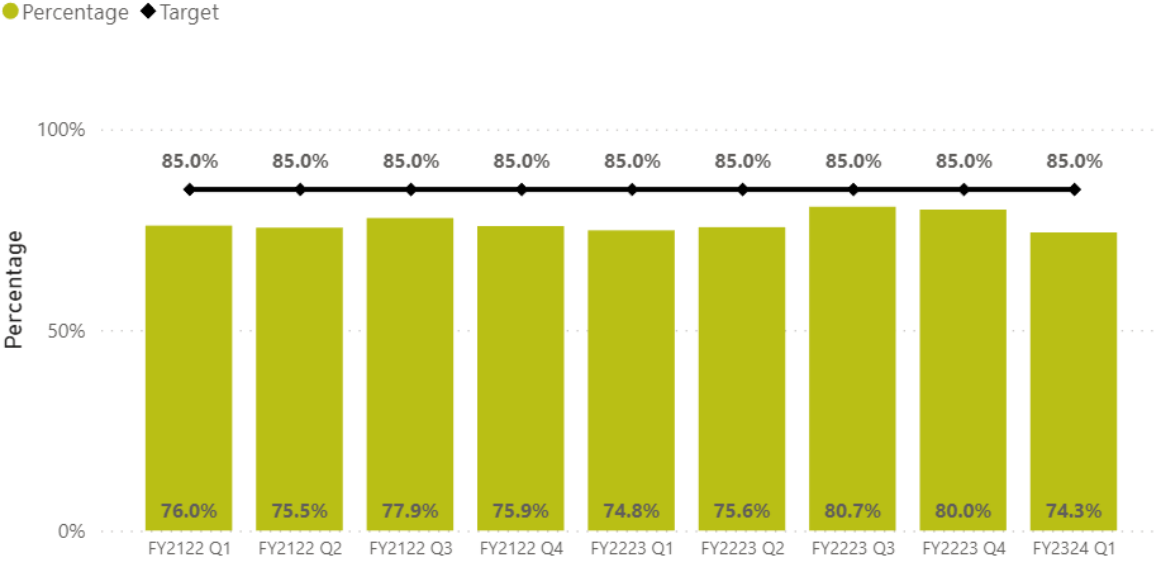
PI 121 Carers who have received a review of their needs ✖

July 2022 - June 2023

Actual: 74.3

Target: 85

This quarters outcome of 74.3% (604 out of 813 carers who required a personal budget review received one) is slightly lower than the previous quarter. The introduction of a New Lincolnshire Carers service has seen a number of improvements and one provider is now responsible for completing assessments and reviews. Close monitoring of performance will continue though it is expected that in subsequent quarters performance will begin to meet the expected levels. A remedial plan is in place should this not prove to be the case.



This PI is a local measure so benchmarking data is not available.

PI 31 Percentage of alcohol users that left specialist treatment successfully ✖

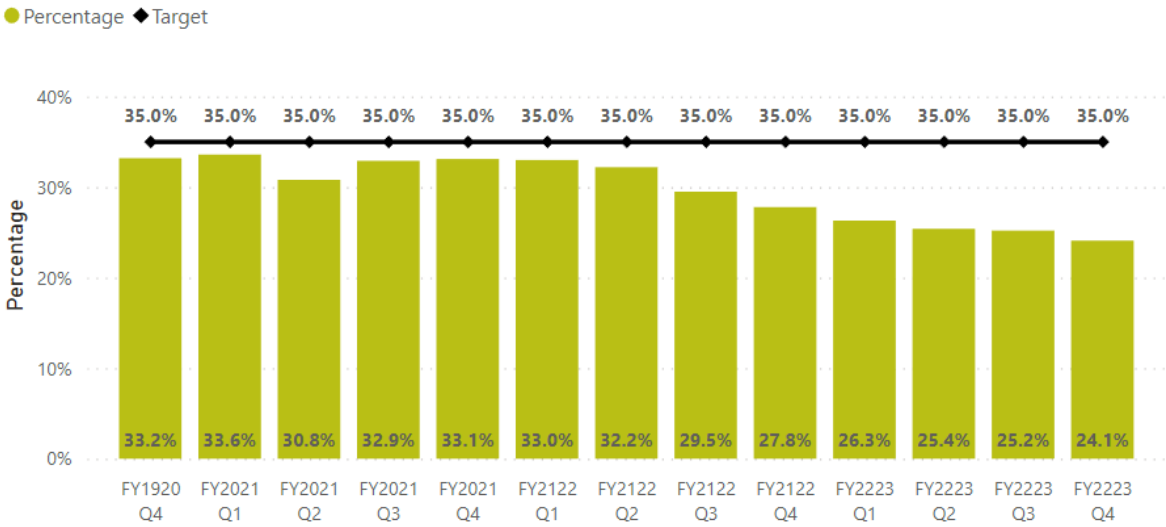
January 2023 – March 2023

Actual: 24.1

Target: 35

An Improvement Plan was implemented by the Contract Officer with the Provider on the 9th May 2023. The plan targets 4 key areas of improvement for this performance indicator. Focusing on referral pathways, internal audit of complex alcohol clients, service interventions, analysis of increased numbers of service users entering treatment and identifying alcohol specific workers within service. Timescales have been set in partnership with the provider and ongoing performance monitoring is taking place. The performance indicator continues to improve and has improved since Quarter 4 of the contract, which was 24.1%. Overall, the Treatment Provider performs well and continues to work in partnership

with the Contract Officer for this performance indicator. Regular improvement plan review meetings are taking place to discuss agreed actions and outcomes of the improvement plan to monitor progress.



PI 111 People supported to successfully quit smoking ✖

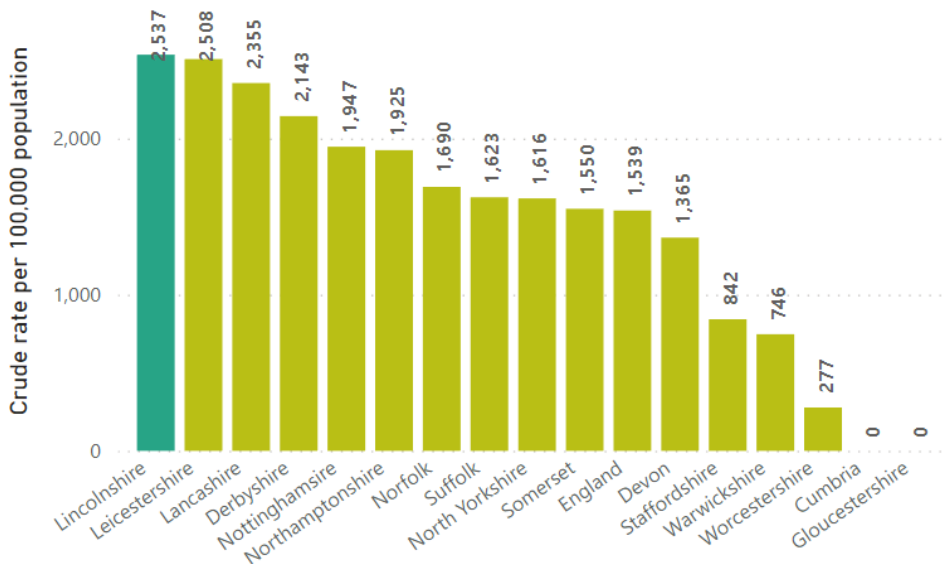
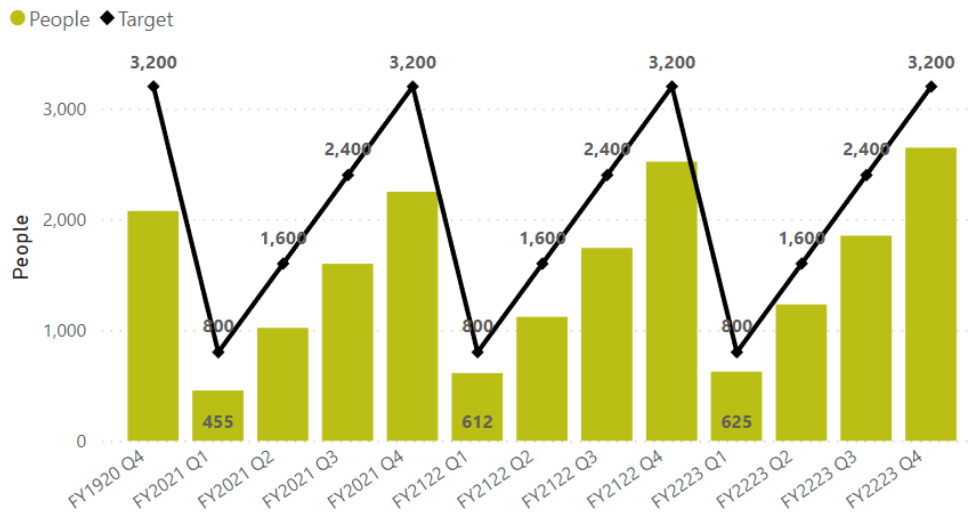
April 2022 – March 2023

Actual: 2648
Target: 3200

This data relates to Quarter 4 2022-23 (Jan to Mar 2023) due to a 12-week data lag for completion of service interventions. The quit rate for Quarter 4 is 62%, which is the highest this year. The annual 4 week quits for 2022-23 is 2,648 against a target of 3,200 resulting in an 83% achievement against this annual target. It is recognised that the annual target is ambitious; however, successful quit rates within Lincolnshire are above national benchmarks and the service is continuing to deliver well against this stretching target.

Recently, a new referral route and referral form has been established for patients being discharged from inpatient mental health support, which should improve the transition into community support for this cohort. Multiple engagement events have been attended to promote the service, and a joint social media plan was produced with tobacco control partners for No Smoking Day in March.

Regulated e-cigarettes have been introduced as part of a 6-month pilot program, and the service has written a report which demonstrates that quit rates are above the target of 50% and on par with the traditional Nicotine Replacement Therapy (NRT) option. Quit rate with patch and e-cigarette is comparable with that of medications that have been used in the past to support smoking cessation, and thus e-cigarettes offer an effective alternative quit aid. The service has submitted a request to include regulated e-cigarettes on the Lincolnshire Joint Formulary so the sub-contractors can offer this, resulting in an equitable service across the county.



Benchmarking period April 2021 – March 2022

Update regarding **PI 33 Percentage of people aged 40 to 74 offered and received an NHS health check 2023-24 target**. It is 55% but was incorrectly stated as 95% in Appendix A in 2022-23 Quarter 4 report.

2. Conclusion

The Adults and Community Wellbeing Scrutiny Committee is requested to consider and comment on the report.

3. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Caroline Jackson, who can be contacted on Caroline.Jackson@lincolnshire.gov.uk

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**Open Report on behalf of Glen Garrod,
Executive Director - Adult Care and Community Wellbeing**

Report to:	Adults and Community Wellbeing Scrutiny Committee
Date:	06 September 2023
Subject:	Acute Hospitals – Admission to Discharge Care Pathway and Winter Planning 2023/4

Summary:

This report updates on the Acute Hospitals – Admission to Discharge Care Pathway following the April 2023 Report and explores the current winter planning for 2023/4 across Health and Social Care.

Actions Required:

To note progress, outcomes and examine services being developed as part of winter planning 2023/4.

1. Background

A report was shared with the Adults and Community Wellbeing Scrutiny Committee on 6th April 2023 which set out the Pathways available to Lincolnshire residents to facilitate discharge from acute and community hospitals. These services built upon capacity in Pathway 1 thus offering Lincolnshire residents reablement, rehabilitation and recovery in their own homes post hospital discharge.

Since April, the Active Recovery Beds (ARB) (Appendix A), Pathway 1 Hospital Discharge Reablement Service and Pathway 1 Discharge to Assess have continued to thrive. As a result, these services will continue throughout the Winter and therefore the current focus of System partners is on collaborative Winter Planning, to ensure timely discharge and flow with a focus on Home First and independent living.

The winter planning has been led by the Integrated Care Board and focuses upon the Urgent and Emergency Care (UEC) Recovery Plan alongside admission avoidance and discharge and flow. Services for Winter 2023/24 include additional Active Recovery beds, continuation of the Hospital Discharge Reablement Service and a current recruitment campaign for three Team Managers to lead the Care Transfer Hub previously known as Transfer of Care Hub (renamed by NHSE). In addition, workflows such as the Integrated Therapy Service, Increase in Virtual Wards, extension of the Hospital Avoidance Response

Team (HART), continuation of funding to the Hospital Discharge Home Recovery Scheme (HDHRS) led by Age UK, the extension of the Community Connector Scheme and continuation of St Barnabas Community Care Nurse Specialists (CCNS) have been implemented. All of these schemes support Adult Social Care (ASC) to ensure timely discharge with a Home First approach, with transfers to long term Care Home settings reserved for those for whom home is no longer an appropriate setting to ensure identified outcomes are achieved.

2.Pathway Updates

Active Recovery Beds

At the Adults and Community Wellbeing Scrutiny Committee on the 6th April 2023, a request was made to return to the Committee in September to ensure the use of 40 beds was sufficient before the introduction of a further 20 beds (60 in total) between 1st January 2024 and 31st March 2024. Due to careful management of the flow in and out of ARB's the current level of 40 beds has been efficient and economic with empty beds at the end of each day averaging around 3. This has ensured availability overnight thus supporting admission avoidance.

Throughout June 2023, a procurement was undertaken to extend the ARB's, with four homes being awarded a contract for 10 beds each between 1st July 2023 and 31st March 2024 and a further two homes were awarded contracts for 10 beds each for the period 1st January 2024 to 31st March 2024. The first four homes awarded the contract were; Monson Care Home Lincoln, Skirbeck Care Home Boston, Appletrees Care Home Grantham and Meadows Park Louth. The second cohort of beds were awarded to; Foxby Hill Gainsborough and Chevington House Bourne. As demonstrated, the Care Homes are geographically placed across the County, enabling people to recover as near as possible to their own home.

Pathway 1 Hospital Discharge Reablement Service

This service provided by Lincolnshire Reablement Service continues to support discharge home directly from Emergency Departments (ED) thus preventing long waits in ED and potential to be admitted. Offering support for up to 48 hours, since December 2022, the service has supported 243 discharges. Over one third, 91 residents (37.5%) required no further services at the end of the 48 hours.

Pathway 1 Discharge to Assess

As per the Government documents; Hospital Discharge Policy and Operating Model (2020) and Hospital Discharge and Community Support Guidance (2022), the hospital social work teams continue to facilitate discharges 7 days a week by undertaking a proportionate needs assessment which is then reviewed and completed within their own home when actual needs are identified, alongside outcomes to be achieved. This practice ensures that assessments are completed at the right time, in the right place.

Care Transfer Hub

The Care Transfer Hub is a crucial tool in ensuring timely discharges. An integrated facility based within the ASC Departments at Lincoln County Hospital and Pilgrim Hospital Boston, the Hub Team consists of ASC, United Lincolnshire Hospitals Discharge Team, Lincolnshire Community Health Service, Lincolnshire Reablement Service, Age UK, Housing In-Reach Officer, Specialist Palliative Care Team and virtual access is also available to System Partners. The function of the Hub is to triage all patients identified as requiring a service to support discharge home or if necessary to another setting. Utilising a Trusted Assessor Model and a strengths-based approach, the team ensures the most appropriate service that promotes independence is provided within 48 hours.

A recent visit to Lincolnshire was undertaken by DHSC to witness the running of the Hubs and the information gained from that visit has been shared across the Country. Contact has now been received from Derby and Derbyshire, Leicester and Nottingham asking for meetings to share knowledge and skills already being utilised in the Lincolnshire Hubs.

Due to the success of the Hubs, the improvement in discharge and flow and the desire to expand the support the Hubs can offer, 3 Team Managers are to be appointed, funded by the Better Care Fund, to support discharge planning and leadership. The Team Managers will be recruited by ULHT but will be supervised by ASC ensuring an integrated approach to the service.

3. Winter Planning

As per previous years, the expectations and demand on services will be very challenging and with the additional impact due to industrial action by both Consultants and Junior Doctors, the importance of Winter Planning at an earlier stage has taken precedence over other duties.

On 28th July 2023 the Department of Health and Social Care (DHSC) announced a Market Sustainability and Innovation Fund (MSIF) of £600 million to boost social care and workforce capacity alongside a Market Sustainability and Improvement Fund which included funding for further Research. LCC ASC were awarded £5m. Working alongside LincA and NHS colleagues to ensure a whole system approach to winter planning and to put ASC on a firm footing for Winter, careful consideration has been given and continues to be given to Winter Planning by all System Partners thus a number of services are being scoped and considered to ensure the wellbeing of Lincolnshire residents, including those in Out of County Hospitals.

At the same time as the Market Sustainability Funding was announced, the DHSC also advised all Systems of the need to focus on 4 out of 10 identified High Impact Interventions; Same Day Emergency Care (SDEC), Frailty, Inpatient flow and length of stay, Community bed productivity and flow, Care Transfer Hubs, Intermediate Care Demand and Capacity, Virtual Wards, Urgent and Community Response, Single point of Access and Acute Respiratory Infection Hubs. At present any additional funding to meet these priorities is yet to be advised to the Integrated Care Board.

After consideration and moderation by all System Partners, Lincolnshire agreed to focus upon; Intermediate Care, Virtual Wards, Acute Respiratory Infection and Frailty. Acute Respiratory Infection has been selected as initial reports from Countries such as Australia who are currently in their winter months, has shown a significant rise in demand due to these conditions. In addition, the Regional Team working alongside KPMG have also requested 3 priority areas to be addressed: System Single Point of Access, Hospital Discharge Processes (timely discharge) and High Intensity Users (High Volume Service User). Of note, these three priority areas are aligned with the Lincolnshire Intermediate Care work.

Two of the identified priorities have already been identified as workstreams, with planning underway and funding in place to successfully navigate through the winter months such as:

Lincolnshire Intermediate Care (LIC)

In the early stages of development and led by Afsaneh Sabouri (Assistant Director ASC) as Senior Responsible Officer, LIC will be an integrated approach to service delivery for Lincolnshire residents. Currently two main workstreams are underway: Operational Delivery Group which is focusing upon: Agile Referral Allocation Layer (looking into seamless referral routes), Cultural and Behavioural Science (ensuring all partners have the same vision and team ethos leading to a strengths-based approach to personalised care), Digital Enablement (To step up digitally enabled referral routes), Integrated Demand Model (Incorporating population and health needs to underpin strategic resourcing planning) and Developing Operational Requirements for Future LIC Model (developing the future intermediate care model and commissioning). The second workstream is the LIC Finance Group which will oversee the commissioning and funding of LIC.

Virtual Wards: Virtual wards (also known as hospital at home) enables patients to get hospital-level care at home safely and in familiar surroundings which helps speed up their recovery whilst freeing up hospital beds for patients that need them most. Patients are reviewed daily by the clinical team and the 'ward round' may involve a home visit or take place through video technology. Many virtual wards use technology like apps and other medical devices enabling clinical staff to easily check in and monitor the person's recovery. ASC staff are available to support with advice and guidance on services in the community if any areas of concern are identified. ASC are also a stakeholder in the Virtual Ward task and finish group and Virtual Ward Strategic Delivery Group in developing the service moving forward. At present there are three virtual wards; Frailty, Cardiology and Respiratory Wards. Other areas such as Palliative Care are still in the planning stage.

In addition to the priority areas ASC has already implemented or extended service provision as part of winter planning:

Integrated Therapies

This integrated approach involves a collaborative approach of Occupational Therapy Services provided by LCC, LCHS, ULHT and Primary Care Networks who have employed their own Occupational Therapy Staff to work with their patients. Good practice example includes a resident who wished to be returned home before a formal moving and handling assessment could be completed. Thus, ULHT and LCC therapists discussed the case and the resident was able to return home and the LCC therapist visited to undertake the moving and handling assessment in the residents home. This facilitated a discharge home at an earlier point than if the assessment had been completed in an acute hospital setting. This collaborative working improved the quality of life for the resident and freed up an acute hospital bed.

HART

The Hospital Avoidance Response Team consists of both ASC and LCHS staff working together within ED or the Discharge Lounge to facilitate discharge using the response team provided by Age UK staff. In addition, the HART service can bridge gaps between the date the resident is ready to leave hospital and the date the Prime Provider is able to commence packages of care.

Hospital Discharge Home Recovery Scheme

Led by ASC and Age UK, this service provides a Health Grant to expedite discharge from Hospital to the residents home. For example, a Lincolnshire resident might not be able to return home due to their home needing a deep clean or a particular piece of equipment that is not provided by statutory services such as new bed and bedding but there are no personal funds available to purchase. Since August 2022, 143 residents have been supported through this scheme at a cost of £97,198 which saved an estimated 909 days in hospital. Minus the grant value, this has ensured a bed saving cost of £341,849.

Community Connector Scheme

The Community Connector scheme provided by Age UK and based with the ASC teams at Lincoln County Hospital and Pilgrim Hospital Boston offer advice and guidance to Lincolnshire Residents regarding benefits and other services available in the community. In addition, the Community Connectors complete the applications for the HDHRS fund as described above.

St Barnabas Community Care Nurse Specialist

This service is provided by two CCNS's, with one based at Lincoln County Hospital and the other at Pilgrim Hospital Boston. Their primary roles include working with Lincolnshire residents identified as being within the last 12 months of their life. They offer advice, guidance and support with advance planning. Often supporting residents and their families to have difficult conversations at what can be a very distressing time. In addition the CCNS support ASC to effectively challenge decisions relating to fast track funding thus ensuring the correct funding streams are applied. Although based at Lincoln County Hospital and Pilgrim Hospital Boston, the CCNS also offer advice and guidance to the ASC teams at Grantham Hospital and Peterborough City Hospital.

4. Conclusion

The Pathway 1 initiatives continue to deliver efficient and effective support for timely discharges that promote independent living or at least reduce the level of support required through packages of care.

Winter planning is well underway utilising Lincolnshire creative and innovative thinking alongside the requirements of the DHSE. This work will be ongoing and will develop over the coming months.

5. Consultation

a) Risks and Impact Analysis

N/A

6. Appendices

These are listed below and attached at the back of the report	
Appendix A	Active Recovery Beds Data (Provided by Commercial Team)

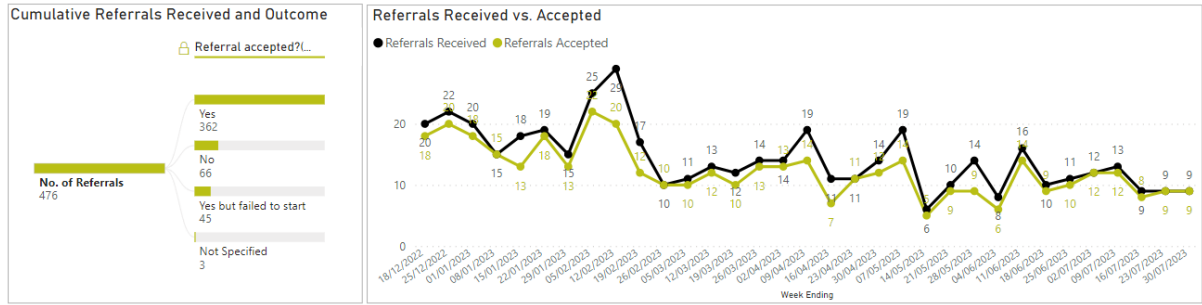
7. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Andrea Kingdom, Head of Service – Hospital Social Work Teams, Prison and Brokerage, who can be contacted on 01522 573109 or andrea.kingdom@lincolnshire.gov.uk.

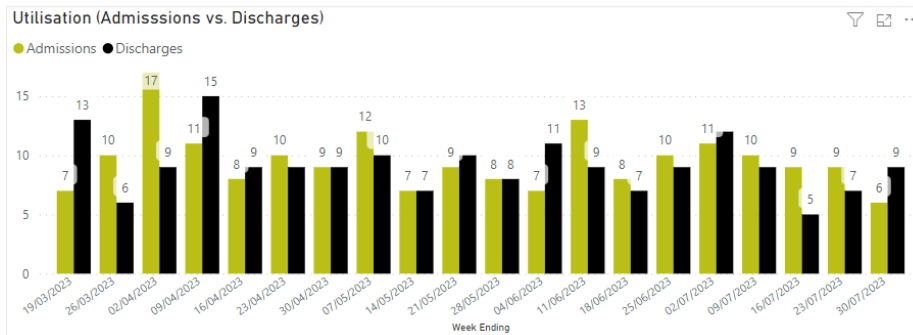
Active Recovery Beds Data (up to 30/07/2023)

Referral Activity

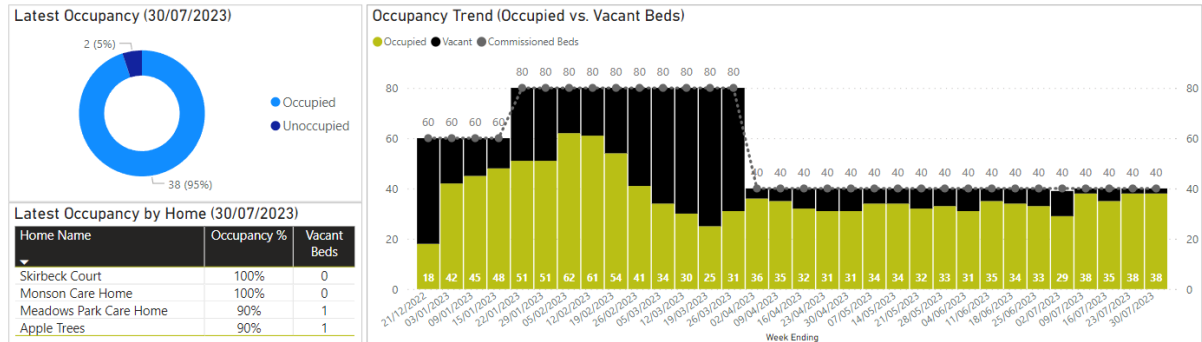


- 86% of referrals accepted to date (cumulative December 2022 to July 2023)

Utilisation (Admissions vs. Discharges)

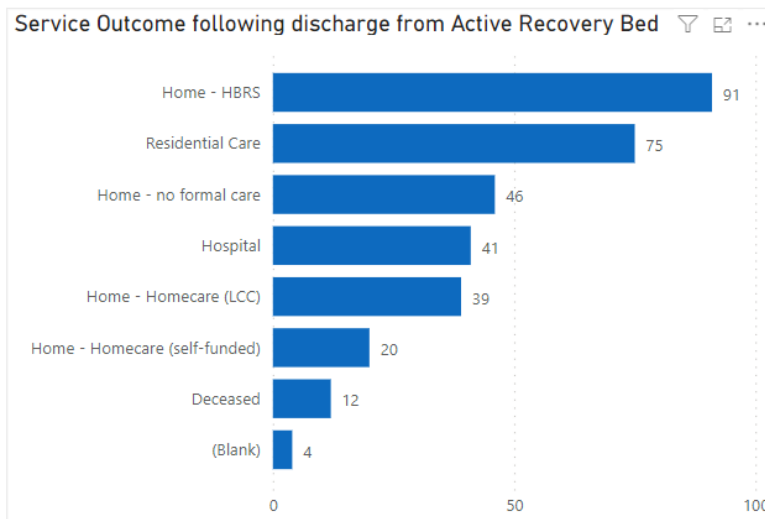


Occupancy Trends



Outcomes (cumulative view since contract started in December 2022)

- Average length of stay in Active Recover Bed – 21 nights.

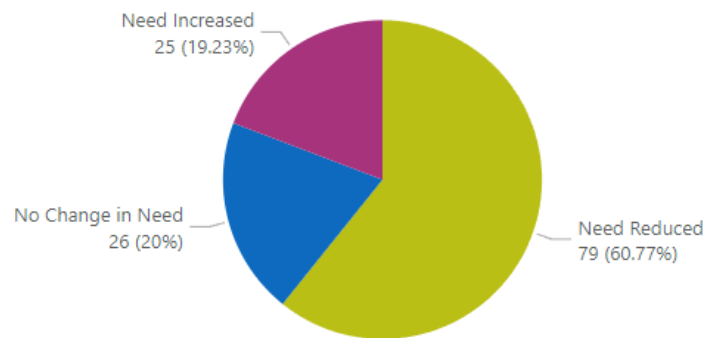


Of the individuals discharged from Active Recovery Beds (between December 2022 and July 2023):

- 13.8% were discharged home with no ongoing care;
- 39.8% were discharged home with LCC Home Care or Reablement;
- 22.9% were discharge with ongoing residential care;
- 12.5% were readmitted to hospital.

Home Care weekly care hours required were captured for each individual on admission to Active Recovery Bed and again on discharge, the following pie chart outlines the change in care need through utilisation of Active Recovery Beds, based on the 130 individuals that were discharged home with home care or home based reablement services:

Of those going Home with LCC funded Home Care or Reablement - The change in need following discharge from Active Recovery Bed



- Average weekly care need on admission to Active Recovery Bed: **14.52 hours**
- Average weekly care need on discharge from Active Recovery Bed: **10.84 hours**



**Open Report on behalf of Andrew Crookham,
Executive Director – Resources**

Report to:	Adults and Community Wellbeing Scrutiny Committee
Date:	6 September 2023
Subject:	Adults and Community Wellbeing Scrutiny Committee - Work Programme

Summary:

The Committee’s forward work programme is set out in this report. The report also includes the relevant extracts from latest version of the forward plan of key decisions due to be taken from 3 July 2023. The Committee is requested to consider whether it wishes to make any suggestions for items to be added to its work programme.

The Committee is also invited to note the decision by the Executive on 4 July 2023 on the Procurement of Substance Misuse Treatment Services. The Committee’s statement from 28 June 2023 was presented to the Executive.

Actions Requested:

- (1) To review the Committee's forward work programme, as set out in the report.
- (2) Following consideration by this Committee on 28 June 2023, to note that the Executive made a decision on Procurement of Substance Misuse Treatment Services on 4 July 2023.

1. Current and Planned Items

The Committee’s programme is set out below: -

6 September 2023 – 10.00 am			
<i>Item</i>		<i>Contributor(s)</i>	<i>Notes</i>
1	Lincolnshire Safeguarding Adults Board Update	Justin Hackney, Assistant Director of Specialist Services	This is the regular update report on the activities of the Safeguarding Adults Board.

6 September 2023 – 10.00 am			
<i>Item</i>	<i>Contributor(s)</i>	<i>Notes</i>	
2	Day Services Update	Justin Hackney, Assistant Director of Specialist Services	On 30 November 2022, the Committee requested a further update on this topic.
3	Admission to Discharge Care Pathway - Winter Planning for 2023-24	Afsaneh Sabouri, Assistant Director, Older Adult Services Andrea Kingdom, Head of Service, Hospitals and Special Projects, Adult Care and Community Wellbeing	To consider the arrangements for the winter of 2023-24, and to receive an update on active recovery beds.
4	Service Level Performance Reporting Against the Success Framework 2023-24 Quarter 1	Caroline Jackson, Head of Corporate Performance	This is the quarterly performance report.

18 October 2023 – 10.00 am			
<i>Item</i>	<i>Contributor(s)</i>	<i>Notes</i>	
1	Care Quality Commission Update	Contributor from the Care Quality Commission to be confirmed.	This is the annual update provided by the Care Quality Commission on its inspection and regulation of social care services in Lincolnshire
2	Adult Care and Community Wellbeing Budget Monitoring 2023-24	Pam Clipson, Head of Finance, Adult Care and Community Wellbeing	This is the regular budget monitoring report.

29 November 2023 – 10.00 am			
<i>Item</i>	<i>Contributor(s)</i>	<i>Notes</i>	
1	Introduction to the Lincolnshire Carers Service	Assistant Director, Assistant Director, Prevention & Early Intervention Public Health	To receive a presentation on support to unpaid family carers, including an introduction to the new support service provider.

29 November 2023 – 10.00 am		
<i>Item</i>	<i>Contributor(s)</i>	<i>Notes</i>
2	Recommissioning of the Lincolnshire Wellbeing Service Derek Ward, Director of Public Health Tony McGinty, Public Health Consultant	To consider proposals for re-commissioning of the wellbeing service, on which a decision is due to be made by the Executive on 5 December 2023
3	Service Level Performance Reporting Against the Success Framework 2023-24 Quarter 2 Caroline Jackson, Head of Corporate Performance	This is the quarterly performance report.

17 January 2024 – 10.00 am		
<i>Item</i>	<i>Contributor(s)</i>	<i>Notes</i>
1	Adult Care and Community Wellbeing Budget Proposals 2024-25 Pam Clipson, Head of Finance, Adult Care and Community Wellbeing	Each year the Committee considers and prepares a statement on the budget proposals for Adult Care and Community Wellbeing
2	Director of Public Health Annual Report 2023 Derek Ward, Director of Public Health	Each year the Director of Public Health is required to prepare a report on a health issue impacting on the people of Lincolnshire.

6 March 2024 – 10.00 am		
<i>Item</i>	<i>Contributor(s)</i>	<i>Notes</i>
1	Service Level Performance Reporting Against the Success Framework 2023-24 Quarter 3 Caroline Jackson, Head of Corporate Performance	This is the quarterly performance report.
2	<i>Further Items to be Programmed</i>	
3		

24 April 2024 – 10.00 am		
<i>Item</i>	<i>Contributor(s)</i>	<i>Notes</i>
1	<i>Items to be Programmed</i>	
2		
3		

The forward plan of planned key decisions on items within the remit of the Committee is attached as Appendix A.

2. Previously Considered Topics

Attached at Appendix B is a table of items previously considered by the Committee since the beginning of the Council’s term in May 2021.

3. Conclusion

The Committee is invited to consider its work programme.

4. Appendices

These are listed below and attached at the end of the report.

Appendix A	Forward Plan of Key Decisions within the Remit of the Adults and Community Wellbeing Scrutiny Committee from 3 July 2023
Appendix B	Adults and Community Wellbeing Scrutiny Committee - Schedule of Previously Considered Topics

5. Background Papers - No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Simon Evans, Health Scrutiny Officer, who can be contacted on 07717 868930 or by e-mail at Simon.Evans@lincolnshire.gov.uk

**FORWARD PLAN OF KEY DECISIONS WITHIN THE REMIT
OF THE ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE**

From 1 August 2023

MATTER FOR DECISION	DATE OF DECISION	DECISION MAKER	PEOPLE/GROUPS CONSULTED PRIOR TO DECISION	OFFICERS FROM WHOM FURTHER INFORMATION CAN BE OBTAINED AND REPRESENTATIONS MADE	DIVISIONS AFFECTED
Wellbeing Service Recommissioning	5 Dec 2023	Executive	Adults and Community Wellbeing Scrutiny Committee	Programme Manager Sean.Johnson@lincolnshire.gov.uk	All

APPENDIX B

ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE SCHEDULE OF PREVIOUSLY CONSIDERED TOPICS

	Previous Item
D	Previous Pre-Decision Scrutiny Item
	Future Item
D	Future Pre-Decision Scrutiny Item

	2021					2022					2023					2024										
	29 Jun	14 Jul	8 Sept	20 Oct	1 Dec	12 Jan	23 Feb	6 Apr	25 May	6 Jul	7 Sept	28 Sept	19 Oct	30 Nov	11 Jan	22 Feb	5 Apr	24 May	28 Jun	6 Sept	18 Oct	29 Nov	17 Jan	6 Mar	24 Apr	
<i>Meeting Length – Hours : Minutes</i>	1:47	2:15	3:30	2:50	3:13	2:59	3:55	3:01	3:00	1:58	2:51	2:26	1:39	2:36	2:59	3:08	1:50	2:57	2:47							
Active Recovery Beds														D			D									
Acute Hospitals – Admission to Discharge Pathway																										
Adult Frailty and Long Term Conditions - Overview																										
Adult Mental Health Services - Overview																										
Adult Social Care Reform – Government Plans																										
Ancaster Day Centre Refurbishment																		D								
Better Care Fund																										
Budget Reports						D									D									D		
Carers Support Service							D																			
Care Quality Commission Update																										
Community Equipment Service								D																		
Community Supported Living																	D	D								
Day Services			D																							
Digital Initiatives Supporting Services																										
Director of Public Health Role / Annual Report																										
Disabled Facilities Grants																										
Extra Care Housing - Boston																										
Extra Care Housing - Lincoln																										
Extra Care Housing - Welton					D																					
Fair Cost of Care / Charging for Social Care																										
Grange Farm, Market Rasen Working Age Adult Accommodation																										
Greater Lincolnshire Public Health																										
'Gross' v 'Net' – Ombudsman Report																										
Improvement and Development Programme																										
Integrated Care Systems																										
Integration of Health and Social Care																										
Introduction to Services																										
Learning Disability – Section 75 Agreement																										
Market Sustainability, Fair Cost of Care																										
Obesity																										
Occupational Therapy																										
Ombudsman Reports																										
Performance Reports																										
Prevention Services - Overview																										
Residential and Nursing Care Usual Costs																										
Respite Care Ombudsman Report																										
Safeguarding Adults Board																										

	2021					2022					2023					2024											
	29 Jun	14 Jul	8 Sept	20 Oct	1 Dec	12 Jan	23 Feb	6 Apr	25 May	6 Jul	7 Sept	28 Sept	19 Oct	30 Nov	11 Jan	22 Feb	5 Apr	24 May	28 Jun	6 Sept	18 Oct	29 Nov	17 Jan	6 Mar	24 Apr		
<i>Meeting Length – Hours : Minutes</i>	1:47	2:15	3:30	2:50	3:13	2:59	3:55	3:01	3:00	1:58	2:51	2:26	1:39	2:36	2:59	3:08	1:50	2:57	2:47								
Safeguarding Services																											
Sensory Services			D																								
Sexual Health Services												D					D										
Social Connections																											
Specialist Adults Accommodation – Market Rasen																		D									
Specialist Adult Services - Overview																											
Strategic Market Support Services			D																								
Substance Misuse Treatment Services												D				D			D								
Wellbeing Service																							D				
Workforce – Capacity and Development																											

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