

Item 6a

Report of the Executive Director Core Services and the Executive Director Place Health & Adult Social Care to the Overview & Scrutiny Committee on 18th July 2023

Adult Social Care Quarter 4 Performance Report 2022/23

1.0 Purpose of Report

- 1.1 The purpose of this report is to provide the Overview & Scrutiny Committee (OSC) with a summary of Adult Social Care performance for Quarter 4 in 2022/23, including quality assurance work and programme activity.
- 1.2 This document should be read in conjunction with Item 6b (attached), Understanding & Challenging Adult Social Care Performance, which explains the context for each of the performance indicators as well as defining what good practice looks like.

2.0 Introduction & Performance Summary

- 2.1 Adult Social Care is the provision of all forms of personal and practical support to help those who are older or living with a disability or physical or mental illness live independently and stay safe and well. This report has a summary analysis of performance across key selected areas. These areas have been selected because they represent key milestones and elements of many people's journey through adult social care. These are a mixture of national measures from the Adult Social Care Outcomes Framework (ASCOF) and areas considered to be important locally.
- 2.2 Graphs and tables visually show how some of the measures being tracked have changed over the past 12 months. In addition to this we have also included analysis of indicators which are critical to the success of adult social care.
- 2.3 The Critical Success Factor (CSF) relating to safeguarding concerns has been achieved. Friends, neighbours, relatives and family members have raised 131 concerns in 2022/23 (against a target of 70).
- 2.4 The CSF relating to reablement episodes is rated red. A total of 862 episodes were recorded against a target of 1,100. This stretch target focuses on helping the hospital and community meet demand pressures. It is recommended that, for 2023/24, this CSF is replaced with the measure relating to the proportion of people completing reablement with no long-term needs (target 86%) as this focuses more effectively on the outcomes achieved. A measure monitoring the number of people accessing reablement will continue to be monitored via a performance dashboard being developed as volume of activity was the key element of the current measure.
- 2.5 The following is a summary of the performance RAG ratings:
 - Green – 8 areas
 - Amber – 3 areas
 - Red – 1 area

Green – Highlights

- 2.6 In 2022/23, 327 permanent older persons admissions to residential care were made compared to 420 in 2021/22. The homecare hours have also increased by 1,896 per week when compared to the same period last year.
- 2.7 This year 2,145 carers have received an assessment which is well above the 1,500 target. The service knows that some of these are self-assessments and changes have been made to the process for carers one off payments to ensure people have a good conversation about their caring role and its impact. Further focus on support for Carers is planned this year picking up the 8 priorities in the Carers Strategy.
- 2.8 The percentage of people with a learning disability in settled accommodation is 87.4% (87% target) and those in paid employment is 5.7% (5% target).

Amber – Highlights

- 2.9 Assessments within 28 days stands at 80% (target 83%). Staffing challenges continue to be acute in adult social care teams (in common with other areas across the country).
- 2.10 Permanent admissions to residential care for 18-64 is 27 for the year which is 2 above the target of 25. The proportion of clients completing reablement with no long-term needs has fallen to 81.5% against our own target of 86%, partly explained by the wider offer being made to all people now, so all people go through the reablement pathway

Red Highlights

- 2.11 This relates to the critical success factor around people active reablement episodes. This target is new and was set without data on the previous periods. A new measure has been agreed for 23/24 focusing on the outcomes of reablement support.

3.0 Performance

Critical Success Factors

- 3.1 The table below shows that the Critical Success Factor (CSF) relating to safeguarding concerns has been achieved. Friends, Neighbours, relatives, and carers have raised 131 concerns this year.

Indicator Code	CSF - Indicator Description	2021/22 Outturn	Target 2022/23	Year to Date (Q4)	RAG DoT
HB02	No of Safeguarding Concerns Received by (Friend/Neighbour/Relative and Unpaid Carer/Self)	64	70	131	↓
HB18	Number of active reablement episodes in the quarter	1161	1100	862	↑

New Contacts

- 3.2 The number of new contacts has increased by 4% since Q3 and increased by 6% since the same period last year. The service is developing measures to better understand the outcomes of these contacts.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
3271	3261	3395	3306	3451	180	↑	n/a

Outcome – Further Action Required

- 3.3 Contacts requiring further action has risen 12% since Q3. An increase of 1% can be seen in comparison to the same period last year.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
1993	2014	2066	1788	2005	12	↑	n/a

Assessments Completed within 28 Days or Less

- 3.4 80.3% of assessments were completed within 28 days in Q4, this is 4.7% less than Q4 of last year. Number of assessments completed within 28 days has increased since Q3 (by 126) but as a proportion of total assessments, the assessments completed within 28 days has reduced.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
669	486	528	475	601	-68	↓	83.00%
85.00%	76.30%	76.10%	81.30%	80.30%			

Care Packages Completed within 28 Days or Less

- 3.5 The proportion of care packages completed within 28 days has increased by 9.5% compared to the equivalent period last year, but has decreased by 1.8% when compared to Q3.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
238	224	209	207	241	3	↓	n/a
76.00%	81.20%	83.90%	87.30%	85.50%			

Clients in Nursing (Total)

- 3.6 The number of people accessing a nursing placement has fallen by 18 people (24%) compared to the equivalent quarter in 2021/22 and follows the established trend of decreasing numbers, taking a home first approach, although has maintained the same number from Q3.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
75	72	62	57	57	-18	➡	n/a

Permanent Admissions to Residential & Nursing Care – People Aged 18-64 (ASCOF)

- 3.7 The number of 18-64 adult admitted to permanent residential and nursing care has decreased by 3 when compared to the equivalent period last year and has remained stable since the previous quarter.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
9	9	6	6	6	-3	➡	25

Clients in Residential (Total)

- 3.8 The number of people in residential care has remained constant when compared to the same period last year, as well as compared to Q3 (increasing by 1 and 2 clients respectively).

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
924	907	938	923	925	1	⬇	n/a

Permanent Admissions to Residential and Nursing Care – People Aged 65+ (ASCOF)

- 3.9 Permanent admissions for older people reduced by 30% when compared to the equivalent period last year and reduced by 13% compared to Q3.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
115	72	81	93	81	-34	⬆	380

Clients with a Community Service (Total)

- 3.10 The number of clients with a community service has increased by 4% since Q4 last year and by 5% compared to Q3 2022/23.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
1649	1665	1678	1638	1714	65	↓	n/a

Home Care (Hours) including Spot Purchase/Other

- 3.11 The number of weekly homecare hours continues to increase. This is up by 1896 hours on the same period last year and has increased 10% compared to Q3.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
10909	11416	11993	11637	12806	1896	↑	n/a

Number of Carers Receiving Services Provided as an Outcome of an Assessment or Review by the Council

- 3.12 The number of carers receiving services has increased by 68 compared to the same period last year, and also increased by 18% compared to Q3.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
1313	658	905	1167	1381	68	↑	800

Number of Carers Receiving an Assessment

- 3.13 The number of carers receiving an assessment continues to increase and is 43 more than the same period last year and has increased by 33% from Q3.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
2102	595	1127	1609	2145	43	↑	1500

Review Completed on Clients in Receipt of Long-Term Support for 12 Months or More

- 3.14 The % of reviews completed is 3.9% lower than it was in Q4 2021/22 and is 2.1% lower than in the previous quarter.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
81.3%	79.8%	78.8%	79.5%	77.4%	-3.9%	↓	86.00%

Percentage of Clients with Learning Disabilities who are in 'Settled Accommodation' (ASCOF 1g)

- 3.15 Performance has increased slightly compared to the equivalent period in 2021/22. There is little variance in performance over the last 12 months. The target for the year is being achieved.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
87.0%	87.3%	87.3%	87.0%	87.4%	0.4%	↑	87.0%

Percentage of Clients with Learning Disabilities who are in 'Paid Employment' (ASCOF 1e)

- 3.16 Performance has increased by 1.3% compared to the same period last year, and has increased by 1.4% when compared with the previous quarter. The target is currently being achieved.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
4.4%	4.0%	4.3%	4.3%	5.7%	1.3%	↑	5.0%

Number of Individuals (Referrals) to the Reablement Service

- 3.17 The number of referrals to the service has decreased by 25 when compared to the same period last year and by 25 compared to the previous quarter. The target is currently being achieved.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
415	532	547	415	390	-25	↓	1400

Number of Distinct Individuals with an Active Reablement Service During Period – Critical Success Factor

- 3.18 There has been an increase of 68 people with an active reablement service compared to the same period last year, and an increase of 11% compared to the previous quarter.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
210	215	240	250	278	68	↑	1100

Proportion of Clients Completing Reablement Episodes with No Long Term Need (ASCOF 2D)

- 3.19 There has been an 8% decrease in clients completing reablement with no long term needs compared to Q4 in 2021/22. There has been a decrease of 11% compared to Q3.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
89.4%	87.2%	79.4%	92.3%	81.5%	-8.0%	↓	86.0%

Deprivation of Liberty (DoLS) Number of Referrals

- 3.20 The number of referrals in Q4 increased by 67 on the same period last year and increased by 26 (9%) when compared to the previous quarter.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
240	231	230	281	307	67	↓	n/a

Safeguarding Concern (Stages 1 & 2) – Section 42 Enquiry Decision Within 72 Hours

- 3.21 Timeliness of safeguarding S42 concerns has increased by 7.2% compared to the same period last year and has stayed fairly consistent when compared to the previous quarter. The target is currently being met.

Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Difference Same Period Last Year	Direction of Travel	2022/23 Target
90.4%	95.3%	96.7%	97.9%	97.7%	7.2%	→	92.0%

4.0 Quality Assurance

- 4.1 During Quarter 4 resources from the team were deployed on a mixture of assurance, service improvement and business as usual activity. The key activities are as follows:
- Care Quality Commission (CQC) Inspection readiness
 - Carers One off Payment Review
 - Tri X –Procedures Online
 - Health and Safety Audit
 - Co-production – Local Account and Short breaks
 - CQC Ratings Report
 - Safeguarding External Review.

Adult Social Care Quality Commission Inspection Readiness

- 4.2 During Q3, work has gathered pace on our own in-house self-assessment for Adult Social Care. This is based on the CQC framework and the evidence they are likely to be interested in using to assess quality and performance. In late March a session was held with managers to share interim findings from the self-assessment. Key areas for improvement have been identified for both Adult Social Care (ASC) and Adult Joint Commissioning (AJC). For ASC these include caseload management, prioritisation of cases, high risk cases and Multi-Agency Risk Association Co-ordination (MARAC) amongst others. For AJC these include evidence of feedback from the public, families advocates and key partners. Key evidence gaps remain, and it would have been better if some managers had engaged with this more proactively. The Quality Assurance & Service Improvement team (QASI) have had to start to make direct evidence requests to staff working in specific teams to try and resolve these gaps. A full report outlining findings will be shared with the Senior Management Team and Cabinet in the Q1 of 2023/24.
- 4.3 The QASI have also recruited a current CQC Inspector to interview staff across the organisation using the draft self-assessment findings to shape lines of enquiry. All managers from Service Manager to the Director of Adult Social Services (DASS) have now either been interviewed or

have a date scheduled in the coming weeks. Themes are emerging around engagement with people and partners and our use of data and intelligence. Interviews are being set up with Team Managers and Advanced Practitioners for quarter 1. Staff focus groups will also be undertaken. This is designed to inform our self-assessment but also ensure staff are more confident talking to external inspectors about the quality of their work.

- 4.4 The QASI have also developed a number of documents to help with readiness. These include a roles and responsibilities document, a list of adult social care bases, best practice evidence examples and a welcome pack.

Provider Services – Inspection Readiness

- 4.5 The Registered Managers and Quality Assurance Officer have undertaken a self-assessment of their readiness for CQC inspection and presented the findings to the Health and Care Senior Management Team. A number of areas for improvement have been agreed and work on an audit focussed on outcomes for the reablement service has started.
- 4.6 Work has continued with the Service Managers to develop an updated evidence framework linked to the new CQC framework. A roles and responsibilities document for CQC inspection is also being finalised.

Carers One Off Payment Review

- 4.7 In January 2023 changes to the process for carers one off payment were published. The route to a carers one off payment is now through a single carers assessment carried out by a practitioner from adult social care. A new process has been developed which has included consultation with team managers and the ASC Senior Leadership Team. The process has been shared with the Carers Forum, the Carers Service and the Carers Strategy Steering Group. The Council's website has also been updated to reflect the changes. Since the process went live on the 1st of April around 80 new applications have been received. This suggests that the communication about the new process has been effective (approximately 35 payments are ordinarily processed per month).

Procedures Online (Tri X)

- 4.8 As part of digitising our procedures, some gaps were identified, one of which was lone working. The lone working approach reflected pre-covid conditions, where people would be attending and leaving a fixed place of work where their movements could be written on a display board and it would be visible if individuals had not returned, were missing etc. That solution is no longer viable and so an options paper was presented to the Senior Leadership Team (SLT) and it was agreed to pilot a GPS tracker system that links to an external emergency centre. The pilot will run for an initial six weeks, with devices distributed among a wide variety of teams and roles and will report at the end of that six-week period.
- 4.9 The overall digitising of procedures is nearing a stage of completion with many procedural documents complete. The site is live and has been accessible since the end of last year. There is a local resources section which is currently being populated with the detailed procedures that are relevant only in the context of Barnsley. Remaining local procedures are currently being progressed by operational owners who are completing them using their in-depth knowledge before they are signed off by strategic owners (this is a new change implemented to bring documents that were getting produced 'off to one side' much closer to the operational and strategic reality of the day-to-day work). The deadline being worked to is 1st of July 2023 for this phase to be completed. There is a parallel piece of work going on with our provider services,

with similar solutions and process, however there are some slightly different options available to those services and we are due to meet to discuss which would be the best fit.

Health and Safety Audit

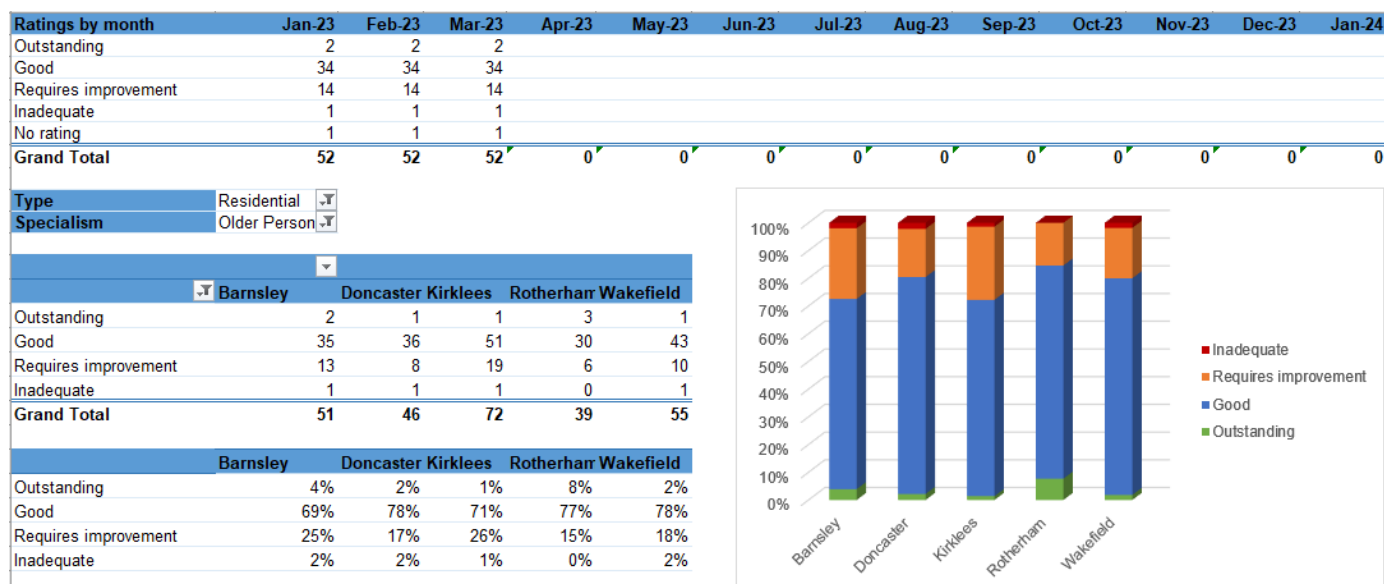
4.10 Adult Social Care are currently undertaking the self-assessment phase of the corporate health and safety audit. The work completed so far has identified the health and safety requirements pertinent to the department. The associated guidance for the areas has been reviewed and the areas have been draft scored against. There was a meeting to refine these and sign them off. These scores then inform an overarching document, populate a plan and are corporately assessed. A small number of gaps have been identified and the approach is to address them immediately where possible. The gaps have tended to be administrative rather than presenting any risk of immediate harm (the need for a nominated Health and Safety representative for example).

Co-production - Local Account / Short breaks Offer

4.11 An emergent theme from our self-assessment and wider quality assurance work has been the need to engage more deeply with people with lived experience. In March 2023 discussions were held with a group of local people around co-producing next year’s local account and a specification for carer breaks. As part of this, findings from the carers audit and last year’s local account were shared with people. Everyone in attendance expressed interest in helping to co-produce these products and work will take place over the next 6 months to develop these together. Embedding user engagement and getting feedback is a key part of plans for 23/24.

CQC Ratings Report

4.12 One of the gaps identified as part of the CQC Self-Assessment related to our use of CQC ratings and providers leaving the market to manage our responsibilities around quality and shaping the market. The QASI have discussed with the Business Improvement & Intelligence Team (BIIT) the possibility of using CQC published data to set up an automated report. BIIT do not currently have the capacity to do this. As an interim measure the QASI have set up a series of graphs around key areas, which can be updated on a monthly basis by dropping CQC published data into the Excel sheets as shown in the chart below. This enables key trends and patterns to be identified and comparisons made with our statistical neighbours. This is helping with other measures being taken to monitor Providers supporting Barnsley residents, undertaken within Commissioning.



Safeguarding External Consultancy – Oversight of Third-Party Led Enquires

- 4.13 In late November 2022 the Service Manager worked with the Safeguarding Board Manager (at the request of the Service Director) to submit a bid for external funding to the Local Government Associations Partners in Change Programme. Just before Christmas we were notified that this bid was successful and a consultant has been chosen. To enable cases to be selected the QASI reviewed 184 safeguarding enquiries to understand who had led the enquiry and what it was about. Questions to be explored were developed and 11 cases selected based on who led the enquiry and how significant the concerns were. The consultant has shared her findings with senior managers from ASC, AJC and the police. Managers are meeting to agree actions in response to these and the findings will be shared with multi agency boards. The findings found deficiencies in the form fields (data capture), feedback to colleagues, risks of organisational abuse and the effective use of resources.

5.0 Principal Social Worker (PSW) and Practice Development

- 5.1 Q4 continued with the previous work started to support staff recruitment, retention and succession planning. The development of the Workforce Strategy continues and will be completed from the ASC by the end of Q1 2023. The Skill mix of staff is nearly complete which gives us an insight to our workforce and the pressures of caseloads and vacancies. This gives us an indication of the experience of the workforce and an opportunity to develop our own standard for expected caseloads. It also provides the insight in determining how we move forward in understanding the skills mix and pressures over the next 3-5 years.
- 5.2 The PSW from both Children's Social Care & ASC continue to meet regularly and are developing a good working relationship. The ASC PSW has been involved with the CSC Signs of Safety Steering Group (strengths-based family working) which also includes the Service Manager for Mental Health and Preparation for Adulthood.
- 5.3 Q4 has built on the developments of Family Group Conferencing (taking a multi-agency approach to working with the extended family to address a range of support needs). The pilot has commenced and is developing. We are now trying to identify cases to showcase, to enable us to identify if the cohort we have piloted is the right pilot or if we need to look at other pilot groups.
- 5.4 The Local Government Association (LGA) Health Check survey was completed at the end of Q3 and the results received during Q4 were promising and show an improvement on the finding of last year. Continuous Professional Development still shows as an area for improvement, however, this will be developed in the Career Pathway Framework that is being developed. Q3/4 Barnsley took part in the Assessed & Supported Year in Employment (ASYE) Assurance, by Skills for Care. The ASYE is a 12-month, employer led and employment-based programme of support and assessment for newly qualified social workers (NQSWs) We are working on the action plan to develop the creation of a second-year supportive framework of a buddy system and caseload framework. We currently have 6 enrolled on the programme and a few who have recently completed the programme.
- 5.5 The directorate currently has 110 vacancies up from 107 in Q3. At the end of Q4, the 110 vacancies these comprised:

15 Social Worker Teams posts:

Advanced Social Worker	2
Assistant Social Care Prac (Transitory)	4
Assistant Social Care Practitioner	2
Social Worker	4
Team Manager	1
Exp Social Worker/Health Practitioner	1
Experienced Social Worker	1

The remaining 95 vacancies are within the Independent Living at Home Service, which includes a range of services and roles (75); Adult and Wellbeing (19); and Business Improvement, HR & Communications (1).

5.6 The Principle Social Worker continues to work with the teams as well as representing Barnsley regionally and nationally at the Principle Social Workers networks and co-chairing the Yorkshire and Humber PSW regional network. This has given further national exposure to the issues relating to social work.

6.0 Better Lives Programme

6.1 The council knows that people want to remain at home surrounded by the things and people they love, in neighbourhoods that they are familiar with, and with people that care about them for as long as possible. To support this, the service knows that it needs to think differently about ASC. The service also knows that there are increased needs because of the pandemic, that people are living longer and that this will bring additional pressures on the service. To respond to this, changes needed to be made in a number of areas.

6.2 The workstreams the programme has focussed on for 2022/23 are:-

- Prevention & Early Intervention – new front door approach
- Workforce Development
- Health & Social Care Academy (to be renamed the Proud to Care Hub)
- Market Shaping (commissioned care and support services people use)
- Digital

6.3 All projects within the workstreams are progressing as expected and are RAG rated Green, with the exception of the implementation of the Provider Assessment & Market Management System (PAMMS - a regional approach to recording Provider audits and inspections) within the Market Shaping workstream, which is rated as Amber.

6.4 Digital is a new area of the programme and a new Board has been established to monitor progress of digital projects. This is a key part of the White Paper and Funding Reforms and will be an important area for Barnsley to develop. Pilot projects around the use of GPS trackers to people with Dementia have started, as well as devices to monitor people at risk of falls.

7.0 Invited Witnesses

7.1 The following witnesses have been invited to today's meeting to answer questions from the committee:

- Julie Chapman, Service Director, Adult Social Care & Health, Barnsley Council
- Andrew Osborn, Interim Service Director, Commissioning & Integration, Barnsley Council
- Wendy Lowder, Executive Director, Place Health & Adult Social Care, Barnsley Council
- Cllr Jo Newing, Cabinet Spokesperson, Place Health & Adult Social Care, Barnsley Council

8.0 Possible Areas for Investigation

8.1 Members may wish to ask questions around the following areas:

- What area of performance are you most proud of and why?
- What area of performance are you most concerned about and why? What is being done to address the challenges?
- When do you expect to complete the actions identified as a result of the findings of the safeguarding consultant?
- How inspection-ready are Adult Social Care Services given the new powers of the Care Quality Commission (CQC)?
- What mechanisms are in place to ensure that quality is permanently embedded within service delivery?
- Can you give recent, tangible examples of how those on the front line and those with lived experience are involved in shaping service delivery?
- How confident are you that people approaching adult social services for the first time find accessible, timely and helpful information and advice? What evidence do you have to support this?
- How does performance in Barnsley compare with neighbouring areas and what is being done to learn from and share good practice?
- Can you give examples of where good practice in one area has been used to positively influence performance in other areas?
- Given the pressures on the care market, how confident are you in the effectiveness and sustainability of services in Barnsley?
- What preventative services are in place locally to support adults with their physical and mental health such as preventative falls services, community equipment, services to prevent social isolation and loneliness?
- How are local organisations working together to ensure the effective reablement of adults and what does quality look like? Is this being achieved?

- How can technology support Adult Social Care to be more efficient and effective? What are the opportunities and what are the challenges?
- What is being put in place to address staffing challenges?
- What are the challenges associated with collecting, analysing and presenting robust and timely data? What more needs to be done?
- Does the local authority/ICB have a plan in place to deal with the impact of any future catastrophic pandemics on the elderly?
- What can Elected Members do to best support this area of work?

9.0 Background Papers

- Item 6b (attached) – Understanding & Challenging Adult Social Care
- Barnsley Council Adult Social Care Local Account:-
<https://www.barnsley.gov.uk/services/adult-social-care/adult-social-care-local-account/>

10.0 Glossary

AJC	Adult Joint Commissioning
ASC	Adult Social Care
ASCOF	Adult Social Care Outcomes Framework
ASYE	Assessed & Supported Year in Employment
BIIT	Business Improvement & Intelligence
CQC	Care Quality Commission
CPD	Continuous Professional Development
CSF	Critical Success Factor
DASS	Director of Adult Social Services
DoLS	Deprivation of Liberty Safeguards
DoT	Direction of Travel
HR	Human Resources
LGA	Local Government Association
MARAC	Multi-Agency Risk Association Co-ordination
OSC	Overview & Scrutiny Committee
PAMMS	Provider Assessment and Market Management System
QASI	Quality Assurance & Service Improvement
RAG	Red, Amber, Green
SLT	Senior Leadership Team
SMT	Senior Management Team

8.0 Officer Contact

Jane Murphy/Anna Marshall, Scrutiny Officers
Scrutiny@barnsley.go.uk

28th June 2023