

INTEGRATED CARE AND WELLBEING SCRUTINY PANEL

Day: Thursday
Date: 14 June 2018
Time: 6.00 pm
Place: Lesser Hall 2 - Dukinfield Town Hall

Item No.	AGENDA	Page No
1.	APOLOGIES FOR ABSENCE	
2.	MINUTES To approve as a correct record, the Minutes of the proceedings of the Integrated Care and Wellbeing Scrutiny Panel held on 15 March 2018.	1 - 4
3.	EFFECTIVENESS OF SCRUTINY The Panel to receive a paper and self-assessment of scrutiny processes in Tameside, which follows a national inquiry into the Effectiveness of Local Authority Overview and Scrutiny Committees.	
4.	ENGAGEMENT APPROACH Simon Brunet, Policy Manager, to meet the Panel to discuss approach, opportunities and the role of scrutiny within wider engagement and consultation activity.	
5.	OFSTED IMPROVEMENT MONITORING The Panel to receive the most recent Ofsted letter which summarises the findings of the monitoring visit to Tameside Children's Services on 18 and 19 April 2018.	5 - 8
6.	TOPICS FOR CONSIDERATION The Chair to present topics for consideration and facilitate discussion on future activity.	
7.	ANNUAL WORK PROGRAMME 2018/19 The Panel to agree a list and order of topics to be included in the annual work programme for 2018/19.	
8.	DATE OF NEXT MEETING To note that the next meeting of the Integrated Care and Wellbeing Scrutiny Panel will take place on Thursday 26 July 2018.	

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9. URGENT ITEMS

To consider any additional items the Chair is of the opinion shall be dealt with as a matter of urgency.

Integrated Care and Wellbeing Scrutiny Panel **15 March 2018**

Commenced: 6.00pm

Terminated: 7.15pm

Present: Councillors Peet (Chair), Affleck, Bowden, Fowler, Patrick.

Apologies for absence: Councillors Buglass, Cartey, Cooper, Mills, T Smith, R Welsh, Wills.

33. MINUTES

The minutes of the meeting of the Integrated Care and Wellbeing Scrutiny Panel held on 11 January 2018 were approved as a correct record. It is assumed

34. TECHNOLOGY ENHANCED CARE

The Panel welcomed Peter Grace, Clinical Nurse Lead for Digital Health; and Joanne Strothers, Telehealth Manager, to receive an update on innovations and benefits achieved through the increased use of technology throughout health and social care provision in Tameside.

Panel members received a comprehensive overview of both the Community Response Service (CRS) and Digital Health. Detail was provided on the Telecare enhanced monitoring systems that support and complement packages of personalised care. There are a number of devices and technologies available to support residents, ranging from medication dispensers to falls detectors. Residents receive an assessment to identify need and to ensure the most appropriate devices are used. Equipment has the ability to detect potential issues and alert the emergency control operators.

It was reported that the vast majority of older people express an interest and intention to remain living independently in their own home for as long as possible. The service aims to improve safety and security for elderly and vulnerable residents; to encourage earlier discharge from hospital; reduce inappropriate admissions to residential and nursing care and to deliver more personalised freedom and reassurance for carers and families.

The Panel heard that for the year ending February 2018 the service monitored over 3500 clients, of which 73% have CRS only with no other involvement from Adult Services. The Council's emergency control operators have handled almost 200,000 inbound calls from Telecare devices, as well as 14,000 Council out-of-hours calls. It was reported that over the same period wardens have physically responded to 10,891 emergency calls and from the 3500 service users, 71% are over 75 years of age.

Ms Strothers advised members of the important work that is undertaken with regards to falls prevention. Thanks to improved and highly effective lifting equipment the service is able to support residents quickly and effectively, which in many cases is reducing the need for ambulances to be called out.

The Digital Health Centre is located at the hospital site and allows residents and their carers to contact nurse assessors and clinicians to receive a 'live' consultation on health conditions as they arise. The centre supports the need to reduce attendances to, and admissions from the emergency department for the residents of care and nursing homes, along with residents of Tameside living independently in their own homes with CRS support.

Mr Grace informed members that 45 care homes are using Digital Health services. From 3400 calls/consultations that have taken place since the pilot in March 2017, it is estimated to have successfully avoided over 1000 unnecessary emergency attendances.

The service provides a multitude of benefits to patients by working to ensure the correct triage and treatments are delivered in the most appropriate places. Positive outcomes also include the ability to upskill care home staff to identify and access medical support and advice, reducing the strain on ambulance resources and supporting hospital discharge.

For the period from April 2017 to January 2018 a benefit analysis of non-cashable and notional savings for Digital Health equates to £475,000. Further investigation also shows a saving of 1723 bed days, which equates to 6 hospital beds and a financial benefit of £255,000. With the service delivering a financial cost benefit when compared with the costs allocated from transformational funding.

Panel members asked about future opportunities to develop technology enhanced care within communities.

Mr Grace and Ms Strothers highlighted the potential need for services to work more with long-term conditions and monitoring systems. Joint working across services has played a significant role in the success achieved to date and it is important that this is built upon with primary care providers and emergency services.

RESOLVED: That Mr Grace and Ms Strothers be thanked for attending the meeting.

35. CHILDREN'S MENTAL HEALTH

Panel members received a briefing note on the recent Department of Health and Department for Education policy consultation on 'Transforming Children and Young People's Mental Health'.

The briefing detailed prevalence of mental health problems within children and young people, as well as the problems faced within educational settings and their ability to respond. Proposals include trained Mental Health Leads to be located within schools and colleges by 2025, with work needed to enhance links between NHS mental health services.

RESOLVED: That the content be noted and used to inform future activity where appropriate.

36. UPDATE ON CURRENT REVIEW

The Chair provided a verbal update on the most recent working group meeting of the Suicide Prevention review. It was discussed that arrangements will now be made to explore options for a meeting with representatives from primary care.

RESOLVED: That working group members are advised of any future meetings by email and calendar invitation.

37. DATE OF NEXT MEETING

To note that this is last formal meeting of the Panel for the 2017/18 municipal year.

38. URGENT ITEMS

The Chair reported that there were no urgent items for consideration at this meeting.

CHAIR

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14 May 2018

James Thomas
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Dear James

Monitoring visit of Tameside Borough Council children's services

This letter summarises the findings of the monitoring visit to Tameside children's services on the 18 and 19 April 2018. The visit was the fifth monitoring visit since the local authority was judged inadequate in December 2016. The inspectors were Shabana Abasi, HMI, Stella Elliot, HMI, and Majella Tallack, Ofsted Inspector.

The strategic direction and focus provided by the director of children's services (DCS) have accelerated the pace of change in the early help service in the last six months, showing improving outcomes for the children and families receiving early help services.

Areas covered by the visit

This visit reviewed the progress made with regards to arrangements for early help, work with early help partners and the quality of performance management.

A range of evidence was considered during this visit, including electronic case records, supervision files and notes, performance data, observation of the early help panel, and discussion with workers, managers, senior leaders and key partners delivering early help services.

Overview

The local authority's self-assessment accurately acknowledges that, during 2017, insufficient progress was made to develop Tameside local authority's early help services and how they interface with children's social care. Early help is a service priority for the council. The appointment of a dedicated lead for early help has increased capacity. This, coupled with the strategic direction and momentum provided by the new DCS and senior management team, is driving positive progress against the multi-agency early help delivery plan. The current pace of change,

combined with increased engagement by partners, is showing improving outcomes for children.

Early help workers who spoke with inspectors had a clear understanding of their work within a broader context of supporting and protecting children. They speak with authority about the children and families who they are working with. However, the quality of practice is inconsistent. The recent internal early help audit report accurately reflects the current quality of practice, and mirrors the findings of the inspectors. The early help performance data score card has recently been drafted and currently provides basic information for senior leaders.

Findings and evaluation of progress

Arrangements for the transfer of children's cases between children's social care and early help are working better than at the time of the inspection. Thresholds are appropriately applied, and the level of intervention meets the needs of children and families. The addition of an early help practice manager in the safeguarding hub has strengthened the triage process. Pathways to secure early help services are now clearer, and children and families are swiftly signposted to appropriate support services.

Decisions to step down cases are considered at the third child in need (CIN) review, where progress made by families is evaluated and informs multi-agency decision-making. The attendance of early help practice managers and workers at CIN meetings results in effective information sharing and coordination of ongoing work with children and families about risks and needs.

Decisions to step up cases from early help to children's social care evidence clear management oversight and rationale. The recording on referrals is specific about escalating concerns or risks, and contains detail and evaluation of the work already undertaken with families. This avoids children and families having to tell their stories repeatedly and reduces the potential for additional repetitive work for staff.

Recording in case notes is timely. However, the majority of chronologies are system generated and contain insufficient information or analysis to inform an understanding of historic risks, missed opportunities or the child's journey. This limits their usefulness to inform assessments and planning.

The quality of early help assessments and plans is not consistently good. Assessments often focus on the presenting issue and lack consideration of the wider context and history behind children's current circumstances. Analysis lacks precision and depth and there isn't a sufficiently strong sense of what life is like for the child. While each child has a plan, these plans are not always specific about what actions need to be undertaken or by whom. Neither are they specific about what needs to be achieved or needs to change to improve what happens for each child. Although early help workers can explain what is needed, this is not translated into robust written plans.

The voice of the child is not always recorded well within case work. While there is evidence of good-quality direct work with children, inspectors saw case recording which lacked analysis and evaluation of the work undertaken. Good-quality intensive work was seen with some families to effect rapid change, enabling them to improve their lives. Feedback is routinely sought from families about what difference the support has made to their lives. Family testimonies include more confidence in managing a child's behaviour, improved attendance at school and less conflict in the home. This is an improved picture to that seen at the time of the inspection.

Supervision of staff takes place regularly. Staff also value the regular informal support and supervision that managers provide alongside the peer support that workers receive from within the teams. However, the effectiveness of supervision is restricted because, while the actions decided are clear, they often lack timescales, and there is little evidence of reflection. This means that opportunities are being missed to improve practice and staff understanding of how they can make a difference.

Managers and early help workers demonstrate an energy and commitment that is reflected in the knowledge and understanding they have of the families they work with. Team stability ensures that children can build trusting relationships with their workers, resulting in strong engagement with interventions and improved outcomes. This is a much better position than has been evident in some teams on earlier monitoring visits.

Children and families in Tameside can access a broad range of early help services. However, early help is heavily led by the local authority and although there is evidence of increasing engagement by partners, the early help agenda is not yet fully owned by partners. Partners lack confidence in undertaking the role of lead professional. In recognition of this, the local authority has established a common assessment framework (CAF) adviser team, to support wider partnership engagement with the CAF, increase the number of early help assessments and to support partners when undertaking the lead professional role.

Initiatives such as CAF advisers, CAF champions in each agency, multi-agency membership on the early help panel, co-location of workers, joint working with families, and multi-agency CAF training are having a positive impact on partner agencies' understanding of and commitment to the early help offer. This puts services in a strong position for further collaboration, which would benefit children and families.

The Early Help Assessment and Quality Assurance Framework was implemented in February 2018 to strengthen quality assurance and performance management. It is too early to evaluate the contribution that auditing of casework makes to practice improvement. The early help score card is in its infancy and requires further development to ensure that it provides sufficient robust information, and gives elected members, senior leaders and managers a clear overview of the effectiveness

of the early help service. At this current time, the service lacks any overarching analysis of the impact of early help at a strategic or operational multi-agency level.

This visit has found evidence of improvement in the pace of change, which has led to positive progress being made in relation to early help services. Leaders and managers are acutely aware of the challenges that they face to embed these changes and develop the service further while simultaneously addressing the areas of weaker practice. They recognise that there is more work to be undertaken to ensure that practice is consistently good and that the best outcomes are achieved for all children.

I am copying this letter to the Department for Education. This letter will be published on the Ofsted website.

Yours sincerely

Shabana Abasi
Her Majesty's Inspector