

**OFFICER DELEGATION SCHEME
RECORD OF DECISION**



TO BE UPLOADED TO THE INTERNET BY DEMOCRATIC SERVICES

Date: 9/11/21	Ref No: 2080
Responsible Officer: Dill Hawley – Strategic Lead for Intermediate Care	
Type of Decision (please refer to MO Guidance):	
Key <input type="checkbox"/>	Non-Key <input checked="" type="checkbox"/>
Freedom of Information Status: <i>(can the report go in the public domain)</i>	
Title/Subject matter:	
Additional Social Care Officer to support triage on rapid resolution of adult social care referrals in Connect and Direct	
Budget/Strategy/Policy/Compliance:	
(i) Is the decision within an Approved Budget?	Yes
(ii) Is the decision in conflict with the council’s policies, strategies or relevant service plans?	No
(iii) Does the decision amend existing or raise new policy issues?	No
(iv) Is the decision significant and/or does it meet the £100,000 threshold for recording?	No
Equality Impact Assessment [Does this decision change policy, procedure or working practice or negatively impact on a group of people? If yes – complete EIA and summarise issues identified and recommendations – forward EIA to Corporate HR]	No

Summary:

This aim of change will provide extra support on the triage function in CAD allowing better handling of the increase in referrals seen over the last 2 years.

Connect and Direct (CAD) is the first point of contact for customers and for all adult services enquiries. Referrals are received online, via email or telephone call. The service hours are 9am-5pm Monday to Friday.

CAD/Triage is an essential screening service for all referrals into Adult Care Services. The Triage team or Customer Advisors have the initial conversation/communication with the referrer or the resident to establish their needs and the urgency so the most appropriate action can be taken.

All staff have a vast knowledge of community resources and universal services and are creative thinkers. The team deal with customers at the time of need and issues are frequently resolved with good quality advice, information, and signposting within this first conversation. Early intervention, rapid resolution, prevention and maintaining independence is the focus of the service.

CAD Triage is an additional tier to the customer call handlers and was introduced in March 2020 to support the service at the front door. This triage and response is provided by qualified social work staff or staff with a greater knowledge of complex cases than the customer call handlers.

Cad Triage was initially made up of one Experienced Social Worker and one Social Care Officer. However, two members of staff were unable to safely manage due to the nature/volume of the referrals and work demands. Therefore, an additional Social Care Officer was temporarily transferred to the team from another service. An analysis of the volume of referrals now shows this post is required permanently.

CAD Triage support the customer advisors with several aspects of the service including risk assessing, prioritising, and providing direct support and advice to the Customer Advisors, particularly with any complex and challenging calls or issues.

CAD are experiencing a huge increase in the last year demand since the beginning of the pandemic which is evidenced in the increase of referrals both via 5151 calls and the emails received into the ACS inbox. CAD are dealing with a huge increase in non-section 42 enquiries and cases involving the following issues: Mental health, Drugs and Alcohol, Domestic Abuse, repeat demands, housing issues, poverty, and homelessness. The complexities of these issues require professional screening and input.

In 2019 CAD received an average of 300 telephone referrals and enquiries per week. Over the last 2 years this has increased to 449 calls per week. Taking figures from the monthly call reports over the last 6 months (April to September) we can see a 40% increase in demand.

Performance of the service remains good and according to the last 6 months and out of the main call code recording information an average of 54% are information and advice to the public (resolved at first point of contact), 15.6% advice to a professional, 4.6%

referrals to disability services, 4.85% Initial assessment- (INT's), 1.5% carers assessments (INT's). The remaining calls are spread between waiting list enquiries, cause for concerns and safeguarding.

95% plus of the safeguarding and cause for concern referrals are received into adultcareservices@bury.gov.uk inbox.

This evidences that approximately **6% of cases are assigned to INT's** and an overall deflection of referrals being assigned for longer term work. An average of 17.5% of the calls are not recorded under a work code so cannot be included in the above percentages.

Online/Email (ACS inbox)

In 2019 CAD received an average of 200 email referrals/enquiries per week. Currently there is on average 380 emails received each week. This evidences that the demand has almost doubled with a 90% increase.

All emails, excluding the SG concerns, are fully screened by either by the Triage staff or Customer Advisors to ensure that minimal cases are referred onto the INT's. The vast number of cases that are referred on tend to be regarding a Package of care that is already in place.

The Performance Team are currently working with CAD and commencing tableau reporting to collate the data needed which will evidence the work undertaken at the front door.

A rag rating system is in place to ensure that referrals are screened and dealt with by the appropriate level of staff with the appropriate response time depending on the urgency.

This task is completed each morning by the CAD triage staff given that it requires experience to risk assess and ensure that anything urgent is immediately identified and dealt with by the right professional. The inbox is then monitored throughout the day by a delegated member of CAD Triage. The emails are rag-rated as follows:

- **Green category;** response time- within 5 days - general screening for potential needs assessment. The customer advisors deal with this category, screening, providing information, signposting, making onward referrals and completing an initial needs assessment as required.
- **Blue category;** response time within 2 days – as above but presenting with more urgent needs. These are usually dealt with on the same day.
- **Orange category;** response time- within 2 day – Cause for Concern, Police and Ambulance reports, non- section 42 enquiries, complex issues. CAD Triage staff deal with all in this category and all referrals are prioritised daily.
- **Purple Category:** response time same day - Safeguarding Concerns, these are inputted onto protocol and directly assigned to the Safeguarding Team.

Since the onset of the triage arm of the service it has been clear that the service cannot be safely provided by only two staff members.

Delivering this service with only 2 members of staff results in the following risks

- Due to the nature of most referrals (Cause for Concerns) two people are needed for visits to ensure staff safety. Cold calling is often required due to non-engagement.
- One member of staff needs to be dedicated to monitoring the inbox, screening, risk assessing and prioritising the work coming in throughout the day and right up to 5pm.
- Unable to run the service with any Staff absences, holidays, training, sickness. This would heavily impact on the work undertaken and the triage service cannot be managed with one person.
- Unable to sustain constant demands of work. Staff burn out causing sick leave due to volume of work and nature of work.
- Staff retention
- Lack of teamwork, sharing knowledge, responsibility, and support for each other.
- Lack of support to the Customer Advisors impacting on the overall quality of service at the front door.
- Highly increased possibility of something urgent being missed.
- Delays in responding to serious concerns.
- Delays in making onward referrals
- Impact on quality of work and case recording due to the volume.
- Prevent time to network/ build relationships/attend meetings with partner agencies including charities such as Rough Sleepers.
- Firefighting rather than making a difference.
- No opportunity to reflect on practice/service delivery impacting on professional development and development of the service.

Finance

The cost of this additional grade 9 post is £36,036 and has been found from existing resources within the adult social care department


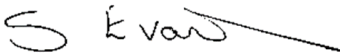



HR

The role of Social Care Officer is an existing role, it has been moderated and grade at Grade 9

This will be an addition to the establishment

This report outlines the work undertaken at the front door and evidences the current work demands including the increase in referrals and complexities over the past months. They have assisted and supported vulnerable people in our community in difficult times maintaining excellent customer service and professionalism. CAD also play a pivotal role within Adult Care Services as a whole, dealing with referrals at first point of contact and deflecting the need for longer term care and services. Therefore, it is essential that we have the staff required to do the job and to continue to sustain a high-quality service alongside managing the presenting and changing risks.

Recommendation

Create an additional 1.0 WTE Social Care Officer post to work in Connect and Direct		
Wards affected: N/A		
Consultations: N/A		
Scrutiny & Review Committee Interest: N/A		
Options considered:		
Decision		
Create 1.0 WTE Social Care Officer Post in Connect and Direct (CAD) – Grade 9		
Decision made by:	Signature:	Date:
Executive Director		26 November 2021
S151 Officer		8/12/2021
Director of People and Inclusion Sam McVaigh		10/12/21
Members Consulted		
Cabinet Member – Councillor Simpson		26 November 2021
Lead Member – Councillor Rafiq		13/12/21
Opposition Spokesperson		N/A

Notes

1. Where, in accordance with the requirements of the Officer Delegation Scheme, a Chief Officer consults with the appropriate Cabinet Member they must sign the form so as to confirm that they have been consulted and that they agree with the proposed action. The signature of the Opposition Spokesperson should be obtained if required, to confirm that he/she has been consulted. Please refer to the MO Guidance.
2. **This form must not be used for urgent decisions.**
3. Where there is any doubt, Corporate Directors should err on the side of caution and seek advice from the Council's Monitoring Officer.