

Agenda

Health and Adult Social Care Scrutiny Board

Monday, 13 March 2023 at 6.00 pm
In the Council Chamber at Sandwell Council House

- 1 Apologies for Absence**
- 2 Declarations of Interest**

Members to declare any interests in matters to be discussed at the meeting.
- 3 Minutes** 5 - 8

To confirm the minutes of the meeting held on 5 December 2022.
- 4 Additional Items of Business**

To determine whether there are any additional items of business which, by reason of special circumstances, the Chair decides should be considered at the meeting as a matter of urgency.
- 5 Primary Care Update** 9 - 18

To consider and comment on the Primary Care Access update.
- 6 Adult Social Care Annual Feedback Reports 2020/21 and 2021/22** 19 - 38



To consider and comment upon the Adult Social Care Annual Feedback Reports for financial years 2020 – 2021 and 2021 – 2022.

7 Scrutiny Action Tracker

39 - 44

Standing item to consider the Scrutiny Action Tracker.

Shokat Lal

Chief Executive

Sandwell Council House
Freeth Street
Oldbury
West Midlands

Distribution

Councillor E M Giles (Chair)
Councillors H Bhullar, Akpoteni, Allcock, Choudhry, E A Giles, S Gill, Fisher, Melia, Randhawa and V Smith

Contact: democratic_services@sandwell.gov.uk

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Minutes of Health and Adult Social Care Scrutiny Board

Monday 5 December 2022 at 6.00pm
Council Chamber, Sandwell Council House

Present: Councillor E M Giles (Chair);
Councillors Akpoteni, Allcock, E A Giles, and S Gill.

Also Present: Maxine Groves (Senior Commissioning Manager, Adult Social Care).

60/22 **Apologies for Absence**

Apologies were received from Councillors Bhullar, Choudhry and Randhawa.

61/22 **Declarations of Interest**

Councillor Akpoteni declared a pecuniary interest in the matter referred to at Minute No. 63/22 (Pre & Post Dementia Diagnostic Support) in that she worked within the adult social care sector. This interest had previously been declared on her central declaration of interest, however was being declared as a precaution due to the nature of the agenda item referenced.

62/22 **Additional Items of Business**

There were no urgent additional items of business.



Pre and Post Dementia Diagnostic Support

The Board considered a proposal to authorise the Director of Adult Social Care to allocate £376k per annum of Better Care Fund (BCF) monies in a two plus one-year contract for a Pre-& Post Dementia Diagnostic Support Service for Sandwell.

The business case to deliver Sandwell “Better Lives Strategy 2019 – 2024” within the available budget had been approved by the Cabinet in October 2020. The strategy provided the mandate to commission a pre and post diagnostic support service based on a lead provider collaborative approach, which had gone live in August 2021.

In December 2021, the provider had informed the Council of its intention to withdraw from the contract and the Cabinet had therefore approved temporary contractual arrangements with another provider, pending a formal competitive process.

The Sandwell community dementia support service and pathway was viewed as the national gold standard for such a service. The model had been referenced in the Department of Health and Social Care’s new 10-year dementia plan, which was awaiting publication. The collaborative model made use of the relationships between the six towns in Sandwell.

The proposed contract length was in place to provide a sufficient amount of time for stabilisation to allow the workforce to remain intact so that experienced members are retained.

In response to questions from the Board, the following responses were provided:-

- anyone who was registered with a Sandwell GP would be able to access the service;
- referrals to the service could be made by anyone, including self-referrals;
- work was underway to address and reduce inequalities; the Alzheimer’s Society had a dementia connect service



surrounding Sandwell for those not registered to a Sandwell GP;

- training would be provided to frontline staff, schools, colleges, professionals and family members;
- community work would be vital and a proactive approach to gain feedback would be a priority to whoever was awarded the contract;
- the service would adapt in order to reach residents who were more difficult to contact;
- facilities were in place to establish groups to help identify those who may need help;
- plans would be created to address the poor response and interactions rates evident in Wednesbury;
- work had been on-going with faith groups across the borough to help spread awareness around the services that were offered;
- a virtual reality bus, which allowed people to briefly experience what it was like to live with dementia had been commissioned to visit Sandwell in November 2021 and would be commissioned to visit again.

The Board noted and welcomed the report, and endorsed the proposal for submission to the Cabinet on 7 December 2022.

Meeting ended at 6.51pm

Contact: democratic_services@sandwell.gov.uk



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Report to Health and Adult Social Care Scrutiny Board

13 March 2023

Subject:	Primary Care Access
Director:	Sandwell Managing Director Black Country Integrated Care Board (ICB)
Contact Officer:	Michelle Carolan mcarolan@nhs.net


1 Recommendations

- 1.1 That the Board considers and comments on the access to primary care update.

2 Reasons for Recommendations

To receive a presentation on the current position regarding access to primary care in Sandwell, following which members will have the opportunity to ask questions of NHS partners in attendance

3 How does this deliver objectives of the Corporate Plan?

	<p>People live well and age well Access to Primary Care is fundamental to enabling our population to remain healthy and receive appropriate care and treatment</p>
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4 Context and Key Issues

- 4.1 Following a presentation at the Health and Adult Social Care Scrutiny Board in October 2021, the Board agreed a joint task force to look at



ways in which to communicate the message to Sandwell residents about the variety of ways in which primary care services can be accessed.

5 Implications

Resources:	Financial, staffing, land/building implications
Legal and Governance:	Legal implications including regulations/law under which proposals are required/permitted and constitutional provisions
Risk:	Risk implications, including any mitigating measures planned/taken, health and safety, insurance implications
Equality:	Implications for equality (all aspects and characteristics) including how meeting Equality Duty, equality impact assessments
Health and Wellbeing:	Implications of the proposals on health and wellbeing of our communities
Social Value:	Implications for social value and how the proposals are meeting this (for e.g. employment of local traders, young people)
Climate Change:	Implications for climate change outcomes and any potential impact on the environment (e.g. impact on emissions, resource use, or the natural environment)

6 Appendices

Primary Care Access Presentation.

7. Background Papers



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Primary Care Access Sandwell March 2023



Recap on last update

- Pressures across the whole health and social care sector – highlighting widespread staff shortages with struggles to recruit and retain staff being the greatest challenge
- Overview of the total workforce in primary care with Sandwell having the lowest WTEs per 100,000 patients compared to the other Black Country boroughs and the national average
- Population growth in Sandwell adding to workforce challenges – NHS cannot train and recruit GPs quickly enough to keep up with growing demand for their services
- New roles being introduced into primary care through the Additional Roles Reimbursement Scheme to work alongside the traditional primary care roles in providing direct patient care
- Overview of the work being undertaken by the Black Country Training Hub in delivering the Black Country Workforce Strategy to develop and grow the primary care workforce
- Updated on the Enhanced Access Scheme from 1st October 2022 which offers approximately 1,467 appointments across Sandwell per week during weekday evenings and Saturdays
- Described the approach to enhancing the digital offer and online services
- Promoted services offered by Community Pharmacies such as minor alignment scheme and self-care advice
- Agreed to share an information sheet to support residents to identify the most suitable service (completed and shared)

Winter

Investment to support primary care through time-limited funding by increasing the number of appointments

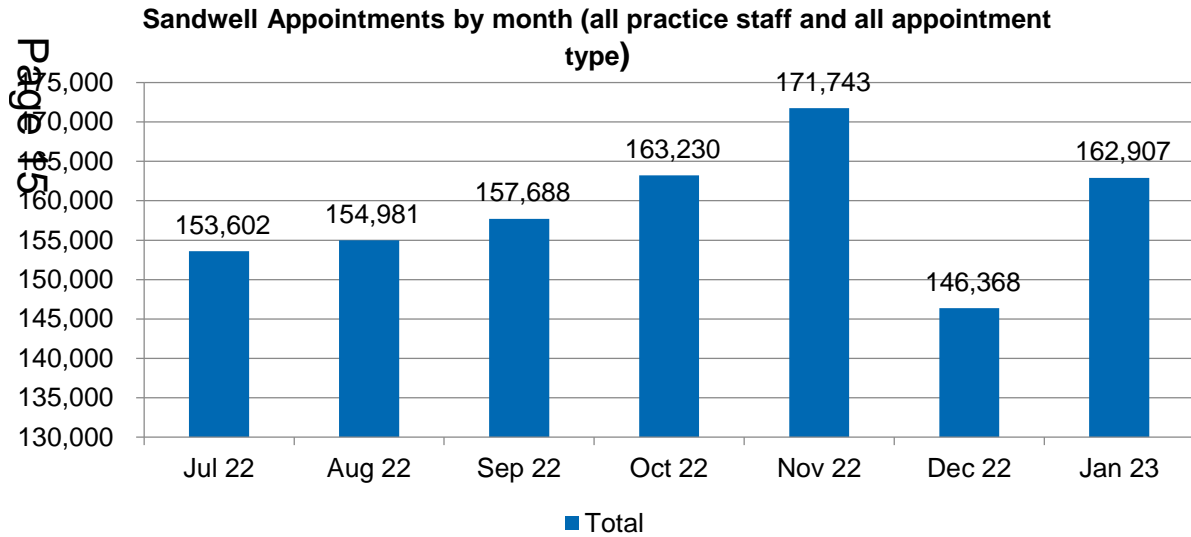
- NHSE/ICB winter capacity funding (£499,060) - creating in the region of 10,833 additional appointments across all practices in Sandwell
- NHSE Acute Respiratory Hub funding (£225,559)
 - *Tipton Hub* - approximately 2,959 additional appointments between December and March, Mon-Fri, all day Saturdays from late January and included appointment provision during the Christmas and New Year Bank Holidays
 - *Smethwick Hub* - approximately 2,032 additional appointments from late January to March, Mon-Fri afternoons and Saturday mornings
- In total, approximately 15,824 additional appointments across Sandwell during winter
- Whilst positive – the challenge is securing future funding to continue this level of additionality

General Practice Appointment Data (GPAD)

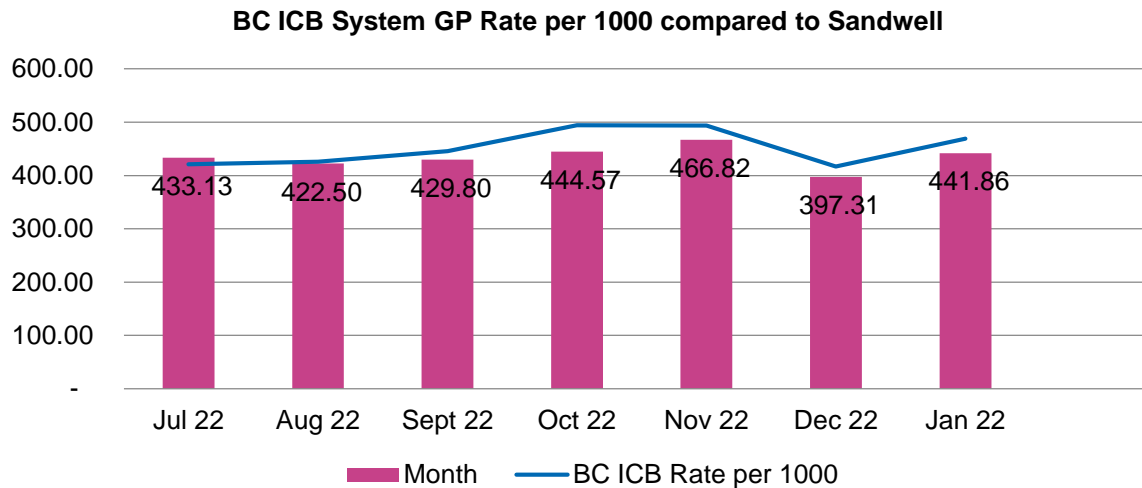
NHSE have been developing data extractions and reporting for appointment data in general practice since 2018

- Since July 2022, this has been available in the public domain [NHS England » Improving GP appointment data](#)
- Caveats exist when assessing this data such as:
 - Data is extracted centrally from clinical systems and published by NHSE
 - Data quality queries
 - Data is not to be used to performance manage general practice but can provide an indication of the level of activity undertaken at a practice level
 - Not all appointment data is included in the data extractions e.g. Enhanced Access appointments and some of the additional winter appointments
 - ICB is working with practices to improve data quality and establish how we can utilise this data effectively

General Practice Appointment Data (GPAD)



- Across BC ICB 46% of appt's were same day in Jan 2023, this is more than the national average (45%). **In Jan 2023 Sandwell Place also had 46% (75,411) appt's on the same day.**
- Across BC ICB 73% of appt's were F2F, this is higher than both the regional average (71%) and national average (69%) for Jan 2023. **In Sandwell Place 71.5% (116,628) of all appt's were F2F**
- Across BC ICB 50% of all appts in Jan 23 were carried out by a GP, this in line with the national average and **Sandwell Place also 50% (80,758) with GP**



- In comparison to the other Black Country places, Sandwell has
 - lower total workforce WTEs per 100,000
 - larger population
 - higher deprivation

Changes to the GP Contract for 2023/24 include:

- Focus on improving patient experience and satisfaction
 - Offer of assessment of need or signposted to appropriate service at first contact with the practice
 - Making it easier for patients to access their health information online without having to contact the practice
 - Mandating use of cloud based telephony for better management of incoming calls
 - Changes to the Impact and Investment Fund and Quality Outcomes Framework by reducing the number of indicators and diverting the focus into improving access/patient satisfaction
 - Increasing flexibility of the Additional Roles Reimbursement Scheme
- Further detail is awaited along with the publication of the Delivery Plan for Recovering Access to Primary Care as announced by the Chancellor in his Autumn Statement
 - This will direct the approach taken by the ICB in assuring practices actively work to improve access

Summary

The pressures and challenges described previously remain

- Time-limited funding made available during winter has been utilised to increase capacity and the number of appointments
- General practice appointment data is being routinely collated and reported, with some caveats and further work required to ensure it fairly represents the appointment activity carried out across practices
- We await further guidance in respect of GP Contract changes
- Also await the publication of the Delivery Plan for Recovering Access to Primary Care

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Report to Health and Adult Social Care Scrutiny Board

13 March 2023

Subject:	Adult Social Care Annual Feedback Reports 2020/21 and 2021/22
Director:	Rashpal Bishop Director of Adult Social Care
Contact Officer:	Trudie Morris trudie_morris@sandwell.gov.uk

1 Recommendations

- 1.1 That the Board considers and comments upon the Adult Social Care Annual Feedback Reports for financial years 2020 – 2021 and 2021 – 2022.
- 1.2 That the board endorses the reports for publication on the Council's website.

2 Reasons for Recommendations


- 2.1 In accordance with regulation 18 of The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 requires the council to produce an annual report detailing: -
 - The number of complaints received and processed by Adult Social Care Services in line with the regulations;
 - The outcome of complaints responded to;
 - A summary of the subject matter of the complaints, any matter of general importance and improvements that have been made as a result of the complaints; and
 - The number of complaints which we have been informed have been referred to the Health Service Commissioner to consider



under the 1993 Act or the Local Commissioner to consider under the Local Government Act 1974.

2.2 The same regulation also requires for the report to be made available to any person upon request.

3 How does this deliver objectives of the Corporate Plan?

	People live well and age well
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3.1 Monitoring feedback and complaints is an essential element of continuous improvement and therefore the monitoring of complaints and feedback in the area of Adult Social Care links directly to the above ambition.

4 Context and Key Issues

4.1 Adult Social Care complaints are handled differently to other complaints received by the council.

4.2 The council's complaints procedure has two formal stages, and if the complainant is not satisfied with the response at stage 2 they can complain to the Local Government Ombudsman (LGO).

4.3 In Adult Social Care there is only 1 formal stage and if the complainant is not satisfied with the council's response, they must complain to the LGO. It is therefore vital for thorough investigations to be carried out on all ASC complaints received by the council.

4.4 The reporting periods 2020/2021 and 2021/2022 include the period of the pandemic and national lockdowns during which there was a noticeable reduction in the number of complaints received.

4.5 The reports show that for both reporting periods a low number of complaints were upheld, indicating that in the majority of cases there had not been a failure in the level of service provided by the Council.

4.6 To ensure continuous improvement, Investigating Officers as part of a complaint investigation, are required to identify and recommend any



preventative/improvements actions. These are detailed in section 8 of the reports.

5 Implications

Resources:	Financial, staffing, land/building implications
Legal and Governance:	Regulation 18 of The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 requires the council to produce an annual report and paragraph 2.1 above details the information that must be included. The regulation also states that the report must be made available to anyone who requests it.
Risk:	None
Equality:	None
Health and Wellbeing:	Regular analysis of ASC complaints will ensure we continue to improve the quality of ASC services provided.
Social Value:	None
Climate Change:	None

6 Appendices

Adult Social Care Annual Feedback Report 2020/21
 Adult Social Care Annual Feedback Report 2021/22

7 Background Papers

None



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Adult Social Care Annual Feedback Report 1 April 2020 - 31 March 2021

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1. Introduction

This report provides information in respect of the statutory complaints responded to by Adult Social Care during the year 2020 - 2021.

The report has been produced in line with The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and details:

- The number of complaints received and processed by Adult Social Care Services in line with the regulations;
- The outcome of complaints responded to;
- A summary of the subject matter of the complaints, any matter of general importance and improvements that have been made as a result of the complaints; and
- The number of complaints which we have been informed have been referred to the Health Service Commissioner to consider under the 1993 Act or the Local Commissioner to consider under the Local Government Act 1974.

2. The Statutory Complaints Procedure

Adult Social Care complaints are managed in line with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 which were introduced in April 2009.

The regulations are based on a single approach across health and adult social care with a single stage providing flexibility for the organisation and the complainant to agree on how their complaint will be handled. In instances where the complainant remains dissatisfied they are advised they can approach the Local Government Ombudsman.

It should be noted that complaints made by a responsible body (another local authority, NHS body, primary care provider or independent provider) and complaints that are made verbally and are resolved to the complainant's satisfaction are not required to be dealt with under the regulations.

Furthermore, the National and Regional Complaint Officers groups continue to meet on a quarterly basis to share their experiences and, when invited, provide feedback to the Department of Health on their experiences of working with the regulations.

3. Complaints received within the reporting period 1 April 2020 – 31 March 2021

The following table details the number of pieces of feedback registered and responded to as a formal complaint over the last three years:

Year	Annual Total
2018/2019	92
2019/2020	87
2020/2021	57

The number of complaints we have formally investigated and responded to during 2020 - 2021 decreased significantly by 34.5%. There was a particular decline in complaints received due to Covid 19 and notably during the first national lockdown from March to July 2020.

At the close of the reporting period (31 March 2021) 30 of the 57 complaints received during 2020 -2021 had been concluded. The data is based on the 30 complaints that were formally investigated and concluded in the period.

4. Outcomes of Complaints concluded as at 31 March 2021

The following table provides details of the outcomes of those complaints received during 2020 – 2021 and concluded by 31 March 2021.

It should be noted that each of the 30 complaints investigated in the period can contain more than one complaint element. For the period 50 complaint elements were concluded and the outcomes can be seen below.

Outcome	Total
Upheld	14
Partially upheld	13
Not upheld	19
Unable to reach conclusion	1
Not a complaint	3
Total	50

5. Health Service Commissioner or Local Commissioner complaints:

During the 2020 – 2021 reporting period, Adult Social Care have not been informed that any complaints have been referred to the Health Service Commissioner to consider.

A total of 11 complaints during this period were referred by complainants to the Local Commissioner (Local Government and Social Care Ombudsman) to consider under the Local Government Act 1974.

6. Subject Matter of Complaints:

The categorisation of the subject matter of complaints is undertaken by the Customer Insight Team at the point each complaint is concluded.

The top three recorded cause of complaints in the reporting period were:

- *Poor Communication/Information*
- *Dissatisfaction with policy*
- *Delay in service provision*

The table below provides details of the recorded reason for the complaints during 2020 – 2021 as at 31 March 2021 (based on the 50 complaint elements of the 30 concluded complaints).

Subject Matter	Total
Conduct and Attitude of staff	5
Cost of Service	3
Customer Interpretation	4
Delay in service provision	9
Dissatisfied with policy	6
Lack of support	5
Non-Adherence to Process/Procedure	5
Poor Communication/Information	9
Quality of Service	1
Staff / Team error	3
Total	50

7. Matters of General Importance arising from complaints received 2020 - 2021

The feedback we receive through complaints continues to provide invaluable insight in order that we can learn from our mistakes and ensure that we make the necessary improvements to the services we are providing to the people of Sandwell that meet their needs and expectations.

It should be noted that there will be more key issues (50) than complaints concluded (30) as some complainants raise more than one issue.

The table below shows the root cause of each complaint element concluded as at 31 March 2021, and whether the complaint was upheld or not.

	Upheld	Partially Upheld	Not Upheld	Unable to Reach a Conclusion	Not a complaint	Total
Conduct and Attitude of staff	2	1	2			5
Cost of Service			1		2	3
Customer Interpretation		1	2		1	4
Delay in service provision	6	1	2			9
Dissatisfied with policy		2	4			6
Lack of support	1		4			5
Non-Adherence to Process/Procedure	2	1	2			5
Poor Communication/Information	2	6		1		9
Quality of Service			1			1
Staff / Team error	1	1	1			3
Total	14	13	19	1	3	50

8. Service Improvements from Statutory Complaints 2020 - 2021

As part of an investigation the Investigating Officer is required to identify any recommended future actions or service improvements that are made

as a result of the complaint findings. This analysis draws together all the service improvements that were identified during 2020 - 2021.

Improvement in communication –

- The Hospital Team management addressed the issue regarding clear communication with families, via their team meeting and with individual Social workers during one to one sessions to monitor that the expected standard of communication is being achieved.
- The Hospital Team management raised issues about poor communication on the hospital wards, with the Clinical Lead for the NHS Trust.

Review of process/procedure –

- The Community Care Business Unit (CCBU) reviewed how financial assessments are tracked and actioned to ensure they are responded to within an appropriate timeframe.

Written or verbal reminders to staff –

Reminders were given to staff to improve service delivery in the following areas:

- Ensuring copies of Care and Support Plans are sent to service user/family as soon as possible after approval in line with the Care Management Processes.
- The importance of all Community Social Work Teams recording accurate and precise details during a contact assessment so that care and support is not delayed.
- The need for officers within the Community Social Work Teams to accurately record requests for referrals and equipment and ensure this are actioned appropriately.
- Referrals for Recruitment Support for individuals with a Direct Payment should be made as soon as possible using the appropriate electronic form, and to clearly detail the reasons for referral in accordance with the Care and Support Plan.

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Adult Social Care Annual Feedback Report 1 April 2021 - 31 March 2022

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1. Introduction

This report provides information in respect of the statutory complaints responded to by Adult Social Care during the year 2021 - 2022.

The report has been produced in line with The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and details:

- The number of complaints received and processed by Adult Social Care Services in line with the regulations;
- The outcome of complaints responded to;
- A summary of the subject matter of the complaints, any matter of general importance and improvements that have been made as a result of the complaints; and
- The number of complaints which we have been informed have been referred to the Health Service Commissioner to consider under the 1993 Act or the Local Commissioner to consider under the Local Government Act 1974.

2. The Statutory Complaints Procedure

Adult Social Care complaints are managed in line with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 which were introduced in April 2009.

The regulations are based on a single approach across health and adult social care with a single stage providing flexibility for the organisation and the complainant to agree on how their complaint will be handled. In instances where the complainant remains dissatisfied they are advised they can approach the Local Government Ombudsman.

It should be noted that complaints made by a responsible body (another local authority, NHS body, primary care provider or independent provider) and complaints that are made verbally and are resolved to the complainant's satisfaction are not required to be dealt with under the regulations.

Furthermore, the National and Regional Complaint Officers groups continue to meet on a quarterly basis to share their experiences and, when invited, provide feedback to the Department of Health on their experiences of working with the regulations.

3. Complaints received within the reporting period 1 April 2021 – 31 March 2022

The following table details the number of pieces of feedback registered and responded to as a formal complaint over the last three years:

Year	Annual Total
2019/2020	87
2020/2021	57
2021/2022	38

The number of complaints we have formally investigated and responded to during 2021 - 2022 decreased significantly by 33.3% on the previous year and by 56.3% since 2019 - 2020.

At the close of the reporting period (31 March 2022) 11 of the 38 complaints formally investigated during 2021 - 2022 had been concluded. The data is based on the 11 complaints that were formally investigated and concluded in the period.

4. Outcomes of Complaints concluded as at 31 March 2022

The following table provides details of the outcomes of those complaints received during 2021 – 2022 and concluded by 31 March 2022.

It should be noted that each of the 11 complaints formally investigated in the period can contain more than one complaint element. For the period 21 complaint elements were concluded and the outcomes can be seen below.

Outcome	Total
Upheld	2
Partially upheld	5
Not upheld	12
Unable to reach conclusion	1
Not a complaint	1
Total	21

5. Health Service Commissioner or Local Commissioner complaints:

During the 2021 – 2022 reporting period, Adult Social Care have not been informed that any complaints have been referred to the Health Service Commissioner to consider.

A total of 13 complaints during this period were referred by complainants to the Local Commissioner (Local Government and Social Care Ombudsman) to consider under the Local Government Act 1974.

6. Subject Matter of Complaints:

The categorisation of the subject matter of complaints is undertaken by the Customer Insight Team at the point each complaint is concluded.

The top three recorded cause of complaints in the reporting period were:

- *Poor Communication/Information*
- *Dissatisfaction with policy*
- *Lack of support*

The table below provides details of the recorded reason for the complaints during 2021 – 2022 as at 31 March 2022 (based on the 21 complaint elements of the 11 concluded complaints).

Subject Matter	Total
Conduct and Attitude of staff	3
Customer Interpretation	1
Delay in service provision	2
Dissatisfied with policy	4
Lack of support	4
Poor Communication/Information	5
Poor Response/Investigation	1
Quality of Service	1
Total	21

7. Matters of General Importance arising from complaints received 2021 - 2022

The feedback we receive through complaints continues to provide invaluable insight in order that we can learn from our mistakes and ensure that we make the necessary improvements to the services we are providing to the people of Sandwell that meet their needs and expectations.

It should be noted that there will be more key issues (21) than complaints concluded (11) as some complainants raise more than one issue.

The table below shows the root cause of each complaint element concluded as at 31 March 2022, and whether the complaint was upheld or not.

	Upheld	Partially Upheld	Not Upheld	Unable to Reach a Conclusion	Not a complaint	Total
Conduct and Attitude of staff			2	1		3
Customer Interpretation			1			1
Delay in service provision		2				2
Dissatisfied with policy		1	3			4
Lack of support		1	3			4
Poor Communication/Information	1	1	2		1	5
Poor Response/Investigation			1			1
Quality of Service	1					1
Total	2	5	12	1	1	21

8. Service Improvements from Statutory Complaints 2021 - 2022

As part of an investigation the Investigating Officer is required to identify any recommended future actions or service improvements that are made as a result of the complaint findings. This analysis draws together all the service improvements that were identified during 2021 - 2022.

Written or verbal reminders to staff –

Reminders were given to staff to improve service delivery in the following areas:

- Ensuring that there is clear communication with family and that the service user and their family are provided with timely updates.
- Promoting clearer communication between Social Workers and the Clinical Commissioning Group to ensure continuity of payment for Care.
- Ensuring discussion takes place at senior management meetings regarding cases where a person is awaiting a Care Assessment and authorisation of funding due to the ceasing of funding by the Clinical Commissioning Group.
- Explaining processes clearly to service users and family and the necessity to check client understanding of the process.

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Health and Adult Social Care Scrutiny Board

13 March 2023

Subject:	Tracking and Monitoring of Scrutiny Actions and Recommendations
Director:	Director of Law and Governance Surjit Tour Surjit_tour@sandwell.gov.uk
Contact Officer:	Stephnie Hancock Senior Democratic Services Officer stephnie_hancock@sandwell.gov.uk

1 Recommendations







- 1.1 That the Board notes the responses from the Executive/Directors/Partners on recommendations referred since the Board's last meeting, as set out in the Appendix.
- 1.2 That the Board notes the progress on implementation of those recommendations approved by the Executive/Directors/Partners, as set out in the Appendix.
- 1.3 That the Board identifies any recommendations where progress is unsatisfactory and determines what action it wishes to take.
- 1.4 That the Board determines which recommendations no longer require monitoring.



2 Reasons for Recommendations

- 2.1 To facilitate the effective monitoring of progress on responses to and press with implementation of recommendations made by the Board and identify where further action is required.
- 2.2 Effective monitoring of recommendations facilitates the evaluation of the impact of the scrutiny function overall.

3 How does this deliver objectives of the Corporate Plan?

	Best start in life for children and young people	<p>The scrutiny function supports all of the objectives of the Corporate Plan by seeking to improve services for the people of Sandwell. It does this by influencing the policies and decisions made by the Council and other organisations involved in delivering public services.</p> <p>Effective monitoring of recommendations made supports this and allows scrutiny to evaluate its impact.</p>
	People live well and age well	
	Strong resilient communities	
	Quality homes in thriving neighbourhoods	
	A strong and inclusive economy	
	A connected and accessible Sandwell	

4 Context and Key Issues

- 4.1 The attached Appendix details the responses to and progress on the implementation of recommendations made by the scrutiny function.



5 Implications

Resources:	
Legal and Governance:	<p>The duty to undertake overview and scrutiny is set out in Part 1A Section 9 of the Local Government Act 2000.</p> <p>The Local Government and Public Involvement in Health Act 2007 places a duty on the Executive to respond to Scrutiny recommendations within two months of receiving them.</p> <p>Scrutiny committees can require a response from NHS bodies within 28 days in relation to recommendations made to them.</p>
Risk:	<p>Any risk implications have been considered with the relevant Officer/Director/Cabinet Member/Risk Owner at the time the recommendations were referred to them by the Board.</p> <p>Any specific risks for the Board's attention are detailed in the Appendix.</p>
Equality:	<p>Any equality implications have been considered with the relevant Officer/Director/Cabinet Member/Equality, Diversity and Inclusion Team at the time the recommendations were referred to them by the Board.</p> <p>Any specific equality implications for the Board's attention are detailed in the Appendix.</p>
Health and Wellbeing:	<p>Any health and wellbeing implications have been considered with the relevant Officer/Director/Cabinet Member at the time the recommendations were referred to them by the Board.</p> <p>Any specific health and wellbeing implications for the Board's attention are detailed in the Appendix.</p>
Social Value	Any social value implications have been considered with the relevant Officer/Director/Cabinet



	Member/Equality, Diversity and Inclusion Team at the time the recommendations were referred to them by the Board.
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6 Appendices

Appendix A – Scrutiny Action Tracker - Monitoring Table

7. Background Papers

None.



Health and Adult Social Care Scrutiny Board				
14 MAR CH 22 (202 1/22)	Community Diagnostic Centres Update	That the Cabinet Member be asked to endorse the letter to Secretary of State for Health and Social Care asking for long-term revenue funding for CDC to be confirmed	Cabinet / SWBHT	<p>A response was received from the Minister was reported to the Board at its meeting on 21 November 2022.</p> <p>Sandwell and West Birmingham NHS Trust has submitted a formal business case to NHSE/I Regional team for consideration of funding for a Community Diagnostic Centre Hub and Spoke model to serve the population of Sandwell and West Birmingham. This case has been supported as part of the CDC Strategy through the Black Country ICB.</p> <p>The case included £8.64m Capital to be spent in 22/23-24/5 and £23.31m Revenue to be spent in 22/3-24/25 period. This reflects the 3 year period that CDCs are currently nationally funded for. The Regional Team has sought some clarification on the business case so it has not yet been approved.</p>

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