

ASC Business Plan 2024 - 2030

Making the difference every day



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Our vision and mission

Our vision:

People in Essex living their lives to the fullest

Our vision for Adult Social Care is for people to be able to live their lives to the fullest.

This means all citizens in Essex should have choice and control over their own lives and that with the right support, everyone can achieve some independence. We want to support people to maximise their own potential for control over their lives in a sustainable way that is preventative and localised.

This reflects the Council's commitments to levelling-up the county in four key areas: the economy; the environment; children and families; and promoting health, care, and wellbeing for all ages.

Our mission: making the difference every day

The outcomes we want people to enjoy:

- Independence and wellbeing are maximised
- Choice and control over care and support
- Access to a place called home
- Access to social and employment opportunities
- Positive experience of social care
- Reduced inequalities and increased inclusion
- People at risk can live free from abuse, harm, and neglect



Our principles

Our mission is to enable people to live the best lives they can: our principles will guide the way we work.



Person-centred - we will work alongside people to ensure that wherever possible they plan their care and support and achieve their aspirations



Prevent, reduce, delay – Prevention will be at the heart of everything we do: we will seek, identify and maximise every opportunity to prevent, reduce or delay the need for care ensuring the right type of care for people in receipt of support, including those with conditions that might escalate into crisis.



Collaboration and co-production. We will work with a range of organisations and individuals to break down boundaries of collaboration, identify shared goals, and coproduce solutions together



Continuous improvement - We will strive to always do better, embracing innovation and change where it can continuously improve outcomes







Listening to our residents - We will listen to people with lived experience and root our decision-making in the evidence and insights

Local - We will do all we can to enable

possible, trusting and empowering

decisions to be made as close to residents as



communities and individuals to play an active role, take on responsibility and use their expertise and resources creatively



Equality, diversity, and inclusion -

guided by our corporate EDI strategy we will promote equality and diversity amongst our own and our care providers' workforce welcoming the different backgrounds, experiences, and talents of our colleagues and creating an inclusive culture. We are determined that people we support will have equity of access, outcomes, and experience, and are treated with dignity and respect by our staff, and by those providing care and support.

Our operating context

Our statutory commitments

Under the **Care Act 2014** the Council has a range of responsibilities that ensure the right type of care is available to help prevent, reduce and delay care and support needs, enable people to access information and advice about available services, and ensure that there is a range of high-quality care and support services to choose from.

The **Health and Care Act (2022)** saw the introduction of **Integrated Care Systems** with Essex a party to 3 systems. It also introduced a **Care Quality Commission inspection regime** to provide an independent assessment of care at a local authority and integrated care system level. From April 2023 CQC will begin to review data and published documentary evidence across all local authorities, and from September will implement a programme of formal assessments. ASC has allocated resources and instigated a programme of work to ensure that we are inspection-ready.

Increasing demand for support and services

At any one time we provide care and support to about 16,000 people and through the course of the year we have contact with over 40,000 people. Demand for social care support continues to grow and we are seeing particular growth in new demand on mental health and wellbeing services. About 60% of new contacts come via our Adult Social Care Connects telephony service and most of the remainder via our Discharge to Assess pathway from acute hospitals.

Adults are needing different types of care and support. We have increasing evidence of high complexity of needs and increasing longevity of those with high complexity. Backlogs in elective care and NHS waiting lists are also affecting social care. There has been a significant increase in demand on safeguarding referrals. We are supporting about 5,200 people with Technology Enabled Care which is improving outcomes and helping people to remain independent.

About 1 in 6 people in Essex has a long-term health problem or disability and those with learning disability who need social care support is likely to go up by 8% by 2030.



Strengths, weaknesses, opportunities and threats

We have made good progress with some of our key initiatives and the dedication and commitment of our workforce is a key strength. But recruitment into some roles remains a challenge and we know that we need to improve the quality and use of data and do more to embed lived experience and coproduction in our work. Support to carers and improving information and guidance remain key priorities. There are opportunities in the integration space for joint working, and right-sizing the market will support its viability.

Strengths:

- Committed, dedicated workforce, good wellbeing support
- Strong training offer and CPD via ESCA
- Good approach to Equality, Diversity and Inclusion our Quests
- New ways of working successfully implemented
- Recovery from pandemic good in some areas social care delays are low
- Successful delivery in some areas: MLM, Connect, Care Technology
- Good relationships with the market
- ICS's successfully implemented
- Good relationships with community and voluntary sector through alliances
- A focus on improving outcomes for citizens will result in opportunities to achieve financial sustainability

Opportunities:

- November 2022 Autumn Statement announced two-year new funding settlement
- System focus on integration provides opportunities for joint working with health and other partners as well as with children's services, education and public health
- A clear market shaping strategy will enable right-sizing of market provision in some areas
- Technology and its ability to enable people to remain independent for longer, and to improve workforce productivity. People are more willing to use it post-pandemic.
- Housing development provides opportunities for supported employment as well as the development of supported housing

Weaknesses:

- Waiting times for assessments and overdue reviews remain too long
- Lived experience and co-production is not visibly embedded in our work
- We have a limited understanding of inequities for those with protected characteristics in accessing services
- Difficulty in recruiting into some roles, especially experienced, professionally registered frontline teams
- Workforce vacancy and turnover rates, especially among social workers.
- Data quality issues with our Social Care Case Management and other systems are leading to some reporting and management information challenges
- People find it difficult to access information and advice and we do not have effective IAG and self-serve capacity
- Inconsistencies in practice and customer service

Threats

- Financial pressures on the local authority will impact ASC and our ability to support the market and deliver services
- The future of government support for Adult Social Care remains uncertain
- Implementing Fair Cost of Care reforms would cost c£50m per year
- Complex ICS geographies and the lack of a single strategic approach to managing risk makes it difficult to have a coherent approach and results in increase pressure for ASC
- Increasing levels of demand in our systems and services

Our financial position

	Draft Budget 2024/25	Draft Budget 2025/26	Draft Budget 2026/27	Draft Budget 2027/28
	£m	£m	£m	£m
Access Assessment & Care Mgt	45.9	47.0	48.2	49.2
Care & Support				
Learning Disabilities Policy Budget	222.4	238.7	243.2	249.9
Older People Policy Budget	121.8	128.9	134.1	141.7
Physical & Sensory Impairment Policy Budg	54.2	58.7	59.7	61.2
Corporate & Democratic Core Asc	0.3	0.3	0.3	0.3
Health Reform & Integration	0.1	0.1	0.1	0.1
Health Watch	0.1	0.1	0.1	0.1
Housing Related Support	0.5	0.5	0.5	0.5
Mental Health	23.2	24.5	24.7	25.0
Other Social Care	3.2	3.2	3.3	3.3
Service Management Costs	(5.9)	(5.7)	(5.4)	(5.0)
Total	465.8	496.3	508.8	526.3

The council is facing significant budget pressures and financial uncertainties. Adult Social Care has strong financial management and has been very successful at living within its financial envelope in every year since 2017/18. We need to build on these solid foundations as we face another difficult four years, compounded by the challenges of the legacy of Covid-19, EU Exit, continued demographic growth, market challenges and cost of care, potential charging reforms, and the cost-of-living crisis.

Our forecast annual net budget requirement is set to grow by 12.9% (or by £60.5m) over the period 2024/25-2027/28, this is not affordable within the Council's estimated funding over that period. This position also assumes CPI and NLW growth return to lower levels over that period; if this doesn't happen the growth requirement over that period will greatly increase.

The biggest driver of expenditure growth is forecast to be due to price increases, accounting for £37.8m of pressure in 2024/25 alone.

Our current trajectory is contrary to the ambitions in our business plan and will see more spend on long-term care and less available for early intervention and prevention.

Our ambition is to be able to invest in change activity and initiatives that help us maximise our effectiveness and efficiency as a service and maximise the value for money that we provide for the residents of Essex.

Our workforce

- ASC has a workforce of approximately 1500 employees. The function comprises Commissioning; Strategy, Policy & Integration; Operational front-line teams divided into 5 localities across the County, and various countywide teams. These include Adult Social Care Connects, Service Placement Team, Mental Health, Independent Workforce, Safeguarding (triage, DoLs, and Organisational Safeguarding), Quality Assurance, Provider Quality Improvement and 4 residential LD Hostels.
- The service has strong links with the NHS, the care market, and the voluntary sector.
- The operating context has changed post-Covid, with increasing demands for support, along with increased complexity of needs and prevalence of MH issues; financial pressures for the Council and vulnerable people it supports; Government reforms, including CQC inspection; and new ways of working through our willingness to use digital options for all our residents.
- Workforce has been an area of focus with the development of a number of programmes across the service which have linked to the Strategic Workforce Plan. The functions operating model and structures are currently being reviewed to support our ways of working and future demand. Any new structures and operating models will be implemented throughout 2024/2025, which a strong focus on transitioning well and creating stability across our workforce.

Strengths and Opportunities

- Experienced DASS, with passionate, mature & experienced workforce,
- Strong budget base & government funding
- Award winning CPD though Essex Social Care Academy
- Strong ASYE Programme
- Strong wellbeing offer
- Diverse workforce Grade E & below
- Improved coproduction & collaboration with residents
- Employing neurodiverse employees
- Opportunity of improved integration with partners & place based, whole system working

Weaknesses and Threats

- Risk of change overload within workforce
- Onerous IT systems. Digital capability
- Siloed working on initiative & lack of clear links & accountability to outcomes, measurement of impact.
- Strategic versus operational split
- Data although improved requires further improvement
- Fragility of care provider market
- Government reform plans
- Pending CQC assurance visit
- Registered professionals leaving the sector
- Lack of supply of registered professionals

Our care provider market

Our market shaping vision is to enable people to live their lives to the fullest through a vibrant and sustainable care market, supporting residents to develop their strengths and personal independence.

We have a stable care market in Essex which is operating in difficult circumstances. We have over 700 providers as well as unregulated services. Around 80% of regulated providers are rated good or outstanding by CQC.

We have an oversupply of residential care beds which is likely to increase as national and local trends are to support more people to live at home, but we need more domiciliary capacity in some parts of the county. The need for complex care continues to increase, particularly in dementia and nursing care, but there are already challenges in meeting existing demand. We are re-designing our approach to short-term recovery from hospital services in order to best meet demand. We need a wider range of accommodation options to provide community-based alternatives to residential care including general needs housing.

The care sector workforce has reduced by 2% in the last 12 months and a key challenge is to make the sector an attractive and valued place to work.

We have been working in collaboration with our stakeholders, care markets and partners to develop:

- Our Market Shaping Strategy 2023 2030 published on the Provider Hub
- > Detailed Commissioning Intentions and the roadmap for the next 7 years
- Strategic Themes being developed with key stakeholders

Our markets

 Community-based: Intermediate Care Domiciliary care Day Opportunities – OP Day Opportunities – Disabilities Equipment ASC Transport 	 Residential care OP – residential & nursing Disabilities – residential Mental Health - residential 	 Market enablers: Advocacy Personal Assistants/CME/ ISF MH prevention & early
 Supported Living: Accommodation Supported Living – Disabilities Extra Care Mental Health Accommodation 	 Employment Disabilities employment MH Supported employment 	intervention - Carers - Tech Enabled Care - Dementia - Care Workforce

Unpaid carers

We estimate that there are over 150,000 unpaid carers in Essex of whom about 37,500 are providing 50+ hours of care a week. The value of this unpaid care has been estimated at £2.5bn per year (University of Leeds, 2015) and supporting carers is a priority.

We worked with carers to develop and launched a new Carers Strategy in 2022 which sets out 6 commitments, detailed below. We are implementing a new support offer for carers throughout 2023-24 which will include enhanced IAG and telephony 'front door' support via the Essex Wellbeing Service; a new core support offer which will provide one-to-one support for solution-focused interventions and access to small grants to support wellbeing; and a local offer to fund community-based peer support, groups and activities.

Our six commitments to carers:

- 1. Carers can easily access information, advice, guidance and support when they need it and early into their caring role
- 2. Develop professional practice and processes to improve identification and support to carers
- 3. Improve transitions for carers as they move through specific phases or life events in their caring role
- 4. Carers will have increased opportunity to access good quality support including opportunities for breaks to maintain their own wellbeing and those they care for
- 5. Carers needs and rights will be understood and recognised across Essex communities
- 6. Carers will be the experts that influence, shape and be involved in the decisions that are intended to improve their support and wellbeing



ECC's transformation 2030:

Essex County Council's Whole Council Transformation programme sets out a strategic plan in response to the challenges faced by local government of high inflation, tighter budgets and increased demands on our services. It provides a roadmap to 2030 aimed at making ECC work better, cost less and, ultimately, improve the lives of Essex residents.

The outcomes for Adult Social Care are:

	Adults with ca needs be ena	ome 1 ire and support abled to be as it as possible	Essex will hav sustainable supporting Ess develop their	ome 2 e a vibrant and care market, sex residents to strengths and dependence	
Our care and wel Our care and wel will be joined ordinated with H housing services and community	llbeing services -up and co- lealth services, and voluntary	Outco Essex will have a and sustainable that can meet de and be	valued, skilled, care workforce mand for 2030,	Outcom Unpaid carers ac will be value support	cross Essex ed and



Our business plan objectives

In our refreshed Business Plan, we have streamlined our ambitions into three objectives which will enable us to move towards our vision for Adult Social Care and achieve the outcomes we want to see for our residents. While we do this our commitment to safeguarding, to listening to the views of people who are experts by experience, and putting the people we support at the heart of all we do will be integral to our plans.

1. To develop community-based support and early help

We will:

- Implement the All-Age Carers Strategy to ensure that people get the support they need in their caring roles while enjoying a good quality of life
- **Develop a prevention and early intervention offer** to help reduce or delay the onset of health and care needs
- Implement technology to digitise our front door and enable self-serve options for people to access support
- Grow and expand the Essex care technology service, ensuring more people can be supported to live as independently as possible with the help of technology
- **Develop our place-based alliances** working in multi-disciplinary teams with partners to improve people's experience of the health and care system
- Improve information, advice and guidance, working with the Council to improve key platforms

2. To shape the care and support offer for Essex residents

We will:

- Implement our market shaping strategy to improve the effectiveness and resilience of the market making best use of government funding
- Implement Fair Cost of Care
- **Implement our Disabilities Strategy** to improve outcomes and promote independence
- Implement the Better Care Fund strategy
- Develop and implement a new approach to Intermediate Care
- Improve access to housing, employment, and meaningful opportunities – with increased accommodation options and an inclusive employment market
- Develop mental health services across Essex
- Southend and Thurrock to improve outcomes and support and remodel the S75 agreement

3. To build operational resilience and excellence

We will:

- Reduce waiting times for reviews and assessments
- Improve safeguarding flows and outcomes
- Understand and address any **inequities in access to services** for those with protected characteristics
- Improve our approach to embedding lived experience and co-production, and personalisation
- Improve how we record, report and use data
- **Improve our approach to quality assurance** to fully embed a strengths-based approach that promotes independence, choice and control, and dignity.
- Workforce: future outlook ensure our workforce has the capacity to meet future demand addressing team workflows and maximising spans and layer
- Review our operating model
- Improve technology systems for our workforce (including the social care platform programme)
- **Develop a new Practice Model** that fully embeds prevention, enablement and support into the service offered by our teams

Independence and wellbeing is maximised Choice and control over care and support Access to a place called home Access to social and employment opportunities

OUTCOMES

Positive experience of social care Reduced inequalities and increased inclusion

People at risk can live free from abuse, harm and neglect

1. Developing community-based support and early help



Activity	Why this is important:	What we will deliver 2024/25	Ambition by 2030
T2030 TRANSFORMATIC	N ACTIVITIES		
Early help, IAG and customer pathway	Ensuring that people can access early help in their communities is key to managing demand, as well as fulfilling our Care Act responsibilities. Enhancements to early help, information, advice and guidance to help improve customer experience and manage increased demand. Includes possible channel shift to online; workforce efficiencies arising from process automation; and better system usability and functionality. There is a prime dependency on the Transformation Digital 2030 work	 Agreed approach to implementing digital services and channel shift Diagnostic of current ASCC offer and an agreed re-imagined approach Mapping and gap analysis of currently commissioned early help across the county Proposal for new model (date tbd) Improved understanding about how people are experiencing inequities in adult social care 	 Digital services and front-end capability in place so that people can access information and services and self-serve where appropriate Improved IAG in accessible format New approach to ASCC Plans will be in place which are addressing inequities of experience
All-age carers strategy implementation	Carers provide unpaid care and support that eases pressure on statutory services. Carer satisfaction with the support they get in Essex is lower than we want it to be.	 April 2024: New commissioned contracts for core carers support to commence Carers survey arrangements reviewed 	 Carers can easily access the information, advice, guidance and support. Develop professional practice and processes to improve identificatio and support to carers. Improve transitions for carers as they move into their caring role. Carers will have increased opportunity to access good quality suppor including short breaks to maintain their own wellbeing and those the care for. Carers' needs and rights will be understood and recognised across Essex Carers will be the experts who influence, shape and are involved in the decisions that are intended to improve their support and wellbeing.
Care Charging Reforms	A legislative requirement from 2025 to implement Care Charging reforms which will require significant change to processes and technology. ECC will be required to operate care accounts for individuals and enable people who currently self-fund to purchase their care via ECC contractual arrangements.	 Agreed delivery plan for business optimisation to ensure systems are as good as they can be in advance of implementing care charging reforms 	Business processes are optimised to enable implementation of care charging reforms



Activity	Why this is important:	What we will deliver 2024/25	Ambition by 2030
OTHER PRIORITY WORK			
Technology Enabled Care	ECC is leading the approach to Care Technology nationally, demonstrating an outcome-focused, digital first approach that has supported over 8000 people to remain independent in their own homes. The service has a robust financial and non-financial benefits realisation model and has realised just over £16.69M of financial savings to ASC. The service is provided by partners Millbrook Healthcare and Provide CIC and focuses on innovation and test and learn.	 An additional 228 installations per month above baseline delivery targets An additional £1.366M savings above baseline Falls sensor pilots (funded by Digitising Social Care fund) 	 Workforce recruitment and retention has improved effectively managing market capacity to meet demand Lived experience is at the centre of decision making Improved IAG High-quality provision across Essex that offers choice Our technology supports adults to access information and self-serve, enables the efficient sourcing of services, allows shared information across health and social care; and data capture is improved. More people are using Technology Enabled Care to maintain their independence The market is financially sustainable
Locality working and place- based alliances	People live in places and the wider determinants of health impact on life outcomes and wellbeing. Place-based alliances are a key part of the new integrated care systems and are where adult social care works closely at a place-level with a range of partners such as NHS, district/borough councils, the voluntary and community sector and others.	 System-level Transfer of Care Hubs (TOCHS) which are linked to coordinate care and support for people who need it and providing accurate performance and data reporting. Multi-disciplinary Neighbourhood (Locality) Teams bringing together a range of professionals, shaped to each place or alliance footprint, recognising the unique assets and challenges of each area. We will build stronger connections across our 5 place-based alliances and the Health & Wellbeing Board, strengthening relationships between partners and supporting place-based initiatives that help prevent, reduce and delay health and care needs. 	 Transfer of Care Hubs are fully implemented ECC is working in a fully collaborative and integrated way with its local communities. By working through place-based alliances, ASC will promote: Better health and wellbeing outcomes More people living independently Social care teams work closely in neighbourhoods, with other organisations and professionals More joined-up decision-making on use of resources to make best use of the public pound More joint commissioning and operational roles, where this is appropriate and most effective to improve outcomes

Delivery plans:



Activity	Why this is important:	What we will deliver 2024/25	Ambition by 2030
T2030 TRANSFO	DRMATION ACTIVITIES		
Market Shaping Strategy	Our Market Shaping Strategy sets out our vision for a market that can offer choice and a diverse range of options that enable people to live independently. It sets out our expectations and strategic priorities. Alongside our strategy we will make the best use of government funding to support the market	 Targeted fee uplifts towards our strategic providers and towards community-based services Development of support offer to care market on recruitment and training and development Roll-out electronic homecare monitoring Refresh future investment plans for new extra care and supported living schemes Develop new approach to capturing lived experience across Essex 	 Workforce recruitment and retention has improved We are effectively managing market capacity to meet demand Lived experience is at the centre of decision making Improved IAG There is high-quality provision across Essex that offers choice Our technology supports adults to access information and self-serve, enables the efficient sourcing of services, allows shared information across health and social care; and data capture is improved. More people are using Technology Enabled Care to maintain their independence The market is financial sustainable
Intermediate Care Redesign and Procurement	Intermediate Care provides short-term support to people discharged from hospital enabling them to regain or remain independent. We will commission new integrated intermediate care services alongside the NHS that promote recovery and reduce avoidable ongoing care needs.	 Options paper to be presented to Cabinet Plans confirmed for next stage Go live of new contractual arrangements 	• We will have an efficient, cost-effective Intermediate Care service that is easy for people to navigate
Procurement of Live at Home and Integrated Residential Nursing Frameworks	Domiciliary care services in Essex support people to be as independent as possible and remain living in their own home. Services are procured through ECC's 'Live at Home' framework. A similar framework is in place for Integrated Residential and Nursing Care for those requiring a bedded care setting.	 Options paper to be presented to Cabinet Plans for next stage confirmed Go live of new contractual arrangements 	 'Home First' is the norm, enabling people to remain independent in their own homes The quality and quantity of the care home market in Essex is optimised



Activity	Why this is important:	What we will deliver 2024/25	Ambition by 2030
T2030 TRANSFORM	ATION ACTIVITIES		
Mental Health operating model	Person-centred prevention and early intervention services help to reduce or delay the onset of mental health needs and promote recovery.	 Specification & evaluation criteria for a new Operational Delivery Model (ODM) Communications Strategy/Plan Profiles for each locality incl. map of local assets Different forms of contracting with VCSE's Improved methods of finding housing Requirements of the Council for intelligence and recording its Mental Health Social Care activity to fulfil its statutory obligations Implementation strategy & plan for a new ODM 	An Essex-wide approach to Mental Health services has been implemented
Disabilities Strategy implementation	Our 4-year Disabilities Strategy sets out our ambition and commitment to improve the lives of people with disabilities including physical disability, sensory impairment, and adults who have autism or neurodivergence that affects them in a way that they experience to be disabling	 Improved housing options, especially for adults with very complex needs Work with partners like the NHS to improve awareness of disabilities and improve health support Continue to develop supported employment opportunities for those who want to work 	 People in Essex with disabilities have: Good relationships Live somewhere that feels like home Can stay healthy, well, and safe Can do things that are important to them and their community, and that help them to feel part of something – this could include working in a job or learning new things.
OTHER PRIORITY W	ORK		
Day Opportunities	There is an opportunity to re-shape and develop a future model of day support for older people, and for adults with disabilities.	Options paper to be presentedPlans confirmed for next stage	Future model is implemented
Connect – benefits delivery	Connect is achieving great outcomes for older people. It is improving processes and decision making so that more people are discharged from hospital to home; introducing new ways of working to increase people's independence and improving reablement services.	Ongoing delivery and benefits realisation	The approach has improved hospital discharge so that discharge to home is maximised with benefits realised and independence outcomes for residents maximised.



Activity	Why this is important:	What we will deliver 2024/25	Ambition by 2030
T2030 TRANSFO	RMATION ACTIVITIES		
People Waiting	Some people are waiting too long for their care needs to be assessed and regularly reviewed to meet our statutory requirements Increasing numbers of safeguarding concerns are causing delays in response times and our processes do not adequately filter inappropriate referrals or signpost people to alternative support.	 The scale of waiting lists have reduced using a risk-based approach 	 Significant process improvements have been made, minimising the number of people waiting and reducing waiting times
Personalisation	Listening to people's experiences and coproducing services brings citizens into the heart of the design and delivery of the services they use and empowers all involved. We want to develop a clear and consistent approach to coproduction across ASC and ensure that we capture the voice of those with lived experience.	 Lived experience/coproduction framework and toolkit developed Medium term plan in place to improve our approach 	 Lived experience is considered in everything we do and everyone in ASC understands how it relates to their role. We use feedback, and evidence the difference it makes Lived experience representatives on interview panels and in all project teams
Workforce future outlook ASC Design Work	Workforce is key to all we do, and we need to ensure our workforce is the right size and shape and has the capacity to meet expected key challenges. We will address workflow issues and participate in the corporate spans and layers discovery	 Shape and size review of the ASC workforce is completed and implemented 	 Reduced vacancy and improved retention rates Reduced caseloads
Practice Model – Essex Lives	We believe that with the right support, everyone can achieve some independence, and the aim of our service is to maximise people's potential for control over their lives. We will do this by adopting a strengths-based approach to our practice and having a clear framework of practice expectation that highlight the prevention, enable, and support elements of Care Act guidance while promoting the TLAP '1' and 'We' statements to ensure the adult and their carer remains at the centre of all consideration and decision-making.	 Scoping of the work required Development of implementation plan Approach to quality is enhanced and increased 	 Our practice model and quality framework is fully embedded We are delivering a high quality of practice, experience and outcomes for people with social care need.
Shared Care Record	Shared Care Records enable professionals to securely access information about individuals who are supported by multiple services improving efficiency for workers and reducing the need for individuals to repeat information.	 Ongoing practitioner engagement and comms Implementation of new MSE Shared Care Record contract 	- SCR is fully embedded and in use countywide $$17$

3. Building operational resilience and excellence



Activity	Why this is important:	What we will deliver 2024/25	Ambition by 2026
OTHER PRIORITY WORK			
Data Improvement Plan	We have challenges around data quality, and we need to improve how we record, report, and use data.	Complete delivery of the Data Improvement Plan	 A service assurance and performance reporting framework that is well-understood and agreed An effective and assessable suite of self-serve reports A transparent insight work programme which aligns to business needs Improvements to systems and technology tools and capability Clear governance for performance and data issues Leadership and culture change with embedded approaches and accountability for data quality
Digital Strategic Approach	We want to enhance the wellbeing and independence of adults receiving social care services by leveraging digital technology to provide efficient, accessible, and person-centred care.	 Develop a digital strategic approach to: Improve access to services Enhance communications Personalise care Increase efficiency Implementation, investment, and training plan 	 Adults are accessing social care services via user- friendly digital platforms.

Schedule of major procurements 2024-25

			2024 202		025					
Title	Value	Timeline	JFM	AMJ	JAS	OND	JFM	AMJ	JAS	OND
Advocacy Contract	£1.2m as, est £8.6m total contract life value	New contract go-live June 24								
Carers core/short breaks	£1.1m pa, £3.4m contract value (3 years)	New contract go-live April 24								
Care Technology extension	£8m pa on average, £32m contract life (4 years)	New contract go-live March 24								
Live at Home framework contract	£156m pa, £1.1bn over framework life (7 years)	New contract go live July 25								
IRN framework contract	£150m pa, £1.2bn over framework life (8 years)	New contract go live July 25								
Additional Reablement Capacity and Bridging	ARC £5.1m pa Bridging £1.7m pa	New contract go-live Sept 24								
ECL Reablement Service	£19.8m pa, £140m contract value (7 years)	New contract go-live Sept 24								
Day Opportunities	£7.9m pa, £31.6m contract life	New contract go-live Apr 25								
Supported Living Framework	£115m pa, £575m framework life (5 years)	New contract go-live Apr 25								
Transport –	ASC - £1.9m pa £4.8m total decision 3 extensions 6 re tenders									
Extra Care - care & support at various schemes	C£1.6M PA £8M TOTAL DECISION									

NB: this is not an exhaustive list but shows the major procurement activities expected to go forward at the time of producing the Business Plan

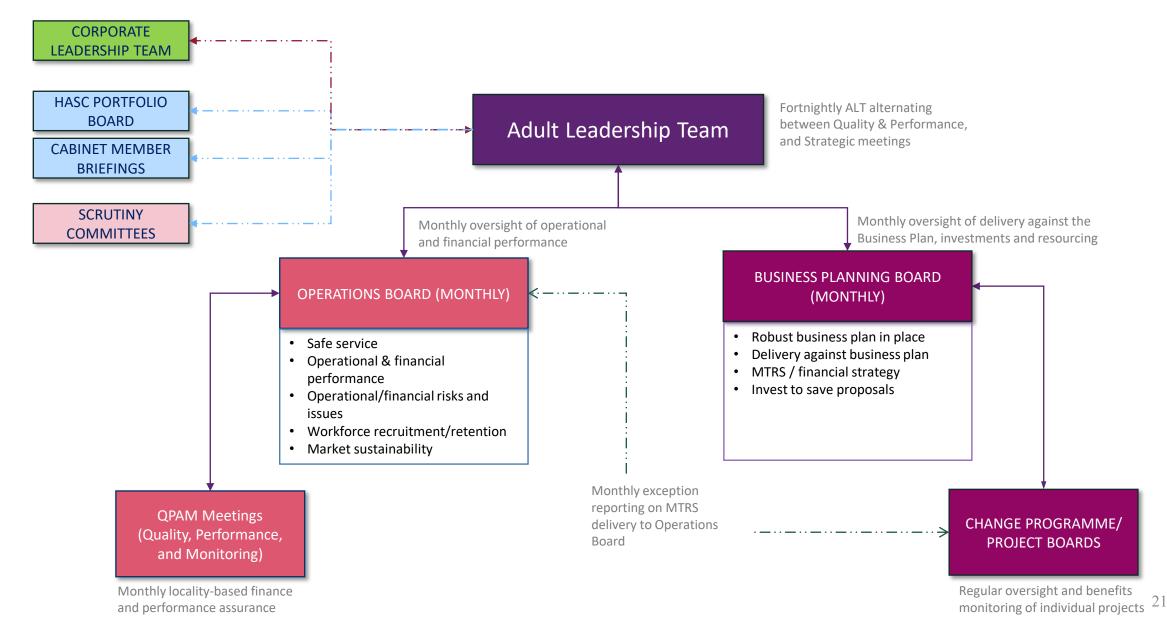
Measuring success

Successful delivery of the ASC Business Plan will be monitored and measured in various ways including regular reporting on progress of projects, programmes and procurements; through reviewing the experience of citizens, workforce and stakeholders; and through performance reporting including progress on the following statutory key performance indicators.

Objective	Measure	Current
Community-based support and early	% carers report information and advice easy to find when needed	58%
help	% adults who draw on care and support report it easy to find information about services	66.4%
Shape the care and support offer	% older people (aged 65+) who were 'still at home' (not receiving a residential or nursing service funded by ECC) 91 days after discharge from hospital into reablement	80.6%
	% adults aged 18-64 with a primary support reason of Learning Disability in long term services living in settled accommodation with their own front door (ASCOF wording "live on their own or with family")	83.6%
	% adults known to secondary mental health services live in settled accommodation with their own front door (ASCOF wording "live independently, with or without support")	27.8%
	Rate of admission per 100,000 population of younger adults (aged 18-64) who have their needs met by admission to residential or nursing care homes	13.2
	Rate of admission per 100,000 population of older adults (aged 65+) who have their needs met by admission to residential or nursing care homes	451.3
	% adults aged 18-64 with a Primary Support Reason of Learning Disability in long term services who are in paid employment	5.5%
	% adults known to secondary mental health services who are in paid employment	17.4%
	% adults who draw on care and support reporting overall satisfaction with their care and support	62.8%
Operational resilience and	% carers reporting overall satisfaction with the support and services provided to them and the person they care for	33%
excellence	% carers who reported that they had been involved or consulted as much as they wanted to be in discussions about the support and services provided to the person they care for	66%

ASC Governance

This shows key ASC governance boards, and the reporting lines to corporate and political leadership



Enabling plans and strategies

The following strategies inform and support delivery of the ASC Business Plan

Essex County Council strategies

- Everyone's Essex
- ECC Workforce Equality, Diversity and Inclusion statement

Essex Health & Wellbeing Board

Essex Joint Health & Wellbeing strategy

Integrated Care Partnership strategies

- Mid and South Essex Integrated Care Strategy (summary)
- Suffolk and North-east Essex Integrated Care Strategy (summary)
- Hertfordshire and West Essex Integrated Care Strategy (summary)

ASC key strategies

- ASC Financial strategy 2022/23 2025/26 (October 2023)
- ASC People Plan
- ASC Data & Insight Plan
- ASC Learning & Development strategy

ASC Commissioning strategies

- Essex Care Market Shaping strategy (2023)
- Market Shaping position statement (2023)
- Essex All-age Carers strategy (2023)
- Essex Disability strategy (2023)
- Essex Dementia strategy (2022-26)
- Essex Domestic Abuse Commissioning strategy
- Specialist and Supported Accommodation strategy (in development)

ASC Locality Business Plans

- Mid Essex
- North Essex
- South-East Essex
- South-West Essex
- West Essex

Alignment to Children & Families services

The shared vision of both ASC and Children & Families is to support and enable children and adults to live good lives, get the support they need when they need it, and to be protected from neglect, abuse and harm. We already work closely on allage initiatives including carers, disabilities and advocacy with further opportunities to explore especially in reducing dependency and increasing the independence of children transitioning into adult services.

- **Carers Strategy -** an all-age approach including support for young carers
- Disabilities Strategy especially with supporting young people transitioning from children & families services to adult social care
- Diversity Both ASC and C&F are reviewing equity of access for all residents.
- Family Poverty and Levelling-up, especially for care leavers into education, employment and training
- Developing the infrastructure for, and piloting use of electric vehicles
- Procure a new social care case management system
- Making information and advice available via Family Hubs
- SEND improving employment opportunities and better preparing young people for adulthood
- Inclusion Framework to ensure children with SEN have opportunities to be supported in their local communities with local services and resources
- Essex Social Care Academy provides continuing professional development for both adults and children's social care workforce
- Risk in the community to support young people at risk of exploitation as they become adults
- Mental Health and wellbeing supporting children and adults experiencing stress, anxiety, or mental illness

Alignment to Public Health

As a key principle of our practice model ASC works in partnership with others to consider at every contact whether a person has needs that can be prevented, reduced or delayed and encourage people to be more proactive about their health and wellbeing. reb

The Wellbeing, Public Health, and Communities Business Plan is organised around 5 key themes: productive partnerships; place-based public health; prevention; public health priorities; and mental wellbeing.

Key Public Health initiatives which provide opportunities for alignment include:

- Essex Wellbeing Service, which provides access to a range of support including health checks, stop smoking services, weight management, befriending, emotional health and wellbeing support. It also provides enhanced support for Carers.
- **Specialist Public Health Service** which commissions drug and alcohol interventions; Healthcare public health advice; Health & Justice services.
- Active Essex: our Sport England designated Active Partnership for Greater Essex, leads on delivery of a 10-year strategy Fit for the Future and delivers multiple programmes to increase physical activity in Essex. It operates with a place-based delivery model made up of 5 hubs.
- Strengthening Communities Service which works to create conditions to enable communities to respond to societal challenges and commissions community infrastructure development.
- Addressing the issue of premature mortality in people with Learning
 Disability and improving our understanding of the Disability Adjusted Life
 Expectancy so that we can begin closing the gap



This information is issued by: Essex County Council

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The information contained in this document can be translated, and/or made available in alternative formats, on request.

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