

Adult Social Care Self Evaluation Framework

REDACTED VERSION

City of London Corporation

FEBRUARY 2025

Contents



Summary and what works well	3-5
Areas for development 2025/26	6
City of London and the City of London Corporation	7-14
Theme one – working with people	15-32
Theme two – providing support	33-60
Theme three – safety in the system	61-70
Theme four - leadership	71-80
Progress on areas for development 2023/24	81-83

Summary



The City of London is unique. High life expectancy and a high number of people who sleep rough are our key drivers for the need for health and social care support.

Overall, our practice and services for residents are an excellent quality, based on a personalised approach. We recognise and respond to challenges around complexity of needs with proactive and innovative responses which are at the forefront of our approach.

We are proud of the support that we provide for people to maintain their independence at home for as long as they are able and wish to and enable them to achieve positive outcomes. This is reflected in the strong feedback we receive from the people we support about our social workers and practitioners and the care and support that they provide.

Our excellent strengths and relationship-based approach is delivered by our stable, experienced, generic workforce, supported by strong partnership working across the health and care system.

Engagement and co-production is a key principle of our work but continues to be strengthened, recognising and valuing the individual, unique experiences that people bring.

Our Safeguarding practice is robust with comprehensive governance and oversight through the City and Hackney Safeguarding Adults Board and a specific City of London sub-group.

There is strong political support for Adult Social Care with governance and scrutiny provided through the City of London Corporation's (City Corporation) system of committees and boards. This political support has also protected a solid financial base for adult social care and has secured growth funding to help meet increased demand and complexity of need.

We continue to strive for excellence, which means we are always looking to develop and enhance our services. These include, but are not limited to, further strengthening our partnership work, data collection, communication and co-production and engagement with residents.

What works well



There is **strong satisfaction** with our services - 64% of Adult Social Care Service users are extremely or very satisfied with the service they receive.

Our **strengths-based approach** that focuses on the abilities and potential of our residents rather than their limitations.

Our firm commitment to being **anti-racist in everything we do** ensuring equity and inclusion are at the forefront of our services.

An **experienced and knowledgeable workforce** with **high staff retention rates**, means we know our residents well and foster positive relationships which delivers effective support.

A strong **hospital discharge model** built on a co-ordinated, multi-agency approach. We are agile and responsive and local authority delays are minimal.

There are **no waiting lists** for assessments. People are seen promptly, 70% of Supported Self-Assessment were completed within 28 days (year to date), and 81% of the ongoing reviews were completed within 12 months of the previous one.

Partners told us...

"The Adult Social Care team knows its clients well, have a great understanding of their complex needs, and respond quickly".

What works well

We meet need effectively through an **agile and flexible commissioning model**.

Effective **Quality Assurance Framework** that reflects our **continuous improvement**.

Local **well-established integrated care models** with a range of partners enhances our ability to provide holistic and effective care.

Safe and personalised responses to our residents through robust and rapid professional responses to safeguarding.

Stable political leadership and **robust and effective financial management** provide stability to our Adult Social Care Service.

Transparency and trust are fostered through **visibility and accessibility** of Senior Management.

Shaping our services with the **engagement of residents and service users**.

"The City Corporation has developed a robust quality assurance framework and clearly welcomes independent challenge and scrutiny... There is an obvious commitment to continuous improvement and a determination to avoid complacency in a service which is already highly performing in many areas. The Board has clear priorities for development, which include strengthening the voice of the service user in assessing the quality of practice and identifying areas for improvement."

John Goldup, Chair Adult Social Care Quality Assurance Board

"It seemed fundamental for carers like me to be involved with a service which will affect us directly. I felt we raised important challenges on weighting of scores and we were able to create our own set of questions for panel interviews."

City of London carer involved in the recommissioning of the carers support service

Areas for development



Actions	Proposed Outcomes
1. Enhance co-production and resident engagement	Services meet the needs of our residents and increased residents' satisfaction on provided services
2. Communicate the prevention offer collaboratively with our partners	Our partners have a strong knowledge of the prevention pathways and empowering them to signpost to community offer
3. Develop an innovative staff development programme through partnerships with neighbouring local authorities	An enriched programme of development activity that supports all staff progression
4. Strengthen collaboration with health partners	City of London has a multi-disciplinary approach to health needs that meets the needs of its residents
5. Implement improvements in how we capture and respond to feedback from clients	Improved engagement from residents that enables us to respond to emerging themes
6. Increase uptake of the Disabled Facilities Grant	Residents who need support in their own home and allow people to support their independence
7. Enhance data quality and utilisation across partnerships	Our data and that of our partners enrich and contribute to service delivery for our residents
8. Strengthen our partnership work with the voluntary and community sector	Improved communication and collaboration channels with the community and voluntary sector
9. Expand on the places we communicate our offer in, such as libraries and other community settings	Residents are more aware of what our offer is and where they can access support
10. Improve our robust data management practices	Improvement to our recording tools that strengthen performance oversight

The City of London and the Corporation



The City of London is the oldest and most historic part of London

The Square Mile is the financial centre of the capital

Smallest local authority area in the country at 1.12 miles

The City of London borders seven other local authorities

We have a unique system of administration with the Court of Common Council overseen by the Lord Mayor at the top

We have 100 elected Common Councillors and 25 Aldermen

Our work is overseen by the Community and Children's Services Committee

We provide local and police authority functions

There is one GP Practice in the City of London which has around 75% of residents registered (20% registered in Tower Hamlets)

Due to our size, there are no residential, nursing or supported living units in the City of London

Over 670,000 workers.
Millions of visitors each year

The City of London and the Corporation



42% of the City of London's population is from a black or global majority background

We have 8579 residents, 14% are aged 65 and over

There is high life expectancy in the City with females having a life expectancy of 90.7 and males 88.8 years



There is a high number of rough sleepers – 656 in 2023/24

There are pockets of affluence and deprivation in the Square Mile, particularly in the East



Our Adult Social Care workforce is stable and experienced. Given our small size it is a generic service

The City Corporation



The City Corporation adopted its Corporate Plan in 2024 which sets out a series of deliverable Outcomes of focus.

Adult Social Care contributes to three of these Corporate Outcomes:

Providing Excellent Services

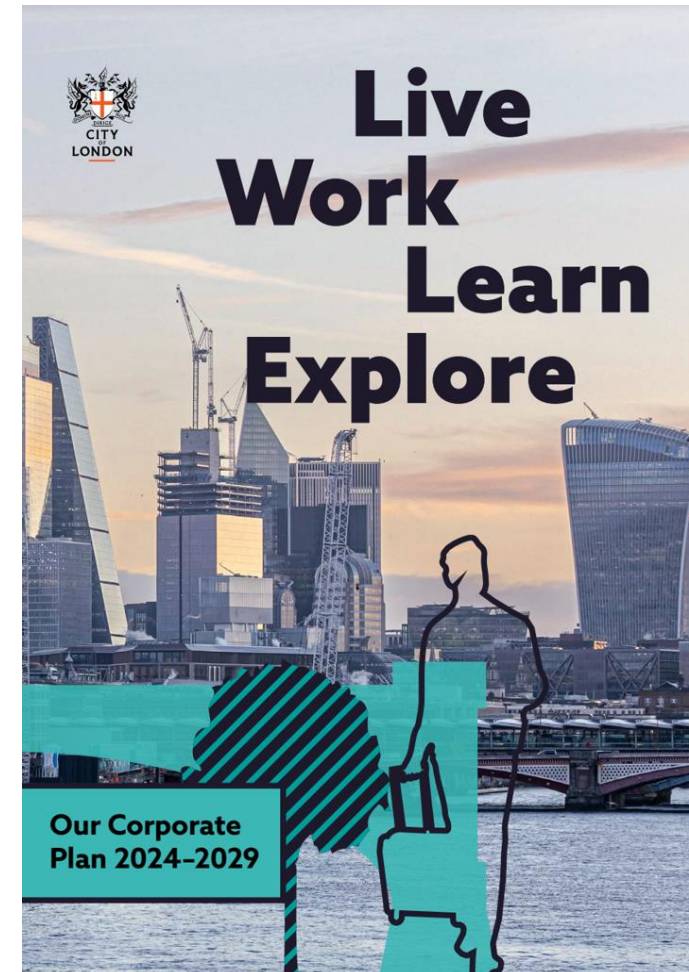
Supporting people to live healthy, independent lives and achieve their ambitions. Effective adult social care services are a vital part of this.

Diverse Engaged Communities

Everyone should feel that they belong. Connecting people of all ages and backgrounds will help build diverse, engaged communities that are involved in co-creating great services and outcomes.

Vibrant Thriving Destination

The City of London is a safe and secure location and providing the appropriate physical spaces to support people is integral to create a place where everyone prospers.



Department of Community and Children's Services



The Department of Community and Children's Services (DCCS) at the City of London Corporation is responsible for vital local authority services, including Children and Adult Social Care, Housing Homelessness and Rough Sleeping, Public Health, SEND, Libraries and Community Safety.

DCCS also shapes key strategies for Adult Social Care, SEND, Joint Health and Wellbeing, Homelessness and Rough Sleeping, and Carers .

These strategies are underpinned by our commitment to improving the lives and wellbeing of everyone who lives, works, studies or visits the City of London.

DCCS objectives

Safe: People of all ages and all backgrounds live in safe communities; our homes are safe and well maintained and our estates are protected from harm.

Potential: People of all ages and all backgrounds are prepared to flourish in a rapidly changing world through exceptional education, cultural and creative learning, and skills which link to the world of work.

Independence, Involvement and Choice: People of all ages and all backgrounds can live independently, play a role in their communities and exercise choice over their services.

Health and Wellbeing: People of all ages enjoy good mental and physical wellbeing.

Community: People of all ages and all backgrounds feel part of, engaged with, and able to shape their community.

Adult Social Care: Our ambition and aspirations

Our ambition

To create and sustain a compassionate and inclusive system that empowers individuals to lead fulfilling lives with independence, control, choice and dignity. We aim to prevent and delay the onset of care needs, with our communities empowered to remain and return to independence. A skilled workforce will provide person-centred care driven by the unique needs, culture and context of each individual, promoting their well-being and enabling them to contribute meaningfully to their communities. Excellent services - built on effective partnerships and integration – will provide better outcomes and more efficient delivery.

Our aspirations for adults with care and support needs:

- receive the right support at the right time
- experience equity and equality
- recognise each person's self-defined strengths, preferences, and needs as the basis for providing care and support to live an independent life that is appropriate to their needs
- act in their best interests
- manage their own care through use of direct payments
- have opportunities to share their experiences and expertise to shape their lives, our services and our strategies

Our aspirations for the delivery of adult social care services:

- help people meet their own needs and aspirations in a safe and supportive way
- share a determination to evaluate and improve services based on robust evidence of need
- support a skilled, knowledgeable workforce that responds to a range of needs and opportunities
- provide clear, accessible information and processes so families know who does what and where to get the right information or access the right services
- work collaboratively and innovatively based on shared understanding, knowledge and experience of the families we work with
- make a difference to the daily lives and long-term ambitions of the people we work with

Adult Social Care: an overview

Performance Overview

Strong Satisfaction

64% extremely or very satisfied with our service

Assessments

70% completed within 28 days

DoLS referrals

11 days on average from referral to sign off YTD

Carers

91% of carers with an up to date support plan

Ongoing reviews

81% completed within 12 months

Contacts

44% of contacts and referrals are completed within 2 working days

Appeals

0 appeals YTD

Direct Payments

32% Take up rate

Mental Health Assessments

Average 2 per quarter

Hospital discharge

31% delayed discharges, 2% of these due to the local authority

Residential and nursing care

12 permanent admissions into nursing or residential care YTD

Making Safeguarding Personal

83% Fully or Partially met YTD

Rough Sleepers

90% had a review of their care plan within the last 12 months

10 adults living in nursing care

21 adults living in residential care

19 adults living in supported living

78 adults receiving community care

Adult Social Care: an overview



Adult Social Care service users



Data for 2023/24 shows that a total of 295 individuals engaged with Adult Social Care services. This includes those who received assessments, ongoing support, or other forms of assistance. Our analysis provides insights into the demographic composition of these users, including ethnicity, age, gender, and service usage patterns.

Ethnicity Breakdown: Our adult social care users are predominantly White-British, comprising 53% (157 users). The second-largest group is White-Other at 13% (39 users), followed by Asian (12%), Black (5%), Other (2%), and Mixed (1%). Additionally, 14% (41 users) have chosen not to disclose their ethnicity.

Age Trends by Ethnicity: White-British users, typically older individuals, have the highest average age at 73, followed by White-Other users at 66. Asian users, though also older, have a slightly lower average age at 60. Black users tend to be the youngest demographic, with an average age of 58.

Gender Distribution Across Services: Short-Term Support and Carer Support services have a predominantly female user base, at 72% and 67%, respectively. In contrast, Nursing Care has a higher proportion of male users, making up 64% of its user base.

Ethnicity Representation in Services: Nursing Care is exclusively used by White-British individuals (100%). Residential Care also has a high proportion of White-British users (78%), while White-Other users are most represented in Residential Care (17%) and Community services (15%). The highest proportion of Asian users is found in Carer Support services, where they make up 27% of users.

Age Distribution Across Services: The oldest user groups are found in Short-Term Support (81), Nursing Care (77), and Residential Care (78). In contrast, Community services (70) and Carer Support services (63) serve the youngest users on average.

Theme one: working with people



We are committed to empowering individuals to proactively manage their health and wellbeing, thereby enabling them to maximise their independence, exercise choice, and maintain control over their lives.

Our support aims to facilitate healthier lifestyles and, wherever feasible, reduce the future need for formal care and support services.

Supporting people to live healthier lives

Prevention

Our strategic objectives set out in the Adult Social Care Strategy are underpinned by a strength-based approach and a commitment to supporting early identification of need with a flexible, agile and person-centred response from Adult Social Care and partners.

"Oh yes, I used the shoes. They are a little bit tight, but I used them when going out, I hadn't been out of the house since being discharged from the hospital and was able to"

City of London resident, Early Intervention Scheme

Operationally this includes:

- Occupational Therapy and Trusted Assessor support. Capacity of these services has increased in recent years
- Disabled Facilities Grant and Housing Assistance Policy which aims to support disabled people to maintain their independence at home
- an innovative early intervention scheme (see next page)
- rapid response service which includes provision to prevent hospital admission and a discharge to assess scheme (see section on providing support)
- reablement, that is delivered by the same organisation that provides the rapid response service, creating the opportunity for a strong follow-on pathway
- referral to a relevant voluntary or community sector organisation
- Welfare calls and visits through Strengths-Based Practitioners.

Supporting people to live healthier lives



Early Intervention Scheme

Innovative scheme which was developed in 2022 and provides funding to empower practitioners, together with a resident, to identify and implement low-cost one-off interventions which help improve wellbeing and in turn prevent, reduce or delay needs. This has included things like a microwave so that someone was able to have hot food to eat, a dementia radio and an emergency mobile phone so that someone could contact their support network in periods of mental health crisis.

During 2023/2024 13 adults benefitted from the scheme with 24 separate purchases with a total cost of £4040. From April – December 2024 there were six interventions.

"Having the support from management to use my initiative and listen to what would actually be helpful to the service user, led to improved outcomes for clients and improved relationships. I could show to clients that we actually do want to help in a person-centred way and prioritise what they need to make meaningful change."

City of London Social Care Practitioner, 2024

Information and advice



Information and advice is a key principle underpinning our preventative approach.

[Adult Social Care leaflets](#) are available, providing residents with information on what support and services are available.

Skilled and experienced duty workers in ASC who information and advice at initial contact.

City Advice is the commissioned service which provides a wide range of advice including on social care.

Practitioners provide a range of preventative advice. For example, to a carer about registering their carer status with the GP, how to apply for carers allowance and how to access the carers support service.

Our residents tell us that...

They would like one place where they can get all information about local authority and health services, voluntary sector services and volunteering opportunities. As a result, work is underway to further develop an online directory for City and Hackney called Finding Support Services. This will be re-launched in 2025 and includes health, social care and voluntary sector services.

City Advice

City Advice is a commissioned service provided by Toynbee Hall who work alongside people facing poverty, injustice, and inequality

It provides tailored advice on a range of issues including cost of living pressures and information and accessing social care services.

In 2023/24, the service received 18 requests specifically relating to social care.

It provides a culturally appropriate service accessible to our diverse community.

Engagement and co-production



DCCS has reviewed its approach to engagement and co-production and adopted a specific co-production and reward and recognition policy.

It is also signed up to and part of system wide engagement work such as the City and Hackney health and social care co-production charter.

Adult Social Care continues to strengthen its activities, for example establishing a service user Adult Social Care Advisory Board and is aiming to increase the diversity of residents and service users engaged with.

Engagement activities informed the development of the Adult Social Care Strategy, and the [Carers Strategy 2023-27](#) was co-produced with carers who presented the strategy to Committee for approval.

"As a user of the City carers support service, I really appreciated the opportunity to use my lived experience to input into the recommissioning process. I felt my opinion was valued and helped shape the design of the new service." - City of London carer

Co-producing the carers support service

The City of London's carers support service was recommissioned in 2024. With support from the Commissioning Manager, carers:

- responded to a call for volunteers to be involved with the recommissioning process.
- reviewed the current service and co-produced the service specification to go out for tender
- completed evaluation training to support their engagement
- informed tender weighting and questions
- were part of the bid evaluation process
- co-produced tender outcome letter
- took part in a review of what went well and how the process could be improved in the future.

Plans are being put in place for carers to be involved in contract monitoring.

Tackling inequalities

A strong departmental commitment to equality, equity, diversity and inclusion (EEDI) is demonstrated through the DCCS EEDI Group which is an all-staff forum that drives the promotion and improvement of EEDI within the department.

The Head of Service and Assistant Directors attended the Leadership in Colour Conference and reflections from this were discussed at the People's Senior Management Team meetings and the People's Equality Group.

A People's Equalities Steering Group monitors approaches in this area. Their work has included running a book club for staff to read and discuss the book 'Me and White Supremacy' and shaping the Departmental Anti-Racist Practice Standards.

Anti-racism and cultural competency training

DCCS senior managers undertook anti-racism and cultural competency training to support a shared, consistent understanding.

Two workshops were delivered between July and October 2024. 35 senior managers attended workshop 1 and 34 attended workshop 2.

Most attendees rated each workshop either good or excellent, with 3 giving neutral responses. There were no ratings of poor or very poor for either workshop.

The top words attendees used to describe the workshops included thought provoking, valuable, interesting, informative and challenging.

Attendees overwhelmingly said they enjoyed the time for discussion with colleagues, reflection and sharing personal experiences. This training will be rolled out to all staff within DCCS.

Tackling inequalities

Tackling inequalities is an integral principle of our strengths-based approach. This includes working with partners in the community to take a holistic view of the individual.

Reflection and learning on good practice around recording people's diverse needs in our Care Act Assessments were included as part of internal training on the strengths-based approach. A 2024 audit showed that a Strengths-Based Approach is now consistently included, with no cases found without SBA evidence.

Staff across the Directorate work to anti-racist practice standards which were introduced in 2023 and applied across both Adult and Children's Social Care.

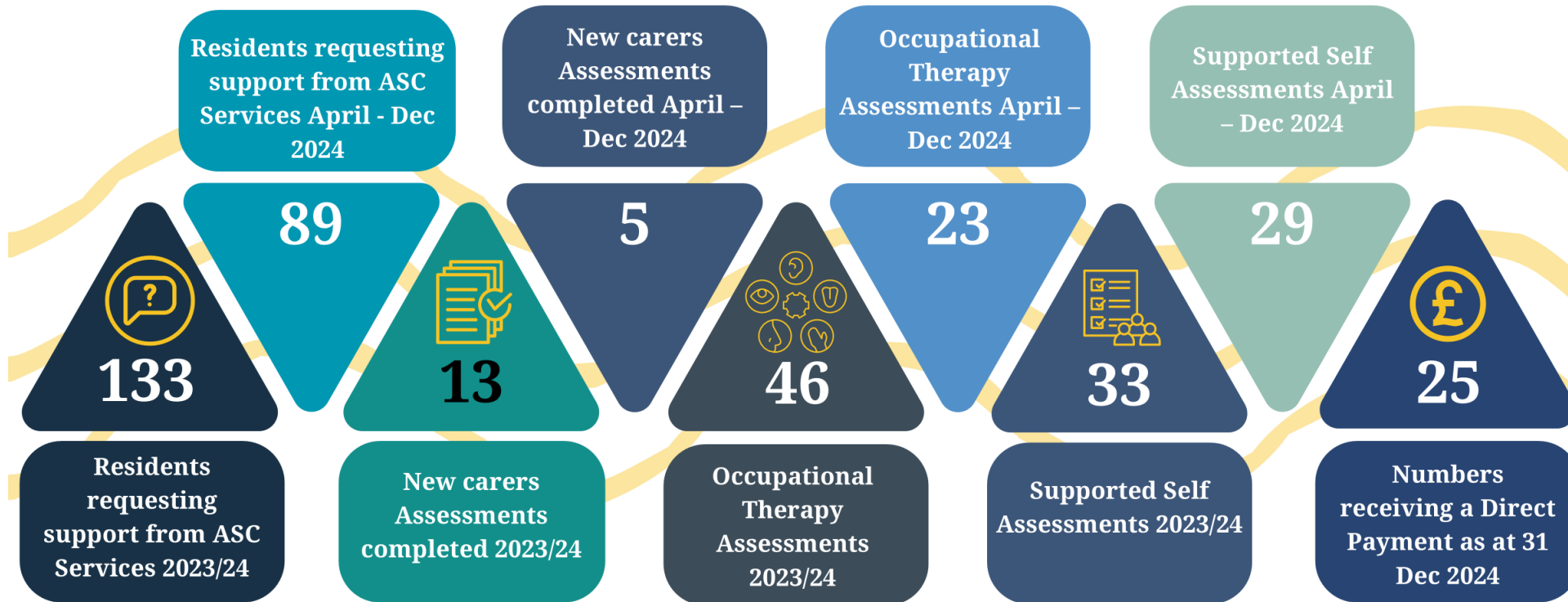
Strengths Based Practitioners and the Care Navigator support people to access various services when needed which can help address barriers to accessing services.

Tackling inequalities – Culturally appropriate support

An individual [REDACTED] required Telecare services and home adaptations. Cultural sensitivity and language barriers were crucial considerations in the support provided.

Our Strengths-based Practitioner helped translate communications sent to the client which helped safeguard them from online harms. Our Practitioner also tailored their communication techniques to support the individual's language needs, as well as understanding the importance of certain religious symbols within the home when carrying out a home visit.

Working with people



Assessing and reviewing needs

Strengths-based approach

The Adult Social Care service adopts a strengths-based approach to assessments, focusing on empowering individuals by recognising their capabilities.

A strengths-based approach supports people to maintain their independence and meet their outcomes and aspirations. It has three core-principles:

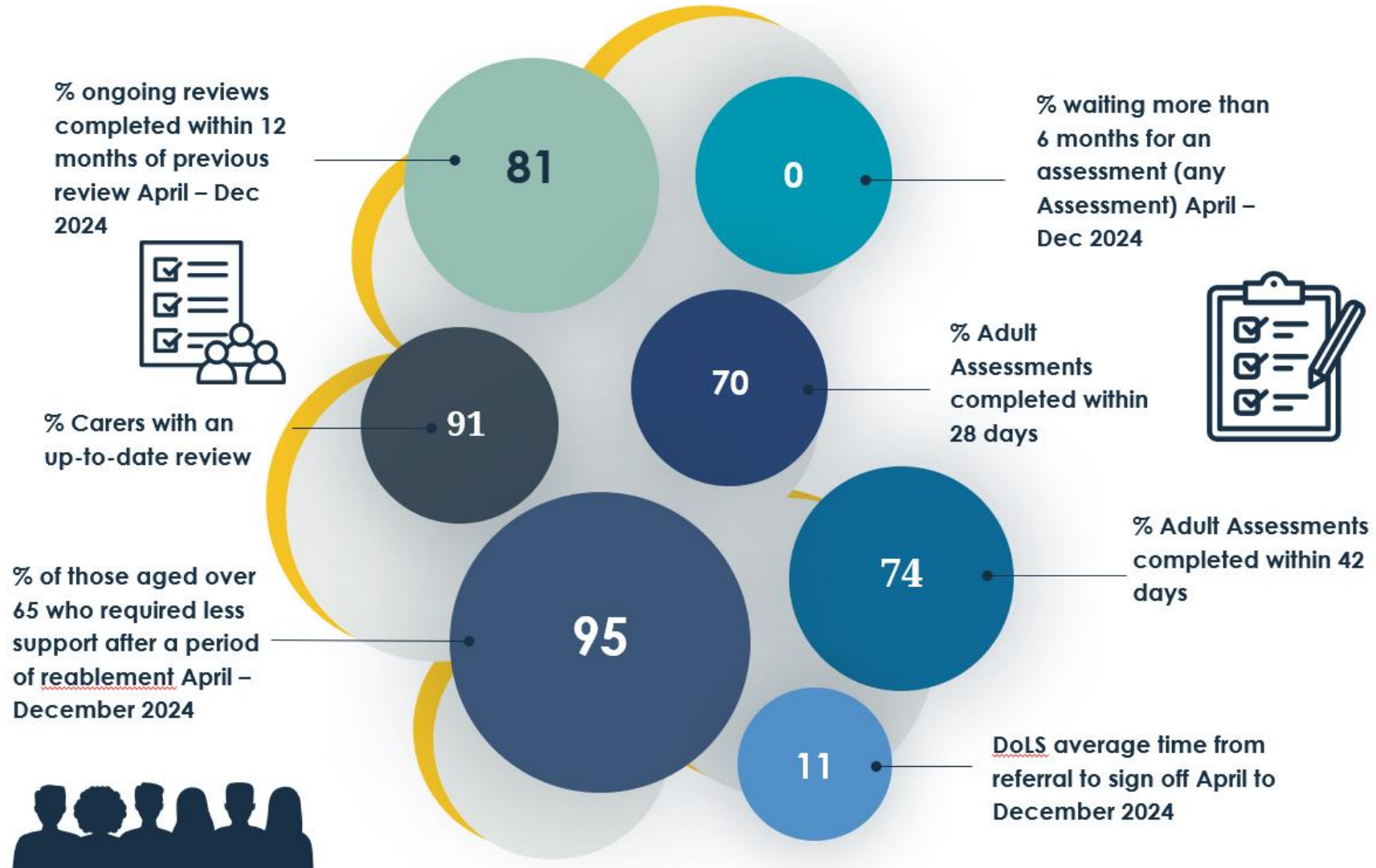
- working collaboratively on mutually agreed goals
- using the community as a resource
- having trusted and workable relationships

This approach has been embedded across Adult Social Care so that the focus is on potential rather than problems and empowers residents to take control, be able to navigate challenges and achieve meaningful goals.

"The strengths-based model focuses on building trust and functional relationships with residents, focusing on the positive elements of the person's situation and how they have coped so far."

Adult Social Care social worker

Assessing and reviewing needs



Assessing and reviewing needs

We do not hold waiting lists for assessments in adult social care. 44% of contacts and referrals were completed within 2 working days and a social worker is allocated at this point when required.

Timeframes remain flexible and responsive, carefully aligned with the wishes, needs, and potential risks faced by the individual and their family. However, these timeframes can also be influenced by external factors, such as the need to facilitate the timely discharge of a patient from hospital, ensuring continuity of care and support. Carrying out a Care Act assessment with someone who is rough sleeping presents a particular set of challenges that may mean having to extend the length of time to complete.

In line with our practice standards, there is a commitment to completing assessments at a pace suitable to the adult, expected to be within a standard timeframe of 28 days in most situations. In cases where complexities arise—such as challenges in gathering the necessary information—this may extend to 42 days.

"Practitioners maintain a high-level of good practice, with some examples of excellent practice. Social workers understand the assessment process as a conversation, they co-produce outcomes with the adult/carer, empower people to lead on their care and support arrangements... Professionals can reflect upon differences between people, their values, beliefs, and lifestyles with respect and are sensitive of their basic cultural characteristics."

Internal strength-based practice
audit March-May 2024, July 2024

Assessing and reviewing needs

Assessment times form a vital part of our performance monitoring framework, ensuring we consistently deliver a service that balances efficiency with a person-centred focus. In the year to date, 19 supported self-assessments were completed within 28 days and 20 within 42 days.

A commissioned advocacy service is available for those who require it. At the end of December 2024, there were 15 open cases of advocacy support.

Carers receive their assessments from qualified social workers. In 2023/24, 13 carers received an initial assessment and 5 between April and December 2024. Carers assessments can also have a positive impact on relationships between the carer and the cared for, for example by reducing stress.

At the end of December 2024 91% of carers had an up-to-date support plan.

Where there is an immediate need evident, a package of care would be provided whilst the assessment is carried out.

The services of the Language Shop in Newham are used to respond to requests for language interpretation services and to facilitate effective communication across multiple languages including Bengali/Sylheti, British Sign Language and Japanese. This ensures the communication needs of the City of London's diverse population are met.

Assessing and reviewing needs

Adult Social Care is part of the transitions Forum which reviews and plans for young people with disabilities or young carers as they start to approach adulthood. From 14 years old, the Forum considers whether a young person may require support from Adult Social Care when they turn 18 and whether it would be of a significant benefit to them to conduct a transition assessment. There are currently 5 children on the register. The adult assessment will be completed by the adult social worker who is already involved in the young person's case, collaborating with other professionals and getting to know the young person over time.

In terms of reviews, there has been an improvement in performance for reviews of care and support plans within 12 months from 67% in 2023/24 to 81% between April and December 2024. At December 2024, 91% of carers had an up-to-date support plan. This is well above general performance across London and delays are often due to personal choice or circumstances of the individual concerned.

"The City of London benefits from an experienced and united team delivering occupational therapy, trusted assessment and reablement services... The uniqueness of the City of London in terms of population and workforce supports relationship-based practice... Conversations with residents confirmed they were very happy with the [service], valuing their input, often feeling more independent because of the intervention."

Independent review of the occupational therapy, reablement and trusted assessor service in the City of London, May 2024

Direct Payments



The Adult Social Care service promotes the availability of [Direct Payments](#) to support people's aspirations, their wellbeing and independence.

The take up rate of direct payments is 32% as of December 2024 highlighting the success of our approach to promoting them as a preferred option to empower people to purchase their own care.

In terms of support provided to carers, from the 30 Carers that have an active Care and Support Plan, 73% receive direct payments to meet their needs.

Quality of practice in this area is included in the annual audit schedule.

In the past year, no individuals receiving a direct payment returned to having their care arranged by the local authority other than one individual who moved into accommodation based support.

Examples of Direct Payment use includes:

- Choosing a preferred home care agency
- Hiring a Personal Assistant (PA) to help with care and support
- Gym memberships, swimming and recreational sport activities
- Training courses, such as becoming a personal trainer, how to publish a book online, and accountancy.

"I like receiving a Direct Payment as it offers me flexibility how my care arrangement is provided."

City of London Direct Payment client feedback

People's experiences and outcomes



Adult Social Care Survey 2023/24: 67.3% of service users were very or extremely satisfied with the care and support they received. No service users recorded that they were dissatisfied. The City of London is well placed on this measure, being above the mean for both London and national local authorities.

In both this survey and the Survey of Adult Carers in England, the issue of social isolation was evident with 36.8% of social care service users and 17.6% of carers saying they had as much social contact as they would like. This is an area of focus for us and we are working with a voluntary sector organisation who have submitted a grant bid to provide a befriending service in the City of London.

In terms of service delivery, people do not have to wait for an assessment and assessments are completed promptly.



Forget Me Not Café service user

People's experiences and outcomes



In 2024, our Adult Social Care service received positive client feedback, with no negative comments received. Despite this, we established a feedback loop, which includes regular reviews, allowing us to translate this positive feedback into tangible service improvements.

Recent service improvements as a result of feedback received include:

- briefing our Adult Social Care Team on good practice and improved information and advice as a result of findings from the audit
- improved information and advice available to residents
- updates to our website providing more information and advice in an easy to access place

As part of the continuous feedback loop, any feedback that is received is reviewed and necessary improvements are made where required.

Quality assurance



There is a strong golden thread and connection from management to operational practice with annual direct observation of practice from the Executive Director of Community and Children's Services, the Assistant Director of People and the Head of Adult Social Care.

An Adult Social Care Assurance Board, with an independent chair, provides focus and continued drive for excellence, as well as a strong and well engaged Health and Wellbeing Board.

There is a clear timeline of all quality assurance activities which facilitates the triangulation of results, including residents and staff in reviewing practice and outcomes.

Independent practice audits are commissioned when required, e.g. review of the occupational therapy, reablement and trusted assessor service. Internal audits have included management oversight and a strengths-based practice audit.

The Principal Social Worker role is designed to strengthen practice governance.

Quality assurance



Quality Assurance Framework

A Quality Assurance Framework for Adult Social Care was updated in 2024 and reviewed annually to provide a foundation for continuous improvement using a range of methods.

The Framework sets out: relevant standards; how we support our workforce to ensure good practice; expectations around evaluating the quality of practice; the quality assurance of commissioned services; the role of external and independent assurance activities and performance management.

The Framework is essential in ensuring the delivery of high-quality services. The learning cycle model used provides a systematic approach to monitoring and improving the quality of care provided, ultimately enhancing the overall experience and outcomes for those receiving adult social care services.

Recent Thematic Audits

1. **Mental Capacity Assessment (July 2024)**
2. **Management Oversight (Sept 2024)**
3. **Feedback from adults and their carers (March 24, Feb 25)**
4. **Prevention review (Feb 25)**
5. **Carers Assessment (underway) (Feb 2025)**

Theme two: Providing Support



We are committed to working in collaboratively and transparently with partners ensuring the individual's needs are central to what we do. Our stable, knowledgeable workforce delivers an asset-based approach providing holistic support to those who need it, when they need it.

Providing support



Market shaping and commissioning

With an ageing population and greater emphasis on choice, control and community-based support, we have worked to adapt our services to this changing social care market. This includes a greater focus on home care, specialist mental health provision and supported living that enables independent living. Where those with needs require extra care and support in their daily lives, care home placements within residential and nursing settings or more complex packages of care are commissioned.

We commission 24 Adult Social Care Services which span a range of provision, including homecare, direct payments, community equipment, technology enabled care services, and early intervention and preventative services. These services are commissioned in line with our Procurement Code, and we do not block contract care arrangements due to our lower volumes of demand due to our population scale.

These services are either secured via a procurement or service level agreement, spot purchased or provided by the voluntary and community sector.

Securing a sustainable care market

We ensure that the range of diverse needs in the population are met through the specification and contract monitoring process. In commissioning its provision, the City Corporation requires a CQC rating of Good or above, compliance with the Unison Ethical Care Charter, payment of the London Living Wage and market-sustainable prices.

We are confident that the current care market position is sustainable within the City of London. Analysis of rates paid by neighbouring authorities suggests that the City Corporation pays a sustainable and fair rate especially when taking into consideration low homecare demand levels within the City of London.

Market shaping and commissioning

North-East London Integrated Care System

We are part of the North-East London Integrated Care System, which prioritises co-designing services that prioritise prevention, community-based support and seamless health and social care integration. We participate in a range of work such as developing a new continuing care model and a piece analysing bed based and home-based care usage across the whole NEL system.

Continuity of care

If and when provider failure occurs, we manage it through our contingency plans as we do not block book placements or commission through one individual provider. We have not experienced any provider failures or commissioning embargoes in the past 12 months. We monitor CQC safety alerts and if there were any concerns, we would work with the provider and the individual to seek assurance, develop a way forward and manage risk effectively.

Our Commissioning Approach

Commissioning and procurement strategies are developed through a comprehensive approach. This includes analysing historical and current service needs, incorporating feedback from co-production initiatives, and utilising data from sources like PANSI, POPPI, London ADASS, and the Joint Local Health and Wellbeing Strategy. Market analysis of costs and capacity is also conducted, alongside exploring collaborative opportunities with neighbouring local authorities to optimise service delivery.

Market Position Statement

Our vision is to build a person-centred care system tailored to the City of London's unique circumstances. To assist with achieving this vision, we developed a Market Position Statement which sets out our commissioning priorities to shape the social care market.

Within 2023/24, we spent just over £3.6 million on commissioned social care provision, which primarily consisted of: home care, rapid response and reablement; Direct Payments; Residential and nursing; Supported living; Community equipment; Assistive technology; Carers services; Advocacy.

Market shaping and commissioning

Home Care

Quality home care is a vital aspect of the City Corporation's aim to enable people to remain in their homes for as long as possible. These services assist people with the tasks of daily living, usually in their own homes. The City Corporation currently commissions one care home agency to provide home care to residents within their homes in the City of London and has been doing so since June 2022 following a successful market exercise. Currently 78 people receive this home care service.

Supported living

The City of London currently has 19 people living in supported living accommodation as of December 2024. The City of London has no accommodation-based support within its boundary and therefore individuals are placed based on client need and choice within the area of other local authorities mainly within the Greater London region.

Residential and nursing care home

The City of London has no residential or nursing care homes within its boundary. Therefore, residents requiring residential, or nursing care are placed in care homes situated within other London local authorities or in other areas such as Northumberland, Stockport, and Kent. This spread is driven by client needs and choices rather than market conditions. As of December 2024, there are 10 people in a nursing home and 21 people in a residential home.

Accommodation based support is all spot purchased which provides more agility to meet need and offer choice. Although there is a risk that this could increase costs, this has not been borne out unless there is a very costly package which can skew average unit cost.

Partnership working: the local health and care system



The City of London Corporation is part of the North-East London Integrated Care System and the City and Hackney Place Based Partnership. Priorities for the Place Based Partnership are built around start well, live well and age well, and include a range of activities including further embedding Neighbourhood work (see below).

Along with Hackney, we were pioneers in establishing neighbourhood working in 2017 with eight neighbourhoods established. When Primary Care Networks were introduced, these were mapped to existing neighbourhoods.

The Shoreditch Park and City Neighbourhood covers the City of London and part of the London Borough of Hackney. This brings together local Health and service providers with residents and voluntary and community sector organisations. It aims to provide care and support closer to where people live and improve coordination between services. Resident engagement and co-design is a key principle of neighbourhood working.

We are involved with various Neighbourhood activities. For example, Adult Social Care Social Workers join multi-disciplinary team meetings to discuss complex cases which facilitates shared learning and joined-up working – see case study on page 40.



Partnership working: the local health and care system



We are also involved with Neighbourhood Forums, which facilitate networking and the sharing of ideas, and strategically in the Leadership Group. Residents and service users are involved in the Neighbourhood Forums and there is a specific City of London focused action group from the forum which is identifying areas that they would like to focus on. Current ideas include physical activity and improving mental health.

Our Integrated Programme Board (IPB) reflects the importance of integrated health and social care in the City of London. It brings together key internal and external partners to facilitate and drive change and achieve the best possible outcomes for City of London residents. All within the unique context of the City of London and the local health arrangements. Neighbourhoods are a standing agenda item at the IPB which also acts as a space for external partners to bring ideas, debate and discussion to inform their work, ensuring City of London residents are considered and benefit from initiatives where appropriate.

The City of London Health and Wellbeing Board is a partnership that is responsible for promoting the health and wellbeing and tackling health inequalities of people who live in the City of London. The Board also sets the priorities for the Joint Health and Wellbeing Strategy, which the Integrated Care System helps deliver.



Partnership working: health



Adult Social Care have strong relationships with Health partners including the Neaman Practice and the practices in Tower Hamlets where residents (around 20%) are registered. Social workers are active members of the Multi Disciplinary Team meetings in these practices.

Mental health services are delivered by the East London Foundation Trust through the Neighbourhoods Mental Health Team. Key Mental Health Act duties are also commissioned from the Trust, including assessments, tribunal reports, and Community Mental Health framework responsibilities.

In 2024, the average Mental Health Act Assessments undertaken per quarter was 2. This was a decrease on previous years but a pattern mirrored across Hackney.

There are 37 people that we have responsibility for under s117 requirements.

Multi-disciplinary meetings enable a holistic approach to care, more responsive and proactive services tailored to individual needs, direct access to health colleagues, time efficiency, and reduced professional stress.

Feedback from a social worker emphasised that MDMs are organised, managed, and structured successfully.

"There was evidence of good multi agency working, especially with acute and intermediate care colleagues, the fire service and housing."

OT external practice audit report in May 2024

"Health, OT and physiotherapy colleagues provided critical input on equipment trials and mobility solutions. The district nursing team managed the person's wound care and pressure ulcer prevention. Communication with the GP ensured timely medical reviews and specialist referrals."

OT on partnership working

Partnership working: public health



There is a joint City and Hackney Public Health Service which includes some joint commissioning of services such as smoking cessation and weight management.

A population health hub equips partners across the system to tackle inequalities and a number of initiatives are provided such as Making Every Contact Count (MECC) all of which contribute to a preventative approach.

Our partners told us....

"There is good communication and information sharing between departments and agencies"

Public Health has supported the training of 30 adult social care staff in MECC over the past 4 years.

Two major individual risk factors for social care-related needs among adults are tobacco smoking and obesity.

Public health commissions two relevant services that contribute to both primary and secondary prevention of social care related needs:

- an integrated weight management and exercise on referral service for adults in the City
- a stop smoking service for people aged 12+ across the City (as part of a joint City and Hackney service).

Public Health also funds a falls prevention service in the City, as part of a wider falls pathway, which is currently under review to better respond to the needs of local people.

Partnership working: Healthwatch City of London and neighbouring boroughs



Healthwatch City of London

We have a mature commissioning relationship with Healthwatch City of London. The Department of Community and Children's Services facilitated and supported the establishment of the current Healthwatch in 2019. Since then, Healthwatch have taken on additional work (outside their statutory role) to support us in our co-production efforts including holding patient panels on our Adult Social Care, SEND and Carers Strategy, supporting social care users to complete a national survey of their experiences and establishing and facilitating on our behalf an Adult Social Services User Advisory Group which starts in March 2025.

Neighbouring boroughs

The City of London is bordered by seven other local authorities. We work particularly closely with the London Boroughs of Tower Hamlets (where some of our residents are registered with GPs and where residents in the east of the square mile look to for many of their services) and Hackney. Our partnership with Hackney is particularly strong and includes the sharing of a Public Health Team, being part of a joint Place Based Partnership, and delivering some services on our behalf for example the out of hours emergency duty team. There is also a joint City and Hackney Safeguarding Adults Board. These partnerships enable us to strengthen and add value to our work.

Partnership working: City of London Police



Our partnership with the City of London Police (CoLP) operates through a multi-disciplinary approach across tactical and strategic levels. We collaborate on initiatives like MARAC, Prevent, the Strategic Vulnerability Board and the Rough Sleeping Task and Action Group.

Effective collaboration enhances information sharing between partners and can reduce duplication of work by streamlining activities. This is supported by open, honest and transparent conversations which ensure all, including the resident involved, understand what is happening and any relevant outcomes.

The police are responsive to safeguarding enquiries, participating strategically in the Community Safety and Safeguarding Board and Rough Sleeping Strategy Group, ensuring coordinated multi-agency responses.

Partnership working: housing



We have social housing across two estates within the Square Mile and provide management services to Barbican residential housing. We also have 10 housing estates in six other London boroughs. There are strong working relationships with housing including a Tenancy Support Team which provides a preventative service to vulnerable people and safeguarding training is provided for all housing staff. Practitioners collaborate with housing officers in, for example, situations of high-level self-neglect - such as hoarding - to provide holistic interventions and support to the resident.

The Adult Social Care Occupational Therapy service undertakes assessments for any resident that may benefit from an adaptation or be eligible for a Disabled Facilities Grant (DFG). We have also developed a Housing Assistance Policy which aims to assist a wider range of residents who may not qualify for a DFG, helping them to achieve the home adaptations they need to maintain their independence.

The Occupational Therapy team completes housing reports with the client to support their housing needs based on their requirements of a property to increase their functioning and occupation within their homes. These can also support the medical application and impact on priority for their housing application. Occupational Therapy also supports with consulting on new build properties with regards to design and meeting resident needs where applicable.

Partnership working: voluntary and community sector



There is a small but vibrant voluntary and community sector in the City of London with a mix of commissioned, grant funded and grassroots organisations. These organisations provide important services and initiatives to promote prevention and meet a range of needs. For example, Imago is commissioned to deliver the City of London carers support service and Toynbee Hall the City Advice service.

There is no Council of VCS in the City of London, but we have recently grant funded Hackney VCS (part of the local place-based partnership) to do some support and capacity building with the voluntary and community sector organisations in the City of London to enable them to develop and bid for grants. This project also involves regular City of London coffee mornings where local organisations who are either based in the City of London, have existing links into the City of London or are exploring opportunities in the City of London - such as City and Hackney Dementia Service, Mental Fight Club (for the Dragon Café), Eat Club and Family Action - can come together to network and share ideas.

Partnership with voluntary and community sector organisations is key part of the strengths-based practice model used in the social work team. For example, referrals to City Connections for people who are lonely or looking for specific activities in the community and the Seasonal Health Intervention Network (SHINE) is a one-stop referral system to affordable warmth and seasonal health interventions for residents in the City of London.

Corporately, there is a strong grants offer including a stronger communities grant fund (for smaller projects up to £10,000) and a larger Community Infrastructure Levy Neighbourhood Fund which can provide multi-year grants up to £500,000. Several voluntary sector organisations have been funded through these funds to provides things like a toenail cutting service, an expansion of a community service to tackle social isolation and wellbeing activities for carers. There are also grants currently being considered to provide a befriending service and the expansion of a falls prevention service.

Case study: working in partnership with the voluntary and community sector



The Carer [REDACTED]

[REDACTED] They are linked in with the City Connections service commissioned from Age-UK by City of London. The Carer reports that the caring role can sometimes be frustrating, and they feel they do not have time for themselves. In addition, the Carer speaks English as a second language and can sometimes find it difficult to access services.

[REDACTED], it was important that the Carer was provided with opportunities to have breaks from their living situation by encouraging them to join as many community activities and trips as possible [REDACTED]. City connections had to consider the Carer's religion and culture when planning these with them.

The Carer took part in many of the organised trips. They said that they enjoyed the outings very much as it enabled them to see places in the City. The carer was able to go out [REDACTED] and it helped them make new friends.

[REDACTED]

City Connections linked in with City Advice, to provide an information session. This particular carer engaged with City Advice advocate coordinator, who speaks the same language, and they talk about issues with housing and the support they would like to receive.

Outcomes

By working in partnership with other organisations, key achievements included:

1. Improving the carers general wellbeing and self-confidence.
2. Showed how important multi-agencies working together is in delivering better outcomes.
3. Positive feedback from the carer about the service they received.

Workforce



We are able to build strong, lasting relationships with the people we support because of our stable and experienced workforce. We are proud of our high staff retention rates and minimal reliance on agency workers for our social worker posts. We adopt an innovative and forward-thinking approach to developing workforce capability and capacity, which is reflected in the following key areas:

Generic practitioner model: Unlike many other local authorities, our practitioners develop expertise as generic practitioners, benefiting from a breadth of skills and knowledge that enhances their professional versatility and adaptability.

Manageable caseloads: Each social worker handles fewer than 20 cases, allowing them the time and space to foster meaningful relationships with those they support.

Specialist lead practitioners: Designated lead practitioners focus on areas such as carers, transitions, and mental health. This approach promotes peer learning, encourages professional development, and ensures best practice is consistently upheld.

Dedicated Principal Social Worker: Our Principal Social Worker oversees practice governance and quality assurance while maintaining strong local and national networks that supports continuous improvement across our service.

Wellbeing support: Staff have access to the Employee Health and Wellbeing Hub and a range of team wellbeing tools to ensure they are supported when they need it most.

Workforce



Workforce overview

Between 2021 and 2023, the Adult Social Care workforce remained stable, before increasing to 25 in 2024. This figure included 17 permanent staff and 8 agency staff. Currently, there is 1 agency staff in the team covering an established social worker post.

Diversity and Representation

Women make up over 70% of the workforce, demonstrating strong female representation. The team includes 32% White British, 24% Black, 16% from Any Other White Background, and 4% Asian staff, reflecting our commitment to a diverse team.

Age Demographics and Training

The majority of the Adult Social Care workforce was aged 41 to 60 in 2021 and 2022, with an increase in this age group in 2023 and 2024. Conversely, the 21 to 30 age group saw a decline in 2024.

Our size means that we are not able to support AYSE (Assessed Year in Employment) but we are working to develop a partnership with our neighbouring boroughs to introduce a bespoke model of the programme for the City of London, as well as developing a Social Worker and Occupational Therapist apprenticeship in the future.

We currently partner with Goldsmiths University to support student social workers, and provide training for future practice educators, reinforcing a culture of learning. There are currently 2 student social workers within the Adult Social Care Team.

Our approach to providing support



Adult Social Care promote an asset-based approach to integrated care that builds on existing human, social, cultural, and environmental resources to realise the aspirations of a community. This approach centres on good partnership working with community and health professionals offering the person holistic support.

During care and support planning practitioners share information on:

- voluntary support offers
- housing services
- resources and support available in their local community

People using care and support services are enabled to build social connections and a sense of mutual support, utilising the person's identified existing support network.

Access to peer support services and opportunities for the person to offer peer support using their skills, life experience, and cultural awareness are also offered

Case study: support to transition into a care home



Outcomes

Applied family and person-centred approaches ensured the couple had choice and control over their care. Key achievements included:

- the couple continue to live together, sharing a room in a care home
- the couple are receiving the necessary care for their respective needs.

"We're together, that's the main thing."

"I know we need to be here to get the help we need"

Providing support: carers



There are 30 carers supported by Adult Social Care with a support plan and 4 additional carers are open with ongoing work. Of those 30, 73% receive a direct payment. 91% of carers have an up-to-date support plan.

Carers are provided with support in different ways. A carer could receive direct payments which could be used to join activities to improve their mental and physical health or being signposted to the City of London carers support service or City Advice for benefits and financial advice.

Imago is a commissioned carers support service and there is also a peer support network for carers – City Carers Community - established by residents during the pandemic. Around 90 carers are supported through these groups.

All Carers assessments are undertaken by qualified social workers. We have developed an internal guide for our carers assessments, with a simple checklist for practitioners, which is being audited.

The co-produced City Corporation's [Carers Strategy 2023-28](#) sets out our vision and key priorities for identifying and supporting City of London carers.

There is an elected Member carers champion who champions the needs of carers at Committee and a social worker who is a lead practitioner for carers, sharing good practice and advice with other social workers in the team.

City of London carers support service

Imago delivers the carers support service in the City of London, supporting around 90 unpaid carers including SEND parent carers, City of London residents who may care for someone outside of City of London boundaries and young adult carers aged 16+ living in the City of London.

Imago offers a range of support including information, advice, and guidance throughout the carer journey, support to access specific advice on finance, debt, grants, and benefits, contingency planning and crisis support arrangements, weekly drop-in sessions, regular carer groups, and a range of activities both online and in person to support health and wellbeing with choice and flexibility to attend.

Imago also provides access to free training sessions, such as the Caring with Confidence programme, and support and guidance regarding statutory Carer's Assessments.

Providing support: homelessness and rough sleeping



Our Adult Social Care service provide long-term support for adults who have experienced rough sleeping and homelessness. The majority of these adults are in accommodation-based support such as supporting living schemes and care.

There are a total of 19 supported living placements across all of Adult Social Care as of December 2024, 10 of which are former people who sleep rough. 90% of them have a review of their care plan in the last 12 months.

As of December 2024, there were 21 permanent residential care placements open to ASC, 10 of which were for adults who previously experienced rough sleeping or homelessness. 90% of them have a review of their care plan in the last 12 months.

As part of our support to people who sleep rough, the City Corporation invested in a building for a dedicated Rough Sleepers Assessment Centre and high support hostel within the City of London, unifying this support in one physical location. This opened in March 2024. The Homelessness and Rough Sleeping Social Workers works closely with this provision.

Homelessness and Rough Sleeping Social Worker and Strengths-based Practitioner

The joint funding of the Homelessness and Rough Sleeping Social Worker (HRS) role enables the capacity and expertise to undertake work with adults at the 'edge of care' as well as those meeting the statutory criteria for support under the Care Act.

HRS social worker operates with a caseload in the region of 18 adults, half of which are likely to be with the preventative cohort, although numbers may vary with demand.

There is also a Strengths-based Practitioner who is embedded in the homeless and rough sleeping team.

Case study: homelessness



An individual had [REDACTED] being denied leave to remain in the UK they [REDACTED] were unable to obtain secure accommodation.

The primary aim was to provide stable housing, healthcare, and support for the individual, who faced homelessness and severe health issues.

The individual was admitted to hospitals for treatment [REDACTED].

The individual was provided with supported living accommodation and financial assistance.

Referred to Praxis immigration advisors and successfully obtained leave to remain in the UK.

Registered with a GP, [REDACTED] services, and provided with necessary equipment.

Outcomes

A holistic, strengths-based approach involving multiple agencies, including the City of London, healthcare providers, and immigration advisors addressed the individual's needs, including:

1. The individual's immigration status has been resolved.
2. Stable housing, financial support, and access to healthcare.
3. Renewed purpose and hope for the future.

Providing support: hospital discharge

There are between 100 and 120 hospital discharges of City of London residents each year from a range of hospitals – mainly Royal London and University College London Hospital. All community health services come from Homerton regardless of GP you are registered with or which hospital you are admitted to. With the risk of people falling between the gaps, we established an innovative care navigator role.

Our hospital discharge model is robust. For the first three quarters of 2024/25, 31% of discharges were delayed but only 2% of these were due to the local authority and were less than 3 days. 20% were a combination of health and the local authority.

Level of demand dictates that the model is not a 7-day model. Any planned hospital discharges over the weekend or bank holidays are dealt with during the week with capacity built into the staffing team on Fridays to ensure this can be facilitated.

Care Navigator

Our Care Navigator is an innovative role that is integral to our hospital discharge model.

The Care Navigator is funded through the Better Care Fund and facilitates safe hospital discharge and links the range of hospitals that City of London may be admitted to with GP practices and Adult Social Care to support the sharing of information to reduce risk.



Providing support: hospital discharge pathways

Pathway 0 (around 51% of cases)

People on this pathway have a supported discharge back to services they are already receiving through Adult Social Care or other arrangements of their choice.

Pathway 1 (around 37% of cases)

Occupational Therapy led reablement and discharge to assess service is provided by one commissioned provider. Between April and Dec 2024, 95% did not require further support after a period of reablement.

Pathway 2 (around 3% of cases)

Where an individual needs further bed-based rehabilitation this would be provided through a health contract. Adult Social Care facilitate short term step-down bedded care prior to reablement or rehabilitation in the community.

Pathway 3 (around 9% of cases)

All placements are spot purchased in line with the individual and family choice.

Rapid Response Service

This service is a flexible type of Early Intervention and Prevention service which aims to improve people's independence, choice and wellbeing. It is expected that a period of up to 72 hours will provide sufficient assessment of the need and care support.

The main aim of the service is to provide support to people to stay safely in their home by providing short term care at times when their support needs are deteriorating or for those most at risk of acute admission to hospital. This includes intensive home care support (e.g. live in or double up support) with an assessment of ongoing care needs. The service also supports hospital discharges (Discharge to Assess) by providing intensive home care support to accompany a person home from hospital, a care assessment in the home, care to enable a person to remain at home and care during the installations of minor aids and adaptations.

Case study: hospital discharge



Outcomes

A strengths-based approach empowered the individual to regain independence. Key achievements included:

1. Successful discharge to their adapted home.
2. Enabled the individual to remain at home.
3. Enhanced emotional wellbeing through sustained family and community connections.

Case study: reablement

An individual [REDACTED] admitted to hospital for eight weeks, prior to which they lived an independent life at home with their partner. The individual presented with [REDACTED] [REDACTED] increased care needs. [REDACTED]. These challenges, coupled with the physical limitations of their living environment had a profound impact on their wellbeing.

To address their increased care needs and improve their quality of life and involve them in the decision making around their care.

[REDACTED] with the aim to increase the mobility and independence of the individual.

Coordination with district nurses was introduced to ensure that wound care was adequate and conducted regularly, whilst also liaising with the individuals GP for additional medical needs.

As part of the reablement support, additional equipment was also provided to the individual to improve their posture, sleep and personal care allowing them to stay independent within their own home.

The individual was involved in all decision making about their care and equipment, making sure that their decisions were respected, which was well received. Being able to trial equipment before permanent introduction leads to improved safety and better outcomes for the individual.

Outcomes

A strengths-based approach and involving the individual in decisions about their care improved their quality of life. Key achievements included:

1. Improved mobility and safer transfers with the Sara Stedy.
2. Effective wound care and prevention of further skin breakdown
3. Enhanced living environment and care setup, reducing risks and improving safety.

Case study: visual impairment support



Outcomes

The training empowered the individual and improved their independence. Key achievements included:

1. Achieved confident navigation of key routes, including their daily commute
2. Improved ease in completing household tasks and independently cooking meals
3. Demonstration of sustained motivation and self-reliance

Strength-based Practitioners



The Strengths-based Practitioner role was created to utilise reablement principles in a wider context as part of our early intervention and prevention offer.

The practitioners:

- can offer short-term support to achieve identified goals and outcomes without the constraints of traditional reablement
- are Trusted Assessors who can provide basic aids, equipment and telecare and receive professional supervision from an Occupational Therapist
- offer increased capacity and response times within the duty team carrying out welfare checks, supporting hospital discharge and undertaking joint visits with social workers
- monitor and support the delivery of reablement from a commissioned provider who gave positive feedback at a recent provider engagement event saying they were learning from them how to operate in a more strengths-based way

A similar strengths-based practitioner role has been introduced to the Homelessness and Rough Sleeping service to work alongside the Homelessness and Rough Sleeping social worker. This has led to consistent engagement with 13 adults to prevent a return to rough sleeping by supporting them to manage their health, money, living space, time and safety.

Case study: Strengths-based Practitioners



[Redacted text block]

The Strengths Based Practitioner's key objective was to put in measures that would allow the client to remain as independent as possible and support with their care needs.

[Redacted text block]

The Strengths Based Practitioner's intervention was planned with the intention of re-establishing a personal care routine, support with setting up a self-funded package of care with a previous provider.

Outcomes

By embedding a Strengths-Based Approach, achievements included:

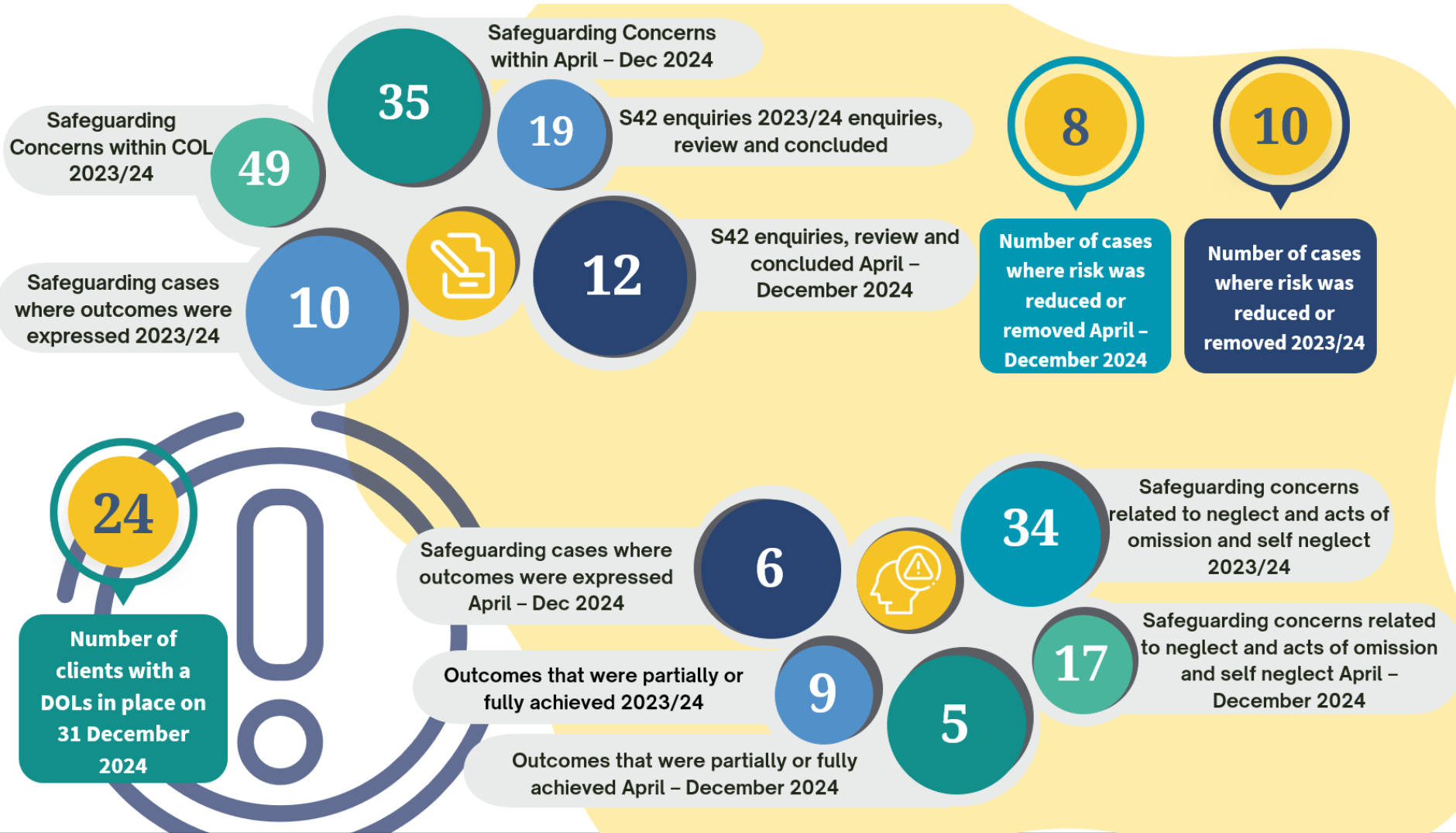
1. Improving the client's general wellbeing and self-confidence
2. Intervention visit resulted in discussing future options with a social worker, such as transition to residential care
3. Positive feedback from the client about our Strength Based Practitioner.

Theme three: Ensuring Safety



Our multi-agency commitment to safeguarding provides the foundations for a robust approach to ensuring safety is built in across the system while also allowing for a focus on the City of London.

Ensuring safety



Safeguarding



City and Hackney Safeguarding Adults Board

The City and Hackney Safeguarding Adults Board (CHSAB) is a multi-agency partnership including statutory and non-statutory stakeholders. It ensures robust safeguarding procedures are in place. Members are committed to tackling abuse and neglect where it does occur and promoting person-centred care for all adults.

The Chair had provided consistent, strong, stable leadership for the past ten years before finishing the role in late 2024. A new Chair has been recruited.

A City of London sub-group provides focus on the City of London and provides assurance, accountability and the sharing of good practice. It considers City of London specific data and priorities in the CHSAB's workplan. The Principal Social Worker is a member of this sub-group.

The Assistant Director for People chairs the Safeguarding Adults Review sub-group.

"Colleagues from City of London Adult Social Care Services have been active and engaged participants in the work of the Board and its sub-groups. The City Corporation has been able to benefit from being part of a joint Safeguarding Adults Board with Hackney e.g. through learning from Safeguarding Adults Reviews.

The City of London Sub-Group has ensured that the unique profile, needs and voices of City of London residents have continued to be addressed. Innovative practice in response to the specific needs of residents has been impressive.

Reporting outcomes of audits has provided assurance regarding the good quality and standard of safeguarding practice to the Board."

Dr Adi Cooper, independent Chair of the City and Hackney Safeguarding Adults Board 2014 - 2024

Safeguarding



City and Hackney Safeguarding Adults Board

One City of London service user has joined the London Safeguarding Voices group, which is a pan London group of people with lived experience of the adult safeguarding process, which works with the London Safeguarding Board to help improve safeguarding practices across London.

Adult Social Care proactively reviews any Safeguarding Adults Reviews from Hackney and nationally to consider and embed recommendations where appropriate.

The CHSAB provides training for professionals in three key areas: recognised safeguarding training at the required levels; specific training commissioned by the CHSAB; and Safeguarding Adults Reviews learning events.

A 47-year-old living alone in privately rented accommodation was referred to Adult Social Care by Tenancy Support following concerns around hoarding and self-neglect potentially leading to eviction. A social worker visited and determined the property to be level 5 on the clutter image rating scale. This was discussed with the individual who was struggling with his mental health and felt unable to make positive change on his own. A referral was made on his behalf to the Hoarding Self-neglect and Fire Risk panel; where a person-centred multiagency risk plan was put in place involving Social Care, London Fire Brigade, Tenancy Support, Mental Health services and Environmental Health. Under the individual's direction, a blitz clean was undertaken and fire detection equipment installed. A full Care Act assessment was completed with the individual, and ongoing weekly specialist autism support was commissioned to support them in effectively maintaining their home environment.

CHSAB Annual Report 2023/24

Safeguarding



Learning from safeguarding reviews

Following two Safeguarding Adult Reviews in Hackney, a panel was established to provide a person-centred, timely and effective multi-agency response to situations where the person referred has been assessed as a high level of risk because of complex self-neglect, fire risk or other high-risk issues. The aim of the panel is to ensure that all relevant agencies work together to provide a co-ordinated and accountable response to the person's presenting issues and risks and to focus on the outcomes the person wants to achieve to the greatest extent possible given individual circumstances and risks.

The panel has strong representation from partners and oversees a whole range of interventions from long term therapeutic work with adults with hoarding disorder to short term preventative measures.

For example, in 2023/24 £1,225 was spent on fire prevention equipment for adults in the City of London, this included replacing fan heaters or other high risk portable heating devices with safe electric oil filled radiators, replacement of multiplugs with fused power boards, and provision of fire-retardant bedding.

The Chair of the panel (Head of Adult Social Care) also attends the City and Hackney Safeguarding Adults Board SAR group creating strong links between both groups and the Adult Social Care service. A SAR referral was made following a fire leading to the death of a resident in March 2022. While the referral was not adjudged to meet the SAR criteria, and the Coroner concluding the death to be the result of an accident, it has been agreed with the CHSAB independent chair to hold a discretionary learning review to examine how services across the City of London may be able to learn and improve from this, with the findings due in May 2025.

Safeguarding



Discretionary Safeguarding Adults Review – City of London

The City and Hackney Safeguarding Adults Board commissioned a discretionary Safeguarding Adults Review following the death of Daniel who was sleeping rough in the City of London in May 2020.

The discretionary review made 13 recommendations for partners and the Safeguarding Board developed a robust and detailed multi agency plan that has supported sustained improvements across the Rough Sleeping and Safeguarding system.

This includes:

- Adult Social Care Discharge Model reviewed and updated to reflect learning from the review
- The review was embedded into Level 3 mandatory safeguarding training as a case study
- Homeless Link undertaking and independent review of multi-agency working – recommendations were adopted by the Rough Sleeping Strategy Group
- New processes embedded for involvement of the Rough Sleeping Mental Health Team in wider rough sleeping meetings

Safeguarding



Adult Social Care has a personalised approach to safeguarding alongside the assessment and mitigation of risk. These principles are applied equally to the proportionate responses taken to those concerns not meeting S42 enquiry criteria.

London Safeguarding procedures are applied. Transitional Safeguarding and Joint Working with Children guidance is applied to support a smooth transition to adulthood.

All social workers complete mandatory safeguarding training that is relevant to their job role and responsibilities. We have 100% attendance, which includes refresher training every 2 years.

Social workers are qualified to undertake Mental Capacity Assessments and the AMPH service, provided by the East London Foundation Trust, carries out any necessary Mental Health Act Assessments. To date in 2024/25 the average number of Mental Act Assessments per quarter is 2. This is a decrease on previous years but mirrors a pattern seen across the London Borough of Hackney. We have S117 aftercare responsibilities for 37 individuals.

Mental Capacity Assessments and safeguarding are included in the internal annual audit schedule.

Best Interest Assessments are spot purchased from an independent provider although several social workers are trained in this to ensure an understanding within the service and a link to the commissioned provider.

An independent review of safeguarding carried out in 2023 recognised good practice within the team and suggested some areas of further development. The Principal Social Worker has taken forward an action plan on these areas and all have been completed.

"Work in the City regarding safeguarding people who sleep rough has been groundbreaking and influenced national policy and practices. The local Daniel SAR and other reviews have provided opportunities to improve local multi-agency arrangements, practice and protocols to promote better outcomes for people experiencing homelessness."

Dr Adi Cooper,
independent Chair of
the City and Hackney
Safeguarding Adults
Board 2014 - 2024

Safeguarding



Making Safeguarding Personal

This is embedded into the safeguarding practice of adult social care.

	2024-25 YTD	2023-24
Total MSP Asked (with and without outcomes expressed)	7	15
Cases where outcomes were expressed	6	10
Adult at risk felt Involved in Safeguarding Process	6	9
Fully achieved	4	3
Partially achieved	1	6
Not Achieved / Not applicable (includes those who were not asked)	7	7
Percentage which were Fully and Partially met	83%	90%

Safeguarding



Deprivation of Liberty Safeguards

The City of London Corporation has excellent performance on Deprivation of Liberty Safeguards (DOLs). Requests are dealt with promptly without any waiting lists. Across the year, DOLs were processed in an average of 11 days from application to approval.

	2024/25 YTD	2023 / 24
No. of clients with DoLs in place at end of the reporting period	25	28
No. of Applications Received in the period	25	34
DOLs granted	20	26

A system-wide approach



The promotion of safety and the understanding and management of risk is embedded across all elements of the system, both internally and externally. This includes:

- a Corporate Safeguarding Policy which sets expectations for Members, officers and commissioned providers
- regular safeguarding reporting to the City Corporation's Safeguarding Sub-Committee
- online Safeguarding Awareness Training across the City Corporation
- an early intervention project that improves wellbeing by keeping people safe in ways defined by themselves
- a Care Navigator facilitates safe hospital discharge and links hospitals and GP practices to support the sharing of information to reduce risk
- the Adult Social Care Team Manager and Deputy Team Manager are embedded in the Neighbourhood multi-disciplinary meetings with health and voluntary sector partners
- social workers and the Care Navigator attend GP multi-disciplinary team meetings in practices where residents are registered
- cross-service meetings within the People's Directorate and joint working minimises risk and supports safer and more informed transitions between services
- close working between Adult Social Care and the commissioning team facilitates a high-quality alert process that picks up domiciliary care concerns below the level of formal safeguarding and ensures these are resolved at an early stage and prevent harm. Performance improvement letters are issued where safety or quality is a concern
- access and support to training for City Connections providers, and involving them in the City Safeguarding Sub-group

Theme four: Leadership



Strong, stable political and officer leadership is underpinned by robust and effective management and qualified, valued staff, driving the pursuit of excellence across Adults Social Care.

Management, leadership and governance

Adult Social Care benefits from strong relationships between experienced senior leaders and elected Members which provides accountability and direction.

The Community and Children's Services (CCS) Committee holds responsibility for Adult Social Care and its associated budget. The Chair of the CCS Committee also sits on the Safeguarding Sub-Committee, the Health and Wellbeing Board and the City and Hackney Health and Care Board, providing a strong cross-cutting approach to issues. These arrangements underpin strategic decision making and regular scrutiny of our performance data.

Further scrutiny of Adult Social Care is delivered through the Health and Social Care Scrutiny Committee.

There is strong corporate support for Adult Social Care – the Town Clerk (Chief Executive) has a social care background. Adult Social Care Performance and key strategies are considered by the Senior Leadership Team which is chaired by the Town Clerk.

The scope of the Department provides a breadth of accountability for senior officers. This provides benefits for residents through effective, integrated support.

Items discussed at Committees

- Health and Social Care Integration
- Hospital Discharge
- Quarterly Performance Statistics for Adult Social Care
- Neighbourhood model
- Mental Health Services
- Employment Support for people with Learning Disabilities
- Support for carers

Management, leadership and governance

There is a strong commitment both corporately and departmentally to being a Learning Organisation and as part of this have commissioned a number of peer reviews including one on Adult Social Care from the Local Government Association at the end of 2023. As part of this work, we developed a Peer Challenge Action Plan to address the points raised during the review, some of which were taken up as part of the ASC Transformation Programme.

As part of our commitment to continuously improving and growing, we established an Adult Social Care Assurance Board which mirrors an Achieving Excellence Board set up in Children's Social Care. The Assurance Board is independently chaired and provides us with external challenge on the services we deliver and how, the experience of service users and how we meet our statutory obligations.

Within Adult Social Care, senior management provide visible and supportive leadership to staff as well as in the wider health and care partnership.

Monthly Adult Social Care Management team meetings, as well as People Management team meetings, allow for cross-cutting themes and issues to be considered.

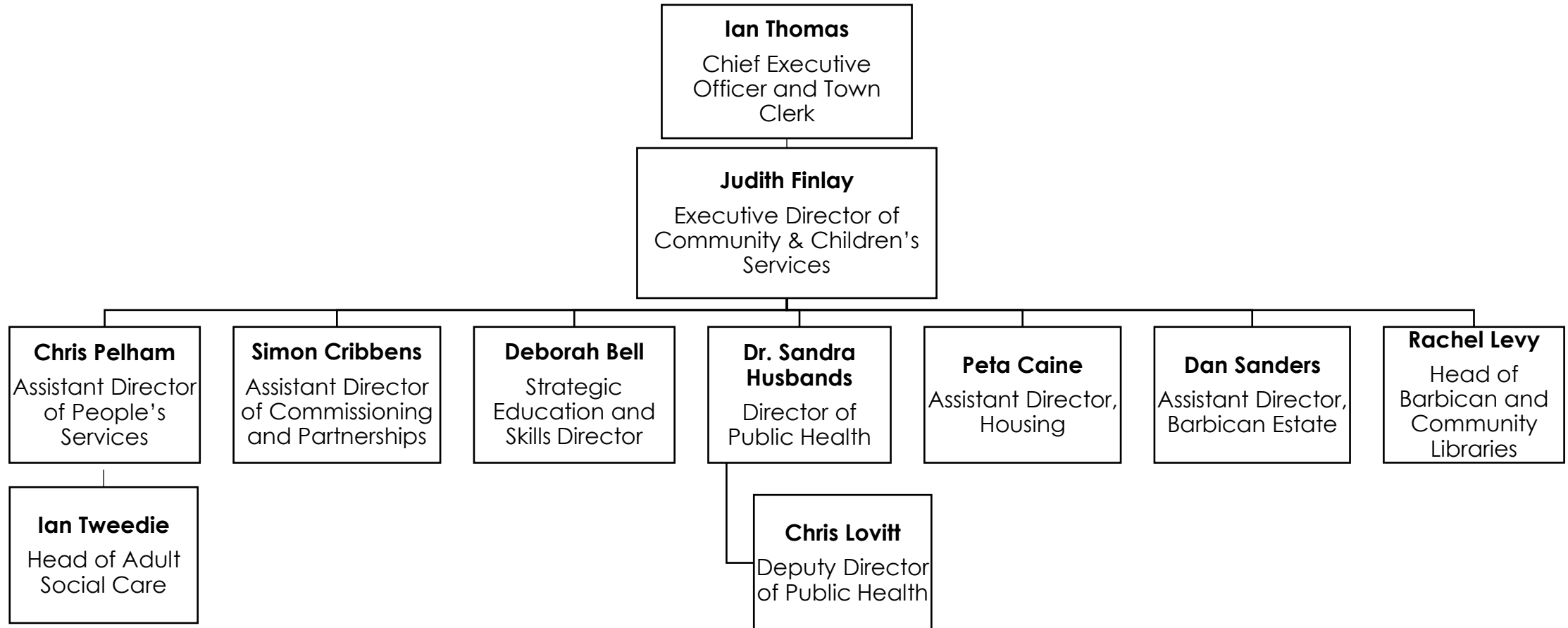
A complex needs panel exists where social workers present cases to Senior Managers and to make the case for specific packages for complex cases

Governance also happens through external mechanisms such as the CHSAB and NEL and Place Based Partnership structures

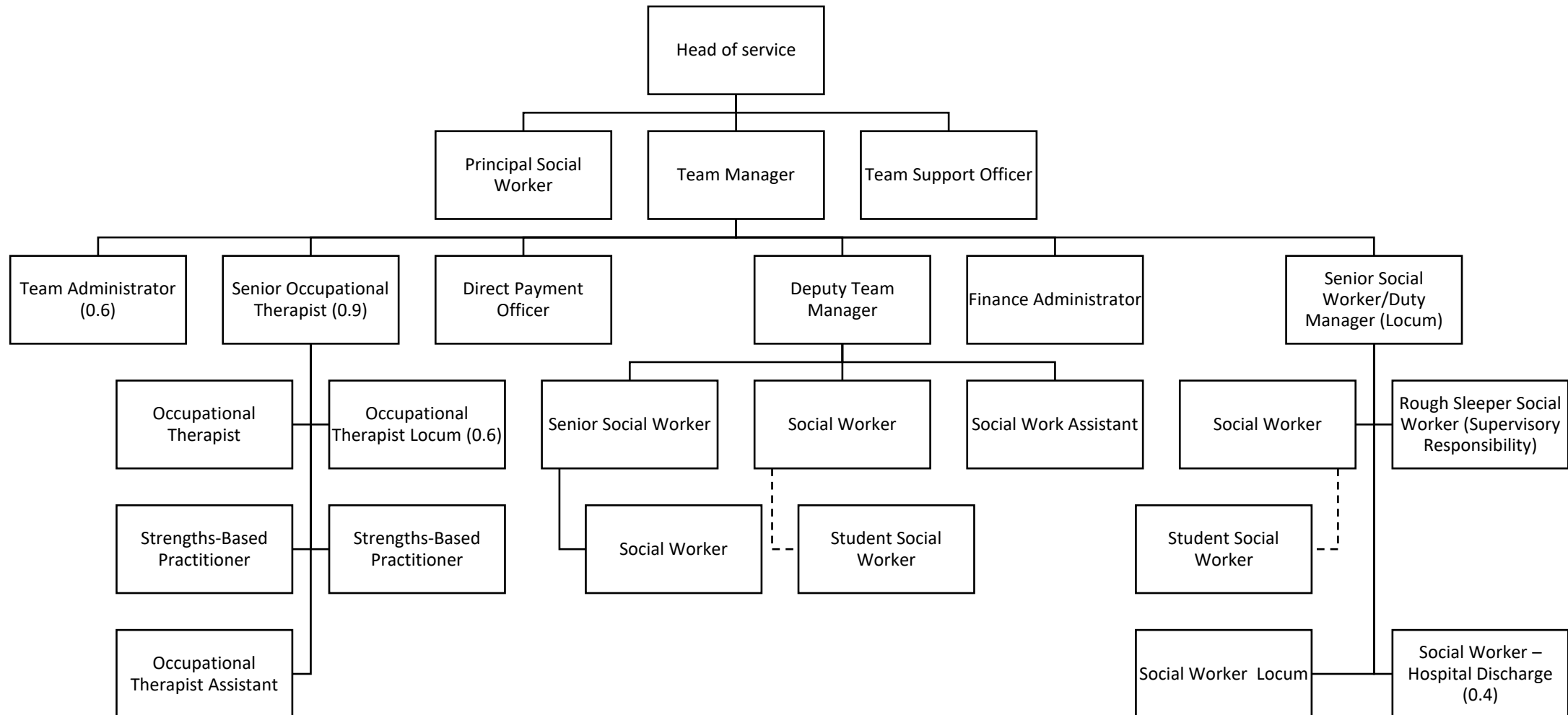
"Supervisors in Adult Social Care follow established protocols and standards... supervisors strive to continuously improve quality of management oversight records and support offered to their supervisees."

Internal decision making, recording and accountability audit and action plan (October 2024)

Department Leadership Team



Adult Social Care



Management, leadership and governance



Strong political leadership and commitment has prioritised local Adult Social Care budgets. With increased demand and complexity, this political leadership secured additional growth funding for adult social care in a time of challenged resources. The commitment to Adult Social Care is also supported by the application of 1% precept on Council Tax.

The overall City Fund budget for 2025/26 is £222,341,000, of which £6,597,000 is allocated to Adult Social Care, 3% of the overall budget. This reflects that the organisation is a Corporation with local authority functions for a small resident population.

Despite financial challenges, it is expected that political leadership will continue to prioritise funding for services such as Adult Social Care at the present time.

Within the Better Care Fund we benefit from £357,283 for adult social care services from the ICB allocation against a requirement of £172,763. The Better Care Fund funds much of our hospital discharge work and the Care Navigator Role.

IBCF also plays a significant role in supporting the work of Adult Social Care.

Workforce learning and development

Our Adult Social Care staff develop expertise as generic practitioners, supported by a broad range of skills and knowledge. Activity includes:

- collaboration with Edge Training and Consultancy Ltd for comprehensive legal literacy training and use reflective practice session to implement the acquired knowledge
- City and Hackney Safeguarding Adult Board specialised training on safeguarding, domestic abuse, cultural awareness and self-neglect
- a corporate learning programme and bespoke learning opportunities including support for career progression
- completion of mandatory training is discussed during supervision and monitored by the Principal Social Worker
- membership of the South-East London Teaching Partnership (SELTP), collaborating with universities and London boroughs to train Practice Educators and host student social workers

"I feel that the training is to a good standard, and it is nice to have the training through Edge that is commissioned."

Staff survey 2024

Workforce Development Plan

Our Adult Social Care Workforce Development Plan outlines how we support a highly skilled, responsive and confident workforce able to meet our statutory responsibilities.

Development areas are legal literacy in regard to safeguarding, mental health or the Care Act 2014, strengths-based and anti-racist practice, to ensure our residents are safe, respected and are at the heart of their support planning.

All our practitioners apply critical reflection and analysis to inform and provide a rationale for professional decision-making. We do it by the use of knowledge of the law, theory and research during reflective supervision, regular reflective practice sessions and peer reflection.

Learning, improvement and innovation



Corporate Staff Survey 2024

Results showed that 80% of DCCS say that their line manager treats them fairly and with respect.

DCCS has implemented an action plan in response to the 2024 annual Staff Survey feedback. Actions include:

Working culture and relationships

- Develop a programme of inclusive departmental events, deliver more team away day and scope a work shadowing and skills development programme.

Leadership

- Use internal communications to raise awareness of actions taken as a result of the staff survey, DLT members to attend team meetings periodically to increase visibility and share updates, provide training for managers on effective appraisals and one-to-ones.

Recognising staff contributions

- Integrate recognition of staff contributions into one-to-ones and appraisals and continue to recognise staff contributions in internal communication highlights.

Wellbeing

- Wellbeing being a regular agenda item in one-to-ones and provide specific resources on managing workloads.

Learning, improvement and innovation



Adult Social Care staff said that... We have...

- average rating of 7 out of 10 for the training available
 - development is a standing item in supervision and the Principal Social Worker provides updates and ideas of what's on
 - training opportunities are shared by people including line managers or others in networks staff are involved with
 - their main barriers to learning and development are time and the right opportunities
 - there are a lack of leadership training opportunities
- continued to build a SharePoint site with a new learning offer (introducing Talking Life), introduced learning bulletins and maximised learning and development information sharing
 - provided information on training in advance to ensure staff and managers have opportunities to plan cover, arrange workload etc
 - started to develop a training offer for our Business Support colleagues, including standardisation of minute taking
 - started to develop our Management Training Programme to include systematic supervision training, using data and performance, dynamic responsive training to use HR skills including sickness management and support and difficult conversations as a Manager
 - developed a Social Worker career progression pathway and continue working on clear development pathways for other job roles
 - agreed to establish Practice Leads, so learning can be more easily shared within the team

Learning, improvement and innovation



We have strengthened our performance culture in Adult Social Care to ensure that we robustly learn from and respond to data. This includes:

- Monthly service scorecards provide senior managers and the Adult Social Care service with intelligence and performance data giving assurance that statutory obligations are being met, that any risks are identified and mitigated, targets are being met, and any emerging trends or issues are identified.
- The monthly scorecard is discussed at an officer performance meeting and a more detailed summary of safeguarding data is scrutinised quarterly at the Safeguarding Sub-Committee.
- A quarterly scorecard is considered at meetings with the Exec Director of Community and Children's Services, AD People, the Chief Executive & the People's Division Senior Leadership Team.
- Consideration of the dashboard also takes place at the Assurance Board.

Learning from peer reviews

In 2023, the Local Government Association undertook a peer review looking at our Adult Social Care Service.

Feedback was positive and noted our Strengths-based approach, strong hospital discharge model and our agility and flexibility in commissioning to meet needs.

Areas for consideration included strengthening the triangulation of quality assurance of services and strengthening feedback mechanisms



Progress on areas for development 2023/24



Actions	Progress and outcomes
1. Strengthen the triangulation around commissioned placements quality assurance	<ul style="list-style-type: none"> We have undertaken a brokerage project as part of the Adult Social Care Transformation Programme. Quality Assurance of commissioned placements are part of and aligned with the general Quality Assurance Framework.
2. Develop a strong performance culture within the service	<ul style="list-style-type: none"> We have set up a regular performance monitoring meeting, which includes server representatives and data analysts where performance is monitored, and issues are brought to the group for investigation and resolution. Ongoing training for staff on the use of Mosaic to ensure correct data is being inputted in the correct place and to improve staff confidence in using the system. The service now uses data in a much greater way, however further work is required to fully embed data use within the work of front-line staff. ASC Transformation Programme has also reviewed the reporting of our KPIs.
3. Strengthen our quality assurance	<ul style="list-style-type: none"> We now commission an external quality of practice audits, which has included Safeguarding (2023 and planned for April 2025) and OT practice (October 2024). The Quality Assurance Board now has an independent chair, and our Principal Social Worker collaborates with neighbouring boroughs on practice audit tools and quality measures.

Progress on areas for development 2023/24

Actions	Progress and outcomes
4. Improve the timeliness of review	<ul style="list-style-type: none">• We have added a traffic light system to our case management system, Mosaic to flag reviews. Adult Social Care are also working with our departmental performance team to address system issues leading to differing target dates being indicated.• Additional work is underway with practitioners to ensure timeliness of reviews, and options are being explored to capture reasons for delays in reviews taking place.
5. Capture and record equalities data more effectively and use this to shape our services	<ul style="list-style-type: none">• We have reviewed our system and recording of equalities data, which identified a number of changes and improvements which were made to the overall system. Our equalities data is regularly reviewed at departmental Equality and Inclusion meetings, as well as discussion at team meetings so practitioners can have an input in the discussion and suggest areas of improvement.
6. Improve the quality and accessibility of our information offer for residents	<ul style="list-style-type: none">• The improvement of our information and a review of our front door service is an important priority within the new Adult Social Care strategy. We now have new leaflets showing how to contact and access support from our services, and our web page has been updated to allow for better access to up-to-date information. Further work is ongoing to provide more information in a greater number of languages as well as easy read versions to suit community needs.

Progress on areas for development 2023/24



Actions	Progress and outcomes
7. Strengthen our co-production and collection of feedback and outcome impacts from adult social care service users	<ul style="list-style-type: none">• We are developing a reward and recognition policy to award people for their time and effort in helping co-produce services with us.• In conjunction with Healthwatch City of London, we have set up an Adult Social Care User Group to collect information, feedback and to support the co-production of services with clients who are members of this group.
8. Implement robust and routine feedback from people who have been safeguarded from harm	<ul style="list-style-type: none">• This formed part of the work of the Transformation Programme which was completed in 2024.
9. Increase diversity across the service to reflect the communities which we serve	<ul style="list-style-type: none">• This has been taken forward as a Corporate priority and is reflected in the City Corporation's new People Strategy. Progress has been made over the past 12 months, but there is still more progress to be made.• Increasing and promoting diversity is a priority set out within the Adult Social Care strategy, as well as promoting this amongst our commissioned services to ensure that provided care is tailored to different cultural needs across our communities.