



Annual Report 2020



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PRESIDENT'S REPORT

James Bullion

It has been an enormous privilege to serve our remarkable association as President, guided by our charitable objectives and underpinned by our values and beliefs, and supported so ably by so many within ADASS and beyond.

As I write this, I am nearing the end of my term as President and we are close to the anniversary of the first pandemic lockdown in this country. It has been a year of endless work to minimise the impacts of the pandemic on people needing care and support, those people who have suffered most from its impact and those people who have given their all to support them. I have been privileged to work with fellow trustees, the staff team, and regional chairs who have hardly stopped and with the millions of others, from care staff, civil servants, community volunteers, my council colleagues, all of whom have pulled out all the stops.

I hope you feel ADASS has played its part in both keeping the voice of social care on the agenda alongside an increasingly impactful chorus of voices advocating for everyone who relies upon and works in adult social care. I hope you feel that over the past year we have made the case for social justice and a fairer society for those people we service, and that we called out disadvantage, discrimination and opportunities lost for living well.

I am of course disappointed and in grief that yet another government has not addressed the long term funding and reform needed – and needed so much more as a result of the pandemic – despite the best efforts of our teams and out partners and the advocacy of Select Committees, the NHS, journalists, voluntary organisations, providers and organisations of older and disabled people. We will, however, continue our work and if anything, the pandemic has taught us that we have commitment, determination, and resilience.

I want to take the opportunity to thank all my colleagues in ADASS and in Norfolk County Council and to all of ADASS's partners for their support during my year as President.

A handwritten signature in black ink that reads "James A Bullion". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

TRUSTEES

PRESIDENT



James Bullion
Norfolk County
Council

VICE PRESIDENT



**Stephen
Chandler**
Oxfordshire
County Council

HONORARY TREASURER



Iain MacBeath
Bradford
Metropolitan
Council

HONORARY SECRETARY



Glen Garrod
Lincolnshire
County
Council

POLICY LEAD – Oct 2020



Sarah McClinton
Royal Borough
of Greenwich

POLICY LEAD – Jan 2020



Andy Begley
Shropshire
County Council

IMMEDIATE PAST PRESIDENT



Julie Ogley
Central
Bedfordshire
Council

REGIONAL LEAD



Carol Tozer
Isle of Wight
Council

ASSOCIATE TRUSTEE – Jan 2020



Brian Parrot
ADASS
Associate

ASSOCIATE TRUSTEE – Sept 2020



**Richard
Humphries**
ADASS
Associate

EXTENDED TRUSTEE



Alison Tombs
North
Tyneside
Council

TRUSTEE



Cath Roff
Leeds City
Council

STAFF

CORE TEAM



Chief Officer
Cathie Williams



Deputy Chief Officer
Dr. Phil McCarvill



Assistant Chief Officer, Senior Policy Officer
Michael Chard



Assistant Chief Officer, Senior Policy Officer
Ian Hall



Liberty Protection Standards Co-ordinator
Hilary Paxton



Resource Manager
Julie Boulting-Hodge



Comms, Events and System Lead
Letizia Mattanza



Business Partnership Manager
Marie Rogers



Finance and Events Admin
Catherine Cunningham



Comms and Events Admin
Ed Bradley



Senior Policy Officer
Claire Barcham



Membership and Engagement Admin
Precious Akpoviroro

TEMPORARY STAFF



Senior Policy Officer
Chloe Reeves



Covid-19 Consultant
Donna Ridland



Senior Policy Officer
Fazeela Hafejee



EUSS Programme Manager
Heather Booth



CHIEF OFFICER'S REPORT

Cathie Williams

I opened last year's annual report with a statement that '2019 will be a year that is remembered for Brexit, an election and the impacts of austerity becoming more and more apparent. We have seen increases in homelessness and rough sleeping, in mental ill health crises, drug related deaths, people asking for advice and help and carers giving up work to care for family members. We have seen increases in the numbers of people with unmet or under-met needs. We have seen reductions in the numbers of people getting long term care and increases in life expectancy have stalled'.

2020 has been a year when the Coronavirus pandemic has cruelly exposed the inequalities across the country and the undervaluing of people needing care and support, their carers, and the people who work in social care. For us this has been in relation to older people at the end of their lives, disabled and mentally ill people, BAME and poorer communities, and the mainly female workforce that has been so courageous, committed, and compassionate throughout it all. Too many people have died; too many people's lives have been traumatised.

However, 2020 has also put social care in the public sight in a way it never has been before. It has exposed the utmost dedication, commitment and value base of ADASS members and staff in relentlessly working, long days and over weekends and holidays to both respond to the pandemic and to keep the longer term ambitions for all of our futures in sight. The work that has been done with government, the NHS, council partners, voluntary organisations and providers has been phenomenal. ADASS members have also embraced the opportunity to support shielded people, rough sleepers and to work to co-ordinate responses to local outbreaks. Social work and social care have been critical.

We still await the Government's delivery of the Prime Minister's promise to 'Sort out Social Care, once and for all' as he announced it in his first speech, and we continue to engage with Select Committees, government departments and our partners on this. We have developed statements to support wider change for sustainable funding, fair pay for care staff and the development of the kind of care, supports and safeguards that we want.

Over the year the staff team has continued to develop to support the President, Trustees, Regions and membership through our communications, events and policy and implementation functions and our engagement in the Care and Health Improvement Programme. I am proud to work with such a committed, talented and diverse team that have been juggling home schooling, care for children and parents and the impact of Covid on their personal lives as well as pulling out all the stops over a prolonged period. We are grateful to DHSC for additional funding between April – July and December – March and to our partners in LGA that enabled us to significantly increase our capacity both nationally and regionally.

A handwritten signature in black ink, appearing to read 'Cathie Williams', with a stylized flourish at the end.

REGIONAL LEAD'S REPORT



Carol Tozer

Regional Chairs comprise the engine room of ADASS: pivotal to us being an effective organisation by ensuring that our members' views inform internal decision making and contribute to national policy, practice and performance fora. In addition, regions have their own work programmes – and we work hard to share best practice across regions.

My role as Trustee for the Regions is not about directing the work of the regions but to help foster relationships; to support and represent Regional Chairs; to maintain two-way communications between ADASS and the regions; and to help develop a coordinated approach across the regions when needed.

2020 proved to be a year like no other, and as I write this report we are still in the midst of the pandemic which continues to cause devastation to many individuals, families and communities. When I wrote my Regional Trustee contribution for the 2019 Annual Report, I was new to the role. Little did I know of what was to follow and how quickly we would need to step up our arrangements with the ADASS regions.

In 2019, ADASS had reflected upon the growing significance of the ADASS regions through its 'ADASS Next Generation' review and how we might build upon the strengths of our regions in going forward. Our progress over the past 12 months has justified this approach and our regions have demonstrated how important they are to the way in which ADASS functions. I am immensely proud of the way in which ADASS, the ADASS Regions (Chairs and regional teams) and all ADASS members have responded to the most challenging circumstances imaginable.

The national response to Covid 19 has dominated the work of the ADASS Regional Chairs throughout 2020. In the very early stages of the pandemic the usual monthly Regional Chairs calls were replaced by weekly calls as we attempted to gauge and understand the most challenging of issues across the country. Senior civil servants and other colleagues have regularly attended our meetings during 2020 and our conversations with them has, I think, helped them to understand the character and complexity of issues each of our regions has faced during the pandemic – as well as how national policy might be constructed and implemented. And most certainly our conversations with these wider colleagues has evidenced how our leadership in ADASS at local, regional and national levels has helped keep people safe and supported.



REGIONAL LEAD'S REPORT

Continued

ADASS regional staff teams have continued to offer magnificent support during 2020 to their regional branches and to ADASS nationally. The regional teams work incredibly hard to ensure that local DASSs have access to information and support whilst also providing an invaluable link between what is happening on the ground and national policy, challenges and success is commonplace. They really do embody the spirit of sector led support.

Regional teams (sometimes just two people) have limited resources and therefore must work extremely efficiently. They have benefitted greatly from the support network which they have collectively developed over time with other regional teams where the sharing of issues and challenges is common place.

Finally, I would like to convey personal thanks to Julie Ogley who kindly stepped in to Chair the Regional Chairs meetings during my medical three-month absence. Julie has been a very hard act to follow upon my return.

Collectively, we look forward to 2021 in the hope that, when the worst of the pandemic is over, we can return to focussing upon social care in its widest sense, supporting people to live good lives. Our regions will play a pivotal role in framing ADASS's detailed proposals for the national assurance and reform of adult social care and, as always, will continue to ensure that the experiences and views of our members drive ADASS's priorities and work in making a positive difference with the people we serve.

Eastern

Due to the onset of the pandemic much of the planned regional work was set aside or heavily revised through the summer months, to allow more immediate support to local systems and system leadership. This included:

- weekly DASS calls to facilitate communications, sharing of issues, and more focused development sessions looking at aspects of our response to the pandemic;
- development of a weekly regional meeting to support improved communication and information sharing between regional tier organisations;
- regular (at times daily) engagement with NHSE Regional response and associated workstreams.

These relationships and structures have continued following the summer, leaving us better prepared for the Winter.

In September we restarted our core Sector-Led Improvement activities, with the Regional Challenge Event (deferred from April) and launch of the online Self-Assessment Tool. We moved all regional work online for the rest of 2020/21, with much likely to remain virtual into the future. Regular meetings relating to priority areas restarted including: finance – leads met weekly throughout the year to respond to changing funding and implementation guidance; markets and commissioning; carers; regional intelligence; and practice development and support – in particular through the regional Principal Social Worker network.

We have developed several reports on practice, including a regional Workforce Development Strategy, regional reviews of market resilience and day opportunities during COVID, two reports on safeguarding practice, and a review of emerging practice in response to COVID. In December we launched a new programme *Building Positive Futures* which will run through into 2021/22, putting personalisation and coproduction at the heart of our work to transform practice and commissioning. Alongside this we commissioned a complete reprovision of our website, and a major set of additions to our PAMMS market management and oversight system, to improve how information and intelligence can support our regional work and market resilience.

East Midlands

A very different year than we expected to have as a region. We welcomed a new branch chair and co-chair, along with saying goodbye and welcome to several new members. Our focus has centred around working with regional colleagues from the NHS and supporting our local authorities with their response to the pandemic. That said we still delivered:

- A new revised regional structure and support offer which is more closely aligned to the national ADASS priorities and driven by learning identified in our regional Covid recovery work;
- A new provider to provider support programme which is being developed into a wider regional engagement plan to support more active engagement of our providers;
- A revised peer review offer which focuses on a practitioner led team to team approach. This has been trialled in a number of local authorities and the timetable is in place to roll out fully in 2021;
- A regional position statement on the current care market for older people. This prompted a series of actions around exploring other markets in greater detail including supports for people with learning disabilities (LD) and complex needs and identifying our regional key suppliers;
- A joint regional support offer for LD and autism including the recruitment of a regional lead to drive the agenda forward across social care and health.

West Midlands: key achievements

- Regional Risk and Information Sharing protocol, with agreed “triggers” for collaboration and region-wide action, underpinned by good practice models.
- Innovative use of data to increase awareness of risks and opportunities and to facilitate local and regional action;
- “Barometer” assessment in March 2020 – a strong local and region-wide assessment of care market risks and contingency plans, incorporating learning from Allied Healthcare;
- An emerging approach to individual provider risk profiles to support commissioners as they seek to facilitate a change in the balance of provision to address overcapacity in the care home sector;
- A clear and evidence-based regional commissioning plan that is aligned to the priorities we share whilst accommodating local variation and nuanced market conditions – recognising that this is about far more than care homes for older people;
- Return to Care Workforce campaign with West Midlands Employees
- An ongoing emphasis on better and more effective region-wide partnerships and joint working, recognising the statutory role of Local Government in market shaping;
- A compelling narrative for investment based on the economic and social contribution made by the care sector;
- Continuing with Peer Challenges including Reflect and Learn more flexible approaches and review with University of Birmingham;
- Practice-based work and support, keeping sight and attention on inequality and leading on safeguarding nationally;
- Consistent 100%, or close to, response rates to key surveys and summaries of these – strong nationally on e.g. workforce and social care finance and funding issues;
- A range of digital developments including discussions with LGA & NHSE on regional digital pilot programme;
- Personal support for DASSs and their senior staff;
- Think pieces on Flipping Social care, Future of Care homes and Social Justice and Adult Social Care Workforce
- Budget briefing packs and materials for DASSs for their corporate in-year and next year budget conversations.

North East

The pandemic has dominated our work. It has also led to a strengthening in our collaborative approach as we have come together to work on shared challenges and priorities:

- There has been a real focus on care markets. Colleagues have shared approaches to financial support, practice and processes, recognising the challenges care homes and providers face. A series of 3 webinars with NHS and YH ADASS colleagues showcased practice.
- Approximately 30 Social Work apprenticeship students started in September. An evaluation has considered how we develop and shape the future of these Apprenticeships and the findings are overwhelmingly positive. The evaluation’s recommendations are being explored.
- We finalised our regional improvement/Turnaround Team offer to support care home providers at risk. This has proved successful with one provider in the region so far.
- DASSs completed the LGA risk self-assessment and held subsequent sessions to learn from the findings. The programme has been reviewed and realigned as a result.
- Social workers and assessors are working in challenging times, requiring swift and adaptive change in the way assessments are conducted. A suite of tools has been developed collaboratively to provide guidance around defensible decision making for social workers and assessors to consider in their approach to home visits.

- We're developing the NE brand, vision, narrative and a communication strategy to strengthen the voice of ASC both in the region and nationally and have identified Chief Executive sponsor for the branch. We worked with HEE and NHS partners to support social care throughout the pandemic, including deploying medical students within social care, enabling providers to request staffing support via a regional deployment hub and a system wide offer of wellbeing support via Foundation Trusts offering psychological support, resources and a helpline for all health and care staff.

North West

Most of our work has been focussed on our Covid-19 response and supporting our members. However, we have also worked on setting a vision and strategy for transformation. During 2020 we have:

- Co-produced our vision and strategy 'Care 2030 - Every Day the Best it Can Be' for supporting long-term transformation of social care. Focussing on developing the care and support models, markets and workforce that we want for the future.
- Refreshed our approach to Sector Led Improvement with a renewed focus on areas of risk.
- Published our Careers Academy Toolkit to support localities and sub-regions in developing this approach.
- Published our Inclusive Commissioning Review and held a regional webinar.
- Launched the '#CareHero' recruitment campaign to support social care providers in the early stages of the pandemic.
- Developed a regional care home dashboard to support incident management across NHS and social care.
- Created mental health and wellbeing directories for social workers, care workers and unpaid carers to signpost them to services to support them through the pandemic.
- Created an infection control 'top-tips for care homes' guide to support providers to control the infection.
- Created a toolkit to support risk assessment for our BAME workforce and delivered two webinars to share practice and support colleagues regionally and nationally.
- Written regional position statements to support local authorities in developing their approach to care home visiting and designated settings.
- Undertaken a review of market contingency and sustainability and produced a report.
- Carried out a Lessons Learned Review into the first wave of the pandemic to inform future planning in health and care.
- Established an Elected Member Commission to investigate and report on the impact of the pandemic on people who have care and support needs, families, carers and communities, and make recommendations for improvement.

South East

2020 has been dominated by the urgent response to the pandemic. We supported councils in the region to respond by:

- All networks and groups have very high levels of participation across the South East and are working to integrate and share learning from the pandemic.

The regional role has strengthened during this period for:

- An effective two-way flow of information between the region and the centre;
- A rapid response by councils to DHSC on care homes support and service continuity.
- Development of timely briefings which provide an understanding of the distinctive characteristics of the South East for the ASC National Task Force and DHSC.

- The South East Health + Social Care Collaborative offers system leaders resources and support from within the region and nationally. PHE are now part of weekly meetings. New DHSC appointments and CQC will be invited to form part of a single collaborative process in the South East.
- DASSs commissioned the London School of Economics to provide an external in-depth analysis of the care market in the region and identify commissioning opportunities for shaping the future care market.
- Housing is a priority workstream for DASSs - to follow up a report by the Housing LIN to analyse progress for each South East council with recommendations for improving planning and accelerate delivery of housing/supported accommodation.
- Use of a new Regional Dashboard to support South East councils to benchmark, understand and manage the 2020-21 challenge and beyond.

South West

Vision: Standing for a compassionate and fair society, promoting independence and inclusion by working with communities and people.

2020 has been a challenging year for the region as we put our regional work programme on hold to respond to the pandemic. During this year we:

- Agreed to reshape our agenda based on sector led improvement and policy leadership by developing a new policy framework, vision and setting the priorities for collaborative work.
- Delivered an Insights workshop that produced a stocktake to obtain an insight into what aspects of social care and joint work local authorities think should be retained, changed and where there is good practice for working remotely and delivering care.
- Further developed our partnership with the NHS, working closely with them throughout the pandemic, developing the Winter Plan and supporting recovery. We have been part of the regional NHSEI Gold calls and the Care Sector Co-ordination Network established to bring together information from local systems on matters relating to care homes.
- Published responses to the Winter Plan and set out our priorities within the Service Continuity and Care Market Review.
- Ensured local authorities remained connected to share learning and provide peer support through regular 'virtual' conversations and workshops.
- Senior leaders came together weekly and fortnightly to discuss and share learning on Covid, commissioning and operational issues to inform response and recovery plans.

The year ended with the branch saying au revoir to Margaret Willcox who has been the Chair and co-Chair of the branch for a number of years. Margaret is moving on to new pastures before she finally settles into retirement.

Yorkshire and Humber

During 2020 in addition to responding to the Covid-19 pandemic we:

- Developed a Carer Quality Marker Toolkit to promote self-awareness of identification, assessment and support for unpaid carers to help local authorities prioritise and improve how unpaid carers experience assessment and support;
- Created and tested a Regional Social Work Safeguarding Audit Tool which lays out a comprehensive approach to assessing and capturing learning from audits;
- Published a 'Top Tips for Social Workers from Social Workers: Working with adults who experienced Childhood Sexual Exploitation' document;

- Refreshed the Yorkshire and Humber PSW Social Work Strengths Based Social Care Audit Tool, drawing on learning and feedback from across the region;
- Continued to organise regular continuing professional development events for Best Interest Assessors and Mental Health Assessors virtually and contributed to the national discussion and debate regarding Liberty Protection Safeguards;
- Undertook research to support and record learning through the pandemic including how it affected social work practice and outlined priorities for restoration;
- Engaged as a region with the Community Mental Health Transformation Programme and supported collaboration through a regional webinar;
- Continued to work closely with Directors of Children Services within the region to take forward Preparation for Adulthood work including the development of a new peer challenge approach that evaluates across Children and Adult Services;
- Embarked on work analysing regional care sector data and information to improve the intelligence available to ensure a quality and sustainable market fit for the future.

London

The pandemic posed unprecedented challenges to the social care sector in London during 2020. In response to this we:

- Worked with key partners, including the NHS, through a range of regional structures including: Health & Social Care Strategy Group, Care Homes oversight group, etc.
- Proportionate and effective use of data through the Market Insight Tool. The fact that the data collection process was driven by local commissioners has been vital in strengthening the link between boroughs and the care sector.
- Extended North Central London Proud to Care initiative to cover all London. Over 2000 registrations have passed through and been referred to councils. The initiative will evolve into London Social Care Academy in 2021.
- Developed a demand and capacity forecasting tool (In collaboration with NHS and Carnell Farrar) to predict the demand from the acute trusts into social care services.
- A summary of the experience of social care teams across London of the pandemic from March – June 2020 can be accessed by [clicking the following link](#)
- We were awarded, in collaboration with HAS Technology, the [Partnership of the Year Forward Healthcare award](#) for our work during the first wave of the pandemic.

In relation to business as usual activity we:

- Maintained our range of [networks](#)
- London Safeguarding Adult Board launched [Adult Safeguarding and Homelessness appendix](#) within the Multi-Agency Adult Safeguarding policy and procedures
- Development of a practitioner case file audit tool
- Published our [statement in response to the Black Lives Matter movement](#)
- Commenced our weekly SingAlong to increase awareness of dementia
- Ran our [second carers festival](#). Over 800 carers attended the virtual event.
- Supported commencement of first cohort undertaking the social work degree delivered through the apprenticeship route at Kingston University.
- Commissioned Hertfordshire and Kingston Universities to co-produce an Occupational Therapy degree programme (delivered through apprenticeship route) with the first cohort due to start January 2021.

REGIONAL CHAIRS

EASTERN



Chair
Nick Presmeg



Vice-Chair
Roger Harris

EAST MIDLANDS



Chair
Helen Jones



Vice-Chair
Martin Samuels

GREATER LONDON



Chair
Sarah McClinton



Vice-Chair
Denise Radley

NORTH EAST



Chair
Fiona Brown



Vice-Chair
Jane Robinson

NORTH WEST



Chair
Stuart Cowley



Vice-Chair
Delyth Curtis

SOUTH EAST



Chair
Keith Hinkley



Vice Chair
Alan Sinclair

SOUTH WEST



Chair
Margaret Willcox

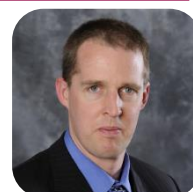


Vice-Chair
Sue Wald

WEST MIDLANDS



Chair
Andy Begley



Vice Chair
Richard Harling

YORKSHIRE & HUMBER



Chair
Phil Holmes



Vice-Chair
Alison Barker

Over the course of the year a substantial volume of work has been delivered by ADASS, with a significant shift in focus required from March 2021 onwards in response to the onset of Covid-19. In the first quarter of the year ADASS was completing No-Deal Brexit contingency planning and communications, most particularly in relation to service continuity in the context of underfunded and fragile care markets. This was funded through the Department of Health and Social Care (DHSC).

From March onwards ADASS was pivotal in the response to the pandemic in relation to people needing social care, whether through social work and personal care, shielded people, responses to rough sleepers, safeguarding or mental ill health.

ADASS staff and members pulled out all the stops, working over weekends and holidays to comment on formative stages of government responses, to co-ordinate local responses and to rapidly communicate issues from local areas into national forums for resolution. The impact of the pandemic on people needing care and support, the least equal members of society, was tragic, but could have been far worse had it not been for the co-ordination of ADASS staff and members locally, regionally and nationally with a range of partners. Over the course of the pandemic there were significant challenges: the supply and quality of PPE, testing, guidance, terrible outbreaks in care homes, visiting, social distancing and the ability to provide services in any kind of group settings, the loneliness of isolation and the fear of older and disabled people to have staff in their homes.

ADASS co-chaired the initial DHSC national steering group for social care, was a key player in the Task Force and part of every working group, produced a wide range of advice notes and top tips for its members, including on safeguarding in closed institutions, human rights and visiting. DHSC funded additional staffing nationally and for the regions between April to July and again at the end of the year. Specific work including every ADASS member was delivered in relation to a review of risks and mitigations in relation to service continuity relating to Covid, Winter and No-Deal EU Exit. The pandemic flu planning that DHSC had commissioned from ADASS in 2017 proved to be a helpful foundation but Covid was different and on a scale that none of us had known in our lifetimes.

This work influenced the response of government and of NHSE. In the revision of the hospital discharge guidance in July and the conclusions of the Task Force, ADASS's input was evident and supported the co-ordination of delivery by regions and local DASSs.

Alongside responses to the pandemic, however we have continued our functions relation to leadership, influence and sharing good practice. deliver a core of business as usual, responding to the needs of older and disabled people, their carers, and care staff.

Throughout the year the ADASS priorities in relation to the care we want, the interface with the NHS and social justice, together with workforce, resources and digital and technology. have underpinned everything that we have delivered.

In the past year we have undertaken enhanced Budget and Autumn Surveys, a day services survey and a rapid provider support survey. The latter sought to provide an up-to-date picture of not only the financial sustainability of adult social care, but also the impacts of the onset of Covid-19.

We have done work on the European Union Settlement Scheme (EUSS) relating to 'vulnerable' people in needing care and support, and the workforce. We have also undertaken specific work on the development of work relating to Liberty Protection Safeguards.

To help communicate our key policy asks of Government for a reformed social care system, we developed and published **Adult Social Care - Nine Statements to Help Shape Adult Social Care Reform**. This document clearly sets out the principles that we believe can help shape the future of adult social care. In short these are:

- We need a public conversation about adult social care reform.
- Locally integrated care built around the individual should be the norm.
- We need a complete review of how care markets operate.
- We must address existing and historical inequalities
- Good quality housing and accommodation is central to care and to our lives.
- We need a workforce strategy.
- We must prioritise access to technological and digital solutions.
- We need a cross-government strategy.
- We need a managed and funded transition pending proper long-term funding.

The Nine Statements have formed the basis of our wider policy and influencing work. We have met with and discussed reform with the DHSC, MHCLG, HMT and No10 colleagues alongside local government and social care sector colleagues. We have continued to provide regular input into a number of NHS interface initiatives including supporting the work of the Better Care Fund team, and the Ageing Well workstream.

POLICY & COVID OVERVIEW

Under the heading of the Care We Want priority we have continued our Carers' Network and ongoing relationship with Carers' UK and Carers' Trust. We have also continued our work in relation to developing housing-based care solutions and have started further dialogue with the Associated Retirement Community Operators on projecting need. We have worked through our Commissioning Network to strengthen our focus on quality, provider viability and social value. We continue to engage with Care Quality Commission in relation to quality and safeguarding, restraint, segregation and seclusion.

We worked with the TEC Services Association (TSA) to establish a technology commission to examine the role of technology in a reformed social care system. The commission is expected to report in March 2021.

DHSC commissioned ADASS to work on the second phase of the Adult Social Care Outcomes Framework project. The project will produce a report, having consulted a range of local authorities, sector experts and people with lived experience, that sets out a refined set of metrics that better reflect the outcomes that the sector hopes to achieve through the provision of care and support services. This is expected to report in March 2021.

In relation to our workforce priority we have supported the adult social care recruitment campaign, linking with the ADASS regions. Our Workforce Network has continued to be active across a range of fronts. We also jointly hosted bi-annual workforce conferences with Skills for Care and the LGA.

The past year has also seen a strong focus on equality, diversity and inclusion (EDI). This has included the establishment of an EDI Action Group. The agreed focus for the group going into 2021 is workforce. The group recognises that the only way to increase the diversity of Directors of Adult Social Services and Assistant Directors is by developing a more diverse pipeline of people at middle management level.

Our staff, members and the President's team have continued to work with key partners including people with lived experience, NHS organisations, the Local Government Association, Care Quality Commission, Healthwatch, National Audit Office, the Office of the Public Guardian, think tanks, research bodies, government departments, the Care and Support Alliance and the Care Providers Alliance, the criminal justice system and voluntary and community sector partners.

POLICY LEADS

Workforce



Delyth Curtis

Digital and technology



Alison Tombs



Sharon Houlden

Resources



Cath Roff



John Jackson

Associates Network



Cathy Kerr



Sue Lightup



Kathy Clark

Principal Social Workers Network



Jenefer Rees



Sharon Smith



Simon Homes

Equalities, Diversity, Inclusion



Beverley Tarka



Tricia Pereira



Cath Roff

POLICY LEADS

Learning Disabilities & Autism



Moira Wilson

Housing



Neil Revely

Standards, Performance & Informatics



David Watts

International



Sue Wald

Mental Health, Drugs, Alcohol



Melanie Brooks

End of Life Care



John Powell

Safeguarding Adults



Seona Douglas



Alan Lotinga



Liz Hanley

Older People and Dementia



Georgia Chimbani



Simon Garner



Pat Jones-Greenhalgh

Communications

Communication is key for ADASS. In 2019, we grew our potential to communicate by adding capacity to the team. In 2020, ADASS has been recognised for its excellent internal communication mechanisms, which have supported a steady and nearly daily flow of communications to and from members, regions, and key Government departments.

Our functions of informing the public about adult social care rely on developing relationships with informed journalists as well as our partners. We have increased nearly two folds our presence in the media, and ADASS has made progress in its aim to be the go-to organisation for comment or background information on adult social care.

Events

Both the Summer Conference and the National Children and Adult Services Conference (NCASC) were successfully moved to virtual and have offered access to a much larger number of social care colleagues than ever before.

Public Affairs

We have continued to utilise our position as experts in adult social care, alongside the evidence gathered from activities such as the Budget and Autumn Surveys, to ensure that the opportunities and challenges facing adult social care are increasingly articulated across Parliament, the Civil Service and beyond. The President and Trustees spoke at a range of events over the course of 2020. ADASS has also provided verbal and written evidence to a range of parliamentary committees.

2020 in numbers:

28 Broadcast interviews
across all major news outlets

2.1% Social media engagement rate
well above average for a charity our size

Quotes on national and sector print journals
we were talked about once every other day in 2020 **185**

16 References to ADASS in Parliament and verbal evidence
given to Committees and All Party Parliamentary Groups in 2020

24 Number of events ADASS has participated in or
trustees have spoken at on behalf of ADASS

ADASS is committed to social justice and a key part of delivering on that priority is the work it is doing on equality, diversity and inclusion (EDI). We have established an EDI action group with membership from across ADASS regions which is making good progress in co-ordinating and delivering key pieces of work.

One of the key actions in our work programme was to gain a better understanding the diversity of ADASS membership via our equalities monitoring processes. With some focussed effort the equalities monitoring return rate for 2020 increased from 20% to a 52% return rate. For 2021 we hope to improve on this again with the help and support of ADASS members, but we feel that it is important that we publish our 2020 analysis. By doing so we can offer an insight into our current membership and we have a baseline on which to track our progress over time.

If you are interested in joining our EDI action group, contact ian.hall@adass.org.uk.

2019 Change	2020		
	AGE		
		Responses	%
+2%	26-35	9	2%
-9%	36-45	54	12%
-6%	46-55	202	45%
+24%	56-65	145	33%
+4%	65+	27	6%
	TOTAL	445	
	DISABILITY		
+16%	None	397	89%
-7%	Sensory Impairment	8	2%
+2%	Long Term Illness	24	5%
-7%	Prefer not to disclose	8	1.5%
-0%	Physical Impairment	3	1%
-0%	Learning Disability	5	1%
	TOTAL	445	
	GENDER		
+16%	Female	290	65%
-7%	Male	153	34%
-6%	Prefer not to disclose	1	0%
	TOTAL	445	
	GENDER REASSIGNMENT		
+3%	No	377	85%
-4%	Not Specified	63	14%
-0%	Yes	5	1%
	TOTAL	445	

EQUALITY & DIVERSITY UPDATE

2019 Change	2020		
	SEXUAL ORIENTATION		
+12%	Heterosexual	379	85%
+1%	Gay Woman / Lesbian	20	4%
+2%	Gay Man	16	4%
-6%	Prefer not to disclose	21	4%
-1%	Bisexual	8	2%
	TOTAL	445	
	RELIGION		
+9%	Christian	200	44.9%
+18%	No Religion	193	43.4%
-17%	Prefer not to disclose	21	4.7%
+3%	Other*	18	3.1%
-0%	Buddhist	5	1.1%
+1%	Jewish	5	1.1%
	TOTAL	445	
	ETHNICITY		
-4%	White - British	386	86.7%
+2%	White – Irish	10	2.2%
+2%	Asian or Asian British	8	1.8%
+0%	White - Other	12	1.6%
+1%	Black or Black British	11	1.6%
	Mixed	5	0.9%
+2%	Other*	13	2.4%
	CARING RESPONSIBILITIES		
-6%	None	209	46%
+5%	Primary carer of a child / children under 18	94	21%
+6%	Secondary carer (another person carries out main caring role)	71	16%
+7%	Primary carer of older person (over 65)	52	12%
+2%	Primary Carer of disabled adult (18 and over)	13	3%
-13%	Primary carer of disabled child / children (under 18)	6	1%
	TOTAL	445	

*If ANY of the Equality, Diversity and Inclusion form options received one or a low number of responses, hence putting at risk of individual identification, ADASS has taken the liberty to group these under the 'Other' category.

ADASS

ADASS is the Association of Directors of Adult Social Services in England. We are a charity, a leading, independent voice of adult social care.

For all enquiries, please contact:
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