

PRINCIPAL SOCIAL WORKER



Annual Report

2024 – 2025



“

Social work is about life, treasuring humanity, building connections, sharing and promoting fairness. It is about creativity, care and love – being there to help people overcome obstacles and oppression that hold them back. For people using our services, a social worker should be someone to trust and believe in – someone who helps you believe in yourself. Sometimes we must hold boundaries, protect rights, advocate and challenge. We are always in the midst of the messy stuff, finding ways forward.

”

**Ruth Allen, CEO,
British Association
of Social Workers**

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formats such as large print and Braille. Please call 01274 435400.

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Introduction

Hello and welcome to the Annual Principal Social Worker report for 2024/25.

Over the previous year, across all our social work services covering Bradford and District, Adult Social Workers have continued to work hard on the frontline, offering the people they support our professional advice, guidance and supportive interventions to help ensure that people remain healthy, happy and where possible, at home.

One of the main outcomes of last year's Adult Principal Social Worker report concluded that our support would be better served if social workers were supported in getting to know their communities better, looking at what prevention opportunities were available, and using that knowledge to concentrate on a comprehensive workforce development offer that supported them to be true community practitioners.

Whilst there is clear evidence that social workers are becoming increasingly embedded in communities and feeling comfortable with locality based working, there is more that needs to be done in this area. Through our Quality Audit approach, there is a consistent theme that social workers remain less confident in understanding the locality offer and that they feel more support is needed in this area. The rationalisation of office buildings, and the wider role of hybrid working, although very helpful and welcome in providing flexibility, continue to pose a challenge in terms of how social workers practice and how this style of working may inhibit community and locality approaches, and this is something we need to consider going forward.

During the year, social workers have subsequently received support from commissioning colleagues via training to help understand what localities offer, particularly around universal services so that we may be more preventative in our approach, and there is now a clearer understanding of tools such as Connect to Support. In addition, across Older Peoples services, social workers are working well through Community Led Support, including hosting a regular market stall to increase awareness. This service also works in close partnership with community wardens in the heart of localities and in a preventative and inclusive approach. Similarly, our Adults with Disability social work staff now have community desks or spaces available in the heart of services, such as Keighley People First, enabling them to be more connected and accessible and jointly share space with people that they support.

The previous year has remained exceptionally challenging for many people who draw on the support of social workers. Supporting people to remain as safe as possible, whilst recognising the most difficult of socio-economic conditions that they face, is increasingly proving to be our most significant intervention. Social Workers, working around the clock, seven days a week, have risen to the challenge. We provide timely and compassionate support and offer hope to many people who feel that the situation is without hope or a compassionate response from others.

This year's Principal Social Worker Annual Report is slightly different to previous years. This is so that we can recognise and celebrate the diversity of the support offered to people by adult social workers. The report is based on three distinct parts, held together by a commitment to our social work practice model.

Part One of the report focuses on Our Social Work Workforce. Despite undoubted financial difficulties faced by the council this year, the offer to support the adult social work workforce is a high priority across the Adult Social Care Department. As such, our offer to Social Workers is about ensuring that they feel safe practicing adult social work in Bradford. That joining Bradford Council, as either a new or as an experienced social worker, is an attractive offer for those looking for work. Our practice model reflects our commitment to ensuring that our staff are highly trained, legally literate and are consistent in their approach towards upholding human rights through every intervention we provide to those who have adult social workers in their lives.

Part Two of the report will focus on Our Social Work Services. Here we will reflect on how all our services work to provide opportunities for people to experience social care support in a way that opens up possibilities, ensures people remain in control of their lives, and works with professionals to recognise that the person themselves is the expert of their individual circumstances. From supporting young people who are 'preparing for adulthood', through early intervention in the Independence and Advice Hub, our Older Peoples Services, Mental Health Services and our newly created Adults with Disabilities Services, these are shared values. Underpinning our social work support is also the unwavering commitment to ensure people remain as safe as possible whilst remaining in control of how we approach adult safeguarding and the safeguarding of their legal rights via our Mental Capacity Act Service.

Finally, Part Three of this year's report focuses on Our Social Work Values. This is the area of adult social work practice which is quietly continually taking place. The best social work is often discrete, under the radar and preventative, recognising issues of stigma. Our social work values underpin the work we do and in part three we will focus on our approaches to enable people to be involved in democratic decisions such as Promote the Vote, our work in partnership with people around the Peoples Forum and how it will help govern our approach, and how we work to support those people in Bradford who are with us for an immediate transition period in hotels and seeking basic support, such as clothes, shoes and children's toys. This part of our report will also focus on how our social workers demonstrate their commitment to public service values in action. Given the diversity of Bradford and District, it will also recognise where we are investing in our cultural competency in allyship with the beautiful, rich diversity of the people we support.

I am exceptionally proud and grateful of the adult social work support that is delivered throughout the year in Bradford. This report will highlight how Adult Social Workers make a difference and continue to provide sanctuary, safety and hope to many.

ROB MITCHELL

**PRINCIPAL SOCIAL WORKER ANNUAL
REPORT 2024/25**



Social Work Workforce Development for Adult Social Care

The Council is committed to ensuring that its professionally qualified Adult Social Work workforce is trained and equipped to undertake the statutory responsibilities placed upon it. As such, over the previous three years, our Social Work Workforce Development Team has exponentially grown to enable to Council to meet increasing demands.



The Social Work Workforce Development Team reports directly via its management to the Principal Social Worker for Adults. The team is comprised of an overall Workforce Development Manager, with responsibility for wider Continuous Professional Development for all qualified staff and a lead role in managing the Social Work Teaching Partnership; and a dedicated manager who oversees the Assessed and Supported Year in Employment scheme, which governs the preceptorship of all Newly Qualified Social Workers. In addition to this the service now also includes four Practice Educator Consultants, who support multiple statutory social work student placements within the department. The service relies on the support of a Business Administration Apprentice and Learning & Development Officer, who holds the remit of providing learning and development support for the wider Department, including the in-house care service provision. Ensuring that the Council meets its statutory responsibility to provide sufficiency regarding qualified and registered social work provision is a priority within the Principal Social Worker remit.

Social Work Student Placements

Providing excellent learning opportunities within statutory settings enables the Department to continue to provide sufficiency of practice-ready social workers who graduate via local Universities, and help ensure the service continues to succeed regarding recruitment. This year, Bradford Adult Social Care has supported over sixty social work students through practice placement opportunities within our service areas.

Placement provision is a vital part of delivering excellent social work support. Experienced social workers and managers are supportive of placement provision, not least for the challenges and innovative approaches that newly educated social workers bring to the service area. There are some difficulties in providing ideal student placements across Bradford, primarily due to the reduced numbers of building spaces available across localities. In addition to this, whilst hybrid working often works well for experienced social workers, it is evidentially clear that students on placement learn best when they are supported in an office environment, with social workers on hand to oversee their learning.

Social Work Workforce Development for Adult Social Care

SECTION 1: OUR SOCIAL WORK WORKFORCE

There is a special mention this year to our new Adults with Disability Service, formed primarily from our Community Learning Disability Service, who across the year singularly provided over 50% of all successful Adult Social Work Placements across Adult Social Care.

The Social Work Workforce Development Team will continue to work proactively with all teams and services to continue to increase placement opportunities as a fundamental part of addressing qualified social work vacancies. Our commitment for 2025 is that we will achieve more than 75 Social Work Placements and that we will increase the number of placements across all service areas.

Practice Education

Across 2023/24 the Social Work Workforce Development Service have continued to ensure that the Council has enough qualified Social Work staff who undertake a specialist award to become Practice Educators and deliver quality oversight of social work student learning. This year saw seventeen more Adult Social Workers undertook Practice Educator training, which is jointly delivered by the Social Work Workforce Development Service as part of the Bradford Social Work Teaching Partnership and means that there are now over 100 Practice Educators within the service. This is an incredible achievement and further helps ensure that across Adult Social Care in Bradford, we maintain our ability to continue to train and recruit qualified social workers to assist with vacancy management.

Best Interest Assessor Training

A Deprivation of Liberty is a legal term and occurs where someone is under continuous supervision and control and is not free to leave a care setting, such as a hospital or Care Home, and the person lacks capacity to these arrangements. In these circumstances,

the Local Authority has a legal duty to ensure the human rights of those people in these circumstances are upheld and that the law is applied. To undertake this role, Local Authorities are required to ensure that they have professional registered staff (usually social workers but also Occupational Therapists, nurses and psychotherapists) who undertake the legal role of Best Interest Assessors. The Social Work Workforce Development Service continue to support Social Workers and Occupational Therapists who are employed by the Council to undertake this training, to ensure that the most vulnerable adults across Bradford and District continue to have their human rights upheld and have support plans in place that are as least restrictive as possible.

In addition to the forty staff across the Adult Social Work Service who are already Best Interest Assessor trained, in 2024 a further twenty staff have been trained to be Best Interest Assessors. This number benchmarks exceptionally well against over comparative Local Authorities and provides further evidence that the practice model, which ensures staff are rights-based and legally literate in their approach, is delivered. Recruitment for Best Interest Assessor training for 2025 is now underway.

Social Work Workforce Development for Adult Social Care

Approved Mental Health Professional Training

Approved Mental Health Professionals (AMHPs) are primarily social workers (although mental health nurses and OTs can also be AMHPs) approved by the Local Authority to carry out lawful function of the Mental Health Act (1983). AMHPs are warranted via the Principal Social Worker on behalf of the Director of Adult Social Service, and whilst AMHPs work for, or on behalf of, the Local Authority, their assessment outcomes are independent.

Training for AMHPs is currently provided by Leeds Beckett University, and for 2024, four members of staff are coming to the end of this course and on qualification they will join the AMHP workforce. The training is of an extremely high standard and social workers who undertake the training are expected to meet exemplary standards of professional expertise on completion of the course.

Recruitment is underway now for 2025, with up to six staff receiving the training, which takes six to nine months to complete. This rolling approach to AMHP training continues to ensure that Bradford Council meets its legal obligations under the Mental Health Act (1983) to ensure sufficiency of AMHPs and further cements sustainability in the workforce and aids retention in an extremely difficult to recruit field where there are shortages of AMHPs on a national level.

Continuing Professional Development Opportunities

The Council has a responsibility to ensure that Social Workers receive sufficient Continuous Professional Development (CPD) in order that they meet the professional standards as prescribed by the regulator, Social Work England, and to help ensure their skills are refreshed and that they understand new approaches to support the delivery of excellent social work practice.

In addition to providing statutory training (e.g. AMHP & BIA training) the Social Work Workforce Development Service has provided training opportunities across 2024 across nine separate courses, to the equivalent of 1,384 places. This means that on average a social worker within the Adult Social Work Service will receive on average 4 additional, separate pieces of Continuous Professional Development.

To support the embedding of the new practice model, some areas of CPD have been made mandatory and attendance from social workers has been exceptionally high. 536 staff, which included the full social work service and allied professionals, received training regarding Case Note Recording. This training is vital in terms of our continued improvement around legal literacy and rights-based social work practice. In addition to this, 225 social work staff received training in Adult Safeguarding, enabling them to further deliver timely intervention to keep people across Bradford as safe as possible and aware of their

Social Work Workforce Development for Adult Social Care

universal right to live free from abuse. 227 staff received additional support around The Care Act (2014) to ensure our statutory duties are met to the highest standard.

This year, we have also delivered extra CPD support to frontline social workers and social work managers, to ensure that the social work workforce is anti-racist in its outlook and service delivery. 200 places have been made available to enable staff to attend training in relation to Anti Racist Practice, Unconscious Bias training and Anti Racist Supervision training.

Social Work England

All Social Workers are required by law via the Health and Social Care Act (2012) to be registered with the national regulator, who are Social Work England. To register, qualified social workers are required to demonstrate year-on-year learning and reflections uploading a comprehensive write up of at least three CPD opportunities they have undertaken.

Once again, all Adult Social Workers have successfully completed the renewal of registration process with Social Work England in a timely manner. Opportunities and communication around CPD are shared consistently throughout the year and it is vital that social workers recognise the importance of uploading their CPD on a regular basis to aid with renewal. There is evidence that this is happening across the service.

The Social Work Workforce Development Service, through the Raising Expectations Programme, has led on providing renewed guidance to

ensure all Social Workers are afforded some protected CPD time within their working hours. Staff are encouraged to ensure this is prioritised in diaries and again there is clear, demonstrable evidence that time is being used well by Social Workers and is helping them with their requirements to meet Social Work England standards and deliver continuously improving and high-quality social work support.

Social Work Degree Apprenticeship

The Department for Education, in partnership with the Department for Health and Social Care, has continued to provide opportunities for staff who are interested in a career in social work to be supported by their employer to receive professional social work training.

Adult Social Care currently provides the Social Work Apprenticeship for 10 staff members across the Department. Colleagues undertaking the course will graduate into qualified social work roles on completion of the apprenticeship course.

All our social work Apprentices are doing exceptionally well in their studies. In addition to this they are supported by our outstanding Team Managers and Service Managers in their service areas. This is the last cohort being supported on this opportunity for the time being. However, we are hopeful that it will be available again in the future.

Experiences of Social Workers within the Hospital Team

Newly Qualified Social Worker

"As hospital social workers, we play a vital role in the healthcare systems, supporting the people we work with navigate their way round and find solutions to their problems. As an ASYE social worker, I have been given the opportunity to work alongside my senior colleagues on the frontline in the hospitals. I feel as a social worker in the hospital team a major part of our role is to align our client's health issues within a bigger picture considering every aspect of their life. Our health colleagues utilise a more medical approach, whereas I as a social worker adopt the social model and see the person, rather than their ailments, difficulties, or reason for admission. I have thoroughly enjoyed the experience and found it very beneficial in this stage of my career to work in a fast-paced environment, with a variety of professionals including health care staff to collaboratively work together to assist clients with post hospital care or safe discharge. The team are all incredibly supportive of one another and I'm proud to be working in this team."

Social Worker

"I have had a positive experience working as a frontline worker within the hospital SW team. ASYE. I have had a lot of support from duty workers, managers, other colleagues and have benefited working at the MAIDT office where there is a focus on MDT working."

I have been able to build my confidence and work in a fast-paced environment and effectively manage the increase in demand we have experienced. I have been able to achieve many positive outcomes for the individuals and their families I have worked with. Many have suffered a life changing event and have never received support from adult social care before, therefore coming into hospital has been the first time they have had contact with the social work team. I have enabled people to return home with a care package tailored to their needs as well as community resources such as assistive technology, park meals, carers resource etc. This has positively impacted on their health and wellbeing."

Experienced Social Worker

"Hospital Social Work is exceptionally fast-paced and the referrals we receive are often quite complex in nature, and the service users diverse in their needs and from a multicultural background as we cover the whole Bradford District."

Supporting individuals and their families can be a challenge, however, through Peer Review discussions we discuss strengths, what worked well and areas of learning and improvement.

Anyone wishing to explore Hospital Social Work as a future career will be pleasantly surprised and will be given good grounding to aid both their personal and professional development."

Experiences of Social Workers within the Hospital Team

Advanced Practitioner

"My experiences of working in the front line at Bradford Royal Infirmary has not just aided me in developing as a practitioner, it has helped me grow as a person.

Every day at work is different, ranging from complex discharges, safeguarding alerts, fast paced Duty work, and on occasions the odd animal which may require support too! The thrill, the excitement, that feeling you get when you know you can support someone that is in urgent need of this. Hospital Social Work is also not for the faint hearted, it really does take a strong minded, yet compassionate individual to be able to deal with the pressured health environment, alongside keeping the service user at the centre and advocating strength based and positive risk approach to all assessments and interventions.

For those we work with, the experience of being brought into hospital can be truly devastating. The uncertainty, not being well, an injury, or life-threatening accident, or a health issue that requires urgent medical attention are some of the few reasons as to why individuals are admitted. A significant event that changes someone's life forever. Through multi-agency working with our NHS colleagues, and liaising with our wider Bradford Council colleagues, we are able to support individuals through these difficult times. Our focus is to enable people to return home and where care and support is required, this is always tailored to the individual and to help them achieve the outcomes they want to achieve.

We adhere to stringent processes around safe & effective discharges from hospital, including implementation of Discharge to Assess Pathways. Our work is in line with Care Act duties and adherence to Home First and more recently HFAST Pathway. However, we have a commitment to work within all the above whilst always upholding social work values and principles, which can often become difficult in a health setting. We strive to conduct holistic, meaningful, person-centred assessments with the people we work. Furthermore, we offer a lot of guidance and support to carer's & families, to make them understand not only hospital processes but also Adult Social Care roles and responsibilities."

Raising Expectations Quality Improvement

Our Raising Expectations quality and improvement programme provides a quality assurance framework for policy renewal and development and for redesigning key processes across the department. The programme is organised into 4 cross-departmental workstreams; these are all chaired by senior managers across BASC and have membership from across Health and Wellbeing. Each workstream has a set of identified priorities and a series of task and finish groups for dedicated pieces of time limited work. It aims to ensure that improvement work moving forward supports Bradford Adult Social Care's practice model.

Our practice model is based on the following principles and values:



We have co-produced our practice framework which places values at the heart of our social work. The framework is based on the following principles:

- **Strengths and Asset-Based** – we draw on the skills, assets and support networks already in place. Sometimes it is enough that as social workers, we are the intervention.
- **Rights-Based** – we recognise that participatory capabilities are central and support people as the expert of their own life, whilst we are experts of systems, guidance, legislation, approaches, and support.
- **Legally Literate** – within a holistic approach which values the contributions of other specialisms we are proud that social workers have a unique understanding of human rights frameworks and law, we have access to legal specialists, and we ensure we impart that knowledge.
- **Risk Enabling** – we work with people to support them to be able to understand risk, retain, use and weigh this understanding and communicate what the positive benefits are of taking risks in their lives as well as risk mitigation.
- **Valuing Diversity and Inclusion** – we take all practicable steps to make reasonable adjustments which enable supported decision making and inclusion, including culturally competent and anti-racist practice, recognising the strength of diversity and diverse approaches.

Raising Expectations Quality Improvement

What have we achieved this year?

Audits: social work self-assessment audits have been up and running across BASC for over 18 months now. The audits test social work staff confidence across the practice model domains and provide us with insight about good practice, what is working well and where we can better support staff and the people we work with.

The whole department has bought into the audit process and our numbers currently look like this:

Audit type	Number completed
Social Worker/assessor	1250
Team Manager	458
Service Manager	112
Total	1820

What have we learned?

- Social workers are still not as confident in being able to provide personalised support; they report that sometimes they are not aware of community resources, or that in some cases the personalised support needed is not available or does not exist locally. Work is being done to understand whether this is because of gaps in provision or a lack of knowledge about what is available across all the localities. This evidence is echoed in the feedback from people we support (see below).
- Mandatory case note recording training has been running for the past year as a result of issues identified with recording information. 536 staff have now attended this training and evidence recorded in audits is improving.
- Examples of exceptional practice are being collected as a bank of case studies and will be shared across the department.
- Further work needs to be done on identifying learning opportunities from audits and guidance has been updated to reflect this.

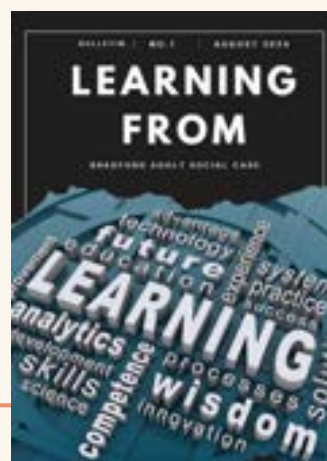
Other achievements this year

- Supervision: staff were asked to complete a survey on their experience of supervision practice in Bradford. This feedback identified that staff felt they didn't get enough time for reflection and reflective practice through our current

Raising Expectations Quality Improvement

supervision arrangements.

- As a result of this, a cross departmental group of managers and frontline staff developed and adapted a range of supervision resources and documentation. Training was delivered on effective supervision and on anti-racist practice; the training was attended by 114 staff with a supervisory role and follow up sessions will be held next year.
- The Supervision Policy was also revised and updated taking into account feedback from staff. This was launched, along with the revised documentation, in summer 2024; evaluation work with a focus group of staff is scheduled to take place in November 2024.
 - **Risk Enablement:** following cross departmental work, a new practice framework and guidance for risk enablement was launched in September 2024. These documents aim to support staff when undertaking risk assessments and to ensure that positive risk taking is embedded across Adult Social Care.
 - **Positive risk taking** is a process which identifies the potential benefit or harm which could result from a particular choice being exercised, reduces the risk of harm and then weighs up the expected benefits against the risk of harm which remains. It is not reckless, it is not negligent dismissal of potential harm, it is a carefully planned strategy for supporting choice. The guidance will be accompanied by training throughout autumn 2024 and further evaluation will be carried out in Spring 2025.
- **Self-Neglect:** The Raising Expectations developed practice guidance on self-neglect for the Safeguarding Adults Board. This has been ratified by BSAB and was published in September 2024.
- Guidance on social work registration and on protected CPD time for social workers has been updated and circulated.
- **Learning From:** A new workstream aiming to analyse and disseminate themes and learning from complaints, compliments, Safeguarding Adult Reviews, Ombudsman cases and other quality assurance work has been set up. This is called Learning From. There is a cross departmental Practice Group, chaired by the Service Manager for MCA and Team Manager for Social Work Development. The group meets monthly to collate and analyse learning, and to disseminate this across the department.
- Learning will be circulated via the Learning From Bulletin. The first edition of this was circulated to all staff in August 2024 and the second edition will be coming out in December. As part of this work all staff will also be asked to submit examples of good practice through a centralised mail box. The first issue can be requested from Catherine.mawn@bradford.gov.uk



Raising Expectations Quality Improvement

Learning from Adults Safeguarding Reviews

- Learning from Safeguarding Adult Reviews (SARs) – we know that nationally the most common type of abuse under S42 (60%+) are around self-neglect or neglect in the community. However, in Bradford we know that the most common type of reported abuse is organisational abuse or acts of omission – where people are in long term care and the neglect is on behalf of the provider. As a result of this we know that we need to
- Learning from the 6 SARs that have taken place in Bradford over the past 10 years we have identified that common themes in all circumstances which have resulted in a SAR are where there is insufficient evidence of: the person's voice in decision making; practitioner legal literacy in practice; supporting mental capacity; and supporting the person to be in control of decisions. In short, we need to be able to address how we are ensuring that the person and/or their family have access to accessible information about how to raise a concern about the quality of care and support they are receiving.

ASC Policy Site Project

We are excited to announce the launch of the ASC Policy Portal project, a new web-based hub designed to serve as a one-stop shop for all departmental knowledge. This project aims to centralise and organise essential information, including policies, procedures, guidance, templates, and more, making it easily accessible to all staff. Currently, we have a public-facing area with generic Adult Social Care information, and an upcoming staff-facing site that is set to become a vital resource for our department. Our immediate priority is to gather high-level operational procedures for each service area, ensuring that the most critical information is readily available. As we move forward, each service area's site will be populated with detailed information, SystmOne resources, and key policies like supervision guidelines.

In addition to this, we are developing a Learning and Development site, which will include all necessary information related to Continuing Professional Development (CPD), training, and development opportunities. This site will be essential for staff looking to enhance their skills and advance their careers. As the project progresses, we will also be customising the public-facing site specifically for Bradford, ensuring that our community accesses accurate and relevant information. The ASC Policy Portal is a long-term, ongoing project that will become an indispensable tool for all staff, streamlining access to the resources and information needed to support our work effectively. For further information, please contact oliver.hyde@bradford.gov.uk.

Six things our data tells us about demand for adult social care

As of June 2024

Demand for adult social care is at unprecedented level in Bradford and District. Nationally we have seen the same picture. However, locally our services have more demand than we would have expected for safeguarding concerns where an adult is living in a residential care home which is not rated as being good by the Care Quality Commission.

How many people ask for support from adult social care?

On a monthly basis the department's Information and Advice Hub is contacted by around 2,400 people. Most people's needs are met through information and advice. However, some people need more support. Services to support independence and regaining of skills and confidence are provided through what we call enablement services to 125 (5%) new people each month. Social workers are based in the Information and Advice Hub. Their professional expertise is available to ensure that anyone whose needs are more complex are identified early.

How many people need longer term support from adult social care?

As of the end of June 2024 there were 5,808 adults who were using a Personal Budget to manage long term support needs. Of these, over a fifth (21.5% or 1,252 people) were living in residential or residential with nursing care homes to meet their needs. Under four fifths (78% or 4,556 people) were supported to live in the community through a Direct Payment or access to commissioned community services. Most people who need support for the longer term will need professional social work involvement to enable them to make supported decisions about how their

outcomes are met. This is to ensure that they remain in control and that their wishes are at the heart of how support is planned.

What type of support is available to people with long term needs to help them remain as independent as possible?

Older People (aged over 65)

1961 older people (aged over 65) are supported to live independently with personalised support in their home. The numbers of people, and the average amount of care and support they need each week, has been increasing (average is currently at 14.3 hours per week).

255 older people are supported to live independently through using a Direct Payment to self-direct how their outcomes are met. This is an increase in the numbers of older people who are using Direct Payments (16.5%) and is likely due to people making decisions about which provider they want to deliver their care which are different to the options available through the Council's commissioned services.

We are seeing more people whose needs arising from frailty and/or cognitive decline is met through support in a residential setting (799) or residential with nursing setting (991). The rate at which we are arranging this support is up 13% from 2020/21.

Adults with Disabilities

971 adults with learning disabilities, autism or neurodiverse conditions are supported to live independently. 814 people access a day service. 75 people are supported through personalised support at home. 89 people use a Direct Payment to self-direct their

Six things our data tells us about demand for adult social care

support. We have seen increased numbers (26%) of people who are wanting to be in control of how their outcomes are met and are choosing to self-direct support using a Direct Payment.

683 adults with learning disabilities, autism or neurodiverse conditions are supported to live as independently as possible in what we call specified accommodation with a personalised support provider registered by the Care Quality Commission. 45 adults with learning disabilities, autism or neurodiverse conditions live in Shared Lives arrangements. We have seen the number of people who are choosing to live in supported living arrangements of this type reduce, with more people wanting support to live in their own home with an independent tenancy.

The number of people whose needs are met through residential (123) or residential with nursing (39) has significantly reduced.

Adults with Mental Health Conditions

A very significant amount of the work undertaken by Council employed Mental Health Social Workers is commissioned by the NHS, who hold the data in relation to what services are jointly commissioned by the Council and the NHS, and this reflects the majority of the work undertaken by social work colleagues. However, in addition and outside of that arrangement, we do know that what is commissioned by Social Workers exclusively via the Council includes the support of 148 adults with mental health conditions, who are supported to live independently via social work support. 13 people access a day service. 131 people are supported through personalised support at home. 32 people use a Direct Payment to self-direct their support.

169 adults with mental health conditions are supported to live as independently as possible in what we call specified

accommodation with a personalised support provider registered by the Care Quality Commission. 1 person lives in Shared Lives arrangements.

The number of adults with mental health conditions under the age of 65 whose needs are met through residential (59) or residential with nursing (37) remains stable. The number of people aged 65-74 whose needs are met through residential (38) or residential with nursing (46) also remains stable. Exploring alternative models of support, which enable recovery outcomes, is a priority for social workers practicing in this area.

Adults With Disabilities Service

Preparation for Adulthood

The Preparation for Adulthood Service supports young people with specific support needs transition from children's social care. Joint working with children's social care may begin at age 16 and a transition care act assessment to assess likely needs under the Care Act 2014 will be undertaken before the young person turns 18. Any young person being referred to the PFA / Front Door Team should have an Education, Health and Care (EHC) Plan in place.

The young person must have a diagnosed disability to be eligible for support from the PFA / Front Door Team:

- Learning Disability
- Physical Disability
- Complex Health Conditions
- Sensory Impairment
- Autism Spectrum Disorder
- Neurodiverse Conditions

A social worker or occupational therapists may be allocated on or around the young person's 16th birthday; this worker may attend any relevant meetings before they are allocated if there are any major concerns that would impact on the transition into adulthood, for example the Year 9 Education Health and Care (EHC) Plan annual review. Once the young person is allocated the social worker the focus of the work age 16 to 18 years will be on preparation for adulthood. This will involve working with the young person, their family, carers and professionals to explore existing support in order to help with the achievement of the young person's aspirations and shape the support moving forward. This will involve, wherever possible, attending all statutory meetings relating to the young person's development and ensuring that need is

defined and provision is linked back to the young person's aspirations and the shared outcomes across health and education. All decision making will be informed by the young person's wishes and feelings, in line with the Mental Capacity Act 2005. Joint working with schools, colleges and other community partners – allocated social workers and strong relationships. In the heart of the community.

The practice model is based on the national preparation for adulthood outcomes, those being: Employability and Employment; Independent Living; Community Inclusion; and Health. In Bradford we value participation in democratic and civic life so we include focus on an additional domain, that being supporting young people as first time voters to register and participate in elections.

Adults with Disabilities Service

The service works across 5 localities across the District, supporting with adults with disabilities. The service currently supports over 3000 people with learning disabilities, neurodiverse conditions, physical and neurological conditions who are eligible for long term adult social care support under the Care Act 2014. Social Workers and Occupational Therapists in the service undertake assessments, support planning and reviews under the Care Act. The practice model is based on an approach which is: strengths based from a position of unconditional positive regard for the person; grounds support planning in looking to natural networks of support through community assets; rights based and enabling of positive risk taking with a strong ethos of safeguarding human rights in practice; and underpinned by equality, inclusion and diversity. The practice model gives emphasis to working

Adults With Disabilities Service

with people with lived experience of social care (co-production) which we try to live through our commitment to providing opportunities for supported employment including within our own service, our commitment to experts by experience being part of all recruitment decisions for staff in the service and our new People Forum who will provide support and challenge in all policy and procedure development.

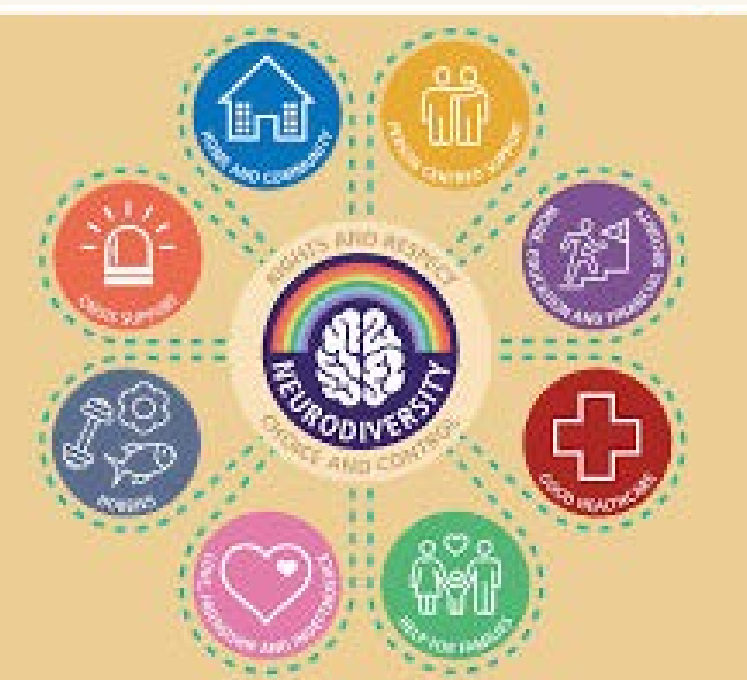
Neurodiversity Team

The Neurodiversity team is a hub of Social Workers and Occupational Therapists who are dedicated and skilled to work with people aged 18 + with autism and/or other Neurodiverse conditions. The team is based within the Learning Disability and Preparing for Adulthood Service and sit alongside the existing Learning Disability Locality Teams. The overall focus of the Neurodiversity Team is to work with people to enable them to live a good life, by working in a neurodiverse friendly way to understand the person, their strengths and what is important to them. The team work

creatively, to find solutions to make a positive impact on people's lives. The ND Team work within the legal framework of the Care Act 2014, providing a two pronged approach to support and guidance for people with neurodiversity.

a) Providing Information, advice on well-being, and prevention. As part of our screening and initial advice and guidance offer, the team will be having skilled conversations with people to ensure they are aware of the community-based offers of support such as the Autism Hub, Social Prescribing, Employment Initiative's and Voluntary, Community and Social Enterprise options of support. Alongside, information on alternative therapies and one-off payments for aids, adaptations, and assistive technology.

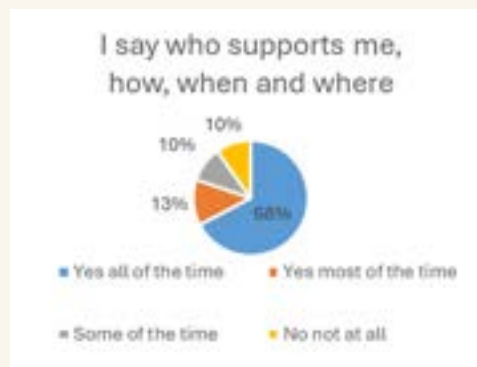
b) Assessing eligibility under the Care Act (2014). For those individuals who have substantial difficulty because of their neurodiversity, the team will be assessing individuals' eligibility in accordance with all relevant legislation. This will establish if the person is unable to meet two of the well-being outcomes and as a result there is a significant impact on their well-being. For those people who are eligible, social workers and allied professionals will work with the person to identify their goals, aspirations and outcomes and create a tailored support plan which is underpinned by principles of community led support (CLS). They will work within further legislative frameworks such as the Mental Capacity Act (2005), Human Rights Act (1998) and assessing people under the National Framework for Continuing Health Care (2012) eligibility where proportionate to do so. They will support positive risk taking and understand the legal obligations of the Autism Act (2012) and Equality Act (2010).



Feedback from people we support

Various ways of gathering feedback from people are in place across the department. In the Adults with Disabilities Team, 105 telephone and face to face surveys have been carried out by an expert by experience employed within the team.

These surveys tell us that people feel well supported and valued, and generally feel in control of their support:



The surveys also demonstrate that people are not always sure about what is on offer in their local community, or are not always able to access these services. This means that we need to do further work ensuring that social care staff and the people we support are aware of all the community based provision on offer and that we can respond to gaps in provision when they arise.



Feedback from people we support

I have excellent support from my mum, my carer and social services. X is always given a choice and is included in everything.

Great team of caring people, responsive and compassionate.

I want people to support me holistically and not to judge me. For people to be kind, caring, empathetic and understanding. To be gentle, have a calm tone of voice and to be there to encourage.



Adults with Disabilities - case studies

Jeremy (real identity has been protected) has cystic fibrosis and required input from social work colleagues around transitioning to adulthood. Through conversations with colleagues he indicated that his ambition would be to have a job. Through a project run within the council around employment training and support he applied and was offered a place, subject to adjustments to enable access. Jeremy needed assistance from a PA to meet aspects of his care, requires a hoist and use of a wheelchair. Through the employment programme and his ability to speak out where reasonable adjustments were not in place his social worker and OT worked in partnership to ensure that he had access to spaces that are not immediately accessible to him. At the end of the programme Jeremy was offered a part time position; his care is solely funded through the DWP access to work programme. Without the joint working approach that would be harder to replicate through separate teams and agencies Jeremy's outcome would be much harder to achieve. Jeremy in slightly different circumstances would be in receipt of ongoing social care support, perhaps attending a day service and with less hope of realising his dreams. I think this case study emphasises the opportunities that are available with closer relationships and unifying under one management team.

Sam was placed out of area as a child by Children's Services due to his behaviour which challenged services. Sam was autistic and had a mild learning disability. The annual cost of this placement was £182k per year. When Sam was close to their 18th birthday, Children's Services referred them to the Preparation for Adulthood Team asking for adult social care to take over the care coordination and commissioning of their support. The OT visited Sam with their allocated social worker and completed a sensory and environmental assessment of Sam. Sam loved to play loud music, in particular drum and base. This disturbed other residents in the home they were living in. Sam did not want to live out of area, they wanted to return to Bradford and reconnect with friends they had when they were at school. Sam regularly got into fights with the other residents over their drum and base, which had led to several safeguarding concerns being raised for resident on resident physical harm. The OT worked with the Home Finder Team to find a flat for a Sam in Bradford. The OT arranged for site visits with Sam, where they planned for sound proofing the room and to provide Sam with a wearable solution which played the drum and base allowing Sam to control their reactions without impacting on others. Sam successfully moved into their own home and is now supported with minimal floating support.

Employment Matters

Social Workers across the Adult Disability Service are evidencing their understanding of the practice model in many creative ways. As part of their commitment to rights and social justice, the service are committed to supporting people across Bradford and District to have strong employment opportunities and the right to experiencing financial stability, independent of their families and the state, and to help enable them to have status in society.

Bradford's Employment Matters Scheme, which was developed in partnership with the DWP through their Local Supported Employment grants, was a 2-year funded programme to support 100 Autistic Adults and Adults with a Learning Disability with a job coach, through our delivery partner United Response to deliver using the 5 stages of Supported Employment. The Scheme started in December 2023 and has generated over 172 referrals to date. A total of 91 people have successfully started on the scheme and have job coaches allocated. A further 14 people are identified and signed up for a job coach. Due to high interest and success of the scheme the DWP have offered an extension until 2026, to support a further 30 Autistic Adults and Adults with a Learning Disability into paid employment.

The scheme has successfully supported 8 people in paid employment, one of which is in the process of setting up their own business! And there are more job interviews in the pipeline.

The priority for the Adult Disability Service and the Social Workers and allied professionals, is to further support Employment Matters Team, in order to support more people find jobs like Lewis, and to fully expand the commitment to

Employer Engagement. The service is talking to other council departments and local and national businesses, which operate in the Bradford District, and promoting their approach to employment opportunities. If you have any roles in your teams or know of any businesses who might be interested in offering an opportunity to one of our participants or just want to know more about the scheme please email us at employment.matters@bradford.gov.uk



Employment Matters



Read first hand from one of our participants of his experience with the Employment Matters scheme.

"I came across the organisation, United Response and Employment Matters, after my grandmother located an article in our local newspaper in the Easter of 2023, after leaving my previous employment. I made contact with 'Employment Matters' who processed my initial referral. They made the referral process for assistance in employment really effective and simple. I was assigned a Case Manager who identified with me my areas of development and which jobs aligned up best to my skill set at that time.

The help and support has been delivered through a range of different platforms – telephone support, face-to-face support at meetings and written advice. My Case Manager and her Job Coach supported me with making job applications and how to write the best information to captivate the potential employer. They also provided practical mental and emotional wellbeing support, as I was struggling a lot within my personal life coupled with the fact that I was having to manage my neurodiversity, which could sometimes be overwhelming.

My Case Manager and Job Coach made the job application process very streamlined and manageable. They would liaise with the potential employers on my behalf to remove any communication barriers I was experiencing at the time. They also provided practical support; in reaching an agreement to obtain interview resources in advance of the interviews so I could adequately prepare for these without adversely affecting my mental health. On the days of the interviews, the Case Manager and/or Job Coach accompanied me to the interviews and ensured that I felt comfortable. They would repeat the interview questions to me verbally in the interview room and they would 'check in' to see if I needed the interview adjourning at any time. Nothing was too arduous for them to execute.

I was successful in acquiring two job positions with United Response – one in July 2023 with an insurance company (which was a very brief stint) and the other with my current job within the NHS that I was employed to back in February 2024. I currently work as a Support

Employment Matters

Service Team Secretary for a drug and alcohol service. They ensured that full mental health risk assessments were completed in consultation with my employer. My Case Manager and Job Coach were excellent at communicating the reasonable adjustments I required within the workplace. For example, I use noise cancelling headphones to assist with concentration and I know that I can talk with my Line Manager about any personal or employment-related issues that I am facing. I also have the option of working flexibly, changing my pattern of daily working around to accommodate for me having to attend medical appointments, even if these are arranged at the last minute.

My Case Manager and Employment Line Manager have conducted regular appraisals with me, identifying targets for me to achieve that I feel comfortable in achieving. The frequency of these appraisals were reduced gradually as I was becoming more confident within my employment. However, I knew that I could make contact with any Job Coach over the phone if I needed any urgent advice in between appraisals at any time or if I was in crisis. They have also positively validated my effective achievements within my employment, and this has massively boosted my self-confidence, motivation and self-esteem within the workplace. Overall, my experience with both 'Employment Matters' and 'United Response' has been fantastic and extremely positive.

On a final note, to conclude, I would absolutely have no hesitation in recommending these organisations to any employer or prospective employee, who has either neurodiversity and/or mental health difficulties, who are seeking to find employment. I would even be happy to be invited to share my experiences verbally with other organisations and members of the public, and I would be happy to be contactable through the abovementioned organisations." (Lewis, Employment Matters participant)



The Hospital Social Work Teams



The Bradford Hospital Social Work Teams work across both Acute hospitals (Airedale General Hospital and Bradford Royal Infirmary) as well as the Community Hospitals (St. Lukes/Westwood Park/Westbourne Green). The teams consist of Social Workers and Community Care Officers who support people to be discharged from the acute hospital and Intermediate Care settings to their homes with appropriate support and enablement, wherever this is possible. They work closely with their Trusted Assessor colleagues to ensure discharges are both safe and effective. They also undertake ongoing assessments in the community for those people discharged into the Discharge to Assess Beds for rehabilitation and further assessment.

Engagement with the individuals, their families and carers, as well as multi-disciplinary team colleagues is essential in some of the complex casework that is undertaken. The team ensure they work in a person-centred and strength-based way involving the individual in all decision making and where people lack capacity using the Mental Capacity Act to support both effective planning and the maintenance of the person's Rights.

The Hospital Social Work Teams

Some recent feedback the Hospital Social Work staff have received

"I have had in depth discussions with this person and am very aware of the level of mistrust they had around adult services...Your support however has been very different, using a fully holistic approach towards this person's care needs. Your listening skills and ability to hear this client have made a huge difference."
(Care Home manager)

"I have had social workers in the past...felt unheard and not listened to...led to me losing trust...however this time...my experience has been different...my voice was heard, that this time everything affecting my daily needs- (not just medical and physical) was taken into account...In the past I felt let down. The difference being listened to has made is immense...that in itself has had a hugely positive effect on my wellbeing."
(Service User)

"My circumstances are such that I live in Australia and my aging mum had lived independently in the UK until falling ill and experiencing frailty. She experiences the challenges of not speaking and understanding English which compounds on her ability to advocate for herself to access services/support...I wanted to take a moment to inform you of the exceptional service (the worker) has provided to us...appreciating the fact that I was overseas, distressed...and the sense of helplessness I was experiencing in feeling unable to partake in my mother's care planning (the worker) has displayed all the qualities that are crucial from a client centred perspective...with her cultural sensitivity and demonstration of cultural competency...consistently demonstrated her ability to provide us with targeted support, service navigation and more importantly being an advocate for my mother and holding those difficult and challenging conversation with the hospital around discharge planning. Moreover, she has diligently followed through on every commitment she made, instilling a sense of trust and reassurance for us with adult services.
(Daughter)

"...unwavering commitment, empathy, and professionalism underpinned by (worker's) social work ethics and values have made a significant impact on my mother's and my experience over the past few couple of weeks; a brief but yet powerful episode of care...Her presence and dedication have been a true source of relief and support for us."
(Daughter)

"...I wanted to write to thank you for all the work and support you provided for my dad and myself following the recent changes and challenges to my dad's health and wellbeing. It was refreshing to have your professional, open, honest and realistic information and guidance...You took the time to explain when I either mis-understood or needed guidance on the complicated rules and regulations around my dad's options. Thanks to you I feel assured that my dad has had the best support possible to date, and that the 'hand-on' to the next stage of his care is in order and in my dad's best interest."
(Son)

Older People's – Community Led Support

Community led support is becoming increasingly embedded across all service areas and lots of work is going on with community hubs, health partners and third sector providers. In addition to the work across the teams we have rolled out community led support foundation training which has been opened up initially to those working in OP services and BEST teams, with a view to extending this offer to all front line workers before all other council employees. Our teams recognise the importance of strength-based work across all of our social work services across Bradford and District. Although we are approached when a need for support is identified, our social work intervention, including any assessment of the situation, should at its heart recognise and celebrate the range of talents, skills, and knowledge that the residents of Bradford and District have, and to encourage individuals to retain and make use of those skills and existing networks of support in a positive way.

As part of this a small pilot was undertaken in the Keighley area to meet the needs of people who lacked the support of family and friends, and who had an eligible need, to engage with their wider community using asset-based community development as a model.

In each of these case studies, social workers and allied professionals use a strengths-based approach to identify the skills and knowledge that each person had retained and used this as a positive contribution to the support that was then built around them. The assets used were mainly freely offered by the local community, but where something needed to be paid for, the community was encouraged to apply for and use small external grants such as Awards for All from the National Lottery.

The results were very positive. Older people maintained their dignity and had

improved self-esteem. They built up informal supportive networks reducing or delaying needing formal support. In addition, their needs were met without the Council having to provide a paid-for service.

We are expanding this model with a view to use across the wider districts.

Case study: Jean

Jean suffered from anxiety and depression. She had been offered services to support her, but she always declined. She was labelled as 'someone who refuses to engage'.

We told Jean that we were short of someone to make tea and coffee and she agreed that she would help.

Other members of the group remarked how Jean 'made a grand cup of tea' and the change in her was remarkable. She went on to volunteer in other settings where she was kept busy most days of the week and she was given expenses for travel by taxi.

Case study: Peter

Peter was diagnosed with Alzheimer's at 55. His wife still worked and the Council were approached for help. Peter's Social Worker suggested that he go to different day care facilities for 5 days a week whilst his wife worked. Neither of them were happy with this suggestion.

Peter was a landscape gardener, but he had to give up work due to his increasing confusion. He did, however, retain a lot of information about his passion for gardening.

We set Peter up in the coffee shops of garden centres with a group of friends where he offered advice and helped pot up strawberries and plants. He was happy offering help to others and didn't feel he was regarded as someone 'in need of services'.

Safeguarding Adults

The statutory duty as set out at section 42 of the Care Act 2014 states:

(1) Where a local authority has reasonable cause to suspect that an Adult in its area

- a) has needs for care and support
- b) is experiencing, or is at risk of, abuse or neglect, and
- c) as a result of those needs is unable to protect themselves against the abuse or neglect or the risk of it

(2) The local authority must make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken in the adult's case and, if so, what and by whom. Bradford Council are the statutory agency in undertaking safeguarding enquiries in relation to Section 42. Whilst safeguarding work is undertaken by Social Workers across all service areas, working with allied professionals, there is a dedicated safeguarding service, based within Britannia House, with overall responsibility for this important statutory service.

Every safeguarding concern relating to an adult received by the Department is screened by a Social Worker to establish whether the criteria under section 42 is met. This critical task seeks to establish the legal justification for our intervention and ensures that as social worker, we are practicing in accordance with our practice model and that we can evidence legal literacy.

The number of safeguarding concerns which lead on to statutory s42

Safeguarding Enquiries across Bradford is stable and this reflects the stability of the service, the decision-making capacity of the social workers and the management team that oversees the work. The average conversion rate for the last four and half years is 38% (2020/21= 34%, 2021/22= 33%, 2022/23= 41%, 2023/24= 38%, 2024/25 so far= 41%). However, fluctuations in the conversion rate are to be expected as this

is affected by activity in the district such as CQC inspections, care home closures, Organisational Safeguarding Enquiries, and new individuals placed in health or care settings within the area.

An important point to note is that much work is carried out by the Safeguarding Adults Board and by the operational Safeguarding Adults Service to raise awareness and improve the understanding of adult safeguarding issues within the district. As a consequence, it is expected that more safeguarding concerns which meet the s42 criteria will be submitted resulting in a gradual increase to the conversion rate.

There is a national trend regarding the increasing number of adult safeguarding concerns being reported to local authorities. Many local authorities are reporting that adult safeguarding concerns are now significantly higher than pre-covid levels and there does not appear to be any clear evidence that this is reaching a plateau and levelling out. Bradford has seen the monthly average number of safeguarding concerns rise from 322 in 2021/22 to 661 in 2023/24

The Chief Social Worker for Adults previously reported that such a spike in safety fears around adults is likely to rise as a result of the cost of living crisis across the UK. Whilst the Department has not necessarily seen a spike in terms of financial abuse, there has been a rise in concerns relating to physical abuse and omissions of care in care settings. One factor likely to be having an impact on the number of safeguarding concerns reported is the number of residential and nursing care homes in the district that have a CQC rating of Inadequate or Requires Improvement. It is reasonable to expect that where care home ratings are low, and safety is an issue, abuse and neglect is more likely to occur.

Safeguarding Adults

The safeguarding operating model in Bradford encourages the reporting of safeguarding concerns, so that risk can be evaluated and action taken to mitigate harm. This is considered a safe model which enables those safeguarding concerns, which do meet the legal criteria for a s42 enquiry to be directed to another pathway, or for advice, guidance or other direct intervention to be provided. To help cope with rising demand, social work staffing levels within the Safeguarding Adults Service have been increased to provide necessary additional capacity to enable continued safe operation of the service. Social workers within the Safeguarding Adult Service and across the dedicated service areas work exceptionally hard to prioritise a response where there is a known safeguarding concern. Currently, all safeguarding concerns received are screened with 24 hours of receipt and there is no allocation waiting list, which ensures our immediate intervention.

All safeguarding adults activity is reported in the national Safeguarding Adults Collection (SAC Return) on an annual basis. The SAC Return highlights significant variation across the country in the number of safeguarding concerns which meet the s42 criteria and become a safeguarding enquiry. A cautionary note within the SAC Return suggests the findings in the report should not be used to make judgements about the safety of individuals or to benchmark performance between local authorities. This is due to the different reporting practices and models of operation in use by local authorities. However, when looking at the number of safeguarding enquiries commenced by local authorities in the Yorkshire and Humber region in 2023/24 the lowest was 330 and the highest was 4110. Bradford was the 3rd highest of 15 local authorities

and commenced 2825 safeguarding enquiries. This equates to 686 safeguarding enquiries per 100,000 adults, which is the 4th highest of the 15 local authorities in the Y&H region.

Regardless of the reasons for the increase in adult safeguarding concerns, the Department, and the Adult Safeguarding Board, have taken steps to respond to the increasing demand and to further support social workers so that we may support those who require urgent help to be free from abuse or neglect.

Workforce planning is key to ensuring that the Department continues to provide sufficiency in regard to dedicated, qualified social work staff, ensuring that the service can meet demand and always respond in a timely manner. The service has undertaken a review of the current staffing levels to ensure that the staffing levels are in line with the demand trends. The review has determined there is a need for increase in the number of Social Work and Business Support resource to manage the current and future demand trends. Recruitment has taken place this year and two additional Business Support Officers have been appointed along with five or six additional social workers.

Some efficiency projects and more preventative ways of working have also been implemented. The Adult Safeguarding Board now has a dedicated Safeguarding Adults trainer who is working with care providers to promote safeguarding awareness. The Safeguarding Adults Service is also providing training to providers and particularly targeting providers where there are either significant numbers of safeguarding concerns raised or, sometimes even more concerning, working with providers who rarely raise safeguarding concerns to a statutory level.

Safeguarding Adults

The Chief Social Worker for England, Lyn Romeo, has published guidance jointly with the Adult Principal Social Worker Network to enable Local Authorities to provide 'proportional' approaches to adult safeguarding. This approach is about ensuring that Local Authorities prioritise time and specialist skills and approaches in a more proportionate way so that people at risk or experiencing abuse are likely to receive a more timely safeguarding approach. There are obvious checks and balances that need to be ensured in taking a proportionate approach to ensure that what are considered 'lower level' safeguarding concerns are either missed or inadvertently downgraded to the prioritisation around more significant abuse, but there is clearly some merit in this approach and it is being sensitively explored by management across the safeguarding service.

There remains more work that can be done with providers in regard to safeguarding concerns. Acting on concerns by regional ADASS networks and locally here in Bradford, recently the Strategic Director met with senior managers across the Yorkshire Ambulance Service to discuss the over reporting from that agency and discuss the impact that has on safeguarding systems. There is also now a robust framework in place for front line staff to work through their management and feed into contract and compliance frameworks across Commissioning. There is a strong Organisational Safeguarding Enquiry process, coupled with a Serious Concerns Framework, that provides the Department with a quality assurance process when working with providers where there are significant safeguarding issues.

There is a strong relationship between the departmental response to adult safeguarding and dealing with demand and Bradford Safeguarding Adult Board,

with very good engagement from the Business Support Unit, including the Board Manager (for Adults and Children's Board), the Deputy Board Manager (for Adults) and the new Independent Safeguarding Chair who is already exploring new approaches and mechanisms that will enable the Board to further support the work of the Department to meet demand. Most recently, the Board have requested a briefing paper from the Department to look at the possibility of including representation at statutory board level of a senior representative of Bradford Care Association, so that there may become an increasingly collegiate approach towards adult safeguarding, where the Board works in genuine partnership with all those across health and social care to explore together better ways of working, more preventative approaches to help keep people safe and to ensure that the board is actively listening to pressures within the system so that it can strategically respond and provide tailored support wherever possible.

Mental Capacity Act Service & Legal Assurance

The Council has many legal obligations across Health and Social Care. There are now dedicated officers, including a Service Manager for Mental Capacity Act and Legal Assurance, who is employed to ensure that social work approaches are ethical, lawful and undertaken in the least restrictive way possible. This service is at the heart of the Social Work Practice Model and works alongside Social Workers and allied professionals, in helping to support them to be legally literate, risk enabling, and steeped in a commitment to human-rights based social work.

What are Deprivation of Liberty Safeguards?

Deprivation of Liberty Safeguards (known as DoLS) are set of legal protections put in place to ensure that individuals who lack the mental capacity to make decisions about their care are not unlawfully deprived of their liberty. This typically applies to vulnerable people in care homes or hospital who may not have the ability to consent to the arrangements made for their care and treatment. The work that we undertake in Bradford to ensure Deprivation of Liberty Safeguards are lawfully applied, are administered by our team of Best Interest Assessors.

Why are DoLS important?

DoLS are crucial for safeguarding the rights of some of society's most vulnerable people. They ensure that the deprivation of Liberty is done in the person's best interest and the least restrictive way possible. The safeguards provide a legal framework that protects individuals' Human Rights, ensuring they are not deprived of their freedom without proper justification and reviews.

As the local authority, we have the legal duty to assess and authorise any Deprivation of Liberty under DoLS. This work is undertaken by Adult Social Workers and

the process involves a thorough assessment to confirm that a deprivation of liberty is necessary and proportionate, and in the person's best interest. Failure to conduct this assessment can result in unlawful deprivations of liberty, leaving people in care homes and hospitals at risk of having their rights unprotected. Additionally, a failure to ensure lawful processes have been correctly applied can also lead to serious reputational damage to the Council and also potentially lead to litigation against it.

Supporting the DoLS process

The trained Best Interest Assessor's (BIA) role is vital in helping to assess people supported within the Bradford Community living in care homes and when in hospital, ensuring that people's rights are safeguarded. By undertaking assessments, BIAs are protecting individuals and their rights under DoLS.

Some of the safeguards include:

- **Appointing a representative:** The person being cared for is given a representative, who can be a relative, friend, carer, or an Independent Mental Capacity Advocate (IMCA). The representative's role is to look out for the person's interests and protect their rights. They also have the right to challenge the deprivation through the Court of Protection.
- **Conducting an assessment:** The DoLS assessment includes six parts: age, mental health, mental capacity, best interests, eligibility, and no refusals. The assessment helps to ensure that the care being given is in the person's best interests.
- **Regular monitoring:** The deprivation is regularly reviewed and monitored.

BIAs' commitment and expertise are essential in upholding the rights of the people that we support.

Mental Capacity Act Service & Legal Assurance

SECTION 2: OUR SOCIAL WORK SERVICES

Judicial Authorisations of Deprivations of Liberty (Community DoL)

Whilst DoLS provides a legal framework to authorise the deprivation of liberty of people aged 18 or over in a care home or hospital, people aged 16 or over who are unable to consent to their care and accommodation arrangements in community settings (their own home, housing with extra care, for example) require an alternative process to ensure that the deprivation of liberty is lawful and that their Human Rights are upheld. In these scenarios what is known as a judicial authorisation of deprivation of liberty is required, however this is often referred to informally as a 'community DoL'.

There are two pathways for a community DoL to be authorised:

1. The 'streamlined' process: This entails social care professionals within Bradford Council – unless the care is fully funded by CHC – establishing whether the arrangements that deprive someone of their liberty in community settings are necessary, proportionate and in their best interests, before submitting evidence and documentation to the Court of Protection (COP) to review before the authorisation is granted.
2. An oral welfare hearing in court: Where it is identified that the arrangements that deprive a person of their liberty require greater scrutiny, Bradford Council will – unless someone is fully health funded – approach the COP to request a judge to consider this in person before deciding whether to authorise the deprivation of liberty.

The community DoL process provides certain protections for the person who is deprived of their liberty. This includes health and social care professionals being required to provide detailed evidence to the court as part of the application; the person deprived of their liberty having access to a representative; and the benefit of the court's oversight in granting authorisations (as also may contain specific orders/requirements for reviews and other matters related to the deprivation of liberty).

Within Bradford Council, the MCA/DoLS Team have worked closely with the Adult Social Care (ASC) Legal Team to develop a new procedure, resources and training for ASC staff around judicial authorisations of deprivations of liberty. Furthermore, support is provided to area social work teams to ensure that applications to Court for deprivations of liberty are made in a timely way and that existing community DoL authorisations are monitored and reviewed.

Mental Capacity Act Service & Legal Assurance

What was the issue?

SW was requested to complete a DoLS (Deprivation of Liberty Safeguarding) assessment for S, a 90-year-old woman residing at a care home. The care home had perceived her to lack capacity to consent to her accommodation, care and support and requested an assessment.

The notes indicated that S had a son who she lived with prior to moving into the care home, and she alleged on several occasions that he fabricated information about her health and mental cognition in order to have her admitted into a home. Rather than assume that this was S's paranoia or a false belief the SW kept an open mind and explored this further with her in a culturally sensitive manner. For S, being placed in a care home was profoundly shameful within her cultural context, as it conflicts with deeply held values and societal expectations regarding family care and support. The care home had concerns that S was paranoid about being poisoned via her medication and occasionally fabricating accusation of staff being unkind towards her.

What was the approach taken?

The approach to the assessment was to presume capacity in accordance with the Mental Capacity Act 2005 (MCA 2005). In line with principle 2 of the MCA 2005 reasonable and feasible actions were taken to support S to make her own decisions, such as:

- Booking an interpreter that spoke the same language and dialect as her, to ensure effective communication and access to services and rights without discrimination based on language barriers. This was in line with the requirement of the Equality Act 2010 and also ensured that her Article 14 Human Right (free from discrimination) was upheld.
- A female interpreter was requested as the review of case notes indicated that S felt more comfortable with women.
- Arranging the visit at a date and time that would least disrupt S's daily routine.
- Reviewing previous case notes and assessments but also ensuring that an open-minded and non-judgemental approach was maintained towards exploring new information and understanding different perspectives.
- Since S had no staff at the care home who could speak her language, the effects that language isolation can have on mental health such as increased feelings of frustration, increased stress and feelings of hopelessness were considered by the SW. They found that during their visit, S expressed a deep need to communicate extensively, feeling emotionally constrained and eager to express her thoughts which indicated a build-up of emotions.
- S was engaged in conversation, specifically asking why she harboured concerns about being poisoned. The aim of this approach was to comprehensively understand her viewpoint and the underlying reasons for her fears.
- S was visited twice with two different interpreters to ensure that she comprehended and retained information for the appropriate length of time that was relevant to the decision.

Mental Capacity Act Service & Legal Assurance

SECTION 2: OUR SOCIAL WORK SERVICES

What was the outcome?

- The outcome of the assessment was that S had capacity to consent to her accommodation and care arrangements.
- S explained that she did not think medication was literally “poison” but that the use of medication can lead to unintended negative consequences that outweigh its intended therapeutic benefits. Also, culturally S had spent majority of her life in a country where allopathic medicine is not always viewed as a primary option in dealing with health issues. S requested a GP review and to see doctor with an interpreter present.
- S expressed a wish to return back to Iraq, so I agreed to make a referral for a Social Worker to complete a new assessment of needs and explore this further.
- S requested that she has access to opportunities to socialise with other people who speak her language. A referral made to Adult Social Care to explore this further.
- S explicitly stated that she did not want her son to be involved in or make decisions about her care. The care home also raised a safeguarding concern of him financially abusing her.

The care home agreed to check S’s views and wishes before making blanket decisions and assuming she would be comfortable. For example, they had her photo on her door not realising that this was causing her humiliation as culturally she found this to be a form of disrespect.

Adults With Disabilities Review Service

- Care reviews are an annual statutory requirement to be undertaken by Local Authorities, where a person has eligible needs under the Care Act 2014 for long term support and has a Personal Budget to meet these needs. It is an accepted position nationally, due to resource pressures, that although there is an ambition to review care and support plans annually, reviews are more generally in response to a request for a review of care and support plans following a change in need or circumstances for the individual the plan relates.
- What the Care Act 2014 says about Reviews:
 - Section 27 of The Care Act 2014 states:
 - (1) A local authority must—
 - a. keep under review generally care and support plans, and support plans, that it has prepared; and
 - b. on a reasonable request by or on behalf of the adult to whom a care and support plan relate or the carer to whom a support plan relates, review the plan.
 - Across all our Adult Social Care Services, reviews about how to meet an eligible person's needs are established by an assessment carried out under section 18 of the Care Act 2014. The purpose of a review is to determine whether the eligible needs identified in the assessment continue to be met by the support plan. The persons wishes are central to the process. Where the review indicates that the support plan is no longer meeting the needs of the person, a new assessment must be completed, and a new care and support plan created based on the newly assessed eligible needs.
- Within our service areas there are teams of social work staff, working with allied professionals, who undertake reviews, in partnership with the people we support, their families, carers (both paid and unpaid) and anyone that the person wants supporting them, such as an advocate.
- Reviewing Social Workers are mindful to ensure that the support a person receives is individual to their needs and takes into account wider determinants, such as ensuring protected characteristics and issues of diversity and individual identity are central to support arrangements. In addition, our approach, as defined by our practice model, considers what is lawfully necessary and proportionate for the individual, so that we do not commission services prematurely or that are unhelpful or unsafe. Social Workers in this service take all practicable steps to ensure reasonable adjustments are in place. This includes culturally competent approaches towards practice, which are respectful of diversity and difference. Care Act statutory guidance states that a 'review must not be used as a mechanism to arbitrarily reduce the level of a person's personal budget' (Care Act Statutory Guidance, 2017, p13.4). However, it may be that needs could be met in a different way or there is evidence (supported by a new assessment of needs) that the persons eligible needs have changed.
- Relevant case law: [JF, R \(on the application of\) v The London Borough of Merton \(Rev 1\) \[2017\] EWHC 1519 \(Admin\) \(30 June 2017\) \(baillii.org\)](#)

Adults With Disabilities Review Service



It's more than a review for us...

Meet Neil and Andrew (picture shared with their permission).

Neil and Andrew attended the same day centre but were not considered to be 'friends' there and did not interact with each other. They were each allocated to a Social Worker and Social Work student in the Reviewing Team.

Apart from attending day care, neither did anything else outside of their family homes, where they each lived with their parents.

Their individual reviews found that they both wished to socialise more but were unsure how to do this and both parents were also quite worried about them going out and travelling alone on an evening.

The Social Workers spoke to Keighley People First and gathered information about their free social nights and got them both a leaflet, both agreed to give it go.

On the first occasion, the Social Worker picked Andrew up from his home, and the Student Social Worker met Neil at the social night with his parents, as they also wanted to have a look around and be reassured about where Neil was going.

Once happy that Neil was OK his parent's left and the Social Workers sat with Neil and Andrew but..... they did not speak to each other! The Social Workers formally introduced them and left them sat together and they (thankfully) started chatting. Before the night was out, surprisingly to the Social Workers as they thought they were both shy, they were both singing at the top of their lungs on the Karaoke!

When the night was out, they both agreed they wanted to meet there again at the following event and could share a taxi as they didn't live too far from each other but needed a little support from the Social Workers to arrange this. So that's exactly what they did!

The picture above is from the next social night, they sat with each other and enjoyed a meal and a few pints, now have a lovely friendship and attend the social nights together regularly. No extra day care, no restrictions, just good old-fashioned fun and friendship.

Homes for Ukraine

The Homes for Ukraine scheme launched in March 2022 and Local Authorities were given the statutory duty to promote the welfare of adults and children arriving in the UK by making necessary checks on the accommodation and by completing a safeguarding visit as soon as possible after the guests have arrived.

In Bradford District host families are currently supporting 121 Ukrainians, with over 200 having been hosted since 2022.

In Bradford Social Workers and other volunteers in the Department Adult Social Care for the Council have taken on the task of completing these statutory visits. However, true to the values of the social workers and other staff involved, our role did not end after we had ensured the immediate safety of those coming to the UK under the scheme. Social Workers and all those involved in supporting people have offered a welcoming smile and shown kindness and compassion. They have worked tirelessly to support people to ensure they are able to maintain contact with their loved ones back in the Ukraine and have supported people to bring their beloved pets, provided a listening ear and a warm hug if that is wanted and needed. Social Workers and all those involved have reported sitting alongside people, holding hands as people grieve for what they have lost and have heard the most painful stories told of leaving loved ones behind and dealing with the constant fear and stress for their safety.

Although the original ask of the UK Government was that Local Authorities assessed the suitability of sponsors in providing guest accommodation for those fleeing the war, the Social Work Service in Bradford chose to go above and beyond this statutory responsibility. Across Adult

Year of Support	Number of Hosts	Number of Guests
Year 1	18	26
Year 2	23	38
Year 3	25	43
Pending checks/ Guests have arrived and in active placements	6	14
Total	72	121

Social Care, the extensive role to support people arriving in the UK was undertaken not because staff were given this as a task to undertake to ensure safety, but because they believe that it is the right thing to do. Social Workers have worked closely with our partners to ensure people are supported and can access the things they are entitled to.

Homes for Ukraine



Working with People in Hotel Accommodation

In addition to our work supporting the Home for Ukraine scheme, Bradford Social Workers have also taken this a step and extended their support to people arriving in the UK who are currently housed in local hotels, awaiting their asylum applications to be processed, many of whom have arrived in the UK via small boat crossings. Social Workers have advocated for people, provided support to individuals with care and support needs and fundraised, collected and delivered, (and continue to deliver) necessities such as clothes, shoes and toys. Social workers have again promoted individuals' Human Rights and are working to ensure however people arrive seeking sanctuary in the UK, and especially in Bradford, they will be met with kindness, unconditional positive regard, practical help and warm and friendly support.

Adult Social Workers in Bradford are immensely proud of their work supporting people who are arguably among the most vulnerable and persecuted groups in the world.



Mental Health

Community Mental Health Team (CMHT) Contextual Position (Demand / Overview)

Bradford's Community Mental Health Service operates as a Tier Two Health Service and is comprised of Multi-Disciplinary Teams (known as CMHTs) that include, Consultant Psychiatrists, Therapists (including Occupational Therapists), Nursing Staff, Social Workers and Support Workers.

This integrated service is delivered by staff working for both Bradford District Care Foundation Trust (BDCFT) and the City of Bradford Metropolitan District Council (CBMDC). From 01.04.24 there is also a jointly funded (50/50) 'Community Rehab Team' delivering Specialist Supported Housing and OT focused services under a new Section 75 Agreement between BDCFT & CBMDC.

The primary case recording system for the above is a 'Health Record' (BDCFT System 1).

As of 01.09.24 the service was supporting 3741 individuals who are the responsibility of CBMDC (i.e. Ordinary Resident). This figure includes 525 individuals in the 'non -urgent' front door (CMHT Assessment Team) and 171 individuals supported by the services' two Integrated Outreach Teams (IOT's).

Included in the above figure are 276 individuals 'awaiting care coordination' and 335 individuals with 'no allocated healthcare professional'.

The non-urgent front door (CMHT Assessment Team) screens on average 124 individuals per month in relation to eligibility under the Care Act.

Not included in the above figures are 125 individuals open the Local Authority's Mental Health (CMHT) Reviewing Team. These individuals are typically no longer actively in receipt of tier two health services from BDCFT, but their support may be funded under Section 117 by the ICB

Sec. 117 MHA (& Care Act) Services.

Delivered as part of Bradford's Community Mental Health 'service offer', the local authority supports 469 individuals with a commissioned package of care, under Sec 117 of the Mental Health Act and/or the Care Act.

169 individuals are in Specialist Supported Housing (Supported Living), 126 individuals are in receipt of Home Care / Home Support (excl. 24 also in Specialist Supported Housing).

131 individuals are in Residential and/or Nursing Placements.

32 individuals are in receipt of a direct payment (DP). 9 individuals are funded to attend day care services, 1 individual is in receipt of an Individual Service Fund (ISF) and 1 individual is in a 'Shared Lives' placement.

AMHP Service

During 2023-24 the Local Authority's AMHP Service within the acute/urgent pathway, completed 1200 assessments under the Mental Health Act.

2024-25 year to date activity (end of August), indicates the service is completing an average of 108 MHAA per month, indicating 2024/25 activity is up circa 8% on the previous year.

Our Commitment to Ethical Practice

During the previous year, Social Workers and the allied professionals within the Adult Social Work services across Adult Social Care, have focused on the Practice Model that underpins our work. Central to the practice model is a commitment to practice in a way which is inclusive and where diversity, individualism and difference is not only understood but also where appropriate and legitimised by the person, it is celebrated and central to any social work intervention.

Through the practice model, Social Workers across the service are supported to critically explore issues of discrimination, exclusion and a lack of agency in regard to the people they support and are actively encouraged to challenge orthodoxy and flag up the need for change. The social work audits ask social workers to comment on issues of diversity and inclusion and to notify the Department via the audits if there is a gap in terms of our offers of support or where social workers need more support at a corporate level to challenge the status quo or moreover, equip those they support to challenge and be heard. This approach is at the heart of our professional commitment to be anti-oppressive in our direct practice and anti-discriminatory in our approach to practice.

Much of our training offer this year has been focusing on how across the social work service we can be actively involved in promoting social justice through our roles. Our supervision training on anti-racism underpins our commitment to anti racist social work and the need for social workers to be proactively anti-racist. The need for this training was first identified by social work audit feedback and the feedback received from frontline social workers who have undertaken the training has been excellent. Coupled with training on Unconscious Bias, there are signs that the workforce has embraced this approach, and it is the cornerstone of the social work support they provide.

One of the outcomes of this work is that services have begun to think in terms of their own diversity. Across the Disability Service this led to Social Workers producing 'One Page Profiles' for staff. These profiles, which include a photo of the staff member and a series of questions that they answer, such as their likes and dislikes, are forwarded to people who are newly referred to the service, so that they have an understanding of the diversity and uniqueness of the person who is about to become their social worker, in an effort to further assure people that their own uniqueness, their identity as they see it, and their agency is respected. Across our Older Peoples service, the Keighley Assessment and Support Team, began to explore the culture of the team members, to help further their understanding of the wonderfully diverse communities that they support. This is their reflection.

The cultural lunches all started after I had listened to a community care podcast during my dedicated time for Continuing Professional Development. The podcast was entitled "What does it feel like to work in an anti-racist environment?". Essex County Council had been piloting reverse mentoring, which is pairing up with a colleague from a different ethnic background, to learn of their experiences within the workplace. My idea was to start regular themed peer groups to open discussions with my colleagues and gain better understanding of each other's respective cultures.

Our Commitment to Ethical Practice

For our first cultural lunch the theme was food, colleagues were invited to bring food that represents their culture, traditions or even a family recipe that has been passed down from grandparents. The purpose of this session was to talk about the importance of food within each culture and the history behind this. We had an array of wonderful dishes to try including vegetable pakora's, Jamaican spiced bun, rice and peas, butterfly buns and much more! Our discussions included the importance of offering/accepting food when entering someone's home. Marcus mentioned that Greek people see it as a duty to the God of their Orthodox Church (and previously, the Mount Olympus God, Zeus) to look after strangers and travellers. This is similar in South Asian cultures where there is also an expectation to provide food and drink for visitors.

For our second cultural lunch the theme was death and dying, colleagues were invited to think about death and dying practices within their own culture and any similarities and differences there may be in relation to other cultures. There is a built-in caveat that attendance is not mandatory, as some topics may be sensitive in nature. Two of my colleagues have had recent close bereavements, they understandably chose not to attend as the feelings are too raw. During this session Caroline talked about mourning in South Africa; Titi about Nigeria and how it is taboo to talk about death; Tash about the Ukrainian Orthodox mourning and Sandra about how life is celebrated at Jamaican funerals. Grace spoke about Irish culture and the importance of laughter and stories shared about their loved one whom has passed. Mareya and Ikrah spoke of South Asian culture and the importance of family coming together to pray.

Following these events, I try and ascertain regular feedback from my colleagues as to whether the cultural lunches are beneficial and should continue, and so far, the feedback is positive! "The cultural lunches have successfully fostered inclusivity and cross – cultural understandings. The lunches encourage a welcoming environment that values and celebrates diversity." Please see below a picture of the team from our first cultural lunch.



Lived Experience People's Forum

We have built on previous learning and experience from our values-based recruitment initiatives where we have embodied principles of coproduction within our interviewing and recruitment decisions, through the setting up of interview panels with people with lived experience of social workers.

This year we have sought to go further through the formation of a new lived experience forum in order to help shape and inform our social work policy and practice in Bradford.

The forum will be built on a core group of 15 to 20 members with a diverse range of disabilities, ages, gender, ethnicity and with experience of distinct parts of adult social care. An important dynamic of the group is that people on the forum are valued for their input and will also be remunerated for their valuable insight and experience. We envisage that this group will develop its own voice and identity and feedback into future policy and practice within Adults Social Care in Bradford and in the development of our social worker practitioners.

Experts by experience wanted!
(for regular discussion forum)

1. Anyone with recent experience of having social work support
2. A wide range of people (from young people of school age to working age adults with disabilities)

When/where?
Every month in central Bradford
(venue to be confirmed)
First meeting August 2024
(times to be confirmed)

What will the forum do?

- Offer feedback to improve our social work service
- Develop questions/ exercises for social work interview candidates
- Discussion on themes emerging from social work audits
- Discussion on what makes a good, allocated social worker
- Awareness raising session- e.g. promoting direct payments

Interested people wanted

1. Interested people wanted
2. Nominations from social workers on behalf of people they have worked with

Benefits:

1. A paid opportunity for developing group skills, problem solving and interpersonal skills with peers and social work staff
2. Training provided
3. Refreshments

Expressions of interest, questions or to chat:
Mark Haslam
mark.haslam@bradford.gov.uk
07582109766

Kirsty Maclean
kirsty.maclean@bradford.gov.uk
07977106252

STAND 2nd SOCIAL WORK

We have built on previous learning and experience from our values-based recruitment initiatives where we have embodied principles of coproduction within our interviewing and recruitment decisions, through the setting up of interview panels with people with lived experience of social workers.

The group will meet on a monthly basis and have several goals.

- Where the group wants to see a change in a certain area of social work or are affected by a local issue then the group can use its collective voice to challenge this
- Where a new adults social care policy is being considered in Bradford that has an impact on how social care is being delivered then the forum can provide a mechanism for consultation and collaboration.

Our Commitment to Ethical Practice

- The group may be interested in research opportunities in order to contribute to improvements in social care.
- Where adults social care identify themes from social work practice through our auditing and inspection feedback processes the group could help us to make improvements this way.
- The group could develop training and social work development sessions with social work students and NQSWs.



In the future the group may be used in the area of co-produced research to help shape research in the area of disability and social care through the National Institute of Health Research Programme (NIHR)

In the first meeting members discussed how crucial it is in building trust in your social worker. Advice was given that it would be good for social workers to create a pen picture to ease anxieties about meeting a new person. Other themes also emerged from the first session:

·It can be hard to change a social worker and ask for a new one, if the fit does not feel right and it can take time and trust for people to feel that their social worker understands them. Equally it can be hard for people who have had multiple social workers to build trust with new workers.

Student social workers could be supported by the group to have more understanding of sensory impairment and working with people who are visually and hearing impaired. There was talk of developing placement opportunities, drop-in sessions or training days.

·What rights do people have and what can they expect from social workers to help them uphold these rights? We talked about reviewing our 'bill of rights' statement that is part of our transitions 'welcome pack.'

Act as One, Fast as One

In its second year, the "Act As One, Fast As One" initiative welcomed colleagues from across the Council and our broader partner networks to engage in a meaningful exploration of cultural diversity and empathy in the workplace. This opportunity, grounded in social work values of reflection and social justice, encouraged our non-Muslim colleagues to delve into the profound significance of fasting. This practice not only fosters self-discipline but also cultivates empathy for those less fortunate and promotes spiritual growth.

With a touch of gamification, we invited participants to choose their level of commitment to fasting:

Beginner: Abstain from food for the day.

Intermediate: Abstain from both food and water.

Practiced: Rise before sunrise for your first meal and abstain from all food and water until sunset.



Our community spirit shone brightly as local restaurant My Lahore sponsored the Iftar meal to break the fast, encouraging participants to contribute generously to the Khidmat Centre—a charity dedicated to delivering culturally appropriate services for our diverse communities. We were thrilled to raise over £2,665, significantly impacting initiatives that support Muslim women in prison and tackle inequalities.

Colleagues shared insights of their experience by sharing reflection on our on line Council Portal.

Act as One, Fast as One

This year, we expanded our efforts beyond fasting. In recognition of the diverse population we serve in Bradford, we organized "Bite-Sized Team" sessions aimed at empowering our Social Work and Occupational Therapy staff. These sessions highlighted the importance of understanding and valuing every individual's identity and experiences for those Muslims who may need something different during fasting or those might be unable to fast and the potential effects on their mental health. Acknowledging and respecting our diverse practices not only strengthens our team cohesion but also reaffirms our commitment to social justice. Looking ahead, we envision a larger celebration next year. Sharing a day of fasting with our Muslim colleagues is an authentic expression of support, solidarity, and love—essential ingredients in the social work field, especially amidst forces that seek division. Ramadhan embodies a time for reflection, nurturing our humility through abstinence, and striving to empathize with people across whole spectrum of need. Together, we strengthen our resolve and commitment to making a positive difference in our communities.



Promote the Vote



Promote the Vote is the name of the campaign which the Adults With Disabilities Team runs every year around local and general elections. The aim of the campaign is to build on work started by Bradford People First, who worked with Bradford Council's elections unit to ensure that voting rights for people with learning disabilities were understood and that voting was accessible for everyone.

Each year social workers and students visit supported living properties and have conversations with individuals and the staff supporting them about their right to register to vote, their right to vote by post or in person and ensuring that they get the right support if they choose to exercise those rights. Bradford Talking Media and My Vote My Voice have produced fantastic easy read and audio resources for both local and general elections, and these are shared with people at the visits.



Promote the Vote



Hafsa is a young woman who is supported by the Preparation For Adulthood Team and is part of the Into Employment internship programme with Bradford School of Rock and Media (SORM).

Through SORM, Hafsa was involved with the Promote the Vote campaign over a couple of years and in 2023 had the opportunity to attend the vote count for the local elections. Hafsa enjoyed her experience so much, and is so passionate about voting rights for everyone, that she decided that she would like to be a part of the count in 2024. There were a number of challenges in making this happen, but Hafsa describes her experiences as follows:

My experiences started when I decided to join the vote count in 2023. This is when I went to see the vote count at Sedbergh Sports Centre. I wanted to take part then I spoke to social worker Elaine James. She told me about the process on how to join in. Moving forward in 2024 Stephanie Brown came to speak to me how to join the vote count. I was happy they remembered that I wanted to join, and they approached me.

Stephanie helped with the application and interview. There were 2 options: postal count and ballot count. I decided to do postal count. It was less hours, and it would be easier for me. Before the main day my OT arranged for me to come and have a look at the accessibility and facilities at city hall.

On the main vote count day, I really enjoyed it. First, I went to register myself. Then I went to do vote count. I must separate the paper and check the numbers and count them if they are right amount. People around me was very helpful and nice. Facilitator showed me around where everything was. It was an interesting experience for my life. If I can, I would love to do it again.

Hafsa uses a wheelchair and requires a hoist. Some of her experiences around accessibility were not positive ones and this is something that the Council needs to take on board when planning for accessibility in the future.

My bad experience started the day I went to check the accessibilities in city hall.

First it was a mission to get in the lift. I have to take my footrest and bags off from my chair to fit in the lift. Then we went to check the toilet. It was quite small to fit my chair and hoist at the same time. The hoist did not have enough charge to complete the transfer and we had to use the manual button. It took longer than we expected.

City hall should be more accessible just a little bit bigger lift and toilet would be helpful next time they should involve the disabled person to plan renovation.

Our Social Work Priorities for the next 12 months

During the next year our services need to continue their trajectory of improvement, through to continued implementation of Raising Expectations, which delivers better social work to Adults in Bradford and provides Social Workers with a clearer link back to social work values and ethics. In addition to this, it is likely that Adult Social Care will be inspected via the Care Quality Commission. Our social work services need to be ready for the inspection and ensure that social work in Bradford is shown in its best possible light. To do this we will:



1

Improve our approach to co-production and to supporting Carers.

Carers receive support via the Care Act and over the next 12 months we will reprioritise our approach to Carers to ensure that the numbers of Carers Assessments increase and that Carers feel valued and supported for the outstanding role that they do. In addition to this, our social work services will ensure there are clearer links between social work support and peer support from those groups in Bradford who represent the people who use social work services and to further ensure that the views of those we serve and who support them are the leading voice in our operational interactions and strategic vision.



2

Roll out and further embed our 'Learning From' programme of work.

...so that we can evidence where, why and how social work support is improving based on the collated feedback from a number of sources; including direct feedback from people using social work support as well as formal feedback via Compliments and Complaints, the Local Government Ombudsman, Elected Member queries, letters from Members of Parliament etc. Our social work services will evidence active listening and plan and implement strategic responses based on the experiences we receive from others.

Our Social Work Priorities for the next 12 months



3

Embed our Practice Model.

...so that every staff member joining the social work service and the Adult Social Care Department, recognise how we theoretically underpin our approaches supporting people and how we convert that theoretical approach into person-centred, helpful and legally literate social work. We will continue to ensure all Adult Social Care staff receive training based on Case Note Recording and Risk, Positive Risk Planning and Risk Enablement in the spring of 2025.



4

Ensure that our response is individually tailored.

Ensure that our response is individually tailored to the unique circumstances that people present when they contact the Council requesting social work support. We will work to ensure our support is proportionate and balance the state intervention with the request for support, to help ensure people are supported to remain as independent as possible, whilst receiving support that is wholly unique to them.



5

Continue to recognise that social work is more than an assessment.

Our social work is relational in practice, it understands the impact of socio-economic circumstances that are very often beyond the control of people who are subject to the inherent inequalities that are in-built. We will evidence a commitment to understanding and genuine compassion, recognising positive regard for everyone in Bradford who requires our support.

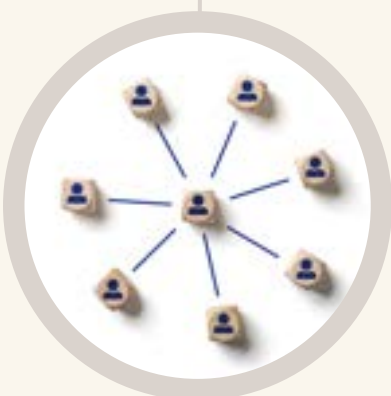
Our Social Work Priorities for the next 12 months



6

Social Work colleagues will be supported whilst working in a council that is under exceptional financial support.

For this we will be clear on our Prevention Strategy, working with people in a practice and preventive way wherever possible. We will use the Care and Support Statutory guidance and the Care Act (2014) to ensure we have positive, motivational conversations with the people we support, so that we are able to recognise further the value of universal services and that we work hard to ensure we do not rush to prescribe statutory care provision, or that where eligibility is met, the response is proportionate and necessary to meet needs.



7

We will continue to take a 'whole Bradford' approach, that recognises that the adults who receive social work support are part of wider networks, families and communities.

Our workforce development offer will ensure that we continue to hone our skills on identifying wider sources of support, recognise that there is significant strength in these networks and opportunities for joined up working, particular across health and social care, neighbourhood localities and through continuing to strengthen and support colleagues across Bradford Childrens Trust.



RISK ENABLING



VALUES BASED



STRENGTHS BASED



LEGAL LITERACY



RIGHTS BASED

