

Adult Social Care Services

Council Name: Stockton-on-Tees

This report is a summary of the performance of how the council promotes adult social care outcomes for people in the council area.

The overall grade for performance is combined from the grades given for the individual outcomes. There is a brief description below – see Grading for Adult Social Care Outcomes 2008/09 in the Performance Assessment Guide web address below, for more detail.

Poorly performing – not delivering the minimum requirements for people
Performing adequately – only delivering the minimum requirements for people
Performing well – consistently delivering above the minimum requirements for people
Performing excellently- overall delivering well above the minimum requirements for people

We also make a written assessment about

Leadership and

Commissioning and use of resources

Information on these additional areas can be found in the outcomes framework To see the outcomes framework please go to our web site: <u>Outcomes framework</u> You will also find an explanation of terms used in the report in the glossary on the web site.

Delivering Outcomes Assessment

Overall ****** council is performing:	Well	
Outcome 1: Improved health and well-being	The council is performing:	Well
Outcome 2: Improved quality of life	The council is performing:	Well
Outcome 3: Making a positive contribution	The council is performing:	Excellently
Outcome 4: Increased choice and control	The council is performing:	Adequately
Outcome 5: Freedom from discrimination and harassment	The council is performing:	Well

Outcome 7: Maintaining personal dignity and respect The council is performing: Well

The council is performing: Well

Click on titles above to view a text summary of the outcome.

Assessment of Leadership and Commissioning and use of resources

Leadership

A number of plans and strategies have been developed or refreshed this year, with help from people's feedback. A document setting out the Adult Vision was reviewed so that it reflects the future agenda for social care and health. A project board is managing the development of more personalised services. There is an action plan, and some elements of the project have been agreed, whilst others are still being discussed. A 'resource allocation system' is being developed and tested, and will be used from October 2009. The council is a pilot site for the co-production model, which is a way of working with people to help them do their own support planning.

Scrutiny reviews this year included audiology, obesity and alcohol services. Older people's services, which were also considered, have been reviewed and the outcomes will be put in place in 2009-10 as the move towards self-directed support is introduced. One of the council's residential homes for older people closed, and the site is being redeveloped as extra care housing.

The development and review of strategies is undertaken with health and other partners. The joint strategic needs assessment was finalised during the year, and led to the development of a Health and Well Being Strategy with six priorities for improving people's health. There is a feedback cycle through the annual 'Are you being served?' event for older people. A newsletter including information about progress is circulated to 2,000 people.

Four Integrated Service Area teams are now in place. These are jointly managed local teams bringing together community nursing and social care staff. Specialist social care and health staff also work together, in Borough-wide specialist service teams, and a jointly funded hospital discharge team has been set up. A transitions modernisation manager and a transitions worker have been appointed to improve the experience and support for young people moving into adults' services. The partnership agreement with the mental health and learning disability foundation trust has been revised and management structures and information management systems are to be changed. A wider piece of work will look generally at joint arrangements and partnership work.

The council reports a high level of staff turnover this year, partly as a result of reorganisation and also because a care home was closed. There were fewer vacant posts than last year and sickness absence reduced. Leadership training is linked with health organisations. The council identified, as a top priority last year, the need for a full adult social care case management IT system, and it is seeking a replacement system to be available in 2010-11. This will be needed for its personalisation and modernisation activity.

A new performance framework has been developed jointly with the Primary Care Trust (PCT) and the Mental Health and Learning Disability Foundation Trust. Senior officers in the council can use the PCT electronic performance monitoring system, to develop closer links between performance management in the three organisations. Key indicators are monitored at a local level to support joint working.

Commissioning and use of resources

The Adult Care Management Team now oversees planning, commissioning and the introduction of service changes across the council and the PCT. It has looked at people's needs and consults with those who use services and their carers on all developments. Carers help to select service providers, and support the monitoring of services. Although there are separate management information systems in social care and health organisations, people in joint posts can use both systems.

The council's criteria setting out the levels of need for which services are available have remained at the 'moderate' level, and staff have had refresher training on how to apply them. Carers may choose to undertake a self assessment if they wish, and people who have to pay for their own services are offered support through assessment and care management processes. They receive a guide to services and information about registered care homes and home care providers.

Increasing use is made of joint commissioning with health partners. Work to make services more personal is at a relatively early stage. The council made a number of efficiency savings this year, and a three year programme will review all service areas to make sure they are cost effective and innovative. Work has been undertaken with service providers to help more people with learning disabilities have their own tenancies.

Information is collected from a range of partners to make sure that commissioned services meet people's needs. Changes resulting from monitoring included putting in place a new direct payment support service. Some regulated services in the Borough are not as good as the national average. The council is discussing new contracts with the providers of care homes for older people, and will phase in a fee structure from October 2009 which will be linked to quality measures.

Summary of Performance

Information about maintaining good physical and mental health is widely available. Activities to reduce the health inequalities in the area include sessions on healthy cooking and eating and a 'walking for health' programme. Some projects are specifically for people with different needs and cultural backgrounds. Exercise programmes have been introduced into care homes and community settings. Many more people used the intermediate care service this year, although the level was lower than in similar councils, and fewer people used it to avoid the need to go into hospital. The council is not responsible for any older people remaining in hospital longer than necessary. People receive advice and equipment demonstrations at the Independent Living Centre. No-one with a learning disability lives in NHS campus accommodation. Some of the council's visits to care homes are at meal times to make sure food is varied and nutritious. People who choose to be cared for in their own homes at the end their lives, rather than in hospital, have appropriate support. Front line and care home staff have had training about end of life care.

People are offered information and advice by the council's trained 'First Contact' staff. More carers now receive services and a significant number have registered with the Carer Card scheme, which encourages them to use support and develop plans for an emergency. A wider range of low level services is now available, and more Telecare equipment has been provided. People receive minor adaptations promptly. The opening of a new extra care housing development offers older people more choice when deciding where to live. Some services are for particular groups of people, such as a lunch club for Asian people, and classes to familiarise older people with computers. The council is increasing the range of services for people with profound and multiple learning disabilities. Some people with learning disabilities still live in traditional residential care homes.

The Community Empowerment Network encourages people to get involved in local affairs, and people who use services are on local boards and consultation groups. Some have been on leadership development courses. There were many more volunteers in adult social care this year, including people from black and ethnic minority communities. Several organisations are led by people who use services or carers. People are consulted about services through events and questionnaires, and carers' groups fed into the development of the new carers' strategy. An annual consultation event for older people was well attended and discussed housing, social care, leisure, education and transport. It identified the need for a Home Improvement Agency, which is now in place. An organisation consults with people from black and minority ethnic communities with mental health needs and their carers, and there has been consultation with travellers and gypsies.

Information about services can be found on the council's website, in the Stockton News, and in two new staffed information sites located in supermarkets. The 'Golden Guide' offers information to older people about 250 services and clubs. Leaflets about all services are written in major languages and there is a translation service. Mystery shoppers check the quality of advice and information provided through the 'First Contact' access point. There is consultation on the future shape of personalised support and awareness events have taken place for staff, providers and the public. The council has changed its assessment processes and assessments took place more promptly for most people although timescales are not yet in line with similar councils. Advocacy support is available for people who need it. People can undertake supported self-assessments for some services. More people received direct payments this year, and many were for a substantial sum. More carers had assessments or reviews this year, but the council needs to make sure that all carers know they can be assessed. A number of organisations support carers, including young carers and carers of people with mental health needs.

Fewer adults and older people moved into care homes this year, but the level remains higher than in similar councils. New services include training and practice facilities for people with mobility scooters. The council operates an Emergency Duty Service outside office hours across the Tees Valley, which links with the First Contact service to make sure there is continuity for people. Complaints are handled promptly, and work with service providers to help them deal effectively with complaints has reduced the number handled by the council.

New Integrated Service Area teams provide advice and support relating to both social care and health issues. Staff have had diversity training and training about the needs of particular groups of people. Work has been undertaken with people from black and minority ethnic communities to raise awareness of drug related issues. Community safety initiatives have included projects to tackle harassment, and the 'Safe at Home' scheme has made improvements to people's homes to help them feel safer. There has been an event about hate crimes.

A Welfare Rights team provides advice and information and has raised significant extra income for people. The support organisation which helps people manage direct payments is running a pilot project, encouraging them to develop support plans using their own formats. The council's employment support service is helping people into paid work and training. Posts in the council are considered for 'job carving,' which puts together aspects of vacant posts to create new jobs for people with disabilities. Several people have moved into supported employment through this scheme. There are 'carer friendly' policies for the council's own staff. Direct payments are not currently paid directly to carers themselves specifically to help them to move into or stay in work, and support for carers through direct payments is a future priority.

In addition to the Stockton Safeguarding Board, a Tees-wide Safeguarding Board has been set up to coordinate resources and training across neighbouring councils. The number of safeguarding referrals is increasing, but the referral rate remains lower than in similar areas. A high number of the council's social care staff had safeguarding training, but fewer staff in the independent sector were trained than elsewhere. The Dignity in Care campaign has been promoted across the Borough. Support which is sensitive to people's individual needs includes assistive technology to help people communicate and personal listeners who can help those with hearing difficulties communicate during assessments, reviews and meetings. Some people who use services present staff training. The Community Safety Police team provides a house and garden tidying service for vulnerable people and the Fire Service installs specialist smoke alarms. There are training courses for carers and services to improve carers' well-being.

The council is performing: Well

What the council does well.

- There is information promoting healthy lifestyles in newsletters and guidance packs, and on the council's website.
- People are encouraged to be involved in a wide range of activities in order to reduce the health inequalities in the area.
- There are healthy eating and activity programmes designed for people from black and ethnic minority communities.
- Information about healthy living, in an easily understood format, is discussed with people with learning disabilities.
- More people used the intermediate care service and rehabilitation this year, which meant they could be discharged from hospital as soon as possible.
- The council was not responsible for any older people remaining in hospital longer than was medically necessary.
- The council checks that people in care homes have varied and nutritious meals.
- Some people using rehabilitation and day services complete a questionnaire which includes a section on catering and food, and this has led to changes in the meals provided.
- An End of Life strategy is being put in place, and front line and care home staff have been trained.
- People who choose to be cared for in their own homes at the end their lives, rather than in hospital, are supported by specialist nursing and home care staff.

What the council needs to improve.

- Continue work to make sure that no one goes into hospital if this can be avoided.
- Continue to increase the availability of intermediate care so that fewer people coming out of hospital need a lot of support or have to go into care homes.

Outcome 2: Improved quality of life

The council is performing: Well

What the council does well.

- A high proportion of older people are helped to live in their own homes.
- The new carers' strategy is being implemented and more carers now receive services than previously. Some new services have started and many carers have registered with the Carer Card scheme. This encourages them to have an assessment, accept support, and develop a plan to make sure the person they care for is looked after if they have an unplanned absence, for example through hospital admission.
- There are new joint teams of social care and health staff. This means that people do not have to repeat their story several times and the council tries to make sure people are not visited by too many different staff.

- People with physical disabilities receive minor adaptations promptly and, this year, work on major adaptations has started more quickly after assessment. People with hearing impairments were assessed and provided with help more promptly.
- More people had support this year through services from organisations funded by the council, and more benefited from the installation of Telecare equipment.
- Local services such as the library and the adult education service help people take part in every day activities. There are 'Silver Surfer' IT classes to familiarise older people with computers, and the 'Silver Singers' meet regularly and also undertake public performances. People can try 'taster sessions' for leisure activities.
- Older people are offered a wider range of extra care housing now that the Aspen Court scheme has opened.
- The range of individual and specialist services, for people with profound and multiple learning disabilities, is increasing and some people have moved back into Stockton from care placements outside the area.
- People with brain injuries are supported through a specialist domiciliary care provider.

What the council needs to improve.

- Make sure that everyone with a learning disability is living in accommodation that meets their needs and wishes, and enables them to have as much independence as possible.
- Continue to work with neighbouring councils to develop suitable facilities for those young people with Autistic Spectrum Disorders who wish to return to Teesside from placements elsewhere in the country.

Outcome 3: Making a positive contribution

The council is performing: **Excellently**

What the council does well.

- People are encouraged by the Community Empowerment Network to get involved with local matters.
- A high and increasing number of people are active volunteers in social care, including a high number of people from diverse backgrounds. Volunteers are supported through the Retired and Senior Volunteer Programme.
- Several organisations are led by people who use services or their carers. These include SURGE (led by people with mental health issues), The Link (led by carers of people with mental health needs) and PANIC (led by carers of people with drug problems).
- People's feedback is used to develop or improve services. This includes research which contributed to the older people's strategy, a survey of people using intermediate care services, and feedback from carers' groups through surveys and events which helped to shape the new carers' strategy.
- The council has a panel of residents, "Viewpoint", with around a thousand members who receive postal questionnaires and may attend focus groups.
- The Over 50s Assembly meets each month, and its members undertake consultation on a range of issues.
- An annual public consultation event for older people, "Are You Being Served?", was attended by over three hundred people this year and discussed housing, social care, leisure, education and transport. People said there was a need for a Home Improvement Agency and this is now in place.

• There are representatives of people who use services and their carers on a number of boards and groups, and consultation has taken place with people from black and minority ethnic communities.

Outcome 4: Increased choice and control

The council is performing: Adequately

What the council does well.

- People can look for information on the council's website, in the Stockton News, and in two new staffed information sites located in supermarkets.
- Leaflets for all services are written in major languages and there is a translation service. Mystery shoppers check the quality of advice and information provided through the council's initial point of contact, 'First Contact'.
- Older people needing information about services can use the 'Golden Guide', which refers to 250 services and clubs.
- There is a new training and practice facility for people with mobility scooters.
- Some people can undertake supported self assessments, for example for the carers' card and the Avalon sitting service.
- More people received direct payments this year, in particular older people, and many payments were for a substantial sum.
- The Emergency Duty Service, which the council operates across the Tees Valley, links with its 'First Contact' service to make sure there is continuity for people.
- Everyone is given a copy of the complaints form at their first assessment and new complaints arrangements have been introduced in line with new national guidance.

What the council needs to improve.

- People do not yet have self directed services or individual budgets. When these are introduced, more sophisticated advice and advocacy arrangements will also be needed.
- The council and its health partners have reviewed and put in place changes to assessment processes, but although assessments for most people were completed more quickly this year, they were not completed as promptly as in similar councils.
- Make sure that support for carers is widely publicised, including the availability of carers' assessments.

Outcome 5: Freedom from discrimination and harassment

The council is performing: Well

What the council does well.

- A high number of assessments lead to services being provided.
- There is a joint management post between the council and the PCT that makes sure there are not any formal disputes about who can have continuing health care rather than social care support.
- New Integrated Service Area teams have been set up, which means that people receive advice and support about both social and health care issues.

- More people had services funded through council grants to organisations, due to better information being given about this support when they make contact or are referred.
- Staff have had training about general diversity issues and in relation to the specific needs of particular groups of people.
- Work has taken place with people from black and minority ethnic communities to raise awareness about drug treatment and reduce the harm to communities from drug misuse.
- Community safety initiatives are tackling known examples of harassment, such as cold callers, and the 'Safe at Home' scheme has made improvements to people's homes to help them feel safer.
- There was an event about hate crime against people with disabilities, and the Offensive Behaviour reporting initiative was reintroduced.

What the council needs to improve.

• Make sure that voluntary organisations continue to improve outcomes for people, by putting in place the recommendations from the review of voluntary sector core funding that is underway. The review is looking at the funding which helps voluntary organisations grow.

Outcome 6: Economic well - being

The council is performing: Well

What the council does well.

- People receive advice and information from the Welfare Rights team. Its campaigns have helped some people claim significant additional income and some have been paid large arrears of benefits.
- The Tees Credit Union helps people with mental health problems deal with debt and credit issues.
- The structure of payments for social care services has been simplified and information about it has been changed so that it is easier to understand.
- People who cannot manage their own financial affairs are helped by trained independent mental capacity act advocates.
- People who receive direct payments are supported through an organisation funded by the council. It is running a pilot project to help people plan their support using their own formats. Training is offered on a one to one basis in people's own homes and they are then encouraged to pass on the information to others.
- Over a hundred people have been helped into work, and over fifty into training, by the council's employment support service which works with people with mental health needs, physical disabilities and learning disabilities.
- Posts in the council are considered for 'job carving,' which identifies aspects of work that are suitable for people with disabilities and combines them into new posts.
- There are "carer friendly" policies for the council's own staff, which have been reviewed this year.
- Carers are put in touch with services that can help them with employment.

What the council needs to improve.

• Make sure that all carers are helped to remain in or return to work if they wish, including through the use of direct payments.

The council is performing: Well

What the council does well.

- As well as having a Stockton Safeguarding Board, the council has developed with its neighbours a Tees-wide Safeguarding Board. This will coordinate resources and training, and it has produced information for the general public encouraging people to report suspicions of abuse.
- Public awareness of safeguarding issues resulted in more referrals being received this year, and all work was completed during the course of year. There were more referrals about people living in their own homes, which the council identifies as the effect of awareness raising amongst home care staff.
- A high number of the council's social care staff were trained in safeguarding issues this year.
- The council arranged for an external review of its safeguarding arrangements. It reports that the review's conclusions were very positive. The recommendations will be put in place in 2009-10.
- There have been some organisational changes to make sure that there are good links between complaints, contracting and safeguarding work.
- The Dignity in Care campaign has been promoted across the Borough, and there are eight registered Dignity Champions, including elected members.
- People have assistive technology to help them communicate effectively. Personal listeners help some people with hearing difficulties to communicate during assessments, reviews and meetings.
- Home care providers are required in their contracts to review their service and gather feedback from people using it. The contracts compliance team also undertakes surveys, and prompt action was taken where concerns were raised.
- There are services to help people live more comfortably in their own homes such as a house and garden tidying service for vulnerable people. The Fire Service installs specialist smoke alarms.

What the council needs to improve.

• Although more staff in the independent sector had safeguarding training funded by the council than last year, this remains lower than in similar areas.