

COUNTY COUNCIL MEETING – 14 SEPTEMBER 2012

Statement from: Councillor G A Marsh, Executive Councillor for Adult Social Care

Performance Update

The Adult Social Care (ASC) Performance Framework is now embedded and reflects the strategic direction of prevention, re-ablement, maintenance and safeguarding, but there is flexibility to adapt the framework to allow for more integrated health and social care reporting. Recently, information about human resources and customer insight has been included in the framework to consider the effects of our workforce, and the overall satisfaction rates of the people we support. I attend a Performance Board meeting which receives reports on ASC performance on a monthly basis. This enables a high level of progress monitoring to exist.

To date, the Performance Team has responded to 250 requests for management information to support Operations and Commissioning, including support to core offer and priority areas. Also, the Performance Team have recently undertaken a significant piece of data cleansing to ensure all current clients are scheduled to receive a reassessment in the year.

The planned reduction in the number of admissions to residential and nursing care is on track, which means that more people have remained living independently in the community. At the end of Quarter 1, we were ahead of target. If the current rate continues, by the end of March 2013 the number of admissions in 2012/13 will be 10% lower than the previous year.

We continue to make progress with personalisation, having achieved our national target of 50% for Personal Budgets in 2011/12. In the first quarter, the proportion of people receiving a personal budget has increased to 54%, which is ahead of target. From 2013/14, personalisation will be measured slightly differently. Based on the new definition, which takes account of only those clients for whom personal budgets is most appropriate, 90% of our 'eligible' service users and carers are receiving personal budgets. The number of people choosing to manage their own care through a direct payment also continues to increase, with over 600 more people compared to the same period last year. The total number now stands at 3186.

Earlier in the financial year it was identified that people were waiting too long to have a direct payment processed. A review of processes was undertaken and additional resources provided, reducing the backlog from 365 in May 2012 to 94 in July 2012. The number of complaints about the service has also fallen in the last month.

Our in-house re-ablement service continues to improve with increasing numbers of people regaining their independence, with a 13% increase compared to the same period last year. Work continues to ensure that people do not remain in service when re-ablement is no longer appropriate and a new target of 42 days average stay in re-ablement has been implemented. For the first quarter of 2011/12, performance was 48 days average stay. A project was in place to reduce the maintenance hours provided by the in-house service from 725 to 150 by the end of August. This is important because the costs of providing maintenance hours is greater than in comparison with private domiciliary providers.

The Customer Service Centre has also improved performance: 16% of new social care contacts are signposted to universal and preventative services – compared to 10% at the end of March 2012.

Quality and Development

In 2012 the Quality and Development Team has continued monitoring the quality of regulated services in Lincolnshire. Based on latest CQC data, there are 388 regulated providers in Lincolnshire, of which 290 are registered as care homes.

We are refocusing the quality monitoring role around people's experience of the care services they use. We monitor

- To make sure that people are treated with dignity and respect.
- That they have their care needs met and delivered in a safe person centred way.

In 2012 the team has made 99 visits to care homes across the county. This has included working closely with the safeguarding team and led to improvements at 2 homes where suspensions of new placements were put in place. One home was visited 9 times and the second 7 times and we will continue to monitor to make sure the improvements are sustained. I am pleased to report that these suspensions are now lifted.

A review of the quality of learning disability care home provision is underway to update the work that was completed immediately following the Winterbourne View exposure.

My Choice My Care Microsite

The ASC Information and Advice microsite, www.MyChoicemyCare.org.uk launched successfully in June at the Lincolnshire Show. There has been positive feedback from professionals, providers and the general public. The site is continuing to be developed with further information about Dementia and associated memory problems, detailing the support available within the county. This will ensure that carers and people with dementia or memory problems are able to find the support they need to lead a better quality of life. Further work is being done to ensure the site links in with local organisations to better highlight the different day opportunities and activities available in all areas of the county. The financial calculators are still being developed to ensure that people will be able to accurately assess their own situation and will soon be live.

Autism Strategy

Lincolnshire's progress towards the delivery of the Autism Act (2008) was the subject of a Department of Health sponsored self-assessment undertaken nationally in February of this year. Early feedback indicates that the county's progress is in line with other local authority areas in the East Midlands (the full self-assessment is at: www.lincolnshire.gov.uk/adult-autism-strategy-for-england/88462.article).

Improved arrangements are in place for the diagnosis of autism, and a partnership of service users, carers, the NHS, and other agencies is to oversee the production of a joint autism strategy. More needs to be done to raise awareness in the areas of criminal justice, employment and care assessment. Priority work streams are

- The inclusion of autism in the social care client recording system.
- The delivery of training across the health and social care sectors.
- The development of key service principles to be adopted by all partner agencies.

Further work is being undertaken by the Autism Partnership to develop a wider Lincolnshire Strategy and Action Plan with all partners.

Shaping Care

The closure of the 3 remaining LCC care homes was successfully completed on 30 May 2012. This concludes the programme of planned home closures.

In terms of achievements, two separate procurement exercises were successfully completed to replace the intermediate care beds provision (61 beds) previously offered by the homes and the service is now provided through the independent sector in conjunction with health input from Lincolnshire Community Health Services (LCHS).

Following the success of the Market Place events in phase 1, a series of similar events were held across the 3 homes for providers to showcase their service to services users and their families. This also enabled service users to inform providers of what they wanted.

In total, 313 service users were assessed as a result of the eight home closures. Of those, 55 who were assessed as eligible for an ASC service opted to receive a Direct Payment to pay for their care and support. For those individuals who were assessed as not eligible for our services, a referral was made to Age UK for support. This service has been utilised by 35 of the individuals from the final 3 home closures.

An Independent Brokerage Service was procured to support eligible individuals to choose and acquire appropriate alternative provision. This has been utilised by 125 people across the 3 homes. All individuals are now accessing new services and to date no complaints/complications or concerns have been received regarding the alternative provision of services. The project has demonstrated delivery of efficiencies above the core offer savings targets for 2011/12 and is projected to deliver above target for 2012/13.

Community Hub (Asset Utilisation)

The purpose of the project is to develop existing locality based community assets into 'hubs' that can deliver a combination of health, social care and public health prevention services.

The main objectives are

- One location to offer a joined up approach to providing health and social care advice/information/assessments across all client groups and to act as support for local services such as care homes (e.g. advice and guidance to prevent inappropriate hospital admissions). This seeks to overcome traditional service and professional boundaries.
- To support people in local communities to remain independent at home for as long as possible to deliver targeted prevention services.
- To provide services as a further phased step down from integrated health and social care re-ablement teams.

Potential sites/assets are in the process of being identified.

Dementia Funding

LCC has received additional funding for one year to support dementia services. Plans for this investment will be agreed in consultation with NHS partners to ensure the funding is used to meet the priorities established by the National Dementia Strategy, the Lincolnshire Joint Dementia Strategy, and the Joint Strategic Needs Assessment for Lincolnshire. The emphasis is on improved awareness and understanding, earlier diagnosis and support, and promoting a higher quality of care. The needs of carers will be incorporated through the active involvement of the Lincolnshire Carers' Partnership in this work.

Extra Care Housing

Work has begun on the new Extra Care Housing Scheme at Barratt Court in Skegness. The development consists of 40 flats along with multi-purpose facilities which are open to both residents and the public including conferencing facilities, restaurant, convenience store and a beauty salon.

The scheme is being developed in partnership with East Lindsey District Council, Lincolnshire County Council, Waterloo and New Linx Housing Association.

Following the tendering process RG Carter Construction Ltd was awarded the build contract. The demolition of the current facility started at the end of March 2012 and the construction of the new scheme will follow, with an anticipated completion of the development in Summer 2013.

Re-ablement

Significant work continues around the Re-ablement Workstream which focuses on joint working between Health and Social Care services. This led to the development of a pilot for an integrated pathway involving Health and Social Care in Boston.

An aspect of integrated working will be the consideration of a Trusted Assessment process so that potentially, social care assessments may be carried out by bodies other than Adult Social Care and elements of health care assessment may be carried out by assessors other than NHS employees.

The rationale for this approach is to reduce duplication by making it easier for individuals, families and carers to get effective support when they need it from trusted agencies. Similarly, Trusted Assessment aims to reduce waiting times for assessments and may reduce assessment costs.

Supported Housing - Housing Options Advisor Service

The countywide Housing Options Advisor Service commenced delivery on 9 July for a one year pilot period. The service, delivered by the Lincolnshire Home Improvement Agency, will enable older people to make informed decisions about their housing, care and finance. The service will provide particular advice to service users regarding 'staying put' or 'moving on', and the different housing choices available to them.

Support will be delivered by a full-time advisor providing face-to-face advice, information or casework to between 160 and 175 older people over the twelve month pilot period.

Through delivery of the service there is the potential for moves to more suitable accommodation for a specific number of service users and, as a result of this work, address potential reductions in benefits (for under-occupation), under-occupation generally, and support the county Homelessness Strategy, especially for families and homeless young people.

The monitoring of the service during the one year pilot period will allow for the impact of the service to be continually monitored, and the benefits and value for money to inform future commissioning intentions in relation to this type of service provision.

Housing Related Support following FACS Eligibility Changes

Public Health continue to support services users who have been re-assessed as 'moderate' as part of the re-assessment project, although numbers of referrals for support to find alternatives are decreasing significantly as the project comes into its final stages.

Public Health is now concentrating on supporting service users who are new referrals to LCC and classed as 'moderate'. For many service users, referrals have been made to housing related support services, particularly for those service users with a learning disability, supporting them to continue to maintain their independence. The impact on Public Health will continue to be monitored over the coming months.