



# **Adult Social Care, Health and Public Protection Local Account 2011-2012**



## How well do we deliver local services?

The Council's four year plan (2010-14) has the following five priorities:

- To foster aspiration, independence and personal responsibility
- To promote the economic prosperity of Nottinghamshire and safeguard our environment
- To make Nottinghamshire a safe place to live
- To secure good quality, affordable services
- To be financially robust and sustainable

The work of the Council's Adult Social Care, Health and Public Protection Department (ASCH&PP) is guided by these priorities.

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# Forewords

## **Cllr Rostance – Chair of Adult Social Care and Health Committee**

We are committed to providing good quality and affordable services to the people of Nottinghamshire. The last few years have seen a transformation in the way that adult social care is provided for people who need the services and their carers. Personal Budgets and Direct Payments have increased the choice and control available to the people of Nottinghamshire. As outlined in this Local Account, the Adult Social Care, Health and Public Protection Department has maintained a high standard of quality in its services during 2011-12.

The Local Account identifies how services have continued to deliver and improve over the past year. Our objective is to continue to work to maintain this level of performance and meet the needs of the most vulnerable people within our community whilst at the same time operating within the current financial constraints.

## **David Pearson - Corporate Director for Adult Social Care, Health and Public Protection**

This is the second Local Account published by the Adult Social Care, Health and Public Protection Department. It is one of the means we use for reporting improvement and performance assessment, in accordance with the government guidance ('Taking the Lead: Self Regulation and Improvement in Local Government') and it provides the opportunity to publish our achievements, areas for development and the challenges we face.

We have made good progress with the implementation of personal budgets and all people receiving home care, day care, direct payments, transport and telecare are now allocated a Personal Budget. Nearly one third of these people are choosing to have their budget as a direct payment, giving them increased choice and control over the support they receive. We are currently working with people in long term care to offer them personal budgets too.

In addition to this, we are trying to reduce the total number of older people in residential care by ensuring that suitable alternative services are available to help them live at home for as long as possible. We continue to provide good advice and information which helps to direct people to other solutions where possible, and a huge amount of work is taking place at the Customer Services Centre to put this into effect. We are working to ensure that communities and families are assisted to support and care for family members or vulnerable people. We are building on our work with partners in particular the health service as clinical commissioning groups take over their commissioning responsibilities. We are continuing to focus our resources on helping to support disabled adults and older people to live in their own homes for as long as possible.

# 1

## What is a 'Local Account'?

A 'Local Account' is a way of telling you about the services we provide to the people of Nottinghamshire. It is also a way of asking you where you think improvements or developments are needed.

It includes our key priorities along with our achievements and areas of development for the year ahead.

# 2

## How do we know if we are delivering good quality services?

We monitor and report on our performance through:

- Self assessment of performance targets
- Reviews by other organisations
- Seeking the views of people who use our services
- Consulting the wider community on specific issues
- Using user experience survey information collected by the Department of Health (DoH) from people receiving our services
- Receiving people's views and comments through the complaints and compliments process

We are currently working together with other Local Authorities and partners such as Health to develop a 'Sector Led' Improvement Programme. The programme will ensure that improvements and resources are targeted appropriately and will have four key components:

- Local Accounts
- Self Assessment and Performance – data analysis and benchmarking
- An Improvement Programme
- Leadership and Development

We are required by the government to work to a framework called the Adult Social Care Outcomes Framework (ASCOF), which contains a set of measures and outcomes (see Appendix A for details of these measures) which enable the department to demonstrate that it is meeting the needs of service users and carers.

The outcomes are contained in the four categories identified below and in this Local Account we will report on our performance against these

- **Enhance the quality of life for people with care and support needs**
  - Enhancing quality of life for service users and carers
  - Giving people choice and control over their care and support
  - Supporting people to contribute to community life
- **Delay and reduce the need for care and support**
  - Opportunities for health and wellbeing
  - Reducing dependency on services using prevention, intervention and reablement
  - Providing support in an appropriate setting to enable people to regain their independence
- **Ensure that people have a positive experience of care and support**
  - People are satisfied with care and support services
  - Carers feel respected
  - People know what choices are available locally
  - Maintaining personal dignity
- **Safeguard adults whose circumstances make them vulnerable and protect them from avoidable harm**
  - People feel safe and secure
  - People are free from abuse, harassment, neglect and self-harm
  - People are protected from avoidable harm
  - Supporting people to plan for the future

# 3

## What does the ASCH&PP department do?

The Department ensures that people who have social care needs are able to access the services they require.

The County Council ensures services are provided to more than **57,000** people each year including **older people**, people with a **disability or developmental disorder**, people with a **sensory impairment**, people with **mental ill health**, people **in hospital**, **substance misusers** and people **caring for others**.

Following an assessment the department can provide you with a personal budget which will enable you to purchase services to meet your specific needs. If you need it we can provide support to arrange these services. We can also offer advice and information about services that are available to everyone in their local community and signposting to other organisations that offer support.

The department can also offer a range of early intervention and prevention and reablement services.

In this Local Account you will be able to read more about these services, and also read case studies that describe people's experiences of adult social care.

### Our services also include:

- **Public Protection**  
This includes Trading Standards, ensuring a fair and safe trading environment for consumers and reputable traders. An example of this is the 'Scambusters Team' who have concluded a number of investigations into rogue traders that have resulted in successful legal prosecutions.
- **Emergency Planning**  
Co-ordinates the activities of County Council departments that may have a part to play in the response to an emergency. The types of emergencies that are considered include all those that call for a response that goes beyond the ability of the regular Emergency Services to deal with unaided. Such incidents may include industrial incidents, transport accidents or events of natural causes, such as severe weather.
- **Registration service**  
Registration of births and deaths, conducting marriage, civil partnership and citizenship ceremonies as well as naming ceremonies, renewal of vows and civil funerals. The service works to a national code of practice.

Information about these services is available through the Customer Service Centre or go to; <http://www.nottinghamshire.gov.uk/>

## Key Priorities

Our main focus during 2011-2012 comprised:

- support to carers and young carers through the development and implementation of Carers' Personal Budgets
- achieving the annual savings and efficiencies target
- delivering good quality affordable day services
- promoting the life chances of disabled people
- continuing to develop effective intelligence-led enforcement action to tackle rogue traders
- ensuring that everyone who is eligible has a Personal Budget by 2013
- reducing the re-referral rate for people subject to safeguarding assessments
- increasing the number of people benefiting from integrated reablement services and avoid unnecessary hospital admissions
- reducing the total number of older people placed in residential care by ensuring that suitable alternative services are available to help them to live at home for as long as possible
- increasing the number of places for Outreach Extra Care

## How do we decide if people are eligible for social care services?

Where an individual requires help and support to continue to live at home, either following an illness or a stay in hospital or because of a disability, our staff will undertake an assessment of need to determine whether they are eligible for our services. This assessment will also include completing a financial assessment which will help identify whether the individual is able to make a financial contribution to the cost of their care.

Where an individual does not meet the Council's eligibility criteria then they will be provided with information and advice and will be signposted to alternative services within their local community.

If the individual is eligible for social care services, they will be advised of the type and range of services available. Where the individual has a carer / family member who provides ongoing support to them, then they will also be offered an assessment in their own right to see if they are also eligible to receive services to enable them to continue in their caring role.

## Some examples of things we did in 2011-12

### Adult Social Care:

- Received 35,774 referrals
- Carried out 6,949 assessments of people's needs
- Supported 13,907 people to live independently in their own home
- Reviewed 14,257 people to ensure their service is still correct
- Provided 23,161 pieces of equipment
- Provided 2,655 people with Meals at Home (this provides valuable daily contact with some of our most vulnerable service users)

### Trading Standards:

- Provided alerts to 9,500 residents about scams, bogus charity collectors and unsafe products
- Tackled illegal lenders and loan sharks
- Seized counterfeit tobacco and alcohol
- Increased the numbers of 'Trusted' Traders on the Buy With Confidence Scheme
- Dealt with animal welfare issues

### Registration services:

- Registered 5170 births and 5570 deaths
- Held 1374 weddings at register offices and 872 at approved premises, such as hotels
- Held 47 civil partnerships at register offices and 13 at approved premises
- Launched an internet broadcast service for people unable to attend the weddings of their friends and relatives.
- Established a local repository of historic records dating back to 1837

### Emergency Planning:

- Responded to local flooding
- Supported the plans for the Olympic Torch Relay
- Were involved in the organising of the Queens Diamond Jubilee Beacons to ensure they were as safe as they were spectacular

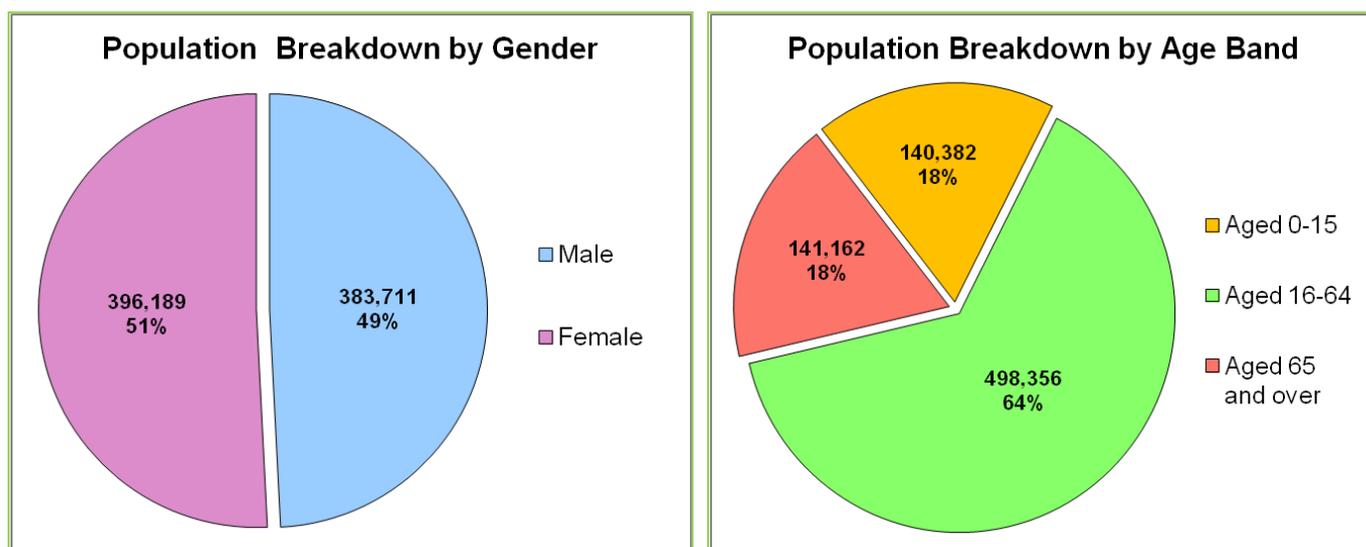
# 4

## What do we know about the health and social care needs of people in Nottinghamshire?

There is a Health and Wellbeing Strategy for Nottinghamshire which aims to make real improvements to the health and wellbeing of the people of Nottinghamshire. The Joint Strategic Needs Assessment (JSNA) studies the health needs of the local population to inform and guide planning of health, wellbeing and social care services. This information is then used to help develop the health and wellbeing strategy based on local needs.

The Health and Wellbeing Board promotes close co-operation between the health service, local government and providers of services.

We know that Nottinghamshire has an ethnically and culturally diverse population with areas of affluence and deprivation; some of the northern parts of the county are ex-mining communities with a population of 779,900 and a workforce of around 360,000. Overall, slightly more women (50.8%) than men (49.2%) live in Nottinghamshire, of these approximately 18% were under 16 years and 18.1% over 65 years.



We also know that we have a growing population of older people who have an increasing level of health and social care needs; that for older people tackling crime and keeping safe are a priority and that by 2015 we expect to see the number of people affected by dementia to increase by 20%.

With the publication of the government policy paper 'Think Local Act Personal' in 2011, we reaffirmed our commitment to personalisation with the aim of transforming services to create a system that can respond to the needs of an ageing society and the changing expectations of those who depend on social care.

You can find more information about the Health and Wellbeing strategy and the JSNA at <http://www3.nottinghamshire.gov.uk/caring/yourhealth/health-and-wellbeing-board/strategy/>

# 5

## Our achievements in 2011-12

The Adult Social Care Survey (ASCS) is a national survey that councils undertake every year. It helps us to understand more about how services are affecting people's lives, and plan how we can improve outcomes for the people of Nottinghamshire.

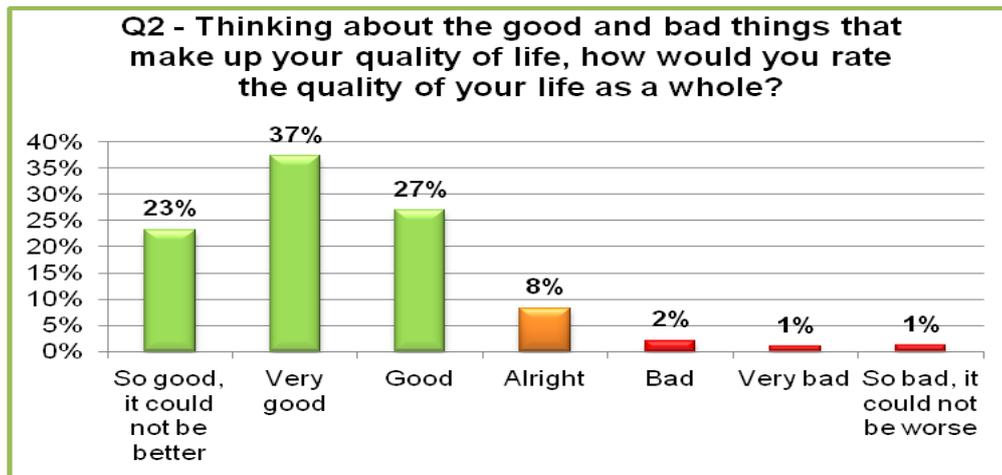
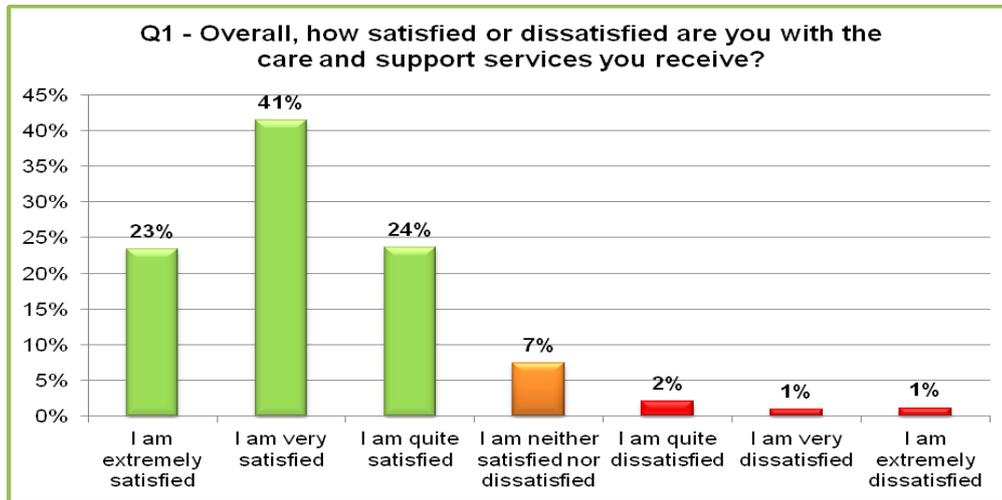
Questionnaires are sent to people who receive services and live at home and to people living in residential care. The survey addresses service users' overall satisfaction with their social care and support, their quality of life, the impact of social care and support services on their quality of life, their health and surroundings and access to information.

### Survey Results for 2011-12 (provisional) compared to 2010-11

Compared to the previous year (2010-11) the survey results for 2011-12 are positive, either mostly staying the same or increasing.

Adult Social Care Survey		2011-12 score	2010-11 score
Q1: Service users who said they were extremely or very satisfied with the care and support services they receive (see graph on page 9)		64%	62%
Q2: Service users said they had a 'good quality of life' (see graph on page 9)		88%	54%
<b>Adult Social Care Outcomes Framework indicators provided by the Adult Social Care Survey (see section 2 for information about the outcomes framework)</b>			
1A – Social care related quality of life	This measure uses responses to survey questions covering 8 areas (control, dignity, personal care, food and nutrition, safety, occupation, social participation and accommodation). Max Score is 24	19.2 (80%)	18.6 (77.5%)
1B - % of people who use services who have control over their daily life	This measure is the number of service users who responded they either have 'as much' or 'adequate' control over their daily lives in response to the question: "Which of the following statements best describes how much control you have over your daily life?"	78%	78%
3A – Overall satisfaction of people who use services with their care and support	This measure is the number of service users who responded that they are either 'extremely' or 'very' satisfied with the care and support services that they receive.	64.3%	62%
3D – % of people who use services and carers who find it easy to find information about services.	This measure is the number of service users who said they found it 'very' or 'fairly' easy to find information and advice.  The proportion of people who have 'never tried to find information or advice' has risen by 3% (from 29% - 31%).	50.9%	53.9%
4A – % of people who use services who feel safe	This measure is the number of service users who responded they felt as safe as they wanted.	68.2%	61.3%

Adult Social Care Survey		2011-12 score	2010-11 score
4B – % of people who use services who say that those services have made them feel safe and secure.	This measure is the number of service users who said that care and support services helped them in feeling safe.	75.6%	60%



## Efficiency savings

Adult services achieved business improvement efficiency savings of £25m over the 2011-12 financial year. This is part of the wider County Council Business Improvement Programme implemented to achieve greater value for money, significant savings and review priorities across the council. The emphasis has been to ensure that resources are directed to those services that support the most vulnerable people.

At the same time as delivering efficiency savings the Council invested an extra £12.6million to meet the increasing demand for social care services.

The department will continue to deliver high quality services to the people of Nottinghamshire whilst at the same time ensuring that it meets its objectives in the most efficient and effective way.

# 6

## How we enhance quality of life for people with care and support needs

We said that in 2011-12 we would work to promote the independence and well being of older people and vulnerable adults, a key part of which was encouraging people to be independent, with support for the most vulnerable people with the highest needs. We ensured everybody that requires an ongoing service is allocated a personal budget, which gives people greater choice and control over how their needs are met.

In our 2010-11 Local Account we said we would ...	In 2011-12 we have ....
Increase the number of eligible people receiving a personal budget to 100% by 2013.	100% of people who receive community based services including home care, day care, transport and telecare now have a personal budget.
Improve day services facilities providing good quality and affordable services.	<p>The day services have developed integrated care arrangements for older adults and disabled adults with multipurpose day care facilities</p> <p>Work has started on a scheme of improvements at the Albion Day centre in Worksop. The centre will be totally transformed as part of the Council's £6million modernisation of day care service buildings across the county, designed to get better value for money. The new look Eastgate centre is scheduled to re-open in Autumn 2012</p> <p>Work has also been started on the refurbishments to day centres in Mansfield, Broxtowe and Gedling. These will all be completed within the first three months of 2012.</p>
Increase the number of young carers accessing services.	<p>In 2011-12 we supported 25 young carers with a service, alongside the provision of care to disabled parents.</p> <p>In addition we commissioned services with a third sector agency to deliver support to young people acting in a caring role and developed accessible information specifically for young carers.</p>

## What you told us

Results from the Adult Social Care Survey 2011-12 show that 88% of people asked rated their quality of life as “so good it could not be better”, “very good” or “good” (a 34% increase on 2010-11).

## Personal Budgets and Direct Payments

A Personal Budget is an amount of money that will meet your long term social care needs. We will offer you a Personal Budget if your community care assessment says you are eligible for support. The preferred way is through a Direct Payment which gives people more choice and control. People can manage their own support as much as they wish, so that they are in control of what, how and when support is delivered.

*Mr A has Alzheimers and a Direct Payment has enabled his family to employ a personal assistant to support Mr A. Keith, the personal assistant, researched all he could about Alzheimers in order to support Mr A and improve his quality of life. Mr A is an extremely intelligent man who worked as an architect before retiring. He is passionate about railways and has a model railway in his house. Keith organises days out to railway museums and supports Mr A not only in his hobbies but also in his independence, encouraging him to help prepare meals and maintain the garden.*

To assist people to manage a Direct Payment we currently have 12 direct payment support services to choose from. These services offer a range of support including help with recruitment, employment law advice and managing the money.

## Direct Payment Card

This year we established a scheme which enables people to manage their direct payment through a Direct Payment Card.

This system is preferred by some service users as it is easier to manage and it enables the Council to check people are using the direct payment appropriately.

During 2011-12 20 people have taken advantage of the pre-payment card as part of the initial pilot and the scheme will be fully rolled out next year.

## Support with Confidence

‘Support with Confidence’ (SWC) has been fully operational since 2010 and gives information about Personal Assistants (PA’s) who are available to help people meet their support needs. SWC is an online directory of personal assistants who have undergone reference checks, enhanced Criminal Records Bureau checks and who have received training in various aspects of the role.

These personal assistants are available to be employed by service users who manage their own care arrangements through a Direct Payment. For information about Direct Payments go to

<http://www.nottinghamshire.gov.uk/caring/supportwithconfidence/>

## Nottinghamshire Micro Enterprise Project

Micro Providers can be sole traders, small businesses, charity or voluntary organisations. The aim is to support local people to provide local support – providing personal, flexible and responsive care and giving local people more choice and control over the support and care which they receive.

The micro enterprise project in Nottinghamshire continues to be very successful and so far there have been 151 enquires from small provider organisations who wish to develop their social care services. The project co-ordinator has met with over 100 people to offer support and guidance and is currently working with approximately 50 micro providers. This will enable people to have a wider choice of services available to them.

There are currently 43 new micro providers working across Nottinghamshire who offer a range of services including support with domestic and gardening tasks, support to enable people to access the local community, volunteering opportunities, work placements and home care. These services are currently purchased via a Direct Payment or by self funders (people who pay for their own services).

## Assistive Technology for Carers

A new Assistive Technology for Carers service started in October 2011 which provides a range of assistive technology equipment to support unpaid carers including bed leaving sensors which can alert a carer if the person they care for is leaving their bed during the night and needs assistance.

*Mrs P from Edwinstowe has a pager unit to help her care for her husband who has Parkinson's Disease. She said: "I'm usually with my husband inside, so he can shout me if he needs me or if he falls, but it's really good if I need to go out to hang up the washing or something. I think other people would find it really useful."*

*Mrs K looks after her disabled daughter who suffers with frequent night time epileptic seizures. An ASCH&PP worker told her about the new Assistive Technology For Carers scheme and referred her for a night time epilepsy seizure alarm linked to a portable pager. Mrs K commented, "It's brilliant – we used to use a baby monitor but this didn't always pick up when our daughter had a fit. I can stay downstairs now in the evening and get alerted if my daughter needs help"*

## Care Home Bed Monitoring System

The care home bed monitoring system was implemented in March 2012 for older persons care homes with plans to extend to care homes for younger adults. The system is a web-based database which enables people to search through all the care homes in Nottinghamshire and find homes where there are vacant beds. It also provides information about paying for care. The scheme has won a national award for Innovation in the Public Sector.

## **First contact signposting scheme**

Following on the success of the Nottinghamshire First Contact Signposting scheme for people over 60, a trial of a similar First Contact scheme for younger adults aged 18 to 59 started in Newark and Sherwood in June 2011. The scheme enables users, carers and professionals to access services ranging from benefits advice to fire safety through a simple two sided questionnaire.

## **Improvements at the Customer Service Centre**

From January 2012 when people call the Customer Service Centre via the 'golden number' callers are presented with four choices. One of these is for adult social care and there are dedicated staff to deal with these calls. Having dedicated operatives will lead to improved service delivery to the customer including a quicker response and resolution to their queries.

## **Promoting Independence**

During 2011-12, we have been working towards increasing the independence of people with a learning disability who live in residential care. Over the year, 26 people have successfully moved from residential care to supported living placements which has increased their social and life skills and enabled them to participate more fully in the community. In addition there have been a number of successful transitions of younger adults from residential care into supported living. One such case involved providing support and accommodation for twin brothers with autism who were approaching age 18.

During the next twelve months we aim to provide opportunities for a further 30 people to move from residential care to supported living environments.

In physical disability services the introduction of reablement staffing has enabled people who are currently in receipt of a service to have their needs reviewed, providing people with increased levels of independence through new and innovative ways of meeting people's needs. Many people have been in receipt of personal budgets and direct payments for some time: however the reablement staff have worked successfully with individuals and families to ensure that the support which people are receiving is able to meet their needs in the most appropriate and economic way to enhance the quality of their lives.

## **Promoting Independence Workers (PIWs)**

Motor racing, parachute jumping and wheelchair ice-skating – these are some of the amazing activities that disabled people have been motivated to do by a small team of NCC social care staff dedicated to boosting confidence and promoting independence.

Fifteen *Promoting Independence Workers* have been in place around the Council since January and so far 110 disabled adults (age 18-65) have benefited from their expertise.

"Our main aim is to help our clients tackle anything that is reducing their independence and making them reliant upon carers, says Simon Turner one of a team of five PIWs based at Sir John Robinson Way. "This can be anything from getting on a bus or preparing a meal for themselves to access funding for hi-tech mobility equipment or finding a training course. Once someone overcomes smaller hurdles we can help them achieve things they never believed possible."

*"I recently helped a client choose a mobility scooter," says Simon. "He hadn't been out of his house on his own for months because he didn't have the strength to operate his manual wheelchair. Once he had seen the scooter of his choice he purchased it there and then -You should have seen the look on his face as he contemplated his new found freedom!"*

*"I helped a client join a gym and it's amazing the difference this has made to his life. Now he's getting out, getting fitter and meeting friends – before he sat in front of the TV all day. He just needed someone to give him confidence to help him find a suitable gym, plan his travel routes and accompany him on his first few trips."*

The PIWs aim to do their work in just 12 weeks - leaving their clients empowered to do a lot more for themselves in the future. Some will still require some level of care from the council or other providers – often purchased through Personal Budgets, some will fully regain their independence and others may return to the PIWs at a later date.

### **The Countywide Aspergers Services**

The team is the first social care led Aspergers team in the country. It has been praised for its work and is seen as an exemplar of good practice. It provides support for people who have Aspergers syndrome and other high functioning autistic disorders. The service currently has a caseload of 200 people with an increasing demand for services as more people are diagnosed and recognised with this condition. The service delivers care management and assessment together with a range of professional support activities. The team's work to deliver personal budgets to people with Aspergers disorder is being seen as a national model of best practice.

Community Access workers have continued to develop accessible services for people with complex disabilities across the county, both in specialist areas and in mainstream activities. This has included working with district councils to develop accessible sports and leisure facilities, access to arts and cultural events and the development of new changing places facilities and sensory areas in leisure centres and country parks.

During 2011/12 we developed a new service specification for mental health supported living services based on the 'Working Together for Change' principles, whereby the specification for services is taken directly from the outcomes identified by individuals through their care and support plans. Mental health service users were directly involved in determining individual outcomes which were then collated to develop the overall specification for services across the county. Not only has this process ensured that the contracts for services meet the needs of service users, but we have also managed to deliver increased levels of services whilst making substantial reductions to the cost of services.

### **Young Carers**

Whilst completing an assessment of a service user with MS and Fibromyalgia we also completed an assessment of her two 14 year old sons as they undertook a range of domestic tasks for their mother. We provided them with a Direct Payment to purchase a Laptop computer to help with school work and keep in contact with their friends via social media. We received a letter of thanks from them ... it gave them a sense that their role was valued and they were very pleased with the outcome.

In November 2011 we assessed a carer aged 17. He provided support for his mother who has a spinal problem and suffers depression. The carer, AB, wanted support to purchase driving lessons so that he could drive his mother to appointments. We provided £750 to buy 40 lessons. AB feels the Personal Budget is helping him reach his goals and he found the process of assessment simple to go through.

# 7

## How we delay and reduce the need for care and support

We said that we would work to support people to have the best health and wellbeing throughout their life and to enable them to access support and information to help them manage their care needs.

In our 2010-11 Local Account we said we would ...	In 2011-12 we have ....
Provide an effective reablement service to enable people to get better more quickly and reduce their need for services	Reduced the number of people needing to live in a care home and increased the number of people living independently through our 'START' reablement service. Following reablement, 37% required no ongoing service, and 20% required a reduced package of care.
Develop alternatives to long term residential care and provide a more flexible range of services to support people in their own homes	We have developed a range of services designed to increase people's independence and support them to live at home for longer. These services include: <ul style="list-style-type: none"> <li>▪ Telecare</li> <li>▪ Night response service</li> <li>▪ Just checking</li> <li>▪ Intermediate care</li> </ul> and are in addition to services such as: <ul style="list-style-type: none"> <li>▪ Equipment</li> <li>▪ Meals at Home</li> </ul>
Increase the number of places for Outreach Extra Care	We can now offer 57 people a 'night response' service.  This service gives people access to care support throughout the night which will complement their home care service during the day and enable them to remain living at home instead of going into residential care.

### Assessment Beds

Assessment beds provide short term residential care services which can offer recuperation, assessment and reablement. The service is targeted at older people (55+), who are medically fit and no longer need to remain in hospital, but at the time of discharge are unable to return home and so are at risk of being admitted into long term residential care.

The Assessment Beds project has been successfully rolled out across the county and we are currently working to increase the capacity of this service. A high proportion of older people are placed into long term residential or nursing care from hospital. This is partly because people often appear to be more dependent when their needs are assessed on a ward.

Assistive Technology services use the latest technology to keep people safe in their own home. During 2011-12 we extended the range of services available to the people of Nottinghamshire. The technology uses a range of sensors which include home safety sensors (smoke, carbon monoxide, flood and heat alarms, which can be useful for people with dementia), property exit sensors, fall detectors, bed occupancy monitors, and night time epilepsy sensors.

### Just Checking

Just Checking is a joint scheme with health service colleagues for people with dementia. It is an assistive technology system, used to assist with assessments of how well a person with dementia is managing at home. As the person moves around their home, room and door sensors are triggered and this information is automatically downloaded to a secure website. This benefits both the person and the professional staff and the people who care for the person. The system can also reduce the length of hospital stay and results in better targeted community care packages.

*Mr J has dementia and Just Checking was used to assess how well he was managing at home after concerns were raised by the care agency supporting him, who felt that he may need to go into residential care. The worker who used Just Checking commented, "Just Checking has been very useful in supporting a claim for Mr J to remain living independently. It helped to establish his pattern of behaviour and we have offered an extra day care place, which will prevent any referral for a long term care placement."*

### Telecare Service Extended

In October 2011 the Telecare service was extended to cover the whole of the County. The new service offers a wider range of Telecare equipment and will be costed in the service user's personal budget. The range of equipment includes:

Home safety sensors e.g. flood or heat alarms  
Property exit sensors  
Fall detectors  
Bed occupancy monitors  
Night time epilepsy monitors

*Mrs M has multiple sclerosis and is at high risk from falls. She was provided with a telecare fall detector which automatically alerts a 24 hour monitoring centre if she has a fall at home. Mrs M commented, "I love it! it makes me feel much more confident"*

### Night Response Service

The Night Response Service is available to service users aged 65 and over provides additional support to existing home care so service users can contact carer staff during the night. The service is designed to respond to occasional emergency night time personal care needs. If service users do not already have a suitable Lifeline service, they will be provided with the Telecare service linked to a 24 hour monitoring centre.

### Health and Wellbeing Marketplace

A Health and Wellbeing Marketplace was held at Mansfield Civic Centre last year. It brought together social care providers from across the county so people could find out about - for example - support groups, advocacy, personal budgets, micro providers, community groups, social and leisure activities and short breaks.

## Reablement Older Adults

The Reablement Team supports people to regain the skills and confidence to live as independently as possible. By agreeing support plans focussed on outcomes, our multi-disciplinary team of Occupational Therapists and Reablement Workers can help people regain everyday living skills such as getting dressed, using the bathroom, getting around the home and cooking.

This support can last for up to six weeks and is free of charge. During this time support is constantly reviewed, to ensure goals are met. If longer term help is required, the workers within the team assess people quickly, encouraging people to use Direct Payments where possible, to maximise their choice and control.

Our service users benefit from our workers working together and sharing their knowledge and expertise from within each of their own areas, and last year over 2,200 people were supported through the reablement process, with 57% of these either having no ongoing support or needing a reduced package of care.

The service user lives alone and was referred to the 'START' reablement service because, although previously independent despite health problems, she had experienced 4 falls within 10 days. As a result of the falls she was in considerable pain, at high risk of further falls and struggling with personal care and household tasks.

'START' reablement Occupational Therapists (OT) developed a reablement programme and issued equipment to help her regain her ability to wash and dress herself and to improve her mobility. This also helped to reduce the risk of further falls.

The Reablement Support Workers followed this plan and initially called twice a day to encourage and assist the service user to relearn these tasks. By day 8, a review showed that the service user was now able to undress and get ready for bed so the evening visit was no longer required. The OT also decided she was ready to try a bathlift.

The second review was carried out on day 13 - and the bathlift was successfully tried. On day 15 the service was ceased with the agreement of the service user and her family. The service user was fully reabled and required no ongoing services.

## Reablement Younger Adults

The Mental Health services have developed a reablement service which aims to provide specific services for adults with mental ill health. The focus is on preventing deterioration in health, providing support following hospital admission and providing crisis intervention to prevent hospital admission.

During 2011-12, the service worked with 218 individuals, of whom 50% required no further care or support following reablement. A further 17% were signposted to other services with only 12% of people going on to require longer term services.

Adult Deaf and Visual Impairment Service works with adults and older people to provide reablement and specialist equipment. The visual impairment reablement service supports people to regain daily living skills if sight has been lost or significantly reduced. The team offers

advice, guidance and training to maintain or regain independence. Over 80% of people referred have had their needs met through this service without requiring further service provision. Referrals for Deaf reablement are usually for equipment or to assist communication in order to access family, friends and information. The deaf reablement function has been successful in providing short term interventions for over 90% of people referred to the service.

### **Emergency Department Avoidance Support Service**

The Emergency Department Avoidance Support Service (EDASS) is a joint service between health service colleagues and Nottinghamshire County Council pilot based at acute hospitals, which aims to reduce avoidable hospital admissions through provision of a rapid response crisis support service. It has diverted about 700 people from local emergency departments to date.

### **Mental Health Intermediate Care**

The Mental Health Intermediate Care Team is a specialist service for older people with mental health problems and / or dementia who may also have a medical condition. It provides reablement and helps people to avoid the need for hospital admission, and long term social care. In one location the service has led to a 25% decrease in the use of hospital beds by older people with mental health problems.

### **Employment**

Over the course of the last twelve months we have supported 198 people with a learning disability to maintain or gain employment. The work service provides people with learning and development opportunities as well as support through individual placement support in employment. In addition we supported three work projects providing paid employment opportunities, enabling one of these to move into the independent sector. Further work has been undertaken with Children, Families and Cultural Services to deliver employment and training opportunities to young people to ensure they have access to work placements on leaving school.

Scott, who has autism, was referred to the i-work supported employment team by the transition worker in his last year of school. Whilst conducting his person-centred review, which Scott interpreted into graphics himself, the team found his drawing and illustration skills exceptional. From this meeting Scott went on to facilitate by using his illustration skills at various meetings organised and supported by the transition worker, social worker and i-work. After advice from i-work it was agreed with Scott and his family that he would become self-employed as a graphic facilitator. His business 'Inspired Animations' was established with support from i-work. His support at present is carried out by his social worker, i-work and family. Scott now has a personal budget to employ a personal assistant to help him in his business.

A transition worker helps young people currently receiving childrens based services transfer to adult services.

## Stroke Survivors

In 2011-12 we:

- Ran a number of 'Strokeability' courses across the county in Newark, Ashfield, Mansfield, Gedling and Hucknall providing gentle exercise and information giving sessions within local leisure venues. We also trained leisure and voluntary sector staff to provide these courses and support stroke survivors
- Developed and part funded a service in Bassetlaw supporting stroke survivors and carers following hospital discharge
- Established a Return to Work Service which will run for 12 months operated by the Stroke Association for the Mansfield, Ashfield and Newark areas
- Part funded a service for stroke survivors and their carers discharged from Nottingham University Hospitals (City or QMC)

# 8

## How we ensure that people have a positive experience of care and support

We said we wanted to ensure that people and their carers who use our services are satisfied with their experience of the care and support they received.

### Ensured that people have a positive experience of care and support

Results from the Adult Social Care Survey 2011-12 show that 64% of people asked are either extremely or very happy with the care and support services they receive. This is a 2% increase on results from 2010-11.

Received 138 compliments about our service by service users and members of the public

Results from the Adult Social Care Survey 2011-12 show that 78% of people who use services have control over their daily life (maintained 2010-11 position)

### What you told us

Results from the latest **Adult Social Care Survey** show that 88% of people who responded are satisfied with the care and support services they receive. Of the 88%, 64% are extremely or very satisfied. Only 4% of people said they were dissatisfied, and 7% of people said they were neither satisfied or dissatisfied.

### 'Tell us Once'

This year we implemented Registration Services' Tell Us Once service. This service gives customers one point of contact with public services following a birth or death, helping people to inform those local and central government departments who need to be notified of a change in circumstances and reducing the amount of time it would take to contact these places individually.

### Care provision meets the needs or 'outcomes' of service users

We monitor and review people's care packages to ensure that the care they receive meets their needs or agreed 'outcomes'. Of the 8,447 care packages reviewed in 2011-12, 84% of people said that their primary 'outcome' had either been fully or partly met.

### Examples of outcomes we have helped people to achieve are:

*'I want to go strolling so that I can keep fit and get out in to the fresh air'*

*'to remain living as independently as possible in my own home'*

## Complaints and Compliments

In 2011-12 the department received 266 complaints and 138 compliments.

Most complaints are resolved without the need for a formal investigation as there is an emphasis on negotiating a resolution with both the complainant and the department at the outset. We use information from these complaints to learn how and where we can make improvements to the service we deliver.

When her mum was able to leave her care home without appropriate supervision, Mrs B complained to the department.

The manager of the home undertook an investigation and found that on the morning in question procedures had not been adhered to.

As a consequence staff have had further training and procedures have been updated to ensure that such an incident does not occur again.

Mrs B has received a full report detailing what went wrong and what we have done to prevent this from happening again.

*Just wanted to thank you for your very full and considered assessment of mum, she really appreciates what you have done.*

*Ms M, Daughter of service user*

*Thank you for the home visit and information about the help we are able to receive.*

*Mr L, service user*

For information on the Council's Complaints, Comments and Compliments service go to <http://www.nottinghamshire.gov.uk/thecouncil/contact/comments/>

## End of Life Care

Around half a million people die in England each year, almost two thirds of whom are aged over 75. The large majority of the deaths follow a period of chronic illness such as heart disease, cancer, stroke, chronic respiratory disease, neurological disease or dementia. Most deaths (58%) occur in NHS hospitals, with around 18% occurring at home, 17% in care homes, 4% in hospices and 3% elsewhere.

Although every individual may have a different idea about what would, for them, constitute a 'good death', for many this would involve:

- Being treated as an individual, with dignity and respect
- Being without pain and other symptoms
- Being in familiar surroundings
- Being in the company of close family and/or friends

A wide range of work has taken place during the year to raise awareness of the role of social care in supporting people at the end of life and this year 30 care homes started Gold Standards Framework training which will enable these homes to provide excellent end of life care. This means they will have end of life wishes, anticipatory drugs and plans in place so that residents

do not need to be rushed into hospital when they are dying but can die with dignity and respect in their own care home.

## Carers

Nottinghamshire has a higher proportion of carers in the population than the England average. 83,000 carers identified themselves in the 2011 Census, of whom approximately 26,000 provided 20 hours or more of regular care. Most carers were aged between 35 and 59; however, there are also over 4,700 young carers in the 5-24 age range with an average age of 12yrs, spending 19 hours a week caring.

The department will undertake a national **User Experience Survey of Carers** in 2012/13. This survey has been developed to learn more about whether services received by carers are helping them in their caring role and their life outside of caring and carers' perception of services provided to the cared for person. Currently, there is limited information in these areas. It is important that we take into account the impact on carers of the provision and quality of services provided to service users.

The survey is undertaken every 2 years, the last being for 2009-10 where results were positive, 90% of Carers said they were 'satisfied with social care support or services' and 92% of service users said 'they were satisfied with the support or services they had received'.

## Service User & Carer Reference Group

The department has engaged with local people and agencies in a variety of ways enabling them to contribute to the design and delivery of services being provided or commissioned.

The aim of the Service User & Carer Reference Group is to discuss and review proposed service improvements or revisions. It seeks to discuss and shape how future engagement should take place, including engagement with seldom heard groups. Members who are drawn from a wide variety of service areas offer views and constructive suggestions for the improvement of services for ASCHPP service users and their carers. The group is able to challenge, evaluate and share good practice.

To date, the group have been able to contribute to agendas around Day Services, Health & Well Being, Personal Budgets, Long Term Care, Supported Employment, Self Directed Support (SDS) Evaluation and the Budget Conversation.

This is a good example of where members can see things through from inception to completion, and can contribute throughout the process. It also gives the Council a good insight into how its services are being perceived by service users, carers and external agencies.

A 'Working together for Change' approach was used to gather the views of service users, carers and social care providers, from across the County, as a contribution to the 'shaping' of the future domiciliary care market place.

Individuals were contacted to seek their views on what had been working well, what hadn't and what was important for them. A cross-section of contributors were then all brought together for a day of workshops - common themes were highlighted and prioritised. Finally, root causes were examined and success indicators for future working were identified.

## **Co-Production**

The traditional day services for people with mental ill health are being replaced through the day service modernisation programme. To promote people's recovery from illness and make use of the expertise, knowledge and experience of people who have used mental health services. Service Users, carers and local communities are being supported to develop and manage local services such as peer support and time banking schemes. Mental Health services are being reviewed over the next two years.

## **Day Services**

During the last year we have commenced a modernisation programme within the council operated day services, which has brought service users from different disability groups together with older people. This has promoted intergenerational working and allowed people to meet new people and make new friendships. Service users have enjoyed supporting each other and have utilised their individual strengths to support others who may have needs which they can help with through peer support.

The integration of services has enabled all service users to access facilities such as sensory rooms, and sporting and therapeutic activities that previously had only been available to one disability group. The refurbishment of the day service buildings has given people access to new modern environments in which they can enjoy inclusive activities such as coffee bars and beauty salons.

## **Advocacy**

In 2011/12 we tendered for new advocacy provision across the county. Together with partners in the health service we have commissioned a service which meets the needs of all service users groups equitably. Previously advocacy provision had been organised on a different basis for different user groups. The new service has widened access to advocacy provision and the number of referrals to the services has increased over the course of the year such that many more people are now accessing advocacy service than under the previous contracts.

# 9

## How we safeguard adults whose circumstances make them vulnerable and protect them from avoidable harm

We are committed to ensure that people are free from physical and emotional abuse, harassment, neglect and self-harm and that people enjoy physical safety and feel secure.

Adults safeguarding is about preventing abuse and neglect, enabling adults to retain their independence and promoting good practice when responding to specific concerns. Where abuse or neglect is suspected or alleged, Nottinghamshire's Safeguarding Adults Procedures can be used by the organisations involved to ensure that services provide a consistent and comprehensive response.

In our 2010-11 Local Account we said we would ...	In 2011-12 we have ....
Improve safeguarding arrangements and outcomes in protecting vulnerable people in the community	<ul style="list-style-type: none"> <li>▪ Reduced the percentage of safeguarding assessments that have an inconclusive outcome</li> <li>▪ Reduced the percentage of people who have more than one safeguarding assessment in a year</li> <li>▪ By raising awareness and clarifying referral processes we have seen an increase in the number of safeguarding concerns received</li> </ul>
Continue to audit and improve safeguarding standards in care homes	17% of older persons care homes are in the top quality band in 11-12 compared to 10% in 10/11.

### How we can demonstrate that people's lives are improved as a result of safeguarding.

#### What you told us

The **Adult Social Care Survey** is a national survey that all councils undertake. It asks two questions about safety and security. The results from the 2011-12 survey show an improvement in the number of people who feel safe and who said that the services they receive help them to feel safe.

In 2010-11 61% of people who used services said they felt 'as safe as they want'. In 2011-12 this has increased to 68%.

In 2010-11 60% of people said the services they received 'help make them feel safe and secure'. In 2011-12 this has increased to 76%.

#### Feedback

Gathering feedback from people who have been through the safeguarding process is a complicated and sensitive matter. We need to ensure that the feedback we are given is honest, and unbiased and in the future we intend to explore how we can gather and use such feedback.

## **Safeguarding (and dignity) has been subject to independent scrutiny or checking.**

### **Peer Review**

In November 2011 the Nottinghamshire Safeguarding Adults Board commissioned a peer review into all aspects of safeguarding adults in the County to provide independent scrutiny and quality assurance of its safeguarding processes. An independent person was appointed to lead a team of four staff to undertake the peer review. The staff were from the County Council, from NHS Nottinghamshire PCT and from Nottinghamshire Police.

The review focussed on identifying opportunities for improvement and learning in 8 main areas:

1. Outcomes
2. People's Experience of Safeguarding
3. Leadership
4. Strategy
5. Commissioning
6. Service Delivery and Effective Practice
7. Performance and Resource Management
8. Local Safeguarding Adults Board

### **Findings**

The review found that "safeguarding adults" practice and procedures in Nottinghamshire are basically sound. There is much good practice and individuals are mostly safeguarded.

The review produced a detailed report together with a number of recommendations for improvement. The recommendations and subsequent action plans are currently being implemented by a "task and finish" group which is overseen by the Safeguarding Board. The peer review team have been included in ensuring that service improvements are achieved as a result of the findings of the peer review.

### **Monitoring referral rates**

The safeguarding team has developed a system to identify establishments which generate a high number of safeguarding referrals. This information can help us to target training and support to ensure that practice within the home is improved so that the number of safeguarding incidents can be reduced.

### **Monitoring care providers**

The department is responsible for ensuring the quality and performance of the contracted providers across all commissioned adult services.

We monitor the quality of services using audits and feedback from the public and partners. The majority of services are audited by the team at least once a year. In addition to the system of audits there are yearly contract reviews with providers and provider forums are held on a regular basis. The purpose of this work is to encourage good practice and to identify those services which require targeted help and support to improve their standards of care.

Where poor performance is identified, a number of sanctions may be imposed:

- Notification of concerns and identification of improvements required
- Highlighting breach of contract requiring corrective action
- Suspension of further placements
- Termination of contract

Information regarding concerns is shared with the Care Quality Commission and may also be referred to the police for criminal proceedings where required.

## **The quality and safety of local services – personal assistants, care at home, care homes and hospitals etc.**

### **Quality bandings for older persons care homes**

When care homes for older persons are audited they are given a 'quality banding'. The banding given is an assessment of the quality of service provided by the home.

The table below shows how many homes are in each band. Band Five offers the highest quality.

	<b>2010-11</b>		<b>2011-12</b>	
	<b>Number</b>	<b>Percentage</b>	<b>Number</b>	<b>Percentage</b>
<b>Band 1</b>	31	19%	25	15%
<b>Band 2</b>	43	26%	38	23%
<b>Band 3</b>	36	22%	43	27%
<b>Band 4</b>	37	23%	29	18%
<b>Band 5</b>	17	10%	27	17%
<b>Total</b>	164	100%	162	100%

The Council works with partners to continually improve the quality of service delivered and as a result the percentage of homes in the top band has increased from 10% in 2010-11 to 17% in 2011-12.

### **The accredited list of Learning Disability care homes**

This year we have introduced an accredited list of care homes for people with learning disabilities. Homes have to apply to be on the list and agree to comply with a set of standards which are audited on a regular basis.

Homes on the list meet a quality standard and offer value for money and when an individual requires a placement we use these homes as our preferred providers.

### **Buy with Confidence**

The Buy with Confidence scheme provides Nottinghamshire consumers with a list of local businesses which have given their commitment to trading fairly. Every business listed has undergone a series of detailed checks before being approved as a member of the scheme. In addition levels of consumer complaints against members are also monitored on a regular basis. The scheme is run by the County Council's trading standards service.

## **Pre-Payment Card for Direct Payments**

This year we established a scheme which enables people who do not have access to a bank account to use a Direct Payment via a pre-payment card. Funds are loaded onto the card by a team at County Hall and the service user can then use the card as a cash or debit card and for standing orders or direct debits.

This system offers increased safeguarding as the Council has access to view and monitor activity on the account, and can put restrictions on usage if required.

## **Support with Confidence**

Support with Confidence is an online directory of personal assistants who have undergone reference checks, enhanced Criminal Records Bureau checks and who have received training in various aspects of the role.

These personal assistants are available to be employed by service users that manage their own care arrangements through a Direct Payment.

## **Scam Alert Service**

Nottinghamshire Alert is a web-based, secure messaging system that allows Nottinghamshire Police, Neighbourhood Watch and other public organisations to distribute messages concerning community safety to members of the public quickly and efficiently. Alerts are predominantly sent by email, but text and voicemail can also be used.

The purpose of the system is to keep the people who live and work in Nottinghamshire and particularly Neighbourhood Watch members, informed about crime in their area to enable them to influence local policing.

This year the Trading Standards team successfully prosecuted a father and son who conned elderly customers through a mobility aids business by overcharging or not delivering orders.

The offenders have been ordered by the courts to pay money back to their victims. The action followed a 'proceeds of crime' investigation by Trading Standards which means that 5 victims aged 54 to 93 will receive some money back.

## **Feedback from the public and partners**

The County Council has a process of monitoring concerns relating to residential and nursing homes across the County. Examples of concerns are: unkempt environment or unpleasant odours, lack of day time activities. Whilst these sort of concerns do not warrant a full safeguarding review, they need to be monitored and providers will be required to address the concerns.

Multi agency partners and members of the public can share concerns which are logged on a data base and then if issues repeatedly appear they are discussed at a special quality meeting following which actions are taken if required.

We have regular information sharing events where we share information about concerns and results of audits with the Primary Care Trust and with the Care Quality Commission.

## Police and criminal justice sectors' responses to safeguarding.

### A Multi Agency Safeguarding Hub

This year the department has been working with the Children, Families and Cultural Services Department and with other statutory agencies on the development of a Multi Agency Safeguarding Hub (MASH). The hub will be the point of contact for safeguarding for both adults and children. The development of the hub will result in a more co-ordinated response from partners, will incorporate the 'Think Family' agenda and will improve data collection and provide better monitoring information. The hub will go live in October 2012.

### Stop Hate UK phone line

Stop Hate UK is a 24/7 phone line 0800 138 1625 which provides help all day, every day for people affected by hate crime whether they are victims or witnesses of hate crime in Nottinghamshire. The phone line was launched in November 2010.

Commissioned from 'Stop Hate UK' by Nottingham City Council, Nottinghamshire County Council and Nottinghamshire Police, the confidential helpline is staffed by highly skilled call takers with real life experience of hate crime, trained to give advice, support and guidance to victims and witnesses.

- 55% of contacts with the Stop Hate Line were out of office hours this year. This shows the continued demand for our out of hours services which are designed to meet the needs of victims and complement local strategies.
- Stop Hate UK has received 281 contacts and made over 200 referrals to local agencies in 2011-2012. More than 50 anonymous reports have also been sent to the Police for monitoring purposes.
- 63% of incidents reported to Stop Hate UK in 2011-2012 were motivated by the victims' disability or perceived disability.
- The three most commonly reported incident types in 2011-2012 were threatening behaviour, Anti Social Behaviour/noise nuisance and criminal damage.

A caller reported receiving a series of calls that were frightening and distressing her. She had previously been the victim of hard selling by a double glazing company who had targeted her due to her age and she was scared that this was going to re-occur. Advice and reassurance were provided to the caller and a referral made to the Police.

For further information please visit [www.stophateuk.org](http://www.stophateuk.org)

The department has worked hard this year to make sure people know how to report a concern about safeguarding and to increase awareness of safeguarding issues.

The number of concerns received by the department in 2011-12 has increased by nearly 400 since the previous year. The Stop Hate line has also experienced an increase in contacts.

## **Criminal Prosecutions**

The council records what actions are taken against a perpetrator following the conclusion of an investigation. In some cases the investigation can lead to a criminal prosecution against the perpetrator.

The number of criminal prosecutions has more than doubled over the last three years and in 2011-12 the number of prosecutions has increased to 13. This is seen as a positive step.

## **How our Safeguarding Adults Board demonstrates its effectiveness**

### **Peer review findings**

The recently commissioned peer review found clear evidence of effective leadership from the Board, the Council and its partners. The review found that the Safeguarding Adults Board holds its partners to account and that safeguarding adults work in Nottinghamshire should be able to sustain a shared strategic direction and build on the learning gained from the Peer Challenge.

The Board is developing its strategic and leadership role and intends to continue to develop the role of its Members as safeguarding champions. Recommendations from the review in respect of the Board relate to the continued strength and influence of the Board and its Members.

### **Markers of Good Practice**

The “markers of good practice” is a self assessment audit tool which is completed annually by Board members to benchmark their agencies performance against a number of indicators of “effective” safeguarding. The indicators cover a broad range of agency activity including organisational arrangements, recruitment processes, policy, training of staff, commitment to safeguarding and much more. The Board evaluate these self assessments and if they consider there are any areas for improvement the agency is expected to address these.

### **Annual report**

The Board produces an annual report which contains both statistical and qualitative information on its performance and that of adult safeguarding in the preceding year. In the most recent 2010/11 report the Board responded to feedback and changed the format of the report. It is shorter with fewer statistics, user friendly, focused on outcomes and how the Board has “made a difference”.

### **Serious Case Reviews**

The Serious Case Review sub group of the Safeguarding Board considers and commissions reviews of cases where individuals have died or been seriously injured and abuse or neglect is known or suspected to be a factor in their death. The reviews are focused on “learning lessons” and improving future practice. In 2011 the Board published the findings of 3 serious case reviews involving the death of individuals where pressure ulcers were a significant feature.

The Board and individual agencies have worked to improve responses to pressure ulcers both in terms of prevention and treatment. The NHS now expects all providers to be working to eradicate all avoidable pressure ulcers, including low grade ulcers, by December 2012. Hospitals have reviewed and strengthened procedures in relation to the care and treatment of patients with pressure ulcers. Work has been carried out with the independent sector and individual care homes in relation to the lessons learned. Good practice guidance has been produced for GPs.

## **Domestic Homicide Reviews**

A domestic homicide review (DHR) is a review of the circumstances in which the death of an adult has, or appears to have, resulted from violence, abuse or neglect by a person to whom they were related or with whom they had been in an intimate personal relationship, or a member of the same household as themselves. The reviews are a new process required by law since April 2011. In Nottinghamshire they are co-ordinated by the Safer Nottinghamshire Board. Five DHR's have been started in Nottinghamshire since March 2011, involving a range of partner agencies.

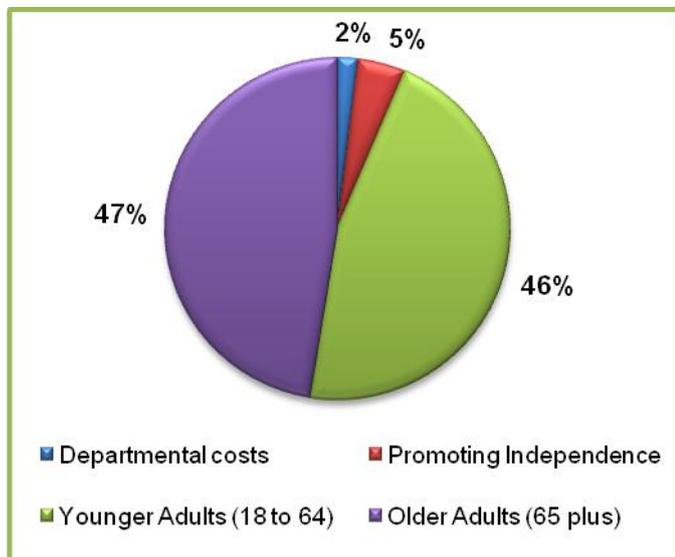
## **Coroner's Services**

We continue to work with the Coroner and her staff to route referrals through safeguarding procedures and to ensure that social care staff within the Council and within the independent sector are appropriately trained about the importance of good standards of care, proper implementation of procedures and of good comprehensive record keeping.

# 10 How much did we spend on adult services?

Adult Social Care		Public Protection services	
Service Area	Net Expenditure	Service Area	Net Expenditure
Departmental costs	£4,082,992	Trading Standards	£1,881,118
Promoting Independence	£9,436,239	Emergency Planning	£270,505
Joint Commissioning, Quality & Business Change	-£13,764,714*	Registrars	£185,476
Younger Adults (18 to 64)	£97,257,050	Coroners	£544,323
Older Adults (65 plus)	£99,953,755	-	-
<b>Total</b>	<b>£196,965,322</b>	<b>Total</b>	<b>£2,881,422</b>

\*This relates to income received from client contributions



Total net expenditure for Adult Services was £196,965,322. This included £112,881,491 from fees, charges and grants.

Total net expenditure for Public Protection was £2,881,422. This included £1,638,765 from fees, charges and grants.

# 11

## Our areas for development from 2012-13 onwards

It is the ambition of ASCH&PP that:

***“We will commission services which embrace personalisation and promote safety and wellbeing and are accessible and affordable”***

The purpose of ASCH&PP is to maximise people’s independence, keep people safe and support the wellbeing of vulnerable adults.

In order to achieve our ambition we have set the following departmental objectives:

- To achieve the annual savings and efficiencies target
- To refine and embed personalisation
- To increase the number of people benefiting from integrated reablement services, avoid unnecessary hospital admissions and delays in hospital discharges
- To develop alternatives to residential care to promote independence and to reduce the number of people in long-term care for older adults (65+)
- To promote the life chances of younger adults (18-64)
- To safeguard adults whose circumstances make them vulnerable and protecting them from avoidable harm
- To deliver good quality affordable day services
- To continue to develop effective intelligence-led enforcement action to tackle rogue traders
- To plan effectively to maximise the safety of the citizens of Nottinghamshire in the event of an emergency
- To deliver good quality registration services with improved income generation
- To support carers and young carers

We monitor our progress against these objectives throughout the year using a number of key actions and indicators.

# 12 Further Information

## Links to Further Information

There are a number of documents published by the Council that provide more detail on our plans, priorities and performance. These are all available at <http://www3.nottinghamshire.gov.uk/welcome/>

- Sustainable Community Strategy
- Joint Strategic Needs Assessment (JSNA) 2010
- Nottinghamshire County Council Strategic Plan 2011-14

## Glossary

Term	Description
Advocacy	Advocacy supports people to have their say and get their views heard. Advocates can speak up for a person if they are unable to speak up for themselves.
Assessment	The process of gathering information for the purpose of determining a person's need and eligibility for services.
Assistive technology	Assistive technology is a range of sensors and alarms that can be used in a service user's home which can detect if things go wrong and alert a support centre. They can help a service user live independently and safely in their own home with the reassurance that help is available if problems occur.
Care Quality Commission (CQC)	CQC is the independent regulator of all health and social care services in England. Its job is to make sure that care provided by hospitals, dentists, ambulances, care homes and services in people's own homes and elsewhere meets government standards of quality and safety.
Direct Payment	A direct payment is where we pay the service user our contribution towards their personal budget. The service user can then arrange the services agreed in their support plan themselves.
Eligibility threshold	The level at which a person's needs are deemed as posing a risk to their independence.
Financial assessment	The process of gathering information relating to a person's income level for the purposes of determining the local authority's level of financial support.
Information Prescriptions	The information prescriptions website provides information on a wide range of conditions. It covers medical issues plus local and national support.

Hate crime	A hate crime is any criminal offence that is motivated by hostility or prejudice based upon the victim's disability; race, colour, ethnic origin, nationality or national origins; religion or belief; sexual orientation; gender or gender identity; 'difference', through their lifestyle or characteristics.
Occupational therapy	Occupational therapy looks for solutions to the practical difficulties a service user is having at home. A range of equipment can be supplied to enable a service user to continue living in their own home. For example: specialised shower seats; chair raisers; walking aids; and toilet equipment. Any equipment provided is free of charge on a long-term loan.
Outcome	The end result, or consequence, of an activity plan or programme.
Outreach Extra Care	Outreach Extra Care is a service that provides support to service users within their own homes around the clock. The service user would have an assistive technology device so they could contact their care provider as and when needed, they would be able to have support that was both planned and also available additionally when their needs change.
Personalisation	Personalisation is a term used to describe a system that enables every person receiving social care and support to have a choice in the way the support they receive is delivered.
Personal Budgets	A personal budget is an amount of money that will meet a service user's long-term social care needs. A personal budget can be offered if a service user's community care assessment shows they are eligible for support.
Physiotherapy	Physiotherapy is the use of physical methods to assist recovery of damaged tissue, especially in muscles and joints. Physiotherapy is concerned with identifying and maximizing quality of life and movement potential within the areas of promotion, prevention, diagnosis, treatment/ intervention and rehabilitation.
Referral	A point at which a contact with the local authority is passed on for further assessment or screening.
Safeguarding	Safeguarding is work undertaken to stop vulnerable adults being abused.
START Reablement	Reablement is about service users regaining skills and confidence to help them live as independently as possible. Reablement support workers from the START (Short Term Assessment and Reablement Team) team provide up to six weeks of intensive support to services users enabling them to do as much as they can for themselves.
Supporting People	The Supporting People Partnership directs housing-related support services in Nottinghamshire.

## Appendix A

The table below outlines the current set of measures that we report on from the Adult Social Care Outcomes Framework:

Ref	Measure Description
1A	Social care related quality of life
1B	The proportion of people who use services who have control over their daily life
1C	Proportion of people using social care who receive self-directed support, and those receiving direct payments
1D	Carer-reported quality of life
1E	Proportion of adults with learning disabilities in paid employment
1F	Proportion of adults in contact with secondary mental health services in paid employment
1G	Proportion of adults with learning disabilities who live in their own home or with their family
1H	Proportion of adults in contact with secondary mental health services living independently, with or without support
2A	Permanent admissions to residential and nursing care homes, per 1,000 population
2B	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services
2C	Delayed transfers of care from hospital, and those which are attributable to adult social care
3A	Overall satisfaction of people who use services with their care and support
3B	Overall satisfaction of carers with social services
3C	The proportion of carers who report that they have been included or consulted in discussion about the person they care for
3D	The proportion of people who use services and carers who find it easy to find information about services
4A	The proportion of people who use services who feel safe
4B	The proportion of people who use services who say that those services have made them feel safe and secure

If you would like more information about any of the services mentioned in this document you can visit:

<http://www.nottinghamshire.gov.uk/caring/adultsocialcare/>

or call the Customer Service Centre on:

08449 80 80 80

If you have any comments or further questions about the information contained in this report please use the contact details below to contact us

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