## report



**COUNTY COUNCIL** meeting 7a iii. 09 December 2010 agenda item number date

# REPORT OF THE CABINET MEMBER FOR ADULT SOCIAL CARE AND HEALTH KEY ISSUES AND ACTIVITIES IN ADULT SOCIAL CARE AND HEALTH

#### 1. Purpose of the Report

1.1 I am pleased to present the key issues and activities as Portfolio Holder for Adult Social Care and Health, since my last report to Council.

#### 2. **Key Issues and activities**

#### A Vision for Adult Social Care: Capable Communities and Active Citizens 2.1

On Tuesday 16 November 2010, the Care Services Minister Paul Burstow launched "A vision for adult social care: Capable communities and active citizens". The Vision sets out how the Government wishes to see services delivered for people; a new direction for adult social care, putting personalised services and outcomes centre stage.

Alongside the Social Care Vision, the Department of Health also launched Transparency in Outcomes: a framework for adult social care - a consultation on a new strategic approach to quality and outcomes in adult social The consultation envisages an enabling framework which places outcomes at the heart of social care, improves quality in services, and empowers citizens to hold their councils to account for the services they provide.

As part of the new vision for adult social care from the coalition government the Right Hon Andrew Lansley CBE MP and Paul Burstow MP set out the Governments vision for a modern system of social care. This vision is to make services more personalised, more preventative and more focussed on delivering the best outcomes for those who use them. This vision is the first step towards the White Paper which is due to be published in early 2011. setting out a long-term solution of the funding and delivery of care and support.

The seven principles outlined in the vision document are:

**Prevention:** empowered people and strong communities will work together to maintain independence. Where the state is needed, it supports communities and helps people to retain and regain independence.

**Personalisation:** individuals not institutions take control of their care. Personal budgets, preferably as direct payments, are provided to all eligible people. Information about care and support is available to all local people, regardless of whether or not they fund their own care.

**Partnership:** care and support delivered in a partnership between individuals, communities, the voluntary and private sectors, the NHS and councils - including wider support services, such as housing.

**Plurality:** the variety of people's needs is matched by diverse service provision, with a broad market of high quality service providers.

**Protection:** there are sensible safeguards against the risk of abuse or neglect. Risk is no longer an excuse to limit people's freedom.

**Productivity:** greater local accountability will drive improvements and innovations to deliver higher productivity and high quality care and support services. A focus on publishing information about agreed quality outcomes will support transparency and accountability.

**People:** we can draw on a workforce who can provide care and support with skills, compassion and imagination, and who are given the freedom and support to do so. We need the whole workforce, including care workers, nurses, occupational therapists, physiotherapists and social workers, alongside carers and the people who use services, to lead the changes set out here.

In conclusion, social care is part of the Government's ambition to reform health and social care, alongside an integrated public health service focused on prevention and an NHS with patients in the driving seat and professionals with discretion to make the decisions that matter to people and service users. Local government and adult social care in particular have a key role to play, working in partnership to determine local public health needs and to integrate the commissioning and delivery of services wherever this makes sense locally.

A full version of both documents can be found on the Department of Health website on the links below:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH 121508

http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH\_121509

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### 2.2 <u>User Experience Survey 2009/2010 – Caring for Others</u>

The User Experience survey was development by the NHS to learn more about whether services received by carers are helping them in their caring role and their life outside of caring and also their perception of services provided to the care for person. The survey collected information about carers' experiences of Adult Social Care and Health services and support.

The survey was posted to 777 carers in November 2009 and submitted to the NHS in March 2010. The survey was sent to carers aged 18+ who had been assessed or reviewed, either separately or jointly with the cared for person, by Adult Social Care and Health during the previous 12 months.

The survey achieved a 45% response rate from 354 returned questionnaires and found that:

## **Key Results**

- **90%** of respondents were satisfied with the support or services they received from Adult Social Care and Health in the last 12 months with 10% of service users expressing dissatisfaction.
- 73% of respondents said they had the right amount of support or services, in terms of hours or days needed. 26% said they needed more hours or days and 1% said they had too many hours or days.
- When asked to rate the quality of your life as a whole, 82% said it was alright or good. 18% said their quality of life was bad.
- When asked how quickly Adult Social Care and Health responded to their queries or questions in the last 12 months 67% said someone always got back to me. 26% said sometimes they got back to me but sometimes I had to contact them again.
- 71% said they found it easy to find information and advice about support, services or benefits. 29% had found it difficult.
- 93% said the information and advice they had received was helpful. 7% had found it unhelpful.

#### 2.3 Care Home Innovative Award 2010

The Care Home Innovation Award is a celebration of excellence and the promotion of innovative practices across all care home providers within The award is open to all care homes regardless of Nottinghamshire. registration category. The 'practice' nominated could cover any areas of service delivery, but the Provider is required to comprehensively evidence the practice and illustrate how it benefits the residents in their care.

The Award is the first of its kind in the county and aims to promote the concept of independent sector providers making best use of their resources to enhance care delivery.

Of the twenty-seven nominations received seven were short-listed. Each of the seven short-listed Providers then received a visit from a Contracts Officer to verity and evidence the practice. Residents were also consulted on how the nominated practice benefits their daily lives in the home. The findings from these visits were reported back to the Awards Panel and four Award winners were chosen. They were:

- Wren Hall for their team approach to promoting residents' nutritional status by enhancing the mealtime experience, this includes people with dementia.
- **Albemarle Hall** training for relatives in dementia care, end of life care and DNR other training sessions are planned.
- NCHA Blenheim Avenue for their Intensive Interaction techniques, used to communicate positively and in a meaningful way with service users who have a severe learning disability.
- **Church Farm** for their comprehensive activities programme specifically designed for people with dementia and their innovative approach to dementia care using 'cutting edge' techniques.

The Award to each of the Provider consists of a certificate and a specified amount of free training.

2.4 <u>Summary of main themes from the national Adults and Children's Conference</u>  $3^{rd} - 5^{th}$  November 2010 - Shaping the Present – Building the Future

The conference was attended by Councillors Rostance, Winterton and Zadrozny. David Pearson and Steve Edwards also attended.

The conference was addressed by leading politicians:

- Michael Groves
- Andrew Lansley
- Paul Burstow
- Shadow Secretary's of State.

There were a very large number of topics covered throughout each day with some major national speakers.

Some of the main themes were:

The NHS White Paper - The key message is a commitment to take forward the elements of the White Paper and the key role of local Government through

the Health and Wellbeing Board, needs assessment, joint commissioning and the transfer of Public Health.

The Secretary of State announced the seeking of some "trailblazers" for the setting up of health and wellbeing boards.

The Funding of Adult Social Care - Discussions about whether the £2 billion for adult social care is really going to be available for adult social care; whether it reflects the true cost of the pressures. Sir Andrew Dilnot (Chair of the Commission on funding of adult social care) led a session on the work of the Commission.

The role of the "Big Society" - Andrew Lansley emphasised fairness, social solidarity and social responsibility.

In addition to these main themes there were workshops on important topics:

- Safeguarding adults and children
- Putting People First
- Sector led quality and performance improvement
- National Dementia Strategy
- National Autism Strategy

As part of the workshop on autism there was an excellent presentation by the Nottinghamshire Aspergers team – Chris Mitchell and a service user Simon Bullen.

## 2.5 Visits and Meetings

## **Councillor Rostance:**

10 November – Key Note Speaker at the NAVO AGM.

26 November – East Midlands Adult Social Care Lead Member Network.

19 November – Visit to Church Farm.

## Councillor Wallace:

30 November – Over 50's Forum.

18 November – Certificate Presentation to Cooks from a range of Residential and Day Care establishments.

# **COUNCILLOR KEVIN ROSTANCE**Cabinet Member for Adult Social Care and Health

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