



Agenda item:

[No.]


Overview & Scrutiny

On 16th February 2009

Report Title.

Annual Review of Performance for Adult Social Care 2007/08

Report authorised by Director of Adult, Culture and Community Services

Signed: 
Dated: 16. 1. 2009

Contact Officers :

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Wards(s) affected: All

Report for: Non-Key Decisions

1. Purpose of the report

- 1.1 To inform Cabinet of the outcome of the Commission of Social Care Inspection's (CSCI) annual Review of Social Care for 2007/08.
- 1.2 To highlight some of the key achievements and areas for development for the Directorate.

2. Introduction by Cabinet Member

- 2.1 2007/08 results show that Haringey has continued improving services with a rise in our performance rating. CSCI confirm this is a good indication of the substantial work and improvements made. Recognition of promising capacity reflects that the council is well placed in 2008/09 to build on the significant improvements already made in 2007/08 and CSCI has noted the positive direction of travel in various areas.

3. State link(s) with Council Plan Priorities and actions and /or other Strategies:

- 3.1 The report contributes to the achievement of:
- *Priority 3 – Encouraging lifetime well being at home, work, play and learning*
 - *Priority 4 – Promoting independent living while supporting adults and children when needed.*
 - *Priority 5 – Delivering excellent customer focussed cost effective services*
- 3.2 The Well-being Strategic Framework was well established by the end of 2007/08. Haringey Council worked closely with Haringey Teaching Primary Care Trust (HTPCT) to develop a Well-being Strategic Framework (WBSF) based on the seven *Our Health, Our Care, Our Say* (OHOCOS) outcomes. It recognises that promoting well-being requires creative and integrated solutions beyond the traditional health and social care agenda which focuses on people as service users rather than people living independent lives. Resources have been targeted towards delivering an innovative programme from our universal services such as libraries and leisure centres which will improve well-being and help us make best use of our resources. There is a key focus on prevention, as well as re-ablement and diversion from traditional models of care, for example residential care.
- 3.3 Our safeguarding strategy is embedded within each client group. Safeguarding adults continues to be a high priority for the service and we have invested in additional resources to create a new role of safeguarding officer.
- 3.4 The Adult Social Care judgement and star rating is a component part of the Comprehensive Performance Assessment and is fed into the matrix of information that informs the final judgement for the council's overall performance rating published by the Audit Commission.
- 3.5 In addition to the specific service comments, CSCI also identify Council-wide improvements and achievements, with an increased focus on performance management and people development.

4. Recommendations

- 4.1 That Cabinet notes the content and outcome of CSCI's annual review for 2007/08 and proposed action to respond to the identified areas for development.

5. Reason for recommendation(s)

- 5.1 Not applicable

6. Other options considered

- 6.1 Not applicable

7. Summary

- 7.1 CSCI hold an annual review monitoring meeting with all Councils with Social Care responsibilities. Following the meeting, CSCI inform the Director of Adult Social Care Services outlining progress against performance targets in the year, drawing out key strengths, and areas for development. It is a requirement that the CSCI assessment and any action or improvement plan in response is placed before the Council's relevant Executive Committee in open session. The CSCI assessment is based on a set of national standards and criteria. The CSCI judgement is provided to councils in the following November of the year being judged and councils have the opportunity to challenge the results before they are made public in the form of a star rating at the end of November.
- 7.2 The annual review monitoring meeting for Haringey took place on 26 August 2008. The purpose of the meeting was to review progress on performance across a range of targets for Adult Social Care Services.
- 7.3 CSCI sent the Council their summary report for 2007/08 annual performance assessment of social care services for Adult Services on 27 October 2008 (see Appendix 1).
- 7.4 This was based on a Performance Assessment Notebook (PAN). The purpose of the PAN is to provide the council with an assessment from CSCI which outlines strengths, achievements, and areas for development.
- 7.5 A Performance Improvement Plan (PIP) has been drawn up to ensure that

identified areas for development in the PAN and the key areas for improvement, in CSCI's summary letter, are addressed (see Appendix 2).

7.6 The judgement reached by CSCI draws on evidence from a variety of sources, including:

- The published PAF performance indicators and other statistical data up to 31st March 2008, plus data supporting planned targets for 2008/09;
- Evidence agreed in the course of four routine business meetings;
- Service user visits, for example the Clarendon Centre;
- Monitoring information from the Self Assessment Survey completed in May 2008.

As a result of this judgement the CSCI award star ratings, from zero stars to a maximum of three stars.

7.7 In 2006/07, CSCI introduced a new outcomes framework related to delivering the seven outcomes as defined in the DH White Paper "Our Care, Our Health, Our Say". There are two additional domains, leadership and the commissioning and use of resources, which combined, measure the capacity to improve.

7.8 In 2006/07 we were rated as a One-Star authority with:
 (a) Delivering Outcomes judgement was determined as *adequate*, and
 (b) *Promising* capacity to improve.

7.9 In 2007/08, CSCI our rating improved to Two Stars: the overall judgements are:
 (a) Delivering Outcomes judgement has been determined as *good*, with
 (b) Capacity to improve judgement as *Promising*.

7.10 Performance against the seven outcomes for adult social care as set out in the White Paper "Our Care, Our Health, Our Say",

Areas for Judgement

Delivering Outcomes	Good
Improved health and emotional well-being	Good
Improved quality of life	Good
Making a positive contribution	Good
Increased choice and control	Good
Freedom from discrimination and harassment	Good
Economic well-being	Good
Maintaining personal dignity and respect	Good
Capacity to Improve (Combined Judgement)	Promising
Leadership	Promising
Commissioning and use of resources	Promising

7.11 Significant improvements have been made in 20 of 23 PAF indicators (16 of which are in top banding) and Key achievements in 2007/08 include :

- The stabilisation of the financial position and the robustness of the budget.
- The workforce is stable, with decreasing and relatively low levels of vacancies, turnover and sickness absence.
- The number of people funded by the Council receiving non-residential intermediate care to prevent hospital admission exceeded our planned target of 425 with an end of year outturn of 484.
- Performance on reviewing care packages improved significantly from 63% of clients receiving a review in 2006/07 to 80.26% of clients being reviewed in 2007/08 This is top performance banding.
- The percentage of items of equipment and adaptations delivered within seven working days rose from 88.4% in 2006/07 to 97.8% in 2007/08 and keeps us in top performance banding.
- The outturn for the number of clients receiving intensive home care, enabling them to remain in the community remained in top performance banding.
- The number of clients with Physical Disabilities supported to remain in the community through community based services increased and put us in top performance banding.
- There was an increase in the number of people with mental health issues who we helped to live at home and we remained in top performance banding.
- The number of Older People supported to live in the community achieved top performance banding with 2156 people supported to live in the community on 2007/08 against 1965 on 2006/07.
- Improvement in direct payments from 191 clients in 2006/07 to 214 in 2007/08.
- The number of Older People admitted into residential care was managed and remained low with a band 5 outturn of 65.08. This is equal to 137 clients.
- The percentage of people receiving a statement of their needs exceeded our plan and rose to 98%.
- We completed over 96% of contact assessments for Older People within 48 hours from initial contact, and remained in top performance banding.
- We completed over 95% of assessments of Older Peoples clients within 28 days and placing Haringey in top performance banding.
- 92.9% of care packages were in place within 28 days of the completion of assessment. This remains in the top performance banding.
- In the learning disabilities service, we supported 61 people into paid employment and 72 people into voluntary work.

We also;

- Supported 1,210 people using day care services.
- Looked after 1,447 people in residential or nursing homes (including respite and rehabilitation) throughout the year with 830 in placement at year end.

- Supported 697 new people using our safe and sound community alarm service.
- Delivered over 11,951 hours of home care per week.
- Delivered over 300 meals on wheels every day.

CSCI noted that :

- The balance of care has shifted towards community support, and more people were helped to live at home;
- Increased telecare and telehealth support helped to reduce emergency calls;
- Operational safeguarding arrangements are consolidated and reviewed;
- The LAA is used constructively;
- The relationship between the Council and HTPCT is reciprocal and increasingly effective;
- Joint commissioning and the Joint Strategic Needs Assessment are well developed.

- 7.12 The Directorate is on course to further improve performance with a focus on:
- (a) Ensuring the future availability of extra-care housing capacity;
 - (b) Continuing to develop the prevention framework;
 - (c) Continuing existing employment related developments for everyone using adult social care services;
 - (d) Ensuring a statements of need are sent to all users in receipt of a care package;
 - (e) Progressing project plans for self-directed care;
 - (f) Further reducing the level of delayed transfers of care;
 - (g) Increase the number of breaks, especially to those caring for people with learning disabilities, and other support to carers.
- 7.13 Detailed actions to address identified areas for development are embedded in the Business plans for Adults, Culture and Community Services (ACCS) and key activities are monitored through the Performance Improvement Plan (Appendix 2).
- 7.14 The council has an elected member (Councillor Catherine Harris) as our Dignity and Carers Champion, with a focus on safeguarding. Cllr Harris has attended schedule 26 visits (monthly quality assurance spot checks on residential units) with managers from ACCS.
- 7.15 We have planned a peer review with neighbouring local authorities (Camden and Hackney) to inspect our care planning and safeguarding practice.
- 7.16 The following are examples of performance activity against our local indicators and the national indicator set that are already contributing to sustained improvement and positive progress to October 2008:

- NI 135 – Services and Information to carers year to date figure of 22% against a target of 14%
- NI 130 – Self Directed support year to date figure of 226 against a target of 190 which equates to over 300 people receiving self directed support.
- NI 132 – Timeliness of social care assessments year to date figure of 92.8% against a target of 80%.
- Admissions to permanent residential care for Adults and those 65+ (LAA target) are low and projected to meet our target. Only 7 adults and 70 older people admitted permanently to residential care.
- Reviews are on track to hit our target of 82%.
- Deliveries of equipment are on track to hit the target of 98%.
- 100% of Adults Services stage 1 complaints have been responded to within timescale and members' enquiries response times are exceeding council targets with a year to date figure of 98%.

7.17 These performance indicators are robustly monitored and scrutinised through monthly Performance call over with Service Heads and Team Managers.

7.18 To validate the performance indicators, Managers undertake 5 case file audits per month. The audits are robust with a total of 70 questions divided into the following 8 sections;

- Key Information,
- Community Care/Assessments,
- Finance,
- Legal,
- Case Recording,
- Correspondence/Referrals,
- Information Given Out to Service User/Carer,
- Administration.

A total of 94 audits were completed in 2007/08, fully meeting the standards in the majority of applicable questions. Particular areas that exceeded standard, are:

- Latest care plans being on file;
- Up to date case notes on the client;
- Risk Assessments on file;
- Carer details recorded on the file;
- Completion of Fair Access to Care Services.

7.19 A quality assurance outcome survey set up in February 2008 for Older Service Users with a variety of services ranging from residential care and supported housing to homecare and meals on wheels. Analysis of the responses provided information as follows;

- 96% of service users are satisfied with the overall service.

- 73% agree that their overall health & wellbeing has improved as a direct result of the service they received, with 20% neither agreeing nor disagreeing that their health & wellbeing improved.
- 98% of service users felt they were treated with dignity and respect.
- 89% and 87% respectively felt the Councils with Social Services Responsibilities and community health services they received improved their quality of life.
- 67% of service users felt they were given enough information and advice to enable them to have choice and control about the services they received, with a further 20% falling into the neither agreeing nor disagreeing category.
- 79% of service users felt they were involved as much as they wanted to be in decisions about their care packages.
- 95% of service users feel they were treated fairly and not discriminated against on grounds of their race, religion or culture.

7.20 In September 2008 we commenced quality assessment direct observation visits assessing episodes of care delivery in the home for those in receipt of home care services. We have undertaken over 50 to date. These assessments generate key management information identifying training needs, monitoring of equalities, and assess user satisfaction at the point of delivery enabling us to make informed decisions to improve services.

7.21 CSCI's recognition of "*dramatically improved Performance Indicators*" and promising capacity to improve reflects that the council is well placed in 2008/09 to build on the significant improvements made in 2007/08.

8. Chief Financial Officer Comments

8.1 There are no specific financial implications included within this report. The financial implications of the work undertaken by the service are monitored through the regular financial and performance management framework of the council.

9. Head of Legal Services Comments

9.1 There are no legal implications to this report.

9. Head of Procurement Comments – [Required for Procurement Committee]

9.1 Not applicable

10. Equalities and Community Cohesion Comments

10.1 CSCI is very positive about our performance on Access to Services and equalities issues. They acknowledge that services have improved for users, carers and staff, and continue to be fair and reflective of the diverse communities. There is recognition of commitment to promoting equality through specific projects, which run in line with the Haringey's Community Strategy. The CSCI report also acknowledges continual development and innovative ways of improving accessibility.

11. Consultation

11.1 Not applicable

12. Service Financial Comments

12.1 Not applicable

13. Use of appendices /Tables and photographs

Appendix 1 –CSCI Summary Report for Haringey's 2007/08 Annual Performance
Appendix 2 –ACCS Performance Improvement Plan for Areas for Development as identified in the Performance Assessment Notebook

14. Local Government (Access to Information) Act 1985

14.1 Performance Assessment Notebook