



Haringey Council

Agenda item:

[No.]

Overview & Scrutiny

On 11 January 2010

Report Title

**Care Quality Commission's Annual Performance Assessment of Adult Social Care 2008/09**

Report Title.

**Care Quality Commission's Annual Performance Assessment of Adult Social Care 2008/09**

Report authorised by **Director of Adult, Culture and Community Services**

Signed:

Dated:

16.12.2009

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Wards(s) affected: **All**

Report for: **Non-Key Decisions**

**1. Purpose of the report**

- 1.1 To inform Overview & Scrutiny of the outcome of Care Quality Commission's (CQC) Annual Review of Social Care for 2008/09.
- 1.2 To highlight some of the key achievements and areas for development for the Directorate.

**2. Introduction by Cabinet Member**

- 2.1 The Annual Performance Assessment by the Care Quality Commission has judged

that overall, our Adult Social Care Services are **Performing Well**. The next highest score is *Performing Excellently*. This is a very good result for Adult Services.

- 2.2 Significant improvements have been made in all of the Performance Indicators, and Haringey is among the top ten for most of the indicators. Among the key achievements are: Haringey is ranked first across London for self-directed support for all clients; and, we are third best authority in England and Wales for carrying out assessments of older people's needs within the national target of 28 days.
- 2.3 Recognition of **Promising Capacity to Improve** following the recent Independence, Well-being and Choice service inspection reflects that the council is well placed in 2009/10 to build on the significant improvements already made.
- 2.4 CQC (January 2009) determined that "...keeping people safe was a priority across the council. The effectiveness of the Adult Safeguarding Board had improved and it had begun to provide improved high-level leadership that was needed to drive forward the improvement of safeguarding work. Strategic arrangements for safeguarding, through the Adult Safeguarding Board, had been strengthened and this had contributed to raising the profile of adult safeguarding in Haringey."

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

- 3.2 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**
- 3.3 The Well-being Strategic Framework is well established, and encompasses the seven *Our Health, Our Care, Our Say* (OHOCOS) outcomes. It recognises that promoting well-being and prevention 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.
- 3.4 The Haringey Strategic Partnership (HSP) is committed to safeguarding vulnerable adults. It has a zero tolerance policy to abuse, neglect or harm. We have a high level commitment to safeguarding both children and vulnerable adults. The HSP

has established a Safeguarding Adults Board (SAB), a multi-agency partnership to provide strong leadership on safeguarding adults locally. The Board ensures that all agencies in the partnership work together to determine policy and co-ordinate services to safeguard and promote the welfare of adults in Haringey. The Board provides the governance as it monitors the effectiveness of these services and (importantly) facilitates joint training across the agencies.

3.5 Our Multi-Agency Safeguarding Adults Policy & Procedure is a unified and consistent approach to safeguarding adults, and is embedded within each client group. Safeguarding adults continues to be a high priority for the service and we have invested in additional resources. Safeguarding is included in our key plans and strategies and performance is scrutinised at monthly performance callovers, as well as introducing a new local performance indicator to ensure cases are dealt with promptly.

3.6 The service has produced an Action Plan for Safeguarding of Vulnerable Adults and Statement of Priorities for 2009-10, that includes the following **outcomes** and Haringey objectives:

- **Preventing and minimising incidence** – To promote awareness of the need to safeguard vulnerable adults, through the SAB, so that everyone, including children, can recognise abuse, know how to report it and access services to protect and to prevent further abuse;
- **Taking action in response to threats of incidents of harm** – To assure quality to secure good practice;
- **Supporting fairness and justice so that some people get extra support to challenge, change harmful or abusive situations and access safe services** – To ensure that any action taken by organisations in the SAB to safeguard an adult meets human rights standards and is proportionate to the perceived level of risk and seriousness.

3.7 The Adult Social Care judgement, which includes safeguarding adults, is a key component part of the Comprehensive Area 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.

#### 4 Recommendations

4.2 That Overview & Scrutiny notes the content and outcome of CQC's annual review for 2008/09 and proposed action to respond to the identified areas for development.

#### 5 Reason for recommendation(s)

5.2 Not applicable

**6 Other options considered**

6.1 Not applicable

## 7. Summary

- 7.1 The Commission for Social Care Inspection (CSCI) joined the Health Care Commission and the Mental Health Act Commission on 1 April 2009 to become the Care Quality Commission (CQC).
- 7.2 CQC hold an annual review monitoring meeting with all Councils with Social Care responsibilities. Following the meeting, CQC inform the Director of Adult Social Care Services outlining progress against performance targets in the year, drawing our key strengths and areas for improvement. It is a requirement that the CQC assessment and any action or improvement plan in response, is placed before the Council's relevant Executive Committee in open session. The CQC assessment is based on a set of national standards and criteria. The CQC 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 grade awarded for delivery of outcomes, early December.
- 7.3 CQC use a variety of sources of information to carry out the annual performance assessment. These include an annual Self Assessment Survey, submitted in May 2009, routine business meetings, the annual review meeting and findings of any service inspections. A key contributor to this year's performance assessment was the findings of the 'Independence, Well-being and Choice' service inspection which took place in early 2009. The findings of this inspection were presented to Cabinet on 21 July, 2009.
- 7.4 The annual review monitoring meeting for Haringey took place on 13 August 2009. The purpose of the meeting was to review progress on performance across a range of targets and delivering outcomes for Adult Social Care Services.
- 7.5 CQC sent the Council their summary report for 2008/09 annual performance assessment of social care for Adult Services on 12 October 2009 (see Appendix 1).
- 7.6 This was based on a Performance Assessment Notebook (PAN). The purpose of the PAN is to provide the council with an assessment from CQC which outlines strengths, achievements, and areas for development.
- 7.7 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 CQC's summary letter, are addressed. The PIP is available [here](#).
- 7.8 The judgement reached by CQC draws on evidence from a variety of sources, including:
- The published Performance Indicators and other statistical data up to 31<sup>st</sup> March 2009, plus data supporting planned targets for 2009/10;

- Evidence agreed in the course of routine business meetings;
- Service user visits and interviews, during the service inspection; and
- Monitoring information from the Self Assessment Survey completed in May 2009.

As a result of this judgement, CQC award an overall grade for delivering outcomes and a separate grade for each of the seven outcomes – *Grade 1: performing poorly; Grade 2: performing adequately; Grade 3: performing well; and, Grade 4: performing excellently*. The commentary of the two domains of leadership, use of resources and commissioning will be directly transferred to the Comprehensive Area Assessment.

7.9 The overall judgements in our 2007/08 performance rating were:

- (a) Delivering outcomes judgement determined as **Good**, with  
 (b) Capacity to improve as **Promising**.

7.10 The overall grade awarded for Delivery of Outcomes in 2008/09:

- (a) Adult Social Care Services is **Performing Well**, consistently delivering above the minimum requirements for people, is cost effective and makes contributions to wider outcomes for the community. The next (and upper level) is *Performing Excellently*.

The Service Inspection (2009) found:

- (b) The Council's capacity to improve as **Promising**, judged using the 'Leadership' and 'Commissioning and Use of Resources' domains.

7.11 Performance against the seven outcomes for adult social care as set out in the White Paper 'Our Health, Our Care, Our Say' is:

Overall Grade Awarded for Delivery of Outcomes	Performing Well
<b>Delivering Outcomes</b>	<b>Grade Awarded</b>
Improved health and well-being	Well
Improved quality of life	Well
Making a positive contribution	Well
Increased choice and control	Adequate
Freedom from discrimination or harassment	Well
Economic well-being	Well
Maintaining personal dignity and respect	Adequate

7.12 Significant improvements have been made in all of the National and Performance Indicators and Haringey is among the top ten for most of the indicators when compared to other London Boroughs, and to those with the same demographics. Key achievements in 2008/09 include:

- Stable workforce, with decreasing and relatively low levels of vacancies, turnover and sickness absence;

- Haringey is ranked first across London for self-directed support for all clients, and is doing better across England and Wales with a ranking of 2;
- Performance on reviewing care packages improved from 80% of clients receiving a review in 2007/08 to 81% of clients being reviewed in 2008/09;
- The percentage of items of equipment and adaptations delivered within seven working days rose from 97.8% in 2007/08 to 98% in 2008/09;
- The outturn for the number of clients receiving intensive home care, enabling them to remain in the community has improved;
- The number of clients with Physical Disabilities supported to remain in the community through community based services increased;
- There was an increase in the number of people with mental health issues who we helped to live at home;
- There was an increase of 30% in referrals from 2007/08 (471) to end of 2008/09 (626) for older people with mental health, which indicates early intervention work and improved access to assessment for people with dementia at earlier stages in their illness – a key priority from the National Dementia Strategy;
- The number of Older People supported to live in the community has increased with 2,928 people supported to live in the community in 2008/09, against 2,156 in 2007/08;
- Continued improvement in direct payments from 214 in 2007/08 to 300 in 2008/09;
- The number of Older People admitted into residential care was managed and remained low, as we are supporting more people to live in the community. Please note that a low number equates to good performance;
- The percentage of people receiving a statement of their needs exceeded our plan and rose to 99.2%;
- We completed over 96% of assessments of Older People within 28 days. Again Haringey has shown improvement across all groups and is third across England and Wales;
- 95% of care packages were in place within 28 days of the completion of assessment. This exceeds our target by 2%; and
- In the Learning Difficulties service, we supported 38 people into paid employment and voluntary work. This is a key local and national performance and policy objective.

Also:

- 1,007 people received day opportunity services;
- There are four drop-in centres for older people in Haringey, which are fully part of the day opportunity spectrum, offer prevention and well-being services for vulnerable older people. Over 600 people use the preventative drop-in service for older people, with an average of 1,600 individual contacts made each month. This is an 'open access', 'non-charged' for service to provide monitoring, support and advice to older people in Haringey;
- We looked after 1,074 people in permanent placements in residential or nursing homes throughout the year, and continued reduction in number of new

admissions;

- The Community Alarm Service provides a service to 4,700 frail and vulnerable service users, 24 hours a day, including people at risk of racist and homophobic attack or domestic violence. The service receives some 250,000 calls a year. A key part of our prevention is 'telecare'. We installed 213 additional telecare sensors in 2008/09, making a total of 631;
- Delivered 11,611 hours of home care per week; and
- Delivered meals on wheels every day to 455 clients in 2008/09.

CQC noted that:

- The Council provided strong political leadership and contributed to good partnership arrangements, promoting the modernisation of adult social care;
- The Service Inspection noted these strengths and the clear vision for older people and self-directed care services and judged the council's capacity for improvement to be **Promising**;
- The local market for regulated service was of generally good quality, while in-house services improved;
- A wide range of joint interventions promoting re-ablement and healthy living outcomes;
- The Service Inspection found a good range of traditional services and commendable developments in independence-oriented services;
- More carers were supported both through short breaks and other service developments. Carers were also involved in service development and evaluation;
- The Service Inspection identified good examples of service user involvement in the design and planning of services;
- The Service Inspection also noted improvements in care planning such as timeliness and reviewing, and the appropriateness of programme and project planning for self-directed care; and
- A wide range of employment-related initiatives including developments in social firms.

- 7.13 The Directorate is on course to further enhance its performance, with a focus on:
- (a) Further reducing the level of delayed transfers of care from hospital (acute and non-acute);
  - (b) The needs of older people with mental health problems and their carers are fully met;
  - (c) Further reducing waiting times for major adaptations;
  - (d) Moving to a system which offers greater choice and control through self-directed support choices (personalised care); and
  - (e) Implementing the Service Inspection action plan (available [here](#)).

- 7.14 Detailed actions to address identified areas for development are embedded in the Business Plans for Adult, Culture and Community Services and key activities are monitored through the [PIP](#).



- 7.15 Haringey and Sutton are leading on developing a Pan-London Risk Assessment Tool. This will offer a consistent quality tool and a strategic approach to complement personalisation and safeguarding.
- 7.16 The following are examples of performance activity against our local indicators and national indicator set that are already contributing to sustained improvement and positive progress to October 2009:
- The number of older people permanently admitted into residential and nursing care stands at 65 and on course to meet performance target of 115 at year-end;
  - Six adults have been permanently admitted into residential and nursing care and on course to meet end-year target of 20;
  - We are exceeding our target of 11.2% with 14.3% carers receiving services and/or information and advice and expected to meet LAA target. Haringey has made great strides in assessments of need for carers and has moved from 124<sup>th</sup> place in 2007/08 to 68<sup>th</sup> place in England and Wales, 12<sup>th</sup> across all London and 4<sup>th</sup> across comparator boroughs;
  - Current performance for service provision within 28 days is 90%, a significant improvement and on course to meet this year's target of 93%;
  - Continued good performance of admissions to permanent residential care, for both younger and older adults;
  - Reviews are stable and performance continues to increase monthly and on course to meet the target of 82% in 2009/10;
  - Continued good performance in delivery of equipment – performance as at half-year 2009/10 is 98% and on course to meet target of 98% for year;
  - Stage 1 complaints continue to exceed our performance target by 3%, with 98% being dealt within timescale; and
  - Osborne Grove Nursing Home won the National WOW! Award (the largest National Awards for Customer Service in the world) for the best healthcare provider. The Haven Day Centre and the Alexandra Road Crisis Unit were also finalists in the National Wow! awards.
- 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.
- 7.19 Analysis of Homecare User Survey in 2008/09, determined that 83.3% of clients said they were satisfied with the help from Adult Social Care Services that they received in their homes. When asked how they felt about the way their care workers treated them, 55.6% were happy with the way they were treated by their care worker, 44.1% felt care workers were usually or sometimes happy and 0.3% felt their care workers were never happy.
- 7.20 In-house Home Care Services established a robust system of quality assurance in

September 2008, which is in line with the developing agenda of *proving* outcomes for clients. This includes unannounced checks based on skills for care criteria, which generates management information to inform further improvements and positive outcomes for clients. In addition, we undertake monthly *cold-calling* to 20% of current service users in order to determine general satisfaction levels.

- 7.21 CQC's recognition that Adult Social Care Services is **Performing Well**, consistently delivering above the minimum requirements for people, is cost effective and makes contributions to wider outcomes for the community, and the Service Inspection's verification of capacity to improve as **Promising**, reflects that the council is well placed in 2009/10 to build on the significant improvements made in 2008/09.

## 8. Chief Financial Officer Comments

- 8.1 There are no specific financial implications included in this report. The financial implications of the work undertaken by the service are monitored via the monthly budget management process and are reviewed annually as part of the Council's PBPR and budget setting process.

## 9. Head of Legal Services Comments

- 9.1 There are no legal implications to this report.

## 10. Head of Procurement Comments

- 10.1 Not applicable

## 11. Equalities and Community Cohesion Comments

- 11.1 CQC is positive about our performance on Access to Services and equalities issues, and reflective of the diverse communities. Compliance with ethnic monitoring of people assessed or received services improved further. Equality Impact Assessments relating to safeguarding, carers support and self-directed care contributed to service improvement.
- 11.2 in 2009/10, Adult Social Care will ensure that all care planning will be holistic and include cultural and religious issues

**12. Consultation**

12.1 Not applicable

**13. Service Financial Comments**

13.1 Not applicable

**14. Use of appendices /Tables and photographs**

Appendix 1 – CQC Annual Performance Assessment of Adult Social Care for London Borough of Haringey 2008/09.

**15. Local Government (Access to Information) Act 1985**

15.1 Performance Assessment Notebook



Care Quality Commission  
1<sup>st</sup> Floor  
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103-105 Bunhill Row  
London  
EC1Y 8TG  
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N22 7SG

12<sup>th</sup> October 2009

Dear Phung

## **Annual Performance Assessment of Adult Social Care for London Borough of Haringey 2008/9**

### **Introduction**

The annual performance assessment report outlines the findings of the 2009 annual performance assessment (APA) process for your council. Thank you for the information you provided to support this process, and for the time made available by yourself and your colleagues to discuss relevant issues.

With this letter is the final copy of the Annual Performance Assessment (APA) report. Also attached are:

- The Performance Assessment Notebook (PAN), which you have already had an opportunity to comment on for factual accuracy following the Annual Review Meeting and
- The Quality Assurance & Moderation summary, which provides a record of the process of consideration by CQC from which the APA report is derived.

The grades outlined in the APA report are an overall grade for delivering outcomes and a separate grade for each of seven outcomes. The commentary on the two domains of leadership, use of resources and commissioning will be directly transferred to the Comprehensive Area Assessment from the APA report.

The grades we use are:

Grade	Descriptor
<p><b>Grade 4: (Performing excellently)</b>  <b>People who use services find that services deliver well above minimum requirements</b></p>	<p>A service that overall delivers well above minimum requirements for people, is highly cost-effective and fully contributes to the achievement of wider outcomes for the community.</p>
<p><b>Grade 3: (Performing well)</b>  <b>People who use services find that services consistently deliver above minimum requirements</b></p>	<p>A service that consistently delivers above minimum requirements for people is cost-effective and makes contributions to wider outcomes for the community.</p>
<p><b>Grade 2: (Performing adequately)</b>  <b>People who use services find that services deliver only minimum requirements</b></p>	<p>A service that delivers only minimum requirements for people, but is not consistently cost-effective nor contributes significantly to wider outcomes for the community.</p>
<p><b>Grade 1: (Performing poorly)</b>  <b>People who use services find that services do not deliver minimum (performing adequately) requirements</b></p>	<p>A service that does not deliver minimum requirements for people, is not cost-effective and makes little or no contribution to wider outcomes for the community.</p>

The DASS Director of Adult Social Services is expected to take the report to an open meeting of the relevant executive committee of the council by 31<sup>st</sup> January 2010 and to inform us of the date this will take place. The council should make the report available to members of the public at the same time and they must copy this grading letter and report to the council's appointed auditor.

## ADULT SOCIAL CARE PERFORMANCE JUDGMENTS FOR 2008/09

<b>Overall Grade Awarded for Delivery of Outcomes</b>	<b>Performing Well</b>
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<b>Delivering Outcomes</b>	<b>Grade Awarded</b>
Improved health and well-being	Well
Improved quality of life	Well
Making a positive contribution	Well
Increased choice and control	Adequate
Freedom from discrimination or harassment	Well
Economic well-being	Well
Maintaining personal dignity and respect	Adequate

The attached APA report sets out progress about areas of good performance, areas of improvement over the last year, areas which are priorities for improvement and where appropriate, identifies any follow up action CQC will take.

Yours sincerely

Colin Hough  
Regional Director  
Care Quality Commission

## Annual Performance Assessment Report 2008/2009

## Adult Social Care Services



**Council Name:** Haringey

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

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

**Poorly performing** – not delivering the minimum requirements for people

**Performing adequately** – only delivering the minimum requirements for people

**Performing well** – consistently delivering above the minimum requirements for people

**Performing excellently**- overall delivering well above the minimum requirements for people

We also make a written assessment about

**Leadership** and

**Commissioning and use of resources**

Information on these additional areas can be found in the outcomes framework

To see the outcomes framework please go to our web site: [Outcomes framework](#)

You will also find an explanation of terms used in the report in the glossary on the web site.

### Delivering Outcomes Assessment

**Overall** Haringey council is performing:

**Well**

Outcome 1:

[Improved health and well-being](#)

The council is performing:

**Well**

Outcome 2:

[Improved quality of life](#)

The council is performing:

**Well**

Outcome 3: <u>Making a positive contribution</u>	The council is performing:	<b>Well</b>
Outcome 4: <u>Increased choice and control</u>	The council is performing:	<b>Adequately</b>
Outcome 5: <u>Freedom from discrimination and harassment</u>	The council is performing:	<b>Well</b>
Outcome 6: <u>Economic well-being</u>	The council is performing:	<b>Well</b>
Outcome 7: <u>Maintaining personal dignity and respect</u>	The council is performing:	<b>Adequately</b>

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

## **Assessment of Leadership and Commissioning and use of resources**

### **Leadership**

#### **What the council does well:**

- The Council provided strong political leadership and contributed to good partnership arrangements promoting the modernisation of adult social care.
- The Service Inspection noted these strengths and the clear vision for older people's and self-directed care services and judged the Council's capacity for improvement to be Promising.
- The workforce was relatively stable, and the Service Inspection found that staff were generally aware of key issues and satisfied with the support they received.
- The model of adult care services was steadily modernising towards prevention, re-ablement and self-directed care.

#### **What the council needs to improve:**

- Give political, corporate and partnership priority to full achievement of the extensive Service Inspection action plan.

### **Commissioning and use of resources**

#### **What the council does well:**

- The Service Inspection found the quality of in-house services for older people to be good and wider market management to be sound. This contributed to its judgement that the Council's capacity to improve was Promising.
- Services were being re-commissioned with an emphasis on preventive and open access interventions that supported the continuing shift in the balance of care. The Joint Strategic Needs Assessment assisted this trend.



- The local market for regulated service was of generally good quality, while in-house services improved during 2008/09.
- The procurement of services was increasingly restricted to those rated Good or Excellent by CQC regulation, with positive effects on the quality of out of borough placements and reductions in their use.

**What the council needs to improve:**

- None

## **Summary of Performance**

Brief overview of performance and progress

Although the Service Inspection found clear areas for improvement in normal services, and in the achievement of individual outcomes, relating to personalisation and especially to safeguarding, it nonetheless judged the Council's capacity to improve to be Promising. This has been reinforced by its prompt implementation of key areas of the resulting Service Inspection action plan, and its management of some significant related challenges. Other indications of good leadership in 2008/09 included the continuing shift in the balance of care towards community support and prevention, the associated consolidation of a modernised model of social care and health service by the Haringey whole system.

Strategic commissioning, market management and procurement and contract monitoring contributed to the steady modernisation of services and were endorsed within the Service Inspection, which judged the Council's capacity to improve to be Promising. Although the Service Inspection report criticised some aspects of commissioning plans for older people's services, these had been fully updated by the time of the 2009 Annual Review Meeting. CQC regulation noted improvements to in-house services, while the Council took effective action to restrict the use of regulated services other than those rated Good or Excellent and to improve individual outcomes for people placed outside the Borough.

## **Outcome 1: Improved health and well-being**

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The council is performing: **Well**

The Council and its partners continued to put in place a good range of joint services to promote re-ablement and healthy living, such as “Get up and Walk” and the new Haynes Centre. Progress included modernisation of mental health services, although the Service Inspection identified gaps in such services for older people. However the main area for improvement related to delayed transfers of care which remained at a high level within London, the rate of reduction having been limited in 2008/09 compared to the previous year.

### **What the council does well:**

- A wide range of joint interventions promoted re-ablement and healthy living outcomes, including new developments such as “Get up and Walk” and the Haynes Centre for people with dementia.
- These included community-based preventive options such as those based in libraries, and primary care contributions including the Clinicenta.
- Drug treatment services were rated Excellent by the Healthcare Commission / NTA Joint Service Review.

### **What the council needs to improve:**

- Give additional priority to reducing the high level of delayed transfers of care.
- Address areas for improvement in mental health services for older people identified by the Service Inspection.

## **Outcome 2: Improved quality of life**

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The council is performing: **Well**

The balance of care continued to shift towards promptly delivered support in the community, increasingly reflecting independence and choice and preventive and open-access services. Expanded telecare networks and support to carers made particular contributions. The Council was responding to the need to ensure that older people benefited fully from these generally positive trends, and the delivery of major adaptations required specific attention.

### **What the council does well:**

- The use of residential care reduced and the balance of care continued to shift towards community and preventive support, although progress for older people was rather less marked.
- The Service Inspection found a good range of traditional services and commendable developments in independence-oriented services.
- More carers were supported both through short breaks and other service developments.
- Telecare and telehealth expanded and were integral to plans for additional supported housing including extra-care developments.

### **What the council needs to improve:**

- Reduce excessive waiting times for major adaptations.

### **Outcome 3: Making a positive contribution**

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The council is performing: **Well**

Engagement of service users and carers increased and increasingly emphasised influence on services rather than consultation. Significant developments included the development of a user payment policy and the service user forum established as part of personalisation planning. The Service Inspection found good examples of involvement in the design and planning of services, while also identifying scope for further developments involving older people, which was being progressed. Haringey's LINK had been established and was contributing to the evaluation of personal budgets pilots.

#### **What the council does well:**

- A Wellbeing Board subgroup coordinated a range of participation and engagement initiatives, and was progressing a user payment policy.
- The Service Inspection identified good examples of service user involvement in the design and planning of services, such as the Haringey Forum for Older People.
- Positive participation was particularly facilitated by the Older People's and Learning Disability Partnership Boards.
- Carers were involved in service development and evaluation, particularly via the Carers Partnership Board, and the Equalities Impact Assessment on the revised Carers Strategy encouraged these trends.

#### **What the council needs to improve:**

- Consolidate developments progressing the Service Inspection finding that participation by older people could be developed further.

### **Outcome 4: Increased choice and control**

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The council is performing: **Adequately**

Project and pilot arrangements for self-directed care were being taken forward, but pilots originally set up in 2008 had not reported, and the Service Inspection found clear areas for improvement in the focus on independence and choice of some more conventional care planning. Nonetheless the timeliness of assessment and reviewing practice was reliable, and the numbers of direct payment recipients including carers was increasing. Current arrangements for progressing personalisation pilots, and user involvement, were positive and had already benefited from learning from the Service Inspection.

### **What the council does well:**

- The Service Inspection noted improvements in care planning such as timeliness and reviewing, and the appropriateness of programme and project planning for self-directed care.
- The number of direct payment recipients increased. Carers were particularly benefiting, often through one-off payments such as for short breaks.
- Individual pilots involving people with physical disabilities and learning disabilities were well-established and a pilot for older people had been brought forward. The LINK was involved in their user evaluation.
- The Service Inspection found a good range of out of hours services which were widely used.

### **What the council needs to improve:**

- Reflecting the Service Inspection judgement of Adequate for this outcome, implement the resulting action plan which relates both to care management and to self-directed care services.
- Ensure that personal budgets pilots report within 2009/10, so that learning from them influences further developments reliably.

## **Outcome 5: Freedom from discrimination and harassment**

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The council is performing: **Well**

The Service Inspection found a good range of services for people from black and ethnic minority communities, and effective engagement with them, but nonetheless found that some care planning lacked sufficient focus on cultural and religious dimensions. In other respects equalities issues were taken forward strongly. A peer review by Redbridge Council confirmed good overall progress in service developments, consistent with the planned achievement of Level 3 of the Equalities Framework for Local Government. Equality Impact Assessments were applied to key developments such as safeguarding, carers support and self-directed care, while compliance with ethnic monitoring requirements continued to improve.

### **What the council does well:**

- The Service Inspection found a good range of specialised services for black and ethnic minority communities.
- The Council was engaged effectively with these communities and others such as people with low vision and limited hearing.
- Progress towards Level 3 of the Equalities Framework for Local Government was affirmed by a peer review conducted with Redbridge Council.
- Equality Impact Assessments relating to safeguarding, carers support and self-directed care contributed to service improvement.
- Compliance with ethnic monitoring of people assessed or receiving services improved further.

### **What the council needs to improve:**

- Continue to respond to findings in the Service Inspection that some care planning lacked focus on cultural and religious issues, and so was not holistic.

## **Outcome 6: Economic well - being**

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The council is performing: **Well**

Developments in income maximisation, including a multi-agency take-up campaign, improved the economic wellbeing of people using social care services. The Council's commitment to promoting employment for all its residents continued. It was exhibited within social care through a range of initiatives including social firms, and had developed to involve a direct role from NHS Haringey. Employment achievements among people with learning disabilities were rather above average for London.

### **What the council does well:**

- Income maximisation became prominent across all service user groups and included an effective multi-agency take-up campaign.
- A wide range of employment-related initiatives included developments in social firms.
- The numbers of people with learning disabilities helped into paid work was rather above the average for London.
- The "Haringey Guarantee" continued to reflect the Council's role as a major employer, and now involved NHS Haringey.

### **What the council needs to improve:**

- None.

## **Outcome 7: Maintaining personal dignity and respect**

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The council is performing: **Adequately**

The Service Inspection found clear areas for improvement in January 2009. These particularly included case recording and follow-up protection planning, but also management oversight, follow-up protection planning and some aspects of partnership involvement including by the police. Nonetheless the inspection found Safeguarding Board arrangements, initial responses to referrals and staff attitudes and awareness to be generally satisfactory. The Council made good use of inspection feedback and produced a sound action plan. At the time of the ARM some key actions had already been implemented, including reconfiguration of central safeguarding team management and staffing and improvements in quality assurance.

### **What the council does well:**

- The Service Inspection found that safeguarding governance was satisfactory, that staff awareness of safeguarding issues was good and that initial responses to referrals were generally sound.
- The Council was politically and managerially committed to improve safeguarding and had rapidly improved key areas within the resulting action plan.
- Recent improvements included enhancing and reconfiguring the staffing and management of the central safeguarding team, quality assurance developments

and increased police involvement. An independent chairperson was being recruited for the Safeguarding Board.

- The London Region Social Care and Partnerships Associate affirmed the Council's progress in taking forward the Service Inspection Action Plan.

**What the council needs to improve:**

- Fully implement the Service Inspection action plan, which reflects the need for improvement in day-to-day safeguarding practice that contributed to the Service Inspection judgement of Adequate.