

Local Account

How well we deliver adult social care services in Harrow



2011/2012

Portfolio Holders Forward



I am very pleased to introduce the Adult Social Care Local Account which provides a record of how our Quality standards were maintained across the many service areas the Directorate covers during 2011-2012.

Since the Care Quality Commission ceased to assess and grade the Council's work with vulnerable residents, our quality assurance system (QA) has been further developed and Harrow was highly commended for the work in this area at the MJ awards 2012. During 2011-12 we have worked directly with users of our services and gathered their feedback to include in our review of services so that we have a broader picture.

By taking great care to learn from feedback from those who use our services and their families as well as from complaints and safeguarding investigations, we aim to make sure that the quality of services is maintained and improved.

In the Local Account you will see that in order to get a holistic understanding of the quality of our services, a QA challenge model and review tool has been developed. You will also find our vision, our priorities and our service plan. All of which have been developed through engagement with those we support, their carers and our partners.

I urge you to take time to read this report and the attached Local Account for 2011-2012 and see how areas of improvement are being planned using the QA Framework, as well as being implemented in order to enhance the quality of life and wellbeing of those we support.

Councillor Margaret Davine
Portfolio Holder for Social Care, Health and Wellbeing

Words from our partners

“Harrow LINK is pleased to be able to comment on the Harrow Council’s Local Account for 2011/12. It is pleased to learn that the Council aims to be transparent and open by providing evidence of the work they have achieved for the benefit of local residents.



Harrow LINK commends the Council in working towards obtaining a meaningful and a balanced view of equality and quality of services by its determination to provide residents value for service.”

Harrow Local Involvement Network (LINK)



“Whilst Harrow’s Adult Social Care directorate’s approach to engagement with individuals accessing services and other citizens at a time of difficult challenges and inevitable changes has been refreshing; The Local account will provide for a more comprehensive measure of its actual performance in the delivery of services and clarify the key performance targets for the coming year. The report in keeping with the Council’s policy will no doubt provide an open, transparent and evidence based approach to measuring its performance.”

Harrow Mencap

“Age UK Harrow welcomes this report. It will give older people in Harrow the opportunity to hold the Council accountable for the services commissioned and delivered for older people”.

Age UK, Harrow



“Harrow CAB welcomes this local account as a tool for local residents to enable the Council to be accountable for the services they commission and deliver. It represents a commitment to being transparent with the local communities about what they do and spend in adult social care. We are pleased with the focus on re-ablement services which are so vital to maintaining independence. ”

Harrow Citizen Advice Bureau

Corporate Directors Summary



Striving to ensure quality services for vulnerable adults is the foundation of Adult Services and a core council responsibility; whatever else changes as a result of policy and transformation, quality assurance is an ongoing requirement. We have been developing our quality assurance system (QA) for a number of years and I was pleased that CQC found it to be embedded in their last assessment in November 2010.

Sound QA is now even more important because:

- CQC have ceased to assess the Council's work with vulnerable people other than in our directly provided residential care services
- Our customers desire to understand the quality of service to inform their choices has grown as a result of personalisation
- As we transform services it is crucial that we track the impact on our users of service change

Harrow's QA framework continues to be used as a model to inform work across the country. We have been highly commended in the MJ awards for our QA system and our first local account has been praised by the LGA for its robust self assessment. Each council is being urged by ADASS, LGA and Government to publish a local account of quality in adult care for its local population. This report fulfils this objective and our 2nd local account is primarily aimed at our local community.

We will produce an easy read version and ensure the key messages are shared widely. The principles guiding our approach are that quality assurance systems need to:

- Have a strong element of independence to ensure the authority isn't inward looking and complacent.
- Have user and carer views as it's core
- Ensure professional standards are promoted
- Drive improvement and learning in the diverse social care market

There is a strong evidence base that demonstrates our work is making a positive difference to our users and carers through our QA systems.

Key Messages:

- An analysis of the outcomes of service users of the reablement service continues to show significant improvements and high levels of satisfaction.
- Further improvements to the customer journey are required to meet changing customer demand and expectations.
- Feedback from service users, service providers, and the third sector on personalisation is positive. There is a need to further develop the market so that the market can evolve at the same rate as the allocation of personal budgets and is able to meet the needs of those requiring Personal assistants.

- Safeguarding remains strong, however there remains the need to continue to embed knowledge of the Mental Capacity Act and ensure referrals are speedily investigated.
- We have improved our performance in delivery of adaptations to disabled peoples properties.
- There has been robust and effective communication with service users in relation to day services and surveys continue to show adults with learning disabilities regard the services they receive very highly.
- The introduction of our fairer charging policy and eligibility criteria has reduced the number of extremely satisfied and very satisfied users in the annual national user's survey.
- Following in-depth consultation, we have implemented our Fairer Contributions Policy and this has been supported by our community based steering group.
- Our work with carers demonstrates we are a leader in use of PBs for carers. We need to continue our market development and embed personalisation across carer services.
- Our engagement activity is key to our service development and we are pleased that, in 2011/12 so many of our residents have participated in shaping new policies, new service and projects.
- We continue to develop the social care market and accessibility to it; we need to concentrate on improving some elements of our support planning process.
- We continue to develop the market for personalised support.
- Our commissioning processes have significant savings and increased satisfaction. Over the coming year though our work with providers, we will improve the focus on effective choice and control for service users.
- We have independently audited safeguarding practice and successfully implemented improvements to our staff training. We are now working on more creative ways to gain further and targeted insight, so we can enhance our local safeguarding services.

I hope you will agree that the evidence in the report shows that our work achieves positive outcomes for very many users and carers. This can also benefit those who fund their own care from services subject to our QA arrangements. However, as ever there is more to do to ensure our practice is consistently of high quality across services. Please do give us your feedback on the report and any ideas for further improving these crucial services.

No QA system can guarantee poor practice will never happen, but it can spot patterns of poor performance and correct them, promote learning and a drive for improvement.

Paul Najsarek
Corporate Director Community, Health and Well Being

Introduction

Our vision for Adult Social Care Services has been developed through consultation with key stakeholders and is fundamental to the way in which we plan develop and deliver services.

Our vision

Through personalisation and prevention we see older and vulnerable people in our communities not in terms of their needs and problems but as a valuable resource. We will encourage and enable their contribution, seeing them as active participants not passive consumers.

Underpinning this approach is a focus on improving the quality of life of vulnerable people in our communities, emphasising independence, choice, control and well-being. We are determined to support individuals by focusing on how we can broker and foster links between communities, the voluntary sector, residents and the council, along with private and social enterprise sectors, to enable more people to co-produce their own solutions.

In order to improve outcomes, as well as make savings, we will champion social interaction to make it easier for networks of support to be organised around older and vulnerable people in Harrow. These support networks will bring new ways of enhancing community capacity and care.

With increasing demographic pressures, such as an ageing society, creating additional pressures for the council we will ensure that more than ever we will work to understand our communities and the contributions they can make. This understanding and partnership working will drive innovation around the creation and sustaining of stronger networks of care and support in Harrow.

What is a Local Account?

The way that councils are assessed on how well adult social care services are performing has changed. Rather than reporting to central government, we will now report directly to local residents, via a new 'Local Account'.

The Local Account will provide residents with information on the performance of local social care services as well as details of priorities and outcomes.

The Local Account is an important tool for the public to use in holding the local authority to account for how money is spent and on the quality of the services it provides.

Adult Social Care - Local Account Consultation

It is important to us that our future local accounts contain the right information for residents. We need to know what matters to residents so we can ensure we are giving them the right information on how we are performing and the quality of service we provide.

As part of developing this document we gave our residents a chance to tell us what information they would like to see in the account and to help us set future priorities.

To help us get it right we asked residents to give their views on:

- which aspects of our services they would like to see reported in the Local Account
- the current performance of Harrow's Care Services for Adults
- future improvements that could be made to our services

Feedback has informed the types of information that has been presented in this document.

Local account group

For 2012/13 a group of Harrow residents made up of people who use the service and those that don't will be brought together to develop the Local Account throughout the year.

If you would like to send us your views or would like more information about Harrow's local account group please contact us via Susan Bole at: s.bole@harrow.gov.uk

Harrow's approach to quality

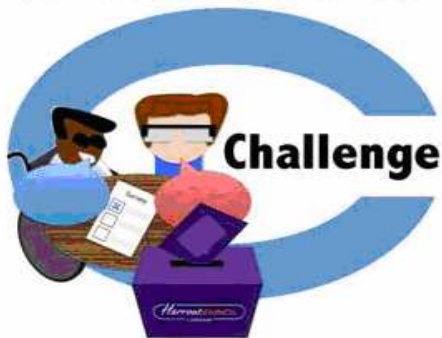
The foundation of quality assurance is fundamentally a local relationship between the service and its users. The quality of adult social care services was judged through a programme of audit and inspection by independent bodies and since this arrangement has now changed, this has become even more important.

We have had a long standing commitment to seek a way of understanding quality as defined by the people who use our services. We also needed to challenge both ourselves internally and the organisations we worked with, to continually improve and deliver better outcomes in line with our customers' expectations.

Since 2008 we have been developing a quality assurance (QA) system which brings together the planning and design of care services with a variety of perspectives on the quality of these services (feedback from independent bodies; consumers; professionals; providers). It has resulted in major improvements to provider services and outcomes for vulnerable people and carers.

In order to ascertain a holistic understanding of the quality of our services, a QA quadrant model and review tool (QAQ) was developed. This is based upon four key areas:

Consumer / Citizen



Independent



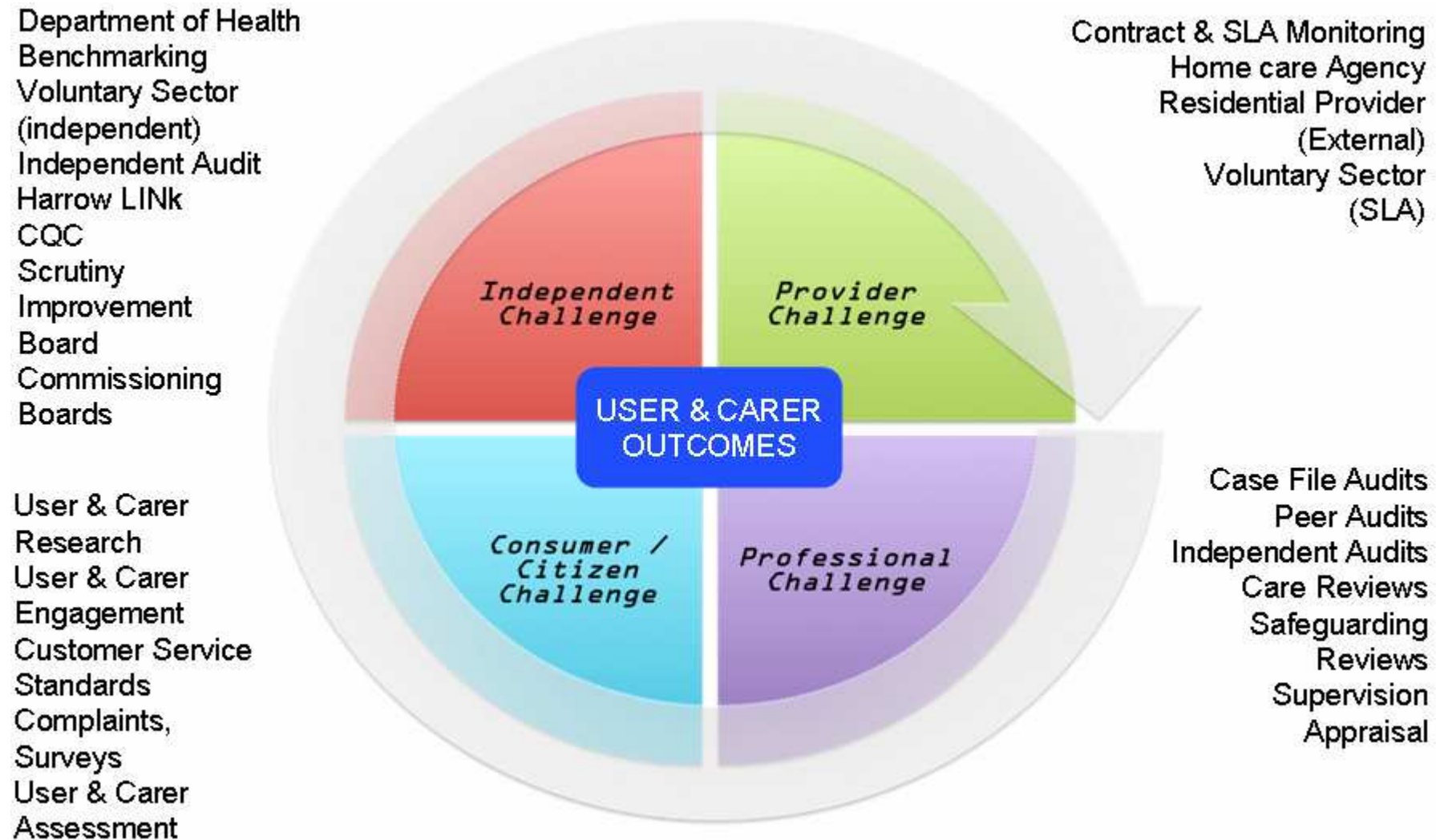
Provider



Professional



Harrow's Quality Assurance framework



The diagram shows that Harrow's quality assurance framework uses information gained from QA activity from a variety of perspectives (quadrants)

Who are our local people?

Harrow's population is estimated at 239,100 residents¹.

There is a predicted increase in growth over the next 10-15 years, particularly amongst the over 65s.

Currently, the north of the borough has a greater proportion of older people than the south.

More than half of Harrow's population is from Black and Minority Ethnic (BAME) groups. The biggest of these is the Indian ethnic group who make up over a quarter of the Harrow population.

The population of all ethnic groups except white is expected to increase in the coming 10 years. The white ethnic group is generally older than the BAME group.

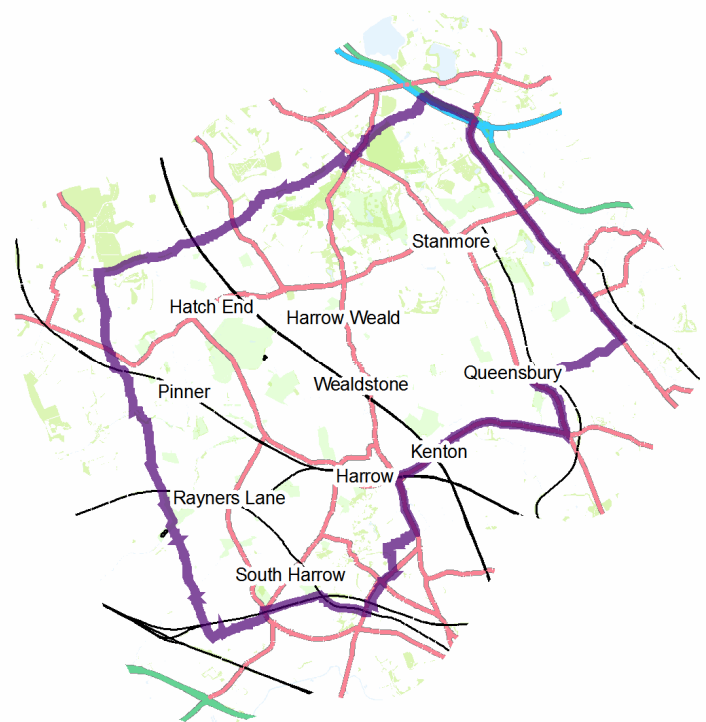
In 2011/12, 6113 clients received social care provided by the Harrow Council, two thirds 4173 were 65 years old and over.

Disability

In Harrow, 3 people per 1000 have a learning disability which is slightly lower than the national rate.

The rate is forecast to increase over the next 15 years with the biggest increases in the older population as life expectancy in people with a learning disability increases.

In 2011-12 there were **454** community based PD clients with a physical disability under 65 and **2982** community based clients with a physical disability over 65.



The number of people aged 18-64 predicted to have a moderate or serious physical disability is projected to increase from 14,143 in 2010 to 16,619 in 2030.

Older People

Two thirds of social care clients are over 65 with the majority having a physical disability.

Deprivation affecting older people is higher in Harrow than the England average. Older people are significant users of both health and social care.

Carers

Estimates suggest there are 30,000 unpaid carers in Harrow.

Around 3,000 are on council registers and almost 3000 were assessed in 2011-12

¹ Office for National Statistics, Census 2011.

Our Priorities for 2011/12

We examined feedback from Harrow's communities and users of our services. We then looked at how to make best use of the resources available to achieve our vision.

This enabled us to determine improvement areas for us to focus on.

These then became the nine elements of our Adults Service Plan for 2011/12:



- 1. Improve our Reablement service**
- 2. Tailoring services to meet individual needs**
- 3. Improve and develop services**
- 4. Keeping people Safe**
- 5. Continue to improve performance**
- 6. Change how we work**
- 7. How we manage our money**
- 8. Making the best use of our assets**

Our budget and how we spend it

Our budget

Adult social care made up 37.6% of Harrow Council's total budget for 2011-12. It is the largest service funded by Council tax and general government grant.

The pie chart below shows how the £64,221,000 net spends is shared between people with different needs in adult social care.

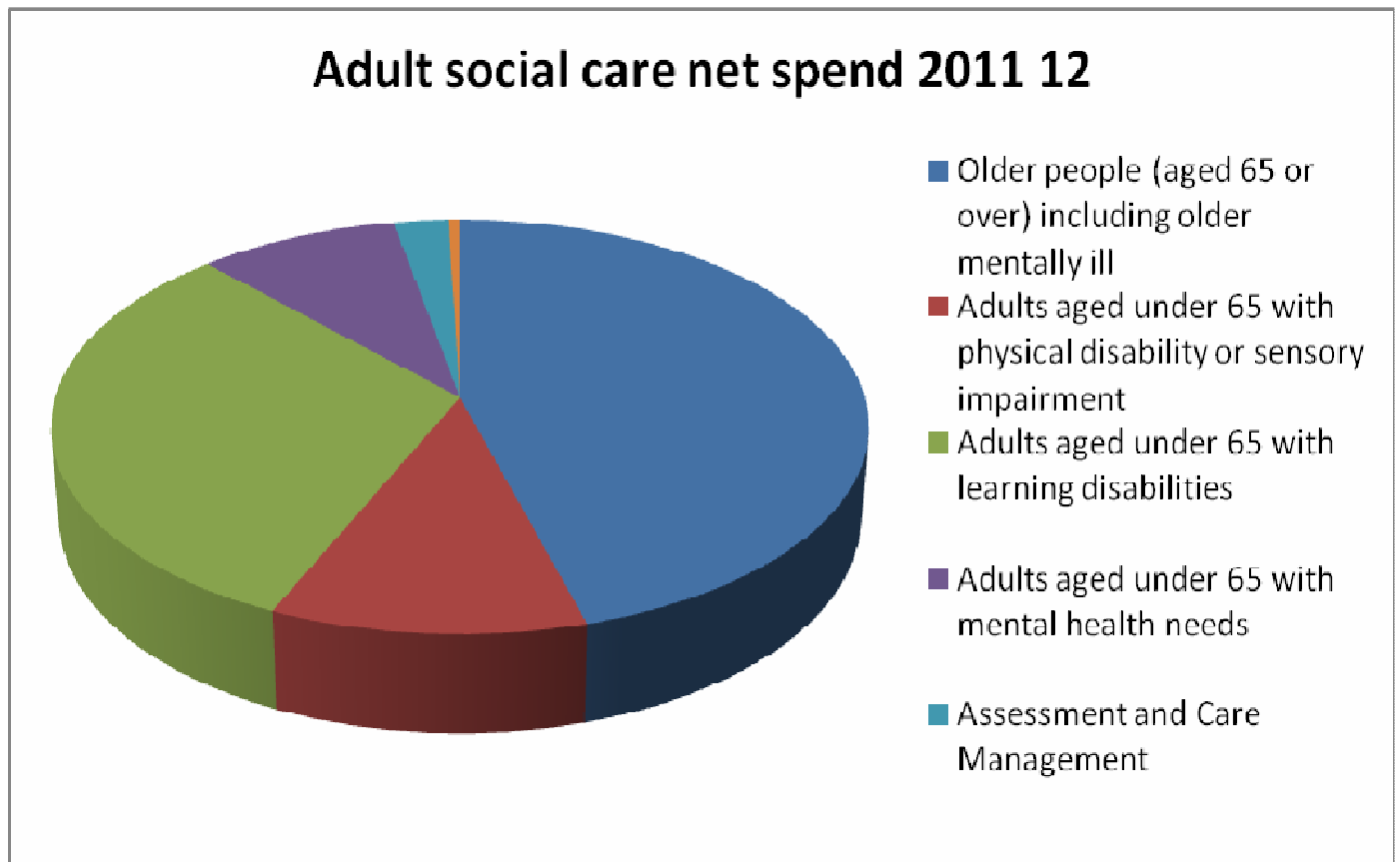
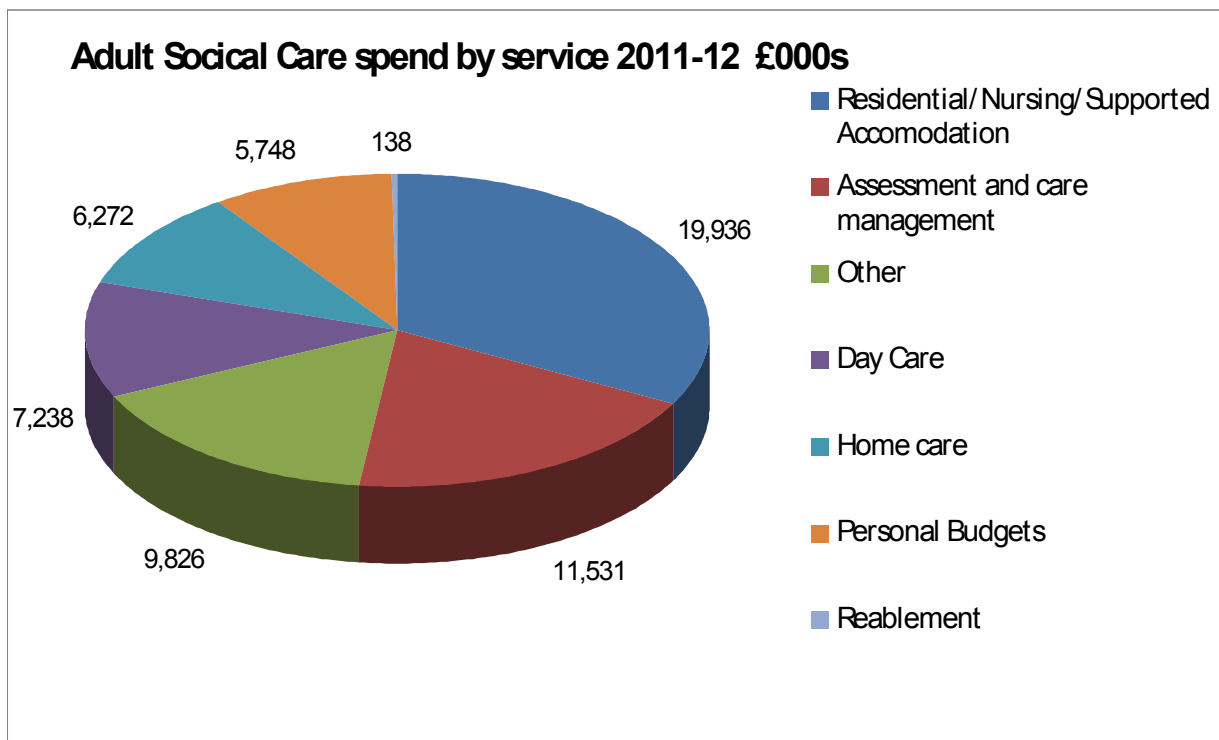


Chart 1 shows: Net spend on Adult Social Care in 2011 – 2012

The pie chart demonstrates that, as expected, our spend is reflective of our local population. It is therefore that expected demographic changes, as outlined above, are likely to put an increasing pressure on our budget in future years. It is well documented nationally that the demand for Social Care services is expected to rise in line with the changes projected in the population.

What do we spend the budget on?

The pie charts below show how the £64,221,000 spend are shared between services.



Value for money

Overall costs of adult's social care are below average when compared to a group of similar councils, and this is alongside above average performance in most national performance indicators.

At the end of 2009-10 unit costs of nursing care for people with a learning disability and physical disability were above average, with higher than average unit costs of residential care for physical disability.

We have been developing a service that has moved away from traditional models of homecare support to a personalisation model where people have their own personal budget that increases the proportion of personal care commissioned by individuals.

However the initial review for 2010-11 data indicates that we have made an improvement in some of these higher than average costs.

For more detailed performance information please see the *Continue to Improve Performance* section.

Improving Services through engagement



In Harrow we know that to be successful we need to ensure that every opportunity is taken to put our service users and residents at the heart of everything we do.

In order to achieve our vision for social care, we understand the need to enable constructive citizen engagement and active participation.

We have concluded our consultation on the adult social care budget, with positive comments about the process from those who participated. We are now implementing the decisions with help from a multi-agency steering group of representatives from voluntary organisations, Harrow LINK, users, carers and other key stakeholders, who met regularly to discuss progress.

Mental Health Consultation

We completed a review of mental health day services in July 2012 when recommendations to change services were agreed by our Cabinet. The work to develop the recommendations started in September 2010 when a small steering group was convened. The group included people with mental health problems who use current services, carers and managers from the Council and Central and North West London NHS Foundation Trust (CNWL). We used a collaborative approach to consider what constituted best practice, visits to local services, planning some of the consultation events and shaping recommendations. A variety of methods were used to enable people to tell us their views including:



**For better
mental health**

“Mind in Harrow believes that Adult Social Care consultation conducted in 2011-12 has been a genuine attempt by Harrow Council to engage service users, voluntary sector and other stakeholders in planning a sustainable future for services under pressure of funding cuts.

While no service reductions are desirable, Mind in Harrow and Harrow Mental Health User Group (HUG) reps have been invited to make sure that the needs of mental health service users are being increasingly involved in the Council’s engagement activities and welcome further progress to improve local mental health services. Service users are not forgotten through this process of consultation and have continued to participate in overseeing the implementation through the Steering Group.”

We have been encouraged particularly in the year that mental health service users are being increasingly involved in the Council’s engagement activities and welcome further progress to improve local mental health services.”

- On-line questionnaire
- Postal questionnaire sent to all users of mental health services in Harrow
- Face to face events at all existing buildings-based mental health day services
- Meetings with individuals where requested
- Email, letter and phone calls

We also carried out specific events with a south Asian group, a Somali project and a small number of young people from Harrow.

368 people gave their views and opinions via the questionnaire. 55% were users of the day services. 68% agreed with the proposed model of having a building-based hub or hubs and a “bridge builder” service helping people integrate into the wider community. Many people took the opportunity to write, phone or email with their comments.

We also had feedback from the following local organisations:

- Mind in Harrow
- Harrow Rethink Support Group
- Harrow Association of Disabled People
- Harrow LINK

We are pleased with the levels of participation in this consultation and the strong support for the proposed outcomes and the overall model. The consultation surrounding this review has been considerable and has given a large number of people the opportunity to contribute.

Partnership Boards

We have developed Partnership Boards for carers, physically disabled adults and adults with learning disabilities to meet, share experiences and shape the development of new policies and projects.

Partnership Boards are a key resource for initiating new service developments. This year the Carers Board recommended that if needed, respite care at home should to be included within the allocation of a person’s personal budget. Now implemented, this has increased our support to carers and has given people greater choice and control.

Other examples include, input to the councils Housing strategy, and developing services on shop4 support, such as transport.



Person Centred approach Transition

Workers from the transition team participate in the Person Centred Planning [PCP] at local schools in partnership with disabled young people and their parents/ guardian, school staff and health professionals. The PCP focuses on the young person, their individual strengths and what they like to do. The PCP can act as a transition passport.

There are five main headings within a person centred plan:

1. What do people like about me?
2. What is important to me?
3. What support do I need?
4. Who helps me to stay healthy?
5. What do I want for my future?

Mixed media is used to facilitate the young person's understanding of the process. The PCP produced contains photographs and symbols and a copy is produced for the young person and their parents.

During the summer term transition workers attend weekly focus groups at the local schools aimed at supporting young people to understand and have an opportunity to explore how they feel and think about leaving school and transitioning into Colleges/ adult services.

School memory boxes were produced for each person to take away with them.

Transition team work closely with the school staff, colleagues in the Learning Disability team, transition workers from the voluntary sector, HAD and Harrow Mencap in the preparation and planning of the Transition process for the young people.

The transition model puts the young person at the heart of the process. It enables young people and their families to be informed and supported through the process from Children to Adult services. It ensures that Adult services are picking up on the needs of the young people at this crucial stage in their lives to thus ensure with other professionals, a smooth transition pathway.

We work closely with colleagues in children and education services to forecast young people who are in transition to adult social care. We use this information to inform our commissioning of services and development of the market.

Our approach has been commended by the National Autistic Society...

"It's brilliant to hear you have such a proactive approach to working with children's services and are tracking children coming through to the Transition Team from year 7. This is not often the case when I'm speaking to other authorities so I really feel our joint approach and commitment to this way of working will inevitably result in more timely transition planning, with the ability to offer choice of what to do next in Harrow to the soon to be young adults we are supporting from Harrow"

Transition Coordinator, National Autistic Society

Working with others

Alongside our engagement activity we work with many organisations in order to meet the diverse needs the individuals within the borough, such as;

- Providers of care and support services
- Partnerships (such as the NHS and mental health services)
- Carers
- Voluntary sector

Providers

On behalf of our service users we currently commission over £40 million of care services each year and the majority of these clients now report an increase in choice and control in their lives.

We have strong relationships with our provider organisations. We coordinated and ran regular provider forums to support learning and development. One of this years highlights included a workshop focused upon homecare and human rights which was well attended.

Through our provider challenge quality assurance activity, we closely monitor establishments to ensure they are meeting the contract requirements. We have built in cyclical monitoring to ensure the provider organisations continue to improve and develop services to enhance people's quality of life.

Partners

Successful joint working is a vital component of improving the lives of vulnerable adults. We also aim to facilitate the development of shared responses and solutions to the challenges we face.

Health Services

Health integration

The Council works in partnership with NHS and Brent-Harrow PCT by bringing together care coordination and delivery.

Current examples of effective joint initiatives are:

- *The Integrated Care Pilot* - To ensure care is delivered in the most appropriate setting – a high volume of patients use acute services who could be treated closer to home by primary care or community care. An ambitious pilot was launched to provide better, more integrated care with a focus on diabetic and older patients. Integrated care requires a new way of working between different settings, thereby raising the quality of care for patients, reducing the need for emergency care in the acute sector.
- *Out of Hospital strategy* - The Out of Hospital strategy identifies the improvements needed to primary, community and social care, to enable shifts in services to out of hospital settings.

- *Hospital discharges* - Delayed discharging occurs when a patient cannot leave hospital because of the unavailability of health or social care services in the community or because of administrative issues within hospitals. On average 2.3 patients per 100,000 population were delayed on a given day as a result of social care (from 6.6 patients delayed overall) which was an average result for London. However we currently are working with health services to support and improve discharging from hospital.

Health and Wellbeing board

The Shadow Health and Wellbeing Board for Harrow was established in 2012 bringing the Council, NHS, GPs and the voluntary sector together to focus on improving the health of Harrow residents.

The Board has taken external advice and undergone a development programme to establish its role and working relationships. They have overseen the development of a Joint Strategic Needs Assessment for Harrow, which has been used in the development of a Joint Health and Wellbeing Strategy which aims to meet these needs.

It is grounded on the fundamental principles that what we do will:

- Improve the wellbeing and quality of life of the people of Harrow
- Reduce the health inequalities gap
- Have long term and sustainable impact

The Board has also agreed seven priority topics:

1. Long term conditions (incl. cardiovascular disease, respiratory disease and diabetes)
2. Cancer
3. Worklessness
4. Poverty
5. Supporting parents to give children a good start
6. Mental Health
7. Dementia.

The strategy aims to bring together the wide variety of areas that impact on health and well-being and make those links explicit. It is currently subject to a consultation process.

Public health

Health services and local government have a shared role in developing a new local public health system.

The new system will embody localism, with new responsibilities and resources for the council to improve the health and well-being of Harrow and the transfer of public health functions from Harrow's primary care trust.

Good progress has been made in the development of shared plans and governance arrangements to implement a shared Harrow and Barnet public health service.

Joint work stream meetings held to review progress of activities, and explore the IT access options, staff contracts and legal arrangements to ensure Public Health functions will be undertaken from 1st April 2013.

Mental Health Services

Central and North West London NHS Foundation Trust (CNWL) and the

Central and North West London 
NHS Foundation Trust

Council have a partnership in place where CNWL provide most mental health services on behalf of the Council. This year the Council worked closely with CNWL to review day services in Harrow for people with mental illness.

Extensive consultations with day service users, their carers and partner organisations produced a rich evidence base which will guide the redevelopment of services in 2012.

Working with Local Voluntary Organisations

There is a well established partnership between the Council and Voluntary and Community sector in Harrow. The role played by the Voluntary sector in providing services and representation is highly valued and contributes significantly to Community Health and Wellbeing of residents in the borough.

The Council provided financial support to the value of £3.3 million in 2011-12 to approximately 150 voluntary organisations offering services to adults, through grants, commissioned services and premises support.

This includes services for older people; people with disabilities or specific long-term limiting illnesses; people with mental health problems; carers; women; black and minority ethnic groups; victims of crime; and groups aiming to improve the living environment.

Voluntary Organisations offer a range of services to the local area including: information, advice and advocacy, social activities and training and development,

Over the last year, voluntary organisations and the Council have worked together to ensure that the process of funding commissioned services is transparent, fair and based on clearly agreed criteria which reflect the Council's strategic priorities.

Representatives of voluntary organisations contribute to the decision making process of the Council through participation in a number of strategic groups, Committees and Advisory Boards. They also fully engage in our consultation events on specific issues such as the introduction of the fairer charging policy in 11/12.

The Council is supporting Voluntary groups to embed outcome-based accountability and has also been working to develop a more stream-lined monitoring process which will minimise bureaucracy but ensure that all statutory and performance requirements are met.



Supporting the Voluntary sector

The Council has supported voluntary organisations to position themselves in the market for personalised budgets.

This has involved detailed work to enable them to offer competitive services for residents with personal budgets.

Harrow's citizen portal: shop4support.com enables individuals, and their families and carers to look for

and buy the support they want. It is similar to an online supermarket, but it is dedicated to social care and support.

Many voluntary organisations are now advertising their services through this web-based market place. Such as Age UK's Handyperson service; Alzheimer's Society Harrow's Specialist Day Support for People with Dementia.

Supporting Carers

The Council recognises the important role played by carers in Harrow. In 20 11/12 more than £1 million was spent on supporting carers – which includes the £763,000 Carers Grant given to us by central government.

We enable a range of support and services including; commissioned respite care; voluntary sector and other agencies provision of information and advice; outreach and other tailored support.

An important area, for delivering tailored support and assisting carers to have a life outside caring, is the development of personal budgets for carers.

Harrow Council has worked to develop a personal budget process for carers during 2011/12. A pilot with carers was co-ordinated and feedback from carers helped inform the development of carers' personal budgets.

Personal budgets provide carers with more flexibility and choice about how their needs are met and how respite is provided.

During 2011/12, we developed a monthly 'Drop-In' for carers, where speakers and stalls offering a range of advice and information were provided. This regular event has proved to be very successful with more than 50 carers attending regularly.

Carer specific information has been developed on the citizen portal: shop4support.com and carers' information packs are regularly distributed to about 2,300 carers across Harrow.



Supporting Service Improvement

Our quality assurance framework sees professional challenge, through self-assessment and improvement work, as a continuous process.

Social Workers keep records about the work they are doing to keep people safe and help them stay independent. Every 3 months we ask managers to check them and make sure that they are good enough – a process called case file audit.

This gives us some ideas about how to do things better – for example we have given staff more training in working with risks.

Findings from the latest round of case file audits (September 2011) show that there is sufficient evidence in case files that Adults Service's strategies are being put into practice for better outcomes of service users and their carers.

Overall there were some good examples of multidisciplinary working and also person centred approach to service delivery.

The arrangements for protecting vulnerable adults were well co-ordinated and had multi-agency ownership.

The staff took effective action to protect vulnerable adults and case records demonstrated good practice and adherence to the procedures.

Steps have been taken to improve procedures around case file audits that will inform our professional challenge.

Work is also done each month to check the accuracy of the information used for performance indicators and where there are issues, these are followed up directly with the Head of Service. Concerns about some clients with personal budgets not having

Achieving our priorities in 2011/12

support plans are currently being looked

Case study ...

In the Safeguarding Adults Team we asked a person that does not work for the Council to look through the social workers' records so that we have them independently checked.

He recommended some changes to the training that we give our staff.

We now offer them more sessions on working with people who have mental health problems or dementia.

We have also set up a training course safeguarding adults for staff that they can access on-line.

into.

Our workforce strategy

Throughout 2011/12 we have improved the way we communicate with staff. We regularly hold staff engagement sessions to foster innovation and quality management.

We have continued to develop our organisational capacity and capability. In 2011/12 we saw that our levels of staff sickness were reducing.

Also this year we have linked up with Skillsforcare, an organisation that helps develop effective tools and resources to support staff development and ensure there are appropriately skilled people working to deliver high quality social care, to meet the changing needs of Harrow residents.

In 2012/13, we hope to develop the range of support offered to staff to enable the collective improvement of services.

Improve our Reablement service

Launched in October 2010, our 'Reablement' service is a short term intensive tailored care package usually offered after an illness or when a person is first referred for social care.

It puts the person's individual needs at the very centre and is focused on them re-gaining their independence; enabling people to remain safely in their own homes and communities.

The customer journey begins when contact is made with Access Harrow's First Contact Service. This streamlined approach ensures that adults with care needs are directed to Reablement and are offered a service from a suite of Reablement services.

Reablement services provided include: Advice and Information, Assessment and sourcing of Equipment, Telecare, Reablement, Home Support and access to the Reablement Skills and Support Programme.

A small number of cases such as those involving more complex issues go directly to the Long Term Care Team. For the majority, a multidisciplinary Reablement Team will provide a range of social care and occupational therapy skills in completing assessments and providing Reablement support.

Where the need for services, beyond the 6-week period of Reablement, has been identified, the Personalisation Team will apply FACs criteria to determine eligibility for on-going services. Clients who are FACs eligible will be supported to receive personal budgets to meet their on-going care needs.

Reablement Case Study

The 84 year old service user lives with her husband and is a carer for him but could not manage alone and was referred to our Reablement service because although

previously independent she had fallen in the bath as she suffers with dizziness.

As a result of the falls she was in considerable pain, at high risk of further falls and struggling to get in and out of the bath and wash herself.

The Reablement Team carried out an assessment of her needs and prepared a series of outcomes to achieve with her reablement support workers. The family were provided with details of equipment which would also improve her transfers in and out of the bath and obtained a bath board and grab rail.

Reablement support workers followed this plan and initially called twice a day to encourage and assist the service user to relearn these tasks.

They gave feedback to the reablement team and the final review showed that the Reablement programme and equipment had helped the service user to continue without support and remain independent.

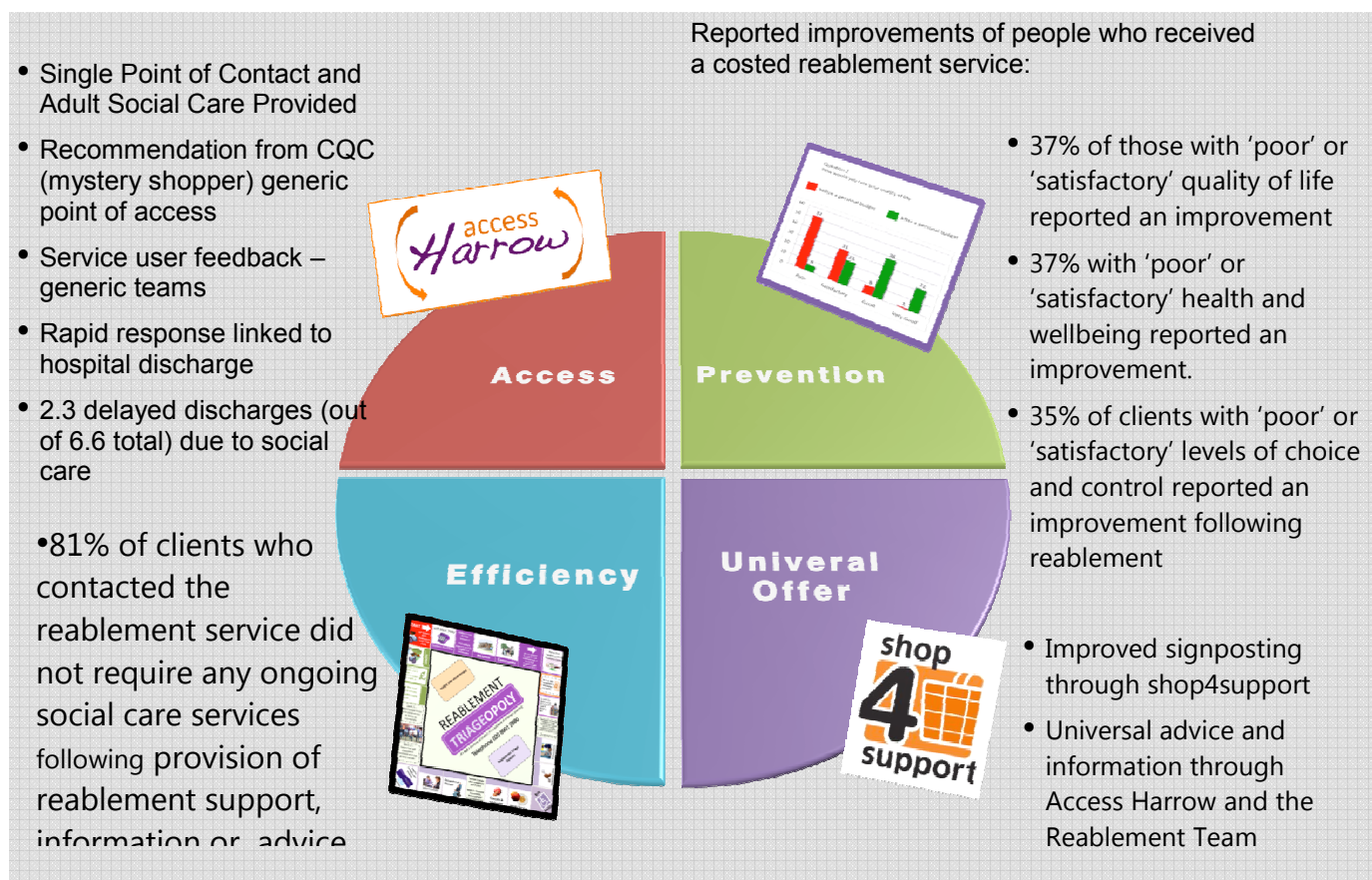
The service user said she was extremely grateful for the support given her to gain back her independence in attending to her personal care safely. She said the carers are all very helpful and very supportive.



Reablement

Key achievements include:

This year we have continued to build on the level of advice and support provided. Our achievements are summarised below:



Our priorities for 2012-13 include:

- The development of Reablement to continue to be based on on-going consultation and contributions from a range of stakeholders.
- To extend knowledge of effective multi- disciplinary service planning through the Integrated Care Pilot.
- Work with hospital discharge teams for effective referral and continuity of care
- Continue to work with current providers to develop targeted support.

Tailoring services to meet individual needs

Over the past few years we have been developing adult social care in Harrow to give people greater choice and control over their lives.

In Harrow, everyone with an ongoing need is offered a personal budget so that they can meet their needs in a way that best suits them.

There is an established process that is in place for all applicants:

Assessment of need: Client's needs are assessed under the Fair Access to Care Criteria. Other professionals can be asked to contribute to the assessment process. Clients have a choice to use help of a family member, friends or unpaid carer during assessment process.

Patient meets criteria: If the client is assessed as having a substantial or critical need, Harrow Council will be able to offer on-going support.

Personal Support Plan (PSP) development: Help with development of personal support plan is also available once an estimated Personal Budget for the year is offered.

Approval of PSP: The personal support plan then requires approval from the Council before its implementation.

Review: The approved support is reviewed after six weeks and then annually to evaluate its effectiveness. If necessary it can be reviewed as often as needed to ensure that clients' needs are met.

We have worked with people who use our services and other key stakeholders to make these changes. A personalisation reference group was set up to foster co-production in developing the delivery of

1 October version 3



high quality personally tailored services. Throughout the year we have continued to develop an increasingly varied and flexible market for the things that residents might want to use to help meet their care and support needs, and increase their access to employment opportunities.

We promote the availability of the diverse range of services using an online portal shop4support.

Key Achievements this year include:

- **Harrow's local eMarketplace shop4support has over 500 different products and services for individuals to buy.**
- **Online stores increased on from 496 in September 11 to 550, March 12 - allowing people to have a greater choice and local access to specialist providers.**
- **Above national average for % social care users receiving self-directed support.**
- **Developed a personalisation information pack to assist people in understanding personalisation and how it can benefit them.**
- **During personalisation reviews it has been recorded that nearly 98% agree that 'Personalisation' Services have improved their quality of life.**
- **In Feb 2012 over 90% of PB service users believed that their Personal Budget gives them more choice and control over their daily life**
- **In order to make it easier for users to manage a cash budget we have introduced a choice of individual service funds (ISFs) where a provider holds the personal budget on behalf of the client.**
- **A group of service with learning disabilities in Harrow became the first in the UK to achieve the prestigious Bronze Discovery Award (Similar to the Duke of Edinburgh Awards)**

Michael's story ...

Michael Young (49) has a learning disability and receives a personal budget from the council that he can spend on care, support services or activities that encourage his independence.

When he moved from the traditional form of prescribed social care (often day care) to the new personalisation model favoured by Harrow Council, Michael found a whole new world opening up for him.



"I've always painted. Mainly people, animals and food and I used to do it a few days a week at home. Since I have been able to buy better materials I have done exhibitions," Michael described.

Michael's flair for art was spotted by both members of the Council's Personalisation Team and Harrow Mencap, who had run a number of art competitions in the past that Michael entered.

As a result of tailoring his care budget to suit him – the very ethos of personal budgets and personalisation – Michael has been able to enjoy his passion on a regular basis. He has been offered the option of further education and courses through his budget and introduced to art associations locally.

Feedback from service users, service providers, and the third sector on Personalisation is positive. There is a need to further develop the market so that it can evolve at the same rate as the allocation of personal budgets.

In our latest survey of users of adult social care over 86% of people said that their appointments had been made for a time that was convenient for them, that the social worker listened to their concerns and that they had been given a chance to make their own decisions and choices about the services they are receiving.

However less than 70% of respondents said they had received a written confirmation of the support that would be provided to them. This was confirmed by checking client files and is now monitored regularly in a meeting with the Head of Service.

Our key priorities for 2012-13 include:

- To identify clients without a support plan following their review and the findings to be reported to Director of Adult Social Care.
- Ongoing work to further develop the market
- Publication of refreshed market position statement
- Development of the use of PayPal through online social care and support market place shop4support.
- 100% of eligible users and carers to receive a personal budget by March 13.
- Work with the voluntary sector, including Age UK, to roll out our model of managing personal budgets on an individual's behalf, with the aim of making personal budgets more accessible.
- Developing our offer of personal budgets to mental health clients.

Improve and develop services

The care and support needs of Harrow's residents will change over time and as they do it is important to challenge the relationships we have with service providers to ensure that they continue to deliver value for money.

Key achievements:

We have worked with providers to reduce costs and improve quality for service users: reviewing, monitoring and renegotiating our contracts (more details of this can be found in our *Working with Others* section of this report).

Over the past few years we have made a significant impact on the quality of Home Care provision in Harrow through monitoring the achievement of contractual arrangements.

Over the last year we have collaborated with other London boroughs through the West London Alliance with the aim of improving quality and service delivery. This has led to an accredited list of residential and nursing home providers who offer quality services and value for money.

Through this partnership the council has identified more than £300,000 of savings.

***(CQC information on provider inspections to follow)**

When we ask the people who use these services about their experiences we found the following²:

- Over half of respondents said they were 'very' or 'extremely' satisfied with the support they received, with 80% at least 'quite' satisfied.
- 82% said their personal care and wellbeing had improved
- 53% of respondents reported a 'good' or excellent quality of life.
- 82% of respondents said services and support had improved their level of choice and control.

² National User Survey, January 2012



Ewart House ...

Through consultation with stakeholders Ewart House was designed to offer extra care supported housing and became the first modern scheme to be commissioned in Harrow.

It is a place where older people in frail physical and mental health are being helped and encouraged to live a full and active life.

There are services literally on tenants' doorstep - a café serving tasty, nutritious food, a health spa offering hairdressing and assisted bathing, and private gardens, including a discreet pacing area for tenants with mild dementia.

Staffing is the extra vital ingredient. There is professional support from our on site team, providing personal care on call around the clock.

In the 2011/12 London Mayor's Awards Ewart House was the winner of the Best Place to live in London category.

Key areas for improvement:

From our quality assurance activities and work with our providers we have identified areas for improvements. These are:

- Improvements in the quality of communication to service users if service is delayed.
- Our home care services are meeting the needs of our diverse population and will work to ensure that they continue to do so.
- Further engagement with service users to examine effective choice and control.

Keeping people safe

Every person has a right to live a life free from abuse and neglect. Keeping Harrow's vulnerable residents safe is fundamental to the delivery of adult social care services.

This year we have targeted and protected more people from hard to reach groups, through strengthening our relationships and delivering workforce training with our partners, such as the police, health and fire services.

Our progress:

The last year a lot of progress has been made, for example:

- **We have worked in partnership with the Police to raise awareness with the Banks about financial abuse**
- **We have independently audited our work to ensure we always aspire to achieve best practice**
- **Over 1,250 people were given training in safeguarding adults**
- **Increasing numbers of people were given information about who to call if they are worried that someone may have been abused**
- **We were contacted by 544 people where there was a safeguarding concern, 144 more people than last year**
- **Organised an effective public elder abuse awareness campaign**



In June we teamed up with Age UK, HAD and local police to hold our annual event in Harrow Town Centre to mark World Elder Abuse Awareness Day.

Local residents were invited to come along on the day to find out more about elder abuse and the safeguards and supports in place locally.

We are pleased that we continue to see a growing number of people contacting us with concerns, suggesting that our publicity campaigns and briefing sessions are having a positive effect.

Respondents to our latest survey (Jan 2012) of users of adult social care showed that about 85% said they knew how to get help if they felt unhappy or unsafe. We looked into the reasons why a few clients did not know how to get help, and followed this up with the services involved.

Police action taken

The Safeguarding Adults Team continues to support both staff and users in contacting the police when a crime is alleged to have been committed against a vulnerable adult. This has included supporting victims at Achieving Best Evidence interviews.

As a result there was an increase in criminal prosecutions from 10 cases in 2010/11 to 25 cases last year. This is equivalent to 8% of completed cases, compared to the national figure of 5%. This demonstrates some steady progress in a difficult area.

Safeguarding Adults Board

Safeguarding in Harrow is overseen by The Harrow Safeguarding Adults Board, made up of senior members of statutory agencies including the Council, the police and the NHS along with user, carer and advocacy representatives.

Together we are making sure we continue to offer high quality safeguarding help to people who need it in the face of rising numbers of reports of abuse.

Every year the board prepares a report with figures and analysis of abuse activity in Harrow that sets out how we responded to concerns and what the safeguarding system is focusing on.

The key priorities for the LSAB in the coming year include:

- Adopting different approaches to community engagement so that we are confident the safeguarding adults message is reaching everyone
- Developing a special risk assessment tool that helps us assess whether residential and nursing homes are providing the best possible care
- Working even more closely with Children's Services so that we share our relative knowledge as much as possible e.g. on safer recruitment practices and training
- Finding more creative ways to obtain vulnerable adults' views of local safeguarding services and using their feedback to make further improvements



Information about safeguarding adults and all our annual reports can be found here:
www.harrow.gov.uk/safeguardingadults

Continuing to improve performance

We are proud of our achievements to date and we have continued to involve our residents in developing and delivering quality services for Harrow.

In 2010 the Government published *Transparency in outcomes: a framework for adult social care*. The framework represents an approach to presenting information on what adult social care has achieved and aims to ensure that the best outcomes are being achieved for those needing social care, their families and carers.

The Adult Social Care Outcome Framework (ASCOF) resulted in 19 performance indicators being developed. Our 2011/12 performance against these indicators can be seen in the attached document; *Harrow's ASCOF performance 2011/12*

Four out of Seven 'national outcome indicators' that were also in last year's framework improved, one was unchanged and two got worse ('social care quality of life' and mental health employment). Five of the national outcome indicators were in the top quarter of London results.

Key achievements:

- A high proportion 81% of clients contacting the Reablement service did not require any on-going social care; and 98% of clients who received home support were 'satisfied' or 'very satisfied' with the service. This is the first year of monitoring the service.
- We had one of the lowest rates of admission to care homes for older people in London
- Of older people being discharged from hospital, 85% of those who received a reablement service were still living at home three months later. Harrow has the fourth largest hospital discharge reablement service in London.
- Despite the challenging employment market we maintained our result of 18% of clients with a learning disability employed during the year.
- We exceeded the target of 50% for the percentage of social care users who receive self-directed support (53% did this year, compared to 39% last year)
- We achieved excellent performance for assessment waiting times, with 98.2% having a completed assessment within 28 days.
- The Equality of Service Provision indicator demonstrates that our services are provided equitably among ethnic groups in Harrow.
- The year end target for carers with services was exceeded, with 55% of clients also receiving support for their carer(s).
- More than 80% of clients reported that it was easy to access information or advice about support and services, even higher than the 73% last year. This was the fourth best result in London.

Identified areas for improvement:

Three indicators were in the lowest quarter of results in London. All were from the recent national user survey, concerning overall satisfaction with services, reporting control over daily life and feeling safe. It is important to note that clients also reported that services had positively impacted on their safety and control. In order to better understand these results we are going to repeat some of the survey with additional questions.

The year end targets for two Mental Health indicators (mental health clients in employment and mental health clients living independently) were not met and performance declined in one of those (employment) this year.

Action:

The survey will be re-run with some additional questions between September and October 2012.

We have developed an in year improvement plan with CNWL and are reviewing our S75 agreement to ensure further improvements.

Change how we work

The way we structure and process the delivery of our service needs to best fit the outcomes we wish to achieve. So far we have achieved at least £1m of savings from changing the way we work.

Access to services

We have made accessing our services easier for residents.

We have transferred a team of advisors, who were previously in various adult social care only teams and sites, into the cross council *Access Harrow* service.



CUSTOMER SERVICE EXCELLENCE

Access Harrow is the Council's 'one stop shop'; a single point of contact for residents to access all council

services across various channels – face to face, telephone, email, web, SMS.

We have therefore been able to bring services together to better assist people with multiple and complex enquiries. Rather than structured around council services our advisers are able to take enquiries around life events – such as, moving house, death of a loved one, being a council tenant, coping with an illness or loss of independence.

Residents have told us that they have had an improved customer experience through greater resolution at the first point of contact.

Latest satisfaction data shows:

90%- When asked "How did you Rate the Overall Service Provided?" Over 90% said 'good' or 'very good'.

95% - When asked "was the enquiry resolved to your satisfaction?" Nearly 95% agreed or strongly agreed.

90%- In our latest survey of people who use adult services, nearly 90% said they had found it easy to contact Adult Social Care.



Assessment of needs

In October 2011 after a comprehensive consultation we introduced a fairer system in that all service users are asked to make a contribution towards the overall cost of their care package based on their ability to pay.

In order to introduce a fairer system a new financial assessment would be necessary to determine a person's ability to pay. New contribution arrangements for existing users began on 1 April 2012 and the contribution arrangements for new users started in November 2011.

We have standardised our means tested financial assessment process to ensure that it is administered fairly and as efficiently as possible.

We now routinely complete benefit checks. This has resulted in many service users receiving the benefits they were entitled to that would otherwise be unclaimed.

Managing the transition to the new arrangements effectively has meant that service users have been able to see clearly from the start, the level of contribution they would be asked to make for their social care and support.



Strengthening our use of IT

This year we have successfully restructured our IT support team and made improvements to our IT systems. Our aim was to improve the arrangements we have to secure high quality information to meet adult social care's information needs efficiently.

The information we collect should involve clear and simple actions and only limited, if any, manual intervention. By reviewing our use of IT we have been able to reduce duplicated and manual recording and this has resulted in more accurate and timely data.

We are now able to capture and use high quality information about the quality of our services more efficiently, to improve decision making and forecasting.

Photo to follow

How we manage money

Central Government is cutting the funding it gives to all councils across the country. Harrow Council will have to make significant cuts to its budget over the next few years and we are therefore going to have to make savings across our services.

In Adults Services we are working hard to deliver efficiencies while improving services for our residents, such as: by helping vulnerable people be more independent; buying services in a different way and making sure we work better as a council.

This year has been challenging given the scale of efficiencies that needed to be delivered. In 2011/12 we have been able to identify efficiency savings of just under £4 million.



We have successfully concluded our consultation on savings in Adults Services with strong positive feedback about the process. A Steering Group was developed in September 2010 before the consultation process began. The Steering Group membership includes representatives from voluntary organisations, Harrow LINK, users, carers and other key stakeholders, and met regularly to discuss progress; shape the way consultation activity was taken forward; and to ensure the activity was inclusive and transparent.

Members of the Steering Group have continued to meet to oversee the implementation of changes and monitor the way the changes are taken forward. It is our intention to maintain an effective, inclusive and transparent relationship with stakeholders, as we move into the new financial year and beyond.

Making the best use of our assets

It is important that while focusing on achieving our vision of enabling increased choice and control for our residents, we make the best use of the assets we have.

We currently have seven in house residential care home units in Harrow:

- Roxborough Park
- Woodlands
- Southdown
- Gordon Avenue
- Bedford House
- 14/15 Kenton Road
- 7 Kenton Road

The Council provides 70 care beds in 8 registered homes for people with learning disability and mental health.

Each of our units is monitored using our Care Planning Standards check list.

Key Achievements:

Following successful registration with CQC, the Council's residential homes were inspected by a lead CQC inspector. All residential homes showed some improvements on last year from our own monitoring checks and all received a "Good" CQC inspection result.

This marks Harrow as a provider of consistently good residential care in the community. This year's other achievements include:

- Total of 17 people were placed into family based care through our Shared Lives scheme (15 long term and 2 respite placements) increasing the number of vulnerable people supported in family based care.
- Roxborough Park received full accreditation status from the National Autistic Society.

Our priorities for 2012-13 include:

NAS accreditation for Roxborough Park



Roxborough Park is a community based residential care service, registered with the Care Quality Commission and run by the council, to provide services to people with multiple disabilities. It is an excellent service and following an assessment process has received a full accreditation status from the National Autistic Society. This is a big achievement as it is one of the few accredited homes in London.

- We are aiming to increase our Shared Lives placements to 25 for both respite and long term by end of financial year which will see an increase of approximately 35%
- Despite the good outcomes, there is still plenty of room for improvement as we aim to become the best residential service provider in London.

Glossary of terms

An alphabetical explanation and meaning of some of the terminology used in the Local Account.

Advocacy

Help for people to express their views about their needs and choices.

Care Quality Commission

Independent regulator of all health and social care services in England.

Carer

Someone who provides unpaid support to family member or friend who cannot manage without this help.

Commissioning

Process the Council uses to plan and buy services for adults with care and support needs.

Direct Payments

Cash payments given to people to pay for the community care services they have been assessed as needing. They are intended to give people greater choice in their care. The payment must be sufficient to enable the person to purchase services to meet their needs and must be spent on services that he or she needs.

Eligibility criteria

Guidance has been issued from the Department of Health about how each Council should set the criteria they use for a person to be eligible for social care services. Councils should ensure that each decision about a person's eligibility for support is taken following an appropriate community care assessment.

Equipment and adaptations

Specialist items provided to service users following an assessment by an occupational therapist or physiotherapist to help them remain safe in their home and perform daily activities.

Extra Care Housing

Extra Care Housing is housing designed with the needs of frailer older people in mind and with varying levels of care and support available on site. People who live in Extra Care Housing have their own self contained homes, their own front doors and a legal right to occupy the property.

Fairer Access to Care

Government guidance for councils to help them set eligibility criteria for adult social care services.

Health and Wellbeing Board

The Government has given local authorities a duty to set up these Boards. The aim is to bring together local Councilors, patient representatives and key decision-makers across health and social care so that local people benefit from coordinated and joined up local services. There is to be a focus on addressing health inequalities, combining resources across health and social care, and the empowerment and involvement of local people.

HealthWatch

An organisation planned to be established as a new independent consumer champion for health and social care. HealthWatch England will be a statutory distinctive part of the Care Quality Commission. Local HealthWatch is being created by developing the role of the existing LINKs (see below).

Home care

Home care or Domiciliary care is care provided in an individual's home, normally of a personal nature such help with dressing, washing or toileting. It can be arranged by Social Services following an assessment of need, or can be arranged privately by the individual themselves, or someone acting for them.

Joint Strategic Needs Assessment (JSNA)

The *Local Government and Public Involvement in Health Act 2007* places a duty on local authorities and PCTs to undertake these assessments. This is a process to identify current and future health and well-being needs

of the local population; informing the priorities and targets set by local authorities and the local NHS PCTs. It enables agreed commissioning priorities that will improve outcomes and reduce health inequalities.

Local Involvement Network (LINK)

LINks were set up to help people influence or change the way their health or social care services are delivered. They are made up of individuals and community groups who work together to improve local services. It is their job to find out what people like and dislike about local services and work with the people who plan and run them to help make them better.

Local Adults Safeguarding Boards (LASB)

Harrow's Local Safeguarding Adults Board is a multi-agency partnership, made up of a wide range of statutory, independent and voluntary agencies and organisations, all working together to keep adults, particularly those who are more vulnerable, safe from the risk of abuse, harm or exploitation.

NHS continuing care funding

This describes a package of continuing health care provided outside hospital, arranged and funded solely by the NHS, for people with ongoing healthcare needs. To decide if a person is eligible for this funding an assessment of healthcare needs takes place. Eligibility for continuing care funding is reviewed on a regular basis.

Nursing care

Care carried out or supervised by a qualified nurse including injections and dressings paid for by the NHS.

Outcome

End result, change or benefit for an individual who uses social care and support services.

Preventative Services

Services that involve early interventions to prevent long term dependency or ill health

Personal Budgets

An allocation of funding given to users of community care services after a community care assessment. The amount should be

enough to meet their assessed needs. People can take them either as direct payments (see above) or – while choosing how their care needs are met and by whom – leave local authorities with the responsibility to commission the services; or they can have a combination of the two.

Personalisation

Personalisation is a social care approach described by the Department of Health as meaning that “every person who receives support, whether provided by statutory services or funded by themselves, will have choice and control over the shape of that support in all care settings”. The purpose is to ensure that services are tailored to the needs of every individual, rather than being delivered in a “one-size-fits all” fashion.

Providers

These are organisations or agencies who are commissioned to provide services on behalf of the council.

Reablement

Timely and focused intensive therapy and care in a person's home to improve their choice and quality of life and maximise long term independence. The aim is that, through short term intervention, people are helped to recover skills and confidence to enable them to live at home.

Residential care

Care in a care home providing personal care such as washing, dressing and taking medication.

Safeguarding

Protecting vulnerable people from neglect or physical, financial psychological or verbal abuse.

Self Directed Support

A description of how a Council plans to arrange social care support by carrying out an assessment of need with an individual; agreeing what help is needed and then determining how much money will be provided to pay for it. This is called a personal budget. The Council then agrees a plan with an individual about how the money will be spent and who will manage the “personal budget”.

Some people choose to manage the money themselves.

Shop4support

This is a web based service designed for Harrow service users and members of the public that provides information, advice and services all in one place. It gives people the opportunity to choose their own care support and services online from over 500 different providers.

Telecare

Equipment, devices and services to help vulnerable people stay safe and independent at home, including fall sensors and safety alarms.

Vulnerable Adult

A person aged 18 or over who may be unable to take care of themselves, or protect themselves from harm or exploitation due to mental health problems, disability, sensory impairment, frailty or other condition.