

Adult Social Care Services

Council Name: Harrow

This report is a summary of the performance of how the council promotes adult social care outcomes 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 Harrow 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:

Adequately

Outcome 3:

[Making a positive contribution](#)

The council is performing:

Well

Outcome 4:

[Increased choice and control](#)

The council is performing:

Well

Outcome 5:

[Freedom from discrimination and harassment](#)

The council is performing:

Well

Outcome 6:
[Economic well-being](#)

The council is performing: **Adequately**

Outcome 7:
[Maintaining personal dignity and respect](#)

The council is performing: **Adequately**

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

- Good political and corporate support for adult social care.
- The Adults and Housing transformation programme is driving improvement.
- A range of survey data (including MORI) is providing feedback from users and carers to inform service provision.
- Low staff turnover, vacancies and sickness absence.

What the council needs to improve

- The council need to systematically gather evidence of positive outcomes, impacts and benefits from service expansion and developments.
- Strengthen the Learning Disability Partnership Boards monitoring role and make it a more effective driver for change.

Commissioning and use of resources

What the council does well

- The council is more financially stable and has increased its reserves. The Audit Commission evaluated value for money within Harrow as Good and found that the Council had focused its resources, which was enabling it to deliver its priorities.
- There has been increased investment in adult's social care.
- Regulatory information is used to inform commissioning and improve the provision of care.

What the council needs to improve

- Develop coherent strategic plans across all user groups informed by the Joint Strategic Needs Assessment.
- Continue to work with providers to develop the market to widen the range of services on offer and ensure that improvements are sustained and built on.
- Continue to raise the profile of the new commissioning team with providers and develop communication systems.

Summary of Performance

There is good political and corporate support for adult social care. Leadership is strong and there is a clear strategic direction, with a step change in performance. Good progress has been made on implementing their Transformation plan and Inspection action plans, with clear priorities for further improvement.

The council was shortlisted for the best achieving council this year in a national awards process, with their work on personalisation being a significant contribution to the bid. Many more people received a Personal Budget, Direct Payment or Carers Service and people are noticing the differences, particularly people with learning disabilities and carers. Externally commissioned surveys are providing the council with positive feedback and a widespread picture of people's views about their services. The balance of care in Harrow is shifting away from an historical over reliance on residential care towards more home based care and there is greater focus on reablement and personalisation. The council need to provide further evidence of positive outcomes as services continue to develop. A quality assurance framework was introduced and reasonable progress made to raise awareness of adult safeguarding issues, to increase partnership working and to improve practice. But much still remains to be done to target training and ensure consistency and quality of practice to safeguard vulnerable adults.

Staffing at middle management level has been strengthened and partnership working is good. The council have strengthened their performance management. In response to a finding from the Joint Review, the council, with partners, need to make the Learning Disability Partnership Board a more effective driver for change.

An Integrated Commissioning strategy has been developed, with national and regional support. The Joint Strategic Needs Assessment has been used to inform it and it includes input from users, carers and staff. However, it is not yet possible to evidence that this has resulted in tangible improvements for people. The council needs to continue to raise the profile of the new commissioning team with providers. Work has started with the independent sector to develop a wider range of services, but this work is at an early stage and needs to be continued. Evidence from regulatory inspections is used to inform commissioning and improve the provision of care. The council have worked with two of their main home care providers to improve their services to being rated adequate, but need to continue this work to ensure improvement is sustained and continues.

The council is more financially stable and has increased its reserves. The Audit Commission evaluated value for money within Harrow as Good and found that the Council had focused its resources, which was enabling it to deliver its priorities. The council have invested £1.5m in services for people with learning disabilities and made modest investment in older people's services.

Outcome 1: Improved health and well-being

The council is performing: Well

The council, with its partners continued to be pro-active in promoting health and wellbeing, with a range of initiatives to promote active lifestyles. Capacity has been strengthened via a Joint Director of Public Health and three Public Health Consultants. However, they need to implement the identified changes to ensure that the health care needs of people with learning disabilities are met. Data from the Joint Strategic Needs Assessment is used to target health needs. The percentage of people overall receiving a review is similar to the London average, with big improvements for people with learning disabilities or mental health issues. The council report lower than average levels of delayed transfers. Intermediate care has increased, but needs to continue to do so to bring Harrow in line with the London average. The council support people with long term conditions to manage their condition effectively. There is a single point of access for reablement in Harrow (in response to feedback) and the service is provided jointly with the Primary Care Trust (PCT). The council report that the majority of people are provided with a rehabilitation package in their own home, by a multi-skilled team, but there is currently little evidence of outcomes. The council have increased the number of drug users accessing treatment. The PCT have invested in end of life care to enable more people to remain at home.

What the council does well.

- The council continued to be pro-active in promoting healthy lifestyles and well-being.
- Information from the Joint Strategic Needs Assessment is used to target health needs.
- Capacity has been strengthened via a Joint Director of Public Health and three Public Health Consultants.
- Residential intermediate care places have been expanded, including a specific dementia service.

What the council needs to improve.

- Implement identified changes to improve access to health therapies for people with learning disabilities.
- Continue to increase intermediate care provision and demonstrate positive outcomes.

Outcome 2: Improved quality of life

The council is performing: Adequately

The balance of care in Harrow is starting to shift away from residential care towards more home based care. The recent home care survey indicated that the majority of people were happy with the service and felt they had control of their lives. The council report increasing the number of people with learning disabilities receiving services in the community this year, but need to demonstrate that they all receive the support they need and continue to address the historical over reliance on residential care. A recent survey confirmed that services for some people with learning disabilities have improved. The council have completed a reablement review and are implementing the actions arising. Preventative services are increasing and investment is planned, but further increases are required and the council need to provide evidence of outcomes and effectiveness in reducing longer term needs. Work has started to improve the equipment service and to recommission Support for Living residential accommodation, but it is too early to demonstrate improved outcomes for service users. Support for carers has increased

and is varied. The carers survey indicates that many people (64 percent) are satisfied with the services they receive.

What the council does well.

- Access to advice and information.
- Length of time waiting for minor adaptations.
- More carers were supported.

What the council needs to improve.

- Continue to improve waiting times for major adaptations.
- Continue to address the historical over reliance on residential care for people with learning disabilities.
- Implement the actions arising from the reablement review.
- Continue to increase telecare provision.
- Continue to increase the number of people with high care needs supported at home.

Outcome 3: Making a positive contribution

The council is performing: Well

The council consults and engages positively with people in Harrow. They have a number of forums to engage users and carers and they are having an impact. For example, being involved in recruitment panels, helping to design the new residential unit and inputting to the newsletter. A quality assurance framework has been introduced and commissioned surveys are providing the council with a widespread picture of users and carers views. The Local Involvement Network (LINK) is established and is developing its role.

What the council does well.

- The council have introduced a quality assurance framework.
- The MORI survey, along with the independent home care survey and the Meals on Wheels survey are providing a widespread picture of users and carers views.
- There is evidence that users and carers are influencing service provision.

What the council needs to improve.

- The council should continue to work with the Local Involvement Network to develop systematic, independent and service user based evaluation of health and social care.
- The council need to demonstrate that carers of people with learning disabilities in transition are fully engaged and influential in plans to meet their future needs.

Outcome 4: Increased choice and control

The council is performing: Well

There is a wide range of information available in different formats, which includes signposting to services available. Feedback from users showed that the majority of people felt they could access the information they needed about the care and support they received. In response to requests the council have also commissioned a web based support service to provide information (including quality) on independent and voluntary sector services to support individuals (including self funders) and allow them to chose their own care.

There has been an increased use of advocacy with case examples providing evidence of positive benefits.

The overall balance of care showed a rise in the numbers of people supported to live at home, with reductions in the numbers supported in residential and nursing care.

Most assessments (95 percent) were completed on time, but improvement is needed to the timeliness of care provided post assessment. There is a range of activity regarding quality assurance of assessment and care planning processes, with some evidence of positive outcomes, but the council needs to systematically audit case files to demonstrate that care management is person centred and consistent.

The council have made positive progress on developing person centred planning for people with learning disabilities and need to meet their objective to replicate this across other client groups.

The numbers of people receiving direct payments or individual budgets have increased dramatically in 2008/9 and there is some evidence of individuals benefiting. The council need to continue to increase the number of people with mental health needs receiving self directed support and to expand the service to meet higher levels of need.

The council have carried out a lot of work to modernise services for people with learning disabilities and need to continue to do so to ensure that more people are supported in the community and that the new Neighbourhood Resource Centres provide the planned flexible, specialist care and access to wider community opportunities.

The complaints service has been improved and information is informing service provision.

What the council does well.

- Information about support and opportunities has been further developed.
- Timeliness of assessments has improved (almost all are completed within four weeks).
- High numbers of carers receive support.
- There is a dedicated team for self directed support, with a positive quality assurance process.
- A high number of people receive self directed support, with good uptake from BME communities.
- Increased use of advocacy.

What the council needs to improve.

- Increase direct payments and personal budgets for those with higher personal care needs and evidence positive outcomes.
- Continue to develop self directed support for people with mental health needs.
- Deliver support and care more quickly after assessment and demonstrate that care management is person centred and consistent.

Outcome 5: Freedom from discrimination and harassment

The council is performing: Well

The council has Beacon status for race equality and there is a strong commitment to promoting Equality and Diversity across the council and with partners. The council's eligibility criteria remains at substantial. Information is available in a variety of formats and via various media. The social care workforce reflects the profile of the community, with high representation from Black and Minority Ethnic (BME) communities, and Customer Support Officers speak a range of languages. The council has achieved level four of the Equality Standards and is moving towards excellence in the new framework. All staff are trained to undertake Equality Impact Assessments, but the council need to demonstrate that information from these is being used to inform improvements. People funding their own care and those not eligible for council funded services are increasingly supported, with access to a range of information and services. The council needs to demonstrate that those people they signpost to services get the help they needed. Assessments and service provision for minority ethnic communities are reflective of the population.

What the council does well.

- Beacon status for race equality.
- People funding their own care are well supported.
- Achieved level 4 of the local government equality standards and working towards excellence in the new framework.
- People across all BME communities are well represented in assessments and provision of services.
- Information from the JSNA is used to target services at specific ethnic groups.

What the council needs to improve.

- Use the information gathered about the needs of people with learning disabilities from ethnic minority communities to develop increasingly specialist, accessible and differentiated services and support.
- Demonstrate that people signposted to services received the help they needed.

Outcome 6: Economic well - being

The council is performing: Adequately

Information on benefits is widely available. The council have worked hard to progress their work on brokerage (they have six independent brokers and three voluntary organisations who are piloting a brokerage and support planning approach). The council are starting to build the foundations to enable increased work opportunities for people with social care needs and are working with partners and various organisations. Numbers in employment for people with learning disabilities however are currently low and it is too early to assess the impact of the new initiatives for people with learning disabilities, mental health needs or carers.

What the council does well.

- Information on benefits is widely available.
- Initiatives such as Slivers of Time and Xcite are helping the council to assist people with social care needs to find paid or unpaid work.

What the council needs to improve.

- Increase the number of people with social care needs getting support to find paid and voluntary work.
- Demonstrate positive outcomes for users and carers of training and employment.

Outcome 7: Maintaining personal dignity and respect

The council is performing: Adequately

Safeguarding is one of the council's three corporate priorities. They have made progress in raising awareness of adult safeguarding issues, which has been enhanced by a new website and a dedicated Safeguarding Champion. Work has also been undertaken to increase awareness of safeguarding within BME communities, with referrals increasing as a result. There has been investment in safeguarding and capacity has been increased with additional staff. The Safeguarding board has been restructured and now has better representation.

The council are implementing new safeguarding quality assurance processes, which are being used to identify actions needed to further improve practice. Recommendations for improvement include refining the recording process, commissioning some specific training (it was found that too many cases were being taken through the SGA route that did not need to be) and providing further guidance on recording of alerts.

Training for social care staff is similar to the London average (80 percent), but is the lowest in London for independent sector staff (16 percent) and the council need to take urgent action to increase this.

The council have strengthened reference to safeguarding requirements in service agreements with providers in response to feedback from the Joint Review. They have worked with poor providers to help them to improve, but need to ensure that this improvement is sustained and built upon.

What the council does well.

- Safeguarding adults in vulnerable circumstances has a high priority across the council and with partners.
- There has been increased capacity in safeguarding.
- Contracts with providers include safeguarding requirements.

What the council needs to improve.

- Continue to increase safeguarding training for both council and independent sector staff.
- Ensure recommendations from audits are implemented to improve consistency of practice and inform training.
- Complete and implement findings from the review on the numbers of allegations about paid carers.
- Sustain and develop improvement with commissioned providers.