

Adult Social Care Local account 2010/2011



HILLINGDON
LONDON

Foreword

This Local Account for Hillingdon as an important part of the Council's commitment to be transparent with local residents about what we do and the difference we are making to the lives of our residents. It shows the Council's adult social care performance from April 2010 to date.

We are transforming our services to deliver our aim that residents have the choice and control to live safe, healthy, independent lives in supportive local communities. We are doing this by providing advice and information, preventative measures such as TeleCareLine assistive technology, social care services and support designed around the individual, and supporting the delivery of suitable housing, including adaptations to homes. Close partnership working across social care, housing and health care services underpins the transformation of our services.

Who is eligible for social care and support services?

The following groups of people are considered for social care and support services.

- Adults with learning disabilities
- Adults who have physical disabilities or sensory impairment
- Older People
- Adults who suffer from a mental illness
- Carers who provide a substantial amount of care on a regular basis

All social care enquires are dealt with through the single point of contact service, Hillingdon Social Care Direct (HSCD).

Contacts include:

- requests for assessments;
- notification of a change in circumstances;
- minor changes in service provision/service provision queries;
- provision of simple equipment;
- requests for emergency intervention;
- signposting to other organisations.

For new requests for service (referrals) HSCD gathers information about the person who is the subject of the referral. This will include information about their circumstances and the support they need. This information will be used to carry out a screening assessment to establish if social care services are appropriate to meet the person's needs. Simple services such as the Meals Service can be arranged.

If appropriate, a Needs Led Assessment will then be carried out by a social worker to establish eligibility for social care and support using the Fair Access to Care criteria (FAC).

www.hillingdon.gov.uk/index.jsp?articleid=19306

www.hillingdon.gov.uk/media/pdf/h/4/Fair_access_to_care.pdf

This assessment will take into account:

- the level of need;
- the level of risk;
- family and wider social circumstances;
- the level of support that is being provided.

If social care and support are to be provided there will also be a financial assessment. The Needs Led Assessment will take varying amounts of time to complete depending upon the complexity of individual needs. However, the standard is to complete all assessments within four weeks of receiving the request.

In 2010/11

- 7,153 contacts from new clients were made to adult social care to request services or further assessment
 - ⇒ 3,541 of these contacts were managed as basic service requests
 - ⇒ 3,612 of these contacts were referred for full assessments
- 82.7% of assessments for new clients were completed in 28 days, compared to 80% in 2009/10
- 6,051 people received an adult social care service or support, compared to 5,769 in the year 2009/10, an increase of 5%
- 86.1% of new service users received all their services within 28 days following the completion of their assessment, compared to 80% in 2009/10.

What we are doing to keep people safe

Safeguarding

Hillingdon Adult Social Care Services has a team of social workers and support staff dedicated to safeguarding adults. Abuse can come in many forms, including physical, sexual, emotional and financial, and can affect both children and adults.

The following example highlights a safeguarding adults case and the outcome from the intervention of the team.

Mr and Mrs X, an elderly frail couple, had an adult son who lived with them and who was physically abusing and intimidating them. He suffered from mental health problems and his behaviour would deteriorate when he was non-compliant with his treatment. Mr and Mrs X did their best to be supportive to their son, and were reluctant, initially, to take action to protect themselves. Eventually, with the involvement of the Police, Social Services and other family members legal action was taken to exclude the son from the family home, offer him alternative support, and protection measures put in place so Mr and Mrs X could alert services should their son represent a threat to them again.

In January 2011, the Social Care, Health and Housing department with their partners launched a Safeguarding Adults publicity campaign, which focussed on:

- explaining what abuse is;
- the fact that abuse can be hidden;
- encouragement for people to report concerns confidentially.

Posters featured in Hillingdon People, The Gazette and Leader and public places around the borough. Information was also available on the Council website.

www.hillingdon.gov.uk/reportabuse

During 2010/11, 1340 notifications were made to the Adult Safeguarding Team. All were screened and 30% of this total progressed to further investigation.

The Greater London Boroughs have developed multi-agency safeguarding adults at risk procedures that now apply across the whole of London. So, wherever abuse occurs people can expect a consistent response, applying the good practice developed in these procedures.

TeleCareLine

TeleCareLine is a monitoring and alert system that can help support people to live independently in their own homes. The Hillingdon TeleCareLine Service offers a range of supportive TeleCare solutions and is available to all residents within Hillingdon borough providing a lifeline to people in a variety of vulnerable situations within the home. The aim is to enable people to continue living safely, securely and most importantly, as independently as possible within their own homes. www.hillingdon.gov.uk/telecareline

From April 2010 to September 2011, 898 installations of equipment have been made to residents in Hillingdon

The following case study illustrates how the TeleCareLine Service has helped a resident to regain her independence.

Ginny was admitted to hospital in December. While in hospital it was concluded that she did not have the capacity to make decisions about her safety and that she needed assistance with her personal care needs and also used a wheelchair to get around. Ginny often fell when she was getting out of her wheelchair so she moved to a nursing home where she continued to have several falls. She continued to express a desire to move home and her daughter supported this. While she was in the nursing home, Ginny received rehabilitation treatment and made marked progress, resulting in plans being made for her to return home.

A TeleCareLine referral was made for a pendant alarm so she could call for help if she fell, a smoke detector and bogus caller system. Following her return home, Ginny was given a support package of two daily visits, along with the TeleCare scheme. After a short period, Ginny felt reassured by the TeleCare system and was able to cancel her home care package.

Ginny says that after using her pendant to call for assistance a few times, she felt reassured that she could get assistance at the touch of a button, this helped her grow in confidence. Her daughter is also feeling reassured by the installation of the system.

How our customers viewed the service

In February and June this year, we spoke to 99 customers. 92% of the people we spoke to said that they are very satisfied or satisfied with TeleCareLine

- Residents are particularly happy with increased safety and security, reassurance and peace of mind and increased confidence that TeleCareLine has given them.
- Quotes: "I feel reassured that I can contact someone", " I feel secure and safe and I can rely on it" "Much, much better, it gives her peace of mind. She feels safer, before it was hard for her to be at work and thinking of mum, but now she knows that if she presses the button then someone will be there for her".

Inspection Team

The Hillingdon Care Services Inspection team was established to ensure that the department has an active role in ensuring that all care meets the required quality standards.

The team focuses on all local care providers (private, voluntary sector and in-house), the team inspects care homes; domiciliary care agencies, day centres and some supporting housing schemes in Hillingdon. An inspection will involve meetings with relatives and residents.

There are 57 registered homes within Hillingdon borough and from April 2010 until September 2011, 196 visits have been made to these premises by the inspectors. In 2010/11 inspectors made 310 visits to people in their own homes who are receiving independent home care services.

Following each inspection, the team issues a report with recommendations for improvement to care providers where this is needed. The team also holds information on all care providers, which highlights any potential risk to residents. In addition, the team liaise closely with the Safeguarding Team and assist the care management team in responding to complaints.

What we are doing to promote healthy and independent lives

Supported/ Extra Care housing

Extra Care is an effective way of supporting older people to live independently. It provides people with the security and privacy of a home of their own, with a range of facilities on the premises plus staff on hand day and night to provide the right level of care and support to meet individual needs. For some people this may mean just a few hours of help a week. For others with higher needs this can mean a positive alternative to residential care www.hillingdon.gov.uk/supportedhousing.

Two brand new developments of Extra Care flats for rent will be available in Hillingdon in 2011/12:

- Triscott House in Hayes has 47 new one and two bedroom Extra Care flats. This is a completely new development on the site of one of our former sheltered housing schemes.
- Hillingdon is also working with Paradigm Housing to build 48 new one and two bedroom Extra Care flats at Cottesmore House in Ickenham. Cottesmore House is part of the larger development called Ickenham Park on the site of what was RAF West Ruislip.

Both schemes will have 24 hour professional care and support services on site. The flats are carpeted, with fully equipped kitchens and will be adapted to meet individual disability requirements. The schemes will also have a café serving hot meals, lounge and conservatory, communal garden, shop and hairdressing. They are located close to local facilities, and staff are on hand to help arrange activities.

Flats at both Cottesmore House and Triscott House will be allocated by the council and will be available to people aged over 55 years who have less than £30,000 in savings or equity. The council is encouraging a mix of people with low, medium and high needs. People can refer themselves or be nominated by their landlord, hospitals, sheltered

housing schemes, care homes or social worker. Everyone will receive help to agree their personal care and support needs and to arrange the move.

A representative of the Homes and Communities Agency said this about the Triscott House development:

‘this carefully considered scheme will provide older members of the community with a safe environment where they can retain their independence and benefit from a range of facilities and services right on their doorstep. I was particularly impressed by the attention to detail and high design quality. It is very encouraging that Hillingdon Council shares our vision for creating places that will have a positive impact on older people’s quality of life.’

Re-ablement

Reablement is a way of working with residents to rebuild confidence and make sure that they become as independent as possible.

The current in-house home care service has been remodelled under this project, into an effective and efficient reablement service. The service is now better placed to deliver improved outcomes for residents that require short, yet intensive support. Reablement services are often provided when someone is discharged from hospital and works closely with health partners through the support of physiotherapy services.

In 2010/11, 210 people received reablement services and of these 34% achieved the original reablement aims – this means that they do not need any ongoing support from social care services.

Since commencement of the reablement project there has been a reduction in the number of people re-admitted to hospital within 3 months of their discharge.

The following case study explains how the reablement services assisted one client

For 11 years, Margaret cared for her husband who lived with Parkinson’s disease at home. When Margaret fractured her ankle he was admitted to a care home. Following his death Margaret suffered another fall in which she badly bruised her left arm and shoulder. This knocked her confidence and resulted in her spending most of her time in bed, relying on the support of her niece.

From being someone who was able to do her own shopping and cleaning, she found it increasingly difficult to dress and wash herself, as well as cope with domestic tasks. She found it hard to eat and drink making it difficult for her to maintain her weight, which affected her general wellbeing.

Margaret had not personally received any support from Adult Social Care before, but wanted to regain her independence by being able to shower and prepare her own meals. Her aims were to increase her appetite and improve her mobility and strength.

Outcome

- The Reablement Team worked very closely with health colleagues to improve these aspects of Margaret’s life. A dietician provided advice on increasing appetite and weight gain. The physiotherapist provided strengthening exercises and walking equipment.

- The reablement programme focused on personal care, increasing activity and outdoor mobility, so Margaret was able to walk to her local shop. “The team help me want to get better and feel determined to do this,” says Margaret.
- At the end of the reablement Margaret returned to washing independently, doing her own cleaning and laundry and going outside with her friend. Margaret has no ongoing care needs.

How our customers viewed the service

56 reablement customers completed telephone interviews in March 2011.

61% are satisfied with the help they received (only 7% dissatisfied). However, 25% said they did not know what the reablement service is. Their comments have enabled us to look at our approach and identify areas where we can improve the service and increase customers’ understanding of the reablement service. Customers will continue to help inform and develop the service.

Well-being centre

The NHS Well-being Centre opened in July 2010, it is based in Boots in The Chimes and is open 6 days a week. This was a project run in partnership with Central North West London NHS Foundation Trust, Hillingdon council, PCT and NHS Hillingdon. The objective of the centre is to improve the mental well-being of people who live in Hillingdon.

The Well-being Centre is the first of its kind in the country and offers people the opportunity to informally seek advice about a wide range of services including help with drug and alcohol problems, parenting support, being a carer and access to employment and volunteering opportunities. There are booked appointments and drop in sessions.

Since July 2010, over 2,000 people have attended the centre.

uxbridge.uxbridgegazette.co.uk/2010/07/nhs-wellbeing-centre-opens-in.html

Employment and training,

21 people with learning disabilities have taken part in paid employment opportunities since April 2011. Some of this has been on a regular weekly basis (within the permitted work benefits regulations).

This employment has included administration duties at the Civic Centre, gardening projects for local areas and assisting with the collection of trolleys at Heathrow airport. People with learning disabilities have also had opportunities to undertake work experience for 1 day a week for 8 weeks. This has included work such as preparing mail shots for council services, administration and reception duties within Disability Provider services and Transport for London, (78 in Aug 2011), and working in the shop and potting plants at the Rural Activities Garden Centre.

What our customers asked for

In December 2009, 50% of service users with a learning disability who completed face to face interviews wanted to work or have some work experience. This feeling was also expressed when 60% of users in a similar survey also wanted to work or carry out work experience

What we are doing to enable people to have choice and control over their lives

Self-directed support

This is a national initiative to transform the way in which adult social care services are delivered. Hillingdon is dedicated to improving the lives of those requiring care and support through the use of the self-directed support initiative.

If a person is assessed as being eligible for adult social care services under the Fair Access to Care Standards criteria, they will be considered for self-directed support. Those who are suitable for self-directed support will be given a personal budget and will be able to decide how this money should be spent to meet their eligible needs.

The idea is that support is tailored to individual requirements, preferences and required outcomes with the local authority. It is about the individual having as much choice and control as possible over how the money available for care and support is spent. Funding for support is agreed in a fair, transparent and flexible way.

www.hillingdon.gov.uk/index.jsp?articleid=17811

989 people in Hillingdon were in receipt of a personal budget at the end of June 2011 for their social care support. The number of people using self-directed support continues to rise every month. At the end of March 2011, 16.7% of social care users were in receipt of self-directed support; this had risen to 21.3% in June 2011.

Prepayment cards

During 2011/12 we will introduce the use of pre loaded payment cards. This will help people to have more control of their personal budgets. It will enable us to pay funds to individuals who are eligible for social care funding as part of their care provision. The pre-loaded card works just like any of the other bank debit cards that we use in our everyday lives.

Case study

- Mr and Mrs L are an older couple living in a quiet road close to the local bus route. Mrs L has been caring for her husband since 1995, when he had surgery for a triple bypass. As a result of the surgery, he has severe memory problems and sudden and acute episodes of collapse when paramedics need to be called. Mrs L has found herself increasingly reluctant to leave her husband on his own, even for short shopping trips.
- Last year, when her husband was in hospital, the doctor recognised the stress Mrs L was under and referred her husband to Adult Services for assessment. The social worker suggested a personal budget as she felt it would give Mr and Mrs L the flexibility they needed.

The personal budget

- Provides four hours of support from Crossroads, to enable Mrs L to do her shopping and also to have time for herself.
- One day a fortnight provided by a local agency to enable Mrs L to have a day's respite and for care to be provided for Mr L, a meal cooked for him and assistance with the housework. On this day Mrs L is often taken out to lunch by her daughter and has also been able to use it to visit her sister who lives in Hampshire.

- Other hours are saved up for periods of respite as required. Mrs L has just had knee surgery and Mr L received respite care from a local provider.

What we are doing to support carers

Carers provide the greater part of community based care. In Hillingdon the vision for carers services is that by 2013:

‘Timely and individually appropriate support will be available to all carers to enable them to maintain a balance between continuing with their caring responsibilities if they so choose and having a life outside caring.’

In 2010/11, 1,236 carers either, had their own or joint assessment or review, and received a specific carers service. This is compared to 968 in 2009/10 (a 28% increase).

Of these 1,236 carers, 929 received a carers service (289 residential or nursing care respite placements) and 307 received specialist information and advice.

In 2010, a Carers Campaign was launched targeted at people who did not necessarily see themselves as carers. The campaign aimed to inform people of the help and support available. As well as posters in public places and pages in Hillingdon People, postcards were also produced and placed in GP surgeries, pharmacies, libraries etc. Information was also made available on the council website - www.hillingdon.gov.uk/carers

The annual Carers Conference took place in June 2010 and 153 carers attended. Those people attending the conference helped to develop a Carers Emergency Plan. These plans provide important information about the cared for person should the carer suddenly be unable to provide care, due to an accident, for example.

The council tendered for a centrally-based Carer Support Project which was won by Hillingdon Carers. This project provides information, advice and guidance for all carers, regardless of the needs of the supported person.

During 2010/11 Hillingdon Carers helped families in Hillingdon claim £834,778 in benefit entitlements.

The Commissioning Team held a number of Listening Exercises and general open ‘Speakeasy’ sessions with carers, so that carers could share their experiences of services.

How are customers are helping us shape carers service

- We are currently carrying out in-depth interviews with people who have recently had a carers assessment to review the impact of carers assessments with a view to maximising the support available for carers.
- We also plan to engage with carers of people with young onset dementia as we need to understand more about the specific needs of this client group.

What we are doing to work with health and other partners to provide effective services

Health and Well-being Board

Hillingdon's Health and Wellbeing Board is a multi-agency group. It aims to make Hillingdon 'A borough with excellent health, social care and housing, where all residents can enjoy fulfilling and happy lives.' The purpose of the Health and Wellbeing Board is to provide leadership and direction across agencies that deliver services to improve the health and wellbeing of the residents in Hillingdon.

Since April 2010 the Board has been responsible for monitoring agreed targets, which have included the following.

- 5 GP practices improving staff awareness of carer issues. As a result there has been a 43% increase in carers registered on the carers register with these 5 GP practices.
- The adoption of a retail model for Occupational Therapy equipment valued between £20 and £100. The retail model should be available to the public in 2011/12.
- Employment for people with mental health needs has increased to 10.1%, this is above the target which was set as 8.53%.
- 287 vulnerable people have benefited from improvements to their homes – exceeding the target of 250 in 2010/11.
- A clinical review of hospital re-admissions within 30 days has been completed, and a clinical plan developed and agreed by partners. This plan will support a reduction in overnight admissions when appropriate, including people with dementia.

West London Alliance

The West London Alliance (WLA), formed in 1998 by the London Boroughs of Brent, Ealing, Hammersmith & Fulham, Harrow, Hillingdon and Hounslow, aims to promote the economic, environmental and social well being of the West London community.

www.westlondonalliance.org

Projects have included co-ordinating and facilitating a WLA Improvement and Efficiencies Programme with a particular emphasis on Adult Social Care Services. The aim of this project is to better manage the care market and achieve savings (while improving quality) in the provision of Homecare and residential care. This includes managing the cost rises demanded by the care market.

Projects for older people

1,500 burglar alarms have now been installed into the homes of older people and all older people receiving an alarm also receive an information pack on home security. This project was funded by the Leader's Initiative and exceeded the target by 500.

300 homes of older people in the private sector have been improved in 2010/11 under the 'Decent Homes' project. The improvements carried out to make dwellings decent are mainly to improve thermal comfort by way of heating or insulation. Other improvements included repairs where necessary to roofs, windows, bathrooms and kitchens.

During 2010-11 heaters were delivered to a total of 18 households across the borough with an average of 2 heaters provided to each recipient during the loans period. A total of 3 financial grants were awarded to recipients to assist them with meeting the additional electricity costs associated with operating the heaters.

What we are doing to involve residents

Hillingdon Council is committed to giving residents the maximum opportunity to share their views on what it's like to live in Hillingdon, what they think about services, the performance of Hillingdon Council, and what they think our priorities should be. These views ultimately help us to shape and design current and future services.

To help us achieve this we have developed 10 resident engagement performance standards www.hillingdon.gov.uk/media/pdf/k/p/aschh_issue2.pdf. The standards maximise the opportunity for residents views to form part of our decision making processes, in a transparent and inclusive way.

Hillingdon Council has over 60 resident groups, forums and assemblies. These include the Disabilities Assembly, Older Persons Assembly, Learning Disabilities Forum and a range of service specific user and carer groups.

These groups enable people who live and/or work in the borough the opportunity to:

- Have their say in how services are provided in the Hillingdon
- Receive information on local/national direction, changes in legislation, and Hillingdon's plans for services across all areas.
- Tell Hillingdon and their partners the issues affecting them and their views on services.
- Use the groups/forums/assemblies to change and influence services, plans and strategies.

Hillingdon carry out an annual plan of engagement and consultation across the council and a wide range of techniques are used including: in-depth interviews (face to face or telephone), focus/discussion groups, surveys (postal and face to face), observational techniques (for people with a learning disability who have complex needs) and longer term studies where people are interviewed in various stages of their life, for example following a persons progress into independent living.

Hillingdon Council employs impartial, trained and qualified Community Peer Researchers who speak to residents in a range of settings, including at their homes, day centres, community centres etc. This qualitative data is helping us to understand the complexities of residents needs and aspirations.

The councils "Have your Say" webpage www.hillingdon.gov.uk/index.jsp?articleid=8883 includes all the current engagement/consultation and the reports/findings of activity that has already taken place.