

APPENDIX 1

Assessment of Performance Report 2009/10

ADULT SOCIAL SERVICES ASSESSMENT OF PERFORMANCE 2009/10 : Hillingdon

Contact Name	Job Title	
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The report will produce 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 2009/10 in the Performance Assessment Guide web address below, for more detail.		
 Performing Poorly - 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 fo To see the outcomes framework please go to o		

2009/10 Council APA Performance

Delivering outcomes assessment Overall council is:	Well
Outcome 1: Improved health and well-being	Well
Outcome 2:	Well
Improved quality of life	, vvcn
Outcome 3:	
Making a positive contribution	Well
Outcome 4:	Adaguata
Increased choice and control	Adequate
Outcome 5:	
Freedom from discrimination and harassment	Well
Outcome 6:	
Economic well-being	Well
Outcome 7:	
Maintaining personal dignity and respect	Well

Council overall summary of 2009/10 performance

There has been strong political and corporate support for the adult social care agenda in Hillingdon. A positive Local Strategic Partnership has developed and work has progressed to develop and act on engagement with local communities. The council has worked well with partner agencies and this work has been progressed further with the development of the Well-Being Board and a new Well-Being Strategy.

People who use services and carers are encouraged to be actively involved in the community in a variety of ways and the council's Customer Engagement Strategy has been well embedded. Feedback from users and carers across all groups is generally positive and the council has demonstrated various examples of their influence on both service development and improvement. There has been positive engagement from partners, staff and service users in developing systems and processes to enable transformation. The numbers of people currently receiving self directed support are fairly low, although they include some people with higher level needs.

The council are aware that they are currently spending more than average on residential care and moving resources away from this area is a key part of their strategy. Plans are in place to change the way the council operates and create £19m of savings in 2010/11. A carers champion is in place and supporting carers is a high priority for the council. However, although services have increased, they need to continue to do so to bring the council in line with comparators.

Membership of the Safeguarding Board has been improved and it has met its 2009/10 targets. All partners have agreed to a single Safeguarding Business Plan and sub groups, with appropriate representation are progressing work. The council have a dedicated safeguarding team with a single point of contact and are able to demonstrate positive outcomes. The council has completed actions arising from the 2008 Service Inspection into safeguarding of adults and there is evidence of improved outcomes for service users and carers. Work is ongoing to look at the appropriateness of alerts that come into the dedicated team.

Leadership

"People from all communities are engaged in planning with councillors and senior managers. Councillors and senior managers have a clear vision for social care. They lead people in transforming services to achieve better outcomes for people. They agree priorities with their partners, secure resources, and develop the capabilities of people in the workforce".

Conclusion of 2009/10 performance

There is strong political and corporate support for adult social care in Hillingdon. There is a clear vision, developed via the Local Strategic Partnership and with engagement from local communities. Plans are informed by the Joint Strategic Needs Assessment. The council are recruiting a new Director of Adults Social Care, Health and Housing, but have robust interim arrangements in place. All actions arising from the 2008 Service Inspection have been completed and there is evidence of improved outcomes for service users and carers.

Partnership working is progressed via the Well-Being Board and a new Well-Being strategy has been developed with partners to drive improvements. There are formal partnership agreements for all user groups and plans for further integration with health, including a single assessment process and joint OT and community nursing teams. Hillingdon have a framework to enable their plans to be linked to their finances, as well as mechanisms for identifying and managing risks, including with providers.

Progress has been made in developing the systems and processes to enable transformation, with good engagement from partners, staff and service users. The council have also been working to ensure that they have the appropriate leadership and management capacity to implement it. The numbers of people currently receiving self directed support are fairly low, although they include some people with higher level needs. The council have plans to ensure that self directed support is available to all by 2011. Hillingdon have reported as 'fairly or very likely' to achieve all of the "Putting People First" milestones. A pilot of an in-house brokerage service was completed during 2009/10. The service will be fully implemented from August 2010 onwards.

The council's single point of access is embedded and leading to high satisfaction and improved outcomes. There are plans in place to continue to modernise and extend services to allow more people to live independently.

The council have a dedicated member of staff to manage recruitment and retention (staff turnover and sickness absence is average) and although vacancy levels are quite high, the council report that front line services are protected. Various training programmes are supported to enable staff to increase their skill levels. There are improvement targets across all teams, with regular monitoring of performance, both at a team level and individually.

Key strengths

- There is strong political and corporate support for social care and a clear vision, which has been developed with engagement from users, carers and stakeholders.
- There is evidence of good partnership working.

- Continue to progress the transformation agenda to establish self-directed support enabling choice, independence and personalisation of social care.
- The council should review actions to support the provision of external, independent brokerage support for people using self directed payments following the implementation of their in-house service.

Commissioning and use of resources

"People who use services and their carers are able to commission the support they need. Commissioners engage with people who use services, carers, partners and service providers, and shape the market to improve outcomes and good value".

Conclusion of 2009/10 performance

Hillingdon systematically involve clients, carers and stakeholders in commissioning via a range of means and there is evidence of their impact on commissioning decisions, for example, the development of the Hillingdon Centre for Independent Living and the development of a Disabled People's Plan to identify priorities. The JSNA and various toolkits are used to inform commissioning and predict future needs. There is evidence that specialist services are commissioned to meet needs.

A service directory, which contains information on the cost and quality of services, is currently being tested, with implementation planned for October 2010. The council are working with providers and other councils to develop the market, particularly to support the transformation agenda and will be reviewing all commissioned services over the next few months. They have reduced their reliance on block contracts in order to provide more flexible care.

Hillingdon currently have a joint commissioning team and some joint services. There is evidence that this is leading to efficiencies and better outcomes for people, for example, new stroke after care classes, which started in 2009/10 jointly with health and social services and has been positively rated by those who have used it.

The council have systems in place to routinely monitor performance of contracted services (including announced and unannounced visits, data from electronic call monitoring, feedback from users, council staff and partners and reports on safeguarding) and work with providers to ensure improvements where necessary. Nearly all services used are with providers rated Good or Excellent.

The council have carried out extensive work to create efficiencies and ensure value for money. For example, by modernising services, via joint procurement with other West London councils, via a single point of contact and by improving income collection.

Care Quality Commission

They are aware that they are currently spending more than average on residential care and reducing reliance on residential care is a key part of their strategy. Plans are in place to change the way the council operates and create £19m of savings in 2010/11.

Key strengths

- Clients, carers and stakeholders are systematically involved in commissioning decisions.
- Systems for contract monitoring ensure that services are of a good quality
- Extensive work is carried out to ensure value for money and create efficiencies.

- Continue to work with providers to develop the market to support transformation.
- Continue to reduce reliance on residential care and offer a greater balance of care.

Outcome 1: Improving health and emotional well-being

"People in the council area have good physical and mental health. Healthier and safer lifestyles help them lower their risk of illness, accidents, and long-term conditions. Fewer people need care or treatment in hospitals and care homes. People who have long-term needs and their carers are supported to live as independently as they choose, and have well timed, well-coordinated treatment and support".

Conclusion of 2009/10 performance

The Care Quality Commission has agreed to accept the judgement awarded for Outcome One from the 2008/09 year into the 2009/10 assessment. The council has confirmed, through self declaration that it is continuing to perform well in 2009/10 for this outcome. CQC will continue to monitor any indicators of change to this performance.

Outcome 2: Improved quality of life

"People who use services and their carers enjoy the best possible quality of life. Support is given at an early stage, and helps people to stay independent. Families are supported so that children do not have to take on inappropriate caring roles. Carers are able to balance caring with a life of their own. People feel safe when they are supported at home, in care homes, and in the neighborhood. They are able to have a social life and to use leisure, learning and other local services."

Conclusion of 2009/10 performance

The Care Quality Commission has agreed to accept the judgement awarded for Outcome Two from the 2008/09 year into the 2009/10 assessment. The council has confirmed, through self declaration that it is continuing to perform well in 2009/10 for this outcome. CQC will continue to monitor any indicators of change to this performance.

Outcome 3: Making a positive contribution

"People who use services and carers are supported to take part in community life. They contribute their views on services and this helps to shape improvements. Voluntary organisations are thriving and accessible. Organisations for people who use services and carers are well supported".

Conclusion of 2009/10 performance

The Local Strategic Partnership ensures that users and carers are actively involved in the community in a number of ways, for example, via voluntary work and involvement in community safety initiatives and via participation on Residents Panels, Residents and Tenants associations, strategy groups and committees.

Hillingdon has a Customer Engagement Strategy. Consultation with users and carers across all service user groups is carried out routinely and via a range of methods. Feedback is generally positive and there are various examples of their influence on the development and improvement of services, for example, the design of extra care housing, activities at day centres, planning of menus, increased short breaks for carers and the development of a new Well Being centre. Specific work is carried out in order to engage with hard to reach groups, for example, the Streets Ahead campaign, surgeries on welfare benefits in community groups (organised via faith leaders) and specific events in day services. There is evidence of specialist services being developed as a result. Work is progressing to develop an engagement framework across partners.

There are a range of voluntary groups in Hillingdon, as well as a Volunteer Centre to support the needs of all users and carers, including those from hard to reach groups. Voluntary groups are integral to the council's development of services and are represented on various boards, for example, the Safeguarding Board, the Learning Disability Partnership Board, the Mental Health LIT and Joint Strategy Groups. The council works with them to ensure that services are developed to meet the needs of all users and carers.

Hillingdon's LINk is well established and is influencing service improvement. They have been involved in strategic planning, recruitment and tender processes and worked with the council on their Transformation agenda. The council are on track to establish their User Led Organisation by the end of the year.

Care Quality Commission

The council have been developing customer engagement as a priority to ensure the transformation of adult social care in Hillingdon is influenced by service users. Surveys, conferences and events have been started or are planned to inform the transformation agenda. Carer and service user representation on the Transforming Adult Social Care Board is progressing.

Key strengths

- Users and carers are engaged in a variety of ways and feedback is routinely used to develop and improve services.
- The council works closely with the voluntary sector to develop services, with positive outcomes for users and carers.

- Continue with work to establish a user led organisation.
- Further embed the customer engagement strategy to ensure principles are systematically applied across all services.

Outcome 4: Increased choice and control

"People who use services and their carers are supported in exercising control of personal support. People can choose from a wide range of local support".

Conclusion of 2009/10 performance

The council are on track to transform social care in Hillingdon through the delivery of successful pilots of personal budgets with young people and a business improvement delivery programme.

Hillingdon have a dedicated single point of contact, with evidence of high customer satisfaction. Information is available on the council's website and is publicised via a quarterly magazine. The council are currently reviewing the information available, with a view to improving it with input from customers.

The review of advocacy services is now complete and the new service went live on the 1st of April 2010. Evidence of initial outcomes is positive.

The new assessment and referral process has been embedded. Further work is being carried out (including with partners) to improve recording systems and ensure that the council increase their waiting time indicator, to bring them in line with comparators and meet their March 2011 LAA target.

The council have worked hard to develop strong processes to support self directed care and are providing personal budgets for some people with high level needs. However, numbers are currently lower than comparators and planned work needs to be progressed in order to achieve the 2010/11 target. There has also been some increase in the number of people receiving direct payments. Hillingdon have redesigned their assessment and care management systems to support personalisation, with more outcome focussed care plans, however, it is too early to evaluate the impact. An in-house brokerage service has been piloted and will be implemented in August 2010.

An average number of people overall are supported to live independently and slightly higher than average numbers received

Care Quality Commission

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residential or nursing care. Work has been carried out to address the council's historical over reliance on residential care for people with learning disabilities. The provision of telecare has increased and further work is planned to extend reablement services, modernise day services and increase the supply of supported/extra care housing. Supporting carers is a high priority for the council and they have a carer's champion. However, although support has increased, they need to continue to do so to bring the council in line with comparators.

The number of complaints has fallen and is much lower than for comparator councils. Hillingdon attribute this to early resolution of issues.

Key strengths

- The council's single point of contact allows easy access to information and there is evidence of high satisfaction.
- Early resolution of issues has resulted in a decrease in the number of complaints taken forward.

- Continue work to improve the timeliness of assessments and care packages.
- Continue, as planned, to increase the numbers of people receiving self directed support.
- Continue to increase support for carers.

Outcome 5: Freedom from discrimination and harassment

"People who use services and their carers have fair access to services. Their entitlements to health and care services are upheld. They are free from discrimination or harassment in their living environments and neighborhoods".

Conclusion of 2009/10 performance

Information, including regarding eligibility, is available on the council's website and via the contact centre. The council are able to ensure that eligibility criteria is fairly applied across all communities and that decision making is consistent via their single point of contact and established quality assurance process. People who do not meet the eligibility criteria are signposted to other help in the community. A range of services are provided to meet people's needs, including harder to reach groups, for example respite day care for Asian communities and culturally specific meals services. The council have recently recruited a member of staff to work specifically with the voluntary sector and monitor services and outcomes for people.

Hillingdon are 'achieving' under the new Equalities Framework for Local Government, a performance improvement and benchmarking tool and working towards excellence. Equalities training is mandatory for both council staff and providers and monitoring takes place to ensure that standards are met and action taken when necessary. Customer care is routinely monitored against council wide standards and the council carries out a wide variety of work to reduce discrimination and promote equality, for example, youth interfaith events at schools, promotional activities in the community, specific work with the travelling community and faith leaders' breakfast meetings. Assessments and services provided for minority ethnic groups reflect the population profile.

The council undertakes equality impact assessments for their services and these have been refreshed during 2009/10. Any action plans that arise as a result of the assessment have been incorporated into team plans which are regularly monitored.

The Sustainable Community Strategy includes a programme of community safety initiatives to ensure that people helped to live at home and carers are protected. There is evidence that people feel safer as a result.

Key strengths

- Action is taken to ensure that eligibility criteria is fairly and consistently applied.
- A range of services are provided to meet the specific needs of communities.
- Community safety initiatives have helped people feel safer.

- Continue work to achieve excellence in the new Equalities framework.
- Demonstrate positive outcomes for people who do not meet eligibility criteria and are sign posted elsewhere.

Outcome 6: Economic well-being

"People who use services and their carers have income to meet living and support costs. They are supported in finding or maintaining employment".

Conclusion of 2009/10 performance

The Care Quality Commission has agreed to accept the judgement awarded for Outcome Six from the 2008/09 year into the 2009/10 assessment. The council has confirmed, through self declaration that it is continuing to perform well in 2009/10 for this outcome. CQC will continue to monitor any indicators of change to this performance.

Outcome 7: Maintaining personal dignity and respect

"People who use services and their carers are safeguarded from all forms of abuse. Personal care maintains their human rights, preserving dignity and respect, helps them to be comfortable in their environment, and supports family and social life".

Conclusion of 2009/10 performance

The council have completed all of the actions from their 2008 Service Inspection action plan relating to strengthening safeguarding. Membership of the Safeguarding Board has been improved and it has met its 2009/10 targets, which included increasing awareness and engagement. All partners have agreed to a single Safeguarding Business Plan and sub groups, with appropriate representation are progressing work. The council have a dedicated safeguarding team with a single point of contact and are able to demonstrate positive outcomes. There has been a significant increase in referrals across all user groups, which the council attribute to increased awareness, their single point of access and a high number of alerts from care homes. The council are working with care homes to ensure that they are aware of the appropriate threshold of when to notify them. The completion rates for referrals have not risen in proportion to the number of referrals. The council has been aware of this and attributes this to the high number of referrals actually being alerts and issues with how these are recorded.

A communication plan to raise awareness has been developed in consultation with users, carers and residents. Further outreach work is planned for 2010/11, including for hard to reach groups. Results from the partnership wide staff survey show that there are high levels of awareness amongst staff and feedback is being used to target future action.

The Safeguarding Board has a training sub group, which includes partners. An annual training plan has been developed and all relevant adult social care staff have had training. Almost two thirds of independent sector staff have also had training, which is similar to the London average. A variety of training has been undertaken for carers and a new handbook developed.

Hillingdon routinely performance manage case files, carry out a number of surveys and regularly undertake internal and external audits, which show evidence of positive outcomes. This included evidence that appropriate referrals had been made to the police and other agencies, with good joint working in place. Services are improved and developed in response to findings, for example the installation of 1,000 free burglar alarms for older people.

Care Quality Commission

The council has a dedicated Care Inspection Team and works closely with partners to monitor the quality of commissioned care, which is high. There is evidence that action is taken and improvements made when required.

Hillingdon have a well established process in place to respond to Deprivation of Liberty Safeguards. There are trained Best Interest Assessors both within the council and in the PCT and information is regularly shared. Work has been carried out to raise awareness, for example, via the providers forum, Hillingdon's Care Inspection Team and the hospital safeguarding steering group. There is a mechanism for managing Deprivation of Liberty safeguards via the Safeguarding Adults service.

Key strengths

- The Safeguarding Board has been strengthened and 2009/10 targets have been achieved.
- All relevant adult social care staff have had training.
- Increased awareness raising has led to increased referrals.
- Quality Assurance systems are embedded and information is used to facilitate improvements.

- Progress planned outreach work with hard to reach groups.
- Continue work with providers to ensure appropriate use of alerts so that time and resources are used effectively.