ADULT SOCIAL CARE OVERVIEW AND SCRUTINY PANEL 2 JUNE 2009

ADULT SOCIAL CARE (Director of Social Care & Learning)

1 INTRODUCTION

1.1 The purpose of this report is to set out for members of the Panel the nature and scope of Adult Social Care, the context in which it is operating and the key challenges and priorities.

2 THE ROLE OF ADULT SOCIAL CARE

- 2.1 In discharging its responsibilities, Adult Social Care is in the main, organised around care groups:-
 - Older People
 - People with a Learning Disability
 - People with Mental Health needs
 - People who Misuse Substances
 - People with Long Term Conditions (physical disability)
 - People with Autistic Spectrum Disorders

In addition, we provide support to carers, people affected by HIV/AIDs.

- 2.2 The focus of our support is to enable people to retain their independence, which will mean people can stay in their own homes for as long as possible. Support may be needed for a 'crisis' or a longer period, depending on the circumstances.
- 2.3 Advice and information about the range of social care services that may be available to support individuals or families (over 18) is made available to anyone who contacts us
- 2.4 Assessments are offered for people which help to determine any support that can be provided. If people are not eligible for adult social care, information is given about other ways and organisations that they could get help. These assessments of need are carried out under the legislation of the NHS and Community Care Act 1990 and the Carers Recognition and Services Act (1995 and 2000).
- 2.5 The provision of support is determined by eligibility criteria, which are published under Fair Access to Care (FACs) criteria. They relate to the perceived risk to the person requiring support. The four eligibility banding are:-
 - Critical
 - Substantial
 - Moderate
 - Low
- 2.6 Within Bracknell Forest, eligibility for support is principally at critical and substantial and there are no plans to change this. Additionally, there are initiatives which target

- support for people in the moderate or low categories, recognising the value of preventative approach.
- 2.7 Underpinning all of this is our approach to safeguarding adults which is a significant area of activity for staff. Responding to alerts of suspected abuse and arranging for the appropriate strategy meetings and investigations to take place. There is in place a multi-agency Safeguarding Adults Board in the Borough and the annual report will be considered by this Panel.
- 2.8 The other significant area of responsibility is a commissioning one, to ensure that the needs of the Borough's population are met. In discharging this area of work, Adult Social Care has led on the development with the PCT on the Joint Strategic Needs Assessment (JSNA) and has developed Commissioning Strategies in the past two years for:-
 - Sensory Needs
 - Dementia
 - Mental Health
 - Long Term Conditions
 - Learning Disability
 - Older People
 - Carers Strategy
 - Substance Misuse

3 LEGISLATION AND GUIDANCE

- 3.1 There is no coherent legal framework for the responsibilities of Adult Social Care within the local authority. Consequently, the legal context is complex. In order to illustrate this, the following list is some of the Acts that underpin Adult Social Care.
 - National Assistance Act 1948
 - NHS & Community Care Act 1990
 - Chronically Sick & Disabled Act 1970
 - Mental Health Act
 - Carers (Recognition & Services Act) 1995
 - Carers (Equal Opportunities Act) 2004
 - Care Standards Act 2000
 - Mental Capacity Act 2005
- 3.2 Guidance in the area is even more prolific with national guidance and strategies issued by the Department of Health. Amongst recent publications:-
 - Putting People First
 - Transforming Adult Social Care
 - Valuing People Now
 - National Dementia Strategy
 - Mental Capacity Act Code of Practice
 - Stroke Strategy
 - National Service Frameworks on:-
 - Older People
 - Mental Health
 - Long Term Conditions

4 PERFORMANCE AND REGULATION

4.1 Until 31 March 2009, the performance of Adult Social Care was determined by the Commission for Social Care Inspection (CSCI). In 2007/08, determined in November 2008, the performance rating for Adult Social Care was three stars, the highest rating. This was made up of two parts, Delivering Outcomes and Capacity to Improve. Each area is graded Poor, Adequate, Good or Excellent and is measured against key lines of assessment against standards of performance (KLASPs):-

Areas for judgement	Grade awarded	
Delivering Outcomes	Good	
Improved health and emotional well-being	Excellent	
Improved quality of life	Good	
Making a positive contribution	Good	
Increased choice and control	Excellent	
Freedom from discrimination or harassment	Good	
Economic well-being	Excellent	
Maintaining personal dignity and respect	Good	
Capacity to Improve (Combined judgement)	Excellent	
Leadership	Excellent	
Commissioning and use of resources	Excellent	
Star Rating	3 Stars	

- 4.2 From 1 April 2009, the new regulator (formed by bringing together CSCI, Healthcare Commission and Mental Health Act Commission) is the Care Quality Commission (CQC).
- 4.3 Judgement on the Council's Adult Social Care performance for 2008/09 will be as part of the Comprehensive Area Assessment (CAA) when the performance against the seven delivering outcomes for individuals will be determined. The judgements in relation to Leadership and Commissioning will be within the overall Council's judgement.
- 4.4 CQC also has a responsibility for regulating Residential and Domiciliary Services, who are also judged against national standards and are rated from 0-3.
- 4.5 Performance Indicators have also changed during the last performance year. The Performance Assessment Framework has been replaced in the judgements by the New National Indicators covering all of the Council's activities.
- 4.6 There are 4 National Indicators for Adult Social Care in the Local Area Agreement, these are:-
 - NI 130 Social Care clients receiving self directed support per 100,000 population
 - NI 135 Carers receiving a needs assessment or review and a specific Carers Service, advice and information
 - NI 136 People supported to live independently through Social Services
 - NI 146 Adults with a learning disability in employment

All have met the first year's target.

4.7 There are other National Indicators directly relevant to Adult Social Care but not in the Local Area Agreement. These are:-

NI 150	Adults receiving second	dary Mental Health Services	s in employment

- NI 149 Adults receiving secondary Mental Health Services in settled accommodation
- NI 145 Adults with learning disability in settled accommodation
- NI 139 The content to which Older People receive the support they need to live independently at home
- NI 133 Timeliness of social care packages following assessment
- NI 132 Timeliness of social care assessments
- NI 131 Delayed Transfers of Care
- NI 127 Self reported experience of social care users
- NI 125 Achieving independence for Older People through Rehabilitation/ Intermediate Care
- NI 40 Number of drug users recorded as being in effective treatment

5 SIZE AND SCOPE OF ADULT SOCIAL CARE

5.1 The net budget for Adult Social Care for 2009/10 is almost £22m. The main areas for spend by care group are:-

Mental Health	£1.805m
Learning Disabilities	£8.029m
Physical Disabilities	£2.207m
Intermediate Care (inc. Ladybank, Emergency Duty Team)	£2.109m
Older People	£7.107m
Commissioning	£0.470m
Management and Grants	£0.257m

5.2 The numbers of people supported by Adult Social Care are considerable. The figures are not finalised for 2008/09, but those for 2007/08 are set out below:-

	OP*	LD	MH
Home Support & Meals	2442	173	106
Day Support	184	24	18
Short Term res not respite	85	5	15
Direct Payments	94	71	42
Equipment delivered	963	6	60
Nursing Home Placements	130	0	29
Residential Care Placements	63	0	7
Residential Care Independent Sector	100	50	32

Carers, over 525 receiving support

^{*} Older People in this table includes physical disability and sensory needs

6 KEY PRIORITIES

- 6.1 The overarching priority for Adult Social Care is in relation to Transforming Adult Social Care and the intention to change the extent and nature of the way people will receive their support. This is also known as personalisation. This will be the subject of further briefings and reports.
- 6.2 Annexe A sets out the priorities for Adult Social Care that are contained within the Social Care and Learning Service Plan.

Background Papers None

Contact for further information

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