

**PERFORMANCE REVIEW REPORT FOR ADULT SOCIAL CARE**

Name of Adult Services Authority

Isle of Wight

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## **Performance Review Report**

### **Summary of Improvements**

During the last two years, the council has continued to sustain and quicken its pace of improvement in adult social care. 2004/05 has shown further improvement, which is commendable considering the changes to senior management, a recent change in the council's administration and the integration strategy and planning involved for the council and its health colleagues in moving towards trust status.

The Council's improvement in the number of people benefiting from Direct Payment arrangements is commendable – and very much in accord with the Government's national policy direction for social care.

The senior management team, managed by the acting Director has achieved consistency and consolidation, which has improved performance during a period of change following the resignation of the Director during 2005.

The implementation of the IT system SWIFT has had added challenges for the council in the data management process, although working through an additional paper system has helped in the correlation between the DIS statistics and the DH figures which have in general have been comparable.

### **Summary of Areas for Improvement**

A significant challenge facing the council for the future is to continue to sustain the pace of improvement in the context of:

- 'bedding down' changes within the senior leadership, and
- addressing the council's and the local NHS's ambitions for an innovative health and social care trust arrangement.

The council and health partners collaboratively will need to ensure that they develop clear strategies and policies around the integration and move towards trust status. Consultation with Government and external agencies will need to be carried out to ensure that the transition to trust status is effectively delivered.

## **STANDARD 1: National Priorities And Strategic Objectives**

The council is working corporately and with partners to deliver national priorities and objectives for social care, relevant National Service Frameworks and local strategic objectives to serve the needs of diverse local communities

### **Improvements achieved/achievements consolidated since the previous annual review**

The Isle of Wight council and the Island's joint acute NHS and PCT have a shared vision and strategic direction. The joint initiatives, which have been forged on the island, are together improving performance, whilst also responding to national priorities. There is significant planning around the integration of Social care and health and the joint initiative of moving towards a single health and care trust by April 2007.

The council has developed joint working initiatives through the co-location of the local authority contracts and commissioning team, in preparation towards trust status and to improve the balance of services available to meet the needs of service users. Service user's involvement is continuing to be developed in ways such as mental health service users lobbied through participation forums for a user involvement co-ordinator. Following consultation with service users, the council, the PCT and the health care trust, this post has now been created.

A joint strategy for improving the intensive home care service has been successful with the performance indicator improving to an acceptable level. There are a number of joint services that have been developed with health and private and voluntary sector organisations. Examples of these are falls prevention scheme with a PCT funded falls co-ordinator, a campaign to highlight the risks of hypothermia, shopping angels and intensive care beds in the private sector as a step down from hospital or to prevent hospital admissions.

There has been a real trajectory of improvement over the years in the councils performance with regard to delayed discharges from hospital, with only one person for whom the council was responsible.

Further good examples of joint working is around the significant improvement to the delivery of equipment provided within 7 working days which has improved from an acceptable level to one that is now very good. Further improvements are planned when the new, larger joint equipment store is opened.

The council has taken a robust strategy in meeting national targets with regard to the numbers of people receiving direct payments, and year on year has shown improvements and is now at a good level.

### **Areas for improvement**

The council recognises the need to improve on its consultation with people with a physical and sensory disability, by encouraging participation in partnership boards. The outcome of the needs mapping exercise undertaken by the commissioning team will need to be evaluated.

### **STANDARD 2: Cost and efficiency**

Social services commission and deliver services to clear standards of both quality and cost, by the most effective, economic and efficient means available

### **Improvements achieved/achievements consolidated since the previous annual review**

The council's adult services contracting team has now become an integral part of the PCT commissioning function, which will continue to improve commissioning and contracting efficiencies in the move towards trust status. There are a number of examples using integrated budgets whilst making efficiency savings, such as, the improvements to the amount of equipment that is delivered within 7 working days, achieved through the joint equipment store and the integrated OT service. The completion of negotiations with the private sector to provide intensive residential and nursing placements in the community has seen a reduction in the cost of intensive home care as well as providing a valuable service in reducing the numbers of delayed transfers whilst promoting independence. Further evidence of effective working within shared resources is the integrated mental health team.

A recent re-configuration of domiciliary provision following a review of services has been effective in meeting national priorities whilst meeting the needs of service users on the Island. This has also led to an improvement in efficiency where services are tailored specifically to the service users' assessed needs, whilst keeping the cost of home care below that of the national trend. However the re-tendering process has had an impact on the number of people accessing direct payments, which in turn has halved the number of older people helped to live at home. The council is utilising alternative providers for low-level dependency service users that also assists independence and helps people to live at home. However these cannot be counted in the figures and goes some way to explain the reduction in the numbers of older people helped to live at home.

#### **Areas for improvement**

The council will need to continue with data cleansing to ensure that accurate figures are available in relation to the cost of intensive social care the unit cost of residential and nursing and the unit cost of home care. Although the information submitted in the delivery and improvement statement indicated a good performance on these costs, subsequent figures submitted to the DH have had a detrimental effect.

### **STANDARD 3: Effectiveness of service delivery and outcomes**

Services promote independence, protect from harm, and support people to make the most of their capacity and potential and achieve the best possible outcomes

#### **Improvements achieved/achievements consolidated since the previous annual review**

The council actively promotes most service users to maintain their independence through a choice of services. For people with a learning disability helped to live at home the council has a higher performance than that of its IPF comparator group and the national figure with 14.3% of these service users being in work, again higher than the national trend. Further evidence of the council's policy in promoting independence is in the significant rise of numbers of people receiving direct payments. Although older people helped to live at home is in the lowest banding, this is as a result of the increase in direct payments. Service users are able to use providers of their choice through direct payments. There is also signposting to enable service users to use the voluntary sector as a first point of contact.

The council is proactive in involving and supporting most carers. A carer database is effective in enabling the council to engage with carers and include them in a mailing list to ensure that they have all the relevant information. A Carer's forum, for all service user groups is another effective tool, in supporting and listening to carer's views and requirements.

#### **Areas for improvement**

The council will need to review its performance with regard to people with a learning disability receiving a community-based service to aid respite breaks to ensure that it is providing sufficient choice.

#### **STANDARD 4: Quality of services for users and carers**

Services users, their families and other supporters, benefit from convenient and good quality services, which are responsive to individual needs and preferences

##### **Improvements achieved/achievements consolidated since the previous annual review**

Effective targeting by senior managers has had an impact on the assessment and delivery of appropriate services to most service users. This is evident in the performance indicators which overall show very good levels of performance such as the timeliness of assessments, acceptable waiting times for a service, a high number of reviews being completed and all people receiving a service having a statement of their needs, which at 100% exceeded the councils original target. The council is going to roll out "person centre planning" to all other client groups, following the successful implementation for service users with a learning disability. The council sees the joint single assessment process as a priority and a dedicated co-coordinator has been appointed to support the service manager deliver this by April 2006.

A contract-monitoring officer, who will work closely with health, has been appointed to monitor the quality of contract compliance.

A re-provisioning programme for people with a learning disability is planned next year to encourage those service users that can, to move to supported living environments rather than residential care. This will enable client choice and independence in choosing where and with whom they live and work with.

A recent initiative led by carers that has been adopted by the council is a system where, in case the carer is taken ill while out, they carry a card which states they are the main carer of a service user at home, and to ring the Wight care out of hours number provided. Information via brochures or on the website has a focus on carer's rights, such as being entitled to their own assessment, and being supported by an allocated social worker if they require it.

##### **Areas for improvement**

The council will need to complete a review and evaluation into the effectiveness of the partnership board, in raising user and carer inclusion into quality management of the services it provides.

#### **STANDARD 5: Fair access**

Social services act fairly and consistently in allocating services and applying charges

##### **Improvements achieved/achievements consolidated since the previous annual review**

During the last two years, the council has undertaken various mapping exercises to review the provision of care on the island, with the focus on maintaining service users in their own homes. This has led to the recent re-tendering of the domiciliary service on the island and the commissioning of intensive care beds within the private sector.

The council is actively promoting an improvement to the quality of services provided by itself, and the private and voluntary care sector. A workforce development group with representation from all groups has been effective in gaining grants and organising appropriate training such as NVQ2 in care to equip the workforce to meet the holistic needs of the service users whilst driving up national standards.

There is a Diversity officer appointed on the island and the council has provided mandatory training for its staff and health colleagues on race and equality with further training planned through 2005/06.

The Mental Health Local implementation team has development of diversity and BME strategies and policies as a priority.

There are a very small number of black and ethnic minority people living on the island. It is unclear whether there are barriers due to their policies or because of the small BME population on the island, as the majority of the work to assess the impact of their policies on ethnic minorities as required by the Race Relation Amendment Act, is still in progress. The council has a diversity champion however owing to the small cohort it is very difficult to track their progress in terms of numbers.

The council has a published charging policy on their website, together with information for the public on how to make a complaint. The council has recently centralised and transferred its complaints function to the Legal & Democratic services complaints unit.

**Areas for improvement**

Further work and evaluation will need to be undertaken by the council into the effectiveness of their proposed Diversity and BME strategies and policies.

**STANDARD 6: Capacity for improvement**

The council has corporate arrangements and capacity to achieve consistent, sustainable and effective improvement in social services

**Improvements achieved/achievements consolidated since the previous annual review**

Although the council is in the process of considerable change, it is commendable that their overall performance has improved over the last two years to a good level. At the present time the position of Director of Adult services is being advertised.

The council has a joint vision with its health partners to create a single health and care trust on the Isle of Wight. A transitional steering board is in place to facilitate integration and add to management capacity.

The integration of health and social care services as one trust is progressing in a number of areas, where services have seen an improvement to performance indicators. A joint review is currently underway to explore possibilities of utilising the council and NHS estate facilities, to reach optimum potential.

The joint initiative to re-provision from acute in-house services to community services is already having an impact with a number of further innovations planned around prevention.

The workforce development group is primarily looking to develop a workforce that is fit for the future and already there has been an improvement in the number of staff working with learning disability clients who have achieved NVQ level 2; this is now higher than the national trend. Plans identified last year to increase the number of practice learning students have come to fruition increasing from 3.8 to 11, which now places the council's performance at a good level.

Although the figure in the delivery and improvement statement for the number of staff leaving the council was high, a high percentage was attributed to children's services. With a low number of vacancies, the council has a suitable workforce to meet the needs of service demand.

Work with corporate and external partners is evident in the number of innovative and co-ordinated services available to improve the range of services to service users. The council is particularly keen to work with the voluntary sector and contracts out some assessments for low level clients seeking specialist help, which is particularly liked by service users themselves.

#### **Areas for improvement**

The council has opportunities for the future to broaden its robust improvement work to more effectively cover such areas as the number of people receiving a review, and the assessments of new clients over 65.

But the greatest challenge will be to continue the good pace of improvement while senior leadership changes 'bed down' and while seeking to make the major change to a health and social care trust.

The council will need to continue with its implementation programme working towards a Health and Care Trust. There is a need for the council to ensure that this process does not destabilise the workforce by continuing with its communication and involvement policy and to ensure that performance continues to improve.

Further work to ensure the IT system SWIFT is compatible with Health is required as well as ensuring data management capacity is enhanced, with a reduced need to rely on paper based systems.