

Cabinet

8 February 2015

Report from Strategic Director, Community and Well-being

For Action Wards Affected:

Adult Social Care Local Account 2014/15

1.0 Introduction

- 1.1 Towards Excellence in Adult Social Care (TEASC) is the national sector led improvement programme hosted by the Local Government Association (LGA) and supported by the Association of Directors of Adult Social Services (ADASS). TEASC's goal is to sustain proven, cost-effective, high quality services, tailored to individual need.
- 1.2 Local accounts are a key part of the TEASC programme, providing a mechanism by which the council demonstrates local engagement and accountability. They are also a tool for planning improvements, as a result of sharing information on performance with people who use services and engaging with them to get feedback on their experience.
- 1.4 The concept of producing a local account is not a new idea, rather it builds on work that councils are already doing in relation to local quality assurance and safeguarding. It is also aligned with developments taking place around sector led improvement in children's services. Local accounts are also mentioned in the Department of Health's Transparency in Outcomes framework and are conducive to wider government agendas e.g. localism and transparency.
- 1.5 The purpose of Brent's Local Account is to communicate priorities and to provide Members, residents and service users with a key accountability mechanism by which self-regulation and improvement activities can be systematically monitored and reported. The document attached at Appendix A is the full version of the report, but an executive summary and easy read version will be created to facilitate broader engagement.

2.0 Recommendations

The Executive is asked to:

- a. Note the performance and contextual information contained in this report.
- b. Consider the current and future risks associated with the information provided and the strategic priorities identified.

3.0 Executive Summary

- 3.1 The challenge to continue delivering good quality services at an affordable cost within a diminishing financial framework remains acute and has dominated our service planning activities in 2014/15 and again in 2015/16.
- 3.2 The Adult Social Care department delivered services to more clients in 2014/15, but with less money. The number of service users continues to grow by 2% year on year. The department's budget has reduced and will continue to reduce year on year. The department delivered savings of £4.4m in 2014/15, and will deliver a further £8.6m in 2015/16.
- 3.3 Given the challenging operating context, performance during the past year has been good overall. We have seen ongoing improvements in the work we do to ensure our services are supportive, and people feel safe; we have increased the support we provide to carers, our Reablement service continues to enable people to remain at home (not going back to hospital); and fewer and fewer people have to go into residential care. However, there are clear areas for improvement. We still need to work harder to ensure that people (service users and carers) are not socially isolated, that service users can get out of hospital quicker, that they have greater choice and control and that these improvements deliver greater satisfaction with our services and improved quality of life.
- 3.4 It is also worth noting two significant projects which have had, and will continue to have, a significant impact on the services we deliver. The New Accommodation for Independent Living (NAIL) project has supported more people to live independently, reducing the need for residential care by providing people with more options for where they live. And the partnership with CNWL also made significant achievements in supporting people with mental health needs to live more independently. The Mental Health Accommodation project has helped 36 (of 61) people to live independently while achieving nearly £1m budget savings without compromising service quality.

3.5 As well as building on the projects outlined above, we will need to continue to build on our work with health partners to continue to redesign how we deliver all our services to continue to strive to improve with less money. The integrated Rehabilitation and Reablement service is an excellent example of how we can do this, improving the experience and outcomes for service users (supporting people to remain independence) while removing duplication across health and social care service. Further integration options will continue to be explored in the coming years with our health partners.

4.0 Financial implications

4.1 These are set out in Section 5 of the local account. This section provides an overview of the adult social care budget in 2014/15 as well as providing the context from preceding years which highlights how the department is doing more with less. It also highlights the significant financial pressures for the coming years.

5.0 Legal implications

- 5.1 Part 1 of the Care Act 2014 came into effect on 1 April 2015. Local authorities in particular will take on new functions, making sure that people who live in their areas receive services that prevent their care needs from becoming more serious, or delay the impact of their needs; can get the information and advice they need to make good decisions about care and support; and have a range of providers offering a choice of high quality, appropriate services.
- 5.2 The overarching purpose of the Care Act is to help improve people's independence and wellbeing. It also places duties on local authorities to provide or arrange services that help prevent people developing needs for care and support or delay people deteriorating such that they would need ongoing care and support also known as the wellbeing and preventative duty. Local authorities also have a duty to support carers and safeguarding is now on a statutory footing.
- 5.3 Local authorities have to consider what services, facilities and resources are already available in the area (for example local voluntary and community groups), and how these might help local people and save the costs; identify people in the local area who might have care and support needs that are not being met and identify carers in the area who might have support needs that are not being met.

5.4 Local authorities should also provide or arrange a range of services which are aimed at reducing needs and helping people regain skills, for instance upon discharge from hospital. They should work with other partners, like the NHS, to think about what types of service local people may need now and in the future.

6.0 Diversity implications

6.1 This report has been subject to screening by officers and there are no direct diversity implications. However it should be noted that the service improvement initiatives developed and delivered during 2014/15 have routinely undergone Equality Impact Assessments prior to implementation, as per the Council's Equality and Diversity policy.

7.0 Contact officers

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