

## **Executive**

9 December 2013

# Report from Director of Adult Social Care

Wards Affected: ALL

## **Adult Social Care Local Account 2012/13**

#### 1.0 Introduction

- 1.1 With the abolition of the Annual Performance Assessment, the publication of a new single dataset for local government and the development of outcomes frameworks for Health and Adult Social Care, the need for councils to report back to citizens and customers in a meaningful way has never been more acute.
- 1.2 These changes to the national performance frameworks represent a significant shift from the past, with councils now expected to take over responsibility for managing their own improvement. In May 2010 a 'Promoting Excellence in Councils' Adult Social Care Programme Board was set up with key stakeholders from across the sector. The purpose of the Board is to collaborate and drive sector-led improvement. This is mirrored by the Sector Led Improvement programme in London.
- 1.3 In an effort to take collective responsibility for the performance of the Adult Social Care sector as a whole therefore, on of the Board's recommendations is the publication of an annual council 'Local Account'. The purpose is demonstrate and describe local performance. The Board were purposefully non-prescriptive in terms of the design of the report however they recommended it should be accessible and produced by December each year.
- 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, service users and their carers 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 community engagement.

#### 2.0 Recommendations

The Executive is asked to:

- a. Note the performance and contextual information contained in this report.
- b. Consider the priorities and 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 2012/13 and will continue to do so again in 2013/14.
- 3.2 Despite this, the department has successfully delivered its efficiency savings target of £2.412m for 2012/13. However, we have very limited scope to find further efficiencies without a radical overhaul of our operating model, which we need to do in collaboration with health partners.
- 3.3 Given our challenging operating context, performance during the past year has been good overall. Our strategy to introduce a policy of Reablement has delivered and the performance indicators confirm that high numbers of residents are being supported to continue living independently. However performance could be further improved if we had a greater selection of alternative accommodation, thereby reducing the need for future residential care placements. This situation is currently being redressed through our Reducing Residential Care project, which is being developed through the One Council programme.
- 3.4 Trend evidence from our service user satisfaction survey in Section 8 shows that Brent is steadily improving in this area. The 2012 survey reveals 83.3%

to be satisfied with our services and perceived quality of life compares favourably to the London average.

- 3.5 Moving forward, a critical area for improvement is the way we identify and support carers. Historically service users have been the primary focus of our attention and this must change, not least because of the implications of the forthcoming Care and Support Bill which introduces new rights for carers. We have already attempted to address this issue through the recent introduction of Brent Carers Hub, which is a one stop service designed to provide information, advice and support. However it is clear from our survey feedback that we have more work to do in this area. We will, therefore, work with the Brent Clinical Commissioning Group to deliver a range of improvements to facilitate more systematic identification of carers and provide better information, advice and support. Our new Service User and Carer Engagement strategy will ensure carers are more actively engaged in service development. We also plan to increase the take up of direct payments so they will be well placed to exert maximum choice and control.
- 3.6 In addition to the above, strategic priorities for 2013/14 include reducing the number of people who need to live in residential and nursing care, increasing the number of all people who take up Direct Payments, re-designing Brent Mental Health services, developing and progressing health and social care integration, and improving support for carers. We will co-produce an Adult Social Care strategy to set the future direction for the service as part of our broader service user and carer engagement project.

#### 4.0 Financial implications

These are set out in Section 10 of the local account. The combined elements of reduced government funding, an ageing population, high cost transitions from the Children Service and rising customer demand continue to place the Adult Social Care budget under sustained pressure. However the service modernisation programme has already delivered efficiency savings and improved customer outcomes and is expected to deliver further benefits in 2013/14.

### 5.0 Legal implications

The imminent passing of the Care and Support Bill and implementation in April 2015 and April 2016 will have far reaching implications for how services are designed and delivered within the borough. Full details and the implications are not known at this time but the senior managers will continue to work with key partners to ensure the best possible outcomes for Brent.

### 6.0 Diversity implications

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 2012/13 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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