



South Gloucestershire Council
Department for Children, Adults & Health

Local Account 2018-2019

How we deliver adult social care services

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1. Your local area – South Gloucestershire at a glance

Population

- The population of South Gloucestershire for mid-2018 is estimated to be approximately 282,600
- 18.8% of the population are children (aged under 16), marginally below the national (England) average (19.2%).
- 18.6% of the population are aged 65 years or over (the pensionable age) – slightly above the national (England) average of 18.2%

Source: 2018 ONS mid-year population estimate

The area has seen rapid population growth since the 1970s – between 1971 and 2001 the population increased by over a third (from 182,900 to 245,600).

However, more recently population growth has slowed; increasing by only 7.5% in the last decade (2001 to 2011). Between 2001 and 2011, the largest population increases have been in areas which have experienced the highest levels of housing development – particularly areas within the north and east fringes of Bristol.

Population projections

The latest official population projections from ONS (the 2016 Sub-National Population Projections) suggest that the population of the district will rise to 335,200 in 2041, a 21.1% increase on the 2016 baseline (276,700).

By 2041, the latest ONS population projections suggest that:

- The proportion of the population who are children (those aged under 16) will fall marginally (from 19% to 18%)
- The proportion of the population of working age (aged 16-64) will fall from 63% to 59%.
- The proportion of the population aged 65 or over will increase from 19% to 23% and the proportion over the age of 90 will increase from 0.9% to 2.1%.

In numeric terms, these population projections suggest that there will be:

- 9,900 more children
- 24,100 more residents of working age
- 24,500 more residents aged 65 or over
- 4,500 more residents aged 90 or over

It is important to note, however, that these official population projections are based on recent population trends in the levels of births, deaths and migration. They do not take into account any future policy changes, housing development or other factors which might influence demographic trends and future population levels. This means that the level of housing development proposed in South Gloucestershire's Core Strategy is not fully reflected in these official projections. The level of population growth arising from this significant level of new housing development is likely to be considerably higher than the official projections suggest.

Source: ONS 2016 Sub-National Population Projections

Ethnic composition

According to the 2011 census, 13,200 (5% of the total population) are of black and minority ethnic origin. This is more than twice as many as the number recorded in the 2001 census (5,900 people, 2.4% of the population).

The South Gloucestershire BME population is lower than the national average of 14% (for England and Wales)

Source: 2011 Census, ONS.

Key facts that drive how we shape services in South Gloucestershire

People live longer than the national average: Older people should feel valued and respected in their communities with choice and control over how they live their lives. They should be enabled to live full and active lives with every opportunity to remain independent.

Many people living with long-term conditions, physical disabilities and mental health problems experience difficulties. They should be supported to lead independent, fulfilling and dignified lives.

2. How we met change and challenges in 2018/19 – improving services and spending money effectively

- Our budget in 2018/19 for Adult Social Care Services was £84.1m
- 55% - Bed Placements (£45.8m)
- 36% - Community Based Support (£30.6m)
- 9% - Assessment Review and Care Management (£7.6m)

By the end of 2018/19 we actually spent £84.2m to deliver our services'

Action

Anticipating and managing the future projected demand for and costs of delivering Adult Social Care (ASC). This could be by putting in place measures now that manage demand for services in the future, or looking at how we can better ensure value for money from the services we commission.

Update

The Resilience Service was launched in April 2019. The service is an umbrella for the Rapid Response Team, Home to Decide Team and Next Steps to Decide Service. The service aims to reduce risk and meet the council's duty of care in the event of the market not being able to meet demand for domiciliary or residential care. Its secondary aims are to reduce hospital discharge delays attributable to social care and to reduce the number of hospital discharges that result in residential care.

The team provides direct care 7 days a week, 365 days a year, across all 6 clusters across South Gloucestershire. The team works closely with coordinators, Social Workers, Occupational Therapists, Commissioning Officers, Business Support Workers and Rapid Responders.

The 3 Conversations Model adopted by Adult Social Care (ASC) also supports the Resilience Service. This new approach to ASC developed by Partners 4 Change aims to:

- enable better experiences & outcomes for those contacting our service
- create a different way of working that enables practitioners to use their skills to develop more creative solutions and feel more satisfied in their roles

- better use scarce resources and reduce waiting times.

The conversational approach to assessments enables ASC to fulfil our preventative and wellbeing duties under the Care Act 2014, as well as working with people who are eligible for care and support. Conversations are as follows:

- Listen and connect - aims to connect people to resources that already exist either in their own networks or within their community to meet their outcomes.
- Work intensively in a crisis - aims to 'stick to someone like glue' while they overcome a change in their lives and make short term plans, because you never plan long-term in a crisis.
- Build a good life- aims to support someone to make long term plans to meet their outcomes, which includes consideration of eligibility.

The 3 Conversations approach started with 2 innovation sites in February 2019. It has now grown to 5 sites and has been successful in terms of:

- quicker response times.
- 70% of new referrals were concluded with a Conversation 1 or Conversation 2
- a reduction in waiting times
- more streamlined processes
- greater worker satisfaction.

<https://www.scie.org.uk/future-of-care/asset-based-places/case-studies/three-conversations>

First Contact Scheme continues to help people over 60 years old access a range of information to live independently at home and be more mobile.

<https://www.southglos.gov.uk/health-and-social-care/care-for-adults/support-at-home/first-contact-scheme/>

Contacting Adult Social Care

Over the coming months South Gloucestershire are looking to improve the experience of people contacting ASC, through streamlined processes and use of technology to more effectively deal with enquiries and ensure people get what they need when they need it.

The Brokerage Model launched in April 2018. Its main aim is to manage costs and demand through community based support by focusing on the lead providers in each of South Gloucestershire's 6 Clusters.

Assistive Technology (ongoing) This is currently being reviewed so that new and future technology such as voice recognition can be used to help people remain independent and resident in their homes as long as possible.

Action

Working more closely with our Local Authority partners in Bristol and North Somerset to reflect the new single Clinical Commissioning Group's (CCGs) footprint.

Update

Since March 2019 Bristol, North Somerset and South Gloucestershire (BNSSG) Health & Wellbeing Boards have held two joint seminars to consider local priorities, matters of common interest and agree areas where the boards can work together.

The boards have been proactive in terms of input into the local system 5 year plan (response to the NHS Long Term Plan) by proposing priority themes and agreeing to develop a local system outcomes

and value framework to support the local 5 year plan development and delivery. The next joint seminar is taking place in September 2019.

South Gloucestershire continue to work with local authority partners through the West of England Public Health partnership, which includes work streams specific to supporting and delivering work across the BNSSG footprint. This includes working with the CCG and other local authority partners to ensure consistency in our work to support population mental health. This approach is coordinated via the West of England Public Mental Health group and examples of joint work include suicide prevention strategies and operational, work, joint input into the new Improving Access to Psychological Therapies IAPT (talking therapies service) and work to support workplace mental health.

A jointly funded Social Care Project Manager post was created on 1 June 2018 to work across the across the BNSSG area, in recognition of the need for a whole health and social care systems approach to supporting the wellbeing of citizens of BNSSG. The post is jointly funded by Bristol City, North Somerset and South Gloucestershire councils and works to align Local Authority strategic priorities where possible or appropriate. The post is governed by the 3 LA strategic group meeting, which is a monthly strategic level meeting between all three Local Authorities to discuss and identify priorities.

Action

Re-design of Community Social Work to align with Primary Care, Community Health and the new Community Based Support services.

Delivering a place based model that improves collaborative working, makes effective use of resources and improves service user experience.

Update

Three community area teams were set up on 2 July 2018.

- The teams were aligned with:-
 - NHS Primary Care Networks/GP practices (also known as clusters)
 - Domiciliary Care and community based support providers and
 - Sirona care and health.
- The South Area Team supports clusters 4&5.
- The North Area Team supports clusters 1&6.
- The Central Area Team supports clusters 2&3.

- Community teams comprise of Social Workers and Occupational Therapist (OT) practitioners and are responsible for the majority of work in their relevant community area.
- The overall aim of the community teams is to improve the experience of service users. We will do this by working together with all partners to make effective use of available resources and to better understand local needs and resources.
- The establishment of community area teams involves changes in working practices including adopting a strengths based approach and three conversations model to enable a flexible response to how best to meet needs.
- The development of a place based model of practice will put us in a good position for meeting the challenges for the future including increased demand for services by working differently and more effectively with our partners.

Multi-disciplinary team (MDT) meetings at local General Practitioners Surgeries continue. Social Worker colleagues now attend all meetings. This closer partnership has enabled a better package of care and one which is more aligned with the patient's individual needs.

Restructured ASC Teams are now aligned with Sirona (provider for health care needs), their Clusters and their homecare lead providers.

Hospital Discharge Pathways:

- Discharge to Assess Pathway 1 – This is a route home from hospital for people who are able to manage at home between care visits. Sirona assess the person when they arrive home from hospital and provide rehabilitation and care at home. If long term care is required Sirona refer to South Gloucestershire Council for a social care assessment.
- Discharge to Assess Pathway 2 – This is a pathway home for people who are not safe to return straight home from hospital. Sirona provide rehabilitation and support in one of two care home facilities in South Gloucestershire. As with Pathway 1 Sirona refer to South Gloucestershire Council for a social care assessment if ongoing care is required.

Since 1 July 2018 the three community teams have taken on responsibility for the social care discharges from Pathway 1 and Pathway 2. South Gloucestershire has recently received funding from Sirona for a 'Discharge to Assess Coordinator' to further improve co-ordination between the two organisations.

Action

Refreshing the South Gloucestershire Better Care Fund Plan.

<https://www.southglos.gov.uk/health-and-social-care/care-for-adults/the-south-gloucestershire-better-care-plan/>

Update

Better Care Governance arrangements across Bath, North Somerset and South Gloucestershire (BNSSG) have been under review during 2018-19. In September 2019 the proposed governance changes and the 2019-20 Plan are due to be presented to the South Gloucestershire Health & Wellbeing Board for approval.

Action

Publishing a revised Market Position Statement. Delivering market capacity priorities including expansion of supported living opportunities for young people, people with learning difficulties and older people.

Update

- The refreshed Market Position Statement is being finalised for publication in the autumn of 2019.
- A new supported living scheme was opened in Blackhorse Lane which provides support and accommodation for 6 people with learning difficulties.
- A new scheme for young adult care leavers aged 16 to 25 was commissioned to maximise the chances for young people to help them *transition* effectively into adulthood. The scheme will support up to 18 people at a time and is due to open in summer 2020.
- Further potential schemes have been discussed with housing and care providers.

Action

Continued development of the Connecting Care Partnership and solution(s) to enhance and support joint working in the sub-region (not necessarily limited to health & social care).

Update

Better access has enabled more people to connect with care practitioners, social workers and OTs than previous years.

In the past year South Gloucestershire have continued to develop the Connecting Care solution with our partners. Some of the highlights include:

- Upgrading the patient timeline to include Social Care episodes
- Inclusion of End of Life Care Plans and alerts
- Commenced document sharing from North Bristol NHS Trust (NBT)
- Extended the mental health data set coming from Avon and Wiltshire Mental Health Partnership (AWP)
- Changed our social care feed to come when we implement our new Adult Social Care IT System (MOSAIC)
- Taken forward our implementation of the 'Digital Red Book'

The council has also successfully bid for initial development money from the Department of Health to do the feasibility and development work in order to extend access to Connecting Care into Care Homes. <https://www.connectingcarebnssg.co.uk/>

Action

Deliver more for our community from procurement through the use of new Social Value guidance. <https://www.southglos.gov.uk/business/tenders-and-contracts/creating-social-value-south-gloucestershire/>

Update

The Three Conversations Model has put more emphasis on understanding the community and its current needs.

All tender processes undertaken by the Council include a request to commit additional Social Value that would meet the Council's identified Social Value priorities. This has resulted in commitments to appoint apprentices, provide work placement opportunities for students, support to charities and many other opportunities. A Social Value Board monitors delivery of these commitments.

Action

Continue to engage where appropriate with system leaders and work stream leads of the Bristol, North Somerset and South Gloucestershire (BNSSG) Sustainability and Transformation Partnership (STP).

Update

A BNSSG Prevention Plan has been developed and Implementation Groups have been established for the following priority areas: mental health, tobacco, cardiovascular disease risk factors, obesity/physical activity and alcohol. South Gloucestershire leads on the development of several of the priority areas.

The council have established a Prevention & Self Care Network to enable the South Gloucestershire Health & Wellbeing Board to advocate and lead on the delivery of the Healthier Together BNSSG Prevention Plan in South Gloucestershire. The Network's objectives include obtaining an overview of the range of prevention and self-care initiatives and activities across South Gloucestershire; developing relationships to ensure that prevention and self-care activities are co-ordinated, lessons are learned and duplication is reduced; South Gloucestershire prevention and self-care information and updates are shared and promoted with relevant stakeholders; and the development of a South Gloucestershire prevention and self-care priorities list.

The Council have also been active in working with partners across BNSSG to develop a new all-age mental health strategy, making a strong case for a focus on prevention and the broader context of

mental health. This includes highlighting key linked agendas such as poverty, housing, employment and empowered communities. South Gloucestershire Council will be engaging in the developing Children, Young People work stream (chaired by Bristol City Council). We are also on the steering group for the new Adverse Childhood Experiences (ACE) Service Health Integration Team (HIT), and with Bristol are leading on the development of an ACE informed CCG approach.

<https://www.southglos.gov.uk/health-and-social-care/staying-healthy/mentalhealth-emotionalwellbeing/get-involved-with-mental-health/>

Action

Engagement with BNSSG improvements in the urgent care system.

Update

South Gloucestershire continues to maintain a Social Work team at Southmead Hospital.

We have also worked on the following joint projects:

- Appointing a single Healthwatch service provider with Bristol City Council and North Somerset Council
- Working on initiatives together to support the domiciliary care provider workforce to help them to build capacity and resilience
- Starting the process to appoint a single service provider of community equipment across Bath, North Somerset and South Gloucestershire (BNSSG).

The Integrated Care Bureau (ICB) was introduced in October 2018 as a new way of managing discharges from the three acute trusts within Bristol, North Somerset and South Gloucestershire. Ten different partners across the BNSSG health and social care system were involved in its creation. It is a multi-disciplinary and multi-agency approach to identifying the best pathways out of hospital beds and back into the community. Its successful implementation represents a huge achievement in partnership working, and is an attempt by the whole system in concert to improve the outcomes of people who are admitted to hospital.

<https://bnssgccg.nhs.uk/about-us/what-we-do/research-and-evidence/impact-case-studies/Providing-capacity-through-the-Integrated-Care-Bureau/>

Within both the urgent care system and the Resilience Service a pilot project will take place within Accident and Emergency. This will enable positive and creative ways of looking at Hospital discharges.

The STP Prevention Expert Advisory Group, which included members of the South Gloucestershire Public Health team undertook a “deep dive” in to urgent care system improvements at their May meeting. The BNSSG Healthcare Public Health work programme includes actions to support health and care system priorities including urgent care.

Action

Engagement in priority work streams and care pathway discussions being driven by the STP to ensure Local Authority views and local priorities are taken into account and help shape the future system.

Update

The BNSSG Healthcare Public Health work programme aims to provide public health specialist advice and to help address system-wide, strategic issues in collaboration with health and care colleagues. It includes:

- Strategic public health leadership
- Healthcare public health contribution to addressing priority issues
- Public Health input to CCG policy development

As noted in the previous action and update (see page *), South Gloucestershire Council have been active in working with partners across BNSSG to develop a new all age mental health strategy. We are also on the steering group for the new ACE HIT Service, and with Bristol are leading on the development of an ACE informed CCG approach. Public Health sit on the Alcohol Harm Prevention working towards completion of a baseline assessment of alcohol care across BNSSG.

The council also chair the action group for smoke free pregnancies for BNSSG with the vision of: Every baby born in Bristol, North Somerset and South Gloucestershire is given the best start in life by being born into a smoke free household. This group aims to reduce smoking prevalence in pregnant women in Bristol, North Somerset and South Gloucestershire (BNSSG) by having a unified strategic approach across BNSSG to reduce unwanted variation in care and outcomes for maternal and child health.

Through very positive engagement with the Local Maternity System (LMS), genuine partnership working and whole system investment we have:

- Undertaken a deep dive assessment at each Maternity Trust to assess current provision of support to stop smoking services within our LMS
- Identified significant variations and discrepancies in care which need to be addressed with a collective approach
- Developed a BNSSG LMS standard pathway through the action group; ensuring consistency in the support women receive across BNSSG and intensifying the response for women experiencing high levels of disadvantage and multiple barriers to quitting.
- Commenced the implementation stage of the shared clinical guidelines/pathway across BNSSG.

Community Aid Project

South Gloucestershire are working closely with health partner agencies, including community pharmacists to best understand and use medication dispensing systems to meet the needs of the individual and to maximise independence and safe management of prescribed medication.

Falls Service

Launched 1 May 2019 within our Rapid Response service, the Falls Service offers emergency response in the event of a fall, where the person does not need urgent medical assistance. Responders are dispatched with the relevant skills and knowledge to assist a person in using specialist equipment. This reduces unnecessary hospital admissions and provides a timely response in a crisis.

Frailty Project

This project aims to work with the elderly who are deemed as frail. With the help of the GP service the project aims to prevent older people from going into hospital.

Action

Implementation including design, test and public roll-out of our new Information, Advice & Guidance platform for Children, Families and Adults in South Gloucestershire, in partnership with stakeholders in the voluntary and healthcare sectors.

Update

South Gloucestershire have worked to integrate existing and newly developed sources of health information into the new Information, Advice and Guidance (IAG) platform. For example the well regarded local authority website “Mind You” <http://sites.southglos.gov.uk/mind-you/> that provides

information about children's mental health, the "One You" <https://oneyou.southglos.gov.uk/stress-less/emotional-wellbeing-support/> South Gloucestershire website with lifestyle and wellbeing advice for those aged 18 and over and also the Early Help information offer.

A range of stakeholders have been involved in the development of the new IAG platform including:

- NHS partners, in particular CCG and Sirona colleagues
- Advocacy services
- Voluntary organisations (in and out of the local authority area)
- Carers' Support Services (in and out of the local authority area)
- Citizens including children and young people and South Glos Parents and Carers, the South Glos Parent Carer Forum (SGPCF)
- The Care Forum (through their team currently supporting Wellaware)
- Internal professionals
- Council's Digital Team

The objectives for the IAG project are to develop a website that is clear and simple to use and provides members of the public, service users, as well as internal and external professionals with access to a comprehensive range of advice and information. It should offer an 'all age' solution where people do not need to look to different sites for children's or adults' information, which avoids duplication and/or gaps. This is especially useful for disabled adolescents and their families that currently have to look at several platforms, and it will also enable promotion of the site as THE source of information. Feedback from engagement sessions were that the website should:

- ensure access to information in a couple of clicks
- be clearly and concisely written and in plain or easy English so that the most vulnerable users in the community understand the key messages
- be easy to navigate and information well organised
- have uncluttered and tidy pages

An IAG communications plan has been drafted and particular consideration will be given to managing the expectations of a variety of stakeholders who attended the engagement sessions, particularly SEND parents and carers. Those sessions focused on what people liked about other websites and not their experience of finding information on the sites.

The council are now prepared for an initial soft-implementation by the end of September 2019, with content and functionality continuing to increase and develop thereafter, followed by a more extensive promotion and awareness campaign.

Action

To procure and replace the current Adult Social Care (ASC) system, to make changes to our current system to best support developments in ASC over the next 2 years.

Update

The tendering exercise took place over 2018/19 with final tenders, demos and evaluations of three suppliers systems taking place between February and April.

The decision to award the contract to Servelec for their Mosaic System (the same supplier as our new children's system which we implemented in 2017/18) was made on the 17th May. Following the necessary standstill period and work on the detailed contact terms the contract was signed in July.

It has been agreed with our Directorate Management Team (DMT) that we shall implement a shared single database across children's and adults services, which will necessitate additional preparation

work to move the children's database to a different hosted platform and for the necessary work on data quality to merge the two databases.

A project plan has been agreed for this additional work which does not significantly affect the planned go live of the adults system in November 2020.

<https://www.servelec.co.uk/product-range/mosaic/>

Action

Local Government Association (LGA) Peer Review of Safeguarding. Learning from the LGA review of safeguarding has helped develop some key priorities for Local Safeguarding Adults board business plan 2018-2020.

Update

LGA review took place in 2018. The review is a proven tool for improving and providing challenge and shared learning between small teams of Local Government officers and councillors.

Key priorities:

- Continuing development of safeguarding adults work including the implementation of new Association of Directors of Adult Social Services (ADASS) guidance on section 42 enquiries work is being done to implement these changes by October/November 2019. <https://www.adass.org.uk/>
- A new safeguarding adult process to enable social workers to focus on section 42 enquiries following the 6 principles of adult safeguarding.
- Making safeguarding personal continues to be developed and a new training programme will be available from November 2019.
- Full implementation of strengths based 3 Conversations Model of working will be completed across ASC teams by spring 2020. As mentioned previously this model is an innovative approach to needs assessment and support planning. It focuses primarily on people's strengths and community assets. It supports frontline professionals to have three distinct and specific conversations.

Action

Respond to Green Paper on ASC.

Update

The green paper is still expected from the Government.

Abbreviations:

ACE	Adverse Childhood Experiences
ASC	Adult Social Care
ADASS	Association of Directors of Adult Social Services
BNSSG	Bristol, North Somerset and South Gloucestershire
CCG	Clinical Commissioning Group
CYP	Children and Young Persons
DMT	Directorate Management Team
HIT	Health Integration Team
IAG	Information, Advice and Guidance
IAPT	Improving Access to Psychological Therapies
NBT	North Bristol NHS Trust
LGA	Local Government Association
LMS	Local Maternity System
OT	Occupational Therapist
SEND	Special Educational Needs and Disabilities

3. FACTS, FIGURES AND PERFORMANCE

Facts and figures

We are continuing to focus on helping people meet their needs in a way that gives them choice and control and connects them with their local community. This means that people can expect services tailored to their own needs to achieve the outcomes that are important to them.

Some of the figures in this report are snapshots as at 31 March 2019 compared with the position as at 31 March 2018. Those are directly comparable figures.

Our customer service centre is the first point of contact for most people, including those referred on to us by other agencies. We signpost people to a social care assessment or the best services to meet their needs. In 2018/19 31,968 people contacted us with social care enquiries compared to 34,048 in 2017/18.

Referrals to social care

There was also a small increase in the number of referrals to social care, with 4,163 referrals for social care and related issues in 2018/19 compared to 4,412 in 2017/18. Many of these referrals were dealt with by providing simple services, advice and information.

6 people had a 'self-assessment' (25 in 2017/18) resulting in 2 receiving appropriate support guidance or awaiting further action (12 in 2017/18). The remaining 4 went on to a full assessment (13 in 2017/18).

In total 4,680 people (including existing clients) had a full assessment undertaken following social referrals, reviews, carers assessments and services; this compares to 4,545 people in 2017/18.

The total number of assessments for these clients in 2018/19 was 7,254 (7,086 in 2017/18).

Reviews, carers' assessments and services

Between 1 April 2018 and 31 March 2019:

2,199 reviews were completed for **service users**, compared to 2,006 in 2017/18.

705 carers had an assessment or review completed; this is a 9.6% increase compared to 2017/18 (643 carers assessments/reviews).

3,413 people were receiving a service at 31 March 2019, compared to 3,439 at 31 March 2018. These service users were receiving both long term support (such as residential and nursing care or community support) and short term support to maximise independence (such as reablement) or other short term interventions. A small number of service users would have been receiving a mixture of both long and short term support.

Of those receiving a service, those defined as receiving '**self-directed support**' (they were provided with a budget and were able to decide how they would like to spend their money in order to provide the support they needed) as at 31 March 2019 was 2,870 (2,744 as at 31 March 2018). This includes a number of service users in Extra Care Housing that have not been included in previous years.

Of those service users and carers receiving self-directed support, the total number of people in receipt of direct payments during 2018/19 was 1,492, a 9% increase from 2017/18. At 31 March 2019 there were 765 service users in receipt of direct payments (720 as at 31 March 2018) and 727 carers who have so far received a direct payment (649 in 2017/18).

(Note: The number of direct payments to service users is a snapshot as at 31 March 2019 whilst for carers it is cumulative from April 2018 to March 2019).

2,452 people were receiving **community based services**, including home care and day care (2,414 in 2017/18).

435 people were permanently admitted to local authority funded **residential and nursing home care** placements; this is a 11% increase from 2017/18, where 391 people were permanently admitted to local authority funded residential and nursing home care placements.

The 435 admissions to residential and nursing care consists of 194 admissions to residential care and 241 admissions to nursing care (compared to 185 and 206 respectively in 2017/18). Overall, 913 people were funded in residential and nursing care according to a snapshot taken on 31 March 2019 (915 as at 31 March 2018).

946 people received home care in an average week (952 in 2017/18). 43 percent (411) of these clients receiving visits received 'intensive home care' of 10 or more hours per week. (36 percent (343) clients in 2017/18).

297 service users aged 55+ were living in Extra Care Housing (263 in 2017/18). These are cumulative figures of all people who lived in Extra Care Housing for all or part of the period during 2018/19.

185 service users were living in the community in other forms of supported living (152 in 2017/18). 141 of these service users have a learning difficulty. These are cumulative figures of all people who lived in **supported living** for all or part of the period during 2018/19.

3,128 people were provided with additional support to remain in their own homes through aids and adaptations (2,938 in 2017/18).

8.4 percent of service users (140 people) aged 18-64 are from minority ethnic communities; a slight increase of 5% from 2017/18 (133 people).

3.6 percent of service users (106 people) aged 65 or over are from minority ethnic communities; a decrease of 12% from 2017/18 (121).

Performance

A range of social care-related performance measures show how the services we provide compare to other authorities, and whether they are meeting the needs of the community. Some of the measures recognise how we work across health and social care to meet individuals' needs.

Here are some of the performance measures included in the Government's Adult Social Care Outcomes Framework. Our 2018/19 performance is compared with national figures for 2017/18 as these are the latest available.

87.4% of service users received **self-directed support** as at 31 March 2019 compared to 86.8 percent in the previous year. Nationally 89.7% of service users received self-directed support. 100% of carers in South Gloucestershire received self-directed support; nationally this figure stood at 83.4% (2018/19).

31.2% of service users (excluding carers) were receiving a direct payment (29.8 percent at 31 March 2018). National data shows that 28.5% service users (excluding carers) received direct payments.

The percentage of older people discharged from hospital who received **reablement or rehabilitation care services** and who are still at home 91 days after discharge from hospital is another key performance measure. This looks at the effectiveness of services which aim to improve older people's independence when they have been discharged from hospital. Our 2018/19 performance showed that 87.9 percent were still at home 91 days after discharge from hospital; this compares to 82.9% across the country as a whole.

The percentage of adults with **learning disabilities** receiving social care services who were in paid employment at the time of their review was 7.1% (53 people) (4.2 percent in 2017/18). Nationally this figure was 6.0%.

65% of adults aged 18-64 with learning disabilities receiving social care services were in settled accommodation at the time they were reviewed. Nationally this figure stood at 77.2%.

The percentage of adults with **mental health problems** receiving secondary mental health services who were in paid employment measures employment outcomes for those adults in touch with secondary mental health services whose complex needs are being managed using the Care Programme Approach (CPA). 18.3% of adults (131 people) using the CPA in South Gloucestershire were in paid employment (18.1 percent in 2017/18). Nationally this was 7.0% (2017/18).

75.1% of adults (538 people) with Mental Health problems receiving secondary mental health services were in settled accommodation at the time reviewed. Nationally this figure stood at 57%.

The number of **hospital discharges** that were delayed by social services for people aged 18 or over (per 100,000 population) measure aims for as few delayed discharges as possible. In 2017/18 adult social care was responsible for an average of 5.7 delayed patients 'bed-days' per 100,000 population for all discharges (4.3 in 2017/18). The main cause of this change has been delays in completing assessments and other processes to allow people to move to available commissioned services. Although a contributory factor has been the occasional shortage of nursing care beds for people with dementia. The national average was 4.3.

Permanent admissions to residential/nursing care for older people (per 100,000 population). It is better to have a low rate of permanent admissions to residential care, as a high rate can indicate a lack in the range of health and social care community services needed to enable someone to remain in their own home and/or a need for improved assessments and decision making processes. In 2018/19 South Gloucestershire had an admissions rate to residential/nursing care for older people of 618.0 per 100,000 population (712.2 in 2017/18) and 15.8 per 100,000 for the population aged 18-64 (14.8 in 2017/18); this compares to 585 and 14.0 nationally.

KEEPING PEOPLE SAFE

Trends in number/volume of cases

2018/19 saw a 14% decrease in the number of adult safeguarding incidents in South Gloucestershire, with a total of 1,074 incidents compared with 938 in 2017/18.

Neglect (37%) and Financial or Material Abuse (19%) are the most prevalent incidents reported. Physical Abuse (15%) decreased; Psychological abuse (15%) and Sexual Abuse (15%) both saw increases in 2018/19 when compared with 2017/18.

4. Keeping People Safe

Trends in number/volume of cases

In 2018/19 the number of adult safeguarding referrals received by South Gloucestershire totalled 1050 compared with 934 in 2017/18. In addition we count low level safeguarding incidents separately (called 'incident notifications'). In 2018/19 we received 1444 incident notifications. When the two figures are added together we have been notified of 2494 safeguarding incidents during 2018/19, which represents a 12.4% increase on the previous year.

As last year, the largest category of abuse remains neglect, and has slightly increased from 35% last year to 36.5% this year. The second largest category of abuse is financial (although it has reduced from 23% last year to 19% this year). The other two large categories of abuse remain psychological/emotional abuse (which has increased again this year from 14% last year to 15.7% this year) and physical abuse (which has also increased from 11% last year to 14.1% this year).

Reporting of domestic abuse has also increased this year from 4% to 5.4%. Audit work has identified that many cases of domestic abuse are often categorised as physical or emotional abuse suggesting that this figure should be higher still.

4% of safeguarding concerns relate to individuals who self-neglect. This category of abuse was introduced when the Care Act came into effect in 2015 and has remained relatively stable at around 3.5% until this year, when it has increased slightly.

In 2018/19 554 concerns were screened in for full safeguarding enquiries. In 92% of cases we were able to identify a risk to the person concerned and take action to reduce or remove that risk.

How safeguarding work is carried out

The South Gloucestershire Safeguarding Adults Board (SAB) has been on a statutory footing since the enactment of the Care Act in 2015. It meets quarterly and has representation from a wide range of partner agencies and groups. It oversees all the multiagency safeguarding activity within South Gloucestershire.

The Safeguarding Adults Board has a number of subgroups which focus on different aspects of the work. These include:

- **Communications and Engagement.**
This group works to raise awareness of adult safeguarding and is a joint group with the Safeguarding Children Board. It maintains the safeguarding website www.southglos.gov.uk/safeguarding and continues its oversight of the Making Safeguarding Personal work which aims to keep people at the heart of the safeguarding process. The group also contributes to Stop Adult Abuse week in June which is run jointly with Bath and North East Somerset, Bristol, North Somerset and Somerset.
- **Learning and Development**
This group manages training for the SAB and the groups it represents. This includes how and when to raise safeguarding concerns. The training is available for all staff, although some agencies prefer to carry out their own in-house training. The group also co-host an annual safeguarding conference with Bristol, which this year was held in June and focused on mental capacity.
- **Policy and Procedures**
This group maintains the joint Safeguarding Adults Policy with Bath and North East Somerset, Bristol, North Somerset and Somerset, which aims to ensure a consistent approach to safeguarding across the area. It has also developed local multi-agency procedures to give detail as to how this works in South Gloucestershire. This year the group has produced practice guidance for staff working with people experiencing domestic abuse, as well as guidance for managing allegations against people in positions of trust. It has also produced new safeguarding procedures for dealing with organisational abuse.

- **Quality Assurance**

This group monitors and scrutinises the data on safeguarding. It also conducts regular multi-agency audits of safeguarding work focussing on both processes and quality.

- **Safeguarding Adults Review (SAR)**

This group looks in depth at situations where an adult in the area has died or experienced serious abuse or neglect, and where there is a concern that partner agencies could have worked more effectively to protect them. In 2018/19 the group has published a Safeguarding Adults Review about Nightingale Care, a service for adults with learning disabilities and/or mental health difficulties which was deregistered by CQC. It has also commissioned a Safeguarding Adults Review in relation to an adult who died. This report is still being written.

How do we know the quality and safety of local services?

There are a range of processes in place to monitor quality and safety which includes Care Quality Commission (CQC) inspections, individual care management reviews and the monitoring of individual safeguarding notifications to determine if there are particular areas of concern about a service. The Organisational Safeguarding Team, the Council's Contracting Team, the Clinical Commissioning Group (CCG) and CQC meet regularly and share information about any concerns.

The local authority, CQC and CCG are all members of the Safeguarding Adults Board and so there are good links both at a strategic level and through regular contact between staff.

5. Customer satisfaction

We use a range of ongoing methods to capture our service users' feedback and views and shape our services. This executive summary highlights key points from the analysis of customer feedback received in 2018/19 including compliments, comments, concerns and complaints.

Compliments

The total number of compliments received decreased compared to the previous year (250 compared to 302 in 2017/18).

Comments

The Department for Children, Adults and Health actively gathers feedback from our customers through methods including stakeholder events, consultations and focus groups.

This is vital in understanding our existing and potential customers' views and shaping the way we deliver services. See page 18 for feedback and examples of what we did to address what customers told us they wanted.

Concerns

The number of MP enquiries received increased compared to the previous year (227 compared to 196 in 2017/18 and 254 in 2016/17). The majority of the enquiries were again about housing services.

The number of concerns received has also increased in comparison to the previous year (175 compared to 146 in 2017/18 and 175 in 2016/17). Of the 175 concerns received 12 moved into the complaints process.

Complaints

The department saw a further fall in the number of complaints received during 2018/19 (220 compared with 228 in 2017/18 and 274 in 2016/17). Of the complaints which reached completion during the period, 19% were upheld, 37% partially upheld and 35% were not upheld.

Nine formal enquiries were received from the Ombudsman during 2018/19 (compared to eight in 2017/18 and three in 2016/17).

You said, we did

You said (feedback)	We did
<p>Members of the Deaf, Deafblind, deafened and Hard of Hearing Group (DDD&HHG) wanted a document which signposted people to advice and information when they notice a change in their hearing and which illustrates how they can access services, together with what to expect.</p>	<p>Working collaboratively as a group and with the support of Healthwatch, we are in the process of developing a leaflet, which will contain this information and other hints and tips for caring for your hearing.</p>
<p>Members of the Low Vision Services Committee (LVSC) said that they felt there were a lot of groups and activities available in Yate and the surrounding area, but that there were gaps in terms of what was on offer in other areas of South Gloucestershire.</p>	<p>Representing the LVSC, we met with Vision West of England, who wanted to establish groups, such as Coffee and Convo, across South Gloucestershire. Having discussed where the gaps were in the area, a Coffee and Convo Group has been established in Thornbury and the possibility of launching one in Kingswood is also under discussion. In addition sight loss drop-in sessions are now being run in Thornbury and Yate.</p>
<p>People who live in South Gloucestershire and organisations who provide services for adult residents said it would be helpful to receive details of events and information, via one central point of communication.</p>	<p>We have created a weekly bulletin containing what's on information which is shared electronically every Wednesday with groups, our partners, the over 50s forum and parish councils.</p>
<p>Local employers have asked for advice on how best to promote staff wellbeing.</p>	<p>We launched "Thriving at Work South Gloucestershire" and have already had over 30 local employers sign up for information and support around staff wellbeing</p>
<p>NHS Practitioners are asking our Public Health Service how we can address local food poverty.</p>	<p>We developed a draft Food Poverty Action Plan which tackles local food poverty issues, such as holiday hunger and increasing free school meal uptake.</p>
<p>Feedback received regarding the One You South Glos service was that the service should reflect the community, including people who are LGBT+ or from BAME groups. There should be specific services for people who often don't access service such as those groups and men.</p>	<p>The service provider will have outcome targets around diversity and will be required to demonstrate how they are reaching out to members of the community who often do not access services The website will also be developed in order to allow people in specific communities to connect with one another for support and will be culturally appropriate for different groups of people.</p>

Further information can be found in our Annual Report on Customer Feedback:

www.southglos.gov.uk

6. Working with our partners

Carers' Advisory Partnership (CAP)

The Carers' Advisory Partnership (CAP) is a multi-agency forum that oversees the strategic approach, delivery and development of carers' services and support in South Gloucestershire. Carers are equal and valued members of this partnership, and contribute to agenda setting, bringing their views and perspectives to how support develops in South Gloucestershire, and providing challenge where needed. They also contribute views and feedback gathered from their contact with other carers in South Gloucestershire.

The Carers' Support Centre are members of the CAP and are commissioned to provide a range of key services for carers, from raising awareness of the caring role to encourage carers to self-identify and receive information and support, to providing one to one support for carers, including the completion of a carer's assessment. Partnerships with other organisations focus on supporting carers through carers' groups, and providing social opportunities for carers.

Over the course of the 2018 – 2019 CAP agendas have included:

- CAP members have been part of the Carers Strategy Implementation Group, tracking progress against the Carers' Strategy Action Plan. Progress is reported on a 6 monthly basis to CAP.
- A carer was involved in the final pilot report on Individual Service Funds, and a summary of the project was taken to CAP.
- The group have received progress reports on the Community Based Support model and have continued to provide feedback from carers on their experiences of support.
- Progress in the Shared Lives service in recruiting paid carers
- A presentation from the South Gloucestershire Wellbeing College
- Updates on dementia services in hospitals
- A refresh of the terms of reference for the group
- A presentation on council budgets
- A presentation on Primary Care Liaison Services
- Review of the strategy action plan against the National Carers Action Plan
- Input into the development of the Trusted Assessor Model for carers assessments
- A presentation on Universal Credit

Input into consultation – CAP members were involved in:

- The Urgent Care Strategy
- The Commissioning of the Healthy Lifestyles service

South Gloucestershire Learning Difficulties Partnership Board (LDPB)

South Gloucestershire Learning Difficulties Partnership Board (LDPB) is a multi-agency group who work to make sure that people with learning difficulties have the same rights, choices and opportunities as everyone expects and deserves. The LDPB supports local organisations and groups to work together to increase opportunities for people with learning difficulties.

The board works in partnership with people with learning difficulties, family carers and staff from the council and other agencies, including the Clinical Commissioning Group, Sirona care and health and voluntary and community organisations across South Gloucestershire to improve the lives of all people with a learning difficulty.

The LDPB co-chairperson is employed directly by South Gloucestershire Council's Department for Children, Adults and Health. The co-chairperson's role also involves:

- Making sure information is accessible to people with learning difficulties

- visiting and monitoring Learning Difficulties Development Fund projects to ensure they make positive and sustainable changes for people with learning difficulties
- making sure people with learning difficulties have the chance to have their say about the services and support available to them and are able to influence the way services are delivered
- making sure people with additional and complex needs and people from minority communities have the same opportunities as everyone else and are empowered to speak up about their experiences.

The LDPB meets six times a year and each meeting has a theme. In the last year, the themes of the meetings have been:

- Health
- Housing
- Education and Employment
- Personalisation
- Learning Difficulties Development Fund Awards
- Staying safe

The LDPB produces an annual report on its work. More information can be found at: <https://www.southglos.gov.uk//documents/LDPB-Annual-Report-2018.pdf>

The 2018/19 Learning Difficulties Development Fund (LDDF) supported a number of projects and initiatives including a buddying and befriending service for people with LD to help them access community activities and promote social inclusion, a project which runs courses in baking skills to help people with LD get work in catering, an organisation which supports people with LD to understand welfare benefits and entitlements and an organisation which supports trainers with learning difficulties to go into schools to raise awareness of learning difficulties and autism.

This year (2019/2020) the LDPB has again been able to award **£96,201** from the LDDF to projects that will work to achieve the aims and priorities of the Board. For more information: <http://www.southglos.gov.uk/health-and-social-care/care-for-adults/health-matters-and-disability/learningdifficulties/learning-difficulties-development-fund-lddf/>

7. Our priorities for change 2019 – 2021

- Continue to develop the Connecting Care Partnership and solution(s) to enhance and support joint working in the sub-region.
- Full public roll-out of our new Information, Advice & Guidance website for Children, Families and Adults in South Gloucestershire.
- Preparation work on the set-up and data migration for our new Adult Social Care System, ready to go live in November 2020.
- Continue to work closely with our local authority partners in Bristol and North Somerset to reflect the single Clinical Commissioning Group's footprint – to bring consistency and commonality and streamlining of health and social care services
- With the new reablement service model having been in place for 18 months including the introduction of Home to Decide and Next Steps to Decide services, and with the introduction of the 3 conversations approach in Adult Social Care, the reablement service and how these services work together will be reviewed to consider how the benefits can be optimised
- Consult on and determine the funding envelope and award criteria for our Better Care, Stronger Communities grants, invite new 3 year proposals and award funding
- Continue to develop commissioning arrangements and provide support to the domiciliary care market to increase market capacity.
- Publish a revised Market Position Statement. Deliver market capacity priorities including expansion of supported living opportunities for young people, people with learning difficulties and older people (ExtraCare housing)
- Our vision for Adult Social Care is to help you stay independent, safe and well wherever you live in South Gloucestershire

- We are continuing to use our “Looking Forward” programme to make changes in how we work so that we can respond effectively when people contact us, both now and in the future. For example we need to reduce the time social workers and occupational therapists spend in the office through more straight forward processes and paperwork so that they can spend more time out of the office, working directly with people.
- We have a team of social workers and occupational therapists based at Southmead Hospital. We want people to be able to leave hospital as soon as they are ready to do so and we continue to look at different ways to achieve this. We are using this year’s Winter Grant to fund a fast response team of care staff, social workers and occupational therapists that operates seven days a week.
- Effective partnership working continues to be a key priority. This includes partnerships in the delivery of care and support to people but also in strategic planning and developments. Working with local colleagues in the delivery of the NHS Long Term Plan is going to be particularly important.
- We want to respond to people quickly. We know many people want to contact us by phone but we also want to give people the opportunity to use digital options to contact us or to find the information online. This is a key priority in 19/20.
- Many councils are now using Technology Enabled Care. We are accelerating work in this area as we believe it has a contribution to make to care delivery in South Gloucestershire.
- Safeguarding is at the core of our responsibilities. We are changing our team structure and refreshing staff training in line with recently issued national guidance. This will be completed by 31 March 2020