



South Gloucestershire Council

How we deliver adult social care services Local Account

April 2011 - March 2012

www.southglos.gov.uk



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Welcome

Welcome to the first South Gloucestershire local account which sets out how well we are doing in meeting the needs of South Gloucestershire residents who require care and support.

What is a local account?

The government has introduced local accounts to give residents a clear picture of:

- the achievements we have made in adult social care – how well we are performing
- the changes and challenges we are facing
- our plans for future improvements

We continue to be ambitious in setting plans and getting results that will make improvements to people's lives.

The pace of change is getting faster, bringing challenges and opportunities for us all. A big opportunity is us working more closely with health colleagues and the new Clinical Commissioning Group. Together with other partners we will produce a health and wellbeing strategy for South Gloucestershire, with an overarching vision for all health and social care.

The report is in seven sections –

1. Your local area: South Gloucestershire at a glance

2. How we met change and challenges in 2011/12

3. Facts, figures and performance - delivering the customer journey

4. Keeping people safe

5. Listening and learning

6. Working with our partners

7. Our priorities for change in 2012/13

Please give us your feedback

As this is our first local account and we always welcome your views, please let us know what you think of it and anything we haven't included that you'd like us to. Please see inside back cover for details.

1 Your local area: South Gloucestershire at a glance

Population

264,800

is the estimated population of
South Gloucestershire

We have had rapid population growth since the 1970s - between 1971 and 2001 the population increased by over a third (from 182,900 to 245,641). Since then it is estimated that the population has risen by 18,800 (7.6%). By 2033 the population is likely to be over 333,000.

Between 2001 and 2010, the highest levels of population growth have been in the new urban areas at the northern and eastern fringes of Bristol. The wards of Frenchay and Stoke Park (+3,400 residents) and Emersons Green (+3,000) have seen the greatest increase.

The population profile of South Gloucestershire is very similar to the national average:

18.6%

of the population are
below the age of 16
(the national average
is 18.7%)

19.3%

of the population are
of pensionable age
(the national average
is 19.5%)

333,800

the population is likely to rise
to 333,800 by 2033 which will
mean an increase of 73,400
residents (28.2%).



By 2033 it is likely that:

- there will be about four times as many residents over the age of 90
- there will be almost twice as many residents over the age of 75
- the proportion of the population under the age of 15 will go down slightly (from 17.6% to 16.9%), but actual numbers will increase by about 10,600

Ethnic composition

14,900 5.7%

of South Gloucestershire's population are of black and minority ethnic origin (BME) according to recent estimates. This suggests that the number of BME residents has increased by around 9,000 compared to the 2001 Census (2.4%)

The South Gloucestershire BME population remains significantly lower than national average (12.1%) - official estimates on the makeup of the BME population will not be available until data from the 2011 Census is published.

Key facts that drive how we shape services in South Gloucestershire:

- People live longer than the national average – our aim is that they remain healthy and independent for longer, too
- Our overall population is ageing more quickly than the national average – we aim to have the infrastructure and facilities in place that an older population requires
- Incidents of dementia will grow more rapidly in our area than the national average – our aim is to improve early diagnosis and help support dementia services
- The number of people with learning difficulties aged over 65 will increase – we aim to provide more supported living opportunities, including extra care

2 How we met change and challenges in 2011/12

This local account for 2011/12 is set within the context of our plan for the year, so it focuses on areas that may impact directly on our service users:

- Spending money effectively
- Working with change in the NHS
- Delivering services differently
- Better support for older people.

Spending money effectively

£59.1m

percentages are rounded up

Our budget in 2011/12 for Community Care services. This included an additional £2.726m for service improvement in recognition of the growing demand for social care

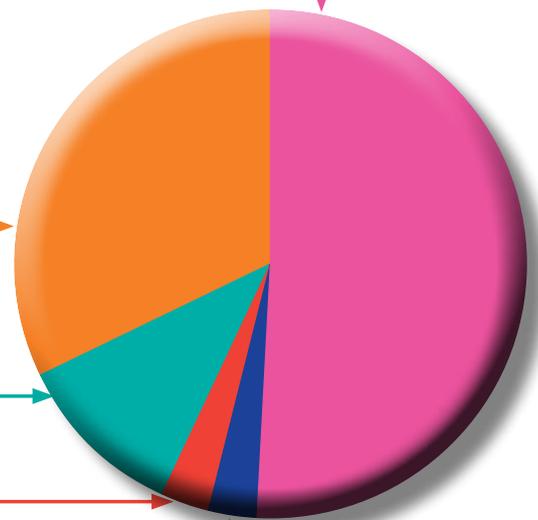
51% Older people including physically disabled people and long term conditions (£30.2m)

32% People with learning difficulties (£18.8m)

11% Our own provider services (£6.6m)

3% Support and service management (£1.9m)

3% Adults of working age mental health services (£1.6m)



We delivered our services on budget

Working with change in the NHS

Our NHS partners saw major structural changes in 2011/12. Together we created a Transitions Board to help manage and prepare for the biggest changes which will happen next year

- A GP led Clinical Commissioning Group (CCG) for South Gloucestershire is being set up ready to take on NHS commissioning responsibilities from April 2013. The council is working with members of the new CCG

We also:

- set up a new Health and Wellbeing Board which is developing its workplan to ensure effective coordination across adult, children and health functions
- started work to make sure that Healthwatch is set up in South Gloucestershire before April 2013
- welcomed public health colleagues, who co-located with us from April 2011 in preparation for becoming a Local Authority responsibility from April 2013. Work has begun on the most appropriate role, functions and model for the council to deliver public health

Delivering services differently

We have introduced several innovative and more efficient services to help support residents through changes in their lives, and in the way they receive adult social care.

Reablement – we launched a pilot reablement service in January 2012 to help people regain living skills, confidence and independence after a stay in hospital or a period of ill-health. This new service is helping to improve the support we provide to enable people to stay in hospital no longer than they need to. We will be evaluating the success of this pilot later in 2012/13. Our record of managing hospital discharges effectively within social care is strong, with social care services delaying around only 28% of the total number of delayed discharges.

Telecare – Older people and individuals with a physical or sensory impairment are being helped to live independently in their own homes for longer thanks to South Gloucestershire Council's investment in a revamped telecare service. Since December 2011 this service is available to anyone and now includes a responder service.

We have supported increasing numbers of carers through changes to **Carer Support**. There are now 20 thriving peer-led carers support groups meeting regularly across South Gloucestershire. Following a carer's assessment 133 carers received financial support towards a carer's break. 103 took these as a direct payment. The Carers' Support Centre identified **535** 'new' carers, dealt with **1,057 contacts to carersline and delivered 2,716 hours of breaks for carers** through the volunteer sitting service.

Service users supported by Blackhorse **learning difficulties day service** moved to new purpose-built facilities at Kingswood early in 2012.

Fairer charging - We consulted with service users on introducing a **fairer policy for calculating an individual's contribution to their personal budget** and the type and range of services that charges should be made for.

Home Care services –we have been working with independent sector home care providers to ensure that we are getting good value for money as well as developing the quality of support they provide. We have also **looked at how cost effective our in-house Home Care Service is** and began a review of future options.

Well Aware is now established as the primary health, social care and wellbeing information hub across South Gloucestershire, Bristol and Bath & North East Somerset. Well Aware attracts well in excess of 15,000 different visits to **www.wellaware.org.uk** every month as well as continuing to respond to telephone queries, and celebrated its 200,000th hit earlier this year. Work has continued to improve the accessibility of Well Aware since its launch in the summer of 2010, such as making the website accessible to a wide variety of limited or non-English speakers and the development of dedicated portals for people with learning disabilities, people with sight loss and people with mental ill health. A specific portal on men's health and wellbeing services and a dedicated section for senior citizens will soon be added.

We have made the **information about social care services** simpler by redesigning our leaflets and webpage information.



Sharon said “ We’re all winners, we do a brilliant job and it’s nice to hear about other people doing the job well.”

Home Carer of the Year winner Sharon Luton from Care UK was nominated by Mervyn Manfield from Yate. Sharon supported Mr Manfield from 2009. Sadly he passed away in 2012 but he nominated Sharon praising her fantastic level of care, saying: “ She has constantly worked to the highest level and has often helped far above and beyond the call of duty. She has a caring nature, a ready smile, a quick wit and a great sense of humour.” His wife Maureen is pictured with Sharon.



Better Support for Older People

We worked closely with families and service users to support all of the former residents of Wapley Court and Kerr House **residential care homes** move to new alternative accommodation. Initial feedback is that most of the residents are satisfied with the new arrangements. In early 2012 we began asking residents of Charlton, Filton and their relatives about their needs and preferences as part of the next stage of the project. Similar engagement with residents of Newton House, Cadbury Heath and their families will begin later in 2012. We are now halfway through the de-commissioning programme.

We are drawing up plans for **two new care homes in Yate and Kingswood** with a view to issuing a tender document in 2012.

We **reduced the need for two carers** attending to an individual by introducing new equipment and manual handling techniques. As well as the savings to resources and costs, our customers are reporting very high levels of satisfaction with a service which is now more focussed on the individual.

Service users have settled well into the **new day service for people with dementia** at Cambrian Green Court in Yate whilst the Maple Suite has been relocated from Downend to new purpose built accommodation at Falcon Court, Kingswood.

Both Cambrian Green Court, Yate; and Badminton Gardens, Downend Extra Care housing schemes are fully occupied. A further new **Extra Care housing scheme** at Falcon Court, Kingswood was completed with tenants moving in from January 2012. Construction of 10 leasehold sale extra care bungalows at Cambrian Green, Yate was also completed.

Valuing and supporting carers

“South Gloucestershire Council is committed to supporting all its valued carers so that they can stay emotionally and physically well and balance their caring role with their work commitments, family life and community interests.”

Cllr Matthew Riddle, Chair of Adults and Housing Committee

Veronica and Malcolm James live in Mangotsfield. Veronica is a full-time carer for Malcolm who had a stroke in 2005.

The stroke left Malcolm needing care around the clock and Veronica fulfils this role as well as being a caring wife.

Veronica said: “I attend the carers’ group in Emersons Green and I also go with Malcolm to the stroke cafe in Downend, both are funded by the council. It’s the social side of things which we both benefit from because meeting up with people in a similar situation and having a chat makes you feel that you’re not alone; that you’re not isolated.”

Veronica also attends another council-funded group called Time 4 Carers. Her advice to other people in a caring role is to ‘investigate your options as much as you can. There is much support available from the council and other organisations.’





Living active lives

People attending our dementia day services in Kingswood and Yate are being helped with their instant recall with the use of technology. Thanks to a government grant, we have invested in eight iPads which our day centre staff use for interactive sessions with people where they enjoy listening to some of their old favourite songs which can be instantly accessed. This is a great way to bring back memories and is also a fun exercise.

Residents at Cambrian Green Day Centre use the iPad to identify birds. Sue Jaques, Community Engagement Officer said: “Staff say it’s lovely for keen birdwatchers with dementia who can no longer recall birds’ names to be able to identify the blue tits and goldfinches out of the window using a bird-watching app on the iPad.”

“One of our service users (not pictured) who moved into Woodleaze Residential Care Home in Yate earlier this year is at an advanced stage of Alzheimer’s. He hadn’t communicated with anyone verbally since moving in and then staff saw him really light up and speak for the first time when they called up ‘New York, New York’ by Frank Sinatra on the iPad. So this was a bit of a breakthrough and just goes to show how technology can help people in many different ways.” *Sue Jaques*

3 Facts, figures and performance - delivering the customer journey

We are working hard to make people's experience of adult care services as good as possible - putting our customers at the heart of everything we do. Our Customer Service Centre is the first point of contact with us for most people. Staff signpost customers to a social care assessment or the best services for their needs. In 2011/12 30,207 people contacted us with social care enquiries.

The numbers of people with a personal budget has increased from 704 to 2,526, which is an increase from 11.9% to 48.8% of those receiving care and support in the community.

New people being referred into social care

5927

referrals for social care related issues, many of which were dealt with by providing simple services, advice and information.

A number of people required a more involved response:

1192

people had a **'self assessment'** resulting in 650 receiving appropriate support or guidance with the remainder (542) going on to a full assessment.

1612

people in total had a **'full assessment'** undertaken with our social work teams. This includes the 542 self assessment referrals.



Reviews, carers assessments and services

4508

reviews were completed for service users

404

carers had an assessment or review completed

5948

people received a service during 2011/12

2262

people received '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)

4884

people received community based services

423

people were admitted to funded permanent residential and nursing home care. 276 of these were admissions to residential care and 147 were admissions to nursing care. Overall, 947 people were funded in residential and nursing care according to a snapshot taken on 31 March 2012

2.8%

more people received community based services

227

service users aged 55+ living in Extra Care Housing

1140

people received home care in an average week. 28.25% (322) of people received 'intensive home care' (10 or more hours per week)

4.59%

of service users aged 18-64 are from minority ethnic communities

228

service users living in the community in supported living (172 with a learning difficulty)

3530

people were provided with additional support to remain in their own homes through aids and adaptations.

5.08%

of service users aged 65 or over are from minority ethnic communities

The pattern of the population benefiting from care support has not changed significantly. There is a reasonable ethnic balance for adults receiving services.

The numbers of people funded in residential care has remained stable. Evidence is beginning to emerge that activities helping people live independently using community resources, are leading to a reduction in the numbers of community care assessments undertaken.

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 2011/12

The percentage of service users and carers with self directed support



We aimed for 30% of our users of services and carers to be using 'self directed support' (also called personal budgets) by March 2012. Our performance was 48.8%, compared to an England average of 29.2% in 2010/11*

The percentage of older people discharged from hospitals who received reablement or intermediate care services and who are still at home 91 days after discharge from hospital



This looks at the effectiveness of services which aim to improve older people's independence when they have been discharged from hospital. Our performance shows that 84% were still at home; this is higher than in previous years (74.7% in 2010/11). The England average was 82% in 2010/11*. The South Gloucestershire Urgent Care Board is working to improve the hospital discharge process, including intermediate care and reablement services.

The proportion of adults with Learning Disabilities receiving social care services who were in paid employment at the time of their review



11.9% of service users were in employment. The national average was 9.6% in 2010/11*.

The proportion of adults with Learning Disabilities receiving social care services who were in settled accommodation at the time of their review



67.3% of people with learning disabilities were in settled accommodation as at 31 March 2012, which is much higher than the 2010/11 figure of 51.0%.

The proportion of adults with Mental Health problems receiving secondary mental health services who were in paid employment



This 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). 22% of adults using the CPA in South Gloucestershire were in paid employment. This compares with a 2010/11 figure of 25.1%. The way this data is recorded has been improved and consequently comparisons with previous years may not accurately reveal trends.

**National average for 2011/12 not yet available*

The proportion of adults with Mental Health problems receiving secondary mental health services who were in settled accommodation at the time of their review



This measures the accommodation situation for adults in touch with secondary mental health services whose complex needs are being managed using the Care Programme Approach (CPA). 86.4% of adults using the CPA approach in South Gloucestershire were in accommodation classed as 'settled'. This is an improvement on the 2010/11 figure of 80.9%.

Number of hospital discharges that were delayed by social services for people aged 18 or over (per 100,000 population)



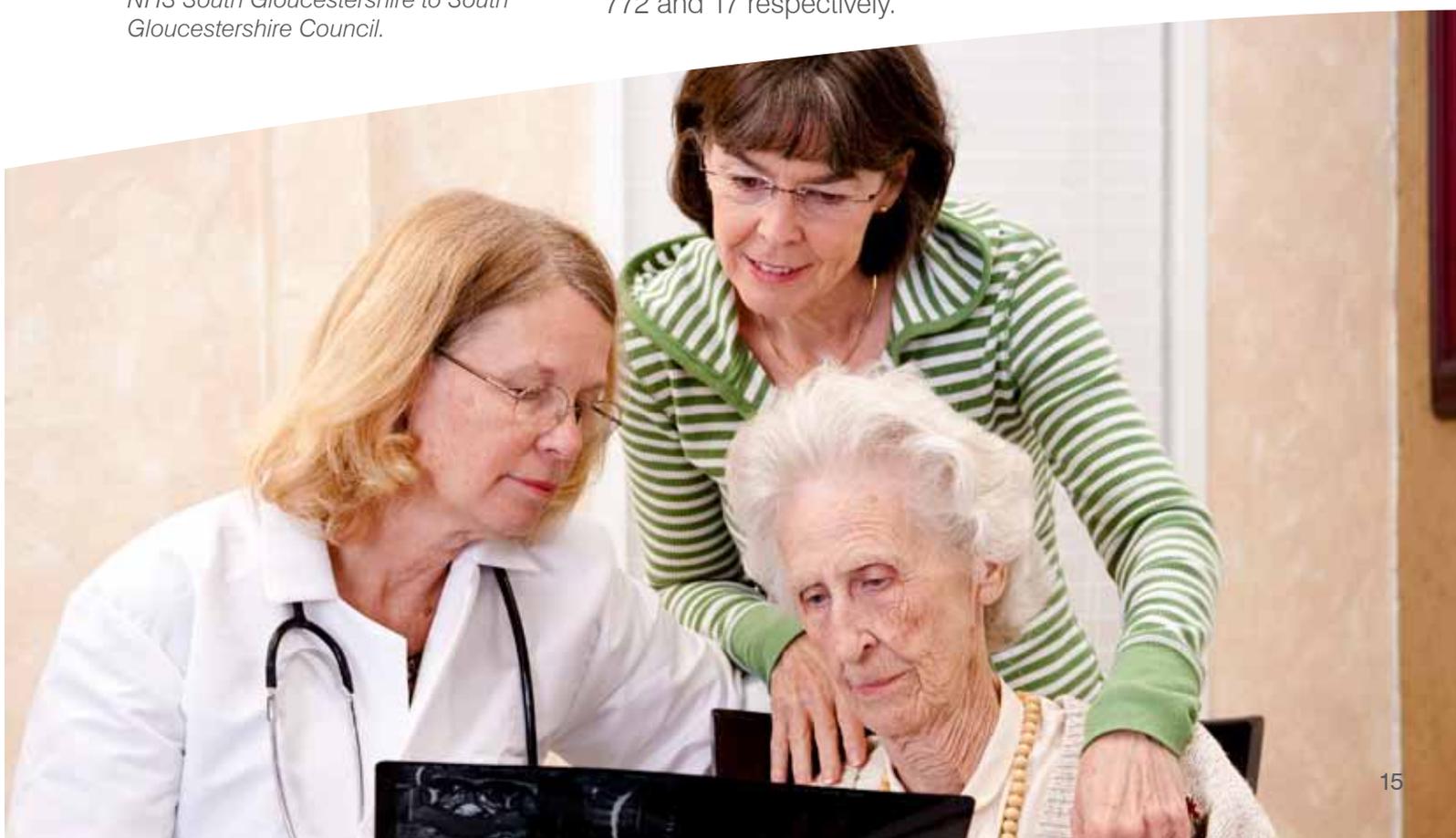
The aim is for as few delayed discharges as possible. In 2011/12 Adult Social Care was responsible for an average of 3.6 delayed 'bed-days' per 100,000 population for all discharges. This compares with a national average in 2010/11* of 10.2 for discharges delayed by social services and NHS combined. There are no national figures available for delays solely attributable to adult social care, for comparison.

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. In 2011/12 South Gloucestershire had an admissions rate to residential/nursing care for older people of 663** per 100,000 population and 16.4** per 100,000 18-64 population. This compares to 2010/11 figures of 772 and 17 respectively.

*** Figures exclude technical adjustments for existing service users in residential care where lead responsibility has switched from NHS South Gloucestershire to South Gloucestershire Council.*



4 Keeping people safe

How are people's lives improved as a result of safeguarding?

There is increasing national and public recognition and reporting of adults who have been victims of abuse because their circumstances have made them vulnerable. This includes accounts of people being abused in hospitals, care homes, supported housing settings or their own homes. In some situations, disabled people have been subjected to domestic violence, or targeted as victims of hate crime or sustained anti-social behaviour.

Safeguarding adults involves a range of activities aimed at upholding people's fundamental right to be safe, at the same time as respecting their right to make choices. Safeguarding adults involves empowerment, protection and justice. This is to help people retain independence, wellbeing and choice, and to experience their right to a life free from abuse and neglect.

How are our safeguarding processes checked?

The South Gloucestershire Safeguarding Adults Board (SAB) meets quarterly, with representation from a wide range of partner agencies and groups. It oversees all of the multi-agency safeguarding activity within South Gloucestershire.

There is a quarterly policy and procedure sub-group of the SAB which monitors, reviews and amends local policy and procedure in light of national and local trends, policy, guidance and legislation. This group takes into account any information from vulnerable adults, carers, relatives, advocates and multi-agency staff as part of this process.

The policy and procedure sub-group's work links in to the work of the training and development sub-group to ensure that policy and procedure changes are reflected in training and development activity.

In addition, the Care Quality Commission (CQC) is represented on the Safeguarding Adults board which allows their regulatory functions to be dealt with as part of the multi-agency partnership.

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

The monitoring and quality assurance functions of safeguarding are exercised by the quality monitoring sub-group of the SAB. This group also meets quarterly and analyses a range of quality and performance data from the multi-agency partnership and contract monitoring information, benchmarking the data against agreed quality standards and reporting significant findings to the SAB on a regular basis. The group also feeds any information on hot spots and trends into the training & development and policy & procedure sub-groups, so that it can be used to decide the content of training and development activity or make changes to procedures as required.

Winterbourne View

The year 2011/12 was dominated by the very substantial national and local impact of abuse and crimes at Winterbourne View Hospital. Safeguarding resources were dedicated to addressing the complex needs of patients who needed immediate safety. We also worked with a number of local authorities and primary care trusts to ensure that the ongoing care and support needs of all patients were met.

Alongside this, the board began the process of examining the safeguarding and wider issues emerging from the shocking events at the hospital. We initiated a serious case review (SCR) with the appointment of an independent chair. Taking a full year to complete, the SCR report necessarily went beyond a typical report in its exploration of the complex range of issues that underpin the commissioning of such placements and the treatment provided to patients who are highly vulnerable adults. The report, published in August 2012, raises important national policy issues. Combined with the individual management reports completed by relevant organisations, it is also an important milestone for the SAB. We are collectively fully committed to learning the lessons from Winterbourne View hospital, ensuring that we are alert to and responding effectively to all safeguarding concerns from wherever they arise.

For full details of the Serious Case Review and to download the full report or the Easy Read version, go to www.southglos.gov.uk/WV

Peter Murphy

Director of Community Care and Housing, South Gloucestershire Council and
Chair, South Gloucestershire Safeguarding Adults Board

*Taken from the South Gloucestershire Safeguarding Adults Board
Annual Report 2011 - 2012*

5

Listening and learning

Customer satisfaction

We use a range of ongoing methods to get our service users' feedback and views and shape our services. This executive summary highlights key points from the analysis of Customer Feedback 2011/12 including compliments, comments, concerns and complaints.

Compliments

The total number of compliments fell slightly on the previous year (339 in 2011/12 compared to 432 in 2010/11).

Comments

The department actively gathers feedback from our customers; e.g. stakeholder events, consultations, focus groups. This is vital in understanding our existing and potential customers' views and shaping the way we deliver services. See next page for examples of feedback and what we did with the comments.

Concerns

The number of MP enquiries received during 2011/12 increased to 212 (there were 170 in 2010/11); the majority of these being for housing services. Concerns have increased in 2011/12 (203 compared with 151 in 2010/11). Of the 203 concerns only three became complaints.

Complaints

The department has seen an increase in the number of complaints received (247 in 2011/12 compared to 216 in 2010/11), possibly due to further improvements in capturing customer feedback. Of the 256 complaints which reached completion during the period, 59% were upheld or partially upheld, 33% were not upheld, 4% were withdrawn and no conclusions could be drawn in 4% of the cases. 8 remain ongoing at the time of writing this report.

There were eight complaints referred to the Ombudsman for investigation during 2011/12 (nine in 2010/11). The Ombudsman decided to discontinue its investigation into six of these, in one case it determined that the council had sufficiently remedied the matter (local settlement) and would therefore discontinue its investigation. One was considered to be outside of the Ombudsman's jurisdiction.

You said

The Staple Hill Regeneration Partnership wanted to support isolated older people in their area to get out and about. They also wanted to create a map to show where the benches and toilets are in Staple Hill.

We asked a focus group of people with learning difficulties if they knew how to complain and who to complain to. They suggested that more could be done to get the message across and also provided some examples of how this might be achieved.

Residents in the Cromhall area asked that whilst the new shop and Post Office were being built that a temporary facility be set up in the interim.

we did

 The Staple Hill Friendship Club was established and a toilet (and places to sit) map was created with their help. The group has gone from strength to strength.

 One of the suggestions was for a fridge magnet, which will provide a contact number. We are currently looking into getting fridge magnets produced. They also liked the idea of a video on how to complain - we would like to get this on to the council's new website soon.

 Planning permission has been granted for a temporary portacabin to be used during development.



Further information can be found in our Annual Report on Complaints and Representations.

<http://www.southglos.gov.uk/NR/rdonlyres/20AE62A3-23D1-4838-9274-7B2E8DCBF3BD/0/CCH110027.pdf>

The second national Adult Social Care Survey looking at social care service users' perceptions of their service, their quality of life and personal outcomes achieved was undertaken in early 2012.

66%

of people in South Gloucestershire were extremely or very satisfied with the care and support they received

26%

of people in South Gloucestershire receiving adult social care services were quite satisfied

3%

of people in South Gloucestershire expressed dissatisfaction



"I wish to thank everyone for their kindness and support given to me during my time at the day centre... without all the staff support I could not have achieved moving on with my life like I have"

"I would like to say a huge thank you for the care that you and your team provided for my mum. It was due to your care that she was able to stay safely and happily in her (own) home for as long as she did"

"Without exception all of the staff at the residential care home have been thoroughly professional in every aspect of their job and made my grandmother's life as comfortable and as enjoyable as it could possibly have been"

6

Working with our partners

South Gloucestershire Council drives and is involved in many partnerships. Their achievements for 2011/12 are summarised here.

The Learning Difficulties Partnership Board

The Learning Difficulties Partnership Board works to ensure that Valuing People Now happens in South Gloucestershire and that people with learning difficulties have the same opportunities in their life as everyone else.

Some of the LDPB's work in the last twelve months:

- A Learning Difficulties health group was set up to ensure that people with learning difficulties have access to the same health care as everyone else. We also held our third Big Health Check Up Day.
- Worked with a local Advocacy organisation to make access for people with learning difficulties more accessible
- Developed a draft accessible support plan which helps people with learning difficulties to identify what is working well in their lives and what is not
- Supported Special Olympics programme with the aim of developing new athletes
- Supported Learning Difficulties Carers' Support and Development Officer to provide information, help and guidance to carers of people with learning difficulties
- Held a Hate/Mate Crimes day to raise awareness of these crimes and how to report them
- Carried out an audit to find out how many people with Learning Difficulty reside in HMP Eastwood Park and HMP Leyhill using the National Learning Disability Screening Questionnaire
- Worked with the employment network to look at how different employment agencies can work together better to improve opportunities for people with learning difficulties

Carers' Advisory Partnership (CAP)

The Carers' Advisory Partnership ensures that carers are involved in changes in South Gloucestershire adult social care and health services and their views and perspectives are considered.

Some of the work that has taken place in the last twelve months:

- Looked at ways that local carers' groups can be more accessible to more carers
- Monitored the work of the Carers' Strategy Implementation Group and the progress of the strategy
- Reviewed Carers' Week 2011 activities and consulted with carers about the range of activities they would like to see organised in the future
- Discussed the range of carers' breaks and the funding available
- Provided feedback to the Fairer Contributions Policy and Home Care Review Consultations and on the information available to new carers



Older People's Programme Group (OPPG)

The OPPG provides a forum where the issues particularly affecting older people can be addressed together.

Over the last year the following projects have been led by OPPG:

- Involvement in planning the Celebrating Age Festival and reviewing its effectiveness
- Monitored the delivery of key projects including Better Support for Older People, Reablement, Telecare and Dementia Strategy
- Carers strategy and action plan
- Identified initiatives to support older people to remain independent such as good neighbour schemes, tackling loneliness and isolation and First Contact.
- Older people working together – achievements include formulating a response to the Caring For Our Future National Consultation, and involvement of the group in early planning for the Loneliness and Isolation Project



Low Vision Group

Work over the last year has included:

- Revising council information for people with sight loss
- Establishing monthly Action For Blind People information sessions in libraries across South Gloucestershire
- Engagement work with groups of visually impaired people to understand their views on services, to contribute to the evolving action plan for the group
- Action for Blind People has secured 3 year funding for an emotional support service
- Commissioning training relating to sight loss for people with learning difficulties
- Piloting of Finding your Feet Course, for people newly diagnosed with sight loss

Deaf, Deafened and Hard of Hearing Group

Work over the last year has included:

- Engagement with a class of lip readers, to help inform the action plan for the group
- A strengthening of membership of the group, with representatives from the Over 50s Forum now attending, to give the views of older people with hearing impairment; and a deafened man has also joined the group
- Audiology are running sessions for service users on managing your hearing loss and hearing aids
- Audiology publicised their free training, and the support their volunteer service provides to residential and nursing homes, by attending a residential home forum; this has resulted in take up of training and volunteer support. Action on hearing loss also gave a presentation about hearing loss with tips and information on useful equipment
- The Improving Access to Psychological Therapies service offers a service to British Sign Language Users in BSL.

The Mental Health Local Implementation Team (MH LIT)

The LIT has developed into a key forum for information exchange, with the main stakeholders providing information about developments, conflicts or gaps in service provision, commenting on policy and contributing to operational initiatives.

Work over the last year has included:

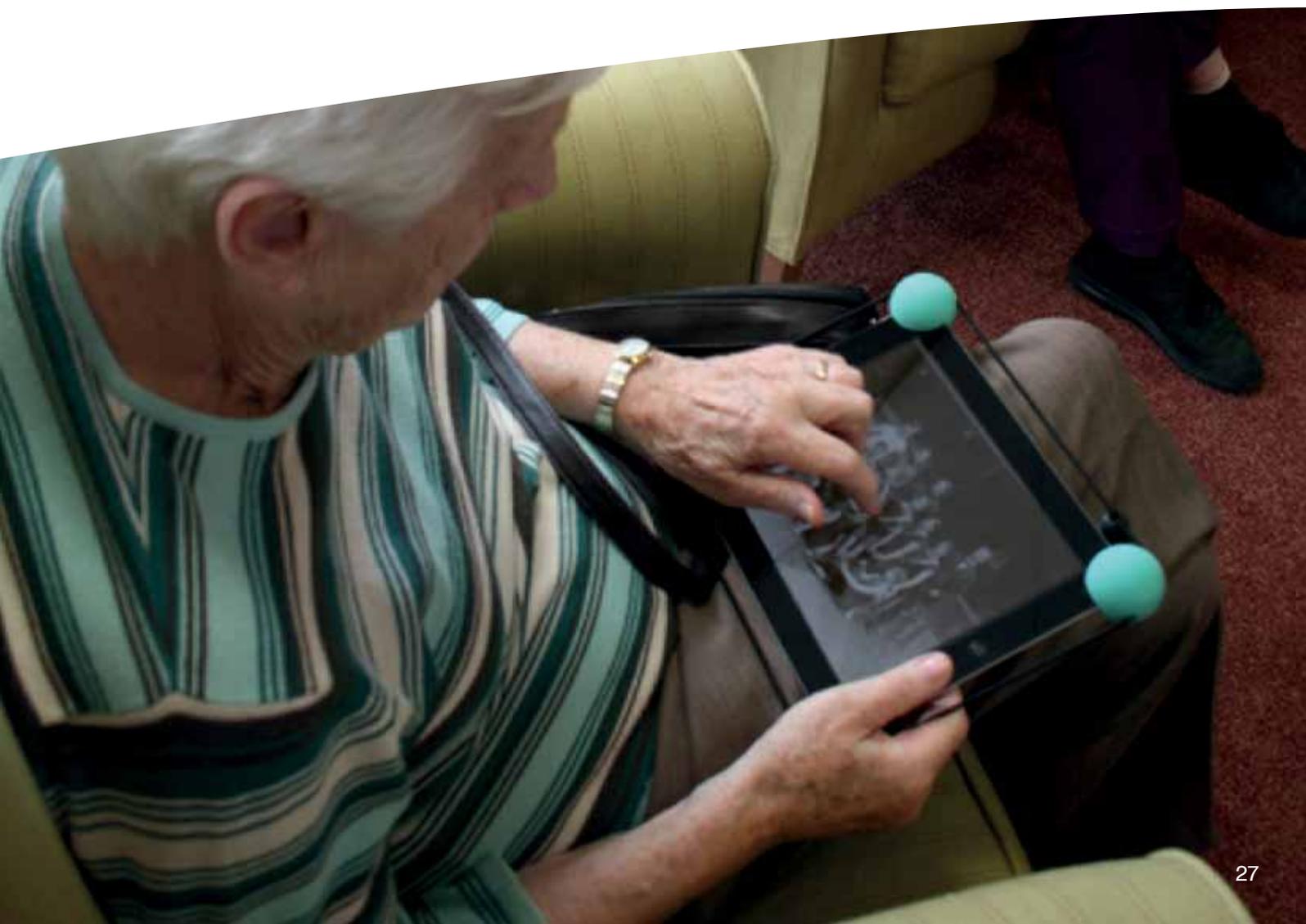
- Working to develop a stronger culture of user and carer involvement in South Gloucestershire, including holding consultation events, establishing “champions” within community teams and developing an e-group
- The LIT has had an opportunity to discuss and comment on service redesign work within Avon & Wiltshire Mental Health Partnership Trust
- LIT members have been involved in developing the local care pathways and care packages for Payment by Results
- LIT has discussed the local implications of “No Health Without Mental Health” which highlights the importance of early intervention and prevention, the inter relationship between physical and mental health needs and the importance of providing the right level of psychological therapy in a timely manner
- Service users told us that they feel current approaches and attitudes in mental health services can leave people isolated and lonely in the community following treatment and discharge from care. We are seeking to understand more about the possible causes and solutions and to influence what we do

Dementia Partnership Board

During the course of the year the Dementia Partnership Boards for both South Gloucestershire and Bristol took the decision to merge in recognition of their shared priorities.

The focus of the Board over the last year has been:

- Working to increase diagnosis rates within the community
- Developing a whole sector workforce strategy
- Developing a new dementia pathway
- Improving support to manage dementia within primary care
- Working to reduce the use of anti psychotic drugs within care homes
- Improving the support available to people with dementia with acute hospital settings



6 Our priorities for change in 2012/13

In 2012/13 the Community Care & Housing Department responsible for providing adult social care services will focus on the following actions in its service plan, in line with the South Gloucestershire Sustainable Community Strategy:

- Continue to deliver our Better Support for Older People programme ensuring that care can be delivered in the most appropriate setting with a focus on quality, choice and fairness.
- Examine our approach to what people do in the day, reviewing opportunities for employment, volunteering and social activity and how we deliver Handy van and minor adaptations services. This includes reviewing opportunities to work more closely with other providers such as the Home Improvement Agency to deliver a more holistic service.
- Support best practice in care homes, domiciliary and reablement care to help reduce avoidable admissions to hospital and support people to return home.
- Make further commissioning decisions to:
 - support the delivery of more extra care housing schemes for older people and help achieve 700 individual dwellings within extra care housing by 2016.
 - explore the visibility of small-scale extra care housing schemes for people with learning difficulties aged 18-54 to maximise the alternatives to residential care for those with higher needs
- Work with partners to develop a refreshed JSNA (Joint Strategic Needs Assessment) and South Gloucestershire's first Health & Well Being Strategy
- Commission a local Healthwatch to ensure that the voice of local residents is heard in the development and performance of local health and social care services.

- Improving how we communicate with and listen to people who need our support and our partners.
- Begin preparing a new housing strategy to be launched in 2013 that ensures affordable housing delivery is maximised and allocated fairly and approve a Strategic Tenancy Policy to guide the allocation policies of providers of affordable/ social housing.
- Promote skills and knowledge development across the whole adult social care sector to improve outcomes for service users including a focus on the continued professional development of colleagues within CC&H to ensure the highest standard of professional practice.
- Strengthen the co-ordination of how decisions are made on the shape of future services and work with partners and providers to make things happen.



Explaining words and phrases (Glossary)

Advocates:

An independent person who will listen to what someone wants and then help them to get their voice heard, their views acknowledged and the information they need.

Care Pathways:

An agreed plan that outlines the care it is anticipated you'll need over appropriate timeframes – to help patients/service users to get positive outcomes

Care Programme Approach (CPA):

Based on active service user involvement, social inclusion and recovery, this is used to assess, plan, review and co-ordinate the treatment, care and support needs for people in contact with secondary mental health services as appropriate.

Care Quality Commission:

The independent regulator of all health and social care services in England, making sure they meet government standards of quality and safety.

Clinical Commissioning Group:

A Clinical Commissioning Group (CCG) is the name for the new health commissioning organisation which will replace Primary Care Trusts in April 2013.

De-commissioning:

The planned closure of services that are no longer fit for purpose or no longer meet the needs of service users/patients in order to allow resources to be reinvested in modern provision to meet current and future need.

Direct payment/Personal Budget:

A direct payment is money that is paid directly to you from your local authority so you can arrange your own support through your 'personal budget'.

HWBs:

Health and Wellbeing Boards will be committees of local authorities working as a partnership with health colleagues and other key agencies.

JSNA:

Joint Strategic Needs Assessment is a process that will identify adults' and children's current and future health and wellbeing needs and is used to inform health and social care commissioning priorities.

Ombudsman:

A government official appointed to investigate complaints from members of the public against government officials.

Priority Neighbourhoods:

Our six Priority Neighbourhoods (Cadbury Heath, Filton, Kingswood, Patchway, Staple Hill and West Yate & Dodington) benefit from additional coordinated work with local residents and agencies to improve quality of life and make them safer and stronger.

Public Health:

Public health is about helping people to stay healthy and avoid getting ill. Responsibility for public health moves from the Primary Care Trust (PCT) to the Local Authority on 1 April 2013.

Reablement:

A range of services focused on helping a person maximise their independence by learning or re-learning the skills and confidence necessary for living at home following a stay in hospital, prolonged illness or injury.

Responder Service/Telecare:

A personal alarm system, also known as a lifeline, which can be installed in the homes of residents who need it by using an existing phone line. It is supported by the council's own mobile responder service who are trained to give immediate assistance if required.

Self-directed support

Self-directed support is about people being in control of the support they need to live the life they choose - giving people real power and control over their lives.

South Gloucestershire Urgent Care Board:

A meeting of local health and social care professionals to co-ordinate activities to help reduce avoidable hospital admissions and support timely and effective hospital discharge. This is a joint board with Bristol.

Stakeholders:

Groups or individuals who are affected by and/or have an interest in the operations and aims of a business or public organisation such as the council.

Please give us your feedback

As this is our first local account and we always welcome your views, please let us know what you think of it and anything we haven't included that you'd like us to.

Email: cengagement@southglos.gov.uk

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