

# Adult Social Care Annual Report 2013/14 (Local Account)

Produced September 2014



Coventry City Council

[www.coventry.gov.uk](http://www.coventry.gov.uk)

# Foreword

I am pleased to present our fourth Annual Report on the performance of Adult Social Care. This report is a public statement of our progress, our achievements and our challenges during 2013/14 and the coming years.

As Executive Director of the People Directorate, I remain committed to the City Council priorities of improving the health and wellbeing of residents and protecting and supporting the most vulnerable people. The People Directorate was formed a year ago and this has provided opportunities to work more closely and effectively with children's social care.

The financial challenges facing Adult Social Care remain and during the year we made a number of changes to our services through the 'A Bolder Community Services' Programme.

Looking forward, the implementation of the Care Act 2014 is likely to lead to a significant increase in demand for Adult Social Care. We will need to continue to manage demand for our services by preventing or significantly delaying the need for long term support. Redesigning our short term service to maximise independence in partnership with the Coventry and Rugby Clinical Commissioning Group will enable us to do this. For those people that do require long term support, we need to ensure our personalised approach to support planning enables people to think creatively to meet individual outcomes and make best use of family and community networks.

The annual report is intended to be easy to read and is aimed at both people who use social care services and the wider community. You can help us improve future reports by giving us feedback on this document and telling us about the type of performance information which is of most interest to you. In response to your previous feedback, a summary version of this report will be made available.

Our contact details are provided on page 33, and we very much welcome any comments you may have.

**Brian M. Walsh**  
**Executive Director, People Directorate**



# Foreword

I welcome this Annual Report as an important part of Coventry City Council's commitment to be transparent with local people about what we do and what we have achieved for those who use our services and their carers.

Since our last Annual Report, the Care Act 2014 has finished its legislative journey through Parliament. The Care Act is a significant stepping stone to wider reform of care and support, and underlines the importance for councils to promote wellbeing, prevention and independence. In Coventry, we have always strived to support people to keep hold of their independence, in their own homes, for as long as possible. This remains important.

During 2013 we consulted on a range of proposals affecting adult social care services in the city. The consultation exercise undertaken by the Council was extensive and we spoke to many people who were directly affected by the proposals. This enabled my Cabinet colleagues and I to fully understand the potential impact of the difficult decisions we were asked to make.

We will need to continue to review the way we deliver our services so that we can ensure that good quality but also good value care is given to those who need it most by extending the reach of Telecare, and drawing on the support of families and the wider community.

The challenging financial climate in which we are working will see adult social care take more and more difficult decisions about how we can best use our shrinking resources. I will ensure that any further proposals for changes to services are subject to a robust public consultation.

Our success depends heavily on our ability to work with our many partners including the local NHS, the voluntary sector, private companies, service users and their carers.

I look forward to working even more closely with all our partners in the coming year to ensure that vulnerable people in Coventry are able to live as independently as possible, within their communities, with their care and support needs being met in ways that they choose.

**Councillor Alison Gingell**  
**Cabinet Member (Health and Adult Services)**



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# What it means to receive adult social care support in Coventry

Adult Social Care is part of the People Directorate of the City Council. The service works across the Council and with partners to support adults over the age of 18 and older people who may need social care or support to remain independent. In early 2014, a new vision for adult social care in Coventry was developed.

This vision is “ to enable people in most need to live independent and fulfilled lives with stronger networks and personalised support. ”

The aim of the vision is to reflect the required emphasis on prevention, early intervention and enabling people to maintain their independence within their chosen community. This annual report is a way of communicating to the people of Coventry about how we and our partners are meeting the needs of people who require social care and support and our plans for the future.



## Facts and Figures 2013/14

### During the year...

- 9,208 people contacted Adult Social Care compared to 8,600 people in 2012/13 – a 7% increase;
- 4,313 were signposted to sources of information, advice or support, or had their needs met compared to 3,863 people in 2012/13 – a 12% increase;
- 4,895 had an assessment of their needs – compared to 4,737 people in 2012/13 – a 3% increase
- Of these, 3,347 received short term support and did not require on-going support compared to 2,876 people in 2012/13. This is an increase of 16%
- The remaining 1,548 received on-going support compared to 1,861 people in 2012/13. This represents a 17% decrease in the number of people who required on-going support following assessment

## We supported....

- 7,227 people received support from Adult Social Care during the year in comparison to 8,517 people in 2012/13
- We support people who are assessed as having 'critical' or 'substantial' needs
- 6,251 people received their support in the community in comparison to 7,526 people in 2012/13
- 56% of people had a personal budget
- 16% received their personal budget in the form of a direct payment
- 1,974 carers were assessed and received information, advice or support
- Of the people we support aged 18-64, 51.5% are male and 48.5% are female. 19% identified as Black, Asian and Minority Ethnicity (BAME). This is under-representative of Coventry's BAME population for this age group (27%)
- Of the people we support aged 65+, 32% are male and 68% are female. 9% identified as Black, Asian and Minority Ethnicity, which is slightly under-representative of the city's BAME population for this age group (10%)

More detailed information on our performance is on page 34-38.

## Our staff

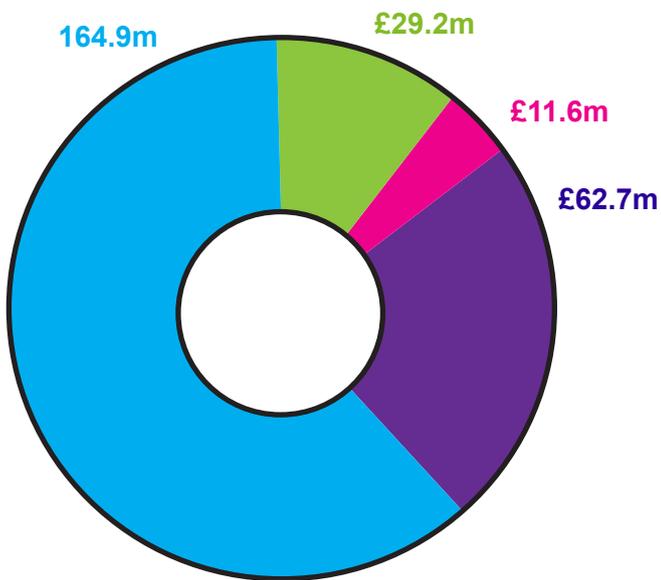
Each year the Council collects adult social care workforce data as part of the Skills for Care National Minimum Data Set for Social Care (NMDS-SC). As at 31 August 2013, the latest data available, there were 1,335 people employed within Adult Social Care. 19% of staff are from a BAME group; this is broadly ethnically representative of the local community. 85% of the workforce are female and 52% of staff are in part time posts.

## Money

The City Council had a net budget of £268.4m (excluding schools) for 2013/14. Each year the City Council reviews its budget plans in light of existing and new legislation, its priorities and available resources.

In September 2013, the City Council has operated in four directorates, People, Place, Resources and Chief Executive's, which includes Public Health. Adult Social Care is part of the People Directorate which is the largest single directorate with a net budget of £165m for 2013/14.

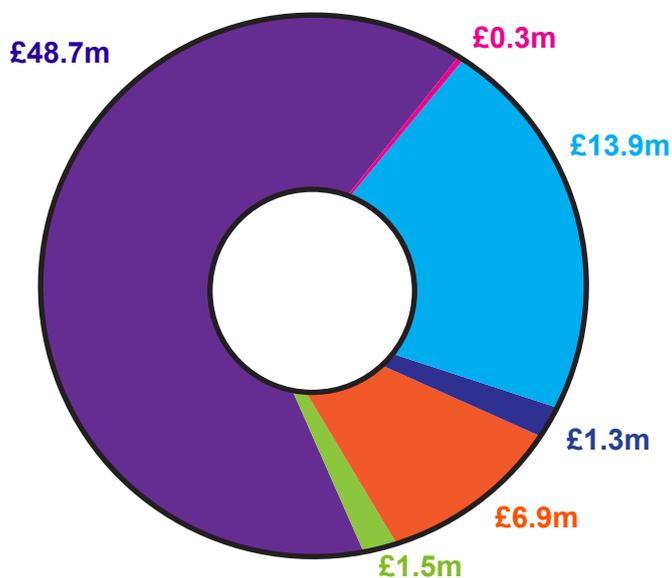
This chart on the following page identifies the areas of spend across the Council during 2013/14.



2013/14 Revenue Spending Position (£264.4m)

- People
- Place
- Resources
- Chief Executive's, Contingency and Central Budgets

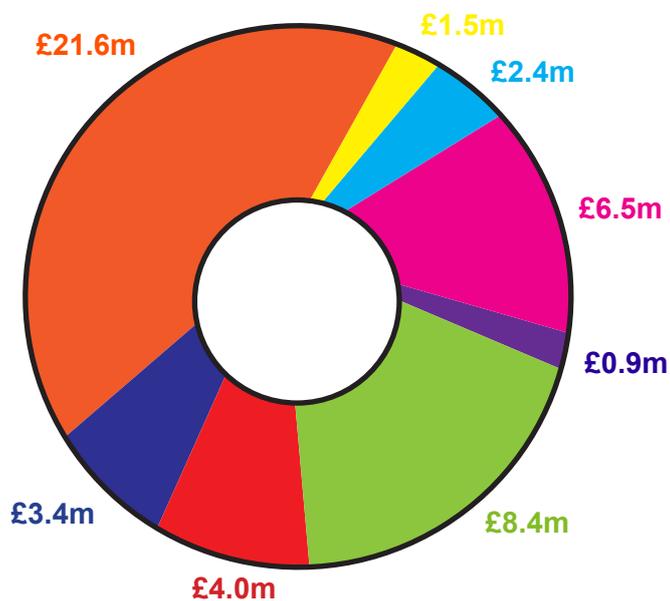
Of the total above, £72.6m was spent on Adult Social Care. The chart below shows how this was spent.



2013/14 Adult Social Care Net Spend (£72.6m)

- Commisioning Assessment and overheads
- Other
- Spend on People
- Transport
- Central Recharges
- Training and Development

The amount spent on people was spread across the following services:



2013/14 Net Spend on Services (£48.7m)

- Day Opportunities
- Direct Payments
- Equipment and adaptations
- Homecare
- Housing with care
- Nursing
- Residential
- Supported Living

# Our Annual Report

This Annual Report describes Adult Social Care's performance for 2013/14. By acknowledging what we have done well and where we need to improve, we aim to be transparent and accountable to the people who live in Coventry. It is important to communicate how the focus of adult social care is changing, and how it will continue to change to meet the challenges the Directorate faces, not least those heralded by the introduction of the Care Act on 1 April 2015.

It is vital that we understand whether the support we offer to people is making a difference. Think Local, Act Personal (TLAP) is a group of over 30 national organisations working together with people who use services and their carers to improve adult health and social care through personalised and community-based support. Their Making it Real themes set out what people who use services and their carers expect to see and experience when support services are personalised. These themes help us monitor our progress towards enabling people to have more choice and control so they can live full and independent lives. This report is structured using Making it Real themes:

- **Information and advice:** having the information I need, when I need it
- **Active and supportive communities:** including friends and family
- **Flexible integrated care and support:** my support, my own way
- **Workforce:** my support staff
- **Risk enablement:** feeling in control and safe
- **Personal budgets and self-funding:** my money

Working in partnership is important to us and those that we work with, including the providers that we commission services from, our health partners, people that use services and their carers and representatives. Increasingly, and with the introduction of the Better Care Fund, we will integrate closer with our colleagues in years to come.

## Key Challenges

By 2016 Coventry City Council will have had its government funding cut by nearly a half since 2010. We must use these diminishing resources in the best way we can to support Coventry citizens and deliver the objectives set out in the City Council 10-year plan.

As we have said, Adult Social Care is in the People Directorate of the Council. As it is the biggest Directorate within the Council, it will be required to make significant savings in order for the Council to balance the budget.

Therefore, change is needed to accelerate the ability of Adult Social Care to respond to the population, policy and financial challenges it faces. This means both change to system and process through to increasing integrated approaches with our health partners and changes to the delivery of personalised support to meet the requirements of Think Local, Act Personal.

## In the years to come there will be:

- An increasing number of people aged 85 and above
- More people with long term health conditions and conditions related to old age i.e. dementia
- More people aged over 65 unable to manage at least one self-care activity
- More people reliant on the support of family networks and carers

## The financial position means that:

- In order to support our population we will need to ensure that people are making use of all the resources available to them
- Support should be tailored to personalised outcomes making best use of people's own assets and the assets available to them
- Delivering effective support that prevents the need for on-going services is both good practice and more sustainable
- More creative use of support planning, integrated fully within the Adult Social Care workforce

## Feedback from users has told us the following:

- They are frustrated at the lack of cohesiveness between health and social care
- They want to be able to access support at the time it is required in the manner in which it is required
- They want to be supported in the most appropriate setting that maximises independence
- People do not aspire to be long term users of social care or health services where this could be avoided
- They want more control over their daily lives
- They want services that address their cultural needs

To support the delivery of change, a Commissioning and Personalisation Plan has been developed which includes an action plan on what changes we propose to make, how these changes will be delivered, and most importantly what improvement we will expect to see as a result over the next two years.

The action to be taken across adult social care to meet the challenges described will be delivered through progressing three key areas of activity:

- **Managing Demand:** Actions to stop or significantly delay the requirement for on-going care and support services
- **Managing the Support System:** Actions to ensure care and support is arranged effectively with appropriate degrees of user choice, control and effective use of resources
- **Managing Supply:** Actions to ensure there is an appropriate supply of a range of social care and support services to meet the needs of people who will require them

The plan has been presented to our Cabinet Member and relevant Scrutiny Board. The plan is publically available at [www.coventry.gov.uk/adultsocialcarecpp2014](http://www.coventry.gov.uk/adultsocialcarecpp2014)

Despite the challenges we face, Adult social care is committed to supporting the most vulnerable and ensuring personalised support provides people with choice and control over their lives.

# Adult Social Care Peer Review

In March 2014 a peer review was undertaken within Adult Social Care as part of the Local Government Association's (LGA) Improving Social Care and Transforming Public Services agenda. The peer review involved a team of professionals and experts meeting with a wide range of stakeholders including staff, partners and service users. This enabled them to build an informed assessment of current practice and service delivery within Adult Social Care. The review focused on the City Council's approach to commissioning and how this could reduce demand for traditional services through the use of community assets, families and friends.

A summary of the findings from the peer review are as follows:

## Strengths

- Partnerships with health colleagues are good and these facilitate close working and integrated approaches to service delivery
- The POD mental health recovery service is an excellent example of a recovery model and was recognised by the peer review team as one that offers a comprehensive personalised approach
- Local political leadership from the Cabinet Member was recognised as being strong and well respected
- A one organisation approach was observed by the peer review team. Staff interviewed were enthusiastic and positive about changes in services
- Partnership Board Structures – members, including service users and family carers, informed the peer review team that the Boards provided an opportunity to engage, shape and influence service provision

## Areas for consideration

- Whilst engagement with stakeholders highlighted a positive experience the peer review team felt that there could be a greater role for co-production with people who use services and their family carers
- Development of a single referral pathway for social care and health clients was proposed along with a single point of access to assist with timeliness of signposting, triage and assessments
- The peer review team recommended that the Council and commissioners consider how providers and the voluntary sector can be involved in the development of community asset-based approaches
- Consideration should be given to how personalisation is fully integrated into the everyday business of Directorate staff and activities. It is proposed that workforce development support is provided to improve innovation in support planning and service user outcomes

The outcome of this review has been invaluable in helping the Council plan for the future. Key recommendations from the review are incorporated into the Council's **Commissioning and Personalisation Plan**.

# 'A Bolder Community Services' (ABCS)

The 'A Bolder Community Services' Programme was created in 2012 to assist the former Community Services Directorate (now part of the People Directorate) to meet savings targets to enable the City Council to set a balanced budget.

During 2013/14 the programme oversaw the development of a number of proposals to deliver the required savings of £3m for 2013/14 and £8m for 2014/15 and manage pre-existing budget pressures facing the Directorate.

Prior to developing formal proposals for consultation, engagement sessions were held with staff, partnership forums, partner organisations and the voluntary sector to explain the challenges faced by the Council and how these could potentially affect Adult Social Care services. These sessions took place from early 2013 and helped to inform proposals for formal consultation.

Between 27 August 2013 and 15 November 2013 the City Council consulted on six proposals about changing, reducing and closing some Council services.

## **These were:**

- Reducing funding to housing-related support services
- Closing two Council-provided housing with care schemes
- Changing and reducing the number of day opportunities services provided by the Council for older people, people with dementia and people with learning disabilities
- Reducing funding to information, advice and support services
- Changing the funding responsibility for The Aylesford (reablement centre) or closing the service
- Changing home support reablement services which included ceasing the Council-provided Home Support Short Term Service (HSSTS)

An extensive consultation exercise was undertaken. The City Council is committed to ensuring that the views of the people of Coventry, current users of our services and their carers are taken into account when making important decisions. It is only by gaining these views and experiences that the Council can understand the potential impact of any service changes.

During the consultation period, 8,500 people were contacted, 90 meetings held and over 1,100 people spoken to. 536 survey response forms were complete and 262 additional letters were received. Two formal petitions were also received in respect of the housing-related support and information, advice and support proposals.

As a result of the consultation a number of proposals were amended or changed including retaining weekend day services provision for older people with dementia and taking an organisation by organisation approach to the implementation of required changes.

Full details of the ABCS consultation can be found <http://www.coventry.gov.uk/abcs>

# Understanding your views and experiences

We want the people who use our services and family carers to be at the centre of the decisions we make about adult social care. To do this we need to understand people's experiences of care and support, involve them when we need to make changes and take on board their views to inform decisions that are made. Throughout 2012/13 we undertook a range of activity to understand these views and experiences including:

**The Adult Social Care survey** - between January and March 2014, 406 people responded to the Adult Social Care Survey (a 35% response rate). You will see what people told us about their support throughout this document.

Another Adult Social Care Survey and a Carers' Survey will be conducted during 2014/15. We will use the results to track our progress in delivering services that make a real difference.

**Partnership meetings** - co-ordinated by the City Council (Older People, Learning Disability and Physical and Sensory Impairment) are attended by a wide range of stakeholders, and provide regular opportunities for engagement and consultation.

**Carers' Forums** - held throughout the year to offer a specific opportunity for family/informal carers to share their views with the Council.

## Learning from when things don't go so well

Local Authorities are required by law (National Health Services and Community Care Act 1990) to have a system for receiving representations by or on behalf of people in need of adult social care support who have a range of support needs due to a disability or frailty.

Where we can, issues are resolved at a local or provider level and if this is not possible, then a formal complaint is logged. The overall number of complaints received in 2013/14 was 61 (80 in the previous year). The complaints can be quite complex and usually involve different aspects of the care and support provided to them.

The most common themes were service and communication/information which accounted for 82% of the complaints. Apologies and explanations are a standard basis for resolution and a feature of formal responses.

However, other complaint outcomes have also involved re-assessment, reimbursement, change of worker, change of care provider, changes to a leaflet, reassessment of direct payment, and improving the collection of data within commissioning.

Each year an annual report is produced, which provides further information and statistical analysis of the complaints and representations for the year. This will be presented to the Cabinet Member (Health and Adult Services) in December 2014 and will be available

<http://democraticservices.coventry.gov.uk/ieListDocuments.aspx?CId=566&MId=10204&Ver=4>

During the year two Serious Case Reviews (SCRs) were undertaken. The learning from these reviews has enabled us to improve our consistency in responding to pressure ulcers.

## Progress on last year priorities

In last year's annual report we committed to a number of priorities for 2013/14 and said we would improve in a number of areas. Here is the progress we have made:

### **We said we would...**

Support people with care and support needs and their carers, as early as possible with information and advice. For example, by increasing the availability and quality of information available in libraries and increasing the awareness in the community of specialist conditions, such as autism and dementia

### **We have...**

Commissioned a local Healthwatch, as required by the Health and Social Care Act 2012, and appointed a Healthwatch Liaison Officer to develop the remit of our libraries in providing quality information and signposting

Launched Adult Social Care Direct which aims to reduce the number of access points to adult social care and make it easier for the public to obtain information, advice and signposting

The Dementia Friends initiative has been adopted in Coventry. The purpose of Dementia Friends is to raise awareness and reduce stigma of dementia over 350 people have attended information sessions

### **We said we would...**

Work with community organisations to understand how we can support them to support more people in their local community who are experiencing social isolation

### **We have...**

Established a Community Development Service and secured funding to develop and implement the World Health Organisation's Age Friendly Cities initiative in Coventry, in partnership with Age UK Coventry and Coventry University. A key aim of Age Friendly Cities is to ensure older people have the best possible quality of life

### **We said we would...**

Review the offer to carers, focusing on support that has the greatest impact and sustains carers' ability to continue caring

### **We have...**

Started to review the support and services available for carers in Coventry. During the summer of 2014, a survey of carers and staff across health and social care has been conducted to gather further information to help inform future commissioning activity to ensure that carers have access to support that sustains their ability to continue caring

### **We said we would...**

Improve performance across a number of organisations

### **We have...**

Continued to develop the Coventry Provider Escalation Panel (PEP). The purpose of the panel is to manage health and social care provider performance at an early stage when issues arise and ensure that good quality services are provided

**We said we would...**

Agree a plan for integrated health and social care, to be signed off by the Health and Wellbeing Board by 31 March 2014

**We have...**

Developed a draft Better Care Fund Plan and this was signed off by Health and Wellbeing Board in April 2014. More details can be found on page 31

**We said we would...**

Embed the principles from the Winterbourne Review and Francis Report across the social care workforce

**We have...**

All internally provided services have embraced the principles of the Social Care Commitment with majority having formally signed up

**We said we would...**

Target support with health colleagues to improve standards in care homes

**We have...**

In conjunction with Coventry and Rugby Clinical Commissioning Group, established key relations and joint working protocols with health colleagues to improve standards across the care home sector. For example, nurses now undertake quality monitoring visits with staff from the Council's commissioning team

**We said we would...**

Support Coventry Safeguarding Adults Board to achieve its priorities

**We have...**

Appointed a Head of Adults and Children's Safeguarding. A number of procedures have been updated and an easy read leaflet developed to increase the awareness of safeguarding. The training programme has been revised

**We said we would...**

Improve the experience of people with personal budgets and direct payments, including carers, with the support of a regional project

**We have...**

Through our links to the regional project we have been able to gain access to tools and guidance that have supported us to review our current offer and enable people to have more choice and control over their support. This work will be further developed over the next year



## Introduction from Assistant Director

2013/14 has been a challenging year, but I am proud of how both internal and commissioned services have continued to support vulnerable people. The work over the last year demonstrates our commitment to improving our information and advice offer, including our priority about raising awareness of and providing information and advice about dementia. The formation of the Coventry and Warwickshire's Dementia Action Alliance will provide a great platform for the continuation of this work.



Developing active and supportive communities continues to be an exciting area of work for us. In March 2014 the Community Development Service was launched. This service will have a key role, alongside local residents, to build confident and resilient communities. The service will also work alongside community organisations and faith groups to maximise available support in local areas. In 2013 the Council was successful in obtaining £370,000 of Central Government funding to improve the physical environments across five social care settings, including Eric Williams House, a residential home for people with dementia to make them more dementia friendly. This will have a great impact on improving people's quality of life within their home.

The Adult Social Care Peer Review highlighted our positive working relationship with our health partners as a key strength which we are keen to build upon over the coming year, as we develop our Better Care Fund programme to accelerate health and social care integration.

As part of the drive to re-energise the personalisation agenda, we need to be more creative in our support planning process over the coming year. To enable people with long-term care and support needs to meet their individual outcomes for a fulfilling life, whilst utilising both family and community resources in the area they live.

Workforce development is critical to ensuring the delivery of quality services and ensuring that vulnerable people are protected from harm. Over the course of the year a range of training programmes have been delivered to staff across health and social care.

Two Serious Case Reviews during the year taught us important lessons which, as a result, led to the Pressure Ulcer Protocol being revised, the new protocol implemented, and extensive training delivered to staff. This has resulted in a more consistent response to pressure ulcers and increased numbers of information checklists received from nursing staff which inform safeguarding decisions.

Preparing for the implementation of the Care Act in April 2015 and the Better Care Fund programme are our key priorities in 2014/15. Some of the key actions are outlined on pages 29-31.

**David Watts**

**Assistant Director - Adult Social Care Operations**

## Information and advice: having the information I need, when I need it

Adult social care has an important role in ensuring that advice and information is available to people living in the city. 76% of people who use services and carers told us that they found it easy to find the information they need. This is an improvement on last year where only 70% of people were able to easily find information they needed.

However, we know that this is not the experience of everyone and that people need quality information to understand their options and reliable advice upon which to make decisions about their care and support. Working with our partners, we have achieved a number of improvements to the information and advice we offer.

- **Adult Social Care Direct** launched in March 2014. The purpose of Adult Social Care Direct is to reduce the number of access points to adult social care and make it easier for the public to obtain information, advice, signposting and, where a potential need is identified, ensure that a referral is made to the most appropriate team for an assessment of need to take place. The initial phase of development reduced the number of access points from six to four; work will be undertaken over the coming year to reduce this further within Mental Health and Learning Disability Services. More information about Adult Social Care Direct can be found at [www.coventry.gov.uk/adultsocialcare](http://www.coventry.gov.uk/adultsocialcare) or phone Adult Social Care Direct on 024 7683 3003.
- Information on the City Council website has been updated to make it easier for carers to access the advice they need about support for them and the person they care for.
- **Coventry Carers' Centre** trialled and subsequently introduced its telephone helpline on a Saturday from February 2014. The helpline is available between 10am and 2pm. The increase in the availability of this service will support all carers, but will be especially useful for working carers seeking information, advice and support.
- **Dementia Friends** is a national initiative by the Alzheimer's Society which has been adopted in Coventry. The purpose of Dementia Friends is to raise awareness and reduce the stigma of dementia. Information sessions have been held for social care senior management team, elected members, third sector colleagues, all library staff, Maymorn Resource Centre (dementia day care), Public Health, and social work students on placement at the City Council. Two public sessions have also been held. Over 350 people have attended these information sessions.
- Further improvements have been made to the **Coventry and Warwickshire Dementia Portal** which provides a one-stop shop web portal for people, professionals and family members, to learn more about dementia. Coventry University was commissioned to develop pages, specifically designed for use by people with dementia, to enable them to use self-management techniques to regain / retain their independence. The portal has been widely promoted in libraries and amongst professionals. You can find the portal here: <http://www.livingwellwithdementia.org/>

- **The Coventry and Warwickshire Dementia Partnership Twitter account** continues to be successful. The account has almost 1,400 followers, meaning that we are able to deliver messages via social media and inform people with dementia, and their family members, about services and support available in the local area
- We have continued to make good progress towards implementing the national strategy for adults with autism. Following the success of the Dementia Portal, an **Autism Portal** is currently in development, working with people with autism to decide what information should be available on the portal to help people, family members and professions learn more about autism

**Healthwatch Coventry** has an important role, alongside our voluntary sector partners, to provide information about local health and social care services in the City. A new full Healthwatch Information Service was created from October 2013 by Coventry Citizens Advice Bureau (CAB) and it dealt with a total of 115 enquiries between 1 October 2013 and 31 March 2014. In order to reach more people **Healthwatch Coventry** is currently developing community-based Healthwatch Information Access Points. Work began in January 2014 and four local libraries have been identified to pilot the service.

**Coventry Libraries** have continued to develop the range of information related to health and social care available for Coventry residents. Health and wellbeing zones are being developed in a number of our larger libraries, places which allow libraries to focus the information available and to act as a hub for various health partners to access the library and promote access to their services. Staff can support visitors to libraries with navigating NHS Choices or other available tools to help them access local services.

**Books on Prescription** and Mood Boosting Books are available within our libraries. These books are nationally recognised as a means of support which can help people manage illness or long term conditions or generally help to raise levels of health and wellbeing. In 2013/14 we lent over 3,500 such books, a 60% increase over the year for books of this type.

The availability of e-books, e-audio, online newspapers & e-magazines has increased; these items can be accessed on library computers or downloaded from home free of charge to library members. **The Library Service** is currently working with **Age UK Coventry** to develop a pilot project to enable housebound residents to access e-books, e-audio and e-magazines.

## Active and supportive communities, including friends and family

Having meaningful connections to people and places in the local community is an important way that people who need care and support can maximise their independence and improve their quality of life. 92.1% of service users surveyed told us their quality of life is 'good' or 'alright'. This is a marginal improvement on last year when 91.9% of people felt this way.

48% of service users surveyed told us they have as much contact as they want with people they wished to in their social life, whilst 33% have an adequate amount of contact. 19% of respondents do not feel they have enough contact with people.

Tackling loneliness and isolation amongst older people was identified by the Council and its partners as a priority area. During 2013, a partnership between Coventry University, Coventry City Council and Age (UK) Coventry has been established to lead the development and implementation of the World Health Organisation's Age Friendly Cities initiative in Coventry. By becoming an Age Friendly City, Coventry will work to promote the opportunities available to improve health, participation and security as people age, thereby increasing quality of life for all residents.

68% of respondents to the Adult Social Care survey said they are able to spend enough of their time as they choose and do things they value and enjoy.

There is a strong link between employment, accommodation and an enhanced quality of life. There has been an increase in the number of people with learning disabilities and people who have contact with secondary mental health services (people who are receiving treatment from a Mental Health NHS Trust) in paid employment and who live in their own home, or with family. This improves social and economic outcomes and reduces the risk of social exclusion for these groups.

We want to make sure that people are supported to maintain their community life and that there is a range of activities for people to access. Here is some of what we have achieved...

- This year, members of staff from the **Learning Disability Day Opportunities Service** have supported people with learning disabilities to create a group for people who share an interest in performing arts. A rehearsal space was found within a local church and a faith group is activity involved in the project, supporting with the provision of refreshments on performance days. The group is open access and people in receipt of direct payments, members of the church and other local performance artists have become involved. This is a great example of how local community assets can be used to make a positive contribution to people's lives. The whole performance group were finalists at this year's "National Learning Disabilities Awards" in the category for "the People's Award"
- **Carers** are supported to take a break from their caring roles and maintain their social and community lives. There was an increase of 29% in the average number of carers using the **Carers' Short Break Scheme** during this year. An average of 107 carers a month used the service and received an average of 4.75 hours of support per month. 421 carers accessed a personal budget, via a direct payment to support them in their caring role

- In our continuing efforts to support family carers across Coventry we have completed nearly 2,000 separate carers' assessments and reviews this year and a high percentage of those carers accessed carers' services
- The number of people registered with the **Carers' Response Emergency Support Service (CRESS)** continues to increase and the use of this service has doubled in the last year providing much needed support to families at a time of crisis. At the end of March 2014, 960 people were signed up to the CRESS Service. CRESS emergency plans were instigated on 68 occasions for 47 people, providing 1,120 hours of support plus 142 sessions of support during the night. 31% of carers and cared for using this service were over the age of 85
- **Carers' training** continues to be an important part of the support package to carers and during the next year the City Council will be taking part in a regional survey to find out carers' views of the training and learning opportunities they have experienced and what ideas they have for the future
- One carer explains the positive effect training, provided by **Coventry Crossroads**, has played in her role as a carer but also in supporting key family relationships and community connections to be maintained

*“ The Crossroads Trainer showed me and my daughter to hoist my mum. This has been invaluable to us. My mum cannot move herself and spends most of her time in bed. Because we can move her safely we were able to take her out to see my daughter receive a bowling champion trophy, something my mum has always wanted her to aspire to. It meant a lot to my daughter as her nan taught her to bowl. ”*

- We celebrated International **Older People's Week 2013** by working with Age UK Coventry and Coventry University to host an information and activities day, attended by over 130 people. The majority of people that attended engaged with stallholders in the information and advice market place. A wide range of activities were on offer for people to try out, including Tai Chi, Beetle Drive, plus a theatre workshop and history walk. One older person commented “It was good to have the student interaction” demonstrating the value of social interaction between different age groups in developing community connections
- **The Employment Support Service (TESS)** is part of the Council's Employment Team. TESS specialises in providing supported employment services for disabled adults and young people in Coventry, this includes people with learning disabilities, autism and people with severe and enduring mental ill health. You can find out more about TESS here: <http://www.coventry.gov.uk/tess>
- **TESS** worked with us to develop Raising Expectations to Employment – Coventry's Employment Pathway for disabled people eligible for support through Adult Social Care. You can find out more here: <http://www.coventry.gov.uk/pathways>
- During the year, **TESS** received 75 referrals and supported 38 people into employment (10 people with learning disabilities, 22 people with severe and enduring mental ill health and 6 people with autism)

- **TESS** also supported 38 people to access work experience and voluntary work opportunities (16 people with learning disabilities, 17 people with severe and enduring mental ill health, 2 people with autism and 1 person with a sensory impairment)
- **TESS** supported an average of 99 people per month to maintain their employment and engaged with a total of 88 new employers during the year as part of working with local employers to help them to successfully employ, train and retain more disabled people
- Through the work of **TESS** the Council has increased the number of people known to the Council with a learning disability and in employment by 30%

A case study on the impact of the service is below:

## Case Study – Carl’s Story

### Background:

Carl is 57 years old and lives with his long-term partner. Carl was made redundant and struggled to find a new job despite applying for lots of jobs. The frustration of being unemployed began to affect Carl’s mental well-being and he suffered a breakdown.

### Action:

Carl was referred to Community Mental Health Team for support. The Community Psychiatric Nurse made a referral to TESS as Carl was clear that getting back into work would help him recover from depression. Through TESS Carl was able to access a work trial with a local company, as a warehouse operative, instead of going through a normal interview process. Carl was anxious about his journey to work so TESS helped him practice his journey. Carl also had a Job Coach to support him to learn the new job.

### Impact:

Carl has now been in the job for over a year. He has been given a permanent contract for 40 hours per week. Since starting the job he has never missed a day’s work - he doesn’t even like taking holiday because he loves the job so much. Carl and his family are very grateful to the TESS Team as without their support he feels he would still be doing voluntary work and not in paid employment.

**The Age UK, Coventry Fit as a Fiddle** programme continues to be successful within our Housing with Care schemes, a type of specialist housing where 24-hour care and support is provided to tenants. The Fit as a Fiddle programme runs in all Housing with Care schemes across the city, offering fun and relaxing activities to improve physical and mental wellbeing. Due to the success of this initiative, Age UK Coventry and the Housing with Care Service are working together to develop another programme, which will focus on supporting tenants with long term health conditions, who are looking to increase their physical activity. The programme will also aim to increase confidence and self-esteem amongst participants and reducing the number of visits to the GP or hospital admissions. It is hoped the programme will also help to alleviate loneliness.

**The Pod** is a Council resource for people working to improve their mental health. **Active Reach** is a partnership project between the Pod and Groundwork West Midlands. It is funded by Comic Relief and directed by an Advisory Panel consisting predominately of people supported by the Pod. Active Reach is aimed at improving people's sense of mental well-being and physical health through sustaining engagement in citywide sporting activities. To date over 40 people have benefitted from the project working with numerous sports organisations and providers in the city. Scott was supported to re-connect to rock climbing at the Warwick University climbing facility. Scott describes his experience and the impact it has had on his life:

“ I was nervous to go along to the first session as I have been out of practice for a while, then half way through the first session my confidence began to increase and I felt a buzz in excitement and motivation. Week by week I felt more confident with my climbing and also in my personal life. When I first came to the Pod and started on the Active Reach programme I was low in confidence and now I feel like I am in a better place. ”

## Flexible integrated care and support: my support, my own way

People who use services and carers should be able to exercise choice over how they are supported. Options should be available across a range of settings – either in a person's own home, the community, or in supported living or residential care. People should experience co-ordinated support and that support should be responsive to changes in people's lives.

When we asked people about their care and support in our Adult Social Care Survey, 92% of service users said they were satisfied with the care and support they received, of which 64% were very satisfied.

Being able to choose what to do and when to do it and having control over daily life is important for a person's overall quality of life. 80% of service users said they have control over their daily life. This suggests that 20% feel they do not have control over their daily lives; this is an area for us to explore and improve upon.

We want to make sure that, wherever possible, people have choice and control over their support.

- Following the completion of the **National Joint Improvement Programme (Winterbourne View) Stocktake**, a local register of people currently in hospital placements was developed for the Coventry and Warwickshire area. In April 2013, eight Coventry people were currently in a hospital setting; four of these placements were out of the city. During the year, all eight people were reviewed by a multi-disciplinary team and future plans identified for them

- The following outcomes had been achieved by March 2014:

Total number of people living within hospital setting as at 1st April 2013	Number who left a hospital setting by 31st March 2014	Outcome
8 people (4 people in City and 4 people placed out of City)	4 people (3 people in City and 1 person returned home from an out of city placement)	2 people moved home with a package of support. 2 people moved into residential care

- The local register will be maintained and further developed over the next year to include adults, young people and children placed out of city, in other residential establishments
- The City Council and our health partners are committed to supporting people currently living in a hospital setting to return home with the required care and support to enable them to independent lives within their chosen community
- Home environments can create barriers to maintaining an individual's independence and roles within their family life. Disabled Facilities Grants enable adaptations to a person's home, aimed at providing easier access in and out of the property and to essential facilities such as bathing, toileting and lifts. In the last year, the Council provided 376 **Disabled Facilities Grants** and continued to maintain last year's increase in performance levels
- The Council is committed to ensuring that accommodation, care and support is delivered to individuals in ways that maximise their independence and reduces the need for on-going services. **Axholme House** in Wyken is a Council-run step-down recovery service for people with long-term and enduring mental ill health. The Axholme House building has a number of structural issues and did not offer accommodation conducive to promoting independence
- In light of this, in January 2014, the decision was taken to cease services at Axholme House and then relocate occupants to **Clifton House** in Foleshill. All six occupants overwhelmingly supported the move to new improved accommodation. In total Clifton House can offer 10 people transitional support for up to two years to gain the required skills to live independently. People moved into their new accommodation in April 2014
- A consultation process regarding ceasing to use **Dick Crossman House**, a shared supported accommodation for eight adults with learning disabilities, offering tenants the opportunity to move to new build accommodation on Chace Avenue, Willenhall, was undertaken over the last year. The overwhelming outcome was that all tenants at Dick Crossman House would like to move to the new accommodation which offers each tenant their own private bedroom, lounge, kitchen and bathroom. Tenants moved in July 2013.

The following case study describes one person's journey to their new home:



## Case Study – John’s Story

### Background:

John has lived at Dick Crossman House for over 20 years, most of his adult life, and was comfortable living there. Although John had his own room, it wasn’t very big. John had privacy but it did get noisy sometimes, which he didn’t like.

### Action:

When John found out he would be moving away and to somewhere different he got very worried about what might happen and how much his life would change. It took him a while to understand what his flat would be like. He went to the tenant’s team meetings and staff told everyone about what was going to happen which started to put his mind at rest.

Everyone would get a brand new flat with their own lounge, bathroom, bedroom and kitchen.

As moving day got closer he started to buy items for his new flat, he knew straight away what colour he wanted his kitchen to be, so he bought everything in red; microwave, tea towels, tea/ coffee pots. John was very clear that he wanted a ‘chocolate brown leather recliner sofa and chair’ and a memory foam mattress for his new double bed. Staff helped him go to local shops to choose furniture.

### Impact:

John said: “Now that I am finally moved in I am absolutely loving my new flat. I like the intercom with a little TV so I can see who is at the door and my mum says she likes it as well. My life is really relaxed now and very quiet, I have something to call my own and it is so much better not having to share a kitchen and bathroom with someone else.”

## Workforce: my support staff

- When people receive support it should be from staff who are competent and have the values, attitude, training and tools to make sure that people achieve the outcomes they want from their lives. People who receive direct payments and those who self-fund their care should be supported to recruit, employ and manage personal assistants
- The Council’s Social Care Development Centre ensures that staff working in social care are highly trained and competent in their roles. Courses focus on person-centred planning, dignity, and communication are delivered to care and support staff across the city, not only Council staff. This training reinforces the values and attitudes we expect care and support staff to hold and is essential for improving the experience of people who use our services
- The City Council, in conjunction with Coventry and Rugby Clinical Commissioning Group, has established key relations and joint working protocols with health colleagues to improve standards across the care home sector. In particular, a range of posts have been established to work jointly across care homes to improve quality standards. For example, qualified nurses support quality assurance activity within the nursing home sector.

- The quality function within the Council's Commissioning Team continues to provide support to the care market through concentrated work and resources to improve service levels whilst providing information on training, development opportunities and new national care standards
- In addition to the Council's monitoring work, **Healthwatch Coventry** has undertaken 'enter and view' visits with a number of care homes in the City. Healthwatch Coventry visited 13 residential care homes during March and April 2013. The visits focused on choices at meal times, refreshments and activities. Healthwatch Coventry found that there were variations around food, interaction between staff and residents, types and number of outings, involvement of the local community and roles of staff (having an activity worker or not) between the different care homes. The size and space available to the care home also impacted on the type and range of activities available to residents. Healthwatch identified positive practice where the individual choices of residents were met and creative ideas for activities were implemented. These visits have proved valuable in assessing quality standards and user views. Due to the success of this work, Healthwatch Coventry plans to continue carrying out further care home visits
- **Grapevine** increases user involvement in the setting of standards and monitoring of statutory services including day opportunities, supported living, residential care and carer breaks services by undertaking peer review visits. People with learning disabilities visited 30 providers and made 22 post-audit visits during the year. The focus of the visits is to look at the quality of life of those people using or living in their services. Through this work Grapevine is finding that providers and their staff are becoming more aware of the need to give people genuine choice in all aspects of their lives. The post-audit visits have proved to be a successful mechanism to support providers to understand the recommendations and how to make suggested improvements
- Both Healthwatch Coventry and Grapevine produced reports about each visit which has been shared with both the providers and the City Council, as the commissioner of these services to ensure learning is embedded into practice
- A multi-agency training programme involving people with autism was developed and delivered to over 300 staff members across health, social care and the third sector. This training programme has raised awareness of autism and how to effectively work with people on the autistic spectrum
- Staff from the **Council's Social Care Employee Development Unit** provided training to **Coventry and Warwickshire Partnership Trust (CWPT)** staff on the subjects of Mental Capacity Act and Deprivation of Liberty Safeguards. The aim was to support CWPT in meeting its registration and inspection requirements and to give ward staff some practical advice around how the Acts affected their services, recording and compliance. Over 40 staff attended these training sessions
- **The Opal Assessment and Demonstration Centre** delivered a range of training to colleagues from **Coventry and Warwickshire Partnership Trust and two external providers** on developing competency and awareness on manual handling techniques and equipment aimed at improving user experience, as improved equipment provision often leads to less intrusive care being delivered. In total over 75 people received training

- We launched new supervision guidance for social care staff working in adult social care. The guidance aims to ensure that through effective supervision social work staff and occupational therapists develop good practice and make sure that decisions are based on sound evidence and assessment of risk. It also provides the opportunity to ensure national and local policies are understood and correctly applied
- We continue to make improvements which support staff to do their jobs and are achieving recognition for the quality of the Council's support staff. **The Pod** is a Council resource for people working to improve their mental health. The Pod manager was successful in winning the National Mental Health Leader award at the National Positive Practice Awards in Mental Health
- **The Social Care Commitment** developed by Skills for Care is the sector's promise to provide people who need care and support with high quality services. Employers and employees, across the whole of the adult social care sector, sign up to the commitment, pledging to improve the quality of the workforce. All internally provided services have embraced the principles of the Social Care Commitment with the majority having formally signed up. As an example one service is working closely with individuals to engage them in the setting of the standards, establishing what they expect from our services
- We work with providers to consistently maintain and improve workforce standards across the city. Regular provider forums provide an opportunity to deliver refresher training through expert speakers. For example, the **Coventry Cares Learning Network** supports the learning and development of the workforce in external social care provision, such as care homes and home support agencies. A number of training events are run by the learning network, including two full day training events. In the last year one of these events was focused on working with people with visual or hearing impairments, this included a presentation at the Bionic Ear Show and provided an opportunity for staff attending to experience life without sight in the sensory tunnel and training in how to be a sighted guide
- The Learning Network was successful in obtaining funding from the National Skills Academy Registered Manager's Programme to establish a networking group for registered managers in Coventry. The group meetings are an opportunity for managers to network and share good practice, learn from expert speakers, and develop tools and templates which will enable more effective working and improve standards. To date 67 Registered Managers have been actively involved in this group
- An on-going development theme for the Learning Network is that of dignity in care. Workshops for frontline staff have been developed and are currently running (from April 2014). At these workshops staff will be encouraged to become Dignity Champions. A Coventry Dignity Network will also be launched in late 2014 to continue to support this key area of work to ensure that everyone who receives care and support are treated with dignity and respect
- Since 2012, we have actively offered apprenticeship opportunities for young people to gain experience and qualifications to work in the adult social care sector. The scheme has proved to be successful in providing a career path for young people. Rebecca started as a health and social care apprentice in May 2013 and has recently secured a permanent post providing assisted care to enable older people to live independently. She describes below her role and the impact it has had on her life:

“ I assist elderly people with a range of care, talk to them and try to build up trust. Getting an apprenticeship has really helped. I didn't work for seven months before securing my apprenticeship. I'm now working full time after getting a permanent post and I'm doing my NVQ Level 2. So it is a big thumbs up from me. ”

# Positive risk enablement: feeling in control and safe

People who use services should expect to feel safe and secure. This means being free from abuse, falling or other physical harm. In the Adult Social Care Survey, 95% of service users said they felt safe as they wanted or adequately safe.

63% of people say that the way they are helped and treated makes them feel better about themselves and ensures their dignity. This is up by 6% on last year and therefore demonstrates some improvement in this area.

Following the survey, people who said they did not feel safe at all were contacted by Council staff to investigate their responses further.

People who use adult social care are supported to assess risks and benefits and plan for problems that may arise. Safeguarding processes are well co-ordinated with everyone understanding their role. People, carers and family members should know how to raise any concerns they have.

We received 1,002 safeguarding alerts in 2013/14 representing a 24% increase from the previous year. This indicates that there is further improvement in the general awareness of safeguarding across the city and that people know how to raise an alert.

The **Coventry Safeguarding Adults Board** produces an annual report, which describes the achievements and challenges of the year. We were committed to supporting the Board in its priorities for 2013/14. The Board agreed three key priority areas:

- 1 Responding, listening and acting on concerns (including learning lessons from reviews)
- 2 Continuing and strengthening multi-agency working
- 3 Reducing harm, by preventing harm, recognising risk and harm and dealing with it when it occurs.

Here are some of our achievements that help people to remain safe...

- There has been a major drive to improve the **Provider Escalation Panel (PEP)**. This is a monthly multi-agency meeting which monitors providers where there are emerging issues in terms of quality and performance. Improvements include better information sharing and a stronger focus on safeguarding
- Introduced electronic discharge notifications to GPs to ensure that consistent and relevant information is shared quickly to support the continuous care and support for people following discharge from hospital
- **West Midlands Police** established a vulnerable adult hub that offers a single point of contact allowing the force to respond to referrals from partners for primary investigations to be completed before cases were passed through to public protection teams. The hub has been recognised as best practice

- The e-alert system has resulted in the Safeguarding Team at **University Hospital Coventry and Warwickshire** being able to respond promptly to the needs of at-risk individuals who attend the hospital. This has had a positive impact for all involved; the person gets rapid protection and staff members supporting the person are aware of the risk factors and can get immediate support and advice from the Safeguarding Team
- The City Council has started trialling the use of **GPS trackers for people with dementia**, to support them to walk safely and remain in their own homes for longer. They also provide reassurance to family members and care staff that they will be able to trace people's movements if needed. This has enabled people with dementia to remain at home for as long as possible, delaying the need for residential care. A case study on the impact of using GPS Trackers can be found below

## Case Study – Catherine's Story

### Background:

Catherine lived in a Housing with Care Scheme and has dementia. Catherine had left home on two occasions without returning at her normal time. Both times the Police were called to assist. A door exit sensor had proven ineffective and the Care Provider no longer felt able to meet her needs.

### Action:

At a review meeting, it was identified that Catherine may benefit from a GPS Tracker. Both Catherine and the Care Provider agreed and the Buddi GPS System was chosen.

### Impact:

The Buddi system was used on three occasions to enable Catherine to be returned home safely by the Police. The use of Buddi enabled Catherine to remain at home and delayed her admission to residential care for three months. This meant that her admission to residential care could be planned over a period of time rather than by an emergency admission.

- **Grapevine**, in partnership with the Council and the Community Safety Partnership launched **Safe Places** in March 2014, a scheme to help people with disabilities to be part of their community and feel safe using shops, cafes and entertainment venues. Working with local businesses, Safe Place logos are clearly displayed and staff within participating businesses will provide help where required, this may involve contacting a named person on their contact card or if a crime has been committed, contacting the Police. The scheme will initially focus on the city centre, during the first year of operation
- Adult Social Care will continue to support the Safeguarding Adults Board to achieve their priorities. The Safeguarding Adults Board Annual Report for 2013/14 is available at: [http://www.coventry.gov.uk/downloads/download/534/coventry\\_safeguarding\\_adults\\_board\\_reports](http://www.coventry.gov.uk/downloads/download/534/coventry_safeguarding_adults_board_reports)

The report also provides details of their 2014/15 priorities.

# Personal budgets and self-funding: my money

- 56% of people receiving social care support during the year received a personal budget. This has increased from 55% in 2012/13. 16% of people received their personal budget via a direct payment, increasing from 15% in 2012/13
- During the year the City Council has been involved in a regional project to explore ways to increase the numbers of personal budgets and direct payments. The overarching aim is to ensure more choice and control for people in receipt of personal budgets and to improve the experience of people receiving direct payments. Through this project we have begun to review our personal budget and direct payment offer, as part of our drive to re-energise personalisation agenda in Coventry
- During the year, a new service was trialled with **Penderels Trust**, a local voluntary organisation paid by the Council to support people in managing their personal budget or direct payment. The new **Suitable Person Service** provided the opportunity for some people with physical disabilities to have their personal budget managed by a 'suitable person', a member of staff from Penderels Trust. The role of the suitable person is to take on the legal responsibility of managing the direct payment and the care arrangement. For example, signing the contractual agreement with the care providers and ensuring the support is meeting their needs
- The new service has enabled two people to move into their own home. This had not been possible before, due to concerns about their vulnerability and their ability to manage their care and financial arrangements. The outcome achieved is that these people are now able to have the support of their choice, delivered flexibly to meet their needs and enable them to access further education. Due to the ability of having different hours of support during term-time and holiday periods. This is an outcome that traditional services would have struggled to provide
- Below is a further case study which demonstrates how the use of Direct Payments can greatly improve outcomes for people with complex disabilities

## Case Study – William's Story

### Background:

William is a 19-year-old man with significant learning disabilities and complex autism. He lived in the family home where he was supported by his family. William has high support needs and requires assistance with all aspects of his daily living and support to make decisions.

### Action:

William and his family used a direct payment to employ a consistent staff team who they felt would be able to meet the agreed outcomes for William and enable William to begin to build trusting and valued relationships with an increasing circle of support. William's staff members are able to really understand what is important for William and therefore maximise his opportunities to exercise real choice and control on a day-to-day basis whilst living in the family home.

### Impact:

William has now moved into a supported tenancy and remains in his own home with appropriate support. William is developing skills as a young adult, taking increased, measured and appropriate responsibility over his life choices.

## Summary of key priorities for 2014/15:

For 2014/15 our key priorities are linked to two major policy developments from Central Government, which will change the way adult social care services are delivered from April 2015 onwards. These are the Care Act 2014 and the Better Care Fund Programme.

### Care Act 2014

During 2013/14 Central Government consulted upon changes to the law which governs adult social care. In May 2014 the Care Act received Royal Assent.

The central objective of the Care Act will be to create a single statute for adult care and support in England.

### The Act is built around people, it:

- ensures that people's **well-being**, and the outcomes which matter to them, will be at the heart of every decision that is made;
- puts **carers** on the same footing as those they care for;
- creates a new focus on **preventing and delaying needs for care and support**, rather than only intervening at crisis point, and building on the strengths in the community;
- embeds rights to choice, through care plans and **personal budgets**, and ensuring a range of high quality services are available locally.

### The Act makes care and support clearer and fairer, it:

- extends financial support to those who need it most, and protects everyone from catastrophic care costs though a **cap on the care costs** that people will incur;
- will ensure that people do not have to sell their homes in their lifetime to pay for residential care, by providing for a new **deferred payments** scheme;
- provides for a **single national threshold for eligibility** to care and support;
- supports people with **information, advice and advocacy** to understand their rights and responsibilities, access care when they need it, and plan for their future needs;
- gives new guarantees to ensure **continuity of care** when people move between areas, to remove the fear that people will be left without the care they need;
- includes new protections to ensure that **no one goes without care if their provider fails**, regardless of who pays for their care.

The Care Act is largely due to come into force in April 2015.

**Priorities linked to the Care Act are:**

Priority	Action	Outcome	Timescale
<b>Implementation of Care Act</b>			
Prepare for Care Act 2014 implementation	<p>The Care Act Implementation Board has responsibility for Care Act implementation. The Board will oversee key areas of activity on:</p> <ul style="list-style-type: none"> <li>■ Information, Prevention and Advice</li> <li>■ Assessment, Eligibility, Support Planning and Personalisation</li> <li>■ Care Markets</li> <li>■ Charging / Paying for Care</li> <li>■ IT</li> </ul>	Be reform ready	<p>By 1st April 2015 (excluding funding reform provisions within the Act)</p> <p>By 1st April 2016 for funding reform provisions</p>

**Theme – Supporting Carers**

Continue to support carers to enable them to continue caring	Complete the review of Carers' Services with the Coventry and Rugby Clinical Commissioning Group, in consultation with carers. This will enable us to understand what type of support has the greatest impact on carers' lives	New Multi-Agency Carers' Strategy produced. This strategy will provide details about the future services that will provide support to carers in line with the Care Act	<p>Strategy produced by April 2015</p> <p>New services commissioned by October 2015</p>
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**Theme – Supporting People with Disabilities**

Develop an all age disability approach for supporting children, young people and adults with disabilities	Create a new All Age Disability Service. This multi-disciplinary team will include children and adult social workers, community nurses, therapists and education staff who specialise in working with children with special educational needs (SEN)	<p>The new service will ensure co-ordinated support across education, health and social care which takes a whole life approach to care and support planning.</p> <p>Long term aim is improve people's quality of life and reduce the number of out of city placements</p>	By September 2014
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## Better Care Fund

The £3.8 billion Better Care Fund (formerly Integration Transformation Fund) was announced by Central Government in the June 2013 spending round to accelerate integration in health and social care. The Better Care Fund is a single, pooled budget to support health and social care services to work more closely together in local areas.

The aim of the Better Care Fund is to deliver better services to older people and those with long-term conditions by ensuring they receive the right support, in the right place and at the right time.

During the year we have jointly developed our draft Better Care Fund plan for Coventry with our health partners. Our shared Better Care Fund vision is that **'Through integrated and improved working, people will receive personalised support that enables them to be as independent as possible for as long as possible'**.

**There are three work streams within the plan:**

- 1** Short-Term Support to Maximise Independence (Older People aged 75+)
- 2** Long-term care and support (including joint packages & NHS Continuing Health Care - NHS CHC)  
There are two strands to this work:
  - Long-Term Care and Support For Learning Disabilities & Mental Health (all ages)
  - Long-Term Care and Support for Older People (75+)
- 3** Dementia (Older People aged 75+)

A Better Care Plan was submitted to Central Government in April 2014. These plans will continue to be worked upon during 2014. The Better Care Fund budget will formally begin from April 2015.

Priorities linked to the Better Care Fund Programme are:

<b>Theme - Short Term Care To Maximise Independence (Reablement)</b>			
<b>Priority</b>	<b>Action</b>	<b>Outcome</b>	<b>Timescale</b>
Increase use of technology to enable people to live independently in their own homes	Develop and implement an enhanced Telecare offer, initially for older people, as part of a reablement package	Enhanced Telecare operational and enabling people to maximise their independence and reduce the requirement for long-term support	By September 2014
<b>Theme - Supporting People with Dementia</b>			
To enable people with dementia and their carers to be as independent as possible, for as long and possible	Undertake a review of post-diagnostic support available to people with dementia and their carers. People with dementia and their carers will be involved in the review via a public consultation	A revised 'menu' of post-diagnostic support to be developed following the consultation. Post-diagnostic support will be tailored to the individual's needs	Review completed by April 2015

Healthwatch is the independent champion for health and social care services in Coventry. We work to give people a say and influence over their local services.

This report shows that the last year has been a period of challenge and change for adult social care services in Coventry. A significant amount of money is spent on these services and this is under increasing pressure as government budget cuts require the council to reduce its expenditure by very significant amounts of money. The last year saw the beginning of changes to services resulting from the A Bolder Community Services review, which are detailed in this report.

The process for reducing costs will continue into the coming year and beyond, along with very significant developments under the Care Act and Better Care Fund which are rightly reflected in the council's priorities for the coming year.

Yet the statistics show that demand for service is increasing, more people are being assessed for services but less are eligible for services and a greater proportion of people receive short term support.

There was an increase in people signposted to sources of information and advice and this is likely to be an ongoing trend as resource pressures mean that the Local Authority can provide less direct help. Therefore high quality information, advice and support is very important as there can be a significant impact on individuals and families when this is not in place. This kind of effective preventative provision will be even more important as services are reduced due to funding constraints and shift as the Care Act brings in changes.

Support for Black Asian and Minority Ethnic (BAME) residents is at 9% - indicating that there may be unidentified need within the BAME population of Coventry which is a bigger proportion than this, so more work is needed here.

Personalisation has been high on the agenda for a number of years now and this can offer people greater choice and control over their care and activities if they have good information and support to empower them. For some people personal budgets are not the right approach and therefore implementing personalisation should be in a person-centred way, rather than a blanket or target-driven approach.

Work is beginning for greater integration between health and social care, with the potential to improve the experience and effectiveness of care for local people. This will require organisations to work differently in order to work together and centre services on the end user/patient/carer.

Healthwatch Coventry was given the opportunity to provide early feedback on the draft of this document. Our comments focused on making it as easy to read and understand as possible as it is very important that local people know about their social care services and the work which is being undertaken by the local authority to develop and change services.

Healthwatch will continue to take a very active interest in adult social care provision by visiting services such as care homes and working to understand and influence the changes being brought in.

Find out more about Healthwatch Coventry at [www.healthwatchcoventry.co.uk](http://www.healthwatchcoventry.co.uk)

## Contact us:

You can contact us about this report at: [abpd@coventry.gov.uk](mailto:abpd@coventry.gov.uk)

You can contact Adult Social Care Direct at:

e-mail: [ascdirect@coventry.gov.uk](mailto:ascdirect@coventry.gov.uk)

or Tel: 024 7683 3003

Any comments, compliments or complaints can be made by contacting Coventry Direct on 0500 834 333, or in person at any of the Council's reception or enquiry areas, or by filling in an online form.

You can visit the Opal Assessment and Demonstration Centre:

**Monday-Thursday** 9:30am – 4:30 pm,

**Friday** 9:30am – 4:00pm

Unit 17-18, Bishopsgate Business Park, Widdrington Road, Coventry, CV1 4NA

Tel: 024 7678 5252

More information about Adult Social Care can be found at

[www.coventry.gov.uk/adultsocialcare](http://www.coventry.gov.uk/adultsocialcare)

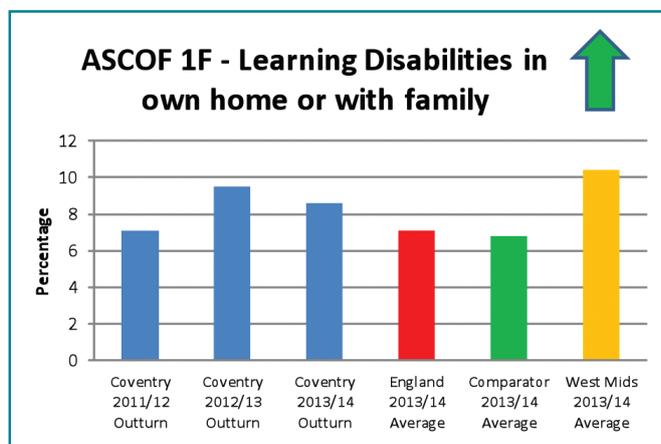
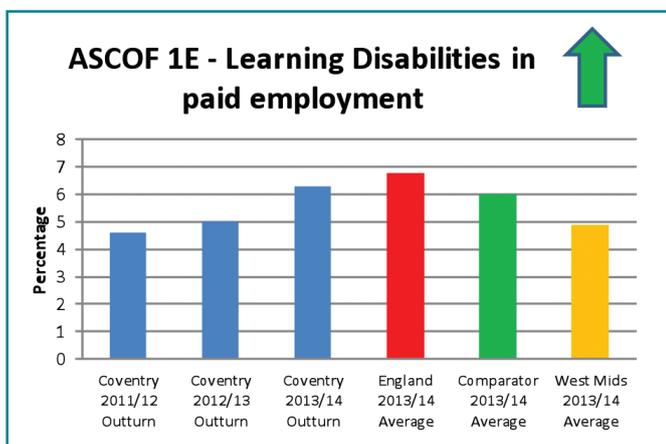
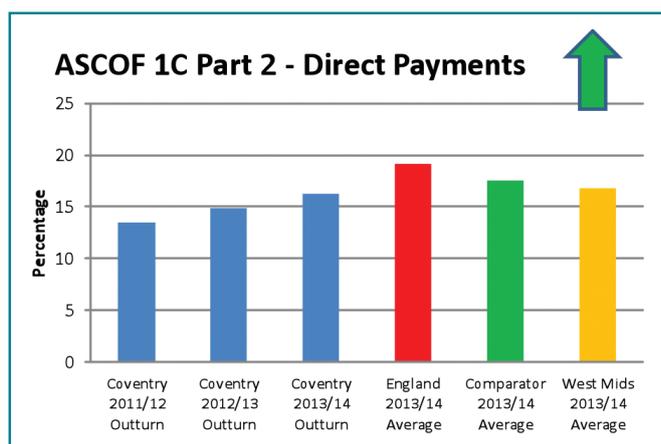
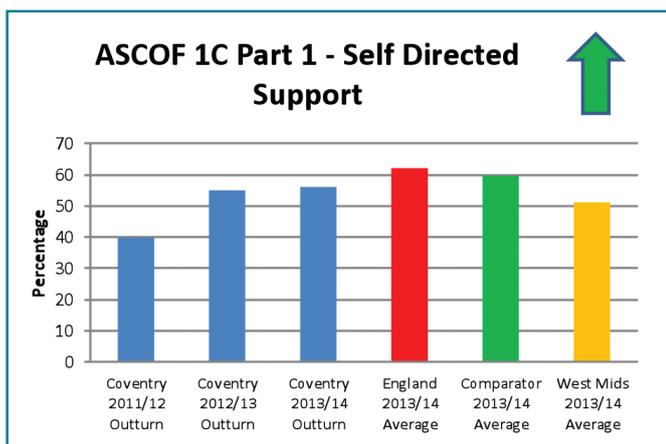
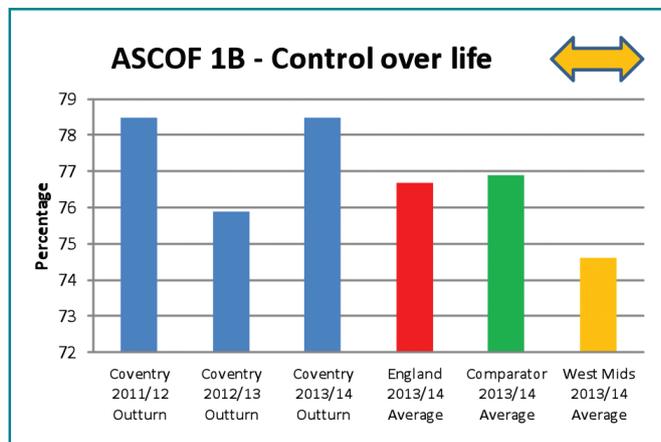
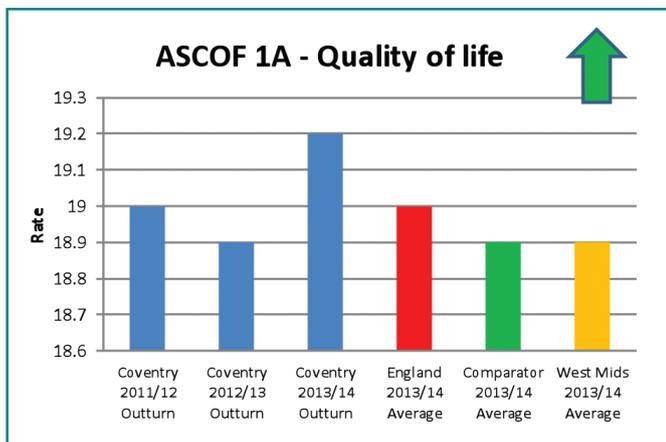


If you need this information in another language or format please contact:  
Telephone: 0500 834 333.

# Adult Social Care outcome framework (ASCOF) Coventry performance 2011/12 to 2013/14

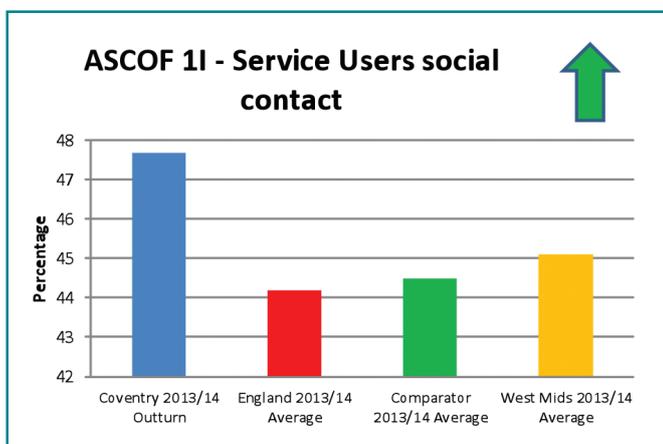
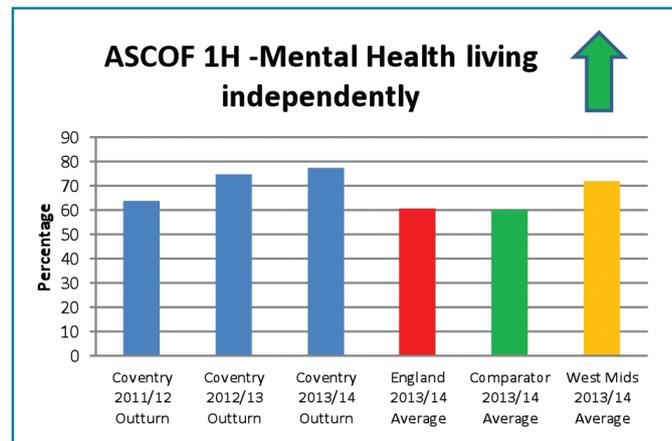
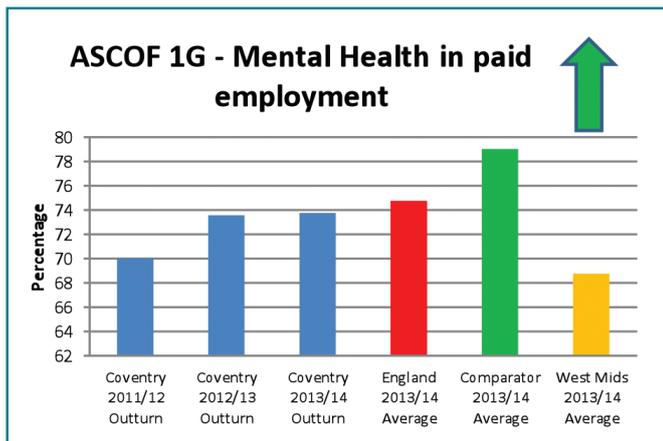
How Coventry's performance has changed over the last three years (2011/12 to 2013/14)

## Domain 1 - Enhancing quality of life for people with care and support needs



# Adult Social Care outcome framework (ASCOF)

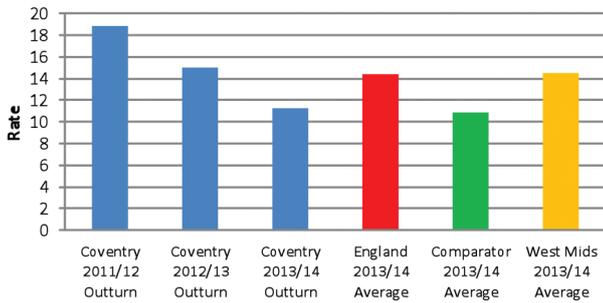
## Coventry performance 2011/12 to 2013/14



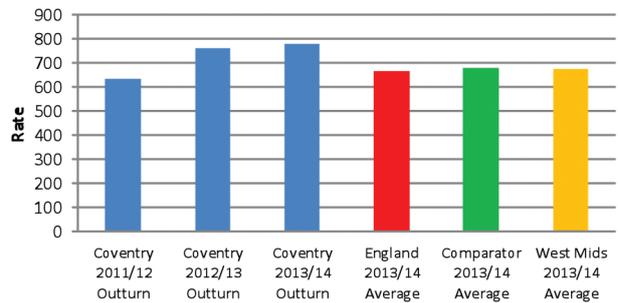
Domain 1 - enhancing quality of life for people with care and support needs		Cov 2011/12 Outturn	Cov 2012/13 Outturn	Cov 2013/14 Outturn	England 2013/14 Average	Comparator 2013/14 Average	West Mids 2013/14 Average
ASCOF 1A	Social care-related quality of life	19	18.9	19.2	19	18.9	18.9
ASCOF 1B	Control over life	78.5	75.9	78.5	76.7	76.9	74.6
ASCOF 1C Part 1	Proportion of people using social care who receive self-directed support	40	55.1	56.2	62.1	59.5	51
ASCOF 1C Part 2	Proportion of people using social care who receive direct payments	13.5	14.9	16.3	19.1	17.6	16.8
ASCOF 1D	Carer-reported quality of life	N/A	7.7	N/A	N/A	N/A	N/A
ASCOF 1E	Proportion of adults in contact with secondary mental health services in paid employment	4.6	5	6.3	6.8	6	4.9
ASCOF 1F	Proportion of adults with learning disabilities in paid employment	7.1	9.5	8.6	7.1	6.8	10.4
ASCOF 1G	Proportion of adults with learning disabilities who live in their own home or with their family	70.1	73.6	73.8	74.8	79.1	68.8
ASCOF 1H	Proportion of adults in contact with secondary mental health services living independently, with or without support	63.8	75	77.8	60.9	60.4	72.2
ASCOF 1I	Proportion of people using services reporting they had as much social contact as they would like	N/A	N/A	47.7	44.2	44.5	45.1

## Domain 2 - Delaying and reducing the need for care and support

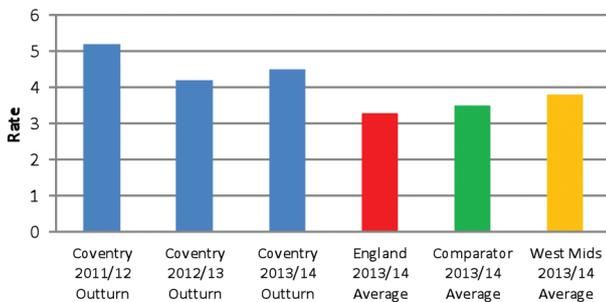
### ASCOF 2A Part 1 - Permanent Admissions of Younger Adults



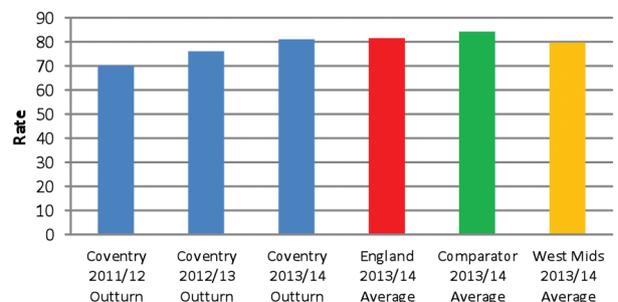
### ASCOF 2A Part 2 - Permanent Admissions of Older People



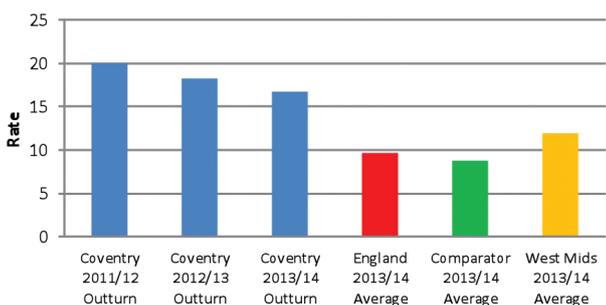
### ASCOF 2B Part 2 - Discharges offered rehab/reablement



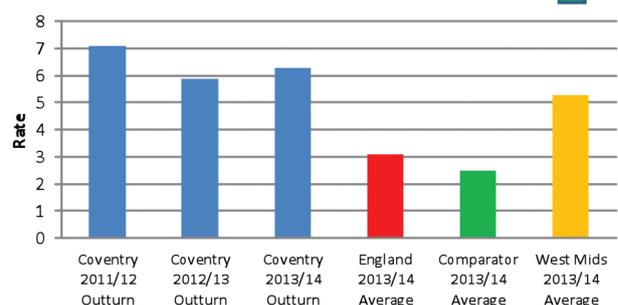
### ASCOF 2B Part 1 - Discharges still at home after 91 days



### ASCOF 2C Part 1 - All Delayed Discharges



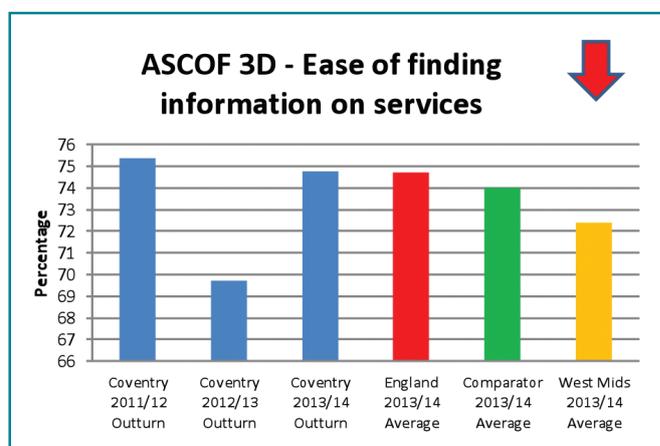
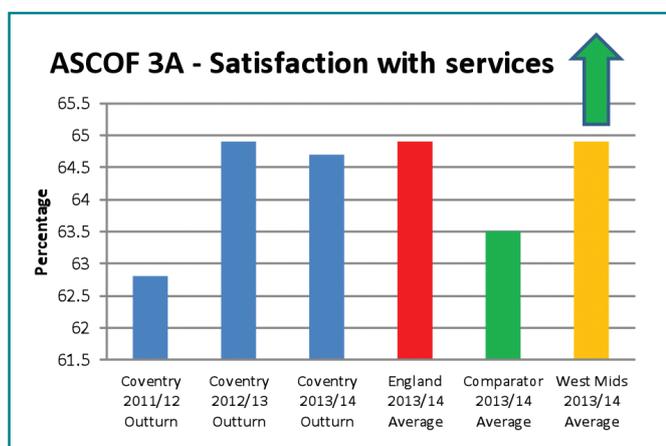
### ASCOF 2C Part 2 - Social Care & Joint Delayed Discharges



## Domain 2 - Delaying and reducing the need for care and support

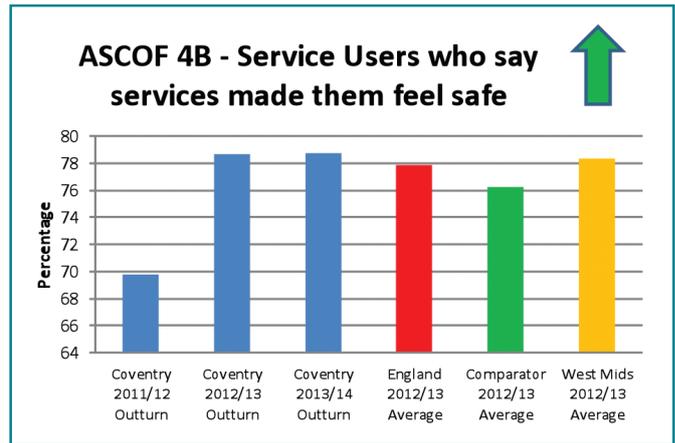
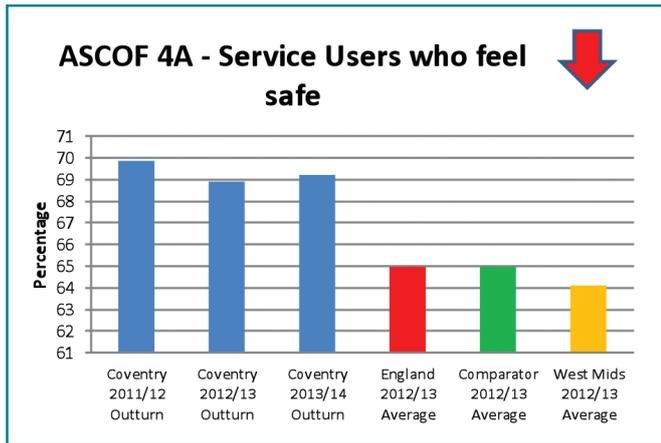
Domain 2 - Delaying and reducing the need for care and support		Cov 2011/12 Outturn	Cov 2012/13 Outturn	Cov 2013/14 Outturn	England 2013/14 Average	Comparator 2013/14 Average	West Mids 2013/14 Average
ASCOF 2A Part 1	Permanent admissions of younger adults (aged 18 - 64) to residential and nursing care homes, per 100,000 population	18.9	15	11.3	14.4	10.9	14.5
ASCOF 2A Part 2	Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population	636.2	761.7	782.2	668.4	678.5	678.3
ASCOF 2B Part 1	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation (offered of the service)	70.4	76.1	81.2	81.9	84.6	79.7
ASCOF 2B Part 2	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation (effectiveness of the service)	5.2	4.2	4.5	3.3	3.5	3.8
ASCOF 2C Part 1	Delayed transfers of care from hospital per 100,000 population	20.1	18.3	16.7	9.7	8.8	12
ASCOF 2C Part 2	Delayed transfers of care from hospital which are attributable to joint health/adult social care and adult social care only per 100,000 population	7.1	5.9	6.3	3.1	2.5	5.3

## Domain 3 - Ensuring that people have a positive experience of care and support



Domain 2 - Ensuring that people have a positive experience of care and support		Cov 2011/12 Outturn	Cov 2012/13 Outturn	Cov 2013/14 Outturn	England 2013/14 Average	Comparator 2013/14 Average	West Mids 2013/14 Average
ASCOF 3A	Overall satisfaction of people who use services with their care and support	62.8	64.9	64.7	64.9	63.5	64.9
ASCOF 3B	Overall satisfaction of carers with social services	N/A	40.6	N/A	N/A	N/A	N/A
ASCOF 3C	Proportion of carers who report that they have been included or consulted in discussion about the person they care for	N/A	67.5	N/A	N/A	N/A	N/A
ASCOF 3D	proportion of people who use services and carers who find it easy to find information about services	75.4	69.7	74.8	74.7	74	72.4

## Domain 4 - Ensuring people are safe and protected from avoidable harm



Domain 2 - Ensuring people are safe and protected from avoidable harm		Cov 2011/12 Outturn	Cov 2012/13 Outturn	Cov 2013/14 Outturn	England 2013/14 Average	Comparator 2013/14 Average	West Mids 2013/14 Average
ASCOF 4A	Proportion of people who use services who feel safe	69.9	68.9	69.2	66	65.7	67.1
ASCOF 4B	Proportion of people who use services who say that those services have made them feel safe and secure	69.8	78.7	78.8	79.2	78.3	79.9

### Key



**Up arrow**

Improved performance over the last 3 years



**Down arrow**

Performance declined over the last 3 years



**Left and right arrow**

Performance maintained over the last 3 years

2013/14 is provisional data.

Final data to be published by the Health and Social Care Information Centre in December 2014.