

Commentary on Adult Social Care Annual Report 2014-15

Healthwatch Coventry is the independent consumer champion for health and social care services locally, working for the interests of those who need or use services. Our aim is to give local people a voice and an influence over their local services.

The adult social care annual report represents a useful opportunity to put in place a quality and reflection cycle for adult social care services and there is scope to develop its role in this further.

This Report shows that the challenges in social care continue, increasingly driven by a requirement on the local authority to make significant financial savings and to implement the Care Act. Although recent government announcements have delayed the implementation of the cap on care costs paid by individuals.

The Report also contains some evidence of an increase in demand for services when compared with figures from last year's Report; although the categories used are not easily compared. We believe it would be helpful if a standard list could be used when reporting year on year, as it is important to understand and demonstrate trends.

Requests for support rose by over 500. The figures available also seem to indicate less people receiving short term support and more people receiving long term (or ongoing) support: a reversal of the previous trend (the provision of equipment and adaptations are now counted as ongoing 'low level support' rather than long term support, so are not included in this figure now). The overall total of adult social care service users and new service users is not provided and we think it should have been.

The Care Act established a right for carers to receive an assessment of their needs and this is reflected in the figures with 2308 carers assessed and receiving information, advice or support; it was 1,974 the previous year. Healthwatch supports this focus on assessing and supporting carers as the support they provide helps people to stay at home and delays/prevents a need for more intensive and more expensive services. For the coming year, we would recommend, there is work to do to promote this further.

Last year we queried whether the ethnicity information for social care clients showed unmet need in some of the City's Black, Asian and Minority Ethnic communities. There is no mention of this in this year's report, which is a weakness.

In common with other local authorities, Coventry City Council has worked to ensure it is compliant with implementing the Care Act and demonstrates well the work it has done in this Report. A focus on Dementia has been led by the Coventry Health and Wellbeing Board to address priorities within the Health and Wellbeing Strategy. The past year has seen developments in provision to address the concerns of those who have been diagnosed and their families/carers. The City Council has clearly played a role in this and in the Report outlines further services scheduled to begin later this year.

Healthwatch Coventry recently carried out an exercise to check how easy it was to find information on the City Council's new website in order to feed into the refinement of its design and content. We found that it is much more user-friendly than the previous website, with information easier to find and understand.

The Report details two areas where service demand is increasing: 'Deprivation of Liberty Safeguards' (DOLs) and 'adult safeguarding'. The first is a result of a court ruling meaning that figures have gone up considerably and the latter has resulted from a greater awareness of safeguarding, which is positive. The council needs resources in order to respond effectively to these demands.

The Better Care Fund initiative, aimed at reducing emergency admissions to hospital by initiatives to support people in the community, is an important nationally co-ordinated development. Therefore, we believe this rightly features in the priorities for the coming year. It is imperative that there is joined-up thinking, partnership working and co-ordinated delivery across NHS and social care services to support the success of Better Care Fund work. We believe there should also be a fundamental shift in thinking to support joined up working, with a move away from organisations focusing on their own services and plans and taking a system approach.

Specific work includes the set up of 3 Integrated Neighbourhood Teams to support people with multiple long term conditions. Plus a significant focus locally on flow through the hospital and the impact that delays in transfers of care have upon this. Therefore ensuring timely assessment and provision of social care packages is important for the effective working of hospital services as well as for individual service users and their families.

Healthwatch Coventry will continue to focus actively on the delivery of adult social care provision by visiting care homes and working to understand and influence the service changes adopted. We have added a work stream to our work programme regarding following a group of services users through the changes to the service they receive in order to see how the process worked and if there is learning for other situations of service change. We wish to work with the city council on this piece of work.

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