Adult social care services in Havering A local account

2015



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About the local account

Local authorities are required to produce a local account for adult social care.

Like an annual report, a local account is intended to provide an informative overview of the work carried out by Havering's adult social care teams. The account reports publicly on performance and provides accountability to local people and partners.

A local account of our services explains:

- What services we support and spend money on
- What we have achieved
- The changes and challenges we face
- Our ambitions and plans for further improvement

In this account Havering is going a step further and detailing the experiences of service users and their families as we provide a true local account through their eyes and voices.

Foreword: adult social care in Havering

With London's oldest population, adult social care services in Havering are instrumental in helping individuals and their families live independent and fulfilling lives in all parts of the borough.

This is reflected in the amount that Havering spends on adult social care. With the largest budget in the Council of £59.5million - around 36 per cent of the Council's total net budget - we help over 7,500 people each year use services ranging from reablement to residential care.

However, demand for our services are increasing at a time when people are living longer, our population is swelling and funding for services is reducing.

In an age of austerity, making the best use of our resources, working in partnership with a range of care providers, providing choice, shaping the local care market and improving the experience of service users is essential.

We are doing this by integrating our services with health partners, providing early help, intervention and preventative measures to stop care and support needs from developing and helping our residents live as independently as possible in the comfort of their own homes.

The Council has strong partnership arrangements in place with the local NHS, the community and voluntary sector and, with our Integrated Care Coalition, the neighbouring boroughs of Barking and Dagenham and Redbridge.

In this local account, we aim to make it easy to see how we are progressing. Although we recognise that we are on the way to delivering better outcomes for our service users we know we can - and will - do much more to improve the lives of all Havering adults.

Cllr Wendy Brice Thompson, Cabinet Member for Adult Services and Health Barbara Nicholls, Head of Adult Social Care and Commissioning

Havering in numbers

245,974 residents¹

Some 253,730 people are registered with a Havering GP²

51.99 per cent of Havering's population are female, 48.01 per cent are male

192,716 are aged over 18

45,582, around 18.5 per cent, are over the age of 65 – the largest proportion in London

6,851, around 2.8 per cent, of people are aged over 85 – again the highest in London

With over 43 square miles, Havering is London's third largest Borough. Half of the Borough is greenbelt or parkland

Havering is ranked 177 out of 326 local authorities for deprivation and 26 out of 32 London boroughs

Two wards in the Borough are among the 10 per cent most deprived in London.

The average age of a Havering resident is 40.4. The average age in London is 35.6

Havering's population is set to swell to 291,100 in 2030 – an increase of 18 per cent

The number of over 65s in Havering is set to increase by 33.1 per cent by 2030 to $60,669^3$

The number of over 85s is set to increase by 56.2 per cent by 2030 to 10,701

The life expectancy for men is 79.8 years and 83.8 years for women – higher than the national average

¹ Office for National Statistics, 2014 Mid-Year Estimates

² Demographics Chapter, Jan 2014, JSNA

³ Projecting Older People Population Information System

The services we provide and what they cost

Havering Council has a responsibility to care for and protect the Borough's most vulnerable residents. The Council also helps all local people to help themselves, live independent lives and stay involved in their local community.

From equipment & adaptions to direct payments, assistive technology to leisure activities, Havering provides a range of support to help people do as much as they can for themselves and stay healthy.

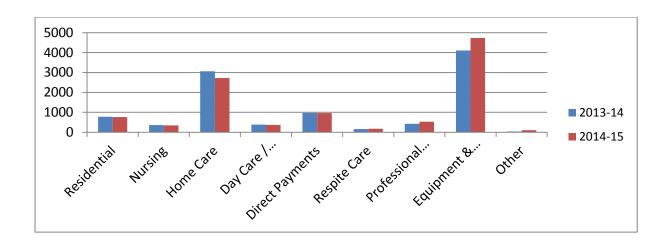
For those who need it most, Havering Council and its partners provide services that help them lead better, and more comfortable, lives.

In 2013/14,we supported **7,000** service users with 5,500 over the age of 65. This included over 2,600 people over the age of 85.

This increased to more than 7,500 in 2014/15 - a 7.1 per cent increase in 12 months - with almost 6,000 of them over the age of 65. This included 3,000 over the age of 85.

The breakdown is detailed below. Some people may receive more than one service during the year.

	2013/14	2014/15
Equipment & adaptations	4,105	4732
Home care	3,060	2724
Direct payments	973	961
Residential	777	759
Professional support (services provided as part of a care plan)	422	527
Day care/ transport	384	368
Nursing	357	347
Respite care	162	176
Other	36	102
	10,276	10,366



Case study 1: equipment and adaptions helping Mrs B remain safe at home

Mrs B, a wheelchair user, was having problems getting up from her chair, using the toilet and standing in the shower to wash. She had recently fallen out of the shower when she tripped on the shower tray.

She agreed that a grab rail by the toilet and in the shower, along with some chair raisers, would really help.

The Havering Safe at Home Service was contacted by her occupational therapist and the rails were installed a week later. Mrs B also contacted 1st Mobility for some chair raisers.

She was extremely pleased with the service she received from all involved and Mrs B is now able to use the shower safely and independently within her home.

The financial challenge

Havering Council faces record financial challenges as it absorbs funding reductions and inflationary costs, provides services to a growing and ageing local population and meets new legislative responsibilities. Overall the Council needs to reduce its total budget by around a third by 2018.

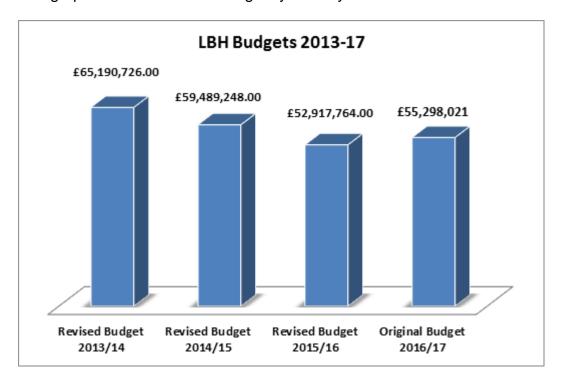
Adult social care is not immune from these pressures and needs to save £10.3 million over the years 2015/16 to 2018/19. This is on top of the £8.9 million the service has saved in the previous three years 2012/13 to 2014/15. Havering receives the fourth lowest government grant in London.

The Council has made a strong commitment to deliver all statutory services like adult social care and improve services. It remains committed to protecting the services that matter most to the residents of Havering and keeping local people safe.

The December 2015 settlement overall was considerably lower than expected. The February 2016 budget report, which was presented to Cabinet and full Council, declares a funding gap of £6.75m to 2018/19. This assumes that council tax increases of 3.99% (including the adult social care precept of 2.00%) will continue to be applied in 2017/18 and 2018/19. If these increases are not applied the funding gap will increase by £7.8m to £14.5m and further savings options will need to be developed.

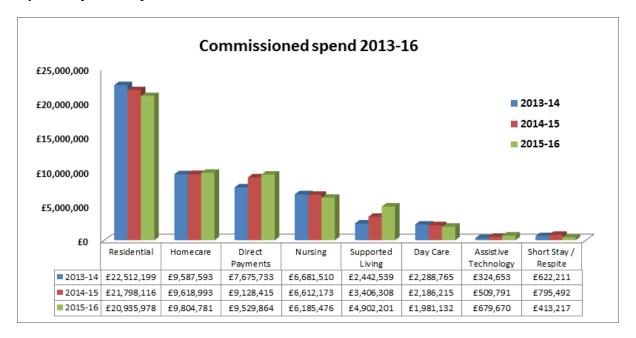
Government has recognised at a national level demand and budgetary pressures facing Local Government, by enabling local authorities to levy an additional council tax precept of 2% for adult social care. In response to this, Havering has included in the financial strategy a provision to increase the budget for adult social care by £3m, which includes the social care levy.

The graph below shows the budgets year on year.



Figures include staffing budgets.

Spend by activity



It should be noted that commissioned spend includes elements of non-delivery, so actuals costs will be less than commissioned.

Our objectives

Clean • Safe • Proud

The Council's vision is of a Borough that is clean and safe and where residents are proud to live.

For Havering to be safe and proud we need to meet the social care needs of residents where they are vulnerable and have social care needs. We do this by **supporting our community** by helping people do as much as possible for themselves and keeping them safe in their homes and their community, **using our influence** and **leading by example.**

Case study 2: leading by example and supporting our community (with Pic)

Havering College's Realistic Opportunities for Supported Employment (ROSE) programme helps place people with learning disabilities into paid employment.

Havering Council supports the Programme and has helped several residents develop their skills – and confidence – with paid work placements across the Council.

Tommy (pictured) works in the Deputy Chief Executive for Children, Adults and Housing's Office and started with a range of office duties including filing, photocopying and shredding. He quickly progressed and now works with a number of services across the Council who rely on Tommy's support and appreciate his can-do proactive approach to his work.

Older people

In Havering some 45,600 people are aged over 65. At over 18 per cent of the Borough's total population this is the largest proportion of older people in London. This age group tends to have the highest health and social care needs.

Most older people in Havering live healthy, independent and active lives without support from the Council and a large number receive care and support from family and friends – around 27,000 according to the 2011 census.

Last year around one in seven people aged 65 or over in Havering received support from our adult social care services. This increased to around one in four aged over 85.

Most of the people we helped had physical needs although some had more complex conditions such as dementia or depression, We aim to support and help older people to remain living in their own homes and communities for as long as possible.

In 2014/15

- We helped more residents stay in their own home for longer, with 607 older people admitted to nursing or care homes – a 3.8 per cent reduction from 2013/14.
- Over 80 per cent of older people using our reablement service were able to remain living in their own home after leaving hospital.
- We helped over 190 carers of older people with services like respite or a temporary care home for the person they care for.
- We helped more older people remain more active with over 6,000 free swimming sessions in the Borough's leisure centres.

Our plans for the future

- Providing more joined-up health and social care services, sharing more resources with the NHS and providing a range of community services that help older people remain in the comfort of their own homes.
- In partnership with Family Mosaic, providing a new information and advice service to help people know what they can do to remain as independent as possible. The service will visit popular places and target elderly residents who are isolated or hard to reach.
- Providing more choice and control to older people. We know that those aged over 65 are traditionally reluctant to take-up a direct payment or personal budget. We are working to increase the take-up of self directed support among all age groups.

Case study 3 – integrated services helping Annie remain at home

Annie had been unable to get up after a fall in the night and used her pendant to raise the alarm. She was seen by the Doctor and diagnosed with severe bruising to her hip.

The occupational therapist from the Community Treatment Team (CTT) – a joint health and social care service with staff from the NHS and Council – suggested Annie use a walking frame to reduce the risk of future falls.

Her social worker recommended a package of reablement care and gave advice about other support so that she could return home. She also contacted Annie's family to make sure they were happy with the outcome.

The care package initially put in place consisted of three daily visits for six weeks and Annie's carers helped her with personal care and making meals. As she became stronger and more confident carers helped her manage these tasks herself and she has now regained her independence. Annie no longer requires support from social care but as a sensible precaution continues to wear her pendant alarm.

People with disabilities (physical, sensory and learning)

It is estimated that there are more than 14,000 adults of working age with a disability in Havering. Across the borough some 6,000 people cannot work because of their disability.⁴

Disabled people may be frail, have problems moving around or sensory needs because they are visually or hearing impaired, blind or deaf. In Havering we focus on supporting people through recovery and reablement so they can live independently without long-term support. This includes:

- Equipment and adaptations
- Blue Badges
- Freedom Passes
- Short term respite
- Professional support such as counselling or therapy
- Supported housing
- Day care
- Home care
- A range of day activities for adults living with a disability at Yew Tree Lodge in Romford

For those with sensory or learning disabilities and their carers, the Community Learning Disability Team - an integrated multi-disciplinary team managed in partnership with the North East London Foundation Trust (NELFT) - is responsible for assessment, care support planning and arranging care packages.

It also provides specialist health care to people with a learning disability, as well as advice and information and awareness training to GPs and other health professionals.

The Avelon Road Centre in Rainham also offers a choice of stimulating activities to help people with learning disabilities develop their abilities and skills.

In 2014/15

- Some 94 per cent of disabled people in Havering were supported in the community. During the year only 811 disabled people received services in residential or nursing care homes (624 with a physical disability, 165 with a learning disability and 22 with a sensory disability).
- We increased the proportion of adults with learning disabilities in paid employment from 8.3 to 8.6 per cent of service users.
- We increased the numbers of people with learning disabilities living in supported living rather than residential care, and 63 per cent of service users lived in their own home or with their family.

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⁴ Haveringdata.net

Our plans for the future

- Widening the range of accommodation available locally to people with learning disabilities, including supported housing.
- Establishing a Shared Lives Scheme with more people opening up their homes to those who need some form of support and assistance.
- Developing more services for people aged over 16 at the Avelon Centre in Rainham.

Case study 4: helping Jamie start afresh with supported living (with pic)

In 2015 Havering Council opened a new supported housing development for adults with learning disabilities or autism, to help them to live as independently as possible while still providing support.

Great Charter Close, based in South Hornchurch, has four self-contained bungalows and four flats. The Council allocated the properties to the local residents whose needs could be best met by the supported accommodation.

Among the residents is Jamie Bennett, who previously lived at a specialist assessment and treatment hospital unit. He said:

"When I moved into this supported accommodation, it was like my life had actually started afresh. I am very happy here, living in a very beautiful flat with very friendly neighbours and staff. I enjoy going to the local shops, park and pub, meeting up with members of my local community.

"I love how spacious my flat is with its beautiful garden where I can sit down and relax. My family lives close and they visit me frequently. This has completely changed my life."

People with mental health needs

In Havering, the number of people with mental health conditions is increasing and the number of adults aged 18 to 64 with a common mental health disorder like anxiety or depression is projected to rise from 23,849 in 2015 to 26,493 in 2030.

Havering Council and the North East London Foundation Trust (NELFT) provide an integrated health and social care mental health service. This means teams of multi-disciplinary professionals from both organisations work with adults, their families and their carers both in the community and in hospital.

The service focuses care on supporting recovery and building the resilience of people with mental health problems, not just on treating or managing their symptoms. It aims to support healthy lifestyles, provide access to good quality information, advice and advocacy, reduce social isolation and increase the number of adults with mental health needs in paid employment.

During 2014/15

- Over 88 per cent of adults in contact with secondary mental health services 405 people - lived independently.
- We increased the proportion of adults in contact with secondary mental health service in paid employment from 5.2 to 6.8 per cent.
- We also helped
 - 39 people into employment
 - 36 people sustain employment for 13 weeks or more
 - 121 people started a work placement
 - 129 people completed accredited training

Plans for the future

- Continuing to provide high quality care in the community by working with the families or networks of people experiencing a mental health crisis, not just the individuals themselves.
- Reviewing our arrangements for supported employment, enterprise and work experience.

Case Study: Helping Alan back into work

Alan has cerebral palsy and was diagnosed with mild depression when referred to the Work Independence Programme by his local job centre.

The Programme, which has built good relations with local employers, helped Alan manage his condition, build his confidence, learn new skills and be better prepared for work.

Sainsbury's agreed to interview Alan and he started a temporary role with their online shopping team. He was so successful that they offered him a permanent position.

As well as helping him to break down the barriers to finding a job, the project helped him with tax credits, which made it easier from him to stay in work, and he benefitted from a £2,000 back dated payment.

Alan said: "I'm really happy to be working now and can't thank everyone enough."

Carers

A carer is someone who looks after a relative or friend who because of age, physical or other disability cannot manage at home without help. This can range from personal care including toileting, washing and feeding to help with the shopping, housework or simply keeping them company.

According to the most recent Census some 25,200 Havering residents - around 11 per cent of Havering's population - provide unpaid care. Over 16,000 - 7 per cent - provide between one to 19 hours of unpaid care per week and over 5,800 - 3 per cent - provide over 50 hours unpaid care. These figures are higher than the average in both London and England.

In Havering carers are able to access a range of support to help them lead an independent life alongside the care they provide. This includes a carer's assessment and information on a wide range of services provided by Havering Council and its partners.

During 2014 / 15

- Some 1,936 carers had their needs assessed so we could support them.
- Nearly 800 carers were signed up to the Havering Carers' Register, connecting them to a number of services and a wealth of information.
- 418 carers got a break from caring when the person they care for received respite care.

Plans for the future

- Developing support for carers at doctor's surgeries including a pilot GP practice-based Carers' Support Group.
- Implementing a new Havering Carers' Strategy with Havering Clinical Commissioning Group and carers.
- Identifying more carers or former carers to help the Council and Havering Clinical Commissioning Group improve services.

Case study 6: helping carers carry on caring

Carer Vicky Pilditch from Collier Row was one of more than 200 people who attended an information event to raise awareness of services and support available for carers in Havering during Carers Week.

Vicky said: "It was really helpful to see all the services available and all the organisations that provide them under one roof and there were lots of friendly faces to speak to. *The Carers' Information Booklet*, which was given to everyone on the day is a particularly handy

guide to all that's going on in Havering to make caring a little easier."

You can download *The Carers' Information Booklet* on <u>www.havering.gov.uk</u>

Providing choice

Havering Council wants service users to have choice and control over the way care and support is provided.

Self directed support (SDS) covers personal budgets including Individual Service Funds, Voluntary Maintenance Allowance and direct payments. Anyone who is assessed as needing care services has the right to request a direct payment instead of having services provided by the Council.

There are some limited circumstances when direct payments are not awarded but the majority of people already receiving, or assessed as needing, services have a right to direct payments. This includes:

- older people who have been assessed as needing community care services
- disabled people aged 16 and over
- carers, in place of receiving carers' services
- families with disabled children
- disabled parents

During 2014 / 15

	Clients receiving some form of SDS	Clients receiving a Direct Payment
	Per cent of client base	per cent of ASC client base
18-64	67.77%	56.24%
65-74	66.97%	38.99%
75-84	75.97%	28.35%
85+	77.00%	25.58%
Total	72.86%	37.09%

Telecare is equipment that may be used to help people to live as independently as possible at home or to support people in their daily lives and routines.

The equipment can provide independence, safety and security - from simple alerts if someone needs emergency assistance, to devices designed to help people with dementia or memory loss.

For more information on Havering's telecare equipment and emergency alarms visit www.havering.gov.uk

In 2014/15

- Over 1,500 adults received some form of self directed support, giving them choice and flexibility over the services they receive
- Some 730 adults received a direct payment
- Over 1,300 people used assistive technology to help them remain independent with assistance only the touch of a button away

Plans for the future

- Increasing the proportion of service users who receive some form of self directed support to over 80 per cent.
- Providing more than 45 per cent of self directed support as a direct payment.
- Reviewing the voluntary sector and continue to commission services that help people remain independent
- Piloting a Social Isolation Project to help people who have become isolated and could require health and social care services as a result.

Case study 7: A personal budget for Alex

Alex is a profoundly deaf man in his thirties who uses British Sign Language to communicate. He had very little interaction with the deaf community and would only go out twice a week with his mum for shopping. He would spend most of his time at home reading, watching television or playing on his Xbox.

Alex told us he was bored and frustrated, and because of previous bad experiences, did not like to go out or be left alone.

Following an assessment with Alex and his mum, a personal budget was agreed with the aim of boosting his confidence, increasing his social skills, building friendships and helping him live more independently.

Alex's personal budget helped him use the services of a support worker fluent in British Sign Language and with their help Alex started volunteering in a charity shop. At first Alex worked one day a week for four hours. Now with increasing confidence he's working two days a week, travelling to the shop by himself and dealing with customers.

Preventing or delaying the need for health and social care

The Council and its partners provide a number of services to help people recover faster from illness, prevent unnecessary admission to hospital or premature admission to residential care, enable timely discharge from hospital and help people live independently.

Sometimes known as intermediate care, the services include:

Intensive Rehab Service

Provided by North East London Foundation Trust (NELFT)

Staff - nurses, occupational therapists, physiotherapists, rehab assistants

Services - Intensive rehab at home, alternative to inpatient or rehabilitation bed

Community Treatment Team

Provided by North East London Foundation Trust (NELFT) in hospital and at home Staff – district nurses, occupational therapists, physiotherapists, social workers and support workers

Services – short term intensive care and support in the community, health and social care crisis and urgent response, community treatment

Reablement

Provided by Family Mosaic

Service – intensive, short term (six week) service to help people back into their own home and on the road to independent living once they leave hospital either at home or at a residential

Joint Assessment and Discharge Team

Provided by Havering Council, the London Borough of Barking and Dagenham and the local NHS

Service - single point of contact for all people who may require health or social care support after discharge from hospital. The services aims to get patients back to their homes as soon as they are fit and able

Staff - social workers, nurses, an occupational therapist and administrators

Help not hospital

Provided by British Red Cross

Services - support people through short term crises and in getting home and settled from hospital, keeping people away from hospital

In 2014/15

- We provided reablement to over 1,100 people at home and to over 170 people at our residential facility at Royal Jubilee Court in Romford.
- Only 4.4 per cent of services users 28 people who received reablement needed further care or support after 91 days.
- The Community Treatment Team helped over 5,900 patients more than a tenfold increase on the previous bed based system

Plans for the future

- Locating health and social care teams around GP clusters, bringing integrated care to patients and ensuring coordination and ease of access for practices.
- Working in partnership with the NHS to provide the technology to share social care records.
- Improving the intermediate care pathway and reviewing the Community Treatment, Joint Assessment and Discharge Teams; Intensive Rehab and Reablement Services.

Case study 7: Reablement helped my Mum get back on her feet and return home

When she began reablement I did not think my Mum would ever return to any type of independent living. Although she was mentally capable, physically she was not able to look after herself. She was depressed and nervous and I thought I had lost that wonderful, vibrant person forever.

Havering's reablement service is amazing and the staff took a huge weight off of my shoulders when Mum arrived – working with us both to get her back on her feet and ready to return home.

In a very short period of time Havering's team proved me wrong. The lady that returned home was bright, confident and back to the wonderfully happy person she used to be. My family and friends are amazed at the difference in her. All down to the support and dedication of the staff.

Daughter of Mrs Y, aged 88

Improving and maintaining well-being

As people are now living longer and with a better quality of life, the care and support needs they have are different. The way care and support is provided has changed to reflect this.

In April 2015 the new Care Act came into force making care and support easier to access in Havering, and more consistent across the country.

Driving the landmark new legislation is the principle of individual well-being. Any decisions about care and support now consider individual well-being and what is important to people and their families so they can stay healthy and remain independent for longer.

In 2014/15

- We provided 9,849 care assessments including 5,063 under the new national assessment framework to date⁵
- We provided 82 deferred payment agreements so that people didn't have to sell their homes in their lifetime to pay for their care
- Our Better Care Fund plan was approved by the Government. Some £19m of existing funding will be invested by the Council and the local NHS to help improve services and the well-being of local people.
- Some 10,000 residents took part in our Active Living Programme.

Plans for the future

- Refreshing our adult social care website <u>www.haveringcarepoint.org</u> so it is easier for people to get the information they need to make informed care choices.
- Establishing an information and advice service that helps people remain independent in their own home and active within the local community.

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⁵ April to September 2015

Keeping people safe

An adult at risk is someone who finds it difficult to protect themselves from harm or abuse due to age, illness, disability or other impairment.

Harm can be physical, psychological, sexual or financial and can be caused by another person, a carer or an institution.

Protecting adults at risk is everyone's business and Havering's policies are designed so that all partners and individuals:

- Work together to protect people from harm
- Support them to make their own choices
- Uphold the person's needs, rights and interests

Together we:

- Investigate concerns
- Take timely and proportionate action
- Make people safe if they are at risk
- Act to prevent harm occurring in the first place

Deprivation of Liberty Safeguards

The Deprivation of Liberty Safeguards (DoLS), aim to make sure that people in care homes, hospitals and supported living are looked after in a way that does not inappropriately restrict their freedom. The safeguards should ensure that a care home, hospital or supported living arrangement only deprives someone of their liberty in a safe and correct way, and that this is only done when it is in the best interests of the person and there is no other way to look after them.

On 19 March 2014, the Supreme Court published its judgment in the case of P v Cheshire West and Chester Council and P and Q v Surrey County Council. The judgment clarified the test and definition for Deprivation of Liberty for adults who lack capacity to make decisions about whether to be accommodated in care. This means that a much greater number of service users and patients will now be subject to a deprivation of liberty and will come under the protection of the DOLS procedure.

As a result of this judgement the London Borough Of Havering has seen a dramatic increase in requests for DoLs authorisations. Prior to the Cheshire West judgement there were in the region of 20/30 requests per year, following the judgment the request increased to 230 a year and this year we have seen this request double. Form April 2015 to March 2016 the London Borough of Havering have had approximately 560 applications for Deprivation of Liberty authorisation. It is estimated that this figure is likely to increase to 800 for the coming year. As such the priorities for the coming year are;

 To ensure that we have sufficient Best Interest Assessors to meet the forecasted demands

- Raise awareness around the Deprivation of Liberty Safeguards and provide relevant training
- Support providers to recognise when a person is being deprived of their liberty and refer in for an authorisation as soon as possible
- Ensure that where a person is an unlawful deprived of their liberty immediate alternative options/solutions are explored.

During 2014/15

- We received 593 safeguarding alerts a 25 per cent increase compared to 13/14. We formally investigated 70.2 per cent of the alerts we received.
- Most incidents 184 took place in the person's own home while 139 happened in care homes. Neglect is the most common type of abuse in Havering.
- We re-launched our safeguarding policies, introduced a local protocol and toolkit and established a Safeguarding Adults Senior Practitioners Forum.
- We highlighted how to raise safeguarding concerns with a campaign -Safeguarding is Everyone's Business.

Plans for the future

- Reviewing our integrated Multi Agency Safeguarding Hub and increasing partnership working for adults who do not meet the thresholds for Council intervention.
- Extending our safeguarding process and procedures into more general social care practice.
- Restructuring our Safeguarding Adults Team.

Case study 8: Safeguarding residents

Mrs X, 79, lives in a nursing home in Havering although she was originally from a neighbouring London borough. Her son and daughter contacted us to raise their concerns because they felt nursing staff were neglecting their Mum who needs help to eat, drink, wash, use the toilet and take her medication.

As a result of a safeguarding alert and investigation, Mrs X was allocated a social worker and a meeting was held where we put together a protection plan. A key worker sat with her during meal times to make sure she ate and drank.

We also asked the home to provide evidence that this was happening. Her GP agreed to

keep a close eye on Mrs X and support any plans to help with her nutrition.

The nursing home created a social stimulation plan to improve her mood and appetite. We also helped the nursing home to improve the way they communicated with her family.

Mrs X's family believe their Mum is a lot safer now.

Our achievements

Despite the 'perfect storm' of a swelling and ageing population, increasing demand for adult social care and funding reductions, we have lots of examples of good and award-winning practice.

Safeguarding approaches recognised

Havering's Multi Agency Safeguarding Hub (MASH) brings together the Council, police, health, and probation services and joins-up information that is already known within separate organisations to inform safeguarding decisions.

For those residents that don't meet the statutory thresholds for support, a Multi Agency Risk Assessment Conference (MARAC) enables information to be shared between different statutory and voluntary sector agencies.

The MASH and MARAC were recognised nationally as Havering was shortlisted in the Innovation in Social Care MJ Achievement Award 2015.

Dementia Friendly Community (with award)

Around 3,500 people aged over 65 live with Dementia in Havering and the Havering Dementia Action Alliance was developed with our partners to help those affected by the disease.

To date, over 2,000 organisations or teams have received dementia friendly training, 350 have completed it online and 1,965 clinicians who have been trained in dementia symptoms.

The Alliance, which has more than 75 member organisations, won the Best Dementia Friendly Community Initiative in the Dementia Friendly Awards, and the Community Organisation Award for Disability in The National Diversity Awards.

Improving health and well-being

Havering established a new partnership between health and social care in 2013 when our Health and Well-being Board was established. Since then it has gone from strength-to-strength working with Havering Clinical Commissioning Group, Barking, Havering, Redbridge University NHS Trust and the North East London Foundation Trust (NELFT) to improve the lives of local people.

The Board's work was shortlisted for the Best Health and Well-Being initiative at the 2015 APSE Awards.

Implementing the Care Act

The Care Act – the biggest change in adult social care legislation since the NHS was created – started to come into law in April 2015. With individual well-being the driving force, the Act heralded a new national care assessment framework, more rights for carers, new safeguarding responsibilities and a duty to shape the local care market. Havering has redesigned many of its services to meet our responsibilities.

Improving communication with social care providers

Havering has launched an online care network for the Borough's social care providers. The network enables care providers of all sizes – from large care homes to small voluntary organisations – discover what care is available, browse and book local training and events and, where appropriate, share service details and apply for tenders. The network connects care providers helping them get involved in discussion with the Council on how care is provided in the Borough. To get involved with the network visit www.carenetworkhavering.org.

The challenges ahead

With ever more Havering residents dependent on care and support services provided by Havering Council and its partners, the biggest challenge remains meeting the needs of a growing number of service users - particularly those aged over 65 - with the resources and funding available.

With each generation in Havering living longer than the last it is important to ensure that people can enjoy these extra years in good health. Meeting the challenges ahead we will:

- **Be more ambitious** integrating services with our health partners to provide seamless care and support to residents. We need to provide more services that are joined up with health, provided by the NHS, and social care, provided by the council.
- Provide more choice and increase the take-up of personal budgets and direct payments. This is key to helping people manage their own care. We will also help shape Havering's care market to ensure real choice and control for everyone whether through a local authority managed budget, a direct payment, individual service fund or for those who self fund their own care.
- Be more strategic in how we commission and contract services not just across the council but with our health partners and with residents shaping the decisions we make.
- Embrace our new responsibilities under the Care Act fully modernising our services including how we assess people's needs, put together a support plan, provide choice and control, improve well-being and maximise independence. In Havering, care and support is changing for the better as a result.
- Continue to strengthen our safeguarding arrangements to make sure we
 are doing as much as we can to protect people from abuse preventing it
 happening in the first place and in dealing with issues quickly.
- Ensure our workforce has the right tools to do the job and feels confident
 in meeting the challenges ahead. Our new Principal Social Worker will help us
 focus on outcomes for people rather than our processes, our senior
 management restructure will help us integrate services with our health
 partners, and our Assistant Chief Executive will ensure the needs of adults
 are always the priority.
- We need to ensure we effectively manage the council's largest budget in light of significant demographic pressures and increased demands.

Tell us what you think

We hope you have found this local account of adult social care informative.

The requirement to publish our Local Account comes from the Towards Excellence in Adult Social Care (TEASC) Programme and from the national Association of Directors of Adult Social Care. The TEASC programme helps councils perform to the highest standard in adult social care.

Let us know your thoughts. Please email your views to adultsocialcare@havering.gov.uk and help us improve future accounts and publications.

Keep informed

To keep up-to-date with the latest developments in adult social care in Havering, visit www.havering.gov.uk and subscribe to our email updates including Health and Wellbeing, Carers, Care Connect and Active Living.

Social care providers can sign-up to <u>www.carenetworkhavering.org</u> to connect with a range of information and training.

For further information on adult social care visit www.haveringcarepoint.org.uk