



INDIVIDUALS OVERVIEW AND SCRUTINY COMMITTEE

Subject Heading:	Provision of care available both in care homes and in the community
CMT Lead:	Joy Hollister
Report Author and contact details:	Barbara Nicholls
Policy context:	

SUMMARY

This report details the main types of care and support available to Adult Social Care (ASC) clients both in the community and within a residential setting. It also highlights the arrangements for monitoring care provisions in the borough.

RECOMMENDATIONS

This report is for information only.

REPORT DETAIL

In an environment of increasing demand for adult social care support with less available funds to spend, the Council has to develop innovative ways to support the care needs of its service users. A key aim of Havering ASC is to support vulnerable people in our community in doing as much as possible for themselves, utilising all their 'assets' to help them meet their outcomes, and for those that are reliant on care and extra support, to lead better more comfortable lives. The care and support they receive can be the difference between a life that is fulfilling and active and based on choices that are important to them, and one which is unnecessarily limiting. Adult Social Care tries to ensure, wherever possible, that service users are supported in their own homes in the community, and are encouraged to be as independent as possible, whilst preventing or delaying admissions into residential care settings and hospital.

Eligibility for Services

All individuals that approach ASC for support have an eligibility assessment carried out by a member of the social care service. This assessment will determine if the applicant is eligible for support. For those who do not meet the criteria for support ASC will provide appropriate information and advice. For those that do meet the eligibility criteria, a care and support plan will be completed to identify and agree the service user's needs and identified outcomes and discuss the help and support available to meet them. Care will not be provided or paid for by the Council in excess of this assessed need. The service ensures that all eligible social care clients have a review of their care and support package once a year. This is to ensure that clients' changing situations are captured and packages of care reflect the changing needs of service user.

Care available to individuals supported in the Community

There are a number of services that Havering provides within the community to provide support and minimise and prevent unnecessary admissions into a residential setting and/or hospital.

Reablement

Reablement is one of councils' main tools in managing the costs of an ageing population by reducing reliance on hospital and residential beds by intervening at an earlier stage. Providing personal care, help with daily living activities and other practical tasks, usually for up to six weeks, reablement encourages service users to develop the confidence and skills to carry out these activities themselves and continue to live at home. It tends to be provided to people who have just been discharged from hospital or are otherwise entering the care system following a crisis to help service users who have experienced deterioration in their health and/or have increased support needs to relearn the skills required to keep them safe and independent at home. Unlike traditional home care, where carers visit and complete tasks for the service user, domiciliary support assistants work with the service user to learn or re-learn the skills needed for everyday life. It can support things such as developing confidence to enable safe transfers including getting up from a chair, in and out of bed and on and off the toilet or support in finding new ways in dealing with everyday tasks including: food and drink preparation, shopping, organising and planning daily routines, using transport, laundry, household administration and community access. From April 2014 – February 2015, 1062 individuals have received reablement service in the Borough.

Home Care

For individuals with longer term needs, home care can help service users to live independently and safely in their own homes. As at the end of February 2015, 1113 service users were receiving some form of domiciliary care in the Borough. Service users may need support because of a disability, because they are frail and elderly, or had a fall. There are many types of support available, including help with personal care, such as washing, dressing, getting out of the shower or getting in and out of bed. Service users can also receive help with other daily tasks, including cooking meals, cleaning, shopping and taking medication. This support is provided by a home care worker provided by a private care agency.

Occupational Therapy

When service users have a disability that affects their daily life they may be offered equipment, or adaptations to their home to support and help maintain independence, or to assist a carer. Examples of simple equipment include bath seats to help with getting in and out of the bath and raised toilet seats to assist those with restricted mobility. Minor adaptations can include items such as grab rails, chair raisers or step alterations. Major adaptations examples are stair lift, ramp for a wheelchair, or a level access shower. Occupational Therapy staff will recommend major adaptations if it is necessary and appropriate to meet the needs of a person who has permanent disability and has a substantial or critical need. As at February 2015, 2734 individuals were in receipt of equipment or adaptations.

Assistive Technology and Telecare

Assistive Technology is any piece of equipment or system that is used to increase, maintain or improve the functional capabilities and independence of people with cognitive, physical and communication difficulties. AT helps service users do everyday activities that are difficult, or have become difficult. Examples of this type of equipment are speaking clocks and personal alarms.

Telecare is a part of Assistive Technologies - a range of sensor aids that offer remote support, reassurance and care that can let others know when a service user needs help in their home. Examples of functions that telecare can support are equipment to turn off a cooker automatically or prompt a service user that it has been left on or alert a service user if a sink or bath is overflowing. Telecare is available to people living in their own homes as well as people living in some residential homes and extra care housing schemes.

Supported Living Services

Some service users do not want to move to residential care or it may not be appropriate for them to do so, but find it difficult to cope at home. Services that support independent living are made up of suitable or adapted accommodation and some forms of personal care. Some supported living homes may be shared by two or three people with similar conditions, such as a substance misuse problem or a particular disability. Staff will usually visit the home to provide motivation, such as encouragement to go out to work, and carry out simple tasks such as shopping, housework and repairs, and provide help with administrative tasks or personal care, if required. As at the end of February 2015, 91 individuals were residing in a supported living environment.

Extra Care Housing

Extra Care Housing is an extension of traditional supported housing and allows older adults (aged 65 years and over) to live as independently as possible, with the reassurance of onsite care support when they need it. Such schemes will have housing available to buy, rent or part own which are purpose-built or adapted and personal care support available 24 hours a day to offer support. There will also be communal areas onsite for tenants to use with various activities determined by the people who live there. For example, it could be used for residents to develop their own support networks or to invite in visitors to undertake activities such as wellbeing clinics or chiropody. There will also be neighbourhood facilities close by such as post offices, shops, GP surgeries and public transport. In addition to the above, some extra care sites have dementia units which provide specialist care in a community setting.

Day Opportunities

Day services or day opportunities are services that help service users keep active, learn skills and maintain friendships and social contacts. As at the end of February 2015, 324 service users are attending a day service. Activities are many and varied and can include arts and crafts, gardening, using computers for learning, outings in the community and other group activities. ASC runs two in-house Day Centres: Yew Tree Centre, which offers service for people with sensory and physical disabilities, and Avelon Road Centre which offers services to adults with a range of learning disabilities. There are also a number of Day Services run by other organisations utilised by Havering Service users for people with mental health needs, and more complex learning disabilities and or physical disabilities and Dementia.

Care available within a residential care setting

For those service users that can no longer be maintained and supported in the community either in their own homes or in supported accommodation a care home may be the only option. As at the end of February 2015 there were 547 individuals in residential care homes and 227 in nursing care homes. Care homes provide personal care or nursing care. A care home registered to provide personal care will offer support; ensuring basic personal needs are taken care of. A care home providing personal care only will assist service users with meals, bathing, going to the toilet and taking medication.

Some service users may need nursing care, and some care homes are registered to provide this. Often these homes specialise in certain types of disability or conditions such as dementia and will also offer end of life and palliative care.

There are also residential care homes that provide care and support for younger adults (18-65 years old) with, for example, severe physical disabilities, learning disabilities, brain injury resulting from an accident, or mental health problems. They can care for adults with more than one condition, and some homes will have expertise in providing care for adults with alcohol or drug dependency. These care homes may offer permanent residence or provide care for a temporary period.

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Monitoring of Care Provision and Contract Management

The Quality and Assurance Team (QAT) within the ASC Service undertake quality assurance monitoring and evaluation of provider services within the Borough in accordance with regulations set out in the Care Act and the essential standards.

The Team has oversight of 124 providers across a number of service areas in the borough:

Care Homes Older Persons	39
Care Homes Learning Disabilities	25
Homecare	26
Reablement	1
Day Opportunities Older Persons	6
Day Opportunities Learning Disabilities	11
Extra Care	3
Supported Living	13

They work to ensure that quality standards are maintained across all the Provider services and to achieve a degree of consumer reassurance about the quality of services delivered in the Borough. The QAT carry out visits to Provider services (all unannounced) and to conduct routine checks and specific investigation work concerned with quality and contract compliance issues of the provider service. They work to implement the monitoring and inspection framework for all contracted, spot purchased, grant funded services and in-house Adult Social Care services, to ensure providers meet the Council's contractual standards; and ensure that relevant providers of Adult Social Care meet their performance targets and quality standards and outcomes as set out in contracts, SLA's and grants agreements. Formal meetings are held with key statutory stakeholders on a three weekly basis at the Quality and Safeguarding Board which discusses provider services and serious concerns. These concerns are risk assessed using the guidance for suspension protocol. The Board then make recommendations to the Head of Service about what remedial action should be taken.

In addition, they canvass the views of service users and carers about their experience of service delivery including how services can be improved and to ensure that these views are acted on appropriately.

The QAT also arrange and facilitate a quarterly provider forum. This forum brings together providers and creates an opportunity for emerging themes to be discussed and good practice to be shared.

The QAT also lead on the monitoring of contracts across care provision in the community and homes. Systems are in place to monitor and assess provider compliance against contracts, legislative requirements, care outcomes, value for money, quality and performance. The application of contract monitoring reiterates to providers the standards expected in delivering of services.

Going forward

In the coming year and thereafter, Havering ASC and Commissioning (working alongside Health colleagues and partners) will be working on a number of initiatives to further support service users independence in the community - examples of this type ongoing of work include:

Social inclusion project - reduced social contact, being alone, isolation and feelings of loneliness are associated with reduced quality of life. Social activity group interventions that target specific groups of people can alleviate social isolation and loneliness. Havering plans to achieve this by promoting and support access to social networks; resolving transport issues so that they do not prevent people from participating in the wider community; building links with community projects, community centres and schools to increase levels of social contact between people from different

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generations; identify, respect and use people's skills, including the skills of older people gained in previous employment.

Shared lives scheme - shared Lives is an alternative to home care and care homes for disabled adults and older people. In Shared Lives, a Shared Lives carer and someone who needs support get to know each other and, if they both feel that they will be able to form a long-term bond, they share family and community life. This can mean that the individual becomes a regular daytime or overnight visitor to the Shared Lives carer's household, or (for 4,500 people in England) it means that the individual moves in with the Shared Lives carer.

Implementation of the Joint Dementia Strategy - Dementia is becoming more common and the cost of looking after people with dementia is going up. The aim is to improve the quality of life for people with dementia and their carers by developing services for people with dementia that meet the needs of everyone, regardless of their age, ethnic group or social status. The aim is to continue to ensure better knowledge about dementia and remove stigma around dementia and their family and carers; ensure early diagnosis support and treatment for people with dementia, and develop services to meet changing needs more appropriately.

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no direct financial implications or risks arising as a result of this report, which is for information purposes.

Currently the Adults Social Care service does not have a Shared Lives Scheme. However, work is underway in exploring whether an existing provider or to commission an organisation to set one up in Havering.

It should be noted that in 15/16 the Adults Social Care Service has £5.2m MTFS savings allocated against a number of service provisions. Work has either completed or will be commencing in achieving these efficiencies.

The Care Act go live date of the 1st of April 2015 will also see legislative changes to the carer's rights and the thresholds of care packages. Work is underway to model the potential pressures on resources going forward and responsive action is being taken to deal with the changes in legislation.

Rav Nijjar – Strategic Finance Business Partner

Legal implications and risks:

There are no apparent legal implications in noting this Report

Stephen Doye - Legal Manager (Litigation) for and on behalf of Interim Head of Legal

Human Resources implications and risks:

There are no direct HR implications or risks to the Council, or its workforce, that can be identified at this time with regard to the recommendations made in this report.

Eve Anderson - Strategic HR Business Partner

Equalities implications and risks:

This report has no direct equality implications as it is an information report on the types of care and support available to Adult Social Care (ASC) clients both in the community and within a residential setting, and the arrangements put in place for monitoring care provisions in the borough.

The report also highlights some key projects that Havering ASC and Commissioning (working alongside Health colleagues and partners) will be working to further support service users' independence in the community such as:

- Social inclusion project;
- Shared lives scheme, and
- Implementation of the Joint Dementia Strategy.

These and all other relevant activities will be subject to individual Equality Impact Assessments so as to ensure that positive outcomes on clients with protected characteristics are optimised and any potential/likely negative implications identified are mitigated, if not eliminated.

Paul Green – Corporate Policy & Diversity Advisor

BACKGROUND PAPERS

No background information papers used.