CABINET MEMBER FOR ADULT SOCIAL CARE – COUNCILLOR ROWSON

Care and Support Services

The Council's In-House Provider Services are starting to work up the Operational Resilience Planning in preparation for the anticipated winter pressures which is well rehearsed now as the services have formed an integral part of the Operational Resilience response over recent years along with other stakeholders including the different Health Partners.

In particular the Operational Resilience panning is targeted in key areas:

ARC – Intermediate Care

The service is paying close attention and working collaboratively with Health partners to understand the care pathway for someone receiving intermediate care at the ARC, this includes efficient and effective care management from referral to the end of the intermediate care placement ensuring that the placements achieve the desired outcomes within the agreed timeframe thus enabling the service a level of movement to support continuous throughput of placements and therefore creating capacity to respond to anticipatory demand going forward.

Homecare Reablement/Rapid Response Service

The service has made available some additional carer capacity to enable the service to flex and contract in response to the anticipated demand over the winter period to ensure that where appropriate reablement services are considered as an alternative for particular people and ensures that people are more able to be safely supported in their own home as opposed to other alternative residential provision and/ or Hospital.

Vitaline Service

The service has taken steps to procure additional Assistive Technology Units to respond to the anticipated demand over the winter period. The service is now considering the contingency arrangements to enable a quick response to the installation of the equipment so that this reduces the time the person may need to spend in Hospital/ Residential placement and again ensures that the person is able to remain at home for longer with appropriate care and support in place if required in addition to any Vitaline support.

Hoyle @ Mansfield Respite Service

Although this service is not part of the formal response to Operational Resilience, it is a service that can respond if required dependent upon the availability of beds at the time, this approach has been successful over recent years and if called upon the Hoyle @ Mansfield Service will endeavour to respond in the same way as previous years.

The service's identified above all feed into a formal reporting process in respect to the capacity available each week, this is shared with Health partners and Commissioners, which then feeds into the wider reporting mechanism ensuring that both Health and Social Care agencies are better able to target resources to where they are required and utilise available capacity within existing services to manage the Operational Resilience across the whole Health and Social Care System.

Hate Crime Reporting

The Disability Hate Crime Third Party Reporting Project of the independent Blackpool charity Disability First was launched on the 14 October 2011 with funding secured from the Ministry of Justice, Victims

and Witness Fund. This was in order to develop a third party reporting service based at the Council's Blackpool Centre for Independent Living, which enables victims and witnesses of disability hate crime/incidents to report in a safe environment.

Disability Hate Crime has historically gone under reported compared to other forms of hate crime. The projects aim is to help increase disabled people's confidence to report and the numbers of incidents recorded in order to provide a clearer picture of the issue in Blackpool and to be a victim focused service.

Since the launch, the total number of incidents reported to Disability First stands at 81, supporting around 190 people. The type of incidents can include harassment, verbal abuse, physical abuse, hate crime and cyber bullying. A lot of the incidents can occur in and around the person's home and local neighbourhood and also for people when using public transport.

The project has proven itself to be successful, with year on year more incidents reported and more people supported through the service and through advocacy, mediation etc.

Funding from the Ministry of Justice came to an end at the end of September 2014, with the Victims and Witnesses Fund being developed to the Lancashire Police and Crime Commissioner, who currently funds the project until March 2015.

Business Support and Resources

Personal Health Budgets

Blackpool Council has been operating a Personal Health Budget (PHB) pilot in Blackpool, since January 2014. Individuals who are eligible for NHS Continuing Healthcare (CHC) have a right to ask for a personal health budget and this became a 'right to have' from October 2014.

Since January 2014, Blackpool Clinical Commissioning Group (CCG) has funded a full time Project Officer to work within the Direct Payments team at Blackpool Council, to be guided by the experience and knowledge of the team. Direct payments have been successfully funded in social care for the last fifteen years, this experience is something the CCG was keen to benefit from. The pilot ended in October 2014 and the Project Officer post is currently funded until January 2015.

The Project Officer's role was to develop a framework and structure in order to make Personal Health Budgets available, as well as working with service users and the CCG to put Personal Health Budgets in place. The Blackpool pilot has resulted in a robust process that is working well.

There are currently nine CHC individuals at various stages of the PHB process in Blackpool, with others in the pipeline. This is likely to increase as individual awareness increases over the next year. Personal Health Budgets are also going to be rolled out in Mental Health, Complex Cases for Children and Learning Disability Teams from 1 April 2015, creating potential for more individuals to take up the flexibility of a personal health budget.

After a successful pilot in Blackpool, the CCG is keen to continue the framework and network that the PHB work to date has created. This will bring revenue to the Council for providing this service to Blackpool CCG and enhance the support provided by the Direct Payments Team through a wider understanding of health and well-being issues.

Adult Social Care

The services continue to be very busy with the high increase in requests for Deprivation of Liberty assessments and the increase in referrals to adult services. The teams are continuing to manage new work request coming in and ensuring safeguarding alerts are being dealt with. There are no waiting lists in these areas.

The Care Act 2014 Regulations and Guidance were published this week. They will impact across all adult social care teams, the whole of the Local Authority and many of our partners, including the NHS, housing and the voluntary and independent sector. There will be a high level of activity between now and the implementation start date of these in April 2015. We will need to make changes to systems and processes in adult social care as the new legal framework is implemented. Oversight will be via the Care Act Project Board and the work streams will be looking at the details. There is an active programme of publicity, training and change management in place.

Peer Reviews in Adult Social Care

Blackpool Council is part of the North West Region of the Association of Directors of Adult Social Services (ADASS) which oversees the sector led improvement peer challenge process.

The Department wanted to test the extent to which the Residential Care system in Blackpool was functioning well, whether there were identifiable reasons for historically low performance on the rate of admissions (meaning the rate of admissions is high), the strength of relationships within the system and the experience of people and their relatives throughout the journey into residential care. This was also an opportunity to test out Blackpool's arrangements in preparation for an external peer challenge later in the year.

The headline themes of enquiry were Vision, Strategy and Leadership, Resource and Workforce Management, Service Delivery and Effective Practice, Commissioning and Managing the Market, People's Experience of Safeguarding and by way of experience and learning for the Department, Effectiveness of Organisational Arrangements.

Broadly, the findings were as follows:

- The overall direction of travel is positive, although admissions remain high relative to other areas
- Commitment to improvement is evident throughout the system and ideas, energy and enthusiasm are widespread
- There is clarity of vision and purpose in may key areas
- Prevention needs to start earlier in people's life journeys to facilitate individual and community resilience and advance planning, and broader perspectives on alternatives to residential care

The Department intends to use the findings of this Peer Challenge as a marker on its improvement journey and a focus for action with all the relevant stakeholders.

An external Peer Review of the Adult Safeguarding arrangements will take place in January 2015, the arrangements for which are currently being finalised.