

**ANNUAL PERFORMANCE ASSESSMENT OF SOCIAL CARE SERVICES FOR
ADULTS SERVICES FOR CAMBRIDGESHIRE AND ACTION PLAN**

To: Cabinet

Date: 26 January 2010

From: Service Director: Adult Support Services

Electoral division(s): All

Forward Plan ref: Not applicable **Key decision:** No

Purpose: To present to Cabinet:

- The Summary Report of the 2008/09 Annual Performance Assessment for Adult Social Care Services by the Care Quality Commission
- The work to be undertaken to address the areas for improvement set out in the Summary Report.

Recommendation: Cabinet is asked to:

- i) Note and comment on the content of the 2008/09 Annual Performance Assessment of Adult Social Care Services for Cambridgeshire.
- ii) Approve the action plan set out in Appendix 2 to address the areas for development identified by the Care Quality Commission.
- iii) Confirm that updates on progress against the Action Plan will be received by Cabinet and Health and Adult Social Care Scrutiny at a minimum of six monthly intervals.

| <i>Officer contact:</i> | | <i>Member contact</i> | |
|--------------------------------|--|------------------------------|--|
| Name: | Claire Bruin | Name: | Fred Yeulett |
| Post: | Service Director: Adult Support Services | Portfolio: | Adult Social Care, Health and Wellbeing |
| Email: | Claire.bruin@cambridgeshire.gov.uk | Email: | fred.yeulett@cambridgeshire.gov.uk |
| Tel: | 01223 715665 | Tel: | 01223 699173 |

1 BACKGROUND

- 1.1 The Care Quality Commission (CQC) makes an annual assessment and judgement on Adult Social Care Services. The judgement is made drawing from the following information collected throughout the year:
- Regular meetings with the Area Manager
 - The annual Self Assessment Survey, which contains quantitative (including the the formal performance indicators (PIs)) and qualitative information, submitted in May
 - Any fieldwork inspections
 - Annual Review Meeting, held in July 2009.
- 1.2 In 2008/09, CQC did not undertake a fieldwork inspection of adult social care services in Cambridgeshire, but did have the opportunity to meet with service users and family carers as part of the Annual Review Meeting in July.
- 1.3 The annual performance assessment framework uses the 7 outcomes set out in the White paper: Our Health, Our Care, Our Say:
- Improved health and emotional well-being
 - Improved quality of life
 - Making a positive contribution
 - Increased choice and control
 - Freedom from discrimination or harassment
 - Economic well-being
 - Maintaining personal dignity and respect
- 1.4 The process for the Annual Performance Assessment was revised in 2008 – 09. The star rating system has ceased. Instead, the assessment of performance in terms of delivery of outcomes is graded individually and then aggregated up into an overall graded judgment. The assessment of performance for Adult Social Care now feeds into the Comprehensive Area Assessment framework.
- 1.5 The assessment is made of two components:
- Delivery of Outcomes Assessment: a grading scale of “poor, adequate, well and excellent”, on the delivery of the seven outcomes,
 - A written assessment for Leadership and Commissioning and use of resources.
- 1.6 The Care Quality Commission has judged that overall Cambridgeshire County Council is performing ‘Well’ in its delivery of outcomes for people using Adult Social Care services.

2 ADULT SOCIAL CARE PERFORMANCE JUDGEMENTS FOR 2008/09

- 2.1 The judgements made by Care Quality Commission for 2008/09 are set out in the Annual Performance Assessment of Adult Social Care Services for Cambridgeshire, which is attached at Appendix 1. The table, from Appendix 1, setting out the judgements is below:

| | | |
|--|----------------------------|-------------------|
| Delivering Outcomes Assessment - Overall Cambridgeshire County Council is performing: | | Well |
| Outcome 1: <u>Improved health and well-being</u> | The council is performing: | Well |
| Outcome 2: <u>Improved quality of life</u> | The council is performing: | Well |
| Outcome 3: <u>Making a positive contribution</u> | The council is performing: | Well |
| Outcome 4: <u>Increased choice and control</u> | The council is performing: | Adequately |
| Outcome 5: <u>Freedom from discrimination and harassment</u> | The council is performing: | Well |
| Outcome 6: <u>Economic well-being</u> | The council is performing: | Well |
| Outcome 7: <u>Maintaining personal dignity and respect</u> | The council is performing: | Well |

- 2.2 For the written assessment of Leadership and Commissioning and use of resources, the Care Quality Commission stated:

Leadership

The council has clear vision for adult social care and people across all communities are engaged in the process of informing and planning future developments. Plans are informed by the joint strategic needs assessment and local area agreement plans which are shared with partners have been met or exceeded. The impact of meeting / exceeding the targets has been that outcomes for people have improved with more people supported to become or able to retain their independence and fewer delayed discharges from hospital.

Commissioning and use of resources

The joint strategic needs assessments for client specific groups that have been undertaken by the council and partners are being used to inform commissioning priorities which are also informed by consultative forums with people who use services. Contract compliance is monitored and prompt action is taken to improve services or to cease using services where outcomes for people are poor. The council has thematic partnership boards that contribute to co-ordination of services, which provide positive impact and focus for services. Partnership working with health and the voluntary sector is aligned and in addition to addressing the needs of the whole social care population undertakes targeted work with specific communities to improve outcomes for people who use services.

2.3 What the Council does well

The Care Quality Commission has highlighted, within each of the Outcome areas, aspects of services where the council performs well, and where the council needs to improve. The areas in which the Council is performing well, taken from the Annual Performance Assessment Report in Appendix 1, are listed below:

Outcome 1: Improved health and well-being

- The council funded 'Welcome Home from Hospital Scheme', supports people after hospital discharge and has prevented readmissions and reduced the length of stay in hospitals.
- Community exercise sessions for all groups of people are popular and provided across the county.
- The council has invested in working with groups of people at risk from health inequalities, and rural and social isolation across the county to improve outcomes related to health and wellbeing.

Outcome 2: Improved quality of life

- There has been an increased number of people helped through intensive homecare.
- There have been reduced numbers of admissions into residential care and an increase in the provision of extra care facilities.
- Increased access to and increased the number of carers breaks.

Outcome 3: Making a positive contribution

- Volunteers are well used and are involved at all levels to plan and contribute to service delivery.
- Partnership boards are active and ensure that people who use services can assist in shaping and developing services to enable them to make contributions to service improvement and improved delivery.

Outcome 4: Increased choice and control

- Assessments are completed in a timely manner.
- There has been an increased use of advocacy services to support people who use all services.
- Broad range of 'out of office hours' support is available to provide opportunities to exercise choice and control.
- Specialist support for people with dementia is provided to enable them to remain living in the community.

Outcome 5: Freedom from discrimination and harassment

- The use of equality impact assessments to focus on and check services has been embedded in departmental practice.
- Verbal information and support to understand fair access to care criteria and implications for individuals is provided to people who have contact through the direct contact centre. There is a need to improve printed information.

Outcome 6: Economic well-being

- Support to access benefits has improved available income for people who use services.
- Information is available for people who self fund explaining funding processes.

Outcome 7: Maintaining personal dignity and respect

- Increased awareness of safeguarding amongst care staff.
- Dignity in care work of the Poet in Residence.

3 RESPONSE TO THE SUMMARY REPORT OF THE 2008/09 ANNUAL PERFORMANCE ASSESSMENT

- 3.1 The last year has been a positive year for Adult social care across Cambridgeshire, delivering improved services for the people of Cambridgeshire, and being recognised for this through the “2 star” rating for 2007 / 08 and the performing “Well” assessment for 2008 – 09. Staff in the County Council and partner agencies have worked hard to deliver these improvements, supported by County Councillors and Non-Executive Board Members of NHS Cambridgeshire, and we are continuing to work to further improve services.
- 3.2 Feedback at the end of the Annual Review Meeting in July included recognition that the positive progress that had been made in involving and engaging service users and family carers in planning and service developments in 2007-08 had been built upon. The service user and family carers who met with the Inspectors provided good examples of how their input had continued to influence services and how the relationships had continued to develop, leading them to feel positive about the way that they were being involved and included in decision making.
- 3.3 The Care Quality Commission have also noted a number of areas for improvement under each of the 7 outcome areas. An Action Plan has been developed in response to these areas and is attached as Appendix 2. It should be noted that in many of the areas for development, work on implementation is already well underway.
- 3.4 The group responsible for monitoring the progress against each area for development is specified in the action plan, and progress against all the actions will be overseen by the Quality for Adults Programme Board on an exception reporting basis at the monthly meetings. Subject to approval of the recommendation within this report, progress against the action plan will be presented to Cabinet and Health and Adult Social Care Scrutiny Committee at a minimum of six monthly intervals. Progress will also be monitored by CQC at the Regular Business Meetings, and at the Annual Performance Review Meeting in July 2010.

4. SIGNIFICANT IMPLICATIONS

4.1 Resources and Performance:

- 4.1.1 Successful implementation of the action plan, which includes actions in relation to a number of specific indicators, is required to continue to improve local services and build on the improved performance judgements of the last two years. This requires the following resources to be deployed to support the necessary work:
- 4.1.2 Continued capacity for project management to support the work within the Quality for Adults Programme. This resource has been secured, following identification of resources from the Office of Corporate Services and use of the Modernisation Grant for the Transformation of Adult social care.
- 4.1.3 Work being undertaken within existing resources, using current staff expertise to develop policies and procedures, improve processes and deliver necessary training.

4.2 Statutory Requirements and Partnership Working:

- 4.2.1 NHS Cambridgeshire, Cambridgeshire Community Services and Cambridgeshire and Peterborough NHS Foundation Trust play key roles in delivering parts of the action plan on behalf of the County Council. Existing governance arrangements will be used to ensure that partners deliver their responsibilities in respect of the action plan.
- 4.2.2 The introduction of Self Directed Support has been required by Government via the Local Authority Circular Transforming Social Care (January 2008), and is being taken forward in close partnership with social care delivery partners, especially NHS Cambridgeshire, Cambridgeshire Community Services and the Cambridgeshire and Peterborough NHS Foundation Trust.
- 4.2.3 Separate work is being undertaken with Providers, including the Council's in-house services, via a "champions" group, who are working alongside contracting colleagues in a positive way to meet the challenges of Self Directed Support. The group has representation from across the local social care sector, including voluntary organisations. This group will help the Council (and its commissioning partners) think through the best approaches to maintaining market stability for vulnerable groups, whilst choice will increase and undoubtedly people directing their own support will begin to move around an evolving market place. This will challenge Providers, including in-house services, to provide high quality services at affordable prices that individuals will wish to purchase, as the Council moves away from block contracting and service users (and their support networks) become the main "customer" of Providers.

4.3 Climate Change

- 4.3.1 There are no significant implications for any of the headings within this category, although as services move to more modern and more localised arrangements, environmental considerations will play a greater part, and it is possible that less people (staff and service users) will be travelling as often or as far.
- 4.3.2 Working on service improvement across the county and across organisations requires staff who are based in different parts of the county to work together. Wherever possible travel will be minimised by less reliance on face-to-face meetings. Where meetings are required, attempts will be made to rationalise these so that staff can cover a number of meetings at one site. Hot desking, for Council

staff and partners, in each others' buildings will continue to be promoted to support this approach.

4.4 Access and Inclusion

- 4.4.1 A greater role for the voluntary sector (and community groups in general) is envisaged in the future, as individuals begin to make their own choices about support in their local communities, including possibly moving away from the more traditional sources of support.
- 4.4.2 Work has started on ways to make information about services on offer easily accessible to people directing their own support and to employees, especially care managers, contact centre staff and other community groups. This is crucial to enable individuals and their supporters to make informed choices, and to help the Council and its partners make good judgements about "market shaping" based on individual purchasing decisions, whether "self funders" (people who pay the full cost of their social care services) or not.

4.5 Engagement and Consultation

- 4.5.1 Building on the positive work of engaging service users and family carers, we need to continue to find ways to ensure that minority groups and communities are included within these arrangements. Contacts and communication channels that have been established during 2008/09 will provide the basis for improving the involvement of people within minority communities.

| Source Documents | Location |
|---|---|
| Annual Performance Assessment Report 2008 / 09, Care Quality Commission | Room B310, Castle Court Cambridge |