

# **ADULT, COMMUNITY AND HOUSING SERVICES SCRUTINY COMMITTEE**

**TUESDAY 24<sup>TH</sup> SEPTEMBER, 2013**

**AT 6.00 pm  
IN COMMITTEE ROOM 2  
THE COUNCIL HOUSE  
DUDLEY**

**If you (or anyone you know) is attending the meeting and requires assistance to access the venue and/or its facilities, could you please contact Democratic Services in advance and we will do our best to help you**

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## **IMPORTANT NOTICE**

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Thank you for your co-operation.

Your ref:

Our ref:

Please ask for:  
Mr J Jablonski

Telephone No.  
(01384) 815243

11<sup>th</sup> September, 2013


Dear Councillor

**Adult, Community and Housing Services Scrutiny Committee**  
**Tuesday, 24<sup>th</sup> September, 2013 – 6.00PM**

You are requested to attend a meeting of the Adult, Community and Housing Services Scrutiny Committee to be held on Tuesday, 24<sup>th</sup> September, 2013 at 6.00pm in Committee Room 2 at the Council House, Dudley to consider the business set out in the agenda below.

The agenda and public reports are available on the Council's Website [www.dudley.gov.uk](http://www.dudley.gov.uk) and follow the links to 'Councillors in Dudley' and the Committee Management Information System.

Yours sincerely



Director of Corporate Resources

**A G E N D A**

1. APOLOGIES FOR ABSENCE

To receive apologies for absence from the meeting.

2. APPOINTMENT OF SUBSTITUTE MEMBERS

To report the appointment of any substitute members serving for this meeting of the Committee.

3. DECLARATIONS OF INTEREST

To receive Declarations of Interest in accordance with the Members' Code of Conduct.

4. MINUTES

To approve as a correct record and sign the minutes of the meeting of the Committee held on 12<sup>th</sup> August, 2013.

5. PUBLIC FORUM

To receive questions from Members of the Public.

6. THE MAKING IT REAL IN DUDLEY PROGRAMME (PAGES 1 – 3)

To consider a report of the Director of Adult, Community and Housing Services.

Reference is made in the report to reports that have been circulated in advance of the meeting regarding the following:-

An overview of the Making it Real Agenda

The Adult, Social Care Local Account and Executive Summary

The Making it Real in Dudley Action Plan

The Making it Real in Dudley draft Transformation Blueprint

These reports are available to view on the Council's Committee Management Information System. Paper copies will also be available at the meeting.

7. TO ANSWER QUESTIONS UNDER COUNCIL PROCEDURE 11.8 (IF ANY).

**To: All Members of the Adult, Community and Housing Services Scrutiny Committee:**

Councillors Body, Evans, Herbert, Islam, James, J. Martin, Miller, Mottram, Vickers and M.Wilson (with 1 vacancy)

**ADULT, COMMUNITY AND HOUSING SERVICES**  
**SCRUTINY COMMITTEE**

Monday, 12<sup>th</sup> August, 2013 at 6.00 p.m.  
in Committee Room 2 at the Council House, Dudley

**PRESENT:-**

Councillor Islam (Chair)  
Councillor James (Vice Chair)  
Councillors Body, Burston, Evans, Herbert, J Martin, Mottram, Vickers and M  
Wilson

**Officers**

Assistant Director, Customer Services (Lead Officer to the Committee), Policy and Performance Manager and Team Manager, Customer Services (All Directorate of Corporate Resources), Assistant Director, Housing Services, Head of Housing Options Head of Business Management and Team Manager (Income), North (All Directorate of Adult, Community and Housing Services) and Mrs K Buckle (Directorate of Corporate Resources)

**Observer**

Councillor Branwood

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8      **APOLOGY FOR ABSENCE**

An Apology for absence from the meeting was submitted on behalf of Councillor Miller.

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9      **APPOINTMENT OF SUBSTITUTE MEMBER**

It was reported that Councillor Burston had been appointed as a substitute member for Councillor Miller for this meeting of the Committee only.

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10     **DECLARATION OF INTEREST**

Councillor Body declared a Non-Pecuniary interest in Agenda Item No. 6 – Welfare Reform, as his son was a Council Tenant.

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11     **MINUTES**

RESOLVED

That, the minutes of the meeting of the Committee held on 12<sup>th</sup> June, 2012, be approved as a correct record and signed.

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## 12 WELFARE REFORM

A report of the Lead Officer was submitted on the specific areas that Members, at the meeting on 12<sup>th</sup> June, 2013, identified for Scrutiny.

The Head of Business Management gave a power point presentation in relation to Under Occupation Subsidy commonly referred to as the Bedroom Tax.

The Head of Business Management outlined the purpose of the presentation referring to the impact upon Dudley since the implementation of the under occupation subsidy on 1<sup>st</sup> April, 2013.

An analysis of responses from those customers who were affected by the tax was circulated to Members.

Details relating to how customers were made aware of the implementation of the tax were referred to and the number of households that were identified as being affected by the tax together with details of the fact sheets that were forwarded to each household. The establishment of a Welfare Reforms telephone hotline and a graph detailing the percentage of established contact with those identified was displayed together with details of the responses received in relation to the tax. The advice provided to those customers who would be affected by the tax was outlined.

The impact on Dudley from 1<sup>st</sup> April, 2013 to 30<sup>th</sup> June, 2013 during quarter one was referred to together with the impact on the number of rent accounts.

Details of the increase in rent arrears were referred to and the potential loss of rent to the Council given the worse case scenario.

The Head of Business Management referred to the emerging trends, including the low demand for two bedroom flats and three bedroom maisonettes and the high and competing demands for one bedroom stock and the excessive demand for two bedroom houses.

The current situation was reported on together with the advice and assistance that continued to be provided to those affected and the continued publication of the tax.

In concluding the presentation the Head of Business Management outlined the developing work including the work that continued with West Midlands Best Practice Group.

Arising from the presentation Members asked questions, made comments and recommendations.

In responding to Members questions the Head of Housing Options advised as follows:-

- There had always been a low demand for two bedroom flats and three bedroom maisonettes.
- That there was a large demand for one bedroom housing stock and those applying for these properties were in competition with older people who wished to downsize.
- That those applying for council housing stock were sign posted to various Housing Associations throughout the Borough.
- The Council's Policy not to offer high-rise flats to those with children could be reviewed however even if those properties were offered to those with children it was unknown whether these properties would be accepted.
- That the Council were investigating methods of providing new homes and regenerating the housing stock that they already had.

Councillor Body recommended that all those who were residing in three bedroom flats who had two children should be excluded from the bedroom tax, as this should not be charged in cases where alternative accommodation cannot be offered to tenants in this position. It was agreed that the recommendation be noted and referred to the Cabinet Member for Adult, Community and Housing Services.

Councillor M Wilson recommended that those with children should not be allocated three bedroom maisonettes and flats, as high-rise flats were unsafe for children to reside in and children required gardens for recreational activities.

She also commented that those with an extra bedroom should not be penalised by the bedroom tax.

In responding to a Member's question regarding the Council's housing stock being unable to meet the demands of tenants, the Assistant Director of Housing advised that work would be undertaken to investigate the possible re-classification and re-modelling of council housing stock together with the financial implications of this and a future business plan would be prepared.

The Assistant Director of Housing advised that Council tenants could not be exempt from bedroom tax as this arose from legislation and not a decision that the Council had made.

The Team Manager for Income North provided statistics and details of those who were termed as tenants who can't pay/won't pay and undertook to email the detailed information to Members.

The Head of Housing Options advised that there were three hundred families on the Council's housing waiting list who required larger properties.

The Housing Finance Manager undertook to provide Members with benchmarking data relating to the average turnover of voids.

The Housing Finance Manager referred to the work undertaken with House Mark and a group of other authorities including a number of housing associations in order to ascertain trends regarding the void property rate.

The Housing Finance Manager undertook to provide Members with comparison data in relation to the fluctuation of rent arrears during the last four years.

She also advised that private sector rents were more expensive than Council House rents and some work had been undertaken in preparation for rent setting. Collected data had established that there were more one and two bedroom properties available in the private sector as many house conversions had been carried out however housing benefit was only payable up to a certain limit which may impact upon some tenants being able to afford to rent in the private sector. The Housing Finance Manager undertook to provide Members with the data collected in relation to the above.

The Team Manager (Income) North reported that there were seasonal trends in relation to rent arrears however the rise in arrears may be a combination of seasonal trends and the introduction of the bedroom tax.

The Assistant Director of Housing reported that housing stock was only usually remodelled where properties were adapted and it was not commonplace to re-classify properties as there were implications when re-classifying properties.

The Head of Housing Options advised that the Homelessness service operated for anyone in the Borough and initially where there was a possibility of a tenant losing their property advice would be given in an attempt to prevent this.

The Head of Housing Options undertook to re-consider the Council's policy in relation to housing those with secondary school age children in flats.

The Head of Housing Options advised that the financial costs associated with moving house may impact upon council tenants decision not to move into alternative properties.

The Housing Finance Manager outlined the calculation to determine the extra percentage of rent that would be payable in relation to bedroom tax.

It was also reported that duplex conversions had been undertaken by the Council in the past and the possibility of new builds, estate regeneration and using some of the Council's empty sites for re-builds would be investigated. Potential problems with ground surveys were outlined.

The Housing Finance Manager outlined facilities and advice provided to families who were in rent arrears.

The Head of Business Management undertook to investigate the possibility of Council vehicles being used to assist those who could not afford removal costs.



The Housing Finance Manager reported that Government contracts to provide those seeking asylum with housing had been granted to the private sector two years previously.

Members were requested to provide Housing Services with details of questions their constituents asked in relation to the bedroom tax and answers to these could be included in the frequently asked questions update, leaflets and the internet site. The Head of Business Management undertook to provide Members with the list of frequently asked questions and answers to these.

Councillor Islam referred to the Welfare Reforms leaflet and the Head of Business Management undertook to distribute the leaflet to Members.

The Head of Housing Options advised that the West Midlands Best Use of Stock Group had reached an agreement on the policy for those who could exchange with rent arrears in order to assist with people moving into alternative accommodation and this Policy would be reported on at a future meeting of the Committee.

#### RESOLVED

- (1) That the information contained in the report submitted, on Welfare Reform and the presentation on Under Occupation Subsidy, be noted.
- (2) That the relevant Officers be requested to provide responses and data as outlined above.
- (3) That the Lead Officer to the Committee be requested to advise the Cabinet Member for Adult, Community and Housing Services that Members supported the recommendation of Councillor Body referred to above.
- (4) That the Director of Adult Community and Housing Services be requested to submit reports to a future meeting of this Committee in relation to:-
  - (a) The possible re-classification and re-modelling of council housing stock, the financial implications of this and a future business plan.
  - (b) The impact on Dudley regarding the bedroom tax following the third quarter after implementation on 1<sup>st</sup> April, 2013.
  - (c) The possibility of using council vehicles to assist those who were unable to afford removal costs.
  - (d) The Policy regarding tenants with rent arrears as referred to above.

## DISCRETIONARY HOUSING PAYMENTS

The Policy and Performance Manager gave a power point presentation on Discretionary Housing Payments advising that these were discretionary awards used to cover the shortfall between Housing Benefit and the full rent. Details of who these payments could be provided to and the main features of the scheme were referred to.

The main criteria for determining payments together with the qualifying factors were reported on. Details of the budget, the amount of successful and unsuccessful claims, the total claims received and the average claim paid were outlined.

Details of the Governments contribution to the scheme and the total fund were provided together with national comparisons which determined the percentage increase of applications received on the previous year.

Data in relation to the Governments contribution to the scheme, the total fund and the amount of awards, refusals and those yet to be adjudicated by neighbouring authorities were referred to.

Details of future considerations in order to administer the scheme including the health and welfare of applicants and staff, whether to change the scheme and the potential to require top up of the fund which required consideration at member level were provided.

Arising from the presentation Members asked questions and made comments and the Policy and Performance Manager responded as follows:-

- That details were awaited of the criteria to be met for a successful application to the Government for a top up of the Discretionary Housing Payment fund.
- Details of the predicted overspend of the fund were referred to.
- That as at 5<sup>th</sup> August, 2013 509 applications had been approved and 328 rejected.
- That those who were homeless and not in employment could apply for jobseekers allowance and could apply for accommodation via the Council's homelessness service.
- Every applicant who was refused was signposted to the Live 4 Less service.

The Lead Officer to the Committee advised that the amount of the Governments contribution to the fund had been determined for 2013 and 2014, however further information was awaited in relation to the amount that would be available for future years.

RESOLVED

- (1) That the information contained in the presentation and reported on in relation to Discretionary Housing Payments, be noted.
  - (2) That the Lead Officer be requested to submit reports to future meetings of the Committee after each quarter on the financial position in relation to the Discretionary Housing Payment fund.
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## 14 THE LOCAL WELFARE ASSISTANCE SCHEME

The Team Manager of Customer Services gave a power point presentation on the Local Welfare Assistance Scheme, advising that the Department for Work and Pensions Community Care Grants and Crisis Loans had been abolished on 31<sup>st</sup> March, 2013 and replaced by locally administered schemes now administered by the Council's Benefit Services and Dudley Council Plus.

Funding for the scheme and administration and set up costs were referred to and the two types of awards of crisis awards and Community care awards were referred to together with the main criteria for the awards and details of how needs were met were provided.

Details of local welfare activity during the first three months including the number of calls handled, applications submitted, awards granted, refused and withdrawn and the amount of the crisis and community care spend were provided.

The types of awards made including food, energy, furniture, carpets, household goods and white goods were referred to.

Details of the reasons for the awards and a sample of reasons for refusal of awards were provided.

The successes of the scheme together with lessons learnt following the implementation of the scheme were outlined and the possibility of a policy review. The continuing work to raise awareness of the scheme which would include monitoring and reviewing the scheme and continuing to develop working relationships in relation to the scheme was referred to.

Arising from the presentation Members asked questions and the Team Manager of Customer Services responded as follows:-

- The allocated budget for the fund for the following two years was £700,000
- That the Council had an agreement with Geoff Hill to provide new white goods at cost price.
- That the Department of Work and Pensions had a recorded message on their call centre telephones advising customers that the above service had been transferred to Local Authorities.
- That a number of briefings had taken place with health care professionals in order to make the public aware of the new arrangements in relation to the scheme.
- It had been recognised by the Government that the previous cash and loan award element of the scheme had been open to abuse and it was accepted that some calls had been aborted once it had been explained that cash and loan awards would no longer be available.
- That the supermarket vouchers provided cannot be identified as being issued by the Council.
- That members of the public could apply direct to the food bank.
- That the general public could apply direct to St Thomas' Community Network, however the Council could make multiple awards to applicants and offer a more comprehensive service.
- That the Council were reviewing the amounts that they were awarding to applicants and details of the review would be distributed to Members.
- That work details of the number of those who had received assistance as a result of violent relationships would be provided to members.
- That there was a right of appeal against refusal of an application to the Head of Service and then to the Assistant Director.

Members raised concerns in relation to the significant under spend since the scheme was transferred to the Council and the Lead Officer to the Committee agreed to provide Members with details of the awards made by the Department of Work and Pensions for the periods 2011/12 and if available 2012/13.

The Lead Officer to the Committee also agreed to conduct further work in relation to publicising the scheme in order to raise awareness.

#### RESOLVED

- (1) That the information contained in the presentation and reported on in relation to the Local Welfare Assistance Scheme, be noted.
- (2) That the Lead Officer to the Committee be requested to:-
  - (a) Submit a report to a future meeting of the Committee on the progress of applications for Local Welfare Assistance.
  - (b) Distribute to members details of the review in relation to the amounts awarded to applicants.

- (c) Provide Members with details of the number of applicants worked with who had been subjected to violent relationships.
- (d) Circulate to members details of the awards made by the Department of Work and Pensions for the periods 2011/12 and if available 2012/13.

The meeting ended at 9.10 p.m.

CHAIR

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**Adult Social Care and Housing Scrutiny Committee 24<sup>th</sup> September 2013**

**Report of the Assistant Director of DACHS- the Making it Real in Dudley Programme**

1. To consider in more detail the specific areas that Members of the Committee, at its meeting on 12<sup>th</sup> June 2013, identified for further scrutiny.

**Background**

2. The terms of reference for this scrutiny topic are:

“To consider the impact of the Making It Real Programme on the people of Dudley”

3. At the informal meeting held on 12<sup>th</sup> June, members were provided with a description of the Making It Real agenda and work taking place in Dudley. Specifically:
  - An overview of the forthcoming Care and Support Bill
  - An overview of the Making It Real agenda
  - Information about the local governance structure and a summary of the Making It Real in Dudley action plan
  - A list of potential scrutiny topics including; the views of local people about the impact of the agenda, a review of progress with the action plan and use of resources, a review of performance benchmarked against other Local Authorities and future plans.
4. Reports have been circulated in advance of the meeting regarding the following:



Making It Real  
Overview for Sc...

- An overview of the Making It Real Agenda
- A copy of the Adult Social Care Local Account and Executive Summary



- A copy of the Making It Real in Dudley Action Plan



- A copy of the Making It Real in Dudley Draft Transformation Blueprint

Members are also encouraged to view the Making it Real in Dudley website at [www.makingitrealindudley.org](http://www.makingitrealindudley.org) to access case studies, progress reports and other key information about the agenda.

5. A presentation will be made at the meeting, providing the latest information in relation to the following:
  - A short film providing an overview of Making it Real in Dudley
  - Performance data benchmarking Dudley against other Local Authorities
  - Feedback from the Local Account highlighting strengths and areas for improvement
  - Feedback from the Local Account highlighting strengths and areas for improvement
  - Information about future implications for change

## **Law**

6. National Assistance Act 1948  
Draft Care and Support Bill (2013)

## **Equality Impact**

7. The council will need to have due regard to any equalities implications arising from the Making it Real agenda and an ongoing commitment to improve the quality of service delivery through co-production and the annual Local Account exercise.
8. The annual Local Account will be presented for consideration by the Cabinet and Health and Well Being Board

## **Recommendation**

9. Members are requested to scrutinise the information provided to them and determine what recommendations (if any) they wish to make to Cabinet.

Signed: 

Director: Andrea Pope Smith

Contact Officer: Matt Bowsher – Assistant Director for Quality and Commissioning - DACHS

[matt.bowsher@dudley.gov.uk](mailto:matt.bowsher@dudley.gov.uk)

01384 815886

**Links to Background Information**

<http://www.makingitrealindudley.org> Making It Real in Dudley homepage

<http://www.thinklocalactpersonal.org.uk/Latest/Resource/?cid=9091> Think Local Act Personal website; Making It Real publication

<http://careandsupportbill.dh.gov.uk/home> The Draft Care and Support Bill



# Making it Real in Dudley

*Transforming adult social care together*



## Programme Summary

## Introduction

Since 2007 and the introduction of Putting People First the directorate of Adult social care and housing in Dudley has been undergoing a transformation to personalise the way social care is delivered in the borough.

A large amount of activity has been undertaken which has resulted in some significant improvements to services provided. Such achievements include;

- Success of the Living Independently Team
- Establishment of the User Led Organisation
- Establishment of a number of micro-providers with the support of Community Catalysts in the area of learning disabilities
- Success of the Community Information Directory
- Implementation of Personal budgets

In May 2012 “Making it Real” was published as the next driving policy towards achieving truly personalised Social care services.

This document therefore provides a high level summary of “Making it Real in Dudley”. Information is provided around “Making it Real” as a national agenda and information on how this is being delivered locally. Progress on the agenda is provided alongside references to key documents that provide further detail is also included.

### “Making it Real”

“Making it Real” emerged in May 2012 and simplified the Personalisation agenda from the perspective of people who use care and support services. “Making it Real” is a framework developed by the whole Think Local Act Personal Partnership, but very much led by members of the National Co-production Advisory Group. The approach signals a new phase in which a person focussed agenda is used to change the kind of information that the health and social care sector values, and the way in which success is judged.

“Making it Real” highlights the issues most important to the quality of people's lives. It helps the sector take responsibility for change and publicly share the progress being made.

“Making it Real” is built around “I” statements. These express what people want to see and experience; and what they would expect to find if personalisation is really working well. Such “I” statements are constructed around 6 key themes associated with health and social care.

1. Information and Advice
2. Active and supportive communities
3. Flexible and integrated care and support
4. Workforce
5. Risk enablement
6. Personal budgets and self-funding

## “Making it Real in Dudley”

To begin working towards the aspirations set out in “Making It Real” the directorate of adult social care and housing firstly evaluated its current approach to delivering social care. Overall two approaches were undertaken in order to provide a holistic understanding of the starting point for future change. The two approaches were:

- Independent evaluation
- Local Account

### Independent evaluation

An independent evaluation of the directorates approach to personalised social care services was commissioned from an organisation called Impact change solutions. The organisation produced a comprehensive report that acknowledged areas of success but also highlighted area’s needing improvement. The full document is available though the following link. [Dudley External Evaluation](#)

### Local Account

The Local account is a report to local people, based on the views of Local People that describes how we have performed during this period in delivering quality adult social care and support. The local account for 2011 – 2012 was structured around the themes of “Making it Real”. A Copy of the local account is available through the following [Local Account 2011 - 2012](#)

## “Making it Real” Action Plan

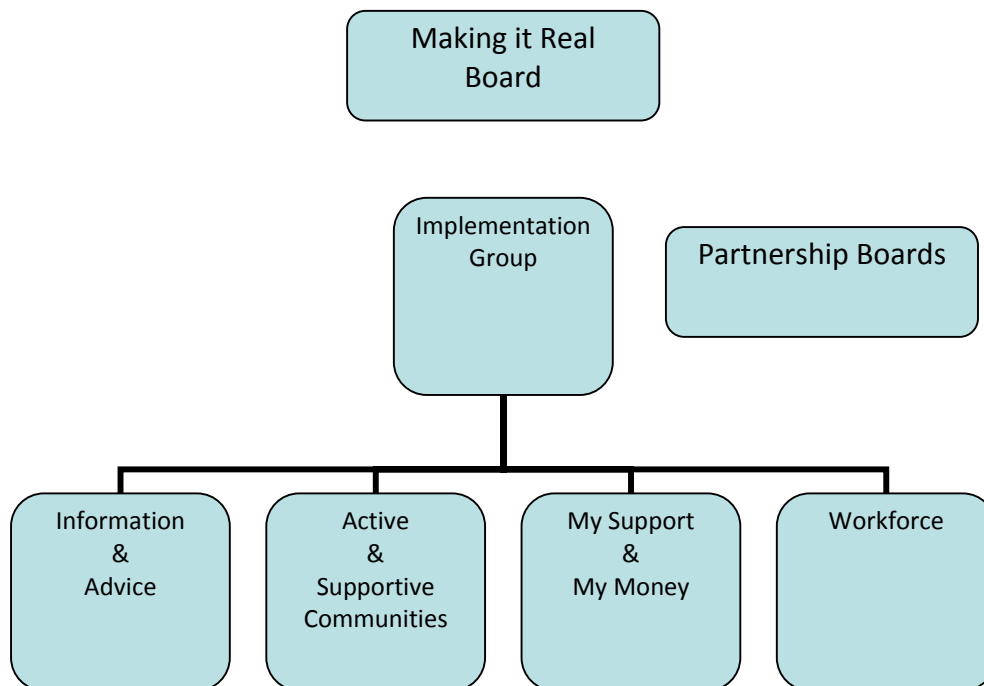
Having clearly established the starting point for future development in the borough we developed our “Making it Real” action plan. The action plan takes the “I” statements from the national “Making it Real” document and based upon the local

account and the impact change solutions report and identifies how “Making it Real” will be implemented in Dudley.

## “Making it Real” Transformation Blueprint

With our action plan in place we wrote our Transformation Blueprint. This document was written to provide clarity around what future social care services in Dudley will look like based upon our approach to “Making it Real. It also established how the changes detailed in the document would be delivered including how local people would be central to decision making and future developments in social care and so establishes a programme approach. The approach is a partnership arrangement involving the Council, CCG, Mental health Partnership Trust, provider organisations, health watch and the public.

The programme structure is established as per the following Diagram.



### Making it Real Board

The board has the overall responsibility of ensuring that the aspirations of the programme are delivered in a manner that is timely, efficient and shaped by local people. The Board is chaired by the Director of Adult Social Care and Housing, Andrea Pope Smith. The Board will track the delivery of the action plan against key identified milestones on a highlight basis and have overall decision making responsibility.

## Implementation Group

The implementation group has a remit to support the board in its role of tracking the programme by producing a highlight report that encapsulates all change activity within the programme. The group has an overview of all projects associated with the programme ensuring activity across the directorate is fitting and working together to provide consistent services.

## Workstreams

The programme is associated with four Workstreams based on the 6 specific themes of the Making it Real. Each Workstream has a delivery plan in place that captures all agreed change activity associated with its remit. In brief the Workstream have the following focus.

### Information and Advice

This Workstream is focused on ensuring that information around adult social care is clear, accessible and up to date enabling local people to be aware of services and supports available in their communities.

### Active and Supported Communities

As group this Workstream is focussed on enabling older people and people with disabilities to have a voice, be able to contribute and feel part of their own communities.

### My Support My Money

Enabling people to be supported as efficiently and as effectively as possible upon contacting the council for support is the main focus of this Workstream. This involves how we work with people at an early stage to promote their independence through to how we provide a personal budget.

### Workforce

This Workstream has the responsibility of ensuring that both internally within the council and externally within provider organisation a workforce and market of services is in place that is able to meet the demands and aspirations of the local population.

### A learning organisation

Central to the whole programme is the notion of being a learning organisation that evolves and develops based upon the demands of local people alongside a desire to deliver best practice approaches in everything we do. "You Said we Did" will

structure our engagement with the public enabling people to see how their involvement has made a difference to the way services are provided. Our performance will be judged by both statutory returns and the views and experience of local people.

## Progress to date

The programme has now been established for 6 months, with the board having met on three occasions during this period. A full and holistic programme of work is underway structured by the Blueprint document. Engagement activity internally has reached beyond the directorate of adult social care and housing to the wider council with sound understanding of the programme established.

Externally considerable activity is being coproduced with both public sector partners and health watch to enable local people to have a voice and shape development activity.

During the life of the programme the following are a number of the key developments achieved to date.

- The Programme structure has been established with the development of both the Blue print and action.
- A communication and engagement plan has been developed that has to date implemented staff road shows, briefing sessions and regular programme updates through multiple channels.
- Development of a Making it Real Partnership website to enable the programme to be communicated and progress recorded
- The councils approach to personal Budgets has been developed to enable people to better self direct their support whilst retaining budget assurance.
- The Dudley innovation fund has been launched as an initiative to support innovation in the provision of social care.
- A co produced approach to public engagement and involvement has been developed and implemented in partnership with healthwatch Dudley.



# Improving Lives, Making a Difference

Adult Social Care Local Account

April 2011 to March 2012





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**If you require any assistance with regards to this document or would like to request an interpreter, large print or audio version, please contact the equality and diversity unit on 01384 813400**

## Foreword from the reference group

We became involved in the Local Account Reference Group to represent people who use services, carers and local people. We worked with officers in producing this year's account giving a 'lay person's' point of view. We felt this year's report is more balanced and realistic by showing the whole range of experience – not only the good. All of our suggestions have been included: it's more 'local' - showing Dudley people both in the pictures featured, there is a wider range of people's experiences included in the case studies and comments. We asked for simple and clear language - less jargon - and clearer data so people could understand and judge whether performance is good or bad.

We felt this report needed to be more realistic in showing the challenges that will affect adult social care in Dudley, particularly in funding, with more budget cuts ahead (on top of those that have already taken place). At the same time demands on the social care budget are increasing with more people living longer, often with more complex needs or long term conditions. Changes are also coming in 2013 that are outside of adult social care directly, but which may have an important impact e.g. in health, the new Dudley Clinical Commissioning group and Dudley Health watch; and nationally, proposed benefit changes that will affect people using social care.

Covering the range and complexity of adult social care in a short document, while also making it as balanced and realistic picture as possible is a challenge.

We hope our involvement in the development of this year's report has helped to give a better picture overall of adult social care in Dudley in 2011-12 and that you find this report informative and useful.

*Pictured below: Members of the Local Account Action Group: Bill Weston - chair for Action for Disabled people and their Carers (ADC) and Bill Bloomer - ADC.*





# Welcome

Welcome to the second annual report or 'local account' on Dudley's **adult social care services**. Here we report to local people on how we have performed from April 2011 to March 2012 in delivering quality adult social care and support. The section on page 23 gives a detailed account of what we said we would do and what we did. In this document we will also highlight the services we want to improve in the coming year.

We will be open about the challenges we face, share with you our achievements and be honest about the areas we need to target for further improvement.

In this year, the council spent £78.2 million on adult social care and support and services. We are committed to making sure that money spent helps people to have care and support that improves their lives, provides value for money and that choice and control for local people is at the heart of all we do, this is called **personalisation**.

Like all councils, we have been changing the way we deliver adult social care, this report reflects how well we have performed against the following **outcomes**:

- **Information and advice:** *having the information I need, when I need it*
- **Active and supportive communities:** *keeping friends, and family and place*
- **Flexible integrated care and support:** *my support, my own way*
- **Workforce:** *my support staff*
- **Risk enablement:** *feeling in control and safe*
- **Personal budgets and self funding:** *my money*

These outcomes provide the focus of our approach and are being delivered through the **Making it Real in Dudley** programme.



## Listening and learning

We said that we would consult more widely in producing this year's **local account**.

### What we did

We set up a **Local Account Reference Group** to steer all aspects of developing the local account. We have also talked with a wide range of community groups and people who use our services to make sure that local people are involved and can actively influence the **local account**.

As part of this year's local account we have launched our **Take Control and Get Involved** campaign ([www.dudley.gov.uk/takecontrolasc](http://www.dudley.gov.uk/takecontrolasc)). Here we asked people four simple questions about their experiences of receiving care and support; the results and experiences, of which, are included in this year's account and the key themes are shown below.



We have also taken account of the following feedback received from the first **local account**:

- 82% said the report was good to excellent in terms of giving an overview of adult social care activity and the real differences that have been made to people's lives in Dudley over the last year
- 96% said the report was easy to read
- Comments received suggest that the report needs to be balanced and be more open about areas the council is not doing too well on
- Some comments questioned the cost of producing an annual report
- Areas that people have said they want included for this report are:
  - Graphs and visual performance along with targets
  - More case studies of real people and their journey
  - Examples of complaints and compliments

### Tell us what you think - get involved

To tell us what you think of this report and to let us know how you would like to get involved in developing future reports please **complete the questionnaire** on page 31.



## Key challenges as identified by the reference group

- Over the next three years Dudley Council's budget is expected to decrease by 25%.
- At the same time, the budgets of partner agencies in the public, independent and voluntary sectors will come under increasing pressure.
- The initial Census figures released in July 2012 place Dudley's population at 312,000 of whom 58,200 are aged over 65. Dudley's population is estimated to reach 332,000 by 2030 of which 77,000 would be aged 65 and above.
- It is forecast that by 2015 there will be 4,365 people in Dudley suffering with dementia and that this will rise to 6,435 by 2030, a percentage increase of approximately 50%.
- In particular, we expect increases in the numbers of people with long-term conditions, especially those conditions that are related to age.
- Local people have high expectations of health and social care services, and they want services that will improve their quality of life.
- The need to provide good quality information and advice that is easily accessible and in a format that is the most appropriate to them is greater than ever.
- Over-night respite is a top priority for **carers**.
- **Personal budgets** may not cover all the support that people may want.
- There is growing demand for a wider choice of available services in the **voluntary and independent sectors**.
- Some local people don't want **personal budgets** and prefer that their support is managed directly by the council.
- Welfare benefit reforms may have an impact on individual's income.

### Recognising this, the council will:

- make sure that people are able to access safe, efficient and good quality care.
- make services more efficient to minimise the impact of reduced budgets.
- empower people who use services to become independent and not dependent on care services.
- support communities to help themselves.
- improve the individual's experience of care.
- make sure our services are better integrated with health and that we make the right connections with housing, leisure, transport and skills.
- have a clearer and more transparent assessment process.
- support a greater range of community and private sector support.



# 1. Information and advice:

## *having the information I need, when I need it*

### **What we have done and what difference have we made:**

Nearly 80% of Dudley people who responded to a national survey said that they find it easy to find information about adult social care services. This was the top score amongst other local authorities that we compare with as well as amongst the best response in the West Midlands.

We have worked in partnership with libraries to make sure information and signposting to a range of support and services is provided at a variety of public access points. We have also developed an 'introduction to adult social care' booklet which is now seen as the 'go to' document for all things to do with **adult social care**.

Our **Dudley Community Information Directory** has almost 3,000 organisations and groups registered and 9,000 people have used the directory to look for information.

Through the **essential guide to adult social care course** we are ensuring that all staff, partners and local people will have clear and consistent information on **personalisation** in Dudley, how it should be delivered and what to expect.

Our **Carer Aware** on line training course and resource continues to raise awareness of carers' rights and their needs.

We have developed a quality mark for care providers which are classed as **micro-services** (or small businesses). This has already begun to help the individual choose services based on quality.

We have completed a **peer review** project with Age UK Dudley to further make sure that our social care access service is providing good quality information and signposting.

We send information to over 2,500 carers through the Carers Bulletin.

### **Our priorities for improvement:**

#### **We will:**

- help more people than in the previous year to access support from a whole range of mainstream services and community support. We have set a target of 30% more people to be helped in the community and through other services.
- develop a self-assessment contact questionnaire and make sure it is linked to appropriate, up to date information and available on line, which will help to simplify and speed up the process.
- produce an easy to understand guide on how budgets are arrived at to be given to people when they are being assessed.
- make sure that the **Dudley Community Information Directory (DCID)** and [www.dudley.gov.uk](http://www.dudley.gov.uk) are two of the key means for people to access up to date information on the range of support available for people with different needs.
- put systems in place so that all public information is checked and updated annually.
- put in place a system so that all public information will go through a reader's panel prior to publication in order that it is easy to understand and free of jargon.
- improve how we feedback and demonstrate what we have done with consultation information and how it informs services.

*'We have had to actively seek out information and help which has an impact on us as we are trying to cope with a difficult situation on a daily basis. We need more pro-active support in this area.....'*

Comment from Adult Social Care Survey 2012

**We say**

*'We know that at the time of crises individuals and carers need appropriate information and support at the right time. Over the next 12 months we will be looking to improve the quality of information and support that we provide via our access team and other public access points including 'HealthWatch'.'*

*'You try but get told wrong number, advised to try another number, then its either wrong dept, not in today, only work certain days, it is a joke to ask this question'*

Comment from Adult Social Care Survey 2012

**We say**

*'This is not acceptable. We will be carrying out a review of the 'customer journey' to understand the barriers that people face to getting the right advice and support. We will then look to make sure that information at all access points is consistent and customer's enquiries are dealt with effectively at the first point of contact.'*

## *My story*

**Mrs L is 88 years old and continues to live alone, independently in her own home.**

She has no immediate family but remains vital and well. Mrs L had been feeling rather vulnerable due to her age and a recent fall. She was also feeling a little isolated and wasn't getting out and mixing socially, as much as she would have liked.

With the help of the **Living Well Feeling Safe** service Mrs L received a free home visit from the service which is a partnership service, headed by the council. The service offers practical home safety; security and wellbeing help and advice to older people, in their homes.

With some simple safety and security equipment, health and safety advice and tips, and practical help with getting out and gaining confidence has made a great difference to Mrs L's life.

Mrs L's **My story** can be viewed in full at [www.dudley.gov.uk/asc](http://www.dudley.gov.uk/asc) and follow the link to my story.





## 2. Active and supportive communities:

### *keeping friends, family and place*

#### **What we have done and what difference have we made:**

Through providing £3.32million of grants to voluntary and independent sector organisations we have helped to support up to 1,900 people to remain as independent as possible.

We have undertaken a '**Making it Real**' peer review with people who use services. The feedback has now been included in the **Making it Real in Dudley Action Plan**.

Our carers network support provides up-to-date and accurate information to 2500 carers on a whole range of care and community initiatives as well as putting carers in touch with self-help organisations.

Together, with Age UK Dudley, we hosted the Dudley Full of Life Older People's Festival which saw a month-long showcase of activities and services available to older people in Dudley. Over 1200 older people attended these events and as well as celebrating the positive contribution older people make to society the festival helped to 'connect' older people to activities and services which will help them maintain a sense of wellbeing and remain independent for longer.

We have initiated a pilot project for administration of **Direct Payments** aiming to stimulate the market and ultimately offer a diverse range of providers is underway.

#### **Our priorities for improvement:**

##### **We will:**

- look to develop a **time banking** service which will allow individuals across communities to volunteer their services (this may be decorating, driving, gardening for example). The time they spend volunteering will be 'banked'. The individual will then be able to then 'cash-in their time currency' and use it to recruit the services free (or at a low cost) of another volunteer.
- increase the number of people with learning/physical disabilities, mental health needs and their carers, in paid employment.
- work with transport and travel services to promote accessibility and access.
- allow people who use services to be central to all change and decision making activity in adult social care.
- help people to be supported within their community by people from their community.
- place people who use services and carers at the centre of our approach to service monitoring and review.
- develop the "**Dudley Gadget Gateway**" which will enable people to search for products, like any other retail site; with customer feedback and product comparisons.
- maximise **Digi-TV** as an important means to provide wide-ranging information direct to households through their televisions. We will also promote the **Dudley Community Information Directory**.

*'By using ring or ride to attend activity centres where we meet and have gentle exercises then after we share stories, talk to each other over cup of tea. These places help to keep in touch with outside world. Swimming, walking groups, out to dinner once a month as long as one can afford to pay for the occasion, and many other things which you get out of the house.'*

Comment from Adult Social Care Survey 2012



*'I don't go out alone because of my disability - all I do is stay at home, watch t.v. and read books. Socialising is a dream of the past.'*

Comment from Adult Social Care Survey 2012

#### We say

*'We will be working more closely with community organisations to improve the availability of local community support.'*

*'Direct payments enable me to buy the care as and when I require and allows me and my family to have some normality.'*

Comment from Adult Social Care Survey 2012

*'My wife has the support of two excellent carers for 24 hours each week and attends day centres for four sessions per week which gives me some time for myself and time to do household chores i.e. shopping, laundry etc.'*

Comment from Adult Social Care Survey 2012

## Case Study

### Mr V 'Getting involved and feeling useful again'

Mr V is 55 years old and is a wheelchair user as a result of spinal injuries, which left him severely disabled.

Mr V had begun suffering from depression and poor self esteem. He was not getting out much and had a limited social life. He was unable to work and longed to feel useful once again.

Mr V was able to begin attending **Queens Cross Centre** for adults with physical disabilities. He now regularly attends the centre. Here he has made full use of the facilities and developed a circle of good friends. **Queens Cross Centre** offers lots of facilities for people with physical disabilities and encourages people who attend to develop their skills and abilities in any area that they wish.

**Queens Cross Centre** also has a user led organisation called Disability in Action based at its premises. Users of the centre have formed the organisation and have become fully involved in the running of the centre and its facilities; they also offer a peer support, advice and guidance service to others with physical disabilities. Mr V has joined the organisation and helps with its operation.

Mr V now feels happy and useful, with a purpose to his life once again. He has a good circle of friends and colleagues at the centre. His personal life has also improved as his wife now has her own time at home and a break from being his carer.

Watch Mr V's **My story** video at [www.dudley.gov.uk/asc](http://www.dudley.gov.uk/asc) and follow the link to my story.



### 3. Flexible integrated care and support:

#### *my support, my own way*

#### **What we have done and what difference have we made:**

Dudley's **Dementia Gateway** Service provides tailored care and support. The service's core objective is to make a real, positive difference to the lives of people living with dementia. No one with the disease in the borough should feel alone. There is ongoing, clear and coordinated support from diagnosis until the end of life, always aiming for the very best quality of life.

Over 8,000 older, disabled and vulnerable people in the borough now benefit from technology provided by the Dudley **Telecare** Service which allows them to remain independent in their own homes as well as providing peace of mind.

Dudley **Telecare** Service has also been successful in becoming a member of the **Telecare** Services Association Roll of Recognised **Telecare** Service Providers .

Over the last year we have increased the availability of housing for the over 55s by providing the first two extra care housing schemes in the borough. These schemes, which are provided by our partner Midland Heart, have provided homes for over 200 older people. Residents have reported 100% satisfaction levels. The schemes offer a mix of one and two bedroom apartments for rent or sale and include communal facilities such as a restaurant, shop, craft and activity suite a well-being facility as well as care facilities should individuals need it.

*'My quality of life has gone from 'very bad' to 'good' due to the care the council has provided through therapy services. Life was unbearable before you stepped in !'*

Comment from Adult Social Care Survey 2012

*'I can now have who I want supporting me and coming when I want them to'*

Comment from the learning disability review

The **Living Independently Team (LIT)** has helped many people to remain independent or regain independence following a period of illness. In 2011-12 almost half of the people receiving **reablement** support through **LIT** had no ongoing care needs. For those people who needed ongoing support, 69% needed less help at the end of their **reablement** and 25% needed the care to be maintained. For those who needed less help greater independence was seen around bathing/washing (46% needed less help), using the toilet (65%), dressing (44%) and making meals (32%).

We have started a review to look at the services provided for people with a learning disability and will take account of the voices of people with learning disability, their family carers and other stakeholders. The outcomes of the review will be reported in 2013.

Eighty five people with very complex needs are currently being supported by the Council, many outside the Borough and at high cost. Alternative models of care and support within the borough are being explored, ensuring improved contact with families and potentially more effective use of shared resources.

We also manage a disabled person 'blue badge' parking scheme which supports over 20,000 individuals in the borough.

## Our priorities for improvement:

### We will:

- provide all ongoing, or long term, social care support through a personal budget.
- make sure that regardless of eligibility everyone has access to **Telecare** and equipment.
- review all existing assessments and process associated with the delivery of social care. We will reduce duplication, and make sure information is recorded only once and look to simplify the process.
- give each person who is awarded a **personal budget** formal paperwork detailing the amount of their award and how this was calculated.
- make sure each young person who receives adult social care support has a positive move into adult social care. We will also make sure that each person's **support plan** will tell them how any support will increase someone's personal, social and support networks. We will start by introducing people to their neighbours.
- use **market position statements** to show our progress in commissioning (how we purchase services) to meet demand. This will increase the variety and availability of care solutions in the borough.

### Case Study

#### **Miss E is in her early 30s and has learning disabilities and epilepsy.**

She had always lived with her parents but wanted to live independently with her partner.

Social work staff helped arrange for Miss E and her partner to move into a new apartment within a new build scheme of council supported living apartments.

The apartment is within a small low rise block and has a team of dedicated support workers on hand at all times. The support staff help tenants within the scheme with things such as daily living skills, household management, cooking, money management, transport, shopping and developing social skills. The support offered to each person is unique to them and their own needs.

Miss E also has a range of alarms provided from **Dudley Telecare Service**. A pendant alarm (worn around the neck), a falls detector and an epilepsy sensor (placed under the mattress for use during the night) all provide her and family members with the peace of mind that help can be summoned at any time of day or night.

Miss E is thrilled that she is now able to live an independent life with her partner, in her own apartment. Her family are also reassured that she is safe and secure, with help on hand as and when she needs it. They are also delighted that she is able to develop a full life, living in the wider community.

Watch Miss E's **My story** video at [www.dudley.gov.uk/ascasc](http://www.dudley.gov.uk/ascasc) and follow the link to my story.



## 4. Workforce:

### *my support staff*

#### **What we have done and what difference have we made:**

Our older people and people with physical and sensory disabilities services have been changed in line with people's experiences or journey through the adult social care system. This has brought about a greater degree of consistency in relation to individual care.

We have developed and trained over 600 staff from both the council and other organisations, including GP surgeries and libraries, in 'carer aware' and we are now also rolling out the **essential guide to adult social care** which will mean staff will provide better over-all support to individuals.

We have helped people to set up small businesses (**micro providers**). These give people a wider choice of how to use their **personal budgets** to take part in meaningful activity.

#### **Our priorities for improvement:**

##### **We will:**

- through an initial workshop and subsequent review programme make sure **direct payment** support organisations provide applicable consistent information. This will allow the individual to make the right choice when determining their care and how to best spend their **personal budget**.
- change our contractual position to help people with council-managed budgets to have the same degree of self direction as people in receipt of **direct payments**.
- promote and build upon the existing **personal assistant** directory and support available for people who employ their own **personal assistant** to provide care and support.
- in partnership with **Dudley Council for Voluntary Service** roll out an innovation fund to stimulate and grow new and flexible personalised care and support solutions.
- provide active support to increase the numbers of small care providers or **micro providers**. We will encourage take up of the Gold and Silver Quality Mark, a **quality assurance** rating.
- make sure that all staff know what **personalisation** is, how it is being implemented and how they help to develop the process. This will form part of the **making it real** programme.





## Case Study

### Dudley dementia service receives national award

Dudley Borough's new approach to dementia care has been recognised as it recently scooped a prestigious care award.

The Great West Midlands Care Awards recognised the innovative working and personalised care approach of Dudley's new Dementia Gateways. The gateways took first place in the 'Putting People First' award category, which acknowledges services which put people and their own individual needs at the very heart of their work.

Dudley Council, working in partnership with [Dudley Clinical Commissioning Group](#) has developed an innovative, integrated approach to the diagnosis, care and support offered to people with dementia, as well as to their carers and families.

There are three new dementia gateways located across the borough which provide care and support for those affected by dementia, throughout all stages of the illness. Through attention to the individual needs and wishes, the gateways promise tailored care, as well as providing extensive support and advice for families and carers.

The gateways aim to make sure those affected by dementia can enjoy life to the full, and offer a wide range of sessions and therapies, from crafts and memory exercises to gardening. There are also day sessions available to provide a break for family and carers.

The dementia gateways are located at Brett Young Centre, Halesowen - call 01384 813600; Brettell Lane Centre, Brierley Hill - call 01384 813315; Roseville Centre, Coseley - call 01384 813645.



## 5. Risk enablement:

### *feeling in control and safe*

#### **What we have done and what difference have we made:**

Dudley Council has collaborated with a number of West Midlands councils to develop new 'safeguard and protect procedures'. Launched in July this new procedure will help to strengthen the borough's safeguarding arrangements of vulnerable adults.

Over 550 staff received training on helping people to live safely in their communities and avoid financial exploitation. In addition 198 people who may themselves be vulnerable were also provided with this information and support.

In June 2011 an the Dudley Safeguarding Adults Board together with staff from Dudley Group of Hospitals provided information to visitors and patients about adult safeguarding and mental capacity. The aim was to inform patients about the importance of safeguarding.

In the last year The Dudley Falls Service carried out 727 falls risk assessments for older people. Of these 49 people completed a 20 week stability programme to improve their balance, strength and confidence with measurable improvement. We also provided equipment to 78% of people we visited. Evidence shows that 90% of those people who received support from the service had not had a further fall (after three months) and their risk of future falling had been reduced.

The council's Community Equipment Service, such as grab rails, washing aids, etc. has delivered increased amounts of equipment with 66% of all equipment being delivered within 1-3 days, and 88% within 7 days from the day of request. This has helped more people to remain independent and safer for longer.

#### **Our priorities for improvement:**

##### **We will:**

- introduce '**Quality of Life Standards**' in to contractual arrangements with social care providers and make sure **support plans** are supportive of the standards.
- make sure that **support plans** help people who use services to understand risk in relation to opportunities for independence and quality of life.
- allow everyone receiving ongoing, or long term, social care support to receive a **direct payment** so they themselves can 'purchase' their care.
- carry out a **safeguarding** awareness scheme across the borough.
- provide information throughout the customers' experience detailing what they should expect and how they can challenge if things go wrong.

*'My 'Sayphone' gives me a sense of security community alarm makes me safe'*

Comment from Adult Social Care Survey 2012

## My story

### Mr F 'Feeling safe and really enjoying life'

Mr F is 85 years old and has lived in a flat in one of the council's sheltered housing schemes for the past 20 years. He moved there when caring for his wife and when he was feeling isolated and concerned about his previous home's safety and security.

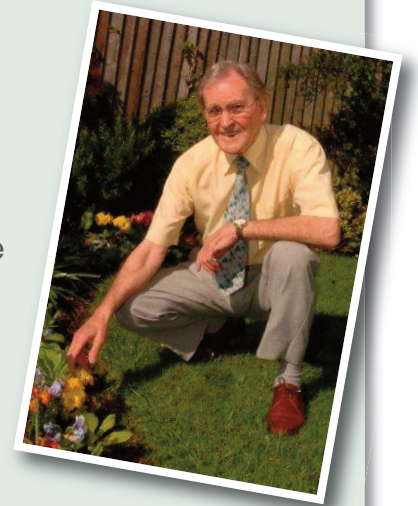
Sheltered housing staff supported Mr F in making the choice to move into one of the sheltered housing schemes. Once living in the scheme, the scheme manager oversees all tenants' wellbeing, making sure everyone is happy and well. They also deal with any emergencies and can help develop further support plans if this extra support is needed.

All sheltered housing schemes are safe and secure, with a door entry system which is linked to an alarm system, ensuring no intruders. Communal facilities such as gardens, a tenants lounge and specialist bathing facilities are all provided, schemes are always warm and cosy and a vibrant social life is encouraged and supported by staff.

Mr F has loved his time living in the scheme. He feels safe and happy, enjoying a full social life and reassured that help is always on hand if he needs it.

Mr F feels that he has the best of both worlds - peace of mind and security, his own front door and private space combined with a real community feel.

Watch Mr F's [My story](#) video at [www.dudley.gov.uk/as](http://www.dudley.gov.uk/as) and follow the link to my story.





## 6. Personal budgets and self-funding:

### *my money*

#### **What we have done and what difference have we made:**

Welfare benefits officers have brought £2.67million into the borough in previously unclaimed benefits and so have helped over 1300 individuals increase their income.

We have also improved **outcomes** for independence for people following **reablement** (a period of up to 6 weeks tailored support to help people get back on their feet).

The number of people with a learning disability whose care is provided through a **direct payment** has increased. This has helped to improve people's opportunity for control although we recognise we need to do more about making sure there is a suitable amount of alternative and flexible care solutions.

A series of public information leaflets have also been produced to help people understand how they can arrange and pay for care in their own homes or in a residential or nursing home setting.

#### **Our priorities for improvement:**

##### **We will:**

- provide all ongoing social care support through a **personal budget**
- allow everyone receiving ongoing social care support to receive a **direct payment**
- use the **Dudley Community Information Directory (DCID)** and **peer reviews** to introduce a customer-driven quality ratings system that will help people to make informed choices about their support.
- give each person who is awarded a personal budget formal paperwork detailing the amount of their award and how this is calculated. **Support plans** will detail any restrictions on what people can spend their budget on.
- change our contractual position to help people with council-managed budgets to have the same degree of self direction as people in receipt of **direct payments**.
- make sure any contractual agreement with a provider allows a person to direct their support within the value of their budget.
- develop relationships with external care providers to make sure that they are offering value for money and quality

*'there's not enough money in my budget to do all the things I would like to do.'*

Comment from the learning disability review

*'I feel constrained sometimes, I want to be able to arrange the services to meet my growing needs but finance seems to dictate what I really get.'*

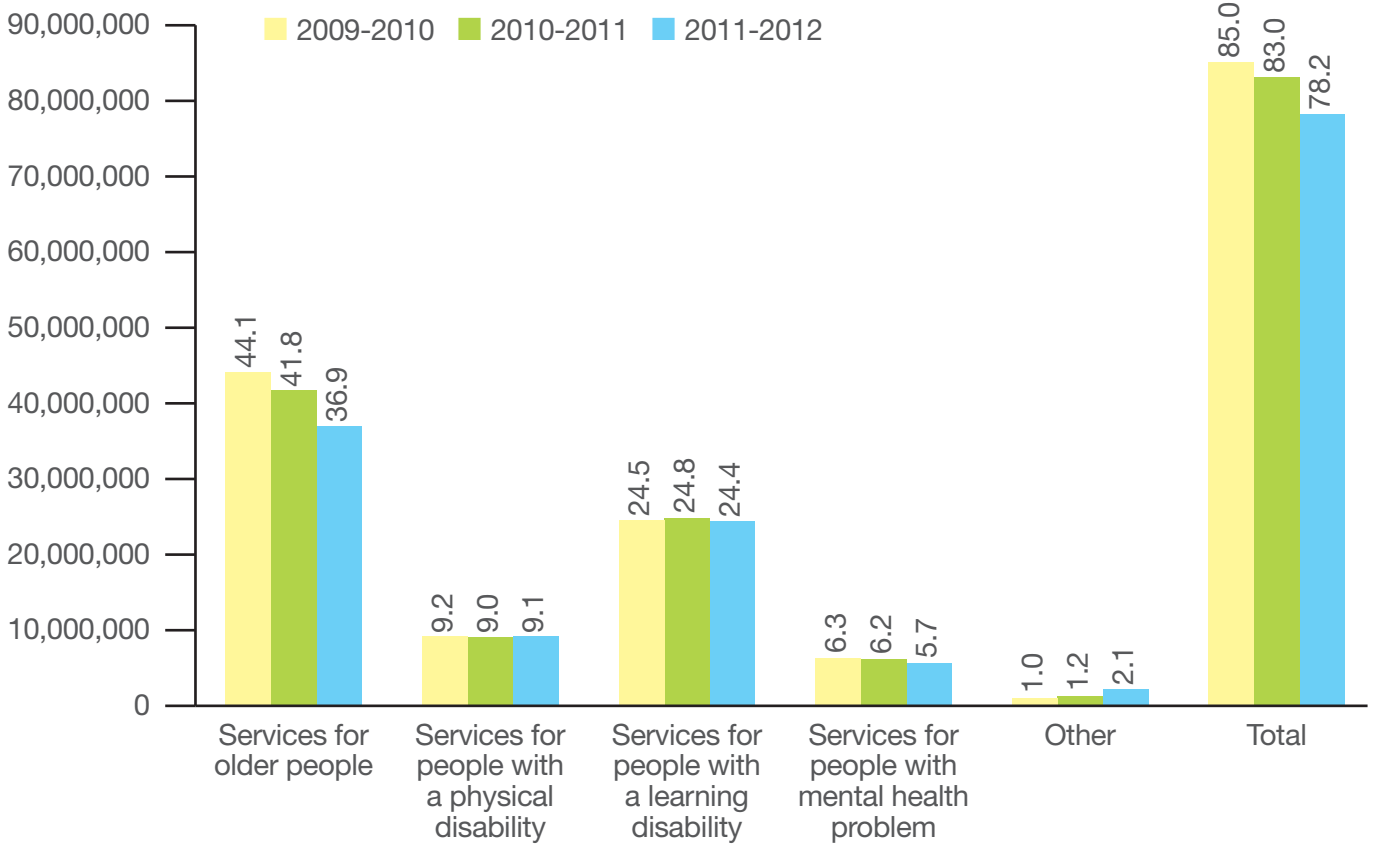
Comment from Adult Social Care Survey 2012



# Key facts and figures 2011-12

## Adult social care budget

In 2011/12, the council spent £78.2 million on care, support and services.

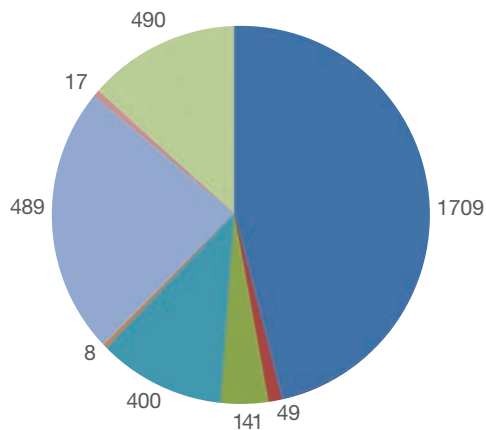


There has been a considerable reduction in the budget since 2009. The council has identified savings for **adult social care** of £13m during 2009 to 2012. This is due to changes in how funding has been received. Despite this the council has continued to provide high quality services. It has risen to this challenge, delivering fair and efficient care where resources are matched to people's need.

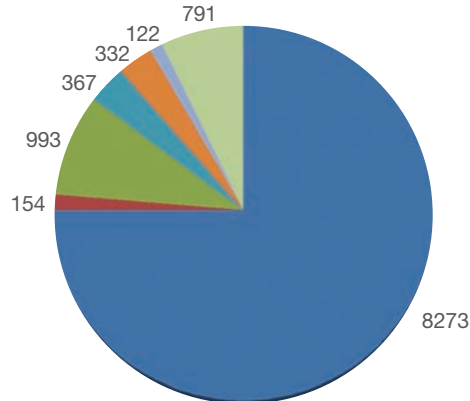
## Numbers of people supported

The number of people supported by adult social care has increased by 4.4% from 14,086 in 2010-11 to 14,745 in 2011-12.

Total number of people supported aged 18 - 64



Total number of people supported aged 65 and over



- physical disability/frailty and/or temporary illness
- Hearing impairment and deaf
- Visual impairment and blind
- mental health
- dementia
- learning disability
- Substance misuse
- Other vulnerable people

## Adult social care and support - key facts

- ☹️ 38,248 calls were handled by our **access to adult social care team**
- ☹️ 116 adult **safeguarding** investigations have been completed
- ☹️ 76 homes provide residential or nursing care to older people, people with learning disability and people with mental health needs
- ☹️ 1,556 people receive **home care**
- 😊 3,632 (87.2%) people had an **assessment** completed within four weeks of their contact.
- 😊 3,389 (94.9%) people started a service within four weeks of completing their **assessment**
- ☹️ 3,376 people and 420 carers received social care through a **direct payment** or personal budget. We are keen to improve on this figure.
- ☹️ 46 adults with a learning disability are in paid employment with the support of DMBC job coaches. We had set a target of 58 people and will be working more closely with private companies to achieve greater improvement in the future.

*'With my new personal budget which has not yet been agreed, the only going out time allowed is for shopping only. I am not given any time for doing my voluntary work which is important to me, and also no time for travelling to see my family.'*

Comment from Adult Social Care Survey 2012

### We say

*'We will be working closely with people to make sure that personal budgets are used to achieve individual's own outcomes. These outcomes will not just be focussed on care and support. We hope that this will be achieved by a combination of both personal budgets, creating more innovative and flexible solutions in the market and utilising what's already out there in communities.'*

- ☹️ 155 (11.3%) adults receiving **secondary mental health** services were in paid employment an improvement on the 120 (7.3%) in 2010-11.
- 😊 697 (76.8%) adults with a learning disability were living in their own home or with their family.
- 😊 1,098 (80.3%) adults in contact with **secondary mental health** services were living independently with or without support. This was an improvement on 2010-11 when 66.1% were living independently.
- 😊 Of all **adult social care** survey respondents 67.4% expressed that they were either extremely satisfied or very satisfied with the care services that they received.

*'Without the care I could not survive on my own, which is so important to me.'*

Comment from Adult Social Care Survey 2012

- 😊 Of all survey respondents 79.3% expressed that they found it either very easy or fairly easy to find information and advice about support, services or benefits in relation to adult social care.

*'Dudley Council have always been easy to find information about and the services they offer. A good website and Dudley Council Plus all help..'*

Comment from Adult Social Care Survey 2012

- ☹️ Of all survey respondents 62.1% expressed that they feel safe.
- 😊 78.9% expressed that care and support services helped them feel safe.

*'I feel happy to receive help, it makes me feel safe and secure.'*  
 Comment from Adult Social Care Survey 2012

- 😊 In total 499 major adaptations were started. 10,964 items of equipment and adaptations from a total of 12,538 were delivered within seven days
- 😊 A total of 853 clients received a **reablement** service, at a rate of 16 clients per week. During the period the average length of time for individuals in a **reablement** service was 4.6 weeks
- ☹️ The target of achieving on average 26 clients (per week) referred to a **reablement** service was not met. As part of the **Making It Real** programme we will be supporting more people to be reabled to live as independantly as possible.
- ☹️ In 2011-12 we received 209 complaints compared to 223 the previous year and 134 in 2009 - 10. The details, including the top five issues of complaint can be seen on the following page.

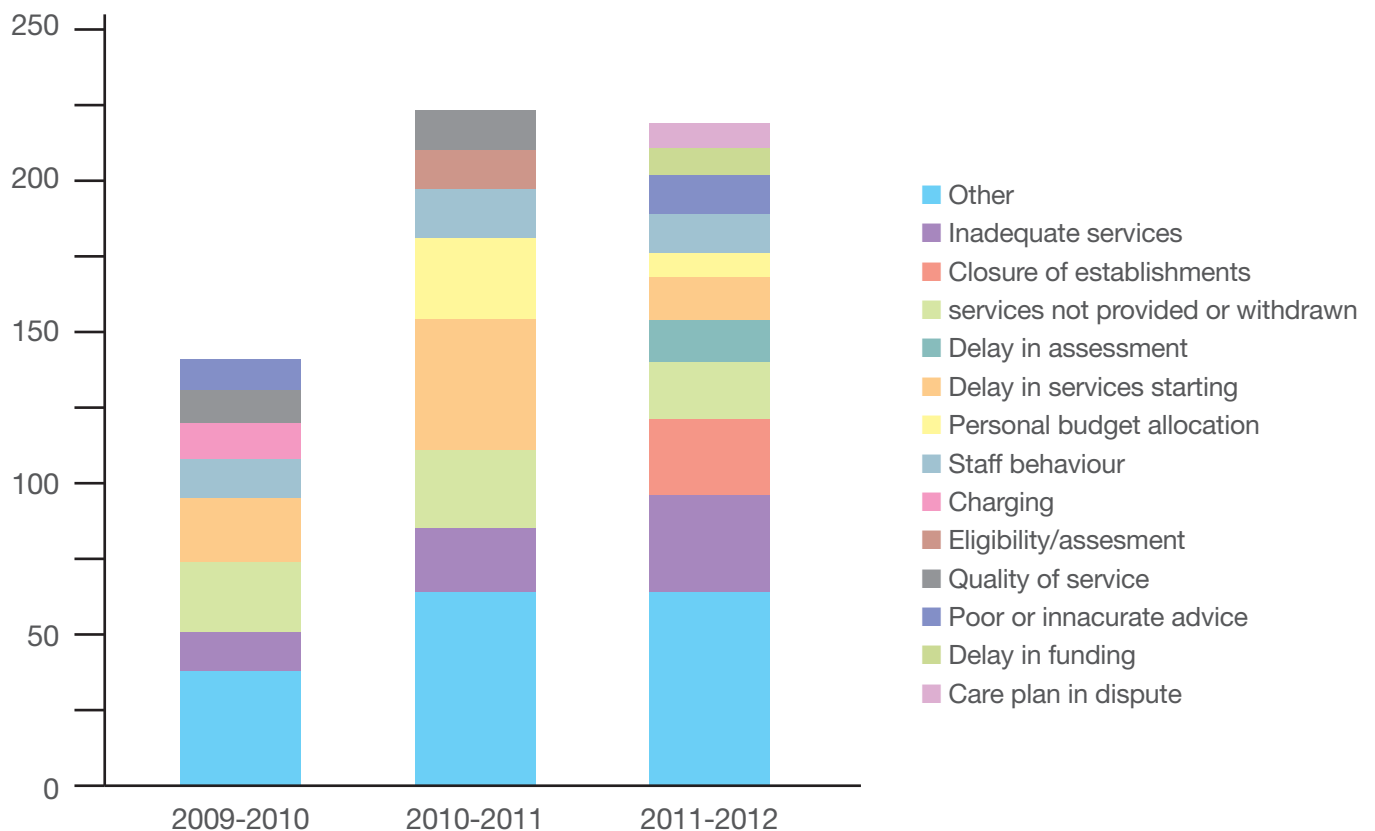
### Complaints

We have tried to make it as simple as possible for the public to make a comment, compliment or complaint about any service related to adult social care and support.

#### Learning from complaints

We review complaints so that changes are made to the way we work to stop the complaint happening again. We have made a number of changes to our systems and procedures as a result of complaints.

This table shows the types of issues that people have complained about in the last 3 years.



We will continue to analyse all feedback received the findings from complaints received will help to improve our services and form part of our priorities for the future (see pages 7-18).

## A local account based on real evidence

All the information contained within this account including the detail on what we have achieved and what we want to improve is based on clear evidence. The diagram below illustrates the variety of ways we have sought and collated data to evidence our actions and inform the detail of this account.

### Evidence used for the local account 2011-12



This evidence can be accessed at [www.dudley.gov/localaccount](http://www.dudley.gov/localaccount) or by requesting hard copies from Shelley Brooks on 01384 812418.

## Feedback:

### *on the Priorities identified within the 2011 Local Account*

Within the 2011 **local account** we identified a number of priorities for improvement. The table below shows the progress we have made in achieving these priorities.

What we said we would do	What we have done
Make sure the information we produce is clear, helpful and free from jargon. Where possible the quality of information will be tested by local people or people who use the services before being published.	A <b>readers' panel</b> has been set up to make sure all information is tested before publication, further work is required to develop the panel. All learning disability information leaflets are checked by <b>Dudley Voices for Choice</b> for suitability. A questionnaire has been produced for Dudley residents to ask them if they consider the safeguarding leaflet clear
Increase the number of staff who complete the <b>Carer Aware</b> course, which means that more staff are aware of carers' issues, rights and services to support them.	Across the council over 600 staff have completed the course as well as staff from other agencies and GPs helping them identify and support carers with accurate and timely information about their rights
Develop an online banking facility to help people manage their personal budgets that some individuals receive to enable them to arrange the care they need.	We have begun to model this facility. In addition we have started to develop an online assessment tool. Further development of these services has now been incorporated into the <b>Making it Real in Dudley</b> Action plan
Improve the quality of information about adult social care on the council's website: <a href="http://www.dudley.gov.uk">www.dudley.gov.uk</a>	The adult social care website <a href="http://www.dudley.gov.uk/asc">www.dudley.gov.uk/asc</a> has been refreshed to reflect the <b>customer journey</b> . The Adult <b>Safeguarding</b> Board website has been updated and includes information about using the internet safely, serious case reviews, safer recruitment leaflets and advice to people using personal assistants on how to employ people safely.

What we said we would do	What we have done
<p>Make sure services work better together so that more people are helped at an early stage, either before they have a social care problem or to stop the problem getting worse.</p>	<p>The First Responder pilot, a partnership initiative with WM Ambulance Service makes sure an appropriate response for people who fall and are on the <b>telecare</b> call system. Council staff have been provided with first responder training enabling them to carry out telephone triage with people who have fallen and for staff to visit, verify the assessment and if safe to assist the person who has fallen back on their feet. This support had previously been provided by ambulance crews. At present around 12 people a week are being supported and this frees up ambulance crews to respond emergency calls where danger to life is greater.</p> <p>Three <b>Dementia Gateways</b> fully operational. The gateways work in partnership with primary care and have developed links with the Trust.</p>
<p>Provide better quality information to local people on how personal budgets can be used and reduce the waiting times for assessments.</p>	<p><b>Direct payment</b> literature has been updated and the <b>Dudley Community Information Directory</b> is being extensively utilised to help people choose and determine their care arrangements. Further work is required reduce waiting times for assessments.</p>
<p>Make sure that services are providing value for money and succeeding in keeping people out of hospital.</p>	<p>In Dudley we operate a primary care response in co-ordination with nurses and GP's where a same day response and provision of, often short term, care helps people to remain at home rather than be admitted to hospital.</p> <p>In addition we are moving towards a multi-disciplinary integrated team based in A &amp; E to assess people's needs at point of arrival and provide care, where appropriate, to avoid unnecessary admissions.</p>
<p>Work with local organisations to improve the health and well being of local people.</p>	<p>The <b>Living Well, Feeling Safe</b> events taking prevention out to the community have been very well received and over 1,000 people have directly received information and/or additional services.</p> <p>The Dudley Adult <b>Safeguarding</b> Board has provided information to community centres on how to provide a safe service to vulnerable people accessing their resources. The <b>Safeguarding</b> board has also provided training to supported living and voluntary agencies to promote living safely in the community.</p>
<p>Continue to develop our <b>Dementia Gateways</b>.</p>	<p>We have successfully rolled out our <b>Dementia Gateways</b> in three localities across the borough. The service has been well received and an independent review has been commissioned, the results of which will be available in 2013 and will aid further improvements.</p>

What we said we would do	What we have done
<p>Give greater focus on developing services to prevent people needing long term support by reviewing and transferring some of our clients home care packages to external providers where appropriate widen the range of care providers and services available.</p>	<p>The result of this process has been that our internal care staff have been able to concentrate on short term emergency care, provision of care to enable rehabilitation and care provision where the circumstances are both complex and fragile. The transfer has also achieved value for money through the provision of a more cost effective and efficient provision of long term care.</p>
<p>Complete the modernisation of day services for people with learning disabilities.</p>	<p>Following an external Joint Review in 2008/9, a change programme for delivering day activities was carried out. This reflected the national strategic direction as outlined in the government's Valuing People and Valuing People Now. This resulted in the closure of two large day centres and the transformation of a third into a hub for people with the most complex needs. Those people whose needs were not complex are now in receipt of a <b>personal budget</b> to meet their assessed needs.</p>
<p>Make sure that more people with a learning disability are engaged with the council and other agencies. We must also do more to capture the views of people who use services, so that we have a better idea of which services are delivering good outcomes and value for money.</p>	<p>The development of a People's Parliament will help to improve engagement with the council and other agencies.</p> <p>Developing feedback forms for all people who use specialist learning disability services.</p> <p>Dudley Voices for Choice work now works with commissioning services to monitor quality of council contracts.</p>
<p>During 2012 review the improvement plan for the <b>Learning Disability Partnership Board</b>.</p>	<p>We have commissioned independent organisation 'Equip4Change' to review the operation of the partnership board. The findings of this review will be fed into the <b>Making It Real action plan</b> for Dudley.</p>
<p>Support people who employ their own care staff to make sure they are able to apply <b>safeguarding</b> standards to their contracts.</p>	<p><b>Direct payment (DP)</b> recipients now have a 'Keeping Safe' factsheet and leaflet and a factsheet to advise about <b>safeguarding</b> when employing a <b>personal assistant</b>. We strongly recommend that all DP recipients have their PA's <b>Criminal Records Bureau (CRB)</b> checked, and we insist on this if there are children under the age of 16 in the house. A number of support organisations are in place to help people carry out CRB checks.</p> <p>We also encourage <b>Direct Payment</b> recipients and their PA's to attend the half day awareness training on adult <b>safeguarding</b>, and if there are children in the house child protection training has to be undertaken within the first six months of employment, there are no charges for either of these courses.</p>



What we said we would do	What we have done
<p>Raise awareness of safeguarding issues in all communities.</p>	<p>Work has been carried out with local colleges to make sure adults attending are aware of safeguarding issues relating to vulnerable adults.</p> <p>A <b>stakeholder</b> event for hate crime has been held within Dudley to gather information on referral streams and to raise profile of <b>third party</b> reporting centres and safe places a project now developed within Dudley.</p> <p>The Dudley Adult <b>Safeguarding</b> Board has provided information to community centres on how to provide safe services to vulnerable people accessing their resources.</p>
<p>Better understand how people become victims of abuse and as such help to improve people's experiences, well-being and services. Work with carers and those they care for to support them with safeguarding and well-being issues.</p>	<p>A further analysis of the experience of 10 victims has been completed to make sure that the service remains responsive to people's needs.</p>
<p>Provide training on safeguarding awareness to a wide range of services available within the borough including leisure services, benefit services etc.</p>	<p>A training programme has been offered to a wide range of services.</p> <p>This programme has been widened with specific training having now been developed with trading standards and training to residential and nursing home on the <b>Deprivation of Liberty Safeguards</b> and the <b>Mental Capacity Act</b>.</p>
<p>Strengthen our engagement framework to make sure people who use services, carers and <b>stakeholders</b> are involved in the design of services from the beginning as well as in decisions that may affect them or their local communities.</p>	<p>We have carried out, with the national <b>Ageing Well Programme</b>, an initiative to understand the life stories and journeys of older people in two diverse and distinct localities. A number of engagement activities have been held to understand how individuals make their connections and receive support. The findings of this study will inform the <b>Making it Real Action Plan</b>.</p>
<p>Update our vision for adult social care which will focus on the impact services have on people, their <b>carers</b>, the community, the local economy and the council.</p>	<p>The Adult Social Care Strategic Plan has been produced and this has now been incorporated into the <b>Making it Real in Dudley Adult Social Care Programme</b></p>



## **Adult care assessment**

The formal assessment of care needs which is done by a **social worker**.

## **Adult social care**

Adult social care covers a wide range of services or help, provided by local authorities and the independent sector to people either in their own homes or in a care setting

## **Ageing Well Programme**

Funded through government and the local government agency, the national ageing well programme helped to support local authorities and organisations to develop innovative ways to support the ageing population <http://www.local.gov.uk/ageing-well>

## **Carer aware**

An online course and resources developed by Dudley Council that helps everyone understand carers and their rights. [www.dudley.gov.uk/careraaware](http://www.dudley.gov.uk/careraaware)

## **Carers**

Carers are people who look after a relative, neighbour or friend of any age who has a long term illness, disability or is older or frail.

## **Commissioning**

A structured way of deciding how and on whom public money should be spent and how providers are chosen and purchased

## **Criminal Records Bureau (CRB)** which is now called the Disclosure and Barring Service (DBS)

The CRB is an executive agency of the Home Office set-up to help organisations make safer recruitment decisions. CRB checks are carried out before people are employed to carry out care and support services

## **Customer journey**

This is a term that describes all the interactions and steps an individual goes through in order to receive care and support.

## **Dementia Gateways**

Dudley borough residents are benefiting from a new approach to the care and treatment of people with dementia, as well as support given to carers and family members. Anyone worried about dementia, diagnosed with the condition, their families or carers can ask for help from the borough's three dementia gateways. Staff from Dudley Primary Care Trust and the council's adult social care team are based in the gateways. (see page 15)

## **Deprivation of Liberty (DOL) Standards**

The Mental Capacity Act Deprivation of Liberty safeguards were introduced into the Mental Capacity Act 2005 through the Mental Health Act 2007 and are a series of **safeguarding** standards that apply to anyone who is aged 18+, who suffers from a mental disorder or who lacks capacity to give informed consent for their care and for whom deprivation of liberty is considered after an independent assessment to be necessary in their best interests to protect them from harm.

## **Digi TV**

A free 24 hour service council contact service available through their TV screen. The system allows people with digital television packages (Sky or Virgin Media) or with Nintendo Wii games consoles or internet enabled mobile phones, to access services 24 hours a day, seven days a week.

## **Direct payment (DP)**

A direct payment is money given to an individual to pay for their care instead of social services providing the care directly

## **Dudley Clinical Commissioning Group (CCG)**

Dudley CCG was formed in July 2010 by a group of local GPs and other health professionals to take over from the Primary Care Trust in April 2013, and will be responsible for the purchasing of healthcare for people living in the Dudley borough, this process is called commissioning.

### **Dudley Community Information Directory (DCID)**

[www.dudleyci.co.uk](http://www.dudleyci.co.uk) is an online directory that provides everything that's going on in the community including care and support services as well as a personal assistant directory

### **Dudley CVS**

The Council for Voluntary Service (CVS) is an independent local voluntary organisation that exists to support, promote and develop local voluntary action. Dudley CVS acts as an umbrella body for the community and voluntary sector in Dudley.

### **Dudley Gadget Gateway**

The Gadget Gateway website helps people to find out more about assistive technology products and services that can help them to maintain independence. [www.gadgetgateway.org.uk](http://www.gadgetgateway.org.uk)

### **Dudley Voices for Choice**

A self advocacy not for profit service for people with learning disabilities. They work for and with people with learning disabilities to help them become more independent. [www.dudleyvoicesforchoice.co.uk](http://www.dudleyvoicesforchoice.co.uk)

### **Essential guide to adult social care**

In 2012 Dudley launched the essential guide to adult social care. It is an online training course and resource that informs both the citizen, staff and stakeholder the basics of adult social care and personalisation. [www.dudley.gov.uk/essentialguideasc](http://www.dudley.gov.uk/essentialguideasc)

### **FACS Criteria Government guidelines**

Fair Access to Care Services is a way to see if you have a right to social care support services paid for by the government (through the local Authority)

### **Falls Service**

The Dudley Falls Service carries out home visits for people aged over 65 who have fallen or are concerned about falling. With the help of equipment, aids and /or therapy we help to provide further falls.

### **HealthWatch**

HealthWatch Dudley, a government funded organisation, will be an independent consumer champion created to gather and represent the views of the public in Dudley for all aspects of health and social care. It will also offer signposting and advice services to patients and people who use social care services. It is due to start operating from April 2013.

### **Home care**

Home care, (also referred to as domiciliary care), is health care or supportive care provided in the patient's home, such as washing, dressing, etc.

### **Learning Disability Partnership Board**

A group of people made up from different organisations such as social services, health, advocacy, Connexions, Mencap, housing, leisure getting together with people with learning disabilities and family carers. Their job is to put things in place to improve the lives of people with learning disabilities.

### **Living Well Feeling Safe**

The Living well, feeling safe scheme is a partnership scheme, offering older people living across Dudley borough, practical safety, security and wellbeing advice, in their own home.

### **Local Account Reference group**

Made up of a number of people who use local social care services or people who care for someone else who does. Includes representatives of groups e.g. Action for Disabled People and Carers, Disability in action, Voices for Choice; a carer representative and some individuals with an interest in social care and who responded through Adult Social care survey to take part in further consultation.

### **Making it Real**

We have developed a Making it Real in Dudley program which will set out how we will achieve personalisation in adult social care. This programme is directly aligned to the national principles as set out through a cross sector partnership called Think Local Act Personal.

The council has developed with its partners, the Making it Real high level action plan.

The plan details each of the six themes from Making it Real, demonstrating what needs to happen to enable the "What we wants" of people who use services and carers to be achieved.

### **Market position statements**

Central to the use of improved market intelligence is the development by the local authority of a market position statement (MPS) - which in effect says what is already available, what is in development and what are the gaps in terms of availability of services and how we are going to meet the demands of people requiring adult social care support.

### **Mental Capacity Act**

See deprivation of liberty standards

### **Microservices**

Micro services are small health and social care services and can help people who need support to have real choices about what type of services they purchase with their personal budget. Over the last three years the micro services provider has been helping small micro-enterprises develop.

### **My Story**

The term used in Dudley to describe case studies of 'real people' telling their experiences of adult social care [www.dudley.gov.uk/asc](http://www.dudley.gov.uk/asc) and follow the link to my story

### **Outcomes**

A sentence that says what an individual is trying to do to, and what can be done, to make an individual's life better.

### **Partner agencies**

Partner agencies can be companies not for profit organisations, charities, public sector organisations such as other local authorities, the Police, fire service etc who work together to achieve a common goal.

### **Peer review**

Peer review is a process used for checking the work performed by one's equals (peers) to make sure it meets specific criteria. In this case the **Making it Real Peer Review** was carried out by people who use services to evaluate how successful personalisation is being delivered in Dudley.

### **Personal assistant (PA)**

A personal assistant is someone that is employed by an individual to help the individual achieve their agreed outcomes. This may be in the form of providing hand on personal care or it may be help with shopping or accompanying the individual to a social event for example.

### **Personal budget**

An amount of money which is made up from social care following assessment.

### **Personalisation**

Personalisation means recognising people as individuals who have strengths and preferences and putting them at the centre of their own care and support.

### **Quality assurance**

Quality assurance is a process-centred approach to ensuring that a company or organisation is providing the best possible services.

### **Quality of Life Standards**

A series of standards that set out the minimum standards for people in relation to receiving adult social care and support.

### **Queens Cross Centre**

The council's own support centre for adults with physical and/or sensory disabilities is called Queens Cross Network and is located on Wellington Road in Dudley.

### **Reablement**

Reablement is short-term support designed to give older people or people with disabilities the confidence to manage as many daily living tasks as possible on their own and regain independence.

### **Readers panel**

The current readers panel is made up of members of the older people's forum has been set up to ensure all information is tested before publication to ensure that the information is written in plain English and makes sense.

### **Resource Allocation**

A way for the local authority to work out what each person with an assessed social care need can have (in terms of a personal budget) to meet their needs.

## Safeguarding

Safeguarding is a term that is used to explain how we develop measures to protect vulnerable adults in the borough from abuse, ill-treatment and exploitation. Abuse can take many forms such as physical, sexual, emotional, neglect or financial, and can take place in many different settings.

## Sayphone

The SayPhone is an 'at home' community alarm unit which provides peace of mind to the individual and families. Linked to the control centre via the phone network the say phone provides the individual with 24 hour support if they need it. The sayphone is classed as **telecare**

## Secondary mental health services

These are specialist mental health services provided usually by a Mental Health Trust. Services include support and treatment in the community as well as a range of in-patient services.

## Self directed support

Support for people who are assessed as needing social care and this can be described as

- Doing a supported assessment
- Knowing how much money an individual can have to spend on their needs
- Doing a support plan and agreeing how the individual will spend the money
- Having this signed off by the council and agree how the money will be spent
- Putting the plan into action
- Having a review to talk about the plan and how the individual is getting on

## Self-funder

Depending on income and savings some individuals may not qualify for funding support from the local authority for home based social care or residential care. This may be because they do not qualify under the '**Fair Access to Care**' (**FACS**) criteria, which is based on the level of your need or you have savings or assets above the 'upper capital limit'.

## Social worker

A person who is employed by the council to do the assessment of your needs.

## Stakeholders

Stakeholders is a term that describes all those parties that have an interest in a particular aim, project, service etc.

## Support plan

A plan that individuals do with help (if they would like some) to meet their social care need, writing their **outcomes** and saying how the money will be spent to support them

## Telecare

Telecare represents the whole range of 'assistive technology' products, which include all sorts of alarm systems. The products provide support to people in their own homes, through their link to the Dudley telecare service.

## Third party

Someone other than the principals who are involved in a transaction

## Time banking

Time banking will allow individuals across communities to volunteer their services, which may be decorating, driving, gardening for example. The time they spend volunteering will be 'banked'. The individual will then be able to then 'cash-in their time currency' and use it to recruit the services free of another volunteer.

## Universal services

For many people, the big challenge isn't ill-health, it's loneliness, isolation and financial worries. This is where 'non-social care support' or 'universal' services can help. Universal services can include: health services, benefits information and advice, transport, housing, libraries, sports and leisure centres, clubs and societies and voluntary organisations and charities for example

## User led organisations

These are organisations made up of people who use services who come together for the benefit of improving people's lives and services.

## Voluntary and independent sectors

This term is used to describe all voluntary and not for profit organisations including charities and social enterprises.

# Improving lives, making a difference

## Dudley Adult Social Care Local Account 2011-2012

### Questionnaire

1. How well do you feel this report gives you an overview of adult social care activity and the real differences that have been made to people's lives in Dudley over the last year.  
*(please circle; 1 being poor and 5 excellent)*

1      2      3      4      5

2. How easy have you found this document to read?  
*(please circle; 1 being poor and 5 excellent)*

1      2      3      4      5

3. Do you have any other comments about this report, please can you say what you like about the report and what you don't?

.....

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.....

4. We are keen to ask you what you would like to see in a future annual report. Do you have any suggestions?

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5. Would you like to be personally involved in helping to put together next year's local account for adult social care? *(Please circle)*

Yes      No

6. The council is keen to make sure that we involve with the right people in the right way so that we can continue to improve our services putting the individual at the heart of everything we do. Would you be interested in getting involved in developing our adult social care services? *(Please circle)*

Yes      No

7. We are keen to know what barriers there are to people wishing to get involved. If you have said no to questions 5 & 6 we would be very grateful if you would mind stating your reasons.

.....

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.....

.....

8. I describe myself as:

- |   |  |
|---|--|
| <input type="checkbox"/> a person who uses adult social care services | <input type="checkbox"/> a member of a voluntary group |
| <input type="checkbox"/> a carer                                      | <input type="checkbox"/> a care provider               |
| <input type="checkbox"/> a person who works in adult social care      | <input type="checkbox"/> a health care professional    |
| <input type="checkbox"/> another, please list                         |  |

.....

9. I am  male  female

10. My year of birth is .....

11. To which of these groups do you consider you belong?

- White (British, Irish, any other White background)
- Mixed (White and Black Caribbean, White and Black African, White and Asian, any other Mixed background)
- Asian or Asian British (Indian, Pakistani, Bangladeshi, any other Asian background)
- Black or Black British (Caribbean, African, any other Black background)
- Chinese
- Any other ethnic group

**Please complete the questionnaire by Friday 31 May 2013.**

- online at [www.dudley.gov.uk/localaccount](http://www.dudley.gov.uk/localaccount) or
- post (free of charge to: LOCAL ACCOUNT, Communications, FREEPOST, MID22308, Dudley DY1 1BR)

**For further information contact:**

Nick Perks	<a href="mailto:nick.perks@dudley.gov.uk">nick.perks@dudley.gov.uk</a>	telephone 01384 812288
Shelley Brooks	<a href="mailto:shelley.brooks@dudley.gov.uk">shelley.brooks@dudley.gov.uk</a>	telephone 01384 812418

# Making it Real in Dudley

*Transforming adult social care together*



Action Plan October 2012

Having clearly established the starting point for future transformation in the borough we developed our Making it Real action plan. The action plan takes the “I” statements from the national making it Real document and based upon the local account, service priorities and the impact change solutions report identifies key deliverables for forthcoming change.

Theme	“I” Statements	In Practice	Making it Real in Dudley – We will:
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<p><b>1) Information and Advice:</b> having the information I need, when I need it</p>	<p>“I have the information and support I need in order to remain as independent as possible.”</p> <p>“I have access to easy-to-understand information about care and support which is consistent, accurate, accessible and up to date.”</p> <p>“I can speak to people who know something about care and support and can make things happen.”</p> <p>“I have help to make informed choices if I need and want it.” “I know where to get information about what is going on in my community.”</p>	<p>Trusted information sources, are established and maintained that are accurate, free at the point of delivery, and linked to local and community information sources. Information must be accessible and in appropriate formats</p> <p>Skilled and culturally sensitive advisory services are available to help people access support, and to think through support to think through their options and secure solutions.</p> <p>A range of information sources are made available to meet individual communication needs, including the use of interactive technology which encourage an active dialogue and empower individuals to make their own choices.</p> <p>Local advice and support includes user led organisations, disabled people’s and carer’s organisations, self-advocacy and peer support.</p> <p>Local, consistent information and support that relates to legislation around recruitment, employment and management of personal assistants and other personal staff is available.</p>	<p>Develop the Council website, communications tools and Dudley Community Information Directory (DCID) to reflect a broad range of community capacity and emerging models of care and support</p> <p>Ensure that all user led organisations, disabled people and carer’s organisations, self-advocacy and peer support groups are accurately included on DCID.</p> <p>Put systems in place to ensure all publicly facing information is checked and updated annually. Urgent items will be managed swiftly.</p> <p>Build on existing knowledge and experience of the Access Centre and Library staff to provide public access points across the borough that support first contact.</p> <p>Through affective signposting reduce the number of people who repeat contact or inappropriately go through to a social worker</p> <p>Ensure that all public information will go through a readers panel</p> <p>Through an initial workshop and subsequent review programme ensure DP orgs provide applicable consistent info</p>
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Theme	“I” Statements	In Practice	Making it Real in Dudley - <i>We will:</i>
<p><b>2) Active and supportive communities:</b> keeping friends, family and place</p>	<p>“I have access to a range of support that helps me to live the life I want and remain a contributing member of my community.”</p> <p>“I have a network of people who support me – carers, family, friends, community and if needed paid support staff.”</p> <p>“I have opportunities to train, study, work or engage in activities that match my interests, skills, abilities.”</p> <p>“I feel welcomed and included in my local community.”</p> <p>“I feel valued for the contribution that I can make to my community.”</p>	<p>People are supported to access a range of networks, relationships and activities to maximise independence, health and well-being and community connections (including public health).</p> <p>There is investment in community activity and community based care and support which involves and is contributed to by people who use services, their families and carers.</p> <p>Effective programmes are available that maximise people’s health and wellbeing and enable them to recover and stay well.</p> <p>Longer term community support and not just immediate crisis is considered and planned for. A shift in resources towards supportive community activity is apparent.</p> <p>Systems and organisational culture support both people and carers to achieve and sustain employment if they are able to work.</p>	<p>Implement a Time banking service</p> <p>Increase the number of people with Learning/ physical disabilities, mental health needs and their carers, in paid employment</p> <p>Work with Transport and travel services to promote accessibility and access</p> <p>Enable people who use services to be central to all change and decision making activity in Adult social care</p> <p>Enable people to be supported within their community by people from their community.</p> <p>We will place people who use services and carers at the centre of our approach to contact monitoring and review.</p> <p>Raise the profile and public awareness of our services that promote peoples independence.</p>

Theme	“I” Statements	In Practice	Making it Real in Dudley We will:
<p><b>3) Flexible integrated care and support:</b> my support, my own way</p>	<p>“I am in control of planning my care and support.”</p> <p>“I have care and support that is directed by me and responsive to my needs.”</p> <p>“My support is coordinated, co-operative and works well together and I know who to contact to get things changed.”</p> <p>“I have a clear line of communication, action and follow up.”</p>	<p>People who use services and carers are able to exercise the maximum possible choice over how they are supported and are able to direct the support delivered.</p> <p>Support is genuinely available across a range of settings – starting with a person's own home or, where people choose, shared living arrangements or residential care.</p> <p>Processes are streamlined so that access to support is simple, rapid and proportionate to risk. Assessments are kept to a minimum, are portable, where possible, and do not cause difficulty or distress.</p> <p>People, who access support and their carers, know what they are entitled to and who is responsible for doing what.</p> <p>Collaborative relationships are in place at all levels so that organisations work together to deliver high quality support.</p> <p>Support is 'joined-up', so that people and carers do not experience delays in accessing support or fall between the gaps, and there are minimal disruptions when making changes.</p> <p>Transition from childhood to adulthood support services are pre-planned and well managed, so that support is centred on the individual, rather than services and organisational boundaries.</p> <p>Commissioners and providers of services enable people who access support to build their personal, social and support networks.</p>	<p>Provide all ongoing social care support through a personal budget.</p> <p>Ensure that everyone has access to Telecare and equipment through the introduction of a universal offer</p> <p>Review all existing assessments and process associated with the delivery of social care, reducing duplication, ensure information is recorded only once and transferred and that handoffs are reduced to a minimum</p> <p>Give each person formal correspondence detailing the amount of their personal budget and how this was calculated. Support plans will detail any restrictions on budget spend.</p> <p>Make sure each young person has a positive transition. A questionnaire will be developed</p> <p>Each person's support plan must identify how any identified support will increase someone's personal, social and support networks. We will start by introducing people to their neighbours</p> <p>Market position statements will be utilised to evidence our progress in commissioning to meet demand</p>

Theme	“I” Statements	In Practice	Making it Real in Dudley
<p>4) <b>Workforce:</b> my support staff</p>	<p>“I have good information and advice on the range of options for choosing my support staff.”</p> <p>“I have considerate support delivered by competent people.”</p> <p>“I have access to a pool of people, advice on how to employ them and the opportunity to get advice from my peers.”</p> <p>“I am supported by people who help me to make links in my local community.”</p>	<p>People who receive direct payments, self-funders and carers are supported in the recruitment, employment and management of personal assistants and other personal staff including advice about legal issues. People using council managed personal budgets have maximum possible influence over choice of support staff.</p> <p>There is development of different kinds of workforce and ways of working, including new roles for workers who work across health and social care.</p> <p>Staff have the values, attitude, motivation, confidence, training, supervision and tools required to facilitate the outcomes that people who use services and carers want for themselves.</p> <p>The workforce is supported, respected and valued.</p> <p>There are easy and accessible processes to enhance security and safety in the employment of staff.</p> <p>The formal and informal workforce is increasingly focused on and able to help people build and sustain community connections.</p>	<p>Through an initial workshop and subsequent review programme ensure DP orgs provide applicable consistent info</p> <p>Change our contractual position to enable people with council managed budgets to have the same degree of self-direction as people in receipt of direct payments.</p> <p>Promote and build upon existing PA pool arrangements enabling people to attribute a cost from their personal budget to a PA management arrangement that ensures employed staff are supervised, supported and have opportunities for training and development.</p> <p>In Partnership with Dudley CVS roll out an innovation fund to stimulate and grow personalised care and support.</p> <p>Provide active support to increase the capacity of micro providers alongside achievement of the Gold and Silver Quality Mark.</p> <p>Promote the essential guide to social care to ensure understanding around social care in Dudley</p>

Theme	“I” Statements	In Practice	Making it Real in Dudley – We will
<p>5) Risk <b>enablement:</b> feeling in control and safe</p>	<p>“I can plan ahead and keep control in a crisis.”</p> <p>“I feel safe, I can live the life I want and I am supported to manage any risks.”</p> <p>“I feel that my community is a safe place to live and local people look out for me and each other.”</p> <p>“I have systems in place so that I can get help at an early stage to avoid a crisis.”</p>	<p>People who use services and carers are supported to weigh up risks and benefits, including planning for problems which may arise.</p> <p>Management of risk is proportionate to individual circumstances. Safeguarding approaches are also proportionate and they are co-ordinated so that everyone understands their role.</p> <p>Where they want and need it, people are supported to manage their personal budget (or as appropriate their own money for purchasing care and support), and to maximise their opportunities and manage risk in a positive way.</p> <p>Good information and advice, including easy ways of reporting concerns, are widely available, supported by public awareness-raising and accessible literature.</p> <p>People who use services and carers are informed at the outset about what they should expect from services and how to raise any concerns if necessary.</p>	<p>We will implement Quality of life standards in to all contractual arrangements with social care providers and ensure support plans are supportive of such.</p> <p>Support plans will enable people who use services with support to consider risk in relation to opportunities for independence and quality of life.</p> <p>Enable everyone receiving ongoing social care support to receive a direct payment</p> <p>Undertake a safeguarding awareness scheme across the borough.</p> <p>Provide information throughout the customers experience detailing what people should expect and how to challenge</p>

Theme	"I" Statements	In Practice	Making it Real in Dudley – We will
<p><b>6) Personal budgets and self-funding: my money</b></p>	<p>"I can decide the kind of support I need and when, where and how to receive it."</p> <p>"I know the amount of money available to me for care and support needs, and I can determine how this is used (whether it's my own money, direct payment, or a council managed personal budget)."</p> <p>"I can get access to the money quickly without having to go through over-complicated procedures."</p> <p>"I am able to get skilled advice to plan my care and support, and also be given help to understand costs and make best use of the money involved where I want and need this."</p>	<p>Everyone eligible for on-going council funded support receives this as a personal budget. Direct payments are the main way of taking a personal budget and good quality information and advice is available to provide genuine and maximum choice and control.</p> <p>Council managed personal budgets offer genuine opportunities for real self-direction.</p> <p>People who use social care (whether people who use services or carers) are able to direct the available resource. Processes and restrictions on use of budget are minimal.</p> <p>There is a market of diverse and culturally appropriate support and services that people who use services and carers can access. People have maximum choice and control over a range of good value, safe and high quality supports.</p> <p>People who use services and carers are given information about options for the management of their personal budgets, including support through a trust, voluntary or other organisation.</p> <p>Self-funders receive the information and advice that they need and are supported to have maximum choice and control.</p> <p>Councils understand how people are spending their money on care and support, track the outcomes achieved with people using social care and carers, and use this information to improve delivery.</p>	<p>Provide all ongoing social care support through a personal budget</p> <p>Enable everyone receiving ongoing social care support to receive a direct payment</p> <p>Utilise DCID and peer reviews to introduce a customer driven quality ratings system that enables people to make informed choices about their support.</p> <p>Give each person formal correspondence detailing the amount of their personal budget and how this was calculated. Support plans will detail any restrictions on budget spend.</p> <p>Change our contractual position to enable people with council managed budgets to have the same degree of self-direction as people in receipt of direct payments.</p> <p>Make sure any contractual agreement with a provider enables a person to direct their support within the value of their budget.</p> <p>Make sure someone is as independent as possible before calculating a Personal Budget</p>



# Making it Real in Dudley

*Transforming adult social care together*



## Transformation Blueprint

March 2013

# DRAFT V3

Contents

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## Introduction

Translating Government intentions into practical change is a major challenge for the public sector. Whilst Making it Real is the responsibility of the whole health and social care sector, in Dudley its implementation will be driven initially by our Directorate for Adult, Community and Housing Services.

From 2007 through to 2011 we invested in “Putting People First” in Dudley and delivered a programme of transformation in Adult Social Care.

Making it Real emerged in May 2012 and simplified the Personalisation agenda from the perspective of people who use care and support services. Making it Real is a framework developed by the whole Think Local Act Personal Partnership, but very much led by members of the National Co-production Advisory Group. The approach signals a new phase in which we use a person focussed agenda to change the kind of information that the sector values, and the way in which we judge success.

Making it Real highlights the issues most important to the quality of people's lives. It helps the sector take responsibility for change and publicly share the progress being made.

Making it Real is built around “I” statements. These express what people want to see and experience; and what they would expect to find if personalisation is really working well.

Having evaluated our progress towards delivering truly personalised social care services, we have produced this document as a toolkit to take forward our transformation programme and achieve the aspirations of Making it Real, in partnership with the whole health and social care sector in Dudley.

The “Blueprint”, as it is known, will enable the development of a shared understanding of what the future will look like in Dudley. It will set the parameters for service redesign and transformation, ensuring consistency in implementation. Ultimately, it is a reference tool for anyone involved in implementing the agenda.

Making it Real will impact on all health and social care operations and therefore the Blueprint has the potential to impact all Council staff, the Council's customers and other Council stakeholders, including other public sector organisations, strategic partners and other suppliers of goods and services to the Council.

Central to the Blueprint design and development of a shared vision is how Safeguarding is embedded into our translation of Personalisation in Dudley.

As such the Blueprint sets out through service redesign and transformation, how the immediate and broader implications of Safeguarding are delivered.

The Blueprint is a position statement that will:

- Form the basis of future policy and guide the implementation of Making it Real in Dudley.
- Act as a point of reference, and potentially challenge for the public, the Directorate, the wider Council and its partners.

This Blueprint will define our ambition:

- It will provide a context for the delivery of services, using an appropriate blend of technology and internally provided services, together with the use of externally commissioned services.

In broad terms, the purpose of this Blueprint will be the starting point for:

- Enabling local people who use services, and their carers, to influence the design and delivery of social care services in the borough.
- Planning and support to ensure effective implementation of a service wide transformation aligned to both Council-wide and service priorities.
- Delivering an enhanced customer experience through timely and flexible responses to customer contacts.
- Enhancing the skills and capabilities of staff.
- Delivering simple processes which ensure consistent and high quality services that help to deliver the aspirations of Making it Real, leading to enhanced reputation and awareness amongst customers.
- Providing a significant contribution to mainstreaming the Personalisation agenda across partner agencies and other stakeholders.
- Identifying the assets and information available to the public who are in need of support, and ensuring that the right outcomes are achieved.
- Developing the care and support marketplace to offer real choice and control.
- Improving joined up commissioning and the development of market position statements to signal clear commissioning intentions, and engage with the community to identify gaps/deficits in service provision.
- Establishing mechanisms to work closely with care providers so that they can respond effectively to the Personalisation agenda.

The Blueprint has 5 main sections that support the Making it Real programme in the borough:

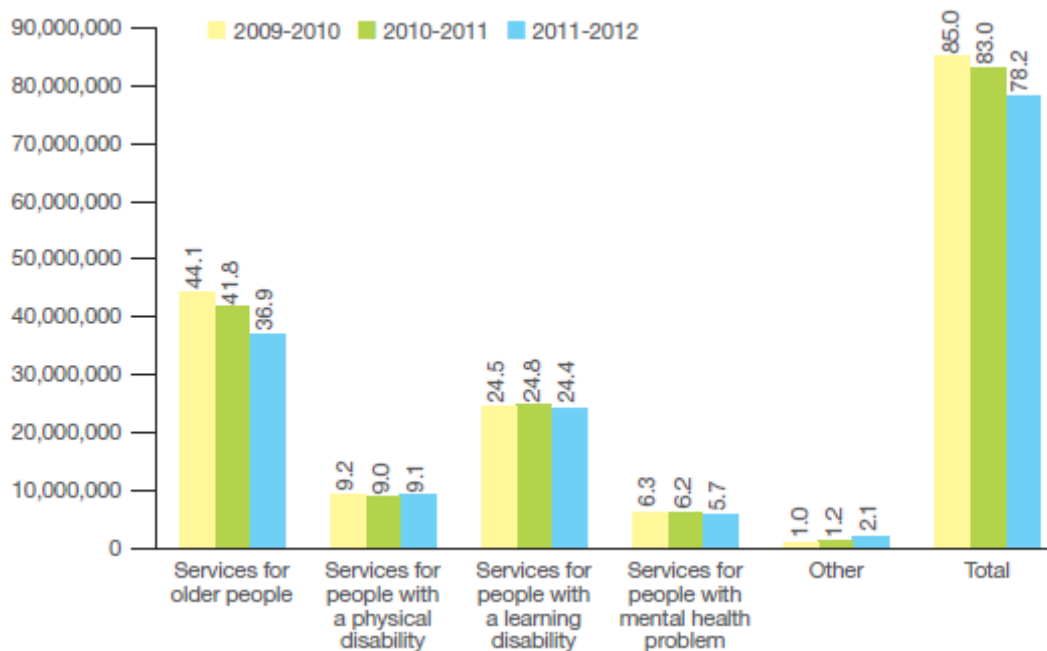
1. **Current Position Evaluation** – This section benchmarks the delivery of social care in the borough from a range of perspectives, so to establish a starting point for future change.
2. **Making it Real Action Plan** – Based upon the current position evaluation, a high-level action plan details how Making it Real will be delivered in the borough.
3. **Delivering Change** – A Structure to the delivery of the programme is established with clear descriptions of the how future social care in Dudley will be provided.
4. **Target Operating Model** – This model details the future customer journey and how the aspirations of Making it Real will be manifested in day to day delivery of social care support.
5. **A Learning Organisation** – This section articulates how we will develop a “You said, we did” culture that enables future social care services to evolve and respond to both the .....

# 1. Current position Evaluation

In order to establish the starting position for future change activity, and to identify areas of strength and those requiring further work, the Directorate has evaluated its current approach through a number of channels, including data captured through the Local Account and the commissioning of an independent evaluation.

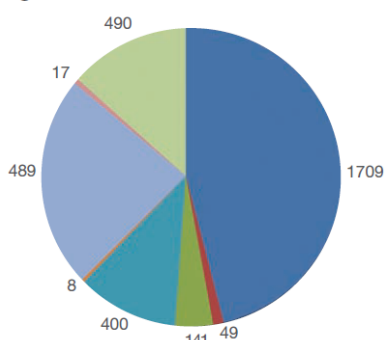
## 1.1 The Facts and figures

In 2011/12, the Council spent £78.2 million on care, support and services.

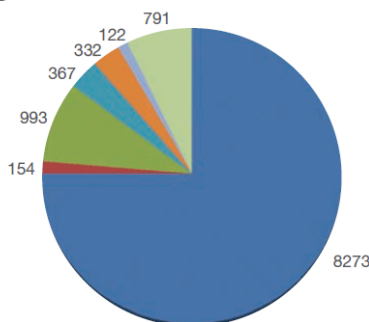


There has been a xxx% reduction in the budget since 2009. The Council has identified savings for adult social care of £13m during 2009 to 2012. This is due to changes in how funding has been received from the government. Despite this the Council has continued to provide high quality services. It has risen to this challenge, delivering fair and efficient care where resources are matched to people's need. The number of people supported by adult social care has increased by 4.4% from 14,086 in 2010-11 to 14,745 in 2011-12.

Total number of people supported aged 18 - 64



Total number of people supported aged 65 and over



- physical disability/frailty and/or temporary illness
- Hearing impairment and deaf
- Visual impairment and blind
- mental health
- dementia
- learning disability
- Substance misuse
- Other vulnerable people

### 1.3 Local Account

The report produced for April 2011 to March 2012 is the second annual report or 'local account' on Dudley's Adult Social Care services. The Local Account is a report to local people, based on the views of local people, that describes how we have performed during this period in delivering quality adult social care and support. The full copy of the Local account is available below:

#### Local Account 2011 - 2012

The account equally articulates what we said we would do and what we did during the associated period. In this document we will also highlight the services we want to improve in the coming year.

The document is open about the challenges we face, shares with the public our achievements, and is honest about the areas we need to target for further improvement.

In support of our adoption of Making it Real, the Local Account seeks evaluation and feedback from local people on how well we have performed against the following 6 Making it Real themes/outcomes:

- **Information and advice:** having the information I need, when I need it
- **Active and supportive communities:** keeping friends, and family and place
- **Flexible integrated care and support:** my support, my own way
- **Workforce:** my support staff
- **Risk enablement :** feeling in control and safe
- **Personal budgets and self-funding:** my money

#### Local Account approach

A Local Account Reference Group was set up to steer all aspects of developing the Local Account. The group also engaged with a wide range of community groups and people who use our services, to make sure that local people were involved and were able to actively influence the Local Account.

The approach began by determining the key challenges local people perceived the Council will face over the coming years, before looking specifically at the Making it Real Themes.



As part of this year's Local Account, the Take Control and Get Involved campaign ([www.dudley.gov.uk/takecontrolasc](http://www.dudley.gov.uk/takecontrolasc)) was launched. Here people were asked four simple questions about their experiences of receiving care and support; the results and experiences, of which, are included in the ....

## Key challenges

The initial key challenges identified through the Local Account were:

- Over the next three years Dudley Council's budget is expected to decrease by 25%.
- At the same time, the budgets of partner agencies in the public, independent and voluntary sectors will come under increasing pressure.
- The initial Census figures released in July 2012 place Dudley's population at 312,000, of whom 58,200 are aged over 65. Dudley's population is estimated to reach 332,000 by 2030, of which 77,000 would be aged 65 and above.
- It is forecast that by 2015 there will be 4,365 people in Dudley suffering with dementia and that this will rise to 6,435 by 2030, a percentage increase of approximately 50%.
- In particular, we expect increases in the numbers of people with long-term conditions, especially those conditions that are related to age.
- Local people have high expectations of health and social care services, and they want services that will improve their quality of life.
- The need to provide good quality information and advice that is easily accessible and in a format that is the most appropriate to them is greater than ever.
- Over-night respite is a top priority for carers.
- Personal budgets may not cover all the support that people may want.
- There is growing demand for a wider choice of available services in the voluntary and independent sectors.
- Some local people don't want personal budgets and prefer that their support is managed directly by the Council.
- Welfare benefit reforms may have an impact on individual's income.

## Making it Real Themes

Having identified the challenges faced by the Council, the Local Account then goes on to identify our performance over the previous year against the themes of Making it Real, looking at both overall performance and individual views. In responding to individual views the Account establishes also our required response.

In taking this approach, the Local Account looks to establish a “You said” “We Did” culture. Below are some key highlights taken from the Local Account with regard to our current performance against Making it Real.

**Information and advice:** Having the information I need, when I need it.

Overall, nearly 80% of Dudley people who responded to a national survey said that they find it easy to find information about Adult Social Care services. This was the top score amongst other local authorities that we compare with, as well as amongst the best response in the West Midlands. However, we still acknowledge that there are things we need to improve upon.

*‘You try but get told wrong number, advised to try another number, then its either wrong dept, not in today, only work certain days, it is a joke to ask this question’*

Comment from Adult Social Care Survey 2012

**We say**

*‘This is not acceptable. We will be carrying out a review of the ‘customer journey’ to understand the barriers that people face to getting the right advice and support. We will then look to make sure that information at all access points is consistent and customer’s enquiries are dealt with effectively at the first point of contact.’*

**Active and supportive communities:** Keeping friends, and family and place

Through the provision of £3.32million of grants to voluntary and independent sector community based organisations, we have helped to support up to 1,900 people to remain as independent as possible and maintain orientated within their communities.

*‘I don’t go out alone because of my disability - all I do is stay at home, watch t.v. and read books. Socialising is a dream of the past.’*

Comment from Adult Social Care Survey 2012

**We say**

*‘We will be working more closely with community organisations to improve the availability of local community support.’*

**Flexible integrated care and support:** My support, my own way.

Dudley's Dementia Gateway Service provides tailored care and support. The service's core objective is to make a real, positive difference to the lives of people living with dementia. No one with the disease in the borough should feel alone. There is ongoing, clear and co-ordinated support from diagnosis until the end of life, always aiming for the very best quality of life.

Over 8,000 older, disabled and vulnerable people in the borough now benefit from technology provided by the Dudley Telecare Service, which allows them to remain independent in their own homes as well as providing peace of mind. Dudley Telecare Service has also been successful in becoming a member of the Telecare Services.

*'My quality of life has gone from 'very bad' to 'good' due to the care the council has provided through therapy services. Life was unbearable before you stepped in !'*  
Comment from Adult Social Care Survey 2012

**Need to add we did**

**Workforce:** My support staff.

Our older people, and people with physical and sensory disabilities services, have been changed in line with people's experiences or journey through the Adult Social Care system. This has brought about a greater degree of consistency in relation to individual care. We have developed and trained over 600 staff from both the Council and other organisations, including GP surgeries and libraries, in 'Carer Aware', and we are now also rolling out the Essential Guide to Adult Social Care, which will mean staff will provide better over-all support to individuals.

*'I can now have who I want supporting me and coming when I want them to'*  
Comment from the learning disability review

**Need to add we did**

**Risk enablement:** Feeling in control and safe

Dudley Council has collaborated with a number of West Midlands Councils to develop new 'Safeguard and Protect procedures'. Launched in July, this new procedure will help to strengthen the borough's safeguarding arrangements of vulnerable adults.

Over 550 staff received training on helping people to live safely in their communities and avoid financial exploitation. In addition 198 people, who may themselves be vulnerable, were also provided with this information and support.

*'My 'Sayphone' gives me a sense of security community alarm makes me safe'*

Comment from Adult Social Care Survey 2012

### Need to add we did

**Personal budgets and self-funding:** My money, personal budgets and self-funding.

Welfare benefits officers have brought £2.67million into the borough in previously unclaimed benefits, and so have helped over 1300 individuals increase their income.

The number of people with a learning disability whose care is provided through a direct payment has increased. This has helped to improve people's opportunity for control, although we recognise we need to do more about making sure there is a suitable amount of alternative and flexible care solutions.

*'there's not enough money in my budget to do all the things I would like to do.'*

Comment from the learning disability review

*'I feel constrained sometimes, I want to be able to arrange the services to meet my growing needs but finance seems to dictate what I really get.'*

Comment from Adult Social Care Survey 2012

### Need to add we did

## 1.3 Impact Change Solutions

Impact Change Solutions were commissioned to carry out an external evaluation of Dudley Metropolitan Borough Council's Transforming Social Care Programme. The document completed in October 2011 is available below:

### Dudley External Evaluation

The scope of the evaluation was to:

- Evaluate progress against the Putting People First milestones, including efficiency measures.
- Highlight examples of good practice and innovative solutions.
- Identify areas for development that will assist Dudley MBC move forward in a time of reduced resources.
- Evaluate the impact of personalisation on people's lives.
- Look at the impact of personalisation on the culture of the organisation and the extent to which it has been embedded in the service.

## Key achievements of the programme

In its evaluation the report identified that although the programme has been very challenging given the current financial climate, the Council had delivered some significant achievements including:

- Extensive communication about the programme with people who use services, staff, providers and the wider community.
- Success of the Living Independently Team.
- Establishment of the User Led Organisation.
- Establishment of a number of micro-providers with the support of Community Catalysts in the area of learning disabilities.
- Success of the Community Information Directory
- Implementation of Personal budgets.

## Conclusions of the report

In concluding the evaluation, the report identified that the Council has had some recognisable successes in the implementation of the Transforming Social Care Programme, including the Access and LIT Teams, and the support for carers. It further concluded that:

- The principles of personalisation are understood by staff, but the reality is that the changes in funding criteria, staff reductions and general financial pressures, has diverted attention away from delivering innovative and creative solutions.
- Waiting lists for both assessment and care are impacting adversely on people who use services, on the reablement service and on social work teams.
- The culture of the department has not changed in line with the Transforming Social Care strategy, resulting in slow progress on introducing new ways of working. Little has been done to engage the “hearts and minds” of staff.
- Processes are bureaucratic and the AIS system has been bent out of shape. This has resulted in delays in completing assessments, data quality issues, and staff feeling less confident in their role and demoralised.

The findings during the review acknowledge that the Council's own self-assessment is a fairly accurate reflection of the position on personalisation in Dudley.

## Recommendations

Helpfully, the report provides a number of recommendations, articulating that the Council should use such recommendations to inform the scope of any subsequent change activity. As such the report recommends that:

- The Council should create and articulate its vision for Adult Social Care in Dudley, setting out the outcomes it is seeking to influence. The vision should be clear and understood by all stakeholders. The Council should use this report to benchmark its current position against the new vision.
- The change activity required to deliver the new vision should be defined and resourced. This should be informed by strategic prioritisation and an analysis of current versus desired spending.
- The new change programme should be themed around outcomes, should be relevant to local priorities, and realistic. It should pursue cross-cutting activities that have, or could have, an influence on the achievement of outcomes and the programme's vision.
- The programme should be underpinned by a strong and sustained cultural change element. This will include harnessing what is good about the current culture and identifying a culture that will deliver the vision.
- The new change programme should employ recognised/robust programme and project management disciplines. Close control and management of risk, issues and dependencies is required.
- Progress reporting and stakeholder management should be honest and transparent. Appropriate governance arrangements should be established with clear and agreed responsibilities. The programme should define a strategy and plan for benefits realisation.
- The operational issues identified during the review should be addressed as an early priority. These include: addressing the waiting lists for an assessment and for funding to deliver the support plan; addressing the process deficiencies that are contributing to on-going delays; fully adopting the IT systems that are there to enable efficient practice and improved service delivery; and providing support and training so that staff feel adequately equipped to do the job required. This should also include exploring closer relationships with Health colleagues in order to address cultural, communications and process shortcomings.
- The service should define its market shaping priorities and should accelerate specific initiatives to stimulate provision in the areas where gaps have been identified (e.g independent support brokerage).

- The service should develop its approach to engaging with people who use services, carers, and with the provider market, so that engagement becomes more productive and co-production becomes a feature.

### The Overall picture

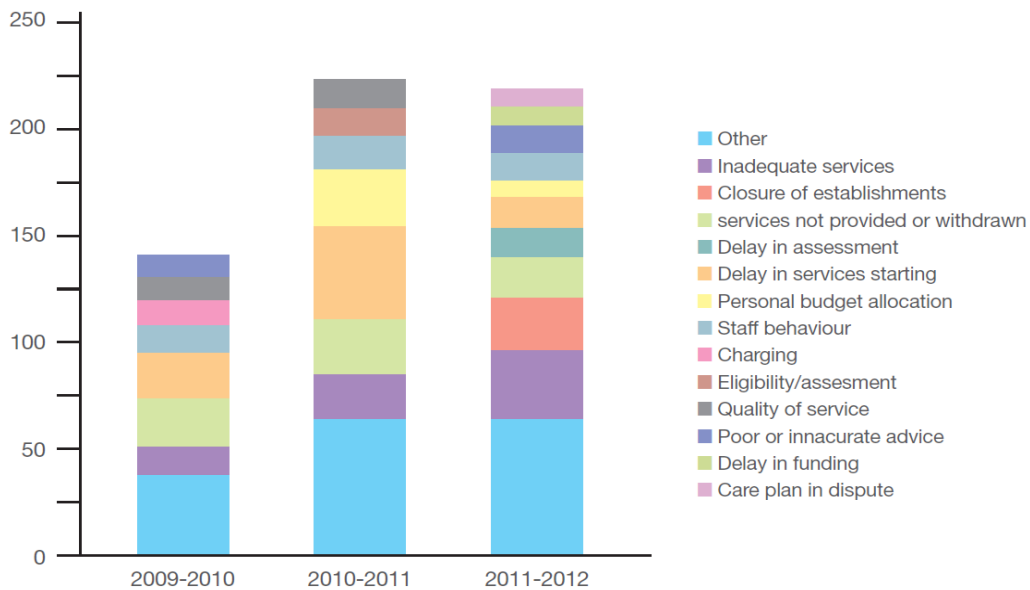
Our overall Local Account identifies:

- 3,632 (87.2%) people had an assessment completed within four weeks of their contact.
- 3,376 people and 420 carers received social care through a direct payment or personal budget. We are keen to improve on this figure.
- Of all Adult Social Care survey respondents, 67.4% expressed that they were either extremely satisfied or very satisfied with the care services that they received.

### Complaints

For those people not satisfied with the service we have offered, the table below provides some analysis as to the reason why.

This table shows the types of issues that people have complained about in the last 3 years.





## 2. Making it Real Action Plan

Having clearly established the starting point for future transformation in the borough, we developed our Making it Real action plan. The action plan acknowledges the positive developments within Adult Social Care in Dudley, takes the “I” statements from the national Making it Real document, and based upon the Local Account service priorities and the impact change solutions report, identifies key deliverables for forthcoming change.

Theme	“I” Statements	In Practice	Making it Real in Dudley – We will:
<b>1) Information and Advice:</b> having the information I need, when I need it	<p>“I have the information and support I need in order to remain as independent as possible.”</p> <p>“I have access to easy-to-understand information about care and support which is consistent, accurate, accessible and up to date.”</p>	<p>Trusted information sources, are established and maintained that are accurate, free at the point of delivery, and linked to local and community information sources. Information must be accessible and in appropriate formats.</p> <p>Skilled and culturally sensitive advisory services are available to help people access support, and to think through support to think through their options and secure solutions.</p> <p>A range of information sources are made available to meet individual communication needs, including the use of interactive technology which encourage an active dialogue and empower individuals to make their own choices.</p>	<p>Develop the Council website, communications tools and Dudley Community Information Directory (DCID) to reflect a broad range of community capacity and emerging models of care and support</p> <p>Ensure that all user led organisations, disabled people and carers’ organisations, self-advocacy and peer support groups are accurately included on DCID.</p> <p>Put systems in place to ensure all publicly facing information is checked and updated annually. Urgent items will be managed swiftly.</p>

	<p>“I can speak to people who know something about care and support and can make things happen.”</p> <p>“I have help to make informed choices if I need and want it.” “I know where to get information about what is going on in my community.”</p>	<p>Local advice and support includes user led organisations, disabled people’s and carer’s organisations, self-advocacy and peer support.</p> <p>Local, consistent information and support that relates to legislation around recruitment, employment and management of personal assistants and other personal staff is available.</p>	<p>Build on existing knowledge and experience of the Access Centre and Library staff to provide public access points across the borough that support first contact.</p> <p>Through affective signposting reduce the number of people who repeat contact or inappropriately go through to a social worker.</p> <p>Ensure that all public information will go through a readers panel.</p> <p>Through an initial workshop and subsequent review programme ensure DP organisations provide applicable, consistent information.</p>
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Theme	“I” Statements	In Practice	Making it Real in Dudley - <i>We will:</i>
<p><b>2) Active and supportive communities:</b> keeping friends, family and place</p>	<p>“I have access to a range of support that helps me to live the life I want and remain a contributing member of my community.”</p> <p>“I have a network of people who support me – carers, family, friends, community and if needed paid support staff.”</p> <p>“I have opportunities to train, study, work or engage in activities that match my interests, skills, abilities.”</p> <p>“I feel welcomed and included in my local community.”</p>	<p>People are supported to access a range of networks, relationships and activities to maximise independence, health and well-being, and community connections (including public health).</p> <p>There is investment in community activity and community based care and support which involves, and is contributed to, by people who use services, their families and carers.</p> <p>Effective programmes are available that maximise people’s health and wellbeing, and enable them to recover and stay well.</p> <p>Longer term community support, and not just immediate crisis, is considered and planned for. A shift in resources towards supportive community activity is apparent.</p> <p>Systems and organisational culture support both people and carers to achieve and sustain employment if they are able to work.</p>	<p>Implement a Time banking service.</p> <p>Increase the number of people with learning/physical disabilities, mental health needs, and their carers, in paid employment.</p> <p>Work with transport and travel services to promote accessibility and access.</p> <p>Enable people who use services to be central to all change and decision making activity in Adult social care.</p> <p>Enable people to be supported within their community by people from their community.</p> <p>We will place people who use services and carers at the centre of our approach to contact monitoring and review.</p>

	"I feel valued for the contribution that I can make to my community."		Raise the profile and public awareness of our services that promote peoples independence.
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Theme	"I" Statements	In Practice	Making it Real in Dudley <b>We will:</b>
<p><b>3) Flexible integrated care and support:</b> my support, my own way</p>	<p>"I am in control of planning my care and support."</p> <p>"I have care and support that is directed by me and responsive to my needs."</p> <p>"My support is co-ordinated, co-operative and works well together, and I know who to contact to get things changed."</p> <p>"I have a clear line of communication, action and follow up."</p>	<p>People who use services and carers are able to exercise the maximum possible choice over how they are supported ,and are able to direct the support delivered.</p> <p>Support is genuinely available across a range of settings – starting with a person's own home or, where people choose, shared living arrangements or residential care.</p> <p>Processes are streamlined so that access to support is simple, rapid and proportionate to risk. Assessments are kept to a minimum, are portable, where possible, and do not cause difficulty or distress.</p> <p>People, who access support and their carers, know what they are entitled to and who is responsible for doing what.</p> <p>Collaborative relationships are in place at all levels, so that organisations work together to deliver high quality support.</p> <p>Support is 'joined-up', so that people and carers do not experience delays in accessing support or fall between the gaps, and there are minimal disruptions</p>	<p>Provide all ongoing social care support through a personal budget.</p> <p>Ensure that everyone has access to Telecare and equipment through the introduction of a universal offer.</p> <p>Review all existing assessments and processes associated with the delivery of social care, reducing duplication, ensure information is recorded only once and transferred, and that handoffs are reduced to a minimum</p> <p>Give each person formal correspondence detailing the amount of their personal budget and how this was calculated. Support plans will detail any restrictions on budget spend.</p> <p>Make sure each young person has a positive transition. A questionnaire will be developed</p> <p>Each person's support plan must</p>

		<p>when making changes.</p> <p>Transition from childhood to adulthood support services are pre-planned and well managed, so that support is centred on the individual, rather than services and organisational boundaries.</p> <p>Commissioners and providers of services enable people who access support to build their personal, social and support networks.</p>	<p>identify how any identified support will increase someone’s personal, social and support networks. We will start by introducing people to their neighbours.</p> <p>Market position statements will be utilised to evidence our progress in commissioning to meet demand.</p>
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Theme	“I” Statements	In Practice	Making it Real in Dudley
<p><b>4) Workforce:</b> my support staff</p>	<p>“I have good information and advice on the range of options for choosing my support staff.”</p> <p>“I have considerate support delivered by competent people.”</p> <p>“I have access to a pool of people, advice on how to employ them, and the opportunity to get advice from my peers.”</p> <p>“I am supported by people who help me to make links in my local community.”</p>	<p>People who receive direct payments, self-funders and carers are supported in the recruitment, employment and management of personal assistants and other personal staff, including advice about legal issues. People using Council managed personal budgets have maximum possible influence over choice of support staff.</p> <p>There is development of different kinds of workforce and ways of working, including new roles for workers who work across health and social care.</p> <p>Staff have the values, attitude, motivation, confidence, training, supervision and tools required, to facilitate the outcomes that people who use services and carers want for themselves.</p> <p>The workforce is supported, respected and valued.</p> <p>There are easy and accessible processes to enhance security and safety in the employment of staff.</p> <p>The formal and informal workforce is increasingly focused on, and able to, help people build and sustain community connections.</p>	<p>Through an initial workshop and subsequent review programme ensure Direct Payment organisations provide appropriate and consistent information.</p> <p>Change our contractual position to enable people with Council managed budgets to have the same degree of self-direction as people in receipt of direct payments.</p> <p>Promote and build upon existing PA pool arrangements, enabling people to attribute a cost from their personal budget to a PA management arrangement that ensures employed staff are supervised, supported and have opportunities for training and development.</p> <p>In Partnership with Dudley CVS roll out an innovation fund to stimulate and grow personalised care and support.</p>



			<p>Provide active support to increase the capacity of micro providers, alongside achievement of the Gold and Silver Quality Mark.</p> <p>Promote the Essential Guide to Social Care to ensure understanding around Social Care in Dudley.</p>
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Theme	“I” Statements	In Practice	Making it Real in Dudley – We will
<p><b>5) Risk enablement:</b> feeling in control and safe</p>	<p>“I can plan ahead and keep control in a crisis.”</p> <p>“I feel safe, I can live the life I want and I am supported to manage any risks.”</p> <p>“I feel that my community is a safe place to live and local people look out for me and each other.”</p> <p>“I have systems in place so that I can get help at an early stage to avoid a crisis.”</p>	<p>People who use services and carers are supported to weigh up risks and benefits, including planning for problems which may arise.</p> <p>Management of risk is proportionate to individual circumstances. Safeguarding approaches are also proportionate and they are co-ordinated so that everyone understands their role.</p> <p>Where they want and need it, people are supported to manage their personal budget (or as appropriate their own money for purchasing care and support), and to maximise their opportunities and manage risk in a positive way.</p> <p>Good information and advice, including easy ways of reporting concerns, are widely available, supported by public awareness-raising and accessible literature.</p> <p>People who use services and carers are informed at the outset about what they should expect from services and how to raise any concerns if necessary.</p>	<p>We will implement Quality of Life standards in to all contractual arrangements with social care providers, and ensure support plans are supportive of such.</p> <p>Support plans will enable people who use services with support to consider risk in relation to opportunities for independence and quality of life.</p> <p>Enable everyone receiving ongoing social care support to receive a direct payment.</p> <p>Undertake a safeguarding awareness scheme across the borough.</p> <p>Provide information throughout the customer’s experience detailing what people should expect and how to challenge.</p>

Theme	“I” Statements	In Practice	Making it Real in Dudley – We will
<p><b>6) Personal budgets and self-funding: my money</b></p>	<p>“I can decide the kind of support I need and when, where and how to receive it.”</p> <p>“I know the amount of money available to me for care and support needs, and I can determine how this is used (whether it’s my own money, direct payment, or a Council managed personal budget).”</p> <p>“I can get access to the money quickly without having to go through over-complicated procedures.”</p> <p>“I am able to get skilled advice to plan my care and support, and also be given help to understand</p>	<p>Everyone eligible for on-going Council funded support receives this as a personal budget. Direct payments are the main way of taking a personal budget, and good quality information and advice is available to provide genuine and maximum choice and control.</p> <p>Council managed personal budgets offer genuine opportunities for real self-direction.</p> <p>People who use social care (whether people who use services or carers) are able to direct the available resource. Processes and restrictions on use of budget are minimal.</p> <p>There is a market of diverse and culturally appropriate support and services that people who use services and carers can access. People have maximum choice and control over a range of good value, safe and high quality supports.</p> <p>People who use services and carers are given information about options for the management of their personal budgets, including support through a trust, voluntary or other organisation.</p> <p>Self-funders receive the information and advice that they need and are supported to have maximum choice and control.</p>	<p>Provide all ongoing social care support through a personal budget.</p> <p>Enable everyone receiving ongoing social care support to receive a direct payment.</p> <p>Utilise DCID and peer reviews to introduce a customer driven quality ratings system that enables people to make informed choices about their support.</p> <p>Give each person formal correspondence detailing the amount of their personal budget and how this was calculated. Support plans will detail any restrictions on budget spend.</p> <p>Change our contractual position to enable people with Council managed budgets to have the same degree of self-direction as people in receipt of direct payments.</p> <p>Make sure any contractual agreement with a provider enables a</p>

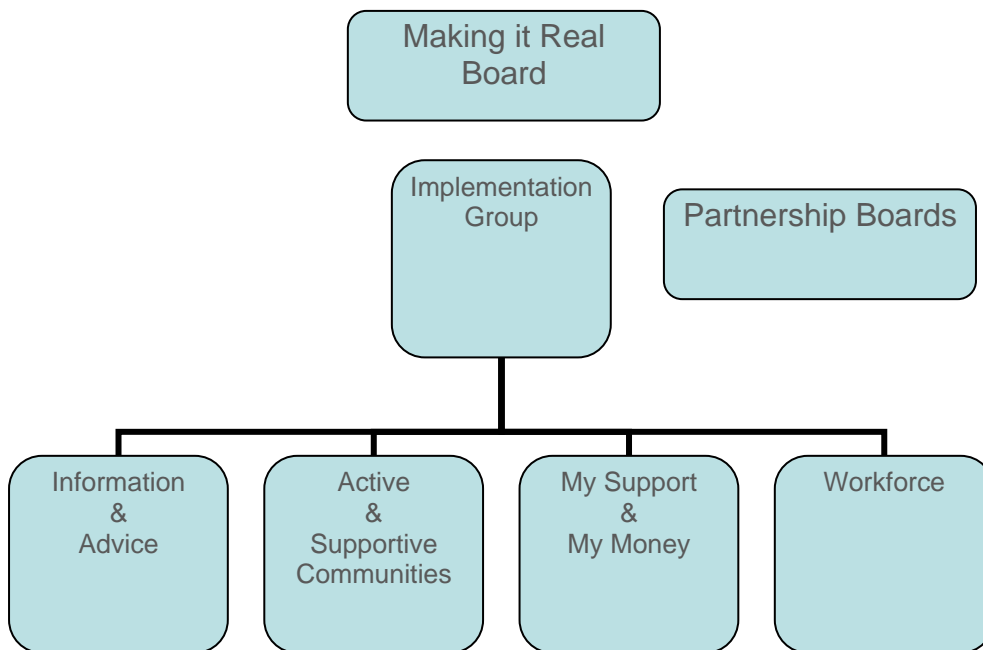
	costs and make best use of the money involved where I want and need this.”	Councils understand how people are spending their money on care and support, track the outcomes achieved with people using social care and carers, and use this information to improve delivery.	person to direct their support within the value of their budget.  Make sure someone is as independent as possible before calculating a Personal Budget.
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Theme	“I” Statements	In Practice	Making it Real in Dudley – We will
<p><b>7) Support to Carers</b></p>	<p>“I feel that my caring role and expertise is understood and valued.”</p> <p>“I have the information and advice I need to help me in my caring role.”</p> <p>“I have the support I need to maintain the level of caring which is right for me.”</p> <p>“I feel confident that I, and the person I care for, would be supported should I be unable to care.”</p> <p>“I feel that I receive support to maintain my health.”</p>		<p>We will promote the Carer Aware and Young Carer Aware courses for all staff, and make them mandatory for staff with a direct role in providing information, assessment or support.</p> <p>We will ensure that carers’ assessments are an integral part of the assessment and support planning process, and that carers needs, including the need for a break from caring, are identified and met appropriately.</p> <p>We will maintain and extend the Carers Direct payment scheme which supports carers on a low income to take a break.</p> <p>We will extend access to practical training for carers in respect of supporting people with particular illnesses or disabilities (such as dementia, autism).</p> <p>We will further develop our Carers’</p>

			peace of mind scheme which provides support if the carer is unable to care due to accident or emergency.
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### 3. Delivering change

The Directorate of Adult Community & Housing Services in Dudley is committed to delivering the support and services described by people who use services and carers in the “I” statements of Making it Real. Achieving the associated change will require the Directorate to have a clear and robust communication and governance structure that actively involves people who use service and carers in all levels of service design and decision making. The structure below will be utilised to deliver the programme.



#### Making it Real Board

The Board has the overall responsibility of ensuring that the aspirations of the programme are delivered in a manner that is timely, efficient and shaped by local people. The Board will meet on an 8 week basis and be chaired by the Director of Adult Social Care and Housing, Andrea Pope Smith. The Board’s membership will include people who use services and carers, senior managers within the Directorate, and Partners; Dudley CVS, Changing Our Lives, Dudley Walsall Mental Health Trust, NHS Dudley CCG. Think Local Act Personal (TLAP) and WM Care Association. The Board will track the delivery of the action plan against key identified milestones on a highlight basis, and have overall decision making responsibility.

#### Making it Real Implementation Group

The Implementation Group has a remit to support the Board in its role of tracking the programme by producing a highlight report that encapsulates all change activity within the programme. The group has an overview of all





projects associated with the programme, ensuring activity across the Directorate is fitting and working together to provide consistent services. This overview will be provided through updates from each of the four programme Workstreams and the Directorate's Partnership Boards. The group will produce an overall timescale for all implementation of change. The group's membership will include people who use services, workstream leads, senior managers within the Directorate, and Partners. The group will meet on an 8 week basis, two weeks prior to the board.

The Implementation Group will also oversee the development of an operational level customer pathway that clearly articulates how a person would be supported upon contacting the Council for social care support. This pathway will be based upon the target operating model detailed later in this document.

### **Making it Real Workstreams**

The Making it Real programme is associated with four workstreams pertaining to the 7 specific themes of Making it Real. Each workstream will work against a delivery plan that captures all agreed change activity associated with its remit. A lead officer will be identified for each, who will have responsibility for achievement of the activity within the delivery plan and to provide updates to the Implementation Group. Each Workstream, meeting 4 weekly, will have a membership that includes people who use services, carers, Directorate staff and partners. Workstreams established are:

- Information and Advice;
- Active and Supportive Communities;
- My Support My Money;
- Workforce.

### **Workstream approach**

To ensure commonality of message and clarity of purpose, each Workstream is working towards a range of "to be" descriptions that define how services would be deployed if the associated themes from the Making it Real action plan are delivered. The Making it Real "I" statements form outcomes that can be expected to be achieved if the Workstream/programme is successful.

The table below shows how each Workstream is structured.

My Support My Money				
Jayne Wilkins Info & Advice	Kate Green DCVS Communities	Matt Bowsher Promoting Ind	Brendon Clifford Personal Budgets	Andrew Packer Workforce
Parm Website	Justin Haywood Engaging Dudley	Marie Spittle Prevention	Sue Beach My Worker	Sue Reynolds Direct Payments
Lynda Wattis DCID	Angel Pitchford Transport	Jo Vaughn Reablement	Anita Hughes Assessment	Stephen Garbitt PA's
Christine Rowley Essential Guide	Julia Wade Employment	Dawn Fazey Access	Kate Green Personal Budgets	Debbie LaQuene Quality & Ratings
Marie Spittle Contact Points	Justin Haywood DIF	Ann Askew Carers	Ann Parkes Support Planning	Annette Derby Inhouse services
Shelley Brookes Information Man	Kate Green DCVS Mutual Support		Chris Ward AIS	Andrew Packer MPS
Andrew Packer SLA's				Steve Moore QLS
Shobha Performance				Lorna Reid Micros
				Brendon Clifford Culture

## **Workstream 1 - Information and Advice**

- *“Making it Real theme 1. Information and Advice - having the information I need when I need it”*

Workstream 1 will be associated with:

### **Dudley MBC website**

Information around Adult Social Care in the borough will be easily found on the Dudley MBC website. The language used on the website will be accessible and meaningful to local people. Google and other analytical tools will be utilised, alongside the views of local people, to evaluate the effectiveness of the website. Governance will be established to ensure information provided is valid and up-to-date.

From an Adult Social care perspective the website will be structured to provide 4 functions.

1. About Adult Social Care – An interactive Essential Guide to Adult Social Care will be the primary mechanism to convey how adult social works. This guide will link to a range of public facing policy documents including:
  - Fairer Access to Care Services;
  - Promoting Independence;
  - Personal Budgets;
  - Support Planning;
  - Support to Carers.

These documents will be designed to give transparency and clarity around how we work.

2. Signposting – The website will promote the following associated web resources:
  - The Dudley Community Information Directory;
  - The Making it Real Partnership site.
3. Take control & Get involved – Local people will be provided information and guidance around how they become engaged in evaluation and developments in Adult Social Care including:
  - Social Media;
  - Forums;
  - Meetings and Networks;
  - Health Watch.

4. Contact details – A single point of contact will be provided for all telephone, email and postal correspondence, detailing hours of service and advice as to when we are at our busiest. This area will also provide information about our comments/compliments/complaints process. Wherever possible, people will be promoted to only use this contact number if they are unable to self serve within the other options of the website.

### **Dudley Community Information Directory**

The Dudley Community Information Directory (DCID) is a local resource available universally through the internet. The Directory provides local detail of organisations, individuals, groups and networks that operate within the Dudley borough. The DCID is a central feature of achieving the aspirations of Making it Real.

The Directory will provide consistent and up-to-date information to the public around the availability of support and activity within the borough. The effectiveness of the Directory will be associated with an increase in local ability to self serve and self direct to the right services at the right time. The Directory will use quality marks and ratings systems (described later in this document) to support the public to make informed choices around organisations they choose to select, attend and receive services from; whilst also providing the opportunity for local people to rate and give feedback against services and support they receive.

Simple availability of the Directory through the internet would not enable access for the whole population of Dudley. As such the Directory will be available through community contact points (described later in this document) and through supported telephone navigation via the directorates **Access Team** and **Dudley Council Plus**.

Staff employed within the Adult Social Care division will utilise the Directory throughout the target operating model, to support people to identify the support and services they need.

At the point of contact the Directory will be used to effectively signpost people with low level social care/community enquiries to appropriate resources. Such signposting will be recorded so to support future commissioning activity in the borough.

When support planning with people, the Directory will be used to enable people to make informed decisions around how their outcomes and potential personal budget could be spent. The types of services available through the Directory will be linked to the activity of daily living domains used within our assessment framework.

The assertion of the Directory within the delivery of social care support will promote providers to give better information around who they are and what they offer. The better promoted and locally received an organisation is within the Directory will have a direct link to the amount of future business they receive from local people. Organisations, individuals, groups and networks will be given templates and guidance to support them to articulate their offerings, including timetables of events and support

The effectiveness of the Directory will solely be based around it remaining up to date and effective in the content that it delivers. Organisations will be engaged around the value of their presence on the DCID and existing contracts with organisation used to maintain standards.

Community volunteers will be utilised to check the accessibility and value of the content displayed, making a contribution to the Local account.

### **Essential Guide to Social Care**

The Essential Guide to Social Care has been developed to promote understanding around personalised Social Care services. The guide, although extensively delivered in DACHS, will be promoted across the wider Council, its partners and stakeholders, to increase consistency of understanding in how Adult Social Care is provided.

### **Information Management and Marketing**

Any information or publication being produced will be as accessible as possible. Readership panels will structure this approach with the public being regularly asked to feedback upon the effectiveness of information we provide.

A range of marketing campaigns will raise awareness of, in particular, our preventative services and the support on offer. Such campaigns will be structured by a programme communication and engagement plan.

### **Community Contact Points**

A range of community contact points are being established which support and provide information around Adult Social Care. Based loosely around the Living Well Feeling Safe partnership, training will be provided to partner organisations around:

- How Adult Social Care works;
- The Dudley Community Information Directory;
- Safeguarding.

The contact points will generally be associated with Public access buildings such as libraries, community centres, colleges and places of worship. Local maps will be produced that promote the community contact points to the general public.

## **Community and Voluntary organisations**

Organisations that are funded through service level agreements and grants have a positive role to play in the effective information and advice provision. Organisations will be provided with support to utilise both the Dudley Community Information Directory and the Essential Guide to Social Care.

Regular provider meetings will be used to enable effective communication around specific areas of change and/or issue.

This support will enable the public to have a greater awareness of the support available from these organisations. From a contractual perspective the public's demand for, and take up of, such services will structure future commissioning activity.

## **Workstream 2 - Active and Supportive Communities**

- *“Making it Real theme 2. Active and Supportive Communities – Keeping friends, family and place”*

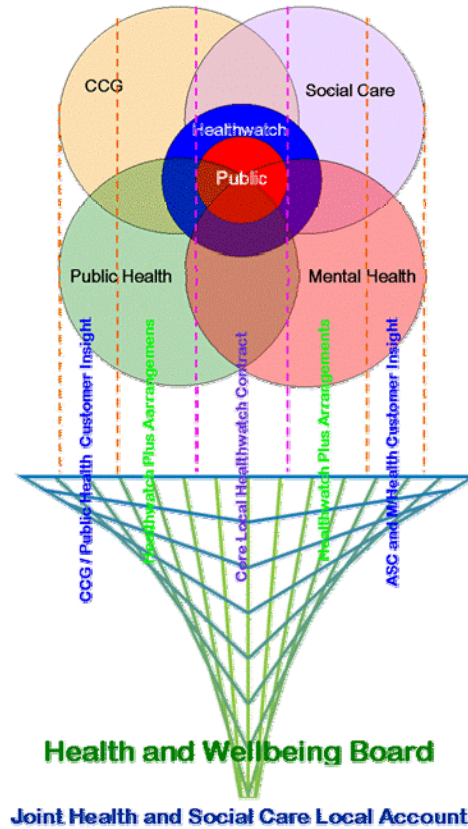
Workstream 2 will be associated with:

### **Engagement**

A model which provides a collaborative approach across Health and Social Care, and utilises Healthwatch as the central vehicle for effective engagement in the borough, will be in place. A Healthwatch contract would identify core priorities for Health and Social Care which have been negotiated and agreed through the Health and Wellbeing Board, or instructed as part of the National Healthwatch agenda through the resources provided to the LA from Department of Health.

Existing resources from Health and Social Care will be realigned through the Healthwatch Organisation as the central vehicle for engagement in the borough. The diagram below details this approach at a strategic level.

# Joint Health and Social Care Engagement Strategy



The primary focus for Healthwatch will be delivering against the requirements and deliverables, as laid down in its core contract. However, in addition to this, Healthwatch would take on additional duties paid for through the realignment of existing funding streams and any potential new money, to provide engagement activity on behalf of the Local Authority, CCG, Mental Health Trust and Public Health.

At a strategic level this funnel of customer insight will support the production of a Joint Health and Social Care Local Account, which would be circulated to citizens as a qualitative document and would form part of the suite of documents that support the Borough's JSNA.

At a practical level, the approach will provide opportunities for local people to be engaged in Health and Social care at a level and pace that suits them. Opportunities will include:



- Joining the Making it Real structure of meetings;
- Local forums and networks;
- Post and email Correspondence;
- Specific events;
- Social Media.

The approach will pull together all existing engagement activity across Health and Social Care to provide a greater number of local people with a voice.

## **Transport**

Utilising previous and current engagement activity around transport in the borough, we will establish a local steering group who will develop a plan of how Transport in the Dudley Borough can meet the aspirations of local people.

This steering group will establish what it is possible to influence locally and what we cannot. It will determine how existing Council resources are spent on Transport and make suggestions of alternative solutions that will contribute to a menu of transport options in the borough.

Once established, with a clear remit in place, this steering group will facilitate a further public engagement event to evidence that the development proposed fits with local views and requirements.

We will identify a range of policy statements that clarify transport issues in the borough. These include:

- Can transport be purchased within a personal budget?
- In support planning, should the use of DLA and mobility vehicles be identified and required to meet any outcomes associated with transport?

## **Employment**

We will work with local people to understand the barriers that prevent people with disabilities who want a job from getting a job. This will involve partnership working with local people, employers, the Department of Work and Pensions, Job Centre Plus and Employment Support agencies.

Determining people's aspiration for employment will become an integral part of our assessment process.

Work will be undertaken with individuals, families, local schools, colleges and employers to raise aspiration around employment, challenge assumptions, and assert the skills and experience that local disabled people can bring to potential employers.

A range of pre-employment support services will be developed further that prepare people for employment, encourage individuals to understand their capabilities and skills, and develop informal mechanisms that support people in the work place.

### **Dudley Innovation Fund**

An innovation fund is in place which supports local organisations, groups and individuals, to setup and deliver innovative services/support to local people. Innovation is about providing a real alternative to how social care has been traditionally delivered.

Innovation will be defined in local context, in that local people and communities will be supported to articulate local deficits and opportunities that would benefit from both the financial and business development associated with the fund.

The innovation fund will support the Council in shaping its future commissioning activity specifically in the shift from unit procurement to outcome delivery.

### **Mutual Skills and Assets Exchange**

Local people and organisations will establish a working group to consider and facilitate the development of methods, approaches and services that build local community capacity, define social capital and support active citizenship. Support mechanisms and approaches will be established that:

- Promote Knowledge around what's happening in local communities;
- Increase opportunities for friendship and social networks;
- Reduce isolation and promote involvement;
- Empower people to recognise their own skills and ability to contribute.

Such approaches and mechanisms will reduce the number of contacts to the Council and will also be integral part of support planning activity.

### **Workstream 3 - My Support My Money**

- *“Making it Real theme 3. Flexible integrated care and support – My support, my own way.”*
- *“Making it Real theme 5. Risk enablement – feeling in control and safe.”*
- *“Making it Real theme 6. Personal Budgets and self-funding – my money.”*
- *“Local Theme 7. Carers.”*

## Single point of contact

A single point for telephone/e’mail enquiries for social care for all new people and existing people with a significant change in need, will be in provided through our Access team.

The Access team will:

- Determine the reason for the call;
- Using the DCID signpost people to universal services and low level pieces of equipment;
- Construct Wellbeing plans from the DCID;
- Deal with crisis and safeguarding referrals;
- Provide Initial screening against FACS.

People with established support arrangements provided by specialist teams, such as the community team for people with learning disabilities and community mental teams, will be provided with specific details in their support plans that will enable to contact appropriately skilled workers within the specialist teams as required.

## Prevention

Prior to awarding a personal budget we will enable and support people to reach their optimum level of Independence within their own home and community. This will involve ensuring that for each and every person we support:

- All Community resources have been utilised;
- Their home environment is as accessible as possible;
- Basic telecare has been provided as a minimum;
- Disability related benefits have been maximised;
- Carer support services (were a carer is identified) are in place.

Direct provision of Reablement services should be utilised from a positive risk taking perspective, to enable people to test out their independence around such preventative solutions in a safe environment.

## Reablement/Intermediate Care

Direct provision of reablement support and care will be provided to all new people presenting as having FACS eligible needs at the point of contact. The provision will have capacity to meet both crisis and planned requirements for support, but will not work with people on a permanent basis.

Both bed and community based support and care will be available, however, bed based services will only be accessed if it is not possible to support the person in their own home.

New people being supported by reablement and intermediate care can be associated with two groups:

- **People with potential to be more independent** - the duration of reablement/intermediate care offered to this group will generally be associated with up to 6 weeks of support. This duration can be increased if there is evidence of further therapeutic need, or can be reduced at the point of reaching optimum levels of independence.

During the period of reablement all preventative approaches detailed earlier in this document will be provided and evaluated.

Any complex moving and handling needs will be assessed with any requirements for 2-1 support being evidenced.

- **People with complex needs** – the duration of the support offered to this group is again associated with up to 6 weeks of support. However, the purpose of the service is to stabilise any crisis situation and support the assessment of presenting complex needs.

Reablement and intermediate care services will have enough co-ordinator capacity to manage both community referrals and hospital discharge into and from the service. This capacity will mean delayed discharges are an exception to rule.

## **My Worker**

During any intervention where a person's independence cannot be achieved by either universal or preventative support, then a co-ordinating worker will be identified. The person accessing the service will be provided with their worker's name and contact details for the duration of any supported intervention.

The co-ordinator will be identified as the professional most suited to the person's presenting needs and circumstances. Co-ordinators will generally be from the following group of staff:

- Social workers;
- Occupational Therapists;
- Community Nurses;
- Non-qualified field work staff.

This group of staff will all be trained to provide a core level of health and social care activity that will include:

- Access to Living Well Feeling Safe;
- Provision of low level community equipment;
- Provision of low level telecare;
- Access to the Dudley Community Information Directory;

- Personal Budgets and support planning;
- Homelessness;
- Initial Safeguarding.

This approach will ensure a reduction in handovers between staff, whilst also empowering staff to support people more holistically. Mechanisms will be established that ensure workers remain informed of available services and equipment as new developments become available.

Multi-disciplinary working is valued within the approach but should be provided proportionately.

### **Assessment Framework**

A core assessment framework will be established based on the following four tools:

- Community care assessment – The MAF1 will be used to determine FACS eligible needs, assess and confirm any informal care, and identify preventative supports.
- Personal budget assessment – The MAF2 will be used to support the person to define their health and social care outcomes and to calculate a personal budget.
- Support plan – This will determine how the persons outcomes are to be achieved including how a personal budget will contribute to established preventive support, informal care and community activity.
- Review – The document will establish the effectiveness of the support plan and confirm the level of support required in the future. As such every review is a reassessment that should include a recalculated MAF2 .

Central to each of the tools will be person centred approaches that, by valuing a person's skills and assets, and people using our service/carers will be directly involved at all stages of our processes, and wherever possible, needs, wants and outcomes will be determined by them. Nine domains associated with activities of daily living will run through the frameworks. Each of the tools will enable different professions and teams to contribute to overall assessments and plans.

A range of specialist assessment will equally contribute to the framework but will be undertaken on a proportionate basis. Such assessments include:

- Mental capacity assessment and best interest;
- Risk assessment;
- CHC screening tool;
- Impact assessment.

## **Personal Budgets**

Any Dudley citizen with assessed ongoing critical or substantial needs associated with Fairer Access to Care Services criteria will be provided with a Personal Budget. A document will be in place that provides a clear and honest description of how a personal budget is calculated including how the resource allocation system works.

People will receive formal correspondence detailing the value of their budget and how it was calculated. This will include how any informal care has affected the budget calculation.

The resource allocation system, whilst remaining in budget, will provide allocations that correspond with both a person's level of need and the cost of local provision.

The budget that is calculated from the MAF 2 is the starting point for support planning. However this budget cannot be determined as inappropriate until planning has been undertaken.

If, through support planning, it can be evidenced that the value of the starting budget is not enough, then an impact assessment can be undertaken to support an appropriate increase to the budget.

Personal budgets will be provided to people through a range of payment mechanisms that enable people to take as much or as little responsibility for managing the money as they choose. Support to manage the money will be provided through a range of organisations and approaches that include:

- Low level financial accounts;
- Payroll services;
- Fully managed and support budgets;
- Cash paid to the individual.

Personal health budgets, upon implementation, will follow the same approach as social care funded personal budgets providing consistency to local people.

## **Support Planning**

Support planning will be central to the delivery of holistic and person centred Health and Social Care in Dudley Borough. Support planning will become a process rather than a one-off meeting.

People will have one plan and as a process, this planning will start at the point of contact, enabling people with lower level needs to receive a plan that details how they will be supported through accessing universal services, equipment and telecare.

Any required reablement/intermediate care will also contribute to the personal support plan as well the availability of informal support.

Working in this way will mean that at the point at which a personal budget is calculated, this budget is only a contribution to the plan rather than being its sole component.

Support planning will be delivered through two mechanisms:

- Do it yourself – support will be available in both online and written form that enables people to support plan independently with additional peer support on offer.
- In Partnership – in this model different elements of support would contribute to the plan, including the person, their carer, Council/health staff and providers.

Regardless of how it was developed, all support plans must articulate how the person's outcomes will be achieved:

- Legally;
- Effectively;
- Affordably.

Plans will be structured in such a way that with supplementary training, a positive approach to risk taking will be established. A risk enablement panel will be in place to support an organisational acceptance of the benefit associated with positive risk taking.

Plans can be developed in a range of mediums such as video and audio, but will still be recorded on the Council support planning template on AIS.

Through an online support planning platform, people will be able to contribute and make pre-agreed amendments to their plan. This platform will also enable Health partners and providers, with the person's consent, to contribute to planning activity.

Plans will identify the level and frequency of review required, and will focus on both immediate and long-term goals.

### **Electronic Social Care Record**

AIS will be the only electronic system utilised to add to a person's electronic social care record. Swift access will be restricted to ensure compliance in AIS usage. Information recorded in AIS will be proportionate to the level of service received by a person, or the nature of our involvement with them.

Process navigation will be established for core inputting activity to ensure data quality. Data Quality reports will be run on a weekly basis and sent to individual workers for rectification. Non compliance will be escalated to team managers.



AIS will be used by team managers to structure individual case management and agreed timescales will be determined for all core activity to support effective workload management.

All forms used by the Directorate will be built into AIS; only external documents will be scanned and indexed.

## **Carers**

The Carer's Strategy Group, and its function, will be re-launched to support the future development of carer support services.

Market position statements will be produced in relation to Carer's support services, both internal and external to the Council, identifying specifically the range and depth of services funded. At the point of review Commissioners will work in partnership with organisations and carers to determine required outcomes and service performance measures.

An online carer's assessment will be developed that will signpost to appropriate services, and enable people to access carer's direct payments and information and support services. This assessment will be used through our Access team and through our network of carers support organisations.

A specialist carer's assessment will be developed, to support complex situations. It is envisaged that this will only be used in a minority of cases.

Our personal budgets approach will take full account of any informal support a carer is willing and able to provide.

To ensure carer's assessment and support services are given priority, external support capacity will be available in the borough.

## **Performance**

A new set of local performance measures will be established that enables the effectiveness of Making it Real to be measured. The approach will be based on both quantitative and qualitative measures to provide a balanced view. Our Local Account will be the primary construct of measuring such performance. We will also link to best practice emerging from Think Local, Act Personal and the Towards Excellence in Adult Social Care (TEASC) programme.

A performance culture across the workforce will be developed, with workers and managers having access to performance dashboards that support the service to be as efficient and effective as possible.

The demand management model will be developed further to support all future development and investment in Adult Social Care, by providing benefit realisation data around the effectiveness of options being considered at the point of change.

In order to externally verify our performance, we will actively engage and promote peer challenge from our local authorities, whilst also utilising comparative data from such authorities.

## Workstream 4. Workforce

*“Making it Real theme 4. –my support staff.”*

### **Direct Payments**

All new people eligible for ongoing community based social care services will be given a personal budget through a direct payment. Direct payment support services will provide a range of support that enables people to take on as much or as little responsibility for management of the money as they can. The Council will not normally directly commission any long term community based services on a person’s behalf, unless required through a crisis situation.

(The only exclusion to this is the commissioning of Council provided services. Such services, if chosen by the person, will be taken from the personal budget at source at determined market value costs.)

The support plan will include a money management section that adds proportionate resources to a person’s personal budget so to fund the direct payment support services they require.

A framework of direct payment support services will be established and Quality ratings systems will be used to enable people to choose their direct payment support provider at the point of support planning and annual review. The framework will have no contractual value and will be open so to enable new providers to offer their services. A provider forum will be established to ensure continuity of service from direct payment support providers.

Support plans will detail how the direct payment will be spent and will identify levels of variation that do and do not require Council validation.

The frequency of financial review of the direct payment spend will be determined through the support plan and adopting a principle of proportionate assessment. However, financial reviews will be completed on an annual basis, as a minimum, as part of the annual review.

At the point at which it becomes lawful, direct payments will be provided to people choosing to purchase residential care.

## **Personal Assistants**

We will have a Personal Assistant Pool in place that is promoted through the Dudley Community information Directory. A quality ratings system will enable people to make informed choices from existing Personal Assistants, whilst links to Job Centre Plus and the DCID will enable people to advertise for staff.

Support services will be in place, that support local people to co-ordinate the use of Personal Assistants, so to manage sickness and annual leave. Such services will support Personal Assistants to access Council provided training and development opportunities. The cost of this support will come from the person's personal budget.

Guidance will be provided around levels of pay to Personal Assistants but will be determined by the person within the confines of their personal budget.

All Personal Assistants must have an up-to-date DBS check in place and not be barred by the ISA.

Support plans utilising Personal Assistants must demonstrate that the Personal Assistant has the required skills and ability to effectively support the person. An interim package may be required to enable vital training to take place.

Any request for a family member living in the same household to be employed as a Personal Assistant must be signed off by a risk enablement panel. Managed accounts should be utilised to mitigate potential financial abuse.

## **Quality Mark**

The Community Catalysts Quality Mark will be expanded to provide a quality ratings system which enables people purchasing services from a personal budget to make an informed choice. The quality mark will be applied to:

- Domiciliary care services;
- Residential care homes;
- Extra Care schemes;
- Personal Assistants;
- Direct Payment Support Services;
- Day services.

The New Quality Mark will continue to award Silver and Gold levels of attainment to providers meeting the required criteria. The quality of life standards will, however, be an additional contributing factor, as will a clear correlation between the quality mark and achieving support plan outcomes.

When supporting people to plan their support and personal budget spend, Council staff will only utilise the Dudley Community Information Directory. The services identified above will receive priority of placement on the directory

upon registration with the quality mark. A provider's current attainment level will be displayed within the directory.

### **Customer ratings system**

A customer ratings system will be established against all providers listed within the Dudley Community Information Directory. The ratings system will enable local people to provide constructive feedback of the services they receive so to enable future customers to make informed choices. This will not replace existing approaches to managing complaints or safeguarding alerts.

The ratings system will be based on a five star model with customers being able to rate their provider from 1 star (poor) to 5 stars (excellent). The Information Directory will enable people to informally provide feedback and rate their provider, and will be utilised to provide feedback at all annual reviews.

A clear narrative must be provided against all feedback and providers will be offered the opportunity to respond.

The ratings system will be managed and moderated by the Contracts and Commissioning team in the Council. Any rating of 1 or 2 stars will trigger moderation prior to public view. Moderation undertaken will ensure that the ratings of providers are appropriate and not unduly affected by vexatious individuals. The moderation system will also be used to trigger quality and commissioning audits of providers who repeatedly receive poor ratings. Consistently poor ratings will result in the provider being removed from the Information Directory.

Such information will be utilised alongside comparative information provided by the Care Quality Commission and Healthwatch reviews, to inform future commissioning of services.

### **In-house provision**

All in-house ongoing provision will be supported to operate in a similar manner to independent sector providers. Each service will have a notional unit cost determined that is equal to that of equivalent independent sector provision. Individual services will be budgeted against the identified notional costs and units of available capacity.

Such notional costs will be taken at source from the personal budgets of people choosing the service and attributed to the services trading account. Each service will be required to register for the quality mark and promote their services through the Dudley Community Information Directory.

In order to demonstrate sustainability and evidence that services are wanted by local people, each service will be required to have delivered a minimum of 80% of its budgeted capacity on an annual basis.

## **Market Position Statements**

To support our ambition that people will have choice and control over how they receive support, based on prevention, on promoting independence, better quality of life and effective personal budgets, we will establish market position statements over the full range of social care provision in Dudley.

To achieve this aim we will influence, help and support the local care and support market to achieve better outcomes and value. We will:

- Work together to improve outcomes for people who need care and support;
- Pool and share market information;
- Be transparent about the way we intend to strategically commission and influence services in the future, and how we wish to extend choice to care consumers;
- Ensure that services are available that local people want and need.

## **Quality of Life Standards**

Locally developed Quality of Life Standards will form part of any contract with providers delivering social care in Dudley. Our approach to reviewing the effectiveness of people's support plans will equally be structured around such standards.

The Quality of Life Standards are written and agreed by people who use our services/family carers, and are designed to shape and improve outcomes for people in their lives, and the way services are delivered to them. The Quality of Life Standards come with a description of what the standards mean. These descriptors provide clarity to the provider on changes they may need to make to their service delivery. They also enable people who use services to understand their rights and what the standards should do for them. The Quality of Life Standards then form the basis of our person centred, qualitative approach to contract monitoring and review. We will expand our capacity for monitoring, review and audit of the quality, and safety of services, by building a 'lay' resource including people who use services, carers, and Elected Members.

## **Micro Enterprises**

We will build upon our existing development with micro enterprises, in parallel with market position statements, to continue to increase the number of micro providers in the borough. Moving to a default position on direct payments will support increased business and sustainability to such providers.

## **Culture Change**

A range of workshops across the Council's internal social care workforce, partners and through provider forums will be undertaken to develop an empowered and engaged culture within the Health and Social Care sector in the borough.

The resulting outcome will be that the sector takes on a shared responsibility for delivering Making it Real in Dudley. All providers and organisations will have pledged their commitment to Making it Real and developed internal actions plans.

Within Adult Social Care individual teams plans will be structured and reported against the Making it Real "I" statements, alongside structure approaches to supervision and progression.

## 4. Target Operating Model

The target operating model details who the aspirations of Making it Real will be structured into the overall customer journey of people contacting the Council for social care support. The Model establishes the purpose of social care services in the borough to:

- Promote and maximise independence;
- Support people to remain in, contribute to, and benefit from their own community;
- Enable self direction of quality care and support;
- Safeguard.

### Approach

In order to meet the demands of current and future social care support, the target operating model defines the Adult Social Care approach in working with both the wider population around universal services, through to meeting complex levels of need and vulnerability through a personal budget.

The approach is based upon a number of tiers of interventions that are designed to promote independence. A person contacting the Council for support will be guided through the differing interventions until a maximum state of independence has been reached. At which point a support plan, documenting how such independence will be maintained, will be completed.

In supporting people to reach a maximum state of independence the model aims to provide the most person centred and efficient experience possible. As such the model asserts the following standards:

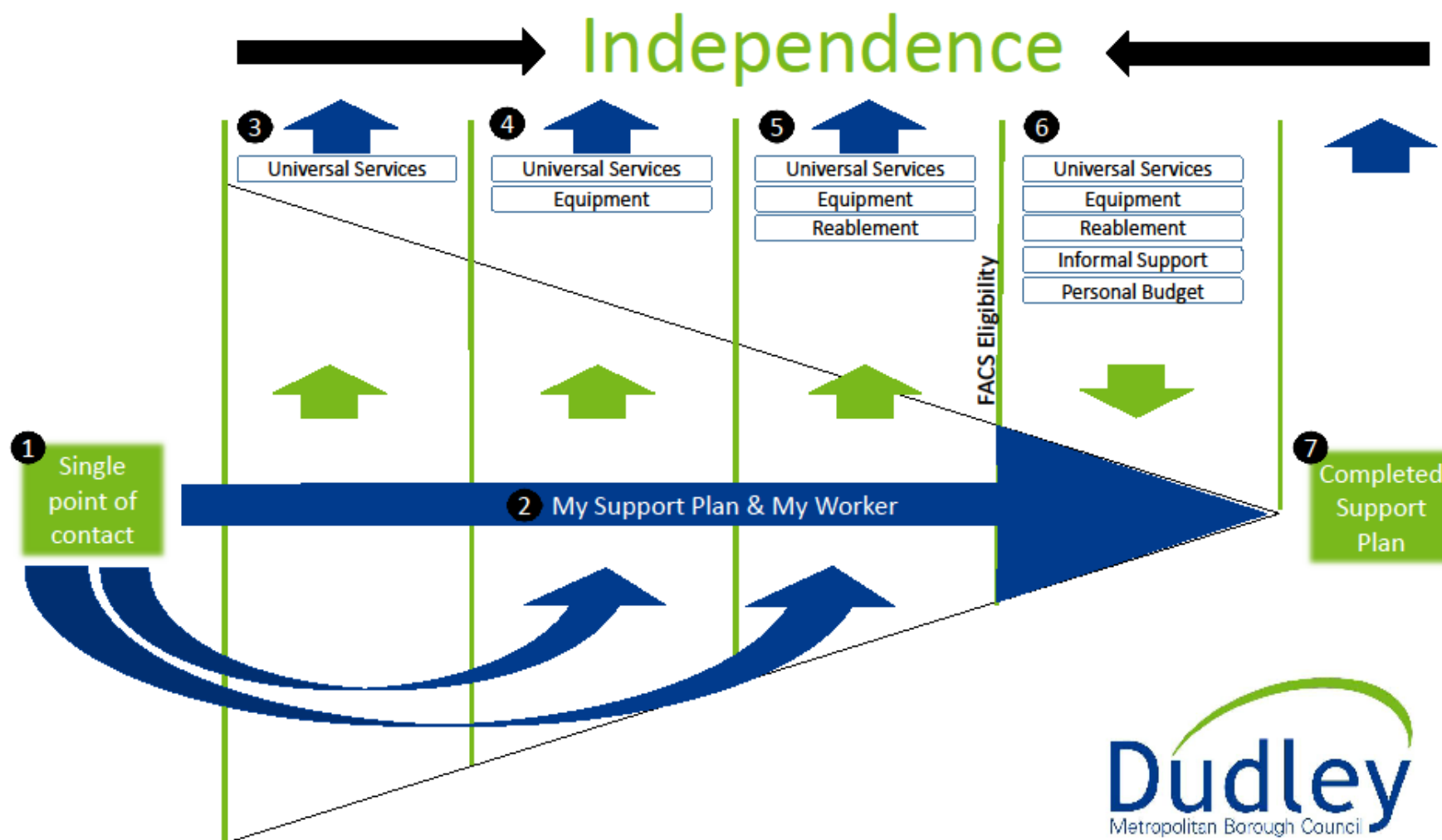
- People will only provide their personal details and circumstances once.
- A named point of contact will co-ordinate and be in place throughout any intervention.
- Personal choice, assets and skills will be the starting point of any support.
- Assessment and support plans are not duplicated or completed in isolation.
- A culture of resolution and customer satisfaction are at the centre of all we do.
- Support to Carers will be accessible and tailored to the needs of the carer.



- The model will evolve and be responsive to the needs and feedback of local people.

## The Model

The diagram provides an illustration of the model with each of its functions numbered to correspond with the following descriptive statements.



## 1) Single Point of Contact

A single point for telephone/e'mail enquiries for social care for all new people and existing people with a significant change in need will be provided through our Access team.

The Access team will:

- Determine the reason for the call;
- Using the DCID signpost people to universal services and low level pieces of equipment;
- Construct Wellbeing plans from the DCID;
- Deal with crisis and safeguarding referrals;
- Provide Initial screening against FACS.

## 2) My Support Plan/My Worker

Support planning is a process that starts with the person at the point of contact.

People only have 1 plan which is contributed to by any service/team/provider working with a person. Plans must not be solely based around personal budget spend.

Once we have agreed to complete an intervention with somebody, we will identify a co-ordinating worker and provide contact details for the period of intervention. The co-ordinating worker will be the best placed individual to support the customer, based upon their presenting situation and to facilitate their plan.

## 3) Universal Services

Universal services are such services that are open and available to the whole population of the Dudley Borough.

The DCID will enable people to self-serve through internet access and a range of community contact points.

Upon contact with the Access team, the DCID will be used to identify available services that may promote the person's independence. We record the details of all referrals we make to universal services and provide a call back service to ensure the service identified is appropriate.

#### 4) Equipment

Through our Living Well Feeling Safe partnership we will develop a universal offer of low level equipment and technology that promote a person's independence.

Should a person's needs not be met through access to universal services, then this universal offer will be provided as a minimum.

The Access team will utilise an online assessment that enables appropriate pieces of equipment and or technology to be identified and will provide such equipment accordingly,

#### 5) Reablement

All new people (all client groups) with assessed FACS eligible needs will be provided with either a community or residential based reablement services for a period of up to 6 weeks. This period can be extended or reduced based on therapeutic benefit.

This service will provide both planned and crisis responses and where appropriate work with people already in receipt of a personal budget

During the period of reablement all universal services and equipment solution will be implemented and tested with regard to effectiveness

#### 6) Personal Budgets

Any person who has been supported through the customer journey, yet continues to have FACS eligible needs, will be provided with a Personal Budget.

The Personal Budget will be calculated on the basis that the person, through the customer journey, has been supported to be as independent as possible.

Any available informal support that a carer is willing and able to provide will be included in the budget calculation, and support arranged to meet any identified carers needs.

## 7) Completed Support Plan

A completed support plan will provide a holistic record of how a person is choosing to achieve their health and social care outcomes.

The plan will start with the person's individual skills and assets and will document the support they have received through the customer journey.

Providers selected by the person will contribute to the plan to articulate how they will support the person's outcomes.

The plan will detail how often it needs to be reviewed and what can be changed in the plan without contacting the Council.

Based upon the plan, the person will finally determine how their personal budget will be managed from a range of direct payments support options.

## 5. A Learning organisation

*Comments are welcomed in this section that identify approaches to how we will continually capture local people's views of our services through all interventions, and how do we then enable such views to influence future service development.*

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## Jargon Buster

Term	Definition
Abuse	Harm that is caused by anyone who has power over another person, which may include family members, friends, unpaid carers and health or social care workers. It can take various forms, including physical harm or neglect, and verbal, emotional or sexual abuse. Adults at risk can also be the victim of financial abuse from people they trust. Abuse may be carried out by individuals or by the organisation that employs them. (SCIE, 2013)
Access to adult social care	This is the service that offers a first point of contact for all things adult social care including signposting. The access to adult social care team is made up of experienced social workers and customer services officers who will offer advice and information about the full range of social and community activities and not just those traditionally associated with social care.
Adult Care Assessment	The formal assessment of care needs which is done by a social worker.
Adult social care	Adult social care covers a wide range of services or help, provided by local authorities and the independent sector to people either in their own homes or in a care setting.  <i>Care and support for adults who need extra help to manage their lives and be independent – including older people, people with a disability or long-term illness, people with mental health problems, and carers. Adult social care includes assessment of people’s needs, provision of services or allocation of funds to enable you to purchase your own care and support. It includes residential care, home care, personal assistants, day services, the provision of aids and adaptations and personal budgets. (SCIE, 2013)</i>
Advocacy	<i>Help to enable you to get the care and support you need that is independent of your local council.</i> An advocate can help you express your needs and wishes, and weigh up and take decisions about the options available to you. They can help you find services, make sure correct procedures are followed and challenge decisions made by councils or other organisations. The advocate is there to represent your interests, which they can do by supporting you to speak, or by speaking on your behalf. They do not speak for the council or any other organisation. If you wish to speak up for yourself to make your needs and wishes heard, this is known as self-advocacy. (SCIE, 2013)
Ageing Well Programme	Funded through government and the local government agency, the national ageing well programme helped to support local authorities and organisations to develop innovative ways to support the ageing population <a href="http://www.local.gov.uk/ageing-well">http://www.local.gov.uk/ageing-well</a>
Aids and adaptations	<i>Help to enable you to get the care and support you need that is independent of your local council.</i> An advocate can help you express your needs and wishes, and weigh up and take decisions about the options available to you. They can help you find services, make sure correct procedures are followed and challenge decisions made by councils or other organisations. The advocate is there to represent your interests, which they can do by supporting you to speak, or by speaking on your behalf. They do not speak for the council or any other organisation. If you wish to speak up for yourself to make your needs and wishes heard, this is known as self-advocacy. (SCIE, 2013)
Assessment	<i>The process of working out what your needs are.</i> A community care assessment looks at how you are managing everyday activities such as looking after yourself, household tasks and getting out and about. You are entitled to an assessment if you have social care needs, and your views are central to this process. (SCIE, 2013)
Benefits	<i>Payments from the Government that you may receive because of your age, disability, income or caring responsibilities.</i> Some benefits are universal – paid to everyone regardless of their income. Others are paid to people who have particular types of needs, regardless of their income. And others are means-tested – only paid to people whose income or savings fall below a certain level.



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## Jargon Buster

Term	Definition
	Benefits in England are paid by the Department of Work and Pensions, not your local council. (SCIE, 2013)
Broker (sometimes called care navigator)	<i>Someone whose job it is to provide you with advice and information about what services are available in your area, so that you can choose to purchase the care and support that best meets your needs. They can also help you think about different ways that you can get support, for example by making arrangements with friends and family. A broker can help you think about what you need, find services and work out the cost. Brokerage can be provided by local councils, voluntary organisations or private companies.</i>
Care plan (see also support plan)	<i>A written plan after you have had an assessment, setting out what your care and support needs are, how they will be met (including what you or anyone who cares for you will do) and what services you will receive. You should have the opportunity to be fully involved in the plan and to say what your own priorities are. If you are in a care home or attend a day service, the plan for your daily care may also be called a care plan.</i>
Carer aware	An online course and resources developed by Dudley Council that helps everyone understand carers and their rights.
Carers	<i>A person who provides unpaid support to a partner, family member, friend or neighbour who is ill, struggling or disabled and could not manage without this help. This is distinct from a care worker, who is paid to support people. (SCIE, 2013)</i>
Care worker	<i>A person who is paid to support someone who is ill, struggling or disabled and could not manage without this help. (SCIE, 2013)</i>
Client contribution  See also: Self-funding	<i>The amount you may need to pay towards the cost of the social care services you receive. Whether you need to pay, and the amount you need to pay, depends on your local council's charging policy, although residential care charges are set nationally. Councils receive guidance from the Government on how much they can charge. (SCIE, 2013)</i>
Client group	<i>A group of people with social care needs who fit within a broad single category. Client groups include older people, people with physical disability, people with learning disability, people with mental health problems, and so on. (SCIE, 2013)</i>
Client/customer journey	This is a term that describes all the interactions and steps an individual goes through in order to receive care and support.
Commissioning	A structured way of deciding how and on whom public money should be spent
Community care services	<i>Social care services that can help you live a full, independent life and to remain in your own home for as long as possible. (SCIE, 2013)</i>
Community health services	<i>Health services that are provided outside hospitals, such as district nursing. (SCIE, 2013)</i>
Continuing health care	<i>Ongoing care outside hospital for someone who is ill or disabled, arranged and funded by the NHS. This type of care can be provided anywhere, and can include the full cost of a place in a nursing home. It is provided when your need for day to day support is mostly due to your need for health care, rather than social care. The Government has issued guidance to the NHS on how people should be assessed for continuing health care, and who is entitled to receive it. (SCIE, 2013)</i>
Co-production	<i>When you as an individual are involved as an equal partner in designing the support and services you receive. Co-production recognises that people who use social care services (and their families)</i>

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## Jargon Buster

Term	Definition
	have knowledge and experience that can be used to help make services better, not only for themselves but for other people who need social care. (SCIE, 2013)
<b>Criminal Records Bureau (CRB)</b>	The CRB is an executive agency of the Home Office set-up to help organisations make safer recruitment decisions. CRB checks are carried out before people are employed to carry out care and support services
<b>Dementia Gateways</b>	Dudley borough residents are benefiting from a new approach to the care and treatment of people with dementia, as well as support given to carers and family members. Anyone worried about dementia, diagnosed with the condition, their families or carers can ask for help from the borough's three dementia gateways. Staff from Dudley Primary Care Trust and the council's adult social care team are based in the gateways.
<b>Deprivation of Liberty (DOL) Standards</b>	The Mental Capacity Act Deprivation of Liberty safeguards were introduced into the Mental Capacity Act 2005 through the Mental Health Act 2007 and are a series of safeguarding standards that apply to anyone who is aged 18+, who suffers from a mental disorder or who lacks capacity to give informed consent for their care and for whom deprivation of liberty is considered after an independent assessment to be necessary in their best interests to protect them from harm.
<b>Digi TV</b>	A free 24 hour service council contact service available through their TV screen. The system allows people with digital television packages (Sky or Virgin Media) or with Nintendo Wii games consoles or internet enabled mobile phones, to access services 24 hours a day, seven days a week.
<b>Direct payments</b>  <b>See also:</b> <b>Personal budget</b>	<i>Money that is paid to you (or someone acting on your behalf) on a regular basis by your local council so you can arrange your own support</i> , instead of receiving social care services arranged by the council. Direct payments are available to people who have been assessed as being eligible for council-funded social care. They are not yet available for residential care. This is one type of personal budget. (SCIE, 2013)
<b>Disability Partnership Board</b>	A group of people made up from different organisations such as social services, health, advocacy, Connexions, Mencap, housing, leisure getting together with people with learning disabilities and family carers. Their job is to put things in place to improve the lives of people with learning disabilities.
<b>Domiciliary care</b>	See <b>home care</b> below
<b>Dudley Clinical Commissioning Group</b>	Dudley CCG was formed in July 2010 by a group of local GPs and other health professionals to take over from the Primary Care Trust in April 2013, and will be responsible for the purchasing of healthcare for people living in the Dudley borough, this process is called <b>commissioning</b> .
<b>Dudley community information directory</b>	<a href="http://www.dudleyci.co.uk">www.dudleyci.co.uk</a> is an online directory that provides everything that's going on in the community including care and support services as well as a <b>personal assistant</b> directory
<b>Dudley CVS</b>	A Council for Voluntary Service (CVS) is an independent local voluntary organisation that exists to support, promote and develop local voluntary action. Dudley CVS was established in 1974 and acts as an umbrella body for the community and voluntary sector in Dudley.
<b>Dudley Gadget Gateway</b>	<u>The Gadget Gateway</u> website helps people to find out more about assistive technology products and services that can help them to maintain independence.
<b>Dudley Voices for Choice</b>	A self advocacy not for profit service for people with learning disabilities. They work for and with people with learning disabilities to help them become more independent. <a href="http://www.dudleyvoicesforchoice.co.uk">www.dudleyvoicesforchoice.co.uk</a>

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## Jargon Buster

Term	Definition
Eligibility	<i>When your needs meet your council's criteria for council-funded care and support.</i> Your local council decides who should get support, based on your level of need and the resources available in your area. The eligibility threshold is the level at which your needs reach the point that your council will provide funding. If the council assesses your needs and decides they are below this threshold, you will not qualify for council-funded care. (SCIE, 2013)
Essential guide to adult social care	In 2012 Dudley launched the essential guide to adult social care. It is an online training course and resource that informs both the citizen, staff and stakeholder the basics of adult social care and personalisation. The days of local authorities providing a set menu of 'one-size-fits-all' services are over. Now, it's about identifying each person's individual needs and empowering them to choose the support that works best for them.
FACS Criteria Government guidelines	Fair Access to Care Services is a way to see if you have a right to social care support services paid for by the government (through the local Authority)
Falls service (Dudley)	The Dudley Falls service carries out home visits for people over 65 who have fallen or are anxious about falling. We put in place interventions to reduce their risk of falling including a strength and balance therapy programme.
HealthWatch	HealthWatch Dudley, a government funded organisation, will be an independent consumer champion created to gather and represent the views of the public in Dudley for all aspects of health and social care. <b>It will also offer signposting and advice services to patients and people who use social care services. It will also help to support patient and public involvement in the review and development of services. It is due to start operating from April 2013</b>
Home care	<i>Care provided in your own home by paid care workers to help you with your daily life.</i> It is also known as domiciliary care. Home care workers are usually employed by an independent agency, and the service may be arranged by your local council or by you (or someone acting on your behalf). (SCIE, 2013)
Independent living	The right to choose the way you live your life. It does not necessarily mean living by yourself or doing everything for yourself. It means the right to receive the assistance and support you need so you can participate in your community and live the life you want. (SCIE, 2013)
Integrated Care	<i>Joined up, coordinated health and social care that is planned and organised around the needs and preferences of the individual, their carer and family.</i> This may also involve integration with other services for example housing. (SCIE, 2013)
Living independently team	The Living Independently team helps people be independent for longer. The team is based at Cottage Street, Brierley Hill and is multi-disciplinary and brings together key aspects of adult social care to help people maintain their independence.  The team which includes social workers, occupational therapists, physiotherapists, nurses and short term assessment and <a href="#">reablement</a> team, offers co-ordinated support following an assessment which determines what package of care a person would benefit from for a period of up to six weeks.  This could include anything from installing telecare equipment to providing occupational therapy. Evidence has shown that most people are likely to regain their confidence and maintain independence after just a few weeks of support and this is already proven in Dudley.
Living Well Feeling Safe	The Living well, feeling safe scheme is a partnership scheme, offering older people living across Dudley borough, practical safety, security and wellbeing advice, in their own home

# Making it Real in Dudley

Transforming adult social care together



## Jargon Buster

Term	Definition
<a href="#">Making it Real</a>	We have developed a Making it Real in Dudley program which will set out how we will achieve personalisation in adult social care. This programme is directly aligned to the national principles as set out through a cross sector partnership called <a href="#">Think Local Act Personal</a> . The council has developed with its partners, the Making it Real high level action plan. The plan details each of the six themes from Making it Real, demonstrating what needs to happen to enable the “What we wants” of people who use services and carers to be achieved.
<a href="#">Market position statements</a>	Central to the use of improved market intelligence is the development by the local authority of a market position statement (MPS) - which in effect says what is already available, what is in development and what are the gaps in terms of availability of services and how we are going to meet the demands of people requiring adult social care support.
<a href="#">Mental Capacity Act</a>	See <a href="#">deprivation of liberty standards</a>
<a href="#">Microservices</a>	Micro services are small health and social care services and can help people who need support to have real choices about what type of services they purchase with their personal budget. Over the last three years the micro services provider has been helping small micro-enterprises develop.
<a href="#">My Story</a>	The term used in Dudley to describe case studies of ‘real people’ telling their experiences of adult social care <a href="http://www.dudley.gov.uk/ascmystory">www.dudley.gov.uk/ascmystory</a>
<a href="#">Older people</a>	<i>Older people are the largest group of people who use adult social care services. Many councils define people over the age of 50 as ‘older’, but social care services for older people are usually for people over the age of 65 – unless you have particular needs that make you eligible before this age. (SCIE, 2013)</i>
<a href="#">Outcomes</a>	<i>In social care, an ‘outcome’ refers to an aim or objective you would like to achieve or need to happen – for example, continuing to live in your own home, or being able to go out and about. You should be able to say which outcomes are the most important to you, and receive support to achieve them.</i>
<a href="#">Partner agencies</a>	Partner agencies can be companies not for profit organisations, charities, public sector organisations such as other local authorities, the Police, fires service etc who work together to achieve a common goal.
<a href="#">Peer review</a>	Peer review is a process used for checking the work performed by one's equals (peers) to ensure it meets specific criteria. In this case the Making it Real Peer Review was carried out by people who use services to evaluate how successful personalisation is being delivered in Dudley.
<a href="#">Personal assistant</a>	A personal assistant is someone that is employed by an individual to help the individual achieve their agreed <a href="#">outcomes</a> . This may in the form of providing hand on personal care or it may be help with shopping or accompanying the individual to a social event for example.  A personal assistant can be paid through direct payments or a personal budget. (SCIE, 2013)
<a href="#">Personal Budget</a>	<i>Money that is allocated to you by your local council to pay for care or support to meet your assessed needs. The money comes solely from adult social care. You can take your personal budget as a direct payment, or choose to leave the council to arrange services (sometimes known as a managed budget) – or a combination of the two.  An alternative is an individual service fund, which is a personal budget that a care provider manages on your behalf. A personal health budget may also be available: it is a plan for your health care that you develop and control, knowing how much NHS money is available. (SCIE, 2013)</i>
<a href="#">Personalisation</a>	<i>A way of thinking about care and support services that puts you at the centre of the process of working out what your needs are, choosing what support you need and having control over your</i>

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## Jargon Buster

Term	Definition
	<i>life</i> . It is about you as an individual, not about groups of people whose needs are assumed to be similar, or about the needs of organisations. (SCIE, 2013)
Pre-assessment	<i>The point at which you make contact with your local council</i> and a decision is made about whether a full assessment is necessary. This is based on the information given by you or the person who refers you to adult social care. It is often conducted over the phone. (SCIE, 2013)
Preventive services	<i>Services you may receive to prevent more serious problems developing</i> . These include things like reablement, telecare, befriending schemes and falls prevention services. The aim is to help you stay independent and maintain your quality of life, as well as to save money in the long term and avoid admissions to hospital or residential care. (SCIE, 2013)
Primary care	<i>The part of the NHS that is the first point of contact for patients. This includes GPs, community nurses, pharmacists and dentists</i> . (SCIE, 2013)
Quality assurance	Quality assurance is a process-centred approach to ensuring that a company or organisation is providing the best possible services.
Quality of Life Standards	A series of standards that set out the minimum standards for people should expect in relation to choosing and receiving adult social care and support
Queens Cross Centre	The council's support centre for adults with physical and/or sensory disabilities is called Queens Cross Network and is located on Wellington Road in Dudley
Reablement	Reablement is short-term support designed to give older people or people with disabilities the confidence to manage as many daily living tasks as possible on their own.
Readers panel	A readers panel made up of members of the older people's forum has been set up to ensure all information is tested before publication to ensure that the information is written in plain English and makes sense
Referral	<i>A request for an assessment of a person's needs, or for support from a social care organisation</i> . A referral to adult social care may be made by your GP, another health professional or anyone else who supports you. You can also refer yourself, or a member of your family, by contacting the adult social care department at your local council. (SCIE, 2013)
Reference group (local account)	The local account reference group is made up of council officers, Dudley Council for Voluntary Service (DCVS) and people who use services. The group is responsible for overseeing and producing the local account.
Residential care	<i>Care in a care home</i> , with or without nursing, for older people or people with disabilities who require 24-hour care. Care homes offer trained staff and an adapted environment suitable for the needs of ill, frail or disabled people. (SCIE, 2013)
Respite care	<i>A service giving carers a break, by providing short-term care for the person with care needs</i> in their own home or in a residential setting. It can mean a few hours during the day or evening, 'night sitting', or a longer-term break. It can also benefit the person by with care needs by giving them the chance to try new activities and meet new people. (SCIE, 2013)
Review	<i>When you receive a re-assessment of your needs and you and the people in your life look at whether the services you are receiving are meeting your needs</i> and helping you achieve your chosen outcomes. Changes can then be made if necessary. (SCIE, 2013)
Resource Allocation (RAS)	<i>The system some councils use to decide how much money people get for their support</i> . There are clear rules, so everyone can see that money is given out fairly. Once your needs have been assessed, you will be allocated an indicative budget – so that you know how much money you have to spend on care and support. The purpose of an indicative budget is to help you plan the care and

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## Jargon Buster

Term	Definition
	support that will help you meet your assessed needs – it might not be the final amount that you get, as you may find that it is not enough (or is more than enough) to meet those needs. (SCIE, 2013)
Rights	<i>What you are entitled to receive, and how you should be treated, as a citizen.</i> If you have a disability or mental health problem, are an older person or act as a carer for someone else, you have the right to have your needs assessed by your local council. You have a right to a service or direct payment if your assessment puts you above the eligibility threshold your council is using. You and your carers have a right to be consulted about your assessment and about any changes in the services you receive. (SCIE, 2013)
Risk assessment	<i>An assessment of your health, safety, wellbeing and ability to manage your essential daily routines.</i> You might also hear the term risk enablement, which means finding a way of managing any risks effectively so that you can still do the things you want to do. (SCIE, 2013)
Safeguarding	Safeguarding is a term that is used to explain how we develop measures to protect vulnerable adults in the e borough from abuse, ill-treatment and exploitation. Abuse can take many forms such as physical, sexual, emotional, neglect or financial, and can take place in many different settings.
Secondary mental health services	These are specialist mental health services provided usually by a Mental Health Trust. Services include support and treatment in the community as well as a range of in patient services.
Self-assessment  See also: Pre-assessment	<i>A form or questionnaire that you complete yourself, either on paper or online, explaining your circumstances and why you need support.</i> A social care worker or advocate can help you do this. If your council asks you to complete a self-assessment form, it will use this information to decide if you are eligible for social care services or if you need a full assessment by a social worker. (SCIE, 2013)
Self Directed Support	Support for people who are assessed as needing Social Care by <ul style="list-style-type: none"> <li>• Doing a supported assessment</li> <li>• Knowing how much money you can have to spend on your needs</li> <li>• Doing a support plan and agreeing how you will spend the money</li> <li>• Having this signed off by the a team manger to agree how you spend the money</li> <li>• Putting your plan into action</li> <li>• Having a review to talk about your plan and how you are getting on</li> </ul>
Self-funder	Depending on income and savings some individuals may not qualify for funding support from the local authority for home based social care or residential care. This may be because they do not qualify under the ' <a href="#">fair access to care</a> ' criteria, which is based on the level of your need or you have savings or assets above the 'upper capital limit'.
Service user	<i>A person who uses care services, whether you are in your own home, in residential care or in hospital.</i> The NHS is likely to describe you as a 'patient', while the council and other care providers may also describe you as a 'client'. You may also be described as a 'cared-for person', in relation to your carer. (SCIE, 2013)



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## Jargon Buster

Term	Definition
<p><b>Signposting</b></p> <p>See also: <b>Broker</b></p>	<p><i>Pointing people in the direction of information that they should find useful.</i> Your local council should signpost you towards information about social care and benefits through its helpline or call centre (if it has one), website and through local services such as libraries and health centres. (SCIE, 2013)</p>
<p><b>Single assessment process</b></p>	<p><i>An attempt to coordinate assessment and care planning across the NHS and councils, so that procedures aren't repeated and information is shared appropriately.</i> It was introduced because people sometimes have a wide range of needs and can end up being assessed more often than necessary, and information can end up getting lost. The single assessment process is widely used for older people, and increasingly for other adults with care needs. (SCIE, 2013)</p>
<p><b>Social Worker</b></p>	<p>A person who is employed by the council to do the assessment of individual's needs and who can help advise you on the best way of meeting your <b>outcomes</b>.</p>
<p><b>Stakeholders</b></p>	<p>Stakeholders is a term that describes all those parties that have an interest in a particular aim, project, service etc.</p>
<p><b>Support plan</b></p>	<p><i>A plan you develop that says how you will spend your personal budget to get the life you want.</i> You need to map out your week, define the outcomes you hope to achieve, and show how the money will be used to make these happen. Your local council must agree the plan before it makes money available to you. (SCIE, 2013)</p>
<p><b>Telecare</b></p>	<p>Telecare represents the whole range of 'assistive technology' products, which include all sorts of alarm systems. The products provide support to people in their own homes, through their link to the Dudley telecare service.</p>
<p><b>Third party</b></p>	<p>Someone other than the principals who are involved in a transaction.</p>
<p><b>Time Banking</b></p>	<p>Time banking will allow individuals across communities to volunteer their services, which may be decorating, driving, gardening for example. The time they spend volunteering will be 'banked'. The individual will then be able to then 'cash-in their time currency' and use it to recruit the services free of another volunteer.</p>
<p><b>Universal services</b></p>	<p>For many people, the big challenge isn't ill-health, it's loneliness, isolation and financial worries. This is where 'non-social care support' or 'universal' services can help. Universal services can include: health services, benefits information and advice, transport, housing, libraries, sports and leisure centres, clubs and societies and voluntary organisations and charities for example</p>
<p><b>Voluntary and independent sectors</b></p>	<p>This term is used to describe all voluntary and not for profit organisations including charities and social enterprises.</p>
<p><b>Wellbeing</b></p>	<p><i>Being in a position where you have good physical and mental health, control over your day-to-day life, good relationships, enough money, and the opportunity to take part in the activities that interest you.</i> (SCIE, 2013)</p>

### Works Cited

SCIE. (2013). *SCIE TLAP descriptors*. SCIE.