

Date: Wednesday, 18 January 2017

Time: 12.30 pm

Venue: Shrewsbury Room, Shirehall, Abbey Foregate, Shrewsbury, Shropshire,
SY2 6ND

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CABINET

TO FOLLOW REPORT (S)

6 Shropshire Council Adult Social Care - Local Account 2015/2016 (Pages 1 - 36)

Lead Member – Councillor Lee Chapman – Portfolio Holder for Adults

Report of the Director of Adult Services. **Appendix to the report attached**

Contact: Andy Begley Tel: 01743 258911

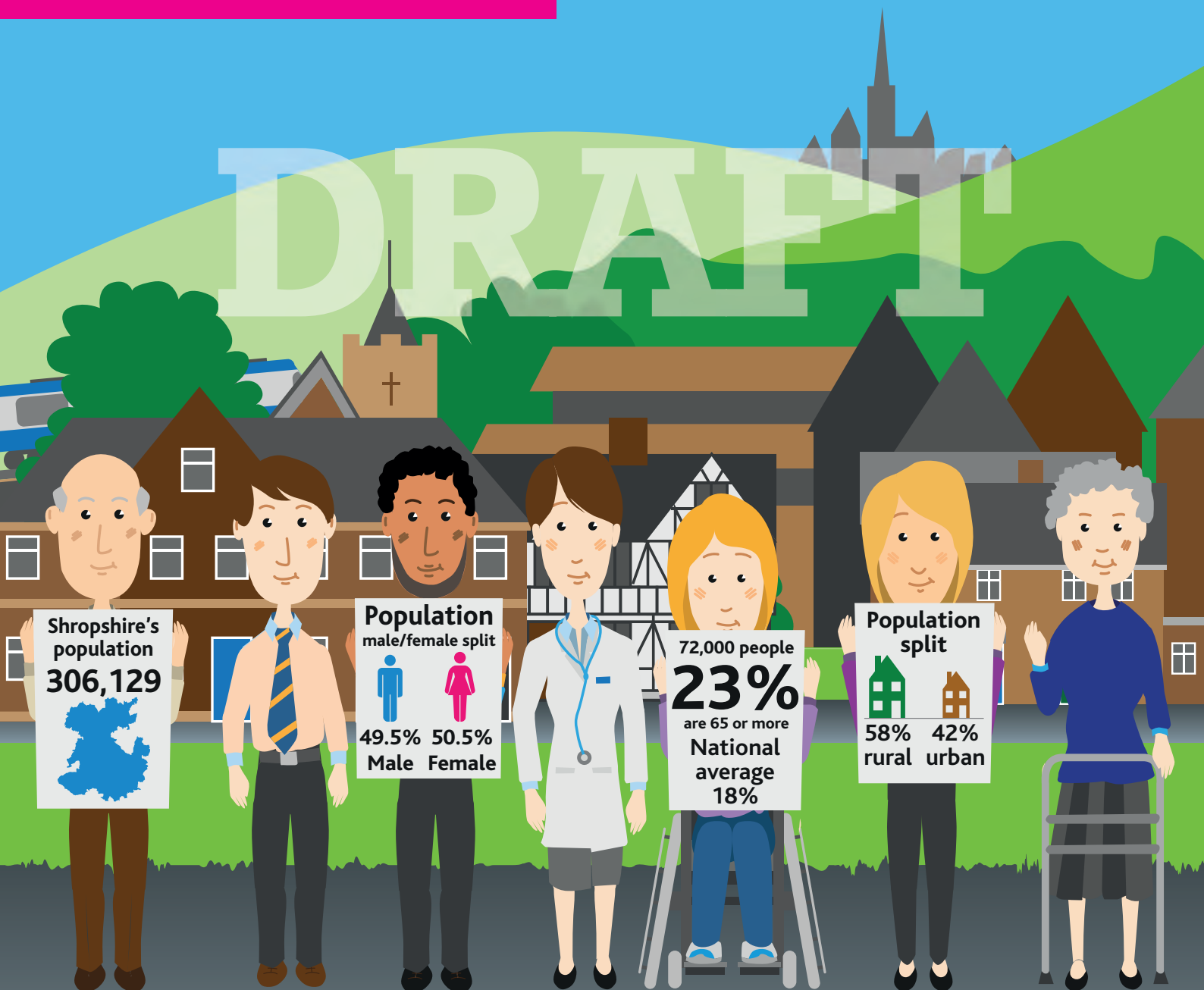
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Making it Real in Shropshire

Our story continues

Adult Social Care
Local Account 2015-16

DRAFT





What is the Local Account?

Every year Shropshire Council like other councils across the county, produce a report which tells people what its adult social care service and partners are doing to help improve the lives of vulnerable people and how well as a service it's performing. This report is usually referred to as the 'Local Account' and explains how much is spent on adult social care and where it is spent, as well as future plans for improvements the council needs to make.

In Shropshire, our local account is titled "Making it Real in Shropshire – our story continues", to reflect the national Making it Real initiative, set up by voluntary organisation Think Local Act Personal to measure progress in building the adult social care system that people want.

'Making it Real in Shropshire – our story continues' highlights the current picture of adult social care in Shropshire and tells the story of those who use adult social care, their carers, as well as people from the council and other organisations who work to provide services across Shropshire.

We hope you find this magazine of interest and that it provides you with an insight into people's experiences of adult social care and the work that is being done to help people stay independent for longer.

Making
it Real^c

Adult Services in Shropshire

If you'd like to get involved,
you can email us at:
makingitreal@shropshire.gov.uk

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Case studies in this magazine

There are real stories in this magazine which illustrate how people are supported to live independently. You can find more on the Shropshire Choices website.

An update from **Making it Real Shropshire**

Making it Real advisory groups meet every two months in Shropshire. Click here to find dates for 2017.



2015-16 has been an exciting year for Making it Real (MIR). We've met with Philip Dunne, MP for Ludlow (see page...) and we've contributed to training for People2People staff. We've also made real improvements to Shropshire Choices website as we drive to make sure that people are able to get hold of useful and easy to read information. An ongoing priority for us all.

2016 has not been without its ups and downs though. While our South Advisory group has grown, we are looking to relaunch our presence in the north of the county.

We're learning and making steady progress. One of our goals was to feedback information that might guide the development of services across Shropshire. This is something that we are getting better at with the Director of Adult Services, Andy Begley, now a regular presence at Making it Real Board meetings.

A major achievement this year has been the identification of what we feel are the 'essential ingredients' of excellent adult social care'. These ingredients have been used as the basis for training on "Excellent Customer Service" and for a Peer Review of services provided by Let's Talk Local (see page...).

What is important?

The essential ingredients of adult social care:

- ✓ An experience that is personal
- ✓ Active listening and understanding
- ✓ Real conversations, not just ticking boxes
- ✓ Effective use of resources
- ✓ Making own choices / taking own risks



In future we plan to develop a making it real 'stamp of excellence' to be applied to successful areas of work.

Earlier this year members of the Making it Real South Advisory group met with Philip Dunne MP to talk about the key issues facing social care.

The group gave Philip plenty of food for thought about adult social care in his role as Minister of State at Department of Health, and he was keen to discuss ways in which People2People and health services could work together more closely in the future for the benefit of residents living in Shropshire.



MiR member Stuart Price who organised the meeting with wife and fellow member Chrisey said;

"We really wanted the opportunity to talk to the people who make national decisions. Everyone was a little nervous about meeting an MP but on the day the meeting was great and everyone got a chance to share ideas.

"Meeting a local MP was a first for Making it Real and the discussion that took place showed the growing confidence that people have to question and challenge decisions. This is one of the key roles of the Making it Real groups which look to ensure people who use services and their carers... have more choice and control and can live as full and independent lives as possible".

SHROPSHIRE



**Passionate about adult social care?
Have your say and make a positive
difference.**

Making it Real Advisory Groups are made up from people who have an interest or are involved in social care services for adults. The Advisory Groups makes recommendations for areas of development and improvement.

If you'd like to join us in our efforts to place the people of Shropshire at the heart of shaping the future of adult social care in the county, then get in touch.

Your 'own experience' can inform change for the better.

If you'd like to discuss concerns, experiences or wish to contribute ideas then join our friendly meetings. There are currently two groups located in Shrewsbury and Ludlow. And we're going to launch a group in Market Drayton in 2017. Your views will always be taken seriously.

To get in touch with Making it Real today and contribute to helping to create a better life for people in Shropshire. Email us at makingitreal@shropshire.gov.uk or call on 01743 257705

Introductions from



Andy Begley

Director of Adult Services
Shropshire Council

"Welcome to this year's edition of our local account. This magazine details the kind of care and support that's available for adults across Shropshire. It also sets out our objectives as an organisation and our commitments to you.

This magazine is called, "the local account", as it's an opportunity for us to explain the work we do, in the hope that communities will use the information to, "hold us to account" for the quality of services we provide and commission.

At Shropshire Council, one of our main priorities is to help people stay safe and healthy in their own homes and communities for as long as possible. The services we provide have a focus on helping residents to remain independent and we work hard to make sure the limited resources we have, are used to make a real difference to the lives of Shropshire residents.

There are many projects underway that you'll read about in this publication and all of them have a focus on helping people and looking for innovations to improve our service. As an organisation, we are working closely with health and voluntary organisations as collaboration will deliver a better services for residents as well as much needed cost savings.

We want to enable people's aspirations to flourish, whether those aspirations are to cook their own meals, go shopping or find employment. Delivering these objectives will help prevent a dependency on care services as we want to people to live as independently as possible, with minimal intervention from our services.

I hope that you find this local account useful and interesting. We are keen to hear the views of people who use our services, carers and local community groups on our current service provision as well as our plans for the future, and I would encourage people with comments or feedback to get in touch with Making it Real.



Councillor Lee Chapman
Cabinet Member for
Adult Services
Shropshire Council

Social care is an important issue for everyone, regardless of age, health or personal circumstances. Shropshire Council is committed to helping our most vulnerable

people, their families and carers to get help as soon as they can.

To achieve our goal of helping people to live independently whilst meeting increasing demand for services and dealing with reducing resources, we must ensure that we focus our efforts on the areas where we can make most impact to peoples health and well-being.

We continue working to keep local people at the centre of all that we do, whilst working within considerable financial challenges.

This year's Local Account has once again been written through the eyes of our partners, the people who use and experience our services and their carers.

Although it includes some incredibly positive stories, we've also not shied away from the things that haven't worked as well; it's clear about complaints we've had and the continuing financial pressures we face. It has been a challenging year and things aren't getting any easier, but despite this what we're doing continues to work well.

Over the next year we will build on this success and use our learning to make services better. We'll be concentrating on a number of key areas over the next few months. They include creating a new plan to ensure that we can protect the most vulnerable members of our society, shaped by feedback from residents.

What we said and what we've done – a quick recap on the priorities set last year and the work we have done.

This Local Account (2015-16) tells you our story so far and how we plan to continue our journey over the next few years. These were our priorities in 2014-15. You can find out about the work we have done

- To ensure those who are eligible under the Care Act for funded support, have the opportunity and are supported to take advantage of having a direct payment
- We will work with our partners to enable individuals in hospital to get back to their own home as soon as possible
- To ensure that individuals have every opportunity to self-serve and access the advice and information they need in order to move forward and to prevent crisis
- Developing Making it Real – Developing Making it Real further to support us as we become a commissioning council, and one that is responsive to people's needs and listens to the feedback from the people it supports
- To work with our First Point of Contact team to enable them to make decisions about safeguarding concerns where there are no ongoing concerns about the safety of the individual. The purpose of this priority is to provide a timely response to the adult concerned, the person raising the concern, and improve the feedback given to them about the decision made
- To commit to working closely with partner organisations and communities, including those that signpost people to adult social care to ensure that we collaborate to achieve better outcomes for local people.

Setting the scene – Social care in a changing world

We are proud in Shropshire to have been nationally recognised by the Care Quality Commission (CQC) as the best performing council, with 94 per cent of services measured by CQC meeting the requirements.

There is no getting away from the fact that, as a result of financial pressures in Adult Social Care we, alongside other councils, face challenges over the coming months and years. Along with this, the demand for Adult Social Care rises each year as people are living longer and there are more people living with complex and long term conditions, particularly dementia.

In Shropshire the challenges increase as we have a large and sparsely populated rural geography, with a disproportionately older and growing population which is higher than the national average. As our county's population gets older the demand for our services increases. Also the average gross weekly cost of long term residential and nursing care for adults in Shropshire is £703.54 compared to England's average of £666.37.

Indeed, we've known this financial climate for quite some time and have prepared a long term plan to help people in Shropshire, by supporting and promoting stronger, more resilient communities.

The illustrations on this page give you an indicator of the demographic and budget challenges we face.

AGEING

72,000 people

23%

are 65 or more



National average 18%



56,000

Shropshire people on long-term sick.
29,000 are aged 65+



Around

15,000

people aged 18-64 have a moderate physical disability



Expected to rise to

91,200
by 2026



34,000

people provide unpaid care to a partner, family member or other person

Around

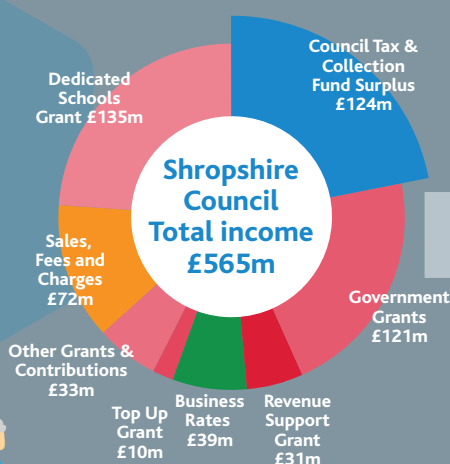
28,700

people are estimated to have a common mental health disorder



BUDGET

Income 2016/17



Expenditure 2016/17

£216m for service delivery

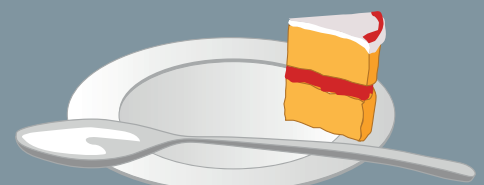


Over half goes to schools and other direct payments

£75m to provide **over 150** plus services

£141m to fund core services like Adult Services

By 2021 only £25m will be available to fund over 150 services.



Based on Shropshire's 65+ population it should get £6m more in funding!

How we work in Shropshire to enable you to be independent for longer and stay safe and well

Our vision in Shropshire is to encourage people to be independent and in control of their lives. Therefore we have adopted an early help and prevention approach that enables people to get the right support at the right time, focussing on what people can do rather than what they can't.

We've done this by changing how we support people when they contact us. We want people to find the information and advice they need as quickly and easily as possible. They can do this by visiting our recently launched Shropshire Choices website which provides advice and information on support available in Shropshire, or by contacting our dedicated First Point of Contact number where they can discuss their needs in confidence with a professional advisor.

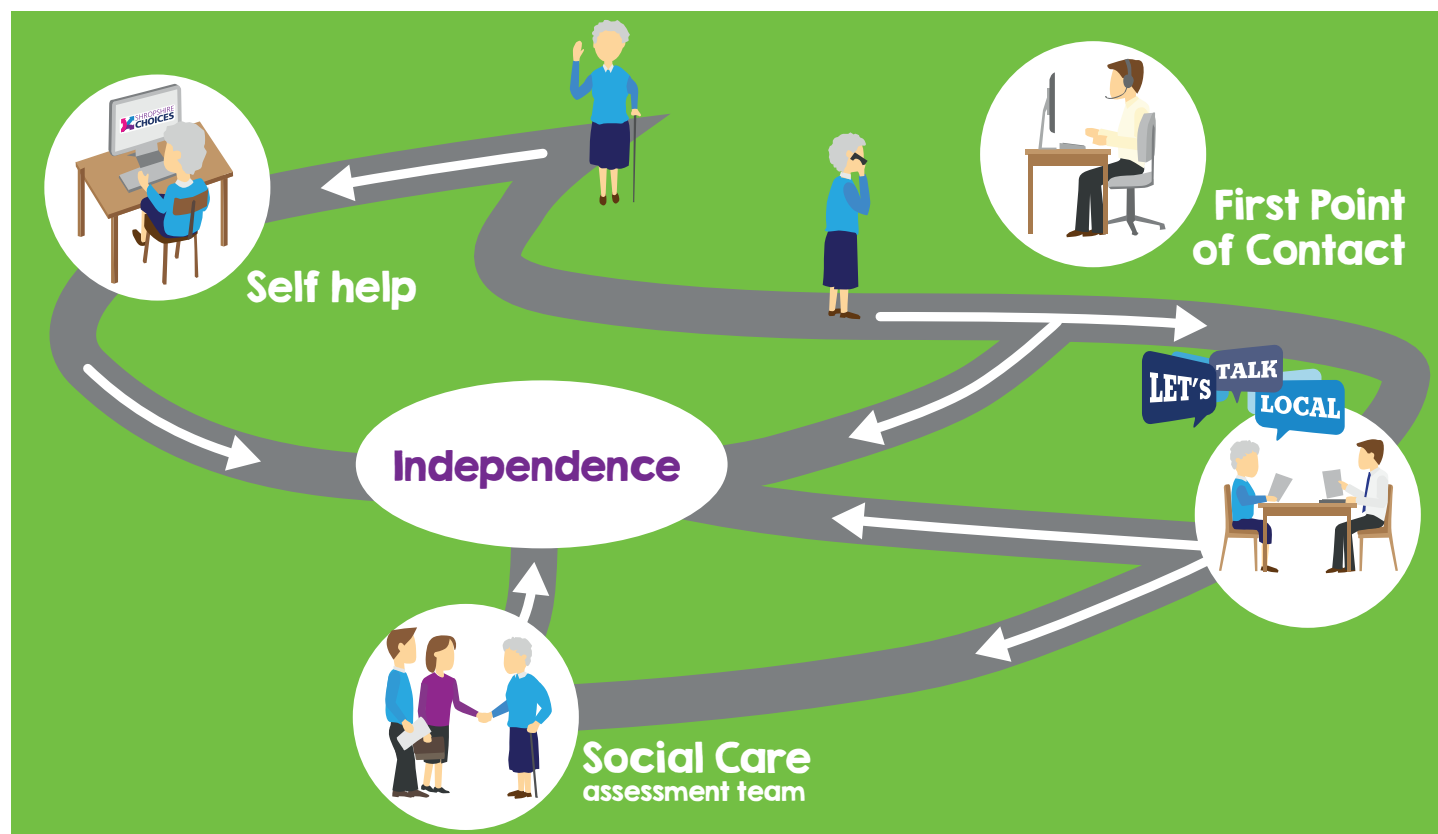
The adviser will find out more of persons circumstances. From this they will identify whether a person is eligible for a service, signpost other relevant services or invite them to a Let's Talk Local meeting.

Let's Talk Local is an opportunity for the public to meet informally with someone who is knowledgeable about social care issues and what is going on in their area. These meetings, which can either be on a one-to-one basis, or in a group session, take place in the majority of Shropshire's market towns on a regular basis. See page 16 for venues.

Over 75 per cent of enquiries are satisfactorily resolved at First Point of Contact whatever it was that was causing them a problem at that time.

For those people who need more help, further options are available.

The diagram below illustrates the various support routes available to help you make the right choice to remain independent and stay well for longer. More information about these services can be found throughout this magazine.





The new social care approach to support people to become more independent.

People2People provides social work and occupational therapy services across Shropshire for older people and adults who have disabilities and their carers. We are a 'not for profit' organisation who aim to put social work back into the community and to be accountable to local people, reducing bureaucracy and adopting a common sense approach.

"We believe in giving the right response, guidance and information to people at the right time in the right way."

We encourage and enable people to look at the community around them and find out what is already available that can benefit them. We can help strengthen these networks of support and advice.

Depending on people's circumstances – whether someone contacts us because they are worried about their own situation, that of a friend or family member, or are caring for a loved one and need guidance and advice – we offer a range of ways that we might respond to people:

This may involve:

- Putting people in touch with other organisations or services that can help
- Inviting people to a drop in Community Advice and Information event in their local area (Let's Talk Local)
- Inviting people to an appointment in their local area where they can talk to someone in more detail about their situation and develop a plan of what needs to happen to address any concerns (Let's Talk Local)
- Inviting family carers to a drop in session where they can work through their own needs, what support they could benefit from and talk to other family carer volunteers who can offer advice and information (Let's Talk Local)
- Arranging a visit from a professional Social Worker or Occupational Therapist to carry out an assessment of what is needed to maintain independence, safety and quality of life.
- For people who already receive paid support we will review and reassess their needs and the extent to which they have achieved outcomes and work with them to develop a new plan based on this.

Developing a sustainable care market for Shropshire

With more people requiring care and less money to spend, Shropshire Council is using its new online brokerage model to work efficiently with care provider companies.

Here our Shropshire Choices team talk about the development of the new brokerage model that aims to resolve the challenges people face when seeking care.

The revamped brokerage model was developed to tackle issues within the care market such as costly hourly rates, and availability of care. Also there is a lack of support for market development. These issues had to be addressed in order for Shropshire to have a well-developed and sustainable care market.

The new model has resulted in greater engagement with care providers across the county. Through the creation of two online platforms, providers are able to see what is needed and where. This means that they have greater control over future business planning.

“The Brokerage system has been excellent. It allows us to see the requirement of the council, and it allows the council to proactively engage with us, the providers, in sourcing support in the community”

Tom Ritchie – SLRCare



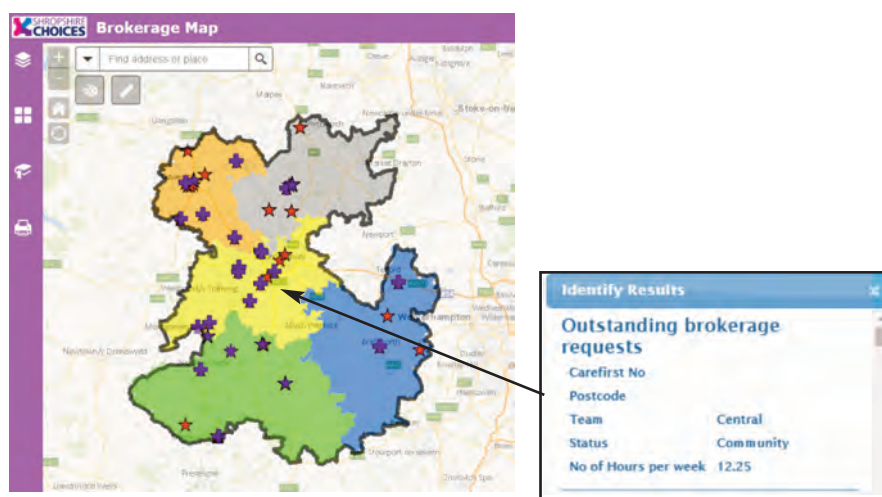
How the brokerage model works

The process begins with an assessment. If care support is necessary, we ask who can provide it. This is where the brokerage model starts.

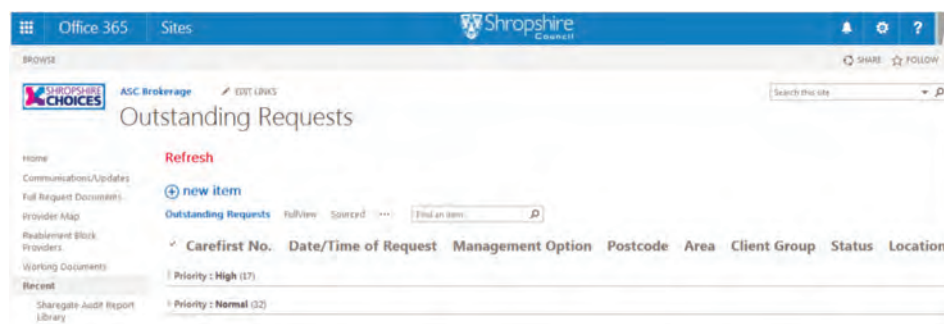
Through this model we work interactively with providers that deliver care throughout the county and establish which packages of support they can accommodate.

Providers are able to view the finer details of each package request to establish whether or not they have the specific skills and availability to support an individual.

Over 80 care providers use the online interactive map to see the location and number of hours needed.



Online interactive map.



Using an application called SharePoint care providers are able to securely log in having viewed the online map and are able to examine further details on each package request. ►►



We find the brokerage functions to be efficient and simple to use. The system enables us to access real time information in great detail... The whole process from bidding to winning is streamlined, decisions are made quickly and communicated without delay.

David Fensome – Tailored Care

There are real benefits for the care providers.

They are able to bid to provide support through an open market window. This supports the local authority to secure fair and competitive rates. Readily available information means that care providers can consider business opportunities in new areas of the county and so accurately support their recruitment drives.

There are also real benefits for people who need care support.

By using the brokerage model, we are able to examine gaps in the market which cause difficulties when trying to find availability of care. This helps to inform our future commissioning intentions so that we can ensure sufficient support is available across the county.

How do we use the information we capture?

The brokerage model provides us with a wealth of information and we can easily identify achievements, particularly relating to hospital discharges. We can also monitor the number of people seeking care in a particular postcode area and the hourly rates we achieve across the county.



We are developing this model to ensure that we have a well-established, sustainable and growing care market to support those individuals that need it. The quality of care being delivered is critical, and as we move forward, we will be looking at how the brokerage model can further support this.

Priority - We will work with our partners to enable individuals in hospital to get back to their own home as soon as possible

“Manic Mondays, (Tuesdays, Wednesdays and Thursdays)”

Michelle Pullen, a Social Work Assistant with Shropshire’s Council’s Integrated Community Support (ICS) gives an insight to the support that she provides for people moving from hospital to home.

My whole week is busy. Monday starts with what we call MDTs, which is a series of multi-disciplinary team meetings. Here, nurses, physiotherapists and social workers discuss patient needs, family concerns and how a person is managing. That way my colleague Hayley and I can start to work out what might be the best next step for someone who’s been in hospital. Our priority is to get people back to their own homes, where they want to be.

Tuesday, Wednesday and Thursday are then spent seeing patients and families: goal planning, drafting assessments, setting up care, facilitating discharge form beds, reviewing people in hospital to see if they are right to go home or into a rehabilitation bed.

Each day I meet people coming from hospital who are in a life changing situation that impacts on their future. They now see themselves very differently. I encounter people in all sorts of situations: from those who’ve had planned hip replacements to those dealing with accidental fractures or even dementia.



I always think 'that could be me or my mum'. Having a fall or fracture is bad enough but worrying about what care is needed and who's going to pay for it, makes it even worse. It's my job to support people and get them home if possible. That could mean arranging care support but it could also mean using assistive technology which maintains independence. It could mean trying things out at home after hospital. For example, it's difficult to go home and have hospital equipment in your bedroom. But once people see they can manage – their confidence grows.

I'm proud of our hospitals and what they do, but one thing I do see in my role is that 'the longer people are in a nursing setting the harder it is to go home, and even people needing low level care – develop anxieties'. So the quicker that people are comfortable and back in their own homes the better.

"The thing that drives me in my role, is that the people I'm dealing/working with could be me or my family"

That's my job. Once I've assessed a person and put in place what they need to continue their enablement at home I then hand them to the safe hands of my ICS colleagues who will ensure those needs are met. The final thing is to get people thinking about preventing or delaying a worsening of their situation. It's funny but I'm even thinking about ways in which I can prepare myself in my own home. There are too many awkward stairs in my own home. What can I do to make sure that I avoid a crisis? This is something that I talk through a lot.

Phew! That's quite a week. Though, things don't stop on a Thursday. I've just started my Social Work degree. Every Friday I go to University because I want to get even better at what I do. I've seen the care system at first hand. Now I want to improve my understanding of how to work with people and improve their well-being, get the best quality support for those who need it.

After all that it's family life and all the stresses and love that go with that. I have two children. If I can make things better for the people I work with I can make the world a better place for them too!

Case study: People2People

Michelle Hodnett, Occupational Therapy Assistant talks to Mrs Dubberley about her experience of occupational therapy.



Michelle with Mrs Dubberley and her daughter Lynda

Mrs Dubberley ...“Even as my daughters grew up we were always involved in our local community and so, following the loss of my husband in 2014, my daughter Lynda supported me to stay living in my home where I have good neighbourhood networks.

In 2015 I began to suffer frequent falls at home and following a spell in hospital I was prescribed the use of oxygen. I could not tackle household tasks and I found it a struggle to climb the stairs. As I did not want to move I decided to contact People2People to ask for an Occupational Therapy assessment. This was when I first met Michelle. Discussions focused on what was important to me and she advised me about equipment and adaptations that could make sure I stayed safe in my home.

A perching stool helped me carry out laundry tasks and lay the table for the evening meal, both giving a purpose to my day. A catalogue of kitchen utensils shows items I can purchase to help me prepare meals. A trolley helps me transport meals and drinks and a bath step and board mean a lot to my personal hygiene, dignity and respect. During my assessment we discussed how Linda and I could use techniques and equipment to conserve energy



to help me manage daily activities. Some of the ideas just didn't work but we had a lot of laughs trying.

Most helpful items have been small scale but with my medical needs I also discovered I was eligible for a Disabled Facilities Grant (DFG) to fund the costs of a stair lift at home.

I can't explain what a difference the adaptations, big and small, have made to my health and independence.

“Until you lose your independence you do not realise how important it is to be able to manage your own basic personal care and household tasks.”

Lynda, her daughter and carer, continues the story... “In September 2016 Mum became unwell and her GP Surgery contacted People2People to request a social work assessment with the idea of arranging to have paid carers to help me in my caring role. As I work part time in the local school, leaving Mum in the daytime when she was unwell was a worry for me. When Michelle came to reassess our needs Mum was reluctant to have paid carers and following the OT assessment we felt we could manage with the advice and support suggested by Michelle. Now Mum has a pendent alarm which is reassuring for us both when I am at work and my aunt, who lives opposite our house, is always on hand to help.”

Finally, Mrs Dubberley concludes... “Michelle contacted the community physiotherapist and I now have an upgraded outdoor walking aid to carry my oxygen around. Because of my anxiety and fear of falling Lynda has to encourage me to go out and socialise, however with this new equipment I feel less likely to fall outdoors so I now look forward to joining my friends on the monthly bus tours organised by the ‘Over 50's Club’.

Lynda has accepted the offer of a Carer's Assessment to see what help she can have to support me. I am hoping she may be able to have some regular breaks away next year as she also has to cope with her own health problems.

With the pieces of equipment provided by People 2People we continue to manage but if the time comes when we need more help we are confident Michelle and her social work colleagues will ensure this is arranged. The OT assessment has highlighted what is important to us as individuals.

“By working together with Michelle, Lynda and I are taking positive steps towards preventing further health problems occurring and at the same time improving our well-being by remaining as independent as possible”.

Priority - To ensure that individuals have every opportunity to self-serve and access the advice and information they need in order to move forward and to prevent crisis



Shropshire Choices, Shropshire Council's website for social care has been relaunched with a new look and a more user friendly interface.

The newly revamped website offers a fresh new source of quality-assured information about care and how to remain independent for longer. It is designed to complement our adult social care service.

Shropshire Choices, developed by Shropshire Council's adult services team, is designed to ensure everyone in Shropshire has access to information at a time and in a format which suits them, including those who are:

- looking for information about adult social care
- already receiving support
- caring for a friend or family member.

The easy-to-navigate website is a one-stop shop of information, giving adults and carers, more choice and control over their social care and health needs. The site aims to improve access to quality local information, and promote the ability for people to help themselves in their local communities.

“Shropshire Choices aims to provide an online hub to become the ‘go-to’ place when needing to find simple solutions to enable people who access social care advice and support, and their carers, to make informed decisions to help improve their care and well-being.” (Councillor Lee Chapman, Cabinet Member for Adult Services)

Shropshire Choices provides information about a wide range of sources of help and support, including independent financial information and information about care homes and housing options. It can also help with keeping independent; getting out and about; keeping safe; health and well, employment and volunteering opportunities; and being a carer. Information includes:

- Staying independent
- Getting out and about
- Caring for someone
- Leaving hospital
- Concerned about abuse?
- Needing help

The website also includes a resource directory of organisations across the county. Organisations can add, manage and update their own information free of charge.





Register as a Provider

If you are an organisation and would like to promote your services, why not register onto Shropshire Choices Resource Directory?

By registering onto the directory, organisations can add, manage and update their own information free of charge.

Register as a Personal Care Assistant

If you are a Personal Care Assistant (PA) and looking for employment, you can also register on the Shropshire Choices Resource Directory and create an individual professional profile for free.

Once registered, you will receive an email with a password to go into your account and update information. To register as a provider or PA go to www.shropshirechoices.org.uk/resourcedirectory or, for more information, email shropshirechoices@shropshire.gov.uk



Case Study: Local Support Swap project

Margarete Davies of People2People talks about their new community project Local Support Swap.

Local Support Swap aims to support unpaid carers in their community by enabling them to develop projects that meet their specific needs. This may be building on something that already exists or creating something new.

As project coordinator I am working with carers and communities to assist them to look at what is working well in their areas and what could be better; what ventures they would like to develop and the local support available in order to do this. My role is to facilitate the start-up of local initiatives and support the sustainability of the projects.

We've recently been working with the Memory Service, social work teams and the local community in Market Drayton to launch a new memory social group.

The memory group is designed to support people living with the early stages of dementia to come together to socialise and support one another, while their family carers have chance to catch up with one another, or to take a bit of time out for themselves.

The launch was a great success with information, discussion, activities and song, and sharing of inspirational personal stories about living with dementia.

The group sessions now runs from 10.30am until midday, fortnightly, meeting at the Café at Raven House Market Drayton.

Local Support Swap has been well received by the public in Shropshire. latest news sees a carer group willing to pilot a new 'thinking outside the box' project, which involves 'time-banking' and exchange of skills. If it works well it has the potential to be extended to other communities that would like to participate.

If you, or someone you know, has dementia and would like to attend the Market Drayton group or ask about starting your own group, please contact Margarete Davies at margarete.davies@shropshire.gov.uk or call 01743 255776.

Case Study: Let's Talk Local Hubs

Abi Butters from People2People, talks local



Let's Talk Local is run as part of a partnership between Shropshire Council and People2People. The sessions are organised and run by People2People staff and volunteers who are there to offer people a warm and friendly welcome.

Our Let's Talk Local meetings take place in venues across Shropshire. Our sessions are designed to be easy to access and convenient to get to.

The meetings are an informal opportunity for people to find out more about adult social care support in Shropshire and to discuss their personal circumstances.

Putting the person at the centre of the discussion is a crucial part of this process. During the meeting the adviser will ask a number of questions about what is really important to the person in relation to having a good life, staying independent and living in the community.

They will work with the person to think about their whole life and to explore the things that are working well for them at the moment, as well as finding out about the things that aren't working so well and thinking about what may need to change. During the conversation it may be necessary to look in more detail at a person's needs in a particular area of their life, such as how they manage with their own personal care, looking after their house or getting out and about and involved in their community.

At the end of the meeting the adviser and the person will make a list of all the things that need to happen next. This may be in the form of a brief action plan or more detailed 'Support Plan'. In most cases the list is likely to include things that the person can manage to do on their own, or with help from friends and family, as well as those things where they will need some help from Shropshire Council or other organisations and groups working in their local area.

It is important to include key people in the conversation and planning for the future: this may mean involving family and friends to be able to understand how the person's circumstances affect them, or talking with other professionals to help build a full picture. Often people who help and assist a person (sometimes known as a 'family' or 'unpaid carer') need some support of their own. The person and family may choose to discuss this during the meeting, or if they prefer, another meeting can be arranged for the carer to come back and talk to an adviser separately.

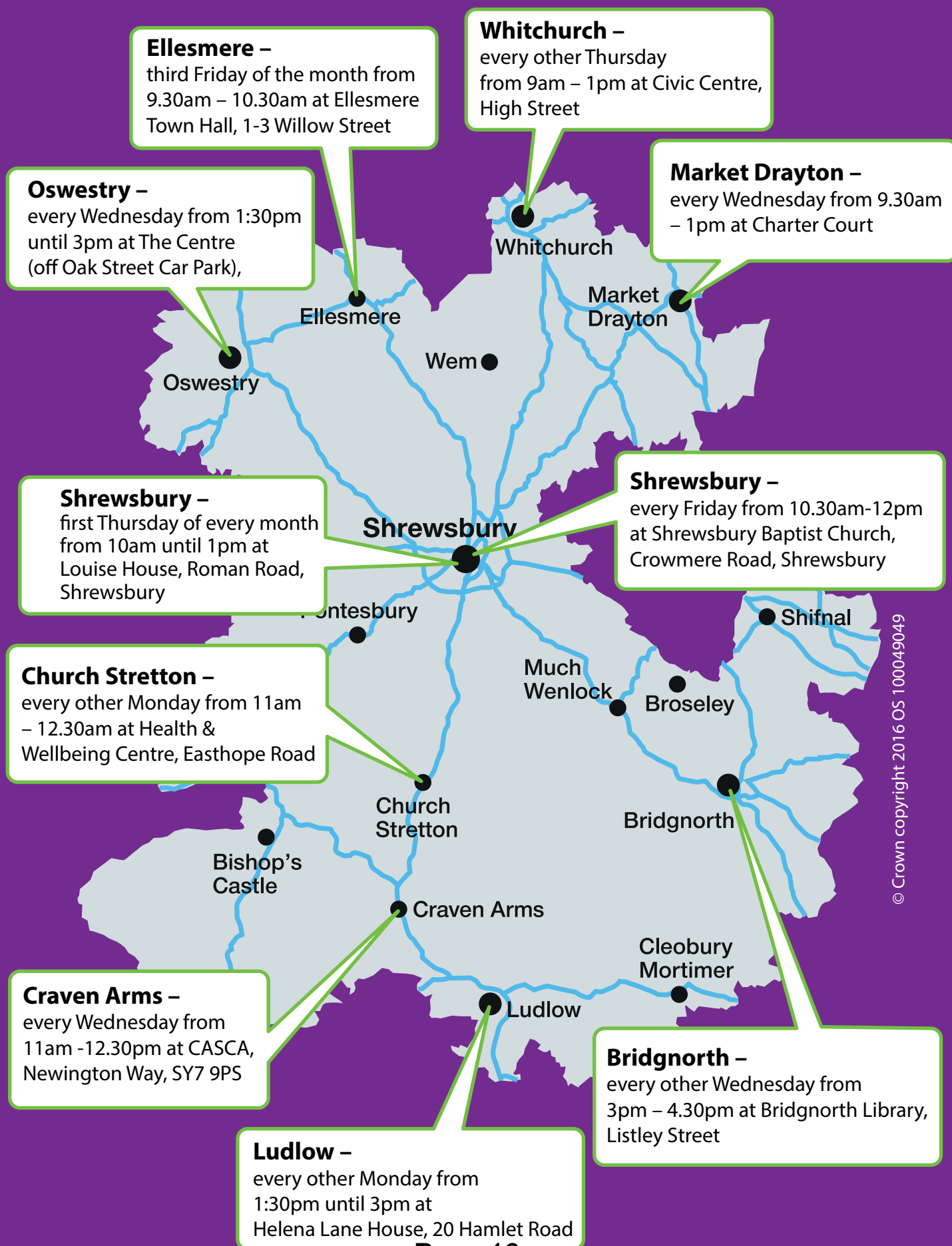


By the end of the Let's Talk Local meeting everyone will have an agreed understanding of the person's needs, the outcomes they wish to achieve and the things that are most important to help them to stay healthy and well.

You can call Shropshire Council First Point of Contact on 0345 678 9044 to arrange an appointment near you. Our Lets Talk Local locations also offer weekly drop in sessions.

More information about People2People and their Let's Talk Local sessions visit www.people2peoplecic.org.uk

Let's Talk Local Hubs



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Avoiding a crisis by planning for the future

Helen Esslemont from Carers Trust 4 All talks about supporting people in their planning.

Carers story:

supporting people in their planning process to help avoid a crisis - Helen Esslemont at Carers Trust 4all

'Rachael' cares for her son, 'Gavin' on a full-time basis. Gavin, who is in his 30s has always lived at home with his mother; he has a learning disability and is confined to a wheelchair.

Rachael has been known to the Carer Support team for some time. She has a named Carer Advisor, 'Kim' who is very familiar with Rachael and her caring role. Kim ensures that Rachael is involved in support groups and activities in her area, giving Rachael opportunities for respite and a chance to build friendships with other 'carers'.

More recently, Rachael, who is in her 60s has started to experience repeated bouts of ill health - on more than one occasion this has led to short-term hospitalisation. Kim has registered Rachael onto the "Carers Emergency Response Service" which is an early response service whereby in the event of an unforeseen emergency (for example when Rachael gets admitted to hospital), a Carer Support Worker will support Gavin at home, for up to 72 hours. This has enabled Rachael to go to hospital to attend to her own medical needs, safe in the knowledge that Gavin will be cared for by an experienced worker – in his home.

Kim has encouraged Rachael to think about Gavin's future, given that it is likely that he will out-live his mother. With Kim's support Rachael has been looking at local services that provide Supported Living facilities and Rachael is now planning the transition for Gavin to lead a more independent life. This means that Rachael can support Gavin in the transition towards a life that is less dependent on the care provided by his mother.

New Carer Case Study (all names changed)

'Fiona' was recently referred to the Carer Support Service by the Care & Community Co-ordinator at her GP surgery. A full-time working professional in her 60s, Fiona suddenly found herself in a caring role towards both of her elderly parents, following her father's unexpected mental collapse.

Fiona found that both of her parents, who had supported one another and remained independent up until this point, became dependent upon her to help them emerge from the crisis they found themselves in. In order to meet their needs, Fiona reduced her commitments at work. Fiona was feeling very upset and confused, not knowing what to do or who to turn to for help.

Fiona now has a named Carer Advisor, 'Lynda', who has worked with Fiona to help her understand the options that are available to herself and her parents. Lynda has supported Fiona in getting a 'Carer's Assessment' which will examine what ongoing support is available to her: she has supported her in getting the right advice about benefits for her and housing options for her parents. Lynda has also signposted Fiona to a counselling service for herself and a 'befriending' service for her mother. In addition to this practical help, Lynda has been able to offer empathetic and emotional support to Fiona at a difficult time.

Lynda says about Fiona "She is on the radar now, when the time is right, we will encourage her to meet other carers for mutual support – and she knows that we exist if she needs help and support."

Priority - To ensure those who are eligible under the Care Act for funded support, have the opportunity and are supported to take advantage of having a direct payment

KATIE'S story

**Choice and control –
“This isn’t easy”**

My situation –
then...
independent!



**My situation now –
Still independent ... but supported!**

Employ my own PA so that
they have rights and I get
the support I want in the
way I want

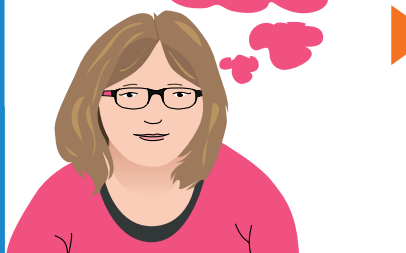
**This generic
contract doesn't
say what I want.**

Q. Where do I get support to...?
A. Information about employing
your own PA can be found at
www.pohwer.net/

I like my Direct Payments
and I welcome the
independence that working
with different PAs gives me...

But I don't think we get
clear enough information
and guidance at time.

**What can I do
to make things
better?**



Choice and control – using my Direct
Payment to employ a Personal Assistant

Choices

Options

Information

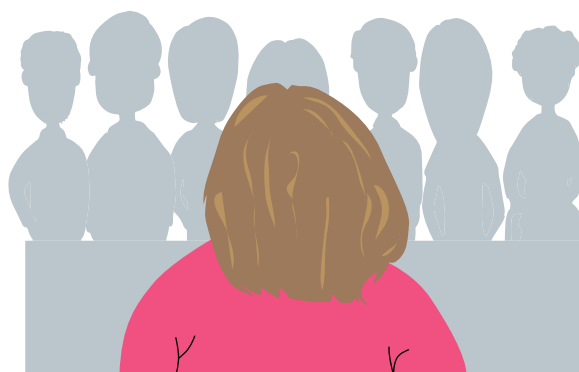
Practicalities

Q. Where do you get your information?
A. find information at
www.shropshirechoices.org.uk

But along the way...
there have been
hiccups, and ups
and down...

**You
shouldn't go
bothering
others!**

Q. Do you know about the rights of
employees?
A. Find out more at skillsforcare.org.uk
and acas.org.uk



I am going to have my say directly at
Making it Real Advisory group meeting
and bring about change...

Q. How can I influence the development of
adult social care in Shropshire.
A. Contact Making it Real at
makingitreal@shropshire.gov.uk.

Direct Payments Advice and Support from POhWER

POhWER is a charity and membership organisation who provide information, advice, support and advocacy to people who experience disability, vulnerability, distress and social exclusion.

The following is a case study from POhWER about supporting Personal Assistants (PA) in their role as a carer for a family where care is funded by a Direct Payment.

POhWER received a referral asking them to support a family who wanted to find out more about Direct Payments and the opportunity this might provide for them, the referral was to support the family of Barry, a young man with learning disabilities.

The family had identified a Personal Assistant (Danny) who currently worked at the day service that Barry attended. Danny was keen to support the family and had asked to be present at the meeting with the Direct Payments (DP) Advisor as he was unclear and had concerns about the Direct Payment process.

The DP Advisor discussed how the Direct Payment would be set up and how Danny would be paid and went through the process in detail which reassured Danny.

I was confused by the information I'd been given previously but I'm now looking forward to being Barry's PA.

The involvement of the DP Advisor ensured that the family and the PA were clear about what was expected and the Direct Payment could start without any issues.



POhWER DP Advisors Natalie Crisp, Lynne Davis and Anna Mason

Priority - Developing Making it Real further to support us as we become a commissioning council, and one that is responsive to people's needs and listens to the feedback from the people it supports



Jon Hancock is a volunteer who co-chairs the Making it Real Board

Stewart Smith coordinates the Making it Real Advisory group and Board meetings. He asked Jon a few questions about Making it Real and the way that it has developed.

S *"Hi Jon, good to see you again.*

J It's good to see you too, thank you for inviting me.

S *How long have you been involved with Making it Real?*

J I have been involved in Making it Real since the committee was first formed in April 2013. It has been an interesting few years.

S *Why did you get involved in the first place and what drives you to commit your time to meetings and activities now?*

J I had been the principal carer for my elderly mother for many years. As time went on, I found that I was having more and more contact with Shropshire Council who were providing support for her. I was invited to take part in a survey and from that, I was asked to become a member of the soon-to-be-created Making it Real Board.

S *What sorts of changes have you seen as a result of your involvement?*

J The provision of adult social care has changed enormously in these few short years. For my part, I have been trying to show the senior leadership of Shropshire Council/People2People the reality of being a carer. Using my skills as a businessman and industrial designer, coupled with a huge dollop of common sense, I feel that I have been able to

highlight areas of weakness in the care system, as it is applied on the frontline. Not having a background in social care, I am sometimes able to see things from a different perspective.

S *There must have been highs and lows over the years. Can you tell me about some?*

J Don't get me started on highs and lows... there were many. Being a family carer for my mother is the most stressful thing I have ever done, there's no doubt about that. There were extreme lows. Trying to make rapid progress with a lumbering unitary council can be frustrating. There is a huge difference in approach between the commercial and council world. It took a year to develop the Shropshire Choices website and that is beyond me.

There have been highs too. I am delighted that People2People are starting to incorporate some of my ideas within their support documentation. Hopefully, it will soon be a lot easier to find your way around the adult social care system. I have a great deal of empathy with the elderly and vulnerable in our county and it gives me a huge sense of accomplishment when something that I have suggested is adopted.

S *How would you like to see Making it Real develop in the coming year?*

J I would like to think that the senior leadership at Shropshire Council/People2People will, as time goes on, take more notice of the experience of volunteers like myself. There some fine people on the Making it Real Board who have had a struggle with adult social care. Their knowledge is invaluable in fine-tuning the system.

S *Do you have a message for people in Shropshire or what might you say to anyone who might be interested in having their say about the way that adult social care develops?"*

J I do believe that the leadership at Shropshire Council are keen and willing to listen and try to improve things. These are all busy people but they always put aside time to come to the Making it Real meetings and discuss any pressing problems. Its a tremendous opportunity for anybody who has a genuine desire to contribute, to get involved and change things for the better.

Making it Real – why I've been involved



Katie-Rose Stone

"because my journey through the system wasn't right I wanted try and improve it for others ..."



Stuart and Chrisey Price

"Because Chrisey has got an appalling illness and her medical condition is somewhat declining and with the help of her husband and Carer Stuart, both would like to make a massive impact on people's influence, attitude and help for services in Shropshire"



Ron Farr

"MiR is a group of people who put ideas forward to try to help make a difference for carers and their families in Shropshire"



Volunteer – John Jones

"I go to listen to what other people have to say and tell them how I feel, it could help things be better for other people"



Sue Bunker

"the Making it Real discussions / meetings help improve communication and break down barriers..."



Michelle Hodnett

"I have both personal and professional reasons for being part of MiR ..."



Jon Hancock

"It is a tremendous opportunity for anybody who has a genuine desire to contribute, to get involved and change things for the better"

Priority - To work with our First Point of Contact team to enable them to make decisions about safeguarding concerns where there are no ongoing concerns about the safety of the individual. The purpose of this priority is to provide a timely response to the adult concerned, the person raising the concern, and improve the feedback given to them about the decision made

We asked Emma Blackwood from FPOC how she works with the Safeguarding Team.

The First Point of Contact, or “F-POC” Team is the first port of call for customers who need social care support. All calls are dealt with sensitively and in the strictest of confidence by a friendly and dedicated team of advisers at Shropshire Council’s customer service centre, who ensure customers get the right help and support as quickly and easily as possible. They can identify whether someone is eligible for a service at first point of contact, and signpost individuals to other relevant services within the council or in the local community. Find out more what FPOC can do at <https://new.shropshire.gov.uk/adult-social-care/where-can-i-get-help/first-point-of-contact/>

How is an adult safeguarding concern raised?

“Safeguarding concerns can be raised via the website [Shropshire.gov.uk](https://new.shropshire.gov.uk) or by directly phoning First Point of Contact. 0345 678 9021”

What does First Point of Contact do for the Adult Safeguarding Team?

“F-POC provides a safe triage for concerns so that the issues raised are referred to the right teams for the right reasons. Concerns may be raised by the public, by professionals working with individuals and families and by the police.”

“Advisers are well trained and able to make most decisions independently but having access to duty professionals with whom they can consult means things are done accurately, safely and with a high level of confidence.”

“The right information is gathered and the right service is quickly alerted of the concern. Depending on the urgency of the need this could be the police, the Adult Safeguarding Team, People 2 People (Social Work) teams, Compass (Children’s Services) and Community Mental Health Teams.”

Performance

- Performance during the period June- August 2016 shows that, on average, 172 safeguarding concerns are received each month by the F-POC Team.
- Of those, approximately 82 per month go on to become a formal Adult Safeguarding Concern, so by working closely with Adult Safeguarding colleagues, the F-POC team are signposting 52% of concerns raised to more appropriate sources of help.
- Shropshire Council’s safeguarding teams will respond directly to 984 concerns over adult abuse, in itself a 30% decrease on 2015/2016.
- By working in this way with First Point of Contact, social care professionals whose workload previously left them struggling to leave their desks, can get out and do what they are trained to do via the Let’s Talk Local sessions run across Shropshire.

Priority - To commit to working closely with partner organisations and communities, including those that signpost people to adult social care to ensure that we collaborate to achieve better outcomes for local people

Kate Garner talks about the work coming out of the resilient communities project.

“Local Authorities have a role to play in helping individuals and communities to develop social capital. There is growing recognition that although disadvantaged social groups and communities have a range of complex and inter-related needs, they also have assets at the social and community level that can help improve health, and strengthen resilience to health problems.” (The Kings Fund)

In the past, some people living in Shropshire used a council service that may not have suited them. They could have been in their community, getting involved in some of the great things that were going on there.

That’s all changing now through a programme of activity called Resilient Communities. Resilient Communities aims to connect people who are seeking advice from services such as People2People, children’s centres and GPs.

Resilient Communities is delivered by Shropshire Council’s Community Enablement Team in neighbourhoods and it joins together the people who

are working in services such as health and social care, housing support, libraries, leisure centres, job centres, schools, community nursing, and GP surgeries with voluntary and community groups and local people.

Let’s see how it’s working in Oswestry at the moment.

Steve and Corrie from the Community Enablement Team are working with Kim at Oswestry Community Action to create a directory of all the community groups and activities that are going on in the Oswestry area. There are nearly a hundred different groups set up so that people can get together to learn new skills, do sport, arts or crafts or to support other people in the community.

Steve, Corrie and Kim share all of this information with the people working and living in the Oswestry area so that they can use it to give good advice to other people, eg a social work assistant helping an elderly person who may need help with transport or shopping, the doctor’s surgery that wants to tell one of their patients what is available locally to help them get fitter and more agile, or someone working at the library who has been asked if they know what is going on locally for parents and toddlers. There are many reasons why local information might be needed and all of these are important as they can mean that people get the advice they need that makes a difference to their lives.





All of this information is also put on the Shropshire Choices website.

The Centre in Oswestry is a hub where activities for people living locally take place. Some of these are for young people, but it's also where people can go to a People2People appointment and get help and advice with concerns about staying mobile and independent. If you have a young family you can also go there to an Early Help drop in session to speak to the people who can support you with all kinds of advice. There will even be a play session run by volunteers and a 'pay as much as you can' community café.

There are also lots of events at The Centre organised by Steve and Corrie. Where gets together to share ideas, activities and support. Resilient communities is about connecting people and activities in our neighbourhoods. It is about getting involved, staying active, healthier and happy.

So, Resilient Communities is all about connecting people and activities up in our neighbourhoods so that we all – whatever kind of help and support we need – know more about what is going on and have the choice and opportunity to get involved in the things we are interested in, making us happier and healthier – that we have friends and can stay active - and that we are able to help other people.

Case Study: Tony's story – Taking Part (Fiona Williams)



TONY'S STORY

2015



My name is Tony.
I used to live with lots other people
in a home.
I had been there for a long time.
I was ok.



I had the chance to move into
my own home.
I had lots of support to help me
choose if I wanted to move.
I met the new staff, they are nice.

Tony had support from his
social worker
and Independent advocacy.

NOVEMBER 2015

TONY'S MOVING DAY!



I have lots of photos from the day I moved.
Staff from my old home helped me move.
I was not sad.
I was excited.
I got a big welcome when I got to....



My new Home.



I feel happy here.
The staff are nice.
The man I live with is friendly and kind.
We like music and being DJs.



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Taking Part continue to be very supportive and active in the lives of people with a learning difficulty in Shropshire. We are providing much more one-to-one advocacy support including Care Act Advocacy; very involved with helping people understand Supported Living and moving on as demonstrated by Tony's story, which Taking Part were privileged to be involved with by advocating for him and integral to putting his story together. We are working with a range of other people around Transforming Care Programme, and our social nights are going from strength to strength. Taking Part is supporting volunteer Citizen Advocates throughout the county. Taking Part continue to embrace change and help make a difference.

Case Study: Hot Wheels!

Abbots Wood has done something fun and amazing. They cycled from Land's End to John O'Groats, virtually! And they got lots of sponsorship and equipment doing it.

In 2016 Abbots Wood Day Service, a centre for adults with learning disabilities in Shrewsbury, embarked on their Big Inclusivity Bike Quest at their premises in Monkmoor.

The bike ride was launched and heralded at its Big Arrival by successive Mayors. Over 6 weeks the quest proved a huge success as the cyclists completed their 1017 mile virtual journey.

Starting out with practically no equipment not only did they raise just over a thousand pounds but they received donations of two tricycles, a hand cycle, three exercise bikes and helmets, estimated to be worth about £4000 and a £500 bursary from Inclusively Fit.

All this material brought cycling to many disabled people who would otherwise never have ridden a bike or who hadn't been on one for years. More than 110 different people rode some of the way on the virtual journey.

The cyclists have carried on their efforts and are now looking to buy a very special bike which can have a wheelchair loaded on the front of it so they can offer inclusive cycling for all.



Inspirational Idris



Idris Price has been supported by the Royal Voluntary Service (RVS) to attend 'Songs for You'.

This is his story which he told to Lee Evans from Royal Voluntary Service.

Enjoy the singing. Enjoy life, that's what it's about."

There have been inspirational changes in Idris Price's life over the last few years. He now says "I am glad to be alive. Leave the past behind and look to the future".

This is quite a change for a man who was originally referred to the RVS by his medical practice because he wanted help with his shopping. In fact, Idris had early stage Alzheimer's and he felt scared about forgetting his way back home.

After getting to know Idris the RVS Service Manager suggested that he try out a support group called 'Songs for You' at Meole Brace Trinity Centre. 'Songs for You' is for all people to come and enjoy singing and meet new friends."

RVS arranged a driver and someone to accompany Idris and since then he has not looked back. Asked how things are going now and Idris says "I wake up every day glad to be alive".

People have told him he's changed. He is now enthusiastic and positive. He has joined another singing group at the Baptist church and he attends a day centre one day a week. He has also given a talk at Lindale Court about his coal mining and pit pony days. When he meets new people he tells them all about the day clubs and singing.

Idris does have his "off days" but he says if he's worried he goes and does something. "If you think positive, something good will come out of it" he said.

"My life is a positive one. The help of the Royal Voluntary Service has been excellent. Lee (my Service manager) and Andy (my driver) give up their valuable time in providing a very warm and welcome service. Going to these activities has given me the confidence to mix with other people from all backgrounds and to be part of a fellowship with one aim in life and that is think positive, take the things in life and enjoy them because there are plenty of opportunities for people."

Lee asked if there was anything else that the RVS could help him with but he said everything was fine. If he thought of anything he would be in touch. He was very philosophical. As he finished chatting to Lee he said "There's no time limit. Just give it a go. Join in. Enjoy the singing. Enjoy life, that's what it's about."

Case Study: Market Drayton Seniors' Enterprise



Four pro-active Market Drayton senior citizens came together in 2015, convinced that they could contribute to the health and well-being of some of their less advantaged peers.

These four people went on to form a new charitable social enterprise, Market Drayton Seniors Enterprise in May 2016.

Although they had their own ideas, from June to December 2015 177 over-50s were surveyed face-to-face to identify their reasonable unmet needs.

This revealed that lack of transport was, by far, the key issue as 149 respondents expressed various degrees of concern.

No public transport link between Market Drayton-Whitchurch was a major concern for non-drivers. This revelation acted as a catalyst for the enterprise liaising with North Salop Wheelers, based at Whixall, because it already operated market day rural services to get village residents into Market Drayton.

Also, darker clouds came for many commuters when the cross-border services linking Market Drayton with Telford via Princess Royal Hospital were being stopped on 31 July 2016. These services provided a lifeline for many rural and town non-drivers of all ages needing to get around.

John Harrison from North Salop Wheelers (NSW) and Eric Davis from Market Drayton Seniors Enterprise immediately engaged in many telephone conversations. They also met with the NHS Clinical Commissioning Group and Transport Teams from Telford & Wrekin Council and Shropshire Council to gain a promise of financial support to cover the cost of a paid driver for a Ring/Text-a-Ride Community Bus Project.

This launched on 1 August 2016 and the community bus now regularly serves all towns and villages along Shropshire's northern corridor.

These recent successes have been acknowledged with awards to NSW of a minibus from the Department of Transport's Community Minibus Fund and £45,000 from the Morgan Foundation to provide a sound financial platform for NSW to become self-funding over the next three years. Self-funding is also the enterprise's aspiration as they look forward to providing yet more of the needed services, facilities and goods associated with health and well-being.

The enterprise and NSW coalition remain vigilant as to how local transport services can be improved. The enterprise looks forward to providing greater opportunities for residents of Market Drayton and its nearby villages to adopt a socially inclusive lifestyle.

As well as sorting out these transport issues, the enterprise held four drop-in events that offered people greater privacy for personal issues to be discussed.

These proved to be a great success and a venue is now being sought to provide a 'safe place', café, suitable IT facilities and reading materials. It will also provide an information point on behalf of those many organisations that focus on health and Well-being issues, but do not have a Market Drayton presence.

For more information, please contact Eric Davis, Secretary of Market Drayton Seniors Enterprise, at ericatriverside@btinternet.com

In my view...

difficult conversations

"12 months ago, Fraser's night-time care was replaced with assistive technology. It was a very fraught time for Fraser, his Mum, and the Social Worker involved. How have things turned out for Fraser?"



Here's his story:

It took 18 long months of difficult conversations and encouragement to get to a point where Fraser can now say "I'm still a little on edge but all is good". Margaret, smiles. "With Fraser at home for 35 years, I did all his care, so after 10 years of living on his own, when Liz spoke about replacing night-time carers with assistive technology, it was very difficult for me to accept".

Liz takes up the story: "While carrying out an assessment of Fraser's needs, I looked at his care records and it was clear that the night-time carers weren't supporting him at all. They were in his home overnight, but Fraser wasn't needing their help". Liz knew that with the advances in assistive technology, Fraser had the chance to be independent at night with the assurance that he could contact an emergency call centre if needed. Fraser laughs as he remembers trying out a large Jelly Bean Button that could have helped in an emergency. "It fell on my head" he chuckles as he looks skyward.

It's good to look back, because it was an anxious time for Fraser. Conversations were difficult and Liz reminds him that "it wasn't easy." Fraser now wears a wrist band button that he can comfortably push if in need of emergency support.

The use of assistive technology at night-time instead of sleep-in carers has been one big step along Fraser's journey to independence.

At this time of change another big breakthrough came along. Fraser went to talk about volunteering at the "Signal hub" in Shrewsbury. Whilst talking, staff noticed that Fraser wasn't hearing everything. They suggested that he check his hearing with his GP.

Fraser did have hearing difficulties that could be aided. ▶▶

►► Fraser now wears hearing aids and the change in him has been “totally positive”. “I am now involved fully in discussions” he says. He has two voluntary jobs, loves to watch Shrewsbury Town play and, importantly, he spends his nights independently without carers.



Fraser explains that he now feels confident to go out on his own. “I ring Mum and say ‘I’m going mobile’ so that she knows she can call me on my phone when I’m out”. Liz and Margaret laugh. They know that for now the “fraught and anxious times” have gone. Liz says “I think we’ve all learnt new skills in the last 18 months and having gone through some tricky moments. Fraser is now more independent. I’ve learnt the value of creatively promoting independence as Fraser has come through this period in such a positive way and is now living his life, and Margaret is more relaxed. She’s just got back from a holiday with her own friends”.

Obviously some things don’t change. Fraser says, “I still go to Mum’s for Sunday dinner. I don’t want to stop that”.

At that point his Mum smiles again and says “I was thinking of moving house to be closer to Fraser”. But Fraser laughs back and says, “No, don’t move next door to me. It’s taken me years to get (away)!”

Nice one Fraser. There’s still a long way to go on your personal journey, but you’re well on your way!

Compliments and Complaints

Each year we produce a Customer Feedback Annual Report for Adult Services

The purpose of the report is to inform customers, carers, elected members, partner agencies and staff about how our services are meeting our customers’ expectations and the action we are taking to improve the quality of the social care services that we deliver.

Complaint

We aim to make it as easy as possible to make a complaint. A complaint is a written or verbal expression of dissatisfaction about the service provided by the council. Family members and advocates may also make a complaint on behalf of one of our customers. We will ask for consent to ensure that the complaint is not being made against the customer’s wishes.

Compliment

Many people get in touch with a compliment when the information or support they have received has exceeded their expectations. It is really helpful to learn when a service has been provided well or when a member of staff has done a great job. We like to recognise compliments alongside any complaints. It is good for us to say ‘thank you’ to our teams and staff members too.

Comment

Feedback about a service could be:

- a suggestion to improve it.
- a question as to whether something could be done differently.
- an idea for delivering a service differently.

Annual Comparison 2014/15 and 2015/16

Number of compliments - increased

- Compliments were not well reported in 2014/15 and the last year has seen significant improvement in the way compliments are recognised and recorded. In 2015/16 there were 71 compliments (only 6 were recorded in 2014/15).
- Compliments tend to be fewer in number over the summer months but average at 6.45 month.

Number of complaints - increased slightly

- The number of complaints received by Adult Services has remained fairly stable between 2014/15 and 2015/16. In 2014/15 126 complaints were received and in 2015/16 this increased to 146.

Nature of complaints - problems remain similar

- When comparing the main complaints categories for 2014/15 with the last year, it is possible to see that the spread of complaints across the main categories remains very similar.
 - Quality remains the main category of complaints with 81 in 2015/16 and 66 in 2014/15. 'Incorrect decision' remains the dominant sub category (28 complaints) followed by 22 complaints for 'quality of service provided'.
 - Delays (making a decision, providing information or a service) have reduced slightly in the last year.
 - Complaints relating to 'failure or refusal' remain at similar levels (2 more in 2015/16).
 - Complaints relating to staff conduct remain at similar levels (2 more in 2015/16).

Days to close - timescales remain similar

- In 2014/15 it took an average of 29.2 days to close complaints made to Adult Services. In 2015/16 it took an average of 30.4 days to close complaints. It should be noted that a small number of long-running cases can significantly impact on the annual average.

Outcome of complaints - Fewer complaints are upheld

- In 2014/15 29% of complaints were upheld and 35% were partly upheld. In 2015/16 the percentage of upheld complaints reduced to 20%, and 38% of complaints were partly upheld. In 2014/15 33% were not upheld and in 2015/16 the proportion was 39%.

Complaints Progressing Beyond Stage 1 - has increased

- During 2014/15 7 complaints progressed beyond stage 1 (3 were upheld, 2 were partly upheld and the remainder were withdrawn or remained open at the end of the year). In 2015/16 a total of 19 reviews and Local Government Ombudsman complaints were closed (but of those many were opened the previous year).



You can view the full report here

<https://shropshire.gov.uk/committeeservices/documents/s13613/updated%20SC%20Adult%20Cust%20Fbk%20Ann%20final.pdf>

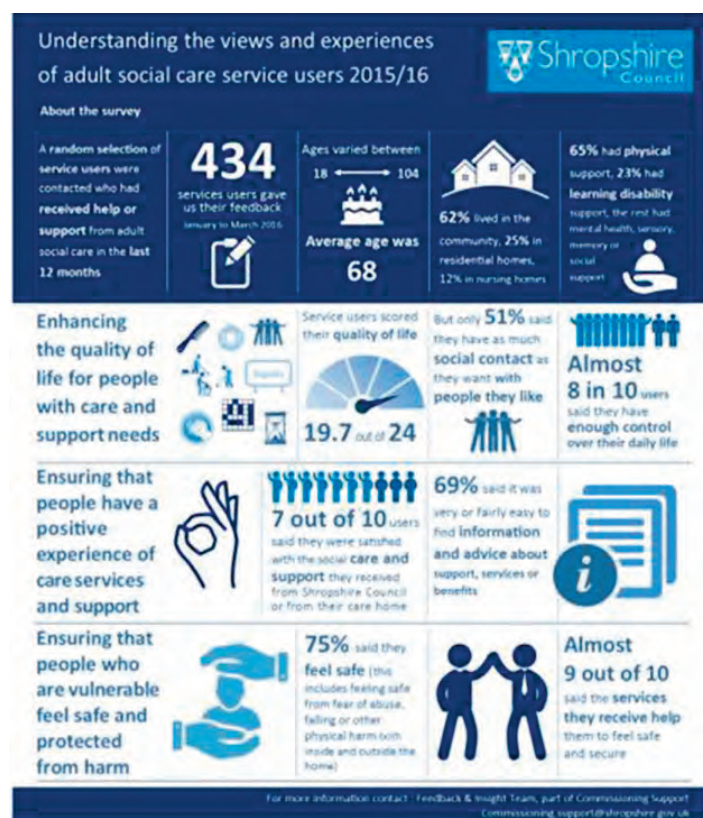
Performance matters –

We are constantly monitoring and reviewing the way we support our most vulnerable and look to local and national performance information to help us maintain high performance and also identify areas where we need to address. This helps benchmark and challenge our levels of delivery and where we can learn from our peers. This infographic shows some of our highlights and you can see more data here – [link to](#).

We are very proud in Shropshire that we are currently performing better than the West Midlands average and the England average.

However we are never complacent and we are constantly working on new and innovative ways to support and promote stronger, more resilient communities so that people can live healthier, longer and more independent lives and be safe from harm; and do this in a way that means they have to rely on us less.

There is a lot to do and the priorities that have been set for the coming year reflect this



Our priorities for 2017

New set of priorities (some may come out of performance indicators above) – explanation of how our performance and experiences feed future priorities)

- Priority –**
We will work with our health partners and colleagues to enable individuals in hospital to be supported to **regain independence** and return home as soon as possible.
- Priority –**
We will develop Shropshire Choices to provide a wider **opportunity** for individuals to access **advice and information**.
- Priority –**
We will **listen to** the people we support and **involve** them in developing quality services through our established Making it Real Board, focus groups and partnership boards.
- Priority –**
To make safeguarding more personal we aim to provide a **timely response** to adults subject to risk of harm.
- Priority –**
We will promote independence by developing **early intervention** strategies, including the use of assistive technology.
- Priority –**
We aim to **reduce levels of homelessness** and to ensure people have a home within their local community, close to family and friends. We will continue to work with housing partners to develop appropriate accommodation.
- Priority –**
We will promote direct payments to enable individuals to have more **choice and control** over how they are supported.

Performance matters –

| | 14/15 Result | 15/16 Result | Comments/Actions for 2015/16 |
|--|-----------------|-----------------|---|
| ENHANCING QUALITY OF LIFE: | | | |
| Social care-related quality of life. | 19.5* | 19.7 | This is based on responses to an annual User Survey and gives an overarching view of social care users' perceptions of their quality of life in Shropshire. |
| Proportion of adult social care users who have control over their daily life. | 81.5* | 77.6 | This is based on responses to an annual User Survey and measures the extent of control users feel they have over their daily life. |
| Proportion of adult social care users who receive self-directed support. | 98.2% | 98.7% | Our priority is to increase the take up of direct payments and individual service agreements to ensure greater flexibility for individuals in how their care is provided. |
| Proportion of people using social care who receive direct payments. | 23.7% | 21.2% | Direct payments are an important aspect of personalisation and we aim to increase take up of these also. |
| Proportion of adults (aged 18-64) with Learning Disabilities in paid employment. | 11.2% | 12.1% | Studies show that there is a strong link between employment and enhanced quality of life. |
| Proportion of adults in contact with secondary mental health services in paid employment. | 10.5% | 9.00% | Studies show that there is a strong link between employment and enhanced quality of life. |
| Proportion of adults (aged 18-64) with Learning Disabilities who live in their own home or with their family. | 80.1% | 80.4% | We continue to support vulnerable people to live independently. |
| Proportion of adults in contact with secondary mental health services who live independently, with or without support. | 69.3% | 68.5% | We continue to support vulnerable people to live independently. |
| Proportion of service users who said they have as much social contact as they would like. | 43.7%* | 51.1% | This result is taken from the annual User Survey. Studies show that there is a link between loneliness and poor health. |

*note: new methodology therefore unable to red/green the measure as not a direct comparison.

| | 14/15 Result | 15/16 Result | Comments/Actions for 2015/16 |
|---|-----------------|-----------------|---|
| DELAYING AND REDUCING THE NEED FOR CARE AND SUPPORT: | | | |
| Permanent admissions of adults (aged 18-64) into residential/nursing care homes, per 100,000 population. | 11.1 | 11.1 | Our priority is to keep admissions into care homes to a minimum, and to enable people to live independently in their own homes for as long as possible. |
| Permanent admissions of older people (aged 65+) into residential/nursing care homes, per 100,000 population. | 548.8 | 573.7 | Our priority is to keep admissions into care homes to a minimum, and to enable people to live independently in their own homes for as long as possible. |
| Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement services. | 80.6% | 80.6% | Being able to remain living at home following discharge from hospital with reablement services is the key outcome for people, demonstrating that we have effective partnership arrangements in place. |
| Delayed transfers of care from hospital, (for adults aged 18+) attributable to adult social care. | 4.2 | 8.5 | Our priority is to ensure delays from hospital are kept to a minimum and we have shown good performance year on year. |

ENSURING PEOPLE HAVE A POSITIVE EXPERIENCE OF CARE AND SUPPORT:

| | | | |
|--|-------|--------|---|
| Proportion of social care users who are satisfied with their care. | 72.2% | 70.2%* | This is based on users' responses to an annual survey. Reported satisfaction levels are a good indication of people's overall experience of service and quality. |
| Proportion of service users who find it easy to find information about services. | 72.2% | 69.3%* | This measure reflects service users' experiences of accessing information and advice over the last year, taken from the annual User Survey. Improving access to information is one of our key priorities. |

ENSURING PEOPLES' SAFETY:

| | | | |
|---|-------|--------|--|
| Proportion of service users who feel safe. | 73.1% | 75.4%* | Feeling safe is fundamental to ensuring people's well-being, and is a key priority. This measure is taken from the annual User Survey. |
| Proportion of service users who say the services they receive have made them feel safe. | 94.4% | 88.6%* | This measure, from the annual survey, shows the extent to which people feel the adult social care services they received have had a direct impact on how safe they feel. |

GREEN denotes improved performance compared to last year.
RED denotes decrease in performance compared to last year.

Glossary

Advocacy –

An advocate is someone who argues your case for you and makes sure the correct procedures are followed. If you have had difficulties with benefits or services, for instance, you may find that an advocate can help solve these problems.

Brokerage model –

an interactive and collaborative approach to providing suitable care providers.

Care and support –

The mixture of financial, practical and emotional support that helps people to do the everyday things that most of us take for granted, such as getting out of bed, dressed and into work; choosing what and when to eat; and getting out of the house, being able to see friends and care for our families.

Care package –

A care package is a combination of services put together to meet a person's assessed needs as part of the care plan arising from an assessment or a review. It defines exactly what that person needs in the way of care, services or equipment to live their life in a dignified and comfortable manner.

Carer –

A carer is somebody who provides unpaid support or who looks after a family member, partner or friend who needs help because of their age, physical or mental illness, or disability.

Commissioner –

The people or organisations that make sure that the right health and care services are provided to meet the needs of the population.

Direct payment –

Payments made directly by the council to someone in need of care and support to allow the person greater choice and flexibility about how their care is delivered. Fair access to care criteria – Shropshire Council use this criteria to assess, to determine eligibility for funded support.

Needs assessment –

This is how a council decides whether a person needs care and support to help them live their day-to-day lives.

Personal Assistants –

Someone who works for you to provide you with the support that you require.

Respite –

Respite is a break from caring for someone else. This can mean a few hours during the day, 'night sitting' or even a full holiday.

Safeguarding –

Safeguarding is a way to prevent people who are deemed 'unsuitable' from working with vulnerable adults or children.

Social Capital –

Using friends, neighbours, family, support groups, charities and voluntary organisations to support people to make the right decision for them.

Making it Real in Shropshire – our story continues

Adult Social Care Local Account 2015-16

We would like to thank all of the organisations that enabled us to produce this document.

www.shropshire.gov.uk

