

**Annual Performance Assessment Report
2008/2009**



Adult Social Care Services

Council Name: Darlington

This report is a summary of the performance of how the council promotes adult social care outcomes for people in the council area.

The overall grade for performance is combined from the grades given for the individual outcomes. There is a brief description below – see Grading for Adult Social Care Outcomes 2008/09 in the Performance Assessment Guide web address below, for more detail.

Poorly performing – not delivering the minimum requirements for people

Performing adequately – only delivering the minimum requirements for people

Performing well – consistently delivering above the minimum requirements for people

Performing excellently- overall delivering well above the minimum requirements for people

We also make a written assessment about

Leadership and

Commissioning and use of resources

Information on these additional areas can be found in the outcomes framework

To see the outcomes framework please go to our web site: [Outcomes framework](#)

You will also find an explanation of terms used in the report in the glossary on the web site.

Delivering Outcomes Assessment

Overall Darlington council is performing:

Well

Outcome 1:

[Improved health and well-being](#)

The council is performing:

Well

Outcome 2:

[Improved quality of life](#)

The council is performing:

Well

Outcome 3:

[Making a positive contribution](#)

The council is performing:

Well

Outcome 4:

[Increased choice and control](#)

The council is performing:

Well

Outcome 5:

[Freedom from discrimination and harassment](#)

The council is performing:

Well

Outcome 6:
[Economic well-being](#)

The council is performing: **Well**

Outcome 7:
[Maintaining personal dignity and respect](#)

The council is performing: **Adequately**

Click on titles above to view a text summary of the outcome.

Assessment of Leadership and Commissioning and use of resources

Leadership

There is a shared vision and priorities for improvement across key stakeholders in Darlington. The vision has been endorsed by the Portfolio Holder for Adult Services and the Health and Well-Being Scrutiny group as well as the Councils Corporate Management Team and is shared with staff at briefing sessions and by the Portfolio Holder through the Partnership Boards. The Business Transformation Team has been established although the transformation agenda is still at an early stage. Framing days have taken place to develop the programme of change and have included a broad representation including people who use services and providers. The Strategy for Older People with mental health needs has been revised and the End of Life Strategy is being developed in partnership with health colleagues. The Older People's Strategy has been launched and is beginning to have some impact, although at the recent Service Inspection senior staff reported that the Older People's Partnership Board was "struggling". The council are engaged with older people around service development and quality. This is largely through the Growing Old in Darlington (GOLD) organisation.

The council is developing a Joint Commissioning Strategy with health colleagues and joint commissioning posts have been established. The Joint Strategic Needs Assessment (JSNA) has been published and aligned with the Sustainable Communities Strategy (One Darlington Perfectly Placed) and the Local Area Agreement. Changes have been delivered within service provision in the previous year, however, at the recent Service Inspection, inspectors noted that the vacancy of Assistant Director for Adult Social Care had delayed some work and that there was still some orthodox thinking which was hindering the modernisation process. Since then, however, the vacancy has been filled and the new Assistant Director is moving forward swiftly with work programmes and service developments. The Darlington Safeguarding Adults Board is developing a 3 year strategy (2009 – 2012), and since March 2009 the council has begun to progress the action plan to underpin the implementation of the strategy.

In setting budgets, the council takes into account its contribution to delivering the Sustainable Community Strategy the results of consultation, aims and objectives of the Corporate Plan and the impact that spending decisions may have on Council Tax levels. Each year the council undertakes a Community Survey, asking local people what the important issues are and what requires improvement.

There are areas of service duplication, such as the intermediate care provision, which is still run as two separate provisions between health and social care. There has been a recent "framing day" for the provision of reablement services, however, inspectors at the recent Service Inspection concluded that this programme lacked high level representation and had yet to translate into any firm plans.

The council have launched a Workforce Development Plan and is undertaking a skills analysis of its workforce to shape future development; however, the council and PCT do not have a combined workforce strategy. The council is working in partnership with external bodies and

other local authorities to develop a common induction programme. A full training programme is available for social care staff and staff are kept briefed about the future developments in service provision.

The council evaluates and monitors its own progress at a number of levels through the Performance Plus system and via National Indicators. Management action is taken when performance improvement is needed. Reports can track changes in service delivery and outcomes and this helps to manage risks. The employee survey suggests that most staff understand the performance monitoring system.

The council and PCT have developed data sharing arrangements and are continuing to embed these. All health-related national indicators, and a range of local indicators, are incorporated in the Council's Performance Management Framework, with shared accountability via named officers for data gathering and quality.

Commissioning and use of resources

The views of users and carers are fed into the Self Directed Workstream via the User and Carer Involvement Forum and these views influence service development. Completion of a Disability Equality Impact Assessment and an extensive consultation exercise on proposed changes to the Charging Policy for Non-Residential Care Services have led to the proposals being significantly changed and agreed by Cabinet and the revised Charging Policy has been implemented. Darlington Adult Services play an active role in the Regional Joint Improvement Plan with membership on the Regional Commissioning/Use of Resources group. However, the recent Service Inspection identified that joint working needs to improve with better understanding among statutory commissioners about respective budget and resource commitments. There is no joint workforce planning with the PCT which hinders joint service development and inefficient use of skills.

The Joint Strategic Needs Assessment has been published and aligned with the Sustainable Communities Strategy (One Darlington Perfectly Placed) and the Local Area Agreement. The JSNA identifies health inequalities in the Darlington area and is being used to inform commissioning. Population needs analysis is undertaken with a variety of partner organisations, for example, health, police and the local fire authority. The council has reconfigured services in response to results of needs analysis and national policy.

The quality monitoring process implemented by the council evaluates the quality and capability of service providers and identifies any risks to safety or quality issues. Outcomes from the quality monitoring process impact upon on-going procurement.

Summary of Performance

There is a good range of accessible information about healthy lifestyles which is available in a wide range of formats tailored to people's diverse needs, including development of a new website for people with learning disabilities. A Sustainable Communities Strategy is in place that details the council's intention and plans to reduce health inequalities across the council area, however, positive health outcomes for people are yet to be demonstrated. Community based campaigns are undertaken but the council is yet to provide evidence that these contribute to reducing health inequalities and promoting healthy lifestyles.

The Community Alcohol Service is providing a multi agency, holistic approach and has improved accessibility through outreach clinics. There are well attended activities for people with learning disabilities, mental health needs and older people which include healthy living support. The overall level of non-residential intermediate care has increased this year and the number of delayed discharges continues to be low with none attributable to the council. Rehabilitation services are well developed. The number of permanent admissions to care homes has decreased substantially from 2007 and all people with learning disabilities have now moved out of NHS in-patient or campus accommodation.

The council ensures that people living in care homes are provided with nutritionally balanced meals which meet their health needs and individual preferences. Independent providers must demonstrate personalised planning and monitoring for individuals and a commitment to treat under nutrition through real food. People with complex needs and from diverse communities are supported to maintain healthy diets within a range of community services.

A range of palliative care services are available including home, hospice and 24 hour care. Packages of care are responsive to individual need and co-ordinated in partnership with PCT. The Joint Commissioning Strategy for End of Life Care is in early stages of development.

The first point of contact for people accessing adult social care is the Access and Contact Team. Assessments are completed electronically within the Single Assessment Process and are well focussed, full and reviewed regularly. Everyone who undergoes an assessment receives an information pack. The packs have been developed with involvement of people from the target audience and readers groups. Information about services can also be obtained via the council's web-site, however, at the recent Service Inspection; people interviewed reported that they found the web-site difficult to navigate. However, the inspection team did conclude that assistance provided following assessment was appropriate and helped people to restore their confidence enabling them to do things for themselves.

The number of older people with complex needs supported at home has increased during the past year and people are well supported to maintain independence through a wide range of services which are increasingly personalised and include use of mainstream provision. Over the past year, the council has developed a person centred planning team, with over 75 staff being trained. People with complex needs receive specialist advice and support. The council have recently undertaken a review of day service provision for people with learning disabilities and has begun to move away from the traditional directory of activities and now support individuals to achieve outcomes which reflect how they want to live their lives. Extra Care housing is proving to be a real alternative to residential care and the lessons learnt at Rosemary Court are being used to improve the other extra care services in Darlington. The choices made by people are supported through Direct Payments.

The council's Assistive Technology Project has been implemented and the number of people benefiting from telecare services in Darlington continues to increase. People who were interviewed as part of the recent Service Inspection confirmed that assistive technology had

increased their independence and confidence but said that they would have liked to hear more about the other devices available to them.

The council's Social Inclusion Strategy 'All Together Now' is impacting across a range of people and services to reduce risk of disadvantage, discrimination and deprivation. There has been a recent development of flexible transport in partnership with local stakeholders which has supported a number of people to access social activities within the town. A disabled changing space within the Dolphin Centre is due for completion during 2009 and this will enhance opportunities further for people and their carers. Service users interviewed during the Annual Review Meeting, confirmed that there is easy access to leisure and educational facilities in the town. However despite the council's commitment to the Sustainable Transport Strategy and consultation with residents, during the recent Service Inspection a number of service users said that transport was a problem and the recent change in bus routes had meant that they didn't have such easy access to social and shopping opportunities.

There is a large range of fitness and health based programmes available, many of which have social benefits. Recent activities available to people included an outdoor tea dance, a "fit as a fiddle" scheme run by Age Concern and a range of free and low cost activities run by the Dolphin Centre for older and disabled people. Contracts with the independent sector require the provision of social activities.

The council continues to work with providers to develop local services, and skills, so that the number of adults with profound needs currently placed out of the council area can be further reduced. There is, however, an acknowledged need to improve the quality of life of older people in end of life services, especially people in nursing homes.

The number of carers receiving carer's specific services has reduced and is now lower than that provided by similar councils. Carers assessments are undertaken jointly with that of the service users and at the recent Service Inspection, inspectors noted that staff appeared uncomfortable with the concept of "stand alone" assessments.

People are being supported and empowered to make their views known through a variety of methods including a Facebook group. This approach is embedded in the council's activities, and a number of changes have been identified as a result. Everyone who has a care plan has been invited to feedback their views through a User Satisfaction Survey and the council has plans to develop this further to ensure it captures more outcome related information.

Users and carers are supported to pursue their interests including taking part in community life. People who use services and carers are involved in all stages of planning and development of services including recruitment of staff and commissioning and procurement processes. There are 'Connecting with Communities' Champions in all departments across the council. The Advocacy Service has been retendered to meet quality standards which are monitored. The council has found engagement with black and minority ethnic communities more challenging since the County Durham and Darlington Race Equality Council no longer exists and further development work needs to be done.

The council offers a comprehensive range of information about adult social care processes and services, including financial advice and is available in a wide range of formats. This includes clear information about how to make a complaint or comment. The recent Service Inspection found that public information was well written and developed in conjunction with readers groups. However, many people expressed during the Inspection that getting straightforward initial information about how to access services and what was available could be difficult. The implementation of Individual Budgets is at an early stage.

Almost all services are provided within four weeks of assessment. Assessments focus on individual preferences, incorporate the views of family and carers and increasingly allow for positive risk taking. People who use services and carers can request additional and unscheduled reviews if they wish.

There is a range of services including support and advice in emergencies routinely available outside standard office hours. The Emergency Duty Team is commissioned from a partner council for out of hours contact. The Access and Contact Team provide a single point of contact for the council, however, the work to develop an integrated Single Point of Access with health is still ongoing.

Complaints are handled promptly and the council is committed to identifying lessons learnt and implementing any necessary service improvements.

Information about eligibility is available on the council's website and in leaflet form. Assessments are available to everyone, regardless of whether or not they will need to pay for their own services. The Access and Contact Team provide a signposting service for those people with low level needs and are developing processes to record outcomes for these people.

During the year the council has completed Disability Equality Impact Assessments for a range of services which have led to changes in the way services are provided. The council works in partnership with other agencies to provide advice and support to a range of people with disabilities, from diverse backgrounds, cultures, religious and ethnic groups and sexual orientation. The BME Development workers are providing information and support for people from black and minority ethnic communities with mental health needs, and are raising awareness of mental health issues within these communities. The Hate Crime Officer is a member of the Learning Disabilities Partnership Board. Ongoing awareness training with social care staff and other agencies is delivered by the IMCA (Independent Mental Capacity Act advocates) service. Other advocacy and interpreting services are also available.

The council has an in-house welfare rights service which delivers advice and information, income maximisation campaigns, specialist welfare benefit casework, financial literacy training and advice on budgeting skills. The service has continued to achieve significant additional benefit income for clients. The Direct Payments Support Service provides brokerage, support and advice for individuals to manage their support independently. The revised Charging Policy has been implemented and impact on individuals has been closely monitored. Clear and easy to understand information on charging is available, including on the website and in other formats.

The council has made some progress in identifying and developing opportunities for employment with independent providers, for people with a learning disability. The council has a number of schemes and services which provide employment for people with disabilities and is further developing these. The percentage of people with learning disabilities in employment is twice the level in similar councils.

Carers needs for employment, both current and aspirational, are routinely identified through the assessment process including through joint care assessments. Carers are able to determine how support is to be provided in ways which make most sense to them.

Information about how to make a referral if concerned about the safety of an adult is available on the council's website which has been redesigned to improve public access and connects with WebPages of partner organisations. Team managers act as safeguarding leads and work together to address safeguarding issues as they arise. At the recent Service Inspection, inspectors noted that whilst immediate problems were dealt with, there was sometimes

insufficient follow up to ensure problems did not recur. The inspectors identified that there needed to be stronger oversight of practice to ensure consistent professional standards of work.

The number of safeguarding referrals has reduced slightly this year although the rate of referrals remains higher than in similar councils for all user groups with the exception of carers. The Safeguarding Adults Board is now well established and supported by a Lead Officers Group. Strong partnerships have been developed with key partners on the board. A new Safeguarding Team is jointly funded on a recurring basis, but inspectors during the recent Service Inspection noted that recording and communication across agencies and teams was in need of improvement.

Only 29% of staff working in independent registered care services have had some training funded or commissioned by the council and inspectors at the recent Service Inspection, noted that training needed to reach a wider range of people, specifically in relation to staff working in the independent sector and in the supported housing schemes. Processes are in place to monitor the uptake and level of safeguarding training within regulated services.

The council can evidence service development as a result of feedback and complaints from people or groups. Carers are provided with training opportunities to promote skills and knowledge. The Quality Standards process and monitoring of commissioned services is well embedded and can demonstrate year on year improvement in quality of services. The Dignity Challenge has been launched in Darlington and is seen to be integral in the work of Adult Social Care and is a main theme running through commissioning strategies policies and practices.

The council's quality monitoring process evaluates people's living conditions and the availability of single room accommodation within commissioned residential services. The environmental assessment is undertaken by an external agency and most recent data demonstrates that the residential services commissioned by Darlington council had a lower than national average of shared rooms and rooms without en-suite.

Outcome 1: Improved health and well-being

The council is performing: **Well**

What the council does well.

- There is a good range of information for the public about healthy life styles and well-being.
- There is a useful website for people with Learning Disabilities.
- People living in Darlington are encouraged to pursue an active life.
- There is a high level of intermediate care and support for people to live at home.
- There is use of assistive technology to support peoples' independence.
- Rehabilitation services are well developed.
- The council ensures through their quality monitoring processes that nutritional screening tools are in use within contracted residential homes.

What the council needs to improve.

- The End of Life/Palliative Care Strategy is in place but the council should ensure that the plans and intentions contained within the strategy are implemented.
- A Sustainable Communities Strategy is in place with the intention of reducing health inequalities across the council area however more positive health outcomes for people are yet to be demonstrated.

Outcome 2: Improved quality of life

The council is performing: **Well**

What the council does well.

- Support for people with complex needs to live independently at home.
- The provision of assistive technology to support people at home.
- Extra Care housing is well established.
- Minor and major adaptations are provided more speedily than last year and than in similar councils.

What the council needs to improve.

- The number of carers receiving carer's specific services.
- Review the web-site design to ensure that information is easily accessible for people who use services and their carers.
- Improve the promotion of individual carers assessments.
- Train and support staff to offer and complete individual carers assessments.
- Increase the number of working age adults helped to live independently at home
- Explore ways in which the quality of life for people in nursing homes can be improved.

Outcome 3: Making a positive contribution

The council is performing: **Well**

What the council does well.

- Seeking the views of people who use services has now become embedded in the council's activities.
- Use of innovative methods to obtain views of people who use services, their carers and the wider community.
- People who use services and carers are involved in all stages of planning and development of services including recruitment of staff and commissioning and procurement processes.

What the council needs to improve.

- The council has provided limited evidence of voluntary organisations influencing improvement.
- Improve engagement with BME communities.

Outcome 4: Increased choice and control

The council is performing: **Well**

What the council does well.

- Packages of care are provided without delay.
- Reduction in the number of permanent care/nursing home placements.
- There is a good range of well produced information for the public, including how to make a complaint.
- Complaints are reviewed and contribute to the council's learning and service development.

What the council needs to improve.

- Further develop individual budgets and self directed support.
- Develop an integrated Single Point of Access with health partners.

Outcome 5: Freedom from discrimination and harassment

The council is performing: **Well**

What the council does well.

- Clear eligibility information is disseminated widely and to diverse groups utilising innovative methods of distribution.
- The council has maintained all four FACS bandings.

What the council needs to improve.

- Develop processes to record outcomes for people with low level needs who are signposted to other services.

Outcome 6: Economic well - being

The council is performing: **Well**

What the council does well.

- Support people with learning disabilities into employment.

What the council needs to improve.

- Development of micro enterprises and projects for individuals within services.

Outcome 7: Maintaining personal dignity and respect

The council is performing: **Adequately**

What the council does well.

- Safeguarding Board is well established
- Information about how to make a referral if concerned about the safety of an adult is available on the council's website which has been redesigned to improve public access and connects with WebPages of partner organisations.
- The Safeguarding Team is jointly funded on a recurring basis.

What the council needs to improve.

- Increase the number and range of staff who are specifically trained to identify and assess risks.
- Increase the number of staff working in independent registered care services who have had some training funded or commissioned by the council.
- Implement robust managerial oversight of safeguarding practice to ensure consistent, professional standards of work.
- Improve communication between agencies and teams with the safeguarding agenda.
- Improve the quality of safeguarding recording.
- Ensure that IMCA services are appropriately offered in all relevant cases and their input is recorded.
- Ensure that the Deprivation of Liberty training links in with the safeguarding agenda.
- Increase the focus of safeguarding for people with learning disabilities, paying particular attention to better engagement with service users, a better understanding of capacity and better case recording.