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**OVERVIEW OF ADULT SOCIAL CARE AND HOUSING PORTFOLIO**

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**Purpose of the Report**

1. To inform and update Members on progress within Adult Social Care and Housing since the last meeting of Council. The following are the main areas of work under the Portfolio for Adult Social Care and Housing.

**Adult Social Care**

**Learning Disability Annual Self-Assessment**

2. Each year, for the past six years, the Local Authority, Clinical Commissioning Group (CCG) and partners have completed a self- assessment that sets out the local picture of life for people with a learning disability and their family carers. For 2015-2016 there has been a light touch data extraction rather than a full self- assessment. The data extraction tells us :-
  - (a) recorded by GP, Darlington has a higher proportion of people with a learning disability than the national average, however it is one of the lowest in the region
  - (b) recorded by School, there is a higher proportion of pupils with a learning difficulty than the national average
  - (c) the proportion of people with a learning disability who are in-patients on psychiatric wards is higher than the national average ( this may be linked to the private hospitals locally)
  - (d) the proportion of those receiving support in settled accommodation is above the national average (this is a positive)
  - (e) the number of people with a learning disability who receive an annual health check is at 74 per cent, which is the highest in the region.
3. The self- assessment was validated through the learning impairment network as required. The Network has identified its priorities for inclusion in the next iteration of the self-assessment and these include :-
  - (a) increasing the uptake of flu vaccination;
  - (b) increasing the number of people undertaking cancer screening;

- (c) checking the quality of Health Action Plans;
  - (d) increasing the number of Annual Health Checks;
  - (e) an understanding of the numbers of people undergoing in- patient assessment and treatment and their length of stay. Particularly how long people had been in hospital. The local Peoples Parliament has developed a standard letter that is sent to anyone with a learning disability/impairment who is detained inviting contact if needed;
  - (f) the further roll out of 'safe places' locally that offer people a safe haven for whatever reason;
  - (g) the number of people who live in residential care both inside and outside of the Borough;
  - (h) the number of people who share their homes with people they have not chosen to live with;
  - (i) the number of people who live with a family carer who is over the age of 65; and
  - (j) the use of bus passes before 9:30 a.m.
4. The Network has identified its priorities for 2016 as :-
- (a) supporting people to develop and maintain friendships and relationship;
  - (b) the implementation of the transforming care agenda locally;
  - (c) support into paid work;
  - (d) understanding the impact of Council budget proposals; and
  - (e) the importance of the language in developing and maintain culture

### **Safeguarding Adults Board (SAB)**

5. The last SAB meeting was held on 26 February, 2016. The meeting discussed a proposal from NHS England for SABs to undertake Learning Disability Mortality Reviews. Further information is being sought and with engagement from Adult Social Care in order to help inform the decision if Darlington SAB undertake these Reviews.
6. The SAB is working with the Council, the Health and Wellbeing Board, the Local Strategic Partnership Board, the Community Safety Partnership and Darlington Safeguarding Children Board to develop a protocol of how each strategic partnership better aligns their strategic priorities, with particular focus on common agendas such as domestic abuse, hate crime, female genital mutilation, PREVENT and honour based violence.
7. The Board received assurances that agencies represented on the Board were discharging their statutory safeguarding responsibilities appropriately through a self-assessment which was undertaken early 2015. The key learning from the audit

was good practice identified but also that the process to undertake the self-assessment needed to be improved including the timeliness of conducting the audit and reporting back the findings. Partners will be updating the action plans from the audit for the Board meeting, and the findings of the audit will be reported in the SAB 2015/2016 annual report.

8. The Board discussed a research report, commissioned by Durham Constabulary which had been brought to the Vulnerability Group (sub-group of the Community Safety Partnership) on 'Ageing Sex Offenders'. Key learning from the report for the SAB was improved planning between housing and the probation service when individuals are due for release, as these individuals may not only pose a risk to adults at risk and/or children but they too may be an adult at risk with care and support needs. SAB will receive an update on how Housing and the Probation Service have improved planning for individuals leaving the criminal justice system.
9. The SAB endorsed the terms of reference to undertake a multi-agency thematic audit on 'Making Safeguarding Personal' (MSP) to better understand how key agencies across Darlington have embedded this principal within their practice to safeguard adults at risk.
10. The Adults and Housing Scrutiny Committee provided an update to the group on its learning from the Independent Chair of the SAB and the Business Manager attending its Dementia Task and Finish Review Group which was to hold the SAB to account for how it ensures individuals with dementia are safeguarded. The outcome from this meeting was that the Adults and Housing Scrutiny Committee would further hold SAB to account but they too wanted to be involved in the SAB work and have agreed to ask MSP questions to providers they are visiting.
11. A case has been considered for a Safeguarding Adult Review and this process has been initiated to seek learning from how agencies have worked together to safeguard the adult at risk.
12. The adult safeguarding function which moved from the Multi Agency Safeguarding Hub at the Police Station in December 2015 remains at Central House. The interim arrangements will continue which will give an opportunity to review safeguarding across the Borough. The safeguarding function will continue to operate within a multi-agency framework during this time and partnership arrangements will continue to remain unaffected.

### **Care Act Statutory Guidance**

13. On 10 March 2016, the Department of Health published the updated edition of the Care Act Statutory Guidance. The new edition takes account of the regulatory changes, feedback from stakeholders and the care sector developments following the postponement of social care funding reforms to 2020. In the main, the changes have been minor amendments and/or improved clarity and explanation.
14. For some areas, including Safeguarding, there are a number of changes, one of which is the removal of the need to have a Designated Adults Safeguarding Manager. Feedback suggested that this role created confusion and distracted from

improving practice and there was the potential for duplication across the strategic and operational roles within Adults Safeguarding. The amendments do focus on the need to have strong leadership and expertise within the organisation where practitioners can go to for advice and guidance, with an emphasis placed upon the potential for the Principal Social Worker to be a key part of this.

15. Further clarity and updates have been provided in relation to establishing ordinary residence. Duties and responsibilities for arranging care and support in another area and mental health after care particularly under Section 117 of the Mental Health Act 1983 have been amended. Work is ongoing to understand this particular element in more detail. Within the Darlington area there are two independent hospitals where individuals from other local authority areas or CCG's have been placed previously. The funding will remain with the placing authority unless their circumstances change, this can include if the individual has to be detained under the Mental Health Act 1983 and they are in the Darlington area at the time of detention. For some individuals this can impact upon their ordinary residence status, which as a result may require Darlington Adult Social Care to fund their support needs. This does pose a risk in terms of the current budget pressures. Further work with our colleagues in Legal Services is required to understand this further in terms of being clear in relation to our responsibilities as a Local Authority.
16. Following the implementation of the Care Act, work was undertaken to revise our charging policies for residential and non-residential services. The policies were subject to a period of consultation which ended on 29<sup>th</sup> April 2016. The impact assessment will be finalised and a final report with recommendations will be completed for Members to consider and agree in terms of the new policies.
17. A further consultation exercise has been completed in relation to the closure of Vane House. The Sensory Impairment Service has been based within Vane House but following the sale of the Arts Centre, needs to move before the Summer of 2016. An impact assessment has been completed and options are being considered in response to the consultation feedback. Options within the proposals include looking at community facilities and also providing an outreach service which will support individuals within their own homes.

## **Hospital Discharges**

18. Work is now underway to review the pilot schemes that were commenced during the Winter months to help facilitate timely discharges from hospital. These schemes included community beds within Ventress Hall Care Home and a Rapid Response Domiciliary Service. Initial feedback from the beds has been very positive and it is envisaged this scheme will need to continue to be able to support ongoing discharges and remove the need for individuals to go to the Richardson Hospital wherever possible. The CCG is leading on the evaluation and re-commissioning of this facility. The evaluation of the Rapid Response service indicates that to ensure the scheme has greater impact in the future. It would need to be commissioned in a different way which may include options such as block commissioning or guaranteed payment to ensure staff are readily available within a very short timescale. This would assist with supporting timely discharges for the individual

back to their usual place of residence, allowing for a period of assessment within familiar surroundings and reducing the admission to residential care.

19. Feedback from the Durham and Darlington Foundation Trust in relation to support from the Local Authority has been very positive, we have Social Work staff based on site and they are now attending a twice daily Multi-Disciplinary Meeting, building upon the success of the GP and Responsive Integrated Assessment are Team MDT meetings. The purpose of the twice daily meetings is to ensure that those requiring support in relation to planning and facilitating their discharge are allocated a key worker who will take the lead in coordinating this. The team consists of Social Workers, Discharge Sisters, Community Nursing staff and Palliative Care Coordinators. Once the initial pilot stage has been completed, it is hoped that the meetings can be developed further in terms of membership and representatives from the voluntary sector would be part of them.

### **Better Care Fund**

20. The Better Care Fund allocation for Darlington in 2016/17 is £8,014,000. This comprises £7,274,000 Clinical Commissioning Group (CCG) revenue funding and £740,000 Disabled Facility Grant. Of the £7,274,000 CCG Revenue, £2,337,000 is based on the Relative Needs Formula for social care, and a further £2,067,000 is ring-fenced for NHS out-of-hospital commissioned services.
21. Our plan meets the eight national policy requirements requirements and fits within Darlington's longer-term health and social care transformation Vision 2020. It also aligns with the Foundation Trusts' operational plans and the One Darlington community strategy objectives. It builds on initiatives begun in 2015/16, extending their reach and ambition :-
  - (a) Multi-Disciplinary Team approach to reducing emergency admissions to hospital;
  - (b) An approach to 'Social Prescribing' ;
  - (c) Hospital to Home – bringing together a number of initiatives introduced in BCF 2015 to reduce delays to discharge from hospital for medically stable people back to a community setting: wherever possible this is their usual place of residence;
  - (d) Safe at Home – bringing together and building on a number of initiatives introduced in BCF 2015 to help maintain independence among frail elderly people at home, support is commissioned to better support people at home; and
  - (e) Long Term Conditions – continuation of the existing two year project which started in September 2014 and this year is focusing on breathlessness
22. These five projects are supported by three types of cross-cutting activity – the deployment of assistive technologies such as pill dispensers, support services for carers and seven-day service provision.

23. A submission was made on March 21. This was assessed and feedback received from the assessing panel. The final plan was then submitted on 3 May, following sign off by the Health and Well-being Board.

### **Telecare Project**

24. One of the main themes of the Managing Cost of Care programme was to invest in preventative services and increase the provision of Assistive Technology/Telecare to reduce demand on both health and social care services by helping individuals to maintain their independence at home for as long as safely possible.
25. Introducing more Telecare will aim to reduce the demand for social care support for people who are living in the community, preventing a delay in need for support as well as increasing independence, choice and well-being.

### **Training/Telecare referrals**

26. A key theme of the telecare project was to raise awareness amongst staff to ensure they knew what equipment was available and that telecare was not just about the Lifeline personal alarm. There are many other types of telecare equipment that can increase people's independence, reassure family members and keep people safe within their own homes.
27. To gauge the success of the training, increased awareness, including dedicated intranet page on telecare information with clear referral process, reports of Assistive Technology / telecare referrals have been developed to understand the number of referrals being recorded and the percentage that have equipment successfully installed. The project has so far demonstrated that compared to the previous year that referrals have almost doubled.

### **Reablement Pilot (Free telecare for 6 weeks)**

28. By having telecare in place during reablement helps people at a time when they need extra support from hospital discharge or another health episode. During 2014 there had been a low up take in telecare referrals from Responsive Integrated Assessment Care Team. Since introduction of free telecare for the first six weeks we have more than doubled the number of telecare referrals and over 40 per cent of people have continued with telecare as a private arrangement paying for telecare themselves.

### **Medication Dispenser Pilot – Pharmacy Support**

29. A full review of the use of medication dispensers was carried out by the Lifeline team including developing a generic risk assessment and referral/installation checklists for staff to complete. The devices were re-launched for people who had family or carers to fill the dispensers as Lifeline staff is not allowed to do this. The uptake of this was low and it was decided to explore if any support from pharmacies could help those who did not have people to fill dispensers for them. An independent pharmacy agreed to carry out a small pilot to take referrals from

Adult social care and fill, programme and deliver dispensers. The pilot started on 7 March and progress of this will be reviewed on a weekly basis to ensure the process is working and improved before potentially expanding to other pharmacies.

### **Just Checking – Lifestyle/Activity Monitoring**

30. Just checking is a simple web based assessment tool that helps you get the right support for people at the right time to help promote independence. The system is easy to install, simple to use, and creates a clear chart of daily living activity that you can view securely online. The system works by having discreet motion sensors setup in a person's home.
31. After a successful six week free trial of a Just Checking system within a supported living accommodation in the learning disabilities team a business case was developed to purchase four systems at a cost of just over £11,000. Since the systems have been purchased in January they have been installed in four properties. As at 18 March, two systems have chart reviews both resulting in delaying and preventing admission to Residential care.
32. In one case, the family leased a system from Just Checking once the Council had completed the Just Checking assessment within its system. It enabled the family members to monitor the wellbeing of their family member and provide reassurance they were coping better than first thought with the support of a home care package.
33. An evaluation will be completed on the four systems used so far to determine if more systems can be purchased and how this can be embedded as an assessment tool for Adult Social Care in key pressure points of the service at First point of contact, Reablement, ongoing reviews, safeguarding and within the validation forum.

### **Commissioning and Contracts**

34. During February and March 2016, the Commissioning and Contracts team and the social work teams, have worked closely with two providers of residential care for older people as a result of the closure of two care homes.
35. Both of the home closures were achieved within the agreed timescales, with both the individuals affected and their families being involved in the decommissioning, having a reassessment carried out by social work staff and being offered a choice of alternative care homes.
36. Throughout the process, ongoing support, advice and guidance was provided to the individuals and their families affected, with a safe and dignified transition to alternative care homes being achieved for all of the residents.

## Housing Services

### Red Hall

37. The Red Hall regeneration work continues. In the last few weeks, Officers from the Council and Groundwork have continued to work with residents of Red Hall. There has been an increase in both the numbers and scope of the Street Champions and some very successful litter picks have taken as part of the Big Spring Clean. Whilst the Council is encouraging residents to be actively involved, we have also made it very clear that those residents who dispose of their rubbish inappropriately will be dealt with. This has resulted in a number of enforcement actions being taken. As part of the ongoing commitment to share information and encourage residents to be involved, the Red Hall Facebook page continues to be used to promote events and share posts. This page is now viewed and shared with over 450 people.
38. The Police Mutual Gain Project continues to progress and the recent surveys in February and March identified that residents had three key priorities; the commercial centre; parks and open spaces and nuisance from off road vehicles. As the first two are already priorities in the regeneration plan, the nuisance from off road vehicles was addressed at an open event on 8 May. The meeting brought together the community, off road vehicle users, local retailers and the Police. An action plan that takes account of all views will be forthcoming in the next few months.
39. I am pleased to report that Mitie, the Council's painting contractors, as part of its corporate social responsibility, recently worked with Red Hall Primary School and some parent volunteers to redecorate the school gym.
40. Darlington was successful in its bid for Healthy Town status for the eastern urban fringe which consists of the existing community of Red Hall as well as the new housing developments at Burdon Hill, Lingfield Point and Red Hall stables site. We were one of ten successful bids and the only one in the North East. Funding has been provided by the Government for up to £150K per scheme for project management, co-ordination and support type activity and work is progressing on a detailed delivery plan.

### Lifeline Services

41. The Move More Officers funded from the Housing Revenue Account are making good progress in establishing the range of new activities that our tenants who are connected to Lifeline, have indicated they would like. Over recent months they have established links with Music4all, a group that encourages young and mature music students to get involved in community activities. To date, a concert has been given at Dinsdale Court with 30 people attending and a mature student is supporting a group at Dalkeith House. EE are trialling, at Branksome Hall, some technical advice sessions with tenants who are buying new appliances and equipment. Over Easter all of the schemes have had a range of seasonal activities that have allowed every tenant to get involved and benefit from the social company and stimulation.



42. A new relationship has been developed with the Cambian Group who are one of the largest providers of specialist health services for children and young adults in the UK. Two of its students are currently attending Darlington College for job placement/voluntary work and have been placed within one of our Extra care scheme. There have been significant benefits for both the tenants who have had two extra volunteers and the students who have gained experience which will help them in their search for job placement/voluntary work.

### **Council New Build Programme**

43. Work on the Council New Build programme is now gathering pace. Twelve two-bed flats have been completed at Badminton Close, Red Hall. They proved to be very popular and all were quickly let. Work is now progressing on Fenby Avenue, Lascelles where 24 two-bed flats and four two-bed houses are being built. Completion is due in October 2016. Work has also started on Hammond Drive, Skerne Park where 18 two-bed flats are being built. Completion is due in November 2016.

44. Wherever possible, Housing Services encourages contractors undertaking work to Council Housing to employ local labour and provide opportunities for apprentices. Our in-house Building Services Team has recruited four apprentices. Two of these positions were for joiners who have come directly from leaving school spending four days a week on site learning joinery skills and one day at College to achieve NVQ level 3 in joinery at the end of the two- year apprenticeship. The other two apprentices are bricklayers who were not in employment and wanted to learn a new skill that would serve them well for the future. They are also working towards a recognised qualification.

45. I have also :-

- (a) attended meetings of the North East Veterans and Reservists Associations;
- (b) attended the re-dedication of HMS Callipole;
- (c) visited Lingfield Point;
- (d) attended the Mayor's Ball; and
- (e) attended the People's Parliament to discuss the budget proposals

**Councillor Veronica Copeland**  
**Cabinet Member with Portfolio for Adult Social Care and Housing**