

**1 DCABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING
- 13/ 09/ 10**

**CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING
Monday, 13th September, 2010**

Present:- Councillor Doyle (in the Chair); Councillors Gosling, Jack and P. A. Russell.

Apologies for absence were received from Councillor Walker.

D17. MINUTES OF THE PREVIOUS MEETINGS HELD ON 26TH JULY, 2010 & 6TH AUGUST, 2010

Consideration was given to the minutes of the previous meeting of the Cabinet Member for Health and Social Care held on 26th July, 2010 and the Cabinet Member for Adult Independence Health and Wellbeing held on 6th August, 2010.

Resolved:- That the minutes of the previous meetings held on 26th July, 2010 and 6th August, 2010 be approved as a correct record.

D18. ADULT SOCIAL CARE 1ST QUARTER PERFORMANCE REPORT

Chrissy Wright, Director of Commissioning and Partnerships presented the submitted report which outlined the 2010/11 Quarter 1 Key Performance Indicator results for the Adult Social Care elements of the Directorate. Seventeen KPIs were included in the suite, and of these at the end of Quarter 1, 76% (13) remained on target.

The following four performance measures did not achieve their target at Quarter 1.

- NI 136 (Vital Signs 3) People supported to live independently through social services (LAA)

At the end of Quarter 1 we were helping 5,666 service users to live at home. This score included last year's voluntary sector figures plus service users currently in receipt of an assessed care package.

To achieve this year's target we need to help approximately 2,000 extra service users by the end of the year.

An action plan had been developed to meet the target by capturing additional activity such as equipment, assistive technology and signposted services.

A significant increase in performance on this indicator may have an adverse effect on other indicators such as reviews, waiting times and carers.

Discussions had commenced with the Voluntary Sector to develop a commissioned support service for people who contact us, but following assessment did not meet FACS, approximately 3000 per year.

- **NAS 1 (PAF D40) Percentage of service users receiving a review**

This indicator was showing off target with a Quarter 1 score of 18.08% against a milestone target of 22.67%. However, 225 reviews had been completed during Quarter 1 that were still to be authorised and were not counted in the score. With these included the Quarter 1 score would be 21% which was just under the milestone target.

The roll out of personalised budgets had also had an impact on the rate of reviews undertaken as changes to business processes and the introduction of new forms and IT system changes had been put in place. This had affected the productivity of social work teams as they adjust to new ways of working.

A performance clinic was held on 29th July and the following actions were put in place:

- Appoint new Principal Social Worker from August to focus fully on reducing the numbers of unauthorised reviews.
 - Telephone reviews to commence from July
 - Residential and day care providers carrying out individual reviews on their service users (to commence immediately)
 - Revised targets set for social work teams to increase activity and bring indicator back on target by end of 2nd quarter
 - Remedial targets set for each service user group
 - Meeting to be convened with Mental Health to discuss remedial plan to bring performance back on target.
- **NAS 18 Percentage of customers receiving a statement of need**

This indicator measures the percentage of service users who had received a current statement of their needs and how these were being met.

Unauthorised review activity had had an impact on this indicator because the statements of need could not be sent out until after authorisation by a Team Manager or Principal Social Worker. Authorisation of these reviews would put the indicator back on target and this would be addressed by the appointment of a new Principal Social Worker in August.

- **NI 133 (Vital Signs 13) Acceptable waiting times for care packages**

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Of the care packages put in place during Quarter 1, 27 out of a total of 341 took longer than 28 days from the date of assessment. Historical problems with waiting lists for day care places and visual rehabilitation (Green Lane Resource Centre) had had an impact on Quarter 1 performance, as some service users assessed in 2009/10 had filtered into the score. These issues had now been resolved and alternative services were being offered so that we did not hold any waiting lists during 2010/11.

Reports were now being sent out to managers for action on a weekly basis detailing those who were waiting for services and highlighting cases where a service needed to be put in place in the coming week.

A discussion ensued regarding the use of telephone reviews and concerns were raised that this left customers at risk. Assurance was given that customers were given face to face interviews on alternate years and that consultation was also undertaken with their carers and families as part of the review.

Resolved:- That the results and the actions in place to improve performance be noted.

D19. SAFEGUARDING ADULTS ANNUAL REPORT

Further to Minute No 9 of 12th July, 2010, a further finalised report was presented in respect of the Safeguarding Adults Annual Report for 2009/2010.

Resolved: That the Safeguarding Adults Annual Report for 2009/2010 be noted.

D20. ASSISTIVE TECHNOLOGY

Kirsty Everson, Director of Independent Living presented the submitted report which provided a progress update on the roll out of Assistive Technology, summarised the learning from the Preventative Technology Grant (PTG) Project and identified the next steps being taken.

The key achievements were:

- Creation of an assistive technology smart flat at Grafton House, which has allowed NAS to evaluate the effectiveness of dedicated properties enhanced with a suite of assistive technology. Whilst the flats offer suitable accommodation for clients with a multitude of needs, the key challenge was moving the customer to other, more suitable accommodation. During the PTG project the smart flat was effectively bed blocked, on two occasions by customers.
- Undertaking trials on temperature extreme monitors, during the

winter of 2009, one of the coldest on record. Temperature extreme monitors were deployed to ensure customers remained warm in their home. Whilst only limited alarm activations occurred this had led onto further work with Sheffield University and the Keeping Warm in Later Life Project (KWILLT). Further work was now underway with telecare suppliers to reduce the parameters of the sensor and target even more vulnerable customers.

- Deployment of over 250 Bogus Caller Alarms in an initial trial, which in turn had led to additional funding from the JAG and South Yorkshire Police for further trials.

Surveys undertaken during December 2008 and January 2009 suggested that customers felt safer by having the technology installed in their property.

- Just Checking launch, with Rothercare now undertaking the installation element of the operation. This had resulted in increased interest by social worker teams to use this recently developed technology, which enabled the social worker or family member to monitor the daily activities of a customer, to provide additional assessment data or simply to ensure that they were carrying out their normal daily routines without requiring intervention.
- 40 Big button telephones were procured and issued to the sensory team to assist visual impaired clients. Whilst being the cheapest item procured through the project, they have assisted visually impaired clients to remain independent.
- 10,000 electronic clients' records were successfully transferred from the old Rothercare system, Tunstall PNC4 to the new ICT platform, Jontek Answer Link 3g. This was carried out without a break in live service to customers and the technology has benefited both staff and customers. Staff were able to undertake functions such as effective stock control and easier reporting. Other components to be procured for the Jontek system such as the integrated voice recording system would allow all calls to be recorded at the click of a button. The call could then be played back in real time and evaluated, to allow opportunities for better staff training through quality controlling calls and ensuring that customer request had been met.

During the project various internal departments and external organisations were approached to ensure that the full spectrum of customers were engaged and had the opportunity to benefit from assistive technology.

Next Steps – Building on lessons learnt it had been identified that assistive technology offered a cost effective alternative to traditional care

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packages. Additional funding of £225,000 from the Mid Term Financial Strategy (MTFS) had been achieved by NAS and would be used to build on the success of the PTG.

The Joint Commissioning Team had been identified to lead on expenditure and would work with partner agencies to forge closer relationships. It had been realised that this could not be achieved from existing resources so a dedicated post to fulfil the telecare agenda was being advertised and this post was now in the process of being recruited.

The new telecare post would work in tandem with Rothercare, joint commissioners, social workers, health professionals and other partner organisations to ensure that innovative ways of deploying telecare were maintained and an outcome focussed approach to the delivery of telecare was achieved. The remit of the telecare post would also involve the promotion of assistive technology through social workers teams to ensure that the delivery of telecare remained at the heart of any social care package.

Resolved:- (1) That the progress being made be noted.

(2) That a copy of the report be presented to the next Adult Services and Health Scrutiny Panel.