Adult Social Care Improvement Plan

Barking & Dagenham

October 2023
Status: Final

one borough; one community; no one left behind

Introduction

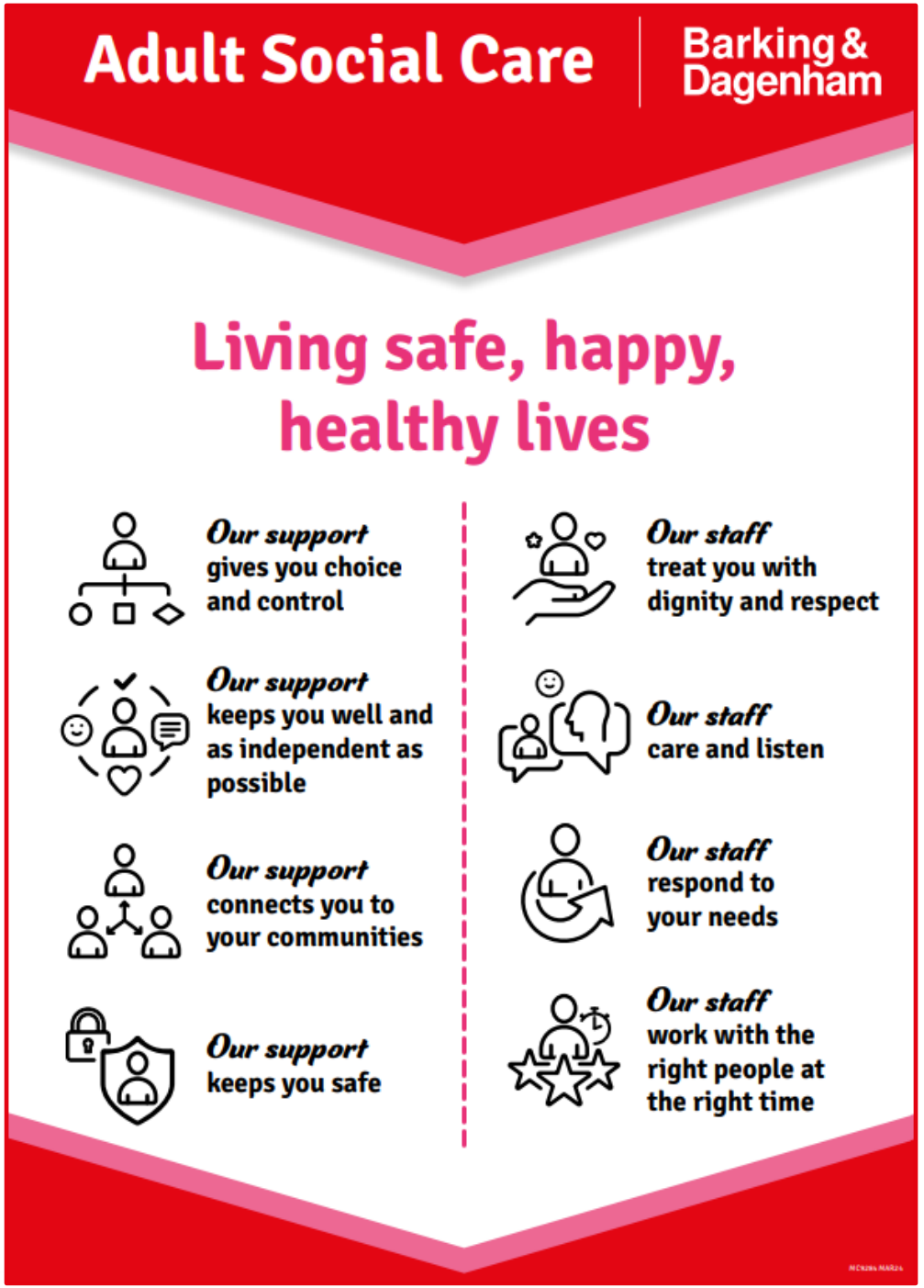
Adult social care in Barking and Dagenham supports adults with a physical disability, learning disability, mental health issue or long-term condition and unpaid carers to lead safe, fulfilling lives.

Over 3,000 adults receive long-term support each year, and more are supported through short-term support, support to unpaid carers, information and advice and activity aimed at preventing.

Our long-term strategy is to achieve our vision and values. This Adult Social Care Improvement Plan explains how will move towards this over the next 3 years. It is focused around four themes:

- Working with people.
- Providing support.
- Ensuring safety.
- Leadership.

This plan describes what we want to achieve and the action we will carry out to get there. These actions will be led by adult social care in partnership with others, including those who need social care and unpaid carers.



Background

Building on strengths

The strengths we want to build on include:

- We are one of the most ethnically and culturally diverse communities in England, and this diversity is reflected in our workforce
- People who need support and carers in Barking and Dagenham are supported by an exceptionally committed, responsive and stable workforce.
- The support people access benefits from the support we give to the care market.
- People are supported to be safe, and we have improved how we safeguarding people with complex needs or who are at risk of self-neglect.
- Our organisational culture prioritises openness and learning.

Addressing systemic challenges

The core, systemic challenges in adult social care are that:

- We continue to operate with significant financial pressures.
- Feedback is that people who need support have increasingly complex needs, partly as a result of the pandemic.
- There are significant health inequalities and challenges in the borough. Healthy life expectancy from birth was 58 years for men and 60 years for women in 2018-20, compared to a London average of 63.5 and 64 years respectively. This is impacted by deprivation levels and other wider determinants.

2,845 adults received long-term support throughout 2021-22.	8,000 people worked in adult social care in 2021-22.	44% of people received homecare, 21% of people received support in a care home and 29% of people organised support with a direct payment.
246 carer assessments were completed in 2022-23. 1,000 carers were supported.	1239 referrals to adult social care were made in 2022-23	1511 safeguarding concerns were raised in 2022-23. 252 enquiries started.
In 2021-22, Barking and Dagenham spent 14% of its expenditure on adult social care.	In 90% of cases, the risk was reduced or removed following a safeguarding enquiry.	64.5% of survey respondents in the 2022-23 Service User Survey reported being extremely or very satisfied with their care and support.

Theme 1: Working with people

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What do we want to achieve?

- ✓ Community capacity better supports prevention and wellbeing.
- ✓ People at risk of developing health and care needs are better supported.
- ✓ More residents with health conditions are assessed, identified, and provided with condition management as early as possible.
- ✓ More people know where to go for information and support, and what to expect.
- ✓ Information, advice, care and support is more inclusive and easier to find and access.
- ✓ Assessments and support planning puts people in the lead.
- ✓ Support, information and advice from staff is more consistent.
- ✓ People who need care and support feel less socially isolated.
- ✓ People more likely to receive poor care are identified and the reasons behind this tackled.
- ✓ People interact with staff who:
  - Care
  - Understand
  - Listen.

Assessing needs:

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Supporting people to live healthier lives:

We support people to manage their health and wellbeing so they can maximise their independence, choice and control. We support them to live healthier lives and where possible, reduce future needs for care and support.

Equity in experience and outcomes:

We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this.

Working with people actions

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Prioritise prevention:

1.1 Develop and carry out a prevention approach and plan, including a map of support, a communication plan to raise awareness, and a targeted approach.

Develop reablement as part of our approach to prevention:

1.2 Carry out and analyse the extended reablement pilot, agreeing a longer-term approach to reablement.

1.3 Embed a reablement ethos in all new, relevant commissioning service specifications.

Improve information, advice and communication with residents:

1.4 Review LBBD website information on adult social care

1.5 Develop easy to understand, new printed resident information on where to get support, charging, assessment processes, accessing interpreters and adult safeguarding.

1.6 Develop an online self-assessment tool.

1.7 Review and improve how easy it is for residents to contact us by phone.

Tackle waiting lists and improve how Occupational Therapy is utilised:

1.8 Carry out the Occupational Therapy Improvement Project.

Improve how we work with adults with a disability:

1.9 Carry out the learning disability review project and improvement plan.

Continually improve practice:

1.10 Carry out and learn from case file evaluations.

1.11 Revise the Practice Standards.

1.12 Reaffirm expectations on carrying out face-to-face annual reviews.

1.13 Develop an appeals procedure for assessments.

Improve information and procedures related to charging for social care:

1.14 Complete the Charging Policy review.

1.15 Carry out insight work to understand and address issues in relation to charging, client contribution collection and processes.

1.16 Develop an online ‘calculator’ to give early information on charging.

1.17 Develop an appeals procedure for charging.

Strengthen how we understand and tackle inequality:

1.18 Improve recording of protected characteristics on Liquid Logic.

1.19 Carry out annual insight work to understand inequalities in adult social care (access, experience, outcomes), including safeguarding.

1.20 Agree clear objectives to promote equality, diversity and inclusion in adult social care and review progress each year.

Theme 2: Providing support

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What do we want to achieve?

- ✓ More people live at home or in a place they call home.
- ✓ People who need care benefit from a care market that is well-supported and focused on outcomes.
- ✓ Potential of digital technology is harnessed.
- ✓ Care and support puts a focus on choice and supporting people to be as independent as possible.
- ✓ Carers have a better choice of respite options.
- ✓ The future care needs of Barking and Dagenham are planned for in partnership with housing.
- ✓ Collaborate with partners to improve our offer to residents who have been discharged from hospital, including wraparound care, to prevent cyclical admissions into hospital and promote independence.
- ✓ Care and support is more joined up.
- ✓ Roles and responsibilities are clearly articulated.
- ✓ People with autism have a clear offer of support from health and care services.

Care provision, integration and continuity:

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

Partnerships and communities:

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement

Providing support actions

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Move towards support more older people to live independently at home:

2.1 Carry out insight work to understand why the number of older people moving into care homes is rising, and what can be done to address this.

Strengthen our understanding of residents in care homes outside LBBD:

2.2 Carry out insight work to understand trends in out-of-borough placements.

Shape and support a diverse local care market:

2.3 Refresh the Market Position Statement, including how the diverse needs of our communities will be met by a diverse market.

2.4 Carry out the Social Care Action Plan to support the local care market.

2.5 Carry out work to develop the respite market and options for carers.

Empower people to exercise choice safely with a direct payment:

2.6 Start and monitor the new Direct Payment Support Service.

Enable people through technology to be as independent as possible:

2.7 Carry out the care technology programme, including the development of predictive analytics and OneView.

Plan to meet future housing needs for people who need support:

2.8 Develop a Vulnerable Housing Strategy with housing colleagues, to meet the housing needs of adult social care users in future.

Improve our understanding of the impact and outcomes of support:

2.9 Improve how we gather, understand and use data on the impact and outcomes of support, via co-production, care technology and OneView.

Improve our articulation of roles and responsibilities with health partners:

2.10 Agree an approach to Section 75 agreements with health in relevant adult social care operational services.

2.11 Develop written protocols and procedures between adult social care operational services and health partners on roles, responsibilities and pathways where there are gaps.

Improve information sharing with health partners:

2.12 Carry out the phase 2 pilot on social care staff accessing health records.

Move towards a community-led locality model with health:

2.13 Work with colleagues to develop and carry out deliver a joint Adults and Communities Partnership Plan, owned by the joint Adults Delivery Group.

Improve support to adults with autism:

2.14 Work with colleagues to develop and carry out a joint Autism Partnership Plan, setting out how adults with autism will be supported.

Theme 3: Ensuring safety

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What do we want to achieve?

1. The council and community-based organisations work as a whole system in supporting people to be safe.
2. Roles, responsibilities and processes when a person moves between different services are clearly articulated.
3. More residents and professionals know what adult abuse and neglect is, and what to do in the event of a concern.
4. Staff more consistently make safeguarding personal.
5. Safeguarding concerns are addressed through a multi-agency safeguarding hub.
6. The experience of people going through safeguarding processes is better understood.
7. People going through safeguarding processes are well-supported.
8. The system better safeguards people employing a Personal Assistant.
9. People hear back on what has happened after they raise a safeguarding concern.

Safe systems, pathways and transitions:

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

Safeguarding:

We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.

Ensuring safety actions

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Continually improve safeguarding practice:

3.1 Carry out the Safeguarding Case File Evaluation Action Plan

Improve the response to safeguarding concerns at the 'front door':

3.2 Develop a Multi-Agency Safeguarding Team (MASH) model at the front door of adult social care.

Strengthen safeguarding in relation to Personal Assistants:

3.3 Develop a Personal Assistant Charter on safeguarding and introduce a more robust system of monitoring safeguarding trends.

Improve how we collect and act on feedback:

3.4 Introduce a system of gathering and recording feedback from people at the end of a safeguarding enquiry on their experience and outcomes.

Improve how we communicate the outcomes of safeguarding:

3.5 Carry out insight work to understand where the communication breakdown is when telling people what has happened after they raise a concern.

Articulate our approach to situations where safety risks are heightened:

3.6 Agree written protocols and procedures on how continuity of care is assured when people transition to adult service, when people move out-of-borough or move between agencies.

Ensure safeguarding adults is seen as everyone's business:

3.7 Work with council colleagues to ensure safeguarding adults is embedded as a council-wide issue, including across all housing services

Support the Safeguarding Adults Board to carry out priorities:

3.8 Carry out community engagement, awareness-raising and prevention activity, including via the October Safeguarding Conference

3.9 Carry out and monitor Safeguarding Adult Review actions plans relevant to adult social care ('Jack' and 'William')

3.10 Support the Board to strengthen co-production and hearing the voice of people with lived experience of safeguarding.

Improve waiting times for community-based DoLs:

3.11 Apply the learning from tackling waiting lists for hospital and residential care DoLs assessments to community-based assessments.

Theme 4: Leadership

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What do we want to achieve?

1. Carers are better supported, and the outcomes of the Carer Charter are achieved.
2. Care and support is re-imagined with people who draw on it.
3. People who need care and support co-produce services in equal partnership with staff.
4. The workforce is recognised and rewarded.
5. Risks are better understood and managed.
6. Systems, processes and staff practice reflects best practice
7. The diversity of leaders better reflects the diversity of the workforce.

Governance, management and sustainability:

We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

Learning, improvement and innovation:

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research

Leadership actions

Continue to strengthen how carers are identified and supported:

4.1 Carry out the Carer Charter Action Plan

Strengthen our approach to risk management at a service level:

4.2 Develop and monitor an adult care and support risk register.

Reconfigure the all-age disability service to improve support:

4.3 Carry out the new operating model for adults with disability.

Support and develop our workforce:

4.4 Develop and agree the Workforce Race Equality Standard action plan.

4.5 Agree an approach to developing a Workforce Strategy and supporting new, integrated roles.

4.6 Carry out the annual succession planning exercise.

4.7 Agree a more efficient system of flagging when staff require a DBS check.

4.8 Carry out and review the impact of the New Town Culture work in adult social care.

Improve how data is recorded and used:

4.9 Carry out work to improve the Liquid Logic system.

4.10 Review and update relevant consent to share information forms to reflect best practice.

Work in equal partnership with people who use care and support:

4.11 Start an annual system of gathering, analysing and acting on people's feedback on their experience of care and support.

4.12 Develop annual adult social care complaints and compliment reports, analysing key themes.

4.13 Develop and carry out a Co-Production Plan, setting out how co-production will be progressed across all four of these themes.

Build consistent staff practice through policy and procedure:

4.14 Agree and carry out a policy and procedure development and review timetable.

4.15 Communicate eligibility for support between teams, services and agencies.

How the improvement plan will be carried out

Carrying out the plan

- A delivery plan accompanying this plan sets out who is leading on each action and when actions will be carried out.
- The groups listed in Fig. 1 (opposite) are responsible for delivering the plan.

Monitoring the plan

- The Adult Improvement Board will oversee delivery of the plan, including through quarterly monitoring reports.

Communicating the plan

- The plan will be published on the Barking and Dagenham website. An accessible summary, including one in easy read, will be produced.

Reviewing the plan

- The plan will be reviewed annually, informed by insights and co-production with people who need care and support and carers.