

Adult Social Care Local Account 2013 - 2014

A local account of how adult social care services in Torbay have been delivered and performed throughout 2013 -14, with forward intentions for 2015-16



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1. Foreword by Councillor Christine Scouler – Executive Lead for Adult Social Care and Older People



Dear reader,

This is the third edition of your Local Account which reviews the year from 1 April 2013 to 31 March 2014, as well as looking forward to 2015-16.

Torbay and Southern Devon Health and Care NHS Trust and Torbay Council have had a history of successful partnership working and this year's Local Account again reflects the continuation of this despite the difficult economic environment and the changes that Torbay currently faces, with an ever increasing elderly population.

Torbay Council commissions Torbay and Southern Devon Health and Care NHS Trust to provide adult social care in Torbay. The Council takes overall responsibility as commissioners of adult social care and is therefore able to influence the strategic balance of the adult social care portfolio. Each year an Annual Strategic Agreement is drawn up between the Council and the Trust. The Trust reports to the Council on performance and financial matters.

The Local Account provides you with details of our successes but also information about how the local NHS and the Council have managed significant change. Although difficult at times, this has led to a greater quality of life for individuals and provides us with huge learning when embarking on change in the future.

The forthcoming year will undoubtedly continue to provide both organisations with an equal amount of challenge not only because of the financial constraints but also because of the demands on our service as our population grows older. We are, as always, committed to facing those challenges and changes with you by ensuring that we listen to what you have to say and including you in the decision making processes that we must go through.

We will continue to want, wherever possible, for people to be able to support themselves and remain as independent as possible, for as long as possible by ensuring they have the right support, advice or services available.

Delivering the right care, in the right place, at the right time, and at the right cost is key and we hope that the Local Account will provide you with an insight into our work, the outcomes for local people and our priorities for delivering adult social care over the next year.

Yours faithfully,

Councillor Christine Scouler
Executive Lead for adult social care and older people

2. Our commitment to adult social care services in 2015-16

This section of the Local Account sets out our intentions for 2015-16



When we first embarked upon integrated health and adult social care services in 2005 we had a vision about ensuring that every person receives the right care, in the right place and at the right time. This is still something that flows through all that we do at the Trust and an ethos that all of our staff hold. In developing and planning the services we provide and arrange we refer to 'Mrs Smith and her family' to remind ourselves that what we do, and the way we do it, affects real people who live and work across Torbay.



The forthcoming year will be challenging as budgets become tighter, both within the Trust and for all our partners. However we remain committed to supporting our staff in making fair and equitable decisions to ensure that Mrs Smith and her family receive the services they need in the most effective way.

In Torbay we have a reputation for being at the forefront of developing new ways of working. As we look forward to future years and, starting in April 2015, the implementation of the Care Act we will be working with colleagues in Torbay Hospital, GPs from across the area, partners in voluntary organisations as well as Mrs Smith and her family to develop new solutions which result in better services being

delivered ever closer to where people live.

Our commitment to continuing to develop integrated working has led to Torbay being selected as one of the national Pioneer sites with the aim of developing more integrated services.

As partnership organisations we only ever want to build upon and continue to improve the services we provide and the outcomes for our local population. We do have to do this within tighter financial constraints but the statement below sets our commitment for the next year to the people of Torbay.



Jon Andrewes
Chair
Torbay and Southern Devon Health and Care NHS Trust



Mandy Seymour
Chief Executive



In Torbay, the Council and Torbay and Southern Devon Health and Care NHS Trust have successfully used the idea of Mrs Smith and her family to symbolise people who need health and social care support. This metaphor has been extended to include the concept of her grandson 'Robert' and how as a pioneer for integrated health and care we can improve outcomes for people of all ages in the Bay who may need our support.

The commitment statement below sets out what this continuing journey will mean for Mrs Smith, and her family. We are planning to implement the outcomes of the Care Act from April 2015. This gives new rights to individuals in a positive way, but also means changing many of our existing processes and previous assumptions to ensure we are legally compliant. We do this in a context in which local government continues to experience reduced resources. Our aspirations have to be set in this context.

Resources will continue to be used to support people to be as independent as possible, for as long as possible and we will work jointly with NHS and other partners, but particularly Mrs Smith. Mrs Smith is a partner and manager of her own health and care, and will co-design solutions to support her quality of life, with active community support in the Bay.

Caroline Taylor
Director of Adult Social Care Services
Torbay Council

Our commitment statement

Keeping Mrs Smith at the heart of an integrated health and social care system

The Council remains committed to making sure that services are integrated across health and social care, and believes that this is the best way to ensure Mrs Smith experiences person-centred services at a consistent quality. We will build on the success we have had to date by seeking to achieve integration of services for those experiencing mental health difficulties and working closely with GPs and primary care services. Torbay and South Devon are now a 'pioneer' for joined up health and care and we will focus on moving faster at pace and scale to deliver benefits for communities but at a lower cost than in pre-austerity times.

Independent living

We will continue to ensure that Mrs Smith is supported at home whenever possible with less reliance on traditional bed based care. Home could be with family, in supported accommodation, in extra care housing or an adapted property through disabled facilities or telecare/telehealth support, as well as personal care. Where Mrs. Smith is unwell and needs hospital or other acute treatment we will work with her and her family through reablement to get her back to being as independent as possible, as soon as possible.

Supporting carers

Part of remaining independent and having quality of life is to make certain that those who support Mrs Smith as carers get the support and wellbeing checks that they need to have a good quality of life. The Care Bill ensures carers have new rights to assessments and support and we will further support carers in this context.

Dementia

We will work with health colleagues to make sure people have an early diagnosis, and work with our communities to encourage people to come forward early if they experience potential symptoms. Our aim is to make Torbay a dementia friendly place. Our use of the Better Care Fund which pools money for health and care will be partly focused on improving dementia support.

Fair access to care services

The increasing pressure on resources, and the rising demands on services, makes it important to ensure that access to services provided by the Council is fair and equitable. It is now only possible for the Council to meet needs which are assessed as being 'substantial' or 'critical' against the nationally set Fair Access to Care Services (FACS) criteria.

This has not always been the case so to make sure that in similar circumstances everyone receives similar levels of care it will be necessary to ensure that services are only being provided to meet substantial and critical needs whenever a review or reassessment of needs is carried out by, or on behalf of, the Council.

Self-care and self-service /Personal budgets

We know many people already organise their own care, either formally by paying people for housework, meals or other support, or informally through family and friends. We will be working with the voluntary and community sector to ensure the natural support of family and friends is the first place for those in our community with less complex needs. We will continue to focus NHS and local authority resources on those with highly complex needs. Where people have substantial and critical needs we will continue to encourage them to hold their own personal budget and co-design the way in which the care they need is managed and provided.

Extra Care Housing

We will be considering how we can extend our Extra Care Housing provision to offer greater opportunities for people to live as independently as possible in their own accommodation. Extra Care Housing provides a safe environment in which people have their own accommodation but with easy access to the support the need to maintain their independence. There are several such schemes in Torbay already but we will be working with colleagues in the housing sector and the Trust to extend the opportunities which are available.

Paying for care and support

We welcome the government's support of the Dilnot review. This makes a commitment to cap the cost of care. We will ensure that there are clear communications to those in receipt of care and, through revised information and advice services, access to timely advice for those who may need care in the future.

The practical implementations of both Dilnot and the Care Bill are a huge change for the Council and the NHS and we have been working through the requirements this year to be ready for April 2015.

Ordinary residence

When someone who has existing care needs moves to live in Torbay there are some circumstances in which it is right that the cost of their care should be met by this Council. In this circumstance we will ensure that if it seems the responsibility for meeting care needs might transfer to this Council the placing authority, the person involved and their family are clear about what can be provided by the public purse in Torbay and what they will have to pay for themselves.

Children to adults

The transition from childhood to adulthood is important for everyone and this is particularly so where people need care and support. We will continue to improve this transition for children and young people with support needs as they become adults so that they and their families are clear about what options they have and choices they can make, well in advance of adulthood to ensure quality of life.

Learning disabilities

We have made some improvements in the choices people have to live independent lives by initiating projects to provide employment experience and independent housing for people with disabilities. We will continue to work on innovative schemes with people with learning disabilities to support independence and quality of life. We will work across the peninsula to ensure there is specialist quality support for individuals who have complex needs.

Working with the market

We have published a market position statement for the Bay, jointly with the NHS to outline what we do now, what future needs are, and what provision and innovations we are likely to need in the future for adults. We will work with providers of services, based on a market position statement, to help focus on a system which supports prevention and recovery for Mrs Smith.

Care and support services

The Council is aware that we need to work with Mrs Smith and her family in a way which reduces her dependency on public sector services and makes the most of her abilities. Support plans need to be sustainable and need to find new ways to address the issues which impact significantly on wellbeing, such as social isolation. In order to build community support around the individual, Torbay is re-tendering services for care and support through the Living Well At Home project, through which two prime contractors will be identified. As part of a shift towards outcome focused services, the prime contractors will be expected to develop links with the local community and voluntary services to make this happen.

Safeguarding and quality

At the heart of support for Mrs Smith is assurance that whatever support is provided and wherever it is received, it is of a good quality and is safe. We will continue to work with providers on quality systems and assurances that people are safe and treated with dignity, respect and care at all times. We continue to focus on ensuring Experts by Experience and

other user groups are involved in providing insights into provision in the Bay. We are working to ensure people are placed close to home, wherever possible. We are open to learning and improvement and have encouraged this through undertaking a peer review of adults safeguarding, so we can implement further improvements for communities in the Bay.

3. Our performance in 2013-14

This section of the Local Account looks at how we have performed and delivered on our responsibilities for adult social care in 2013-14. It aims to provide information to local residents to enable them to determine whether the NHS and the Council have done everything possible to ensure that the best care is provided to the elderly and the most vulnerable in Torbay.

The document provides the reader with the results of the national targets and local performance targets set by the NHS and the Council and where possible indicates whether the performance has been achieved or not by using red, amber and green ratings.

Green	Exceeded, achieved or within one per cent of the performance target
Amber	Narrowly missed performance target but on track
Red	Performance in this area needs to improve

Both organisations are aware from previous feedback that this information on its own is not always helpful to the reader in determining whether things have improved for themselves, their loved ones or the people they care for. So with that in mind, the commentary that follows seeks to provide some real examples of how the work this year has made a difference to individuals or groups.

The themes for these examples will be aligned to the four performance outcomes agreed between the Council and the Trust at the start of the year, these being:

- Outcome 1 – Enhancing quality of life for people with care and support needs
- Outcome 2 – Delaying and reducing the need for care and support
- Outcome 3 – Ensuring people have a positive experience of care and support
- Outcome 4 – Safeguarding people whose circumstances make them vulnerable and protecting them from avoidable harm

A description of what you might expect under these headings is also provided so that you can judge whether this is what you told us or experienced. Torbay and Southern Devon Health and Care NHS Trust and Torbay Council are always striving to improve, develop and enhance services through lessons learnt and best practice and we have described how we plan to do that in the future. We have also included details of some things you might not be aware of which might help you or someone you know in the future; these include some of the very latest innovative solutions to providing high quality care.

As always there is the inevitable focus on the financial position and performance from 2013-14 as well as details of the budget going forward into 2014 -15 and how we plan to allocate

and spend the resources available to us. There will be a review of how we have used the resources available and how we have ensured best value for money at all times. We are also keen here to provide you with an open and transparent review of the risks both organisations are facing in the forthcoming year together with plans to mitigate these risks where possible.

Finally, we have asked your local Healthwatch in Torbay and Overview and Scrutiny members to review the Local Account and ensure we have provided an open and transparent view of client experience and oversight of the service provided, in line with the views of members and constituents in Torbay. We have also asked our Experts by Experience panel to review the Local Account and have made amendments to the account to improve the information, layout and look of the account.

We do hope that you will find this Local Account useful and informative and would encourage you to contact us to provide feedback on this or to ask where you can find out further information which might be of use to you or a loved one.

4. How have we performed?

i. Outcome 1 – Enhancing quality of life for people with care and support needs

What does this mean for the people of Torbay?

This is about individuals being able to live their lives to the full by maintaining their independence, not feeling isolated or lonely because they were able to receive the right level of high quality support, designed by them. It is also about carers being able to balance their role as a carer as well as maintaining their desired quality of life.

How have we performed?

Measure	2012/13			2013/14			
	Expected Target	Actually Achieved	Rating	Expected Target	Actually Achieved	% Actually achieved	Rating
Clients receiving a direct payment & contracting for their own care	541	551	✓	490	507	10.40%	✓
Clients who know the size of their weekly care costs	2976	3143	✓	3429	3036	62%	✗
Clients who have received an annual review	3281	3396	✓	3107	3484	89.70%	✓
Clients who have a copy of their care support plan	4897	4830	✓	4673	4580	93.10%	✓
Assessments completed within 28 days of referral	1541	1531	✓	1487	1609	70.40%	✓
Clients receiving their care within 28 days of assessment	913	1059	✓	1269	1479	98%	✓
Adults with learning disabilities living in settled accommodation	233	270	✓	268	258	68.10%	✓
Adults in contact with secondary mental health services in settled accommodation	204	225	✓	218	187	66.10%	✓
Adults in contact with secondary mental health services in employment	17	16	✗	16	7	2.50%	✗

The table above shows service users within Torbay continue to have rapid access to social care services. 70 per cent of people referred for an assessment are seen within 28 days and 98 per cent of the packages of care needed for service users start within a month of assessment.

Our performance on ensuring that service users are kept informed of the cost of their packages of care is 62 per cent, which falls short of the national expectation of 70 per cent. This is something we will be addressing through a programme of work to develop personal budgets. This is important because knowing the amount helps people take greater control in the care they receive and determine whether it provides value for money. Some of the people also opt to organise their own care and so receive what is known as a 'direct payment'.

The number of adults with learning disabilities and those supported by secondary mental health services is lower than we would like. The high unemployment rate and seasonal employment patterns within Torbay contributes to this. Improving employment opportunities for learning disability and mental health service users is a key priority and our multi-agency work will continue to ensure that this happens.

Developments in telehealth and care

In 2013-14 our TeleHealthCare team continued to develop services aimed at improving the lives of people in Torbay. This marked a move away from just being able to provide telephone alarms (the system by which someone wears a pendant that they can activate if they fall or get into trouble) towards systems which actively promote the ability of people to continue living at home. These systems are referred to as telehealth and care.

An example of this is a scheme we have been trialling for patients who have been diagnosed with chronic heart failure. As part of this scheme, our technical development officers visit patients in their own homes and train the patient on how to use their state-of-the-art telehealth equipment. The patient is then able to take their own blood pressure and weight readings which are then automatically transmitted to a remote clinical team. The remote clinicians are able to analyse the information and advise the patient on their condition. This service supports the patient in their recovery without having to make daily visits to the hospital or their GP.

We do still continue to provide community or telephone alarms but these alarms are increasingly being paid for privately by individuals and their families, who are living independently but seeking the security of knowing they could contact someone in an emergency. This service is provided by a local call centre.

We received over 100,000 alarm calls in 2013-14 from our customers and 99 per cent of these were answered within 30 seconds. 5,000 calls were referred to the emergency services; this demonstrates how effective the service is and the peace of mind that it gives to the user and their family. If you are interested in having an alarm at home for yourself or a family member, please call us on 0300 456 4861 for more information.

We pride ourselves on working to the highest telecare standards. The call centre which supports our telehealth and care services is based locally in Torquay. All such call centres have to undergo inspections known as Telecare Services Accreditation. Our call centre was audited this year and passed, with complimentary comments on the professional way that we work. The accreditation is carried out by an independent body that provides best practice advice and undertakes assessments on organisations that provide telecare services.

Case study: Living with a long term condition and short term memory loss

Mrs Y is able to live at home on her own despite suffering from short term memory loss whilst at the same time being dependent on taking regular medication for her diabetes.

In addition to her community alarm providing reassurance in an emergency, it has also been programmed to remind her at set times to take her diabetes medication.

At a daily set time, her community alarm will alert her by a bleep and a flashing green light, Mrs Y presses a large the green button and a pre-recorded message is played to her saying: "Mrs Y please take your medication".

Should Mrs Y fail to press the green button an alarm is triggered at the monitoring centre, who will then call Mrs Y to investigate the reason why the alert was not acknowledged.

If the monitoring centre is unable to make contact with Mrs Y then they will proceed to call one of her predefined responders (family member, neighbour, friends or carer) to make a home visit. Should this become a regular occurrence the monitoring centre informs the Doctor or Care Worker to undertake a review.

Dementia care and awareness in Torbay

It is estimated that only 43 per cent of those who have dementia have had it diagnosed. The Trust recognises the significant impact dementia can have on a person and their family life. In Torbay and South Devon, the Trust has made significant progress in providing the right kind of care for people with dementia. The Trust has adopted the national standards of best practice and has introduced a wide range of measures aimed at helping people with dementia. All of our 11 community hospitals have 95 per cent or more of staff trained in dementia awareness and can display the Purple Angel. The Purple Angel signifies recognition and understanding of dementia and has become an iconic symbol in the promotion of dementia awareness globally. We are also working closely with carers who look after people with dementia so they can understand what to expect and know how to respond in situations.

How GPS supports people who live with dementia and their carers

There has been a lot of debate nationally about the use of GPS devices for people with dementia - some positive and some negative. However this should always be viewed within the context of what happens when someone with dementia goes missing.

1. There will be 785,000 people suffering from dementia in England by 2020.
2. 60 per cent of people suffering from dementia will wander and 40 per cent of those will get lost.
3. In 2012, in Devon alone there were five forensically proven cases of death from wandering.

The effects of points 1 and 2 above are naturally very distressing on both the person with dementia and their family. For point 3, this becomes devastating and the obvious question is "was this preventable?". If the person was carrying a GPS locating device then the answer is not a 'yes' in all cases but a 'yes' in most cases.

Whatever the governance is for providing GPS devices within NHS or adult social care provided services, there will be a host of companies that will be selling such devices to the public, both good and bad.

By evaluating the potential GPS tracking devices that are on offer commercially, we have been able to select an organisation that shares the same values and ethos as our own - Ostrichcare. Ostrichcare has been supporting the Torbay Dementia Action Alliance and is a sponsor for the Purple Angel campaign; through this work they have developed their GPS service so that it specifically meets the need for people with dementia.

Using the Ostrichcare trackers we will be funding one year use of the service for 100 dementia sufferers in Torbay. Our Older People’s Mental Health team will be supporting the one year’s trial so that we can evaluate the effectiveness of the service and the impacts (both positive and negative) for service users and carers.

One of the key benefits of the Ostrichcare service is that whilst people will be encouraged to carry their device, nobody is watching their daily movements. It is only if they go missing, and that this is reported to the monitoring centre, that the GPS location of the person is accessed. This information is then passed, in the first instance, to their nominated responder. If in the event that the responder is either not available or it is an emergency situation then the incident is passed on to the police.

As part of developing this service we have helped the police to develop a protocol that is specific to finding people with dementia that have a GPS device.

We are very excited about the potential benefits that this service can deliver and we will publish the outcomes of the trial next year.

ii. Outcome 2 – Delaying and reducing the need for care and support

What does this mean for the people of Torbay?

This is about individuals having the best opportunity possible to manage their own health and care because they have the right support and information. Early diagnosis and intervention means that dependency on intensive services is reduced and when it is required it means that individuals are helped to recover in the right setting which isn’t necessarily in a hospital environment.

How have we performed?

Measure	2012/13			2013/14		
	Rating	Target	Actual	Rating	Target	Actual
Number of people living permanently in a care home as at 31 March	⚠	703	717	✓	697	683

In order to help people live as independently as possible, for as long as possible, we are committed to reducing the reliance on nursing home and residential home care.

During the last six years the number of individuals living permanently in a care home has reduced each year and this trend continued in 2013/14. With an ever growing elderly population this enables those who most need this type of specialist care to receive it, whilst helping others to stay as independent as possible in the comfort of their own home.

We continue to work closely with the care homes within Torbay and rely heavily on the intermediate support they provide which can often avoid an emergency admission into an acute hospital. Our ability to place people at very short notice into temporary beds is part of our intermediate care service. This service is renowned nationally with many other local authority and NHS organisations looking to replicate it. The joined up (or integrated) nature of services also helps ensure patients have shorter stays at the local acute and community hospitals. The average length of stay for emergency patients at South Devon Healthcare NHS Foundation Trust (Torbay Hospital) is amongst the lowest in the country and those patients experiencing a delayed discharge are minimal. This is achieved by having streamlined communication processes between teams to ensure patients can have rapid access to the service they need when they return home.

Case study: Reablement - Mr and Mrs D

Mr and Mrs D were referred to the intensive home support service reablement team in early 2014 due to concerns raised by their GP about their wellbeing. Initially the couple were very reluctant to accept help and support due to their reclusive lifestyle - they kept curtains closed, seeing this as their way of "shutting out the world outside", historical anxieties around not wanting people in their home and the perceived cost factor. Additionally, Mrs D was very low in mood and felt that "the system" had "let them down".

The reablement team was put in place to engage and encourage the couple to be more accepting of the support offered, which aimed to: improve their personal care as Mrs D had become quite unkempt; motivate the couple in order to try and gradually introduce some structure to their day; and ultimately remain independent at home.

At the start of the reablement team's involvement it soon became clear the couple had no routine or structure to their daily living; were remaining in bed till midday due to late nights and high alcohol intake. All assistance and support were being refused. To try and get Mr and Mrs D to be more accepting of support it was agreed with the couple, that visits would be arranged for late afternoon. This allowed the couple to remain in control. Gradually the couple became more accepting of assistance from the team to the point where curtains and windows were being opened daily - which was a big step forward for the couple to undertake.

At the beginning of May, Mr D was admitted to Torbay Hospital and sadly passed away a few days later. Visits were increased to three times a day to ensure Mrs D's needs were being met. Mrs D's family - who she had little contact with prior to Mr D passing away - also began to get involved with her care needs and support.

Mrs D became very accepting to all support which resulted in her - for the first time in such a long period - having an established and positive routine: getting out of bed each morning, having a wash and getting dressed and eating three meals a day. Mrs D appears more engaged and is taking a more active role with her needs.

iii. Outcome 3 – Ensuring people have a positive experience of care and support

What does this mean for the people of Torbay?

This is about individuals and carers being aware of the support that is available to them and when it is accessed, that it is sensitive to their needs and provides them with a positive experience.

How have we performed?

Measure	2012/13			2013/14			
	Expected Target	Actually Achieved	Rating	Expected Target	Actually Achieved	% Actually achieved	Rating
Carers receiving a needs assessment, a review, information, advice, etc	1686	1522	!	1396	1589	35.30%	✓

The proportion of carers receiving a needs assessment, review or information and advice is a nationally reported indicator with a formal definition that must be abided by. The carers' service is well developed in Torbay and includes partnership working with many other organisations. It is difficult to capture the advice, support and information these organisations provide to individuals and consequently, in accordance with the strict definitions, we are unable to include them when calculating this measure.

As can be seen from the section below, supporting carers – both young and old - has been and remains a high priority in 2014-15.

Supporting carers

Actively supporting unpaid carers remains a high priority for the Trust, Torbay Council and the local NHS commissioning group. We take a whole systems approach to supporting carers, involving all relevant agencies and ensuring advice and support is available at key points in a carer's journey. The basis for our local priorities is Measure Up, Torbay's interagency carers' strategy. Development of the next edition of Measure Up, covering the three years 2015-17, is in hand.

One area for specific attention in the past year has been carers' experience and involvement in hospital discharge. This is both a critical time for many carers and our previous evaluation highlighted significant areas for improvement.

We have recognised the benefits of taking a whole family approach and of joined up working between services. We have seen real progress in work between children's and adult services to support young carers and carers of people with mental health and substance misuse problems.

The implementation of the Care Act and the new rights for carers that it contains, will involve significant challenges. Early identification of carers, providing access to good quality information and advice, and offering assessments to any person with a caring role will be key requirements. The current model in Torbay, which combines direct access to support (our universal offer) and targeting specific groups of carers, including those with more complex needs, is well suited to the good practice requirements in the Act. There will however be capacity issues, particularly carer support in primary care.

Carer involvement continues to be a focus for all services, to ensure carers feel involved in discussions about the support provided to the person they care for, focusing on their own needs and in using their experience and expertise to improve services. A number of mechanisms have been recognised as examples of good practice – the use of carer evaluators in service evaluation has been adopted by several agencies; Torbay Carers Forum, a website for carers is now carer led and moderated; young adult carers play a key role in the Under 25 Strategy Steering Group and Torbay Carers Register Management group is made up of 50 per cent carers.

The significant improvement in the number of carers identified and those receiving a carers assessment over the past year is linked to the delivery of staff awareness training, a focus on recording the presence of carers by key staff groups, such as community nurses, plus informing carers of the support available.

The proportion of carers receiving a needs assessment, review or information and advice is a nationally reported indicator with a formal definition that must be abided by. In 2012-13 the performance on this indicator was 29 per cent on a target of 31 per cent, but in 2013-14, the 31 per cent target has been exceeded at 35.3 per cent, a significant improvement. All community nurse teams in Torbay have received carer awareness training and their assessment paperwork was amended to highlight identification of carers. Quarterly audits have shown excellent results in carers being identified by community nurses and given information on where to get support.

A joint commissioning for quality and innovation (CQUIN) payment framework with South Devon Healthcare NHS Foundation Trust (SDHFT) for 2013-14 identified some key improvements for carer identification and support at Torbay Hospital. Many people take on caring for the first time as a result of hospital admission and their involvement in decisions and discharge is critical. The achievements included:

- A Carers Contact Card, with key numbers to telephone, is now included in all discharge packs (except for women's and child health where they are on display and are promoted). The cards are also promoted at pre-assessment clinics and the plan is to roll these out across outpatient departments in the next year.
- Endorsement by SDHFT and the Trust of a new carers' policy and action plan for 2014-16 with specific targets to maintain progress on carers experience in hospital and discharge for the next three years.
- The Carers Support Worker post in the hospital discharge team has been made permanent.
- Action to involve carers in ward rounds and decision making within the Emergency Assessment Unit has been evaluated and learnt from, and we hope these improvements will be rolled out across Torbay Hospital.
- Recruitment of volunteers to support work with carers on the wards and on discharge (VICTor project).
- Follow up calls 48 hours after discharge from community hospitals provides early identification of problems and reassurance to patients and carers.

The Personal Social Services Survey of Adult Carers in autumn 2012 provided us with a whole host of information about carers' experiences of care and support and this information was a useful benchmark and has been used to inform local priorities. This survey will be repeated in November 2014 and will give us evidence of current service levels and indications of any improvements. We are currently developing the next edition of Measure Up for 2015-17, Torbay's inter-agency carers' strategy. The consultation on this will be independently led by Healthwatch Torbay.

National data from the 2011 census shows that there are 16,107 unpaid carers in Torbay (equating to 12.3 per cent of the population compared to a national average of 10.4 per cent). 10,361 of these carers are over 50 years old and 3,306 of them provide more than 50 hours of care a week. 7,361 of Torbay's carers (45.8 per cent) are juggling work and caring. 8.6 per cent of carers report very bad / bad health, significantly higher than the England average. In fact, our local research strongly suggests that there is underreporting of health problems by carers, so these figures may be much higher. We are introducing carer health and wellbeing checks in GP practices, carried out by carer support workers, for carers over age 25. This 'light touch' assessment will enable early support to be put in place and systematic referral for more complex cases.

The new Care Act, which will come into force in April 2015, will include new rights for carers and duties on the local authority to deliver early intervention, prevention and a focus on the health and wellbeing of carers. The Torbay model of carer support - which combines direct access for carers to information, advice and support, encouragement of self-care, and development of community capacity and self-help networks to support carers - fits well with the principles and duties set out in the Act:

- Our carers information service (Signposts) currently responds to 240 enquiries per month and it is likely to have significantly increased calls after implementation of the Act.
- There are groups of carers who are hard to reach. We have established a service for carers of people with substance misuse problems and the impact of this service has led public health commissioners to decide to sustain the service beyond the pilot phase. Significant numbers of families are being supported, and this whole family approach has been shown to be effective.
- Our partnership work with voluntary organisations to develop an enabling approach, self-assessment and volunteering for carers has been an important area of development which encourages early intervention and mutual support.

The number of local carers identified and being supported in Torbay is currently over 4,300 which is 26.7 per cent of the population of Torbay carers identified in the 2011 census figures. The average annual increase in the number of carers getting support from carers' services has been 15 per cent for some years. Given that the publicity surrounding the new rights for carers in the Care Act will further increase demand on services, carers support services in Torbay are likely to experience capacity issues over the next few years, at a time of budget constraints.

In 2012, we developed a fresh approach to young carers aged under 25 by combining the work of the Trust's young adult carers' service with Torbay Council's young carers service to produce a joint strategy. The approach is aimed at designing services around the needs of young carers and their families. The resulting 'Torbay Strategy for Young Carers Under 25' provided a joint agency approach. In July 2013, the action plan for the strategy was independently audited and the conclusion was that the services were in line with national best practice. One area for improvement was the awareness amongst adult social care teams of the needs of young carers. Targets for identification of young carers by these teams have been exceeded, with over 300 young carers recorded within the first year. The young adult carers' service is in touch with 186 carers aged between 16 and 25.

More than two thirds of the carers we are supporting are caring for an elderly person. Carers' services has been a partner in the Ageing Better BIG Lottery bid and, if this bid is successful, at least two projects to support carers of older people will be included in the first phase of the development from April 2015.

Transformation in learning disability services

In July 2013, the Trust Board agreed the report *Proposed Business Redesign of Torbay Community Learning Disability Assessment and Care Management*, which operationalises the overall commissioning of learning disability services as agreed at the Health and Wellbeing Board.

The Foundation for People with Learning Disabilities (FPLD), alongside Speaking Out in Torbay (SPOT), undertook the user engagement work for the review. FPLD brought a highly credible track record of work; with extensive experience of working with local government agencies, private and voluntary organisations across the UK and internationally. FPLD has a respected track record in reviewing and evaluating services, including the development of strategic improvement plans and long term support for strategic change. FPLD is completely independent of Torbay and Southern Devon Health and Care NHS Trust.

An implementation phase is now underway which will deliver the following outcomes:

- Improved access to primary care and mainstream services for people with learning disabilities.
- Enhanced support to mainstream services to enable them to meet the needs of people with learning disabilities.
- Timely specialist intervention for people with learning disabilities.
- Clear mechanisms to support the continued development of good practice, overseen by the Learning Disability Partnership Board.

In addition, the operational commissioning strategy for services for people with learning disabilities was published. This document describes the operational commissioning intentions of the Trust for people with learning disabilities living in Torbay.

A core principle underpinning this strategy is our commitment to personalisation and choice from a diverse market place. Rather than directly provide services ourselves, we will

commission services on people's behalf and co-ordinate the provision of information and support planning, either directly or through third parties.

The case study below describes the positive outcome for one individual in their own words:

"My name is Y and I'm 65 years old. I live in a bungalow that I rent from a housing association. I've lived here for over a year. My bungalow is lovely. I have a supporter who I employ with Direct Payments. I choose what I do.

I used to live in a residential home but now I have my own place. I love it here - I would never go back. I go out to bingo and the community hall. I also organise a stall for charity twice a year. My favourite thing to do is baking. I want to have a business where I sell my cakes.

My supporter helps me with shopping and cooking. We do banking on the computer. I have learnt about keeping safe and cooking. Next year I am saving up to go to Spain on holiday. In two years' time I am planning to go to Florida. I can't wait."

iv. Outcome 4 – Safeguarding people whose circumstances make them vulnerable and protecting them from avoidable harm

What does this mean for the people of Torbay?

Safeguarding adults services aim to protect adults at risk from harm and to keep them safe. An adult at risk is defined as anyone over 18 years who is, or may be, in need of support because of a disability or illness; and/or is unable to take care of, or protect their self against significant harm or exploitation.

How do we ensure that vulnerable adults are protected?

Torbay Safeguarding Adults Board leads the work on safeguarding adults, working with partner organisations to make sure there is a joined-up system to respond to concerns. We have invested time and effort into training and raising awareness about safeguarding adults for both staff and the public. During 2013/14, there was a 34 per cent increase in referrals. In 52 per cent of cases, the investigation concluded that the alleged abuse was 'substantiated' or 'partially substantiated' which shows that abuse is being detected more reliably.

The rise in referrals has placed considerable pressures on the staff teams involved in safeguarding. We aim to ensure that all safeguarding concerns are handled in a consistent way and acted upon in accordance with local multi-agency policies and procedures. However, it was not always possible to meet our targets for timescales during 2013/14 which has resulted in some delays in holding case conferences within our 20 day target.

We have implemented a more detailed training strategy and programme which links national core competencies and compliance frameworks for safeguarding adults, identifying clearly the right level of training required for each job role. We have increased the number of staff undertaking induction-level training; uptake has been very positive.

How did we perform?

Measure	2012/13			2013/14			
	Expected Target	Actually Achieved	Rating	Expected Target	Actually Achieved	% Actually achieved	Rating
Safeguarding meetings held within 5 days to agree a strategy for client	115	125	✓	174	163	70.30%	!
Safeguarding multi-organisational case meetings held within 20 days	45	103	✓	125	95	53.40%	✗
Number of repeat safeguarding referrals in last 12 months	16	16	✓	16	20	N/A	✗

Safeguarding continues to be a high priority. We are making sure that the learning from national reports, including 'Winterbourne View' and the Francis report, is used to improve the quality assurance processes we operate to ensure high quality care and patient safety. Events are held for our staff to incorporate lessons learned from local cases which did not go as well as we would have wished, and to celebrate good practice, of which Torbay has much to be proud.

A tool, introduced successfully last year in community hospitals, to provide an early warning of potential issues has been adopted widely by residential homes. This is very encouraging and it supports us working together to protect individuals who live in these settings. It is planned to introduce this into domiciliary care organisations.

We promote a positive and person-centred way of working and we are developing ways to empower individuals and make sure a good range of information about keeping safe is widely available so that people in Torbay can protect themselves and their families. This is really important, as is the need to help individuals who find themselves in the safeguarding adult process to feel as comfortable as possible. Our Experts by Experience Group extended their research into this during 2013/14 and we will use the feedback to improve our services.

The Council is required to undertake annual social care surveys. We have been concerned about the proportion of people who use services who do not feel safe and secure. In depth work has been done to understand this further and it was revealed that people fear falling in their own homes, rather than a threat from abuse from others. We will consider how we can address this fear.

Assuring the quality of care in Torbay's residential homes

In October 2013, the Trust launched a new assurance process looking at the quality, effectiveness and safety of care provided in residential and nursing homes in Torbay. Several nursing and residential homes had worked in partnership with the Trust to develop a monitoring tool known as the Quality, Effectiveness, Safety Trigger Tool (QuESTT). QuESTT has been used as an early warning system in acute hospitals for some time and is in place in community hospitals and community teams across Torbay and Southern Devon. The tool has been adapted for use by care homes to complete on a monthly basis via a secure website.

The QuESTT records simple information about a number of potential risk factors, such as the number of staff vacancies, complaints, care plans and risk assessments undertaken by the home and demand upon the service. The risks are rated using a simple red, amber or green scoring system, and are used as an early warning indicator to ensure swift support is put in place preventing a high risk or crisis scenario occurring.

It is envisaged in the near future that care homes will share the information from their QuESTT with residents, families and visitors and make it available on their public websites so that they too can see the performance, risk and actions that are put in place.

Alongside QuESTT, the Trust's business support and quality team undertake comprehensive quality assessment care providers as part of the team's proactive monitoring work. This covers a greater variety and depth of assessment to provide a better awareness and understanding of service quality and potential concerns. Use of the new documentation has already led to early intervention and support for care homes to prevent an identified area of concern becoming more serious.

Since May 2013, the Experts by Experience volunteers have been engaged in a mystery shopping programme for all care homes in Torbay. This followed an extensive period of research and training by the Experts' facilitator, a qualified social worker with over 20 years of experience. It was important to ensure that a standardised process would take account of national issues such as Winterbourne View, whilst offering independent, timely feedback to each home visited. To date, 17 homes have been visited by the mystery shoppers.

Improving the safeguarding process

Following the successful Experts by Experience evaluation of client involvement in the safeguarding process for clients with learning disabilities, the exercise was repeated in 2013/14 with client volunteers aged over 65. Older citizens who had been involved in adult safeguarding were invited to participate in face-to-face interviews to relay their personal feedback on the process.

Already, the Trust has implemented a number of changes to ensure the individual and their family are involved in decisions about the safeguarding process, including the environment and location of any safeguarding meetings. Learning from the client's perspective, has been incorporated into the safeguarding adults training so that Trust staff can understand at first hand appreciate how it "feels" to be at the centre of safeguarding. This means we can find ways together to reduce the distress and anxiety often associated with this process.

Future plans

In addition to the developments mentioned already, we are making serious self-neglect a focus for attention next year. Serious self-neglect is a growing problem, which can have a number of causes, including mental health and substance misuse, and it can have a major impact on the wellbeing of that individual and their family, especially children. We hope to find ways to decrease this in future.

The Care Act 2014 was passed by Parliament in May 2014. This new Act replaces and introduces a number of changes to come in from April 2015. Significantly for safeguarding adults, the Boards are being placed on the same statutory basis as Local Safeguarding Children Boards. This recognises the vital role of the Board and gives additional responsibilities to local authorities as the lead organisation. During 2014/15 we will be ensuring that the Torbay Board is equipped and prepared to deliver its new statutory role.

In March 2014, the Supreme Court made a ruling that has altered the way in which the Deprivation of Liberty Safeguards are considered. The new 'acid test' determines whether the person's liberty is deprived:

- 1) Is the person subject to continuous supervision and control?
- 2) Is the person free to leave?

This has resulted in a much larger number of people meeting this threshold, which is going to challenge our services. Further national guidance is expected in summer 2014.

5. Financial position and use of resources

The financial review provides an overview of the financial performance of adult social services in the Torbay area for 2013-14.

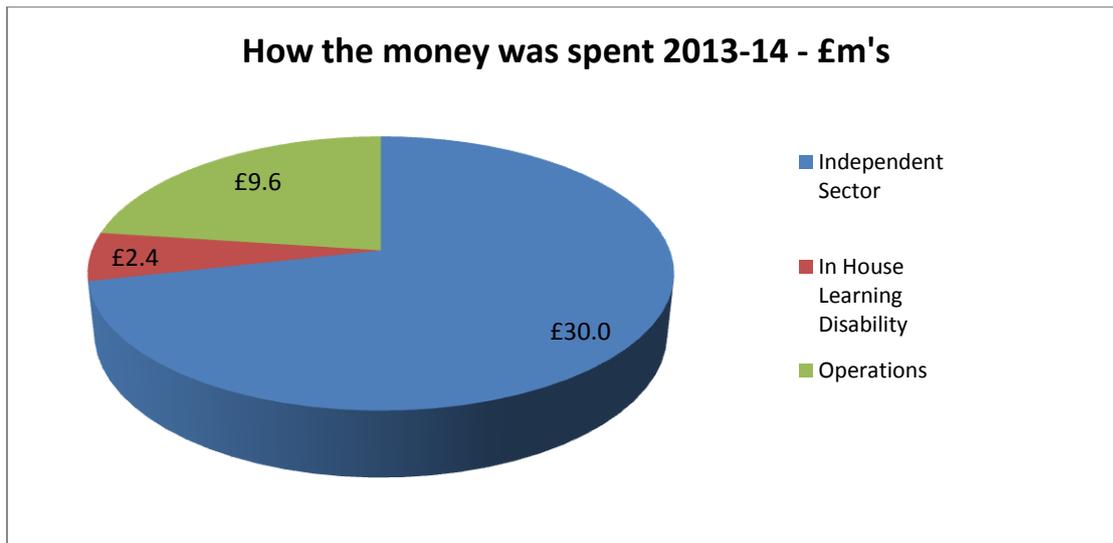
Torbay and Southern Devon Health and Care NHS Trust, provides adult social care on behalf of Torbay Council, providing integrated health and adult social care services across Torbay. The Trust is responsible for community health services in Southern Devon and works with a range of local voluntary sector organisations, and with several NHS providers. The Trust serves a population of around 375,000 people and employs around 1,800 staff.

During 2013-14 the Trust had a turnover of £154.6m. During this financial year the Trust managed its budget within the funds available and reduced the number of clients in long-stay residential care. This is a significant achievement given the financial challenges the Trust has faced, set against a backdrop of increasing demand and complexity of services needed to meet client needs. It also means we have been able to deliver more care closer to home.

In 2013-14 the budget for adult social care in Torbay was £43.2m. The total net spend in 2013-14 was £42.0m resulting in a £1.2m underspend. There were three material factors underpinning this:

- There was a significant reduction in residential / nursing placement numbers in the winter of 2012/13 and this was held during the 2013/14 financial year.
- There was an over achievement of Cost Improvement Programme (CIP) savings from all zone teams and the learning disability team. In particular, the over achievement can be linked to the on-going review of learning disability complex cases, robust case management within the zone teams and client contributions levels being maintained, in addition to the CIP savings being achieved on expenditure.
- Ordinary residency costs were below budgeted levels for the three quarters of the financial year. This is based on the delay of cases entering Torbay during this period.

The chart on the next page shows how the £42.0m was spent.



Spend analysis 2013-14

The Trust spent £2.4m on its in-house learning disability services in 2013-14, including costs of £1.1m for two residential homes and £1.3m on the provision of day care.

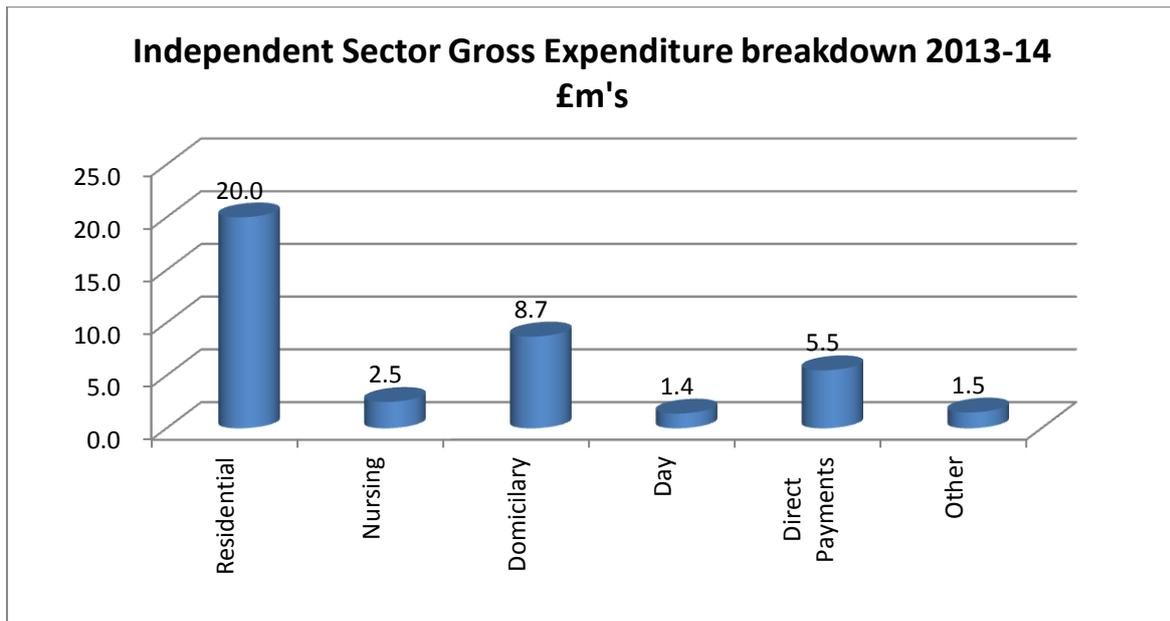
Operational costs totalled £9.6m in 2013-14. This is the cost of providing care management and social care support across Torbay and includes the cost of social workers, community care workers, occupational therapists, physiotherapists, finance and benefit assessors and commissioning and support service staff.

Over 70 per cent of the total net spend on adult social care is the purchase of care (including residential, nursing, day and domiciliary) from the independent sector. The majority of this spend is with providers within Torbay but some specialist residential care is provided out of area. At any point in time there was on average around 2,200 people receiving a core service.

The age of the people receiving these ranged from 18 to 110 in 2013-14 and services were provided to clients with learning disabilities, dementia, sensory and physical disabilities, vulnerable people and the frail and elderly.

The net spend figure in the independent sector was £30.0m in 2013-14. Gross spend with the independent sector was £39.6m with income collected of £9.6m. The vast majority of income we collect is from charges made to clients. Under national legislation, all social care clients receive an individual financial assessment and this can result in a client being asked to contribute towards the cost of their care provision.

The gross expenditure within the independent sector is illustrated in the chart below.



Financial outlook for 2014-15 and beyond

Funding arrangements for adult social care are under review at a national level. Therefore the financial arrangements for 2014-15 are based on what is known at present.

Torbay Council, in line with the comprehensive spending review (2011-2015), is required to make substantial budget reductions of about 28 per cent. The Trust and South Devon and Torbay Clinical Commissioning Group acknowledge the tight financial constraints over the period and will continue to deliver the best possible care and support within these constraints. This will be done in consultation with the Council and where it is necessary to make changes to the way services are delivered consultation will take place with the people and carers who use the service.

The total planned net gross spending on adult social care in 2014-15 is £41.2m. This is funded by Torbay Council and income received from clients who contribute toward the cost of their care.

6. Commentary from Healthwatch Torbay

Healthwatch Torbay response to adult social care Local Account 2013- 2014



The Torbay Local Account clearly explains the challenges and risks facing adult social care in the Bay, now and into the future. Healthwatch has read the account to determine its success as an accessible report for local residents on the performance of their services.

There are many examples of innovation and multi-agency working described through scenarios of real life experience. This paints a helpful picture of the complexity of adult social care support. What is not so clear is how responsiveness compares against national bench-marks. The Outcomes Framework agreed by the Trust and Council matches that published by the Department of Health. Although not a document set that all would want to read, it would have been useful to have given a reference, along with any other “further reading” that might arise. This might be helpful, for example, to the members of the public wishing to explore adult social care issues around equity (including race and sexual orientation) as this is not something specifically explored in the account. In the same context, it is assumed that an easy read version of the account will be available for people with learning disability.

The statistical data in the account makes an honest attempt to answer the question, “Are we doing as well as we should?” comparisons with last year being helpful. Using absolute numbers or % in different sections does make the answer difficult for the public to interpret. I.e. is a small change in % meaningful when not explained in terms of the number of people helped or the risk as a result?

The text makes reference to a number of processes which show how being caring and responsiveness is at the heart of the way of working. It was interesting to read how the Experts by Experience programme is developing and influencing the shape of the programme; an excellent opportunity for further Healthwatch partnership and a basis for informing the Care Quality Commission inspections.

Kind regards,

Patrick Canavan

Healthwatch Torbay Chair

NOTE: Having received this feedback from Healthwatch, the way in which data is set out has been changed to include numbers as well as percentages. The Local Account has been resubmitted to Healthwatch for feedback on this change.

7. Commentary from Overview and Scrutiny members

Statement from Torbay Council's Health Scrutiny Board on the adult social care Local Account 2013/2014

To be completed following Overview and Scrutiny Committee

June 2014

END