

## Cabinet

22 January 2009



## Performance Ratings for Adult Social Care 2007/8

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### Report of Rachael Shimmin, Corporate Director of Adult and Community Services

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#### Purpose of the Report

1. To provide information relating to the Commission for Social Care Inspection (CSCI) annual performance assessment rating for Durham County Council's Adult Social Care Services in 2007/8.

#### Background

2. On 27 November 2008 CSCI announced performance ratings for councils with Adult Social Care responsibilities in England relating to 2007/2008. Ratings have been produced since November 2002 and aim to improve public information about current performance and to promote improvement at local, regional and national levels.
3. The high level judgement takes the form of a Star Rating, which can range from zero to three stars. The judgement produced follows a thorough performance assessment process, bringing CSCI and the councils into continuous contact throughout the year. Assessment includes evidence from inspections, reviews, service developments, user feedback and national and local performance indicators. The assessment culminates in an Annual Review Meeting with each council. This took place in Durham on the 21st August 2008.

#### Star Rating 2007/08

4. There are two elements to the CSCI scoring system.
5. The first of these relates to the **seven delivering outcomes** identified in the White Paper 'Our Health, Our Care, Our Say'. The possible CSCI judgements for each outcome are 'Poor', 'Adequate', 'Good' and 'Excellent'.
6. The CSCI ratings for Durham in relation to each outcome in 2007/8 is shown in the table

**Table 1 – Delivering Outcomes**

<b>Outcome</b>	<b>Rating</b>
I. Improved health and emotional wellbeing	Excellent
II. Improved quality of life	Excellent
III. Making a positive contribution	Excellent (Increased on appeal)
IV. Choice and control	Good
V. Freedom from discrimination	Good
VI. Economic well-being	Good
VII. Personal dignity	Good

7. CSCI aggregate the above against published criteria to formulate an overall judgement for “**Delivering Outcomes**”. For Durham this judgement is ‘**Good**’.
8. The second part of the CSCI judgement relates to “Capacity to Improve”. There are two domains (‘Leadership’ and ‘Commissioning and Use of Resources’) which are assessed. The possible CSCI judgements are ‘Poor’, ‘Uncertain’, ‘Promising’ and ‘Excellent’.
9. The CSCI ratings for Durham in 2007/8 are shown below:

**Table 2 – Capacity to Improve**

<b>Domain</b>	<b>Rating</b>
I. Leadership	Excellent
II. Commissioning and Use of Resources	Promising

10. CSCI deliver a combined judgement for “Capacity to Improve” and Durham has been judged as ‘**Promising**’.
11. Finally, CSCI take the judgement for “Delivering Outcomes” and the combined judgement for “Capacity to Improve” and produce an overall Star Rating.
12. For Durham the overall judgement for 2007/8 is ‘**2 Stars**’.

13. The summary report for Durham is available on the CSCI website at [www.csci.org.uk/councilstars](http://www.csci.org.uk/councilstars).
14. The council is expected to take the CSCI performance report (attached as **appendix 2**) to a meeting of the council within two months of the publication of the ratings (i.e. by 31<sup>st</sup> January 2009) and to make this available to the public, preferably with an easy read format available (this will be published on county councils website in January 2009).
15. The judgement demonstrates the high quality services delivered during 2007/8.
16. The County Council did not feel that an initial judgement made by CSCI fully reflected the level of improvement made since 2006/7 or current levels of performance and subsequently invoked the CSCI appeals process. CSCI responded by increasing the judgement in relation to one of the 'delivering outcomes' ('making a positive contribution' - see table 1). Furthermore, CSCI qualified their judgement in relation to 'capacity to improve' to be 'strong promising'.
17. To achieve 3 stars, Durham would need one other outcome or domain to be judged as 'Excellent'
18. Although the 2 star rating remains the same as in 2006/7, there have been improvements in several of the judgements in 2007/8 as follows:
  - Quality of Life has improved from 'Good' in 2006/7 to 'Excellent' in 2007/8
  - Making a Positive Contribution has improved from 'Good' in 2006/7 to 'Excellent' in 2007/8.
  - Personal Dignity has improved from 'Adequate' in 2006/7 to 'Good' in 2007/8.
19. Only 1 of the 'Delivering Outcomes' has been rated as deteriorating in 2007/8, and this relates to 'choice and control', which was rated as 'Excellent' in 2006/7, but is now rated as 'Good' in 2007/8 (further clarification has been requested from CSCI in relation to this judgement).

### **National Comparison**

20. 50% of Councils achieved two stars in 2007/08 while just over 37% achieved three stars. Table 3 over page shows the movement between Star Ratings between 2006/07 and 2007/08.

**Table 3: Changes in Ratings**

2006 / 2007	Stars Rating	2007 / 2008	Councils improving	Councils Deteriorating
48	★★★	56	14	-
74	★★	75	14	6
28	★	19	0	5
0	Zero	0	-	0

### Key Strengths

21. Within the Annual Performance Assessment Report, CSCI have highlighted a number of 'key strengths' for Durham, which are shown at **Appendix 3**, and include the following:

- Durham are helping a high number of people from all service user groups to live in their own homes, and are providing high levels of intensive home care to older people.
- The number of permanent admissions to residential and nursing care has been identified as 'very good' with fewer adult and older people being placed in 2007/8.
- The County Council is providing equipment and adaptations to service users promptly and performance is good and improving in relation to the speed with which assessments of need are undertaken.
- Significant work has been undertaken to promote awareness of safeguarding vulnerable adults and CSCI have commented on the pro-active approach now being taken in relation to responding to findings from inspection reports.
- Performance management continues to be a strength, especially the track record in meetings performance targets and in ensuring the views of service users are gathered through a comprehensive survey programme.
- Continuing development of an integrated approach with the PCT in relation to joint working
- The production of the Joint Strategic Needs Assessment which will provide a firm basis on which to base future commissioning strategies.

22. In relation to key national performance indicators included in the performance assessment framework (which is used by CSCI to help assess and judge levels of performance), Durham has achieved the highest possible banding in 15 of the 22 performance indicators which have been ranked. Comparatively, Durham is one of the highest performing authorities in relation to the indicators.

## Areas for Development

23. CSCI also identified a number of areas for development. These are shown in **Appendix 4**, which also shows the actions already taken to address development and where performance is already improving. This has been discussed with CSCI during performance review meetings with the Council.

24. Notable examples of improvement are: -

- Area for Development - Increase the number of people whose needs are reviewed.

In 2006/07 the percentage of service users who had their needs reviewed was 71.4% (PAF Indicator D40). In 2007/8, current performance is 76% and this positive trend is expected to continue and achieve the year end target (78%).

- Area for Development - Continue to expand support through the use of technology.

A target has been set of 800 people to use Telecare Services by March 2009. By September 2008, a total of 609 people have received a Telecare service, including 243 new users. The County Council has continued to strengthen its development of telecare provision and it is estimated that the target of 800 users will be exceeded by March 2009.

- Area for Development - Further promotion of self directed services.

Durham is exceeding expectations in relation to achieving the Direct Payments stretch target set in the Local Area Agreement (150 per 100,000 adult population). Despite this, analysis of national data has identified that Durham is slightly behind comparable authorities, especially in relation to take up of Direct Payments by Older People. Consequently new "in year" targets are being set to stretch performance.

- Area for Development - Development of emergency scheme for carers

The County Council has surveyed 4,200 carers, and held 5 focus groups with carers across the county. The feedback provided is being used to shape the specification of a needs based emergency scheme for carers, which will be in place by 31<sup>st</sup> March 2009.

## Changes to the Performance Assessment of Adult Social Care in 2008-9

25. In the summer of 2008, CSCI issued a consultation document relating to the performance assessment system for Adult Social Care with the aim of introducing changes for 2008-9. The consultation process has now been completed and CSCI will soon issue a final document confirming the performance assessment system. One of the known changes already confirmed in the Local Government White Paper (Strong and Prosperous Communities), is that 2007-8 will be the last star rating for adult social care.

26. CSCI's proposals for 2008-09 are to award judgements against the seven service delivery outcomes (identified on page 2 of this report) and the two domains of 'leadership' and 'commissioning and use of resources'. However, as identified in

the previous paragraph, these judgements will not be aggregated into an overall star rating.

27. In 2009-10, CSCI will be merged with healthcare inspectorates to become the Care Quality Commission (CQC) who will be responsible for discharging CSCI's current inspection and regulatory functions from 2009.
28. In addition, the judgements awarded by the Commission will be important elements of the Comprehensive Area Assessment.

### **Conclusion**

29. Durham is performing well compared to other Local Authorities. It is important therefore that the County Council continues dialogue with CSCI to understand the star rating judgement in more depth. This is especially significant in the context of Comprehensive Area Assessment, as the individual outcome judgements awarded by CSCI are integral to the assessment process.
30. The CSCI report for Durham identifies a significant number of key strengths in relation to services provided to service users and carers. These have been achieved against a backdrop of increased demand, organisational change and the requirement to develop services in line with service user expectations and government requirements.
31. For those 'Areas for Development' identified by CSCI in 2007/8 work is progressing to deliver improvement in 2008/9, and they will be a consistent feature of the regular performance review meetings held between CSCI and Adult and Community Services.

### **Recommendations**

32. Cabinet is requested to:
  - Note the content of the report.

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**Contact: Peter Appleton, Head of Planning & Performance**

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**□ Appendix 1: Implications**

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<b>Finance</b>	Adult Social Care services continue to manage increased demand for services, higher levels of performance criteria and changes in demography within available budgets.
<b>Staffing</b>	Effective Human Resource Management including recruiting and retaining high quality staff in all social care sectors is a critical factor in consolidating and improving performance.
<b>Equality &amp; Diversity</b>	Ensuring services are accessed and provided in an equitable manner is an important factor in consolidating and improving performance.
<b>Accommodation</b>	N/A
<b>Crime and Disorder</b>	The relationship between effective community safety services and safeguarding vulnerable adults is assessed during then performance assessment process
<b>Sustainability</b>	N/A
<b>Human Rights</b>	N/A
<b>Localities &amp; Rurality</b>	Ensuring that the service manages locality differences and understands local and rural issues in depth is a key feature in improving performance.
<b>Young People</b>	Ensuring arrangements are in place to enable safe and effective transition of care services between children and young peoples services and adult care services is assessed by the Commission
<b>Consultation</b>	The involvement and engagement of service users and carers will continue to be a strong feature of future performance assessment of adult social care
<b>Health</b>	Improving performance, especially in relation to preventative services and areas of interface with NHS colleagues will impact beneficially on health outcomes. A new regulatory and inspection function is being established to oversee both NHS and Adult Social Care Services
<b>Local Government Review</b>	N/A



Making Social Care  
Better for People

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Ms R Shimmin  
Director of Adult and Community Services  
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27<sup>th</sup> November 2008

Ref LR/LR

Dear Ms Shimmin

**PERFORMANCE SUMMARY REPORT of 2007-08 ANNUAL PERFORMANCE ASSESSMENT OF SOCIAL CARE SERVICES FOR ADULTS SERVICES FOR DURHAM**

**Introduction**

This performance summary report summarises the findings of the 2008 annual performance assessment (APA) process for your council. Thank you for the information you provided to support this process, and for the time made available by yourself and your colleagues to discuss relevant issues.

Attached is the final copy of the performance assessment notebook (PAN), which provides a record of the process of consideration by CSCI and from which this summary report is derived. You will have had a previous opportunity to comment on the factual accuracy of the PAN following the Annual Review Meeting.

The judgments outlined in this report support the performance rating notified in the performance rating letter. The judgments are

- Delivering outcomes using the LSIF rating scale

And

- Capacity for Improvement (a combined judgement from the Leadership and the Commissioning & Use of Resources evidence domains)

The judgment on Delivering Outcomes will contribute to the Audit Commission's CPA rating for the council.



The council is expected to take this report to a meeting of the council within two months of the publication of the ratings (i.e. by 31<sup>st</sup> January 2009) and to make available to the public, preferably with an easy read format available.

### **ADULT SOCIAL CARE PERFORMANCE JUDGMENTS FOR 2007/08**

<b>Areas for judgment</b>	<b>Grade awarded</b>
<b>Delivering Outcomes</b>	<b>Good</b>
Improved health and emotional well-being	Excellent
Improved quality of life	Excellent
Making a positive contribution	Excellent
Increased choice and control	Good
Freedom from discrimination and harassment	Good
Economic well-being	Good
Maintaining personal dignity and respect	Good
<b>Capacity to Improve (Combined judgment)</b>	<b>Promising</b>
Leadership	Excellent
Commissioning and use of resources	Promising
<b>Performance Rating</b>	<b>2 Stars</b>

The report sets out the high level messages about areas of good performance, areas of improvement over the last year, areas which are priorities for improvement and where appropriate identifies any follow up action CSCI will take.

## KEY STRENGTHS AND AREAS FOR DEVELOPMENT BY PEOPLE USING SERVICES

Key strengths	Key areas for development
<b>All people using services</b>	
<ul style="list-style-type: none"> <li>• Provision of information about well-being and about social care</li> <li>• Joint work with health partners to promote active lives</li> <li>• Use of intermediate care</li> <li>• Asking for people's views and responding</li> <li>• Fewer admissions to residential and nursing care</li> <li>• Increased use of direct payments</li> <li>• More people supported into work</li> <li>• Promoting awareness of safeguarding</li> <li>• Proactive approach to any concerns about independent care provision</li> <li>• Restructuring completed</li> <li>• Improved focus on equity of support across the county</li> <li>• More integration with PCT activity</li> <li>• Training for staff</li> <li>• Performance management</li> </ul>	<ul style="list-style-type: none"> <li>• Undertake more reviews</li> <li>• Continue to expand support through new technologies</li> <li>• Develop greater personalisation of services</li> <li>• Achieve further levels of the equality standards</li> <li>• All directly provided services should provide good outcomes</li> <li>• Complete reviews of in-house services and implement changes</li> </ul>
<b>Older people</b>	
<ul style="list-style-type: none"> <li>• Helping people to live at home</li> <li>• Prompt assessment</li> <li>• Day services at weekends</li> </ul>	
<b>People with learning disabilities</b>	
<ul style="list-style-type: none"> <li>• Helping people to live at home</li> <li>• Innovative project developed person centred plans</li> </ul>	
<b>People with mental health problems</b>	
<ul style="list-style-type: none"> <li>• Helping people to live at home</li> </ul>	
<b>People with physical and sensory disabilities</b>	
<ul style="list-style-type: none"> <li>• Helping people to live at home</li> <li>• Equipment and adaptations provided promptly</li> </ul>	
<b>Carers</b>	
<ul style="list-style-type: none"> <li>• High number of carers receive services</li> </ul>	<ul style="list-style-type: none"> <li>• Introduce an emergency scheme</li> </ul>

## **KEY STRENGTHS AND AREAS FOR DEVELOPMENT BY OUTCOME**

### **Improved health and emotional well-being**

#### **The contribution that the council makes to this outcome is excellent**

The council and its partners provide a full range of accurate and accessible information about healthy lifestyles. This is made available through a range of media including leaflets, magazines, and advertisements on buses. There are information days, a county-wide "passionate about health" campaign, and specific events for people with particular needs.

Joint working arrangements in services for older people, those with physical disabilities and those with sensory impairments have been reviewed, and it is proposed to develop a single access point. Integrated working is being introduced in learning disability services. Integrated intermediate care teams have expanded and best practice from across the county has been identified and a new strategy is being developed. This service, already provided at a high level, has increased. Community-based services for people with dementia have grown, and Age Concern run "active ageing" programmes" across the county. Fewer people who receive services had their needs reviewed in Durham than in similar councils, and additional staff will undertake this work in future.

A survey of 700 people discharged from hospital identified that almost everyone felt their social worker had told them what services to expect when they were discharged, and most found these services were available at the appropriate time. Hospital discharge policies are being reviewed in the light of less positive feedback from a small number of people. The Council is not responsible for any older people remaining in hospital longer than is medically necessary but several people remain in NHS campus accommodation.

### **KEY STRENGTHS**

Provision of information about well being  
Joint working with health partners to promote active lives  
Use of intermediate care to minimise stays in hospital

### **Key areas for development**

Increase the number of people whose needs are reviewed

### **Improved quality of life**

#### **The contribution that the council makes to this outcome is excellent**

A high number of people from all service user groups are helped to live in their own homes, and intensive home care is provided to a high proportion of older people. Telecare services have been expanded and there is a high level of provision in the county, although expenditure this year was less than

planned. There is a high level of services for carers, and an event held in June 2007 brought together managers from health, social care and the voluntary sector so that carers could identify improvements they would like to see. CSCI's inspections of directly provided services judged all but one to be good or excellent.

A range of grant funded services support people at home, including a Handyvan service and sitting services to enable carers to have a break. The floating support service provides person-centred support to 70 older people with mental health problems. A pilot care navigation scheme helps people find alternative activities to traditional day care such as lunch clubs and cinema trips. Over 200 people who would otherwise have attended day care have received services in the community, and the approach is to be used more widely.

Equipment and adaptations are provided promptly. The Council operates five home independence shops and two demonstration centres which provide information and advice to people who choose to buy their own equipment. Two sensory resource centres provide information and advice on equipment and services. Advice and redirection are offered to people who do not need care managed services, and 1300 people were helped to receive grant funded services in 2007/08.

There is an extra care service for 21 people with dementia. The Council has identified people with autistic spectrum disorders who live within the county and in other areas, and is working to move them nearer home. A provider has been selected to offer housing support to 24 deaf and blind people in their own homes. A Council survey of people who use Telecare confirmed it helps them feel safer.

### **Key strengths**

Helping people to live at home  
Number of carers receiving services  
Prompt provision of equipment and adaptations

### **Key areas for development**

Continue to expand support through the use of technology

## **Making a positive contribution**

### **The contribution that the council makes to this outcome is excellent**

The Council is increasingly helping people to communicate their views, and to contribute to developments. A social enterprise scheme has been established, enabling people with learning disabilities to gain skills and qualifications. Fifteen people with learning disabilities participated in a week long project funded by the Council, which resulted in a DVD called "Giz A Break" that highlights the issues they face daily. The learning disability

partnership board has representation from the service user parliament and elected carers, and there is a service user led website.

The Council's Community Development Team brought three local voluntary organisations together in a partnership (most of whose members are blind or partially sighted), to commission a joint survey of the needs of blind and partially sighted people. A county-wide group for disabled people, called Durham Disability Voice (DDV) has been established, and recently worked with the PCT to organise a county wide consultation and information event for people with disabilities. There is an electronic self assessment form on the council's website, which can trigger the provision of equipment on the basis of the information submitted, but this approach is at a very early stage. The annual "All our Tomorrows" event in 2007 involved 150 older people and carers in testing services' approach to Dignity in Care. A service level agreement with Age Concern includes a requirement to pilot engagement with hard to reach groups, and this will be extended across the county in 2008/09. People with mental health needs have been invited to training and awareness courses and are increasingly involved in evaluating the performance of voluntary sector providers.

The council is reviewing the way it works with the voluntary and community sector, and 300 organisations were surveyed in 2007. Together with the six Volunteer Centres in the county it has launched an employee volunteering scheme, allowing staff up to 20 hours paid leave a year to take part in volunteering activity.

People who use services influence the development of policies through a comprehensive programme of surveys: in 2007-08, 15,000 people were asked about their services. Results from a home care survey were shared with service providers, and are used as part of the contract monitoring process.

### **Key strengths**

Supporting the participation of people who use services in their development

Extensive programme of surveys

Responding to people's views

### **Key areas for development**

## **Increased choice and control**

### **The contribution that the council makes to this outcome is good**

Assessments of older people's needs were undertaken more promptly this year, and performance is now good. The Council provides a wide range of information about services and processes, including leaflets, newsletters in a range of formats for different groups of people who use services, and on the web site. It monitors the take up and relevance of information through

information audits (checking local outlets), surveys of service users about availability and quality, consultation about new products, feedback forms included in publications, and monthly reporting in libraries. Three thousand service users returned assessment surveys last year, and most were positive about the written and verbal information they were given.

Complaints relating to almost all service user groups reduced this year, and the overall rate of complaints remains lower than in similar councils. In 2006-07, the Council identified that some complaints were not completed promptly enough. An action plan was produced and has resulted in a significant improvement. There is evidence of the changes made to policies and practice as a result of complaints.

A weekend day care service is offered through the five main in-house day centres and funded by the carers grant. A mental health telephone helpline provides help to nearly 100 people a week. There are plans to develop an Emergency Carer Scheme to provide support when a carer becomes unavailable. The single assessment process has been fully implemented, so that people only have to tell their story once. An updated leaflet has been produced, advising people how they can access their personal records.

Almost everyone received a statement of their needs and how they would be met. An independent organisation was commissioned to undertake a project using drama, poetry and music, enabling 78 people with learning disabilities to develop person centred plans, including a number of young people going through transition. The Council has identified a number of changes to services as the result of advocacy intervention, and a five year advocacy strategy has been developed. Fewer working age or older people were admitted to residential or nursing care this year on a permanent basis, and performance was very good on this measure.

The number of people accessing direct payments has increased, although this is slightly fewer than in similar Councils. Most payments were for a substantial sum. Just eight people received Individual Budgets, but these will be available to all young people with learning disabilities leaving school in 2008.

### **Key strengths**

Assessments undertaken promptly

Extensive range of information disseminated through various approaches

Use of an innovative arts project to develop person centred plans

Fewer people admitted into residential or nursing care

Growth of weekend day services

### **Key areas for development**

Development of emergency scheme for carers

Further promotion of self directed services

## **Freedom from discrimination and harassment**

### **The contribution that the council makes to this outcome is good**

Clear information is published in leaflets and on the Council's website about eligibility for services, including for people who pay for their own services. Work is underway to ensure that service users with low and moderate needs are receiving appropriate help and redirection to alternative services.

The Council achieved validation at Level 3 of the Local Government Equality Standards in November 2006 and has set a target of reaching Level 4 by November 2008. It has worked to increase the take-up of services by people from the gypsy and traveller community, and from the increasing number of people from Eastern Europe who have moved into the county. The proportion of older people from black and minority ethnic communities who received an assessment, or services following an assessment, remains comparatively low, but these communities are very small and statistical comparisons are not reliable. The ethnicity of almost everyone who was assessed was recorded, and of most adults receiving services. A number of people with profound and multiple disabilities are supported in specialist residential provision outside the county, and work is taking place with specialist providers to develop provision nearer to home. The Council's Disability Partnership provides a forum where disabled people and their representatives can meet and discuss current issues.

The council monitors its implementation of the Disability Discrimination Act (DDA) and has a planned programme of upgrades underway to bring buildings, including some day centres, up to DDA standards.

#### **Key strengths**

Informing people about eligibility for services

#### **Key areas for development**

Achieve further levels of the equality standards

## **Economic well being**

### **The contribution that the council makes to this outcome is good**

A new continuing health policy was implemented in October 2007 along with a multi-agency training programme, and there have been no disputes.

WorkAble Solutions works with internal and external employers to support people with learning disabilities and physical disabilities in work. It offers basic skills assessment and financial assessment to everyone referred. The number of people supported into work has increased this year across all groups of people who use services. The Council reports that carers are supported to take up or maintain employment through the provision of information, ensuring care packages fit in with their work, by offering sitting services to enable them to attend training courses or pursue interests, and by offering direct payments.

The Council's Welfare Rights Team provides an advice line, fact-sheets, and a website to help people maximise their income and avoid financial difficulties. There is a casework and representation service. A Carers' Benefit Campaign in 2007-08 undertook 79 benefit checks and the annual income for these carers increased by almost £70,000.

### **Key strengths**

More people were supported into employment this year  
Support to maximise benefit income

### **Key areas for development**

## **Maintaining personal dignity and respect**

### **The contribution that the council makes to this outcome is good**

There were more safeguarding referrals this year, and the Council sees this as reflecting a greater awareness of safeguarding issues across organisations, and the "zero tolerance" approach that has been adopted. A large growth of referrals in older people's services results partly from the number of investigations in residential care services. Over 80% of referrals were completed during the year. In 2006-07, CSCI identified two areas for improvement relating to the Council's use and its operation of unregistered services. Firm action was taken to ensure that this could not happen again. Safeguarding procedures are now available on the Council's website, and all service providers have been sent a link to them. A CSCI inspection of one of the Council's home care services repeated a requirement made to assess risks of people's vulnerability and note them in individuals' care records. The Council has responded through increased training and auditing.

Over 1,500 staff from partner organisations have received basic safeguarding training and a larger proportion of staff in the Council have been trained this year. Everyone who is admitted into residential care or supported living has access to a single room if they chose. Staff are issued with good practice guidelines on inter-personal relationships. The Dignity in Care action plan has been implemented, with good practice workshops being undertaken within provider services. Privacy in care homes has been strengthened and there has been further development of public information booklets including one that describes why it may be necessary to share personal information.

Partnership arrangements to safeguard against adult abuse have been strengthened through the establishment of a multi-agency Safeguarding Adult Board, with additional finance from partner agencies to support its work. A team of two social workers and two nursing staff has been established to develop standards of care in residential and nursing homes.

### **Key strengths**

Promoting awareness of adult safeguarding  
Proactive approach to concerns about care standards



## **Key areas for development**

Ensure all directly provided services meet or exceed all the National Minimum Standards

## **Capacity to improve**

### **The council's capacity to improve services further is Promising**

The needs of people who use social care services and their carers are promoted across the Council. A restructure of Adult and Community Services in 2007-08 has been completed, and there are comprehensive plans in place, linked across geographical areas and organisations. Formal partnership arrangements across health, housing and social care differed across the county's five localities. These became obsolete when the PCT boundaries were revised, and a new system is being developed to ensure equity of access and services, and more integrated working with health partners. This county wide approach will be enhanced when the Durham begins to operate as a unitary authority from April 2009. Management posts are increasingly joint funded with the PCT and a joint performance framework is being developed. There is a 12 month plan to integrate older people's and physical disability and sensory impairment teams.

There is a workforce development plan which includes succession and development strategies to address future needs and gaps. Job advertisements are circulated to minority groups. A mental health day services day manager has been appointed to oversee the move towards community based services. The number of vacant posts increased this year and sickness absence fell very slightly. There is high expenditure on staff training and a slight increase in the provision of practice learning places which remains good, although continues to be slightly lower than in similar Councils. The ethnicity of all staff is recorded. Training grants have been used to develop the Durham Employers Care and Health Alliance, which has produced a funded training plan.

Performance management is a strength in County Durham, and the Council has a very good track record of meeting the targets it sets. A new performance management system has now been developed, based on the seven Our Health Our Care Our Say outcomes, and is intended to support the reduction of differences between areas. Each service holds quarterly performance sessions, using evidence drawn from information systems, service audits, and the programme of user surveys.

A Joint Strategic Needs Assessment has been developed and will form the basis for both Adult and Community Services' and the PCT's commissioning strategies. The Audit Commission has identified the Council as improving well and demonstrating a four star overall performance. A new Commissioning Unit was established in 2007-08 and a new post of Personalisation Development Manager will oversee the move to greater personalisation of services and changes to in-house provision. Investment has been made to improve existing services, and there has been a focus on improving performance in areas of the county where it was less strong.

Several new services are being commissioned to fill identified gaps in provision.

The use of in-house provision continues to be reviewed, and some decisions are still to be made, but a members' working group has completed extensive work to decide the future of the Council's 12 directly provided residential care homes, which was the subject of some controversy in 2006-07. New systems are being introduced so that managers can identify investment in the voluntary sector across the whole council. Substantial efficiency savings were made, which included the changes to staffing structures. People who use services, carers and staff are consulted on their design, quality and performance: for example, results of the Home Care Survey help determine which providers achieve "preferred provider" status, and a task group within Learning Disability Services helped reconfigure respite services.

The Council is increasingly working with its partners to improve the value and effectiveness of local services, and a number of partnerships are in place to undertake joint commissioning. Its intranet invites social workers to inform commissioning staff of any issues relating to services provided through the independent and voluntary sectors.

## **KEY STRENGTHS LEADERSHIP**

Restructure completed and staff recruited  
Greater emphasis on equity across the county  
Continuing development of integrated approach with the PCT  
Commitment to training staff

## **COMMISSIONING AND USE OF RESOURCES**

Production of Joint Strategic Needs Assessment  
Strong performance management

### **Key areas for development**

## **LEADERSHIP**

## **COMMISSIONING AND USE OF RESOURCES**

Continue to develop personalised services  
Complete reviews and implement changes to in-house services

Yours sincerely



Linda Christon  
Regional Director  
Commission for Social Care Inspection

**Key Strengths Identified by the Commission for Social Care Inspection**

<b>Improved health and emotional well-being</b>
<ul style="list-style-type: none"> <li>❖ Full range of accessible of information about well being</li> <li>❖ Effective joint working with health partners to promote active lifestyles</li> <li>❖ High level of use of intermediate care to minimise stays in hospital</li> </ul>
<b>Improved quality of life</b>
<ul style="list-style-type: none"> <li>❖ Significant numbers of people to live at home</li> <li>❖ High number of carers receiving services</li> <li>❖ Prompt provision of equipment and adaptations</li> </ul>
<b>Making a positive contribution</b>
<ul style="list-style-type: none"> <li>❖ Increasingly supporting the participation and involvement of people who use services in their development</li> <li>❖ Extensive programme of surveys to gather views of service users</li> <li>❖ Effectively responding to people’s views</li> </ul>
<b>Increased choice and control</b>
<ul style="list-style-type: none"> <li>❖ Care assessments undertaken promptly</li> <li>❖ Extensive range of information disseminated through various approaches</li> <li>❖ Use of an innovative arts project to develop person centred plans for people with learning Disabilities</li> <li>❖ Fewer people admitted into residential or nursing care</li> <li>❖ Growth of weekend day services</li> </ul>
<b>Freedom from discrimination or harassment</b>
<ul style="list-style-type: none"> <li>❖ Clearly Informing people about eligibility for services</li> </ul>
<b>Economic well being</b>
<ul style="list-style-type: none"> <li>❖ Increasing the number of people who were supported into employment this year</li> <li>❖ Effectively Supporting people to maximise benefit income</li> </ul>
<b>Maintaining personal dignity and respect</b>
<ul style="list-style-type: none"> <li>❖ Effectively Promoting awareness of adult safeguarding</li> <li>❖ Proactive approach to addressing concerns about care standards</li> </ul>

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**Key Strengths Identified by the Commission for Social Care Inspection  
(cont'd)**

**Leadership**

- ❖ Service restructure completed and staff recruited
- ❖ Greater emphasis on equity across the county
- ❖ Continuing development of integrated approach with the PCT
- ❖ Strong commitment to training staff

**Commissioning and use of resources**

- ❖ Timely production of Joint Strategic Needs Assessment
- ❖ Track record of effective performance management and achieving targets

## Areas for Development and Improvement Actions

CSCI identified improvement areas	Improvement actions	Timescale/Target
<b>Improved Health and Emotional Well-Being</b>		
1. Increase the number of people whose needs are reviewed	Resources and processes reviewed and prioritised in 2008/9 to improve performance in relation to reviews. As at 30 <sup>th</sup> September, 2008, there has been a significant improvement at 76.5% (compared to 71.4% in 2007/8) and is year end performance is expected to achieve target.	78% by Mar 09
<b>Improved Quality of Life</b>		
2. Continue to expand support through the use of technology (Also an area for Development in 2006/7)	Plans are in place to extend the range and use of Telecare provision across the County including the: <ul style="list-style-type: none"> <li>▪ Appointment of a Full Time Senior Telecare Coordinator;</li> <li>▪ Promotion of Telecare both to Professionals and the general public and</li> <li>▪ Piloting of new Telecare devices to targeted groups of people, for example older people with dementia/mental health needs.</li> </ul>	800 users of Telecare Services during 2008/9
<b>Making a Positive Contribution</b>		
<b>No Areas for Development identified</b>		
<b>Increased Choice and Control</b>		
3. Development of emergency scheme for carers	The County Council decided to ensure that the service was founded on a clear evidence base and consequently surveyed 4,200 carers, and held 5 focus groups with carers across the county. The feedback provided is being used to shape the specification of the Service.	Service commissioned by 31 <sup>st</sup> March 2009.

<b>Increased Choice and Control (cont'd)</b>		
4. Further promotion of self directed services	Direct Payments are continuing to be promoted through newsletters, exhibitions/ conferences, meetings with service user groups, workshops, DCC website. This has resulted in significant progress against the LAA target for Direct Payments and as at 30 <sup>th</sup> September, performance was 146 per 100,000 adults. In addition, take up by service users with a learning disability is above comparator authorities. Adult and Community Services are currently setting further in year targets to stretch performance further, in particular relating to take up by older people.	LAA Stretch Target of 150 per 100,000 adults by Mar 2009
<b>Freedom from Discrimination or Harassment</b>		
5. Achieve further levels of the equality standards (Also an Area for Development in 2006/7)	A new national Equality Framework has been implemented. The Improvement and Development Agency (IdEA) for local government have confirmed that Durham County Council will be awarded 'achieving' status (based on assessment of DCC and 7 District Councils). Adult and Community Services are continuing to engage with and deliver services to a range of diverse and 'hard to reach' groups	Achieve Excellent status of Equality Standard by 2011
<b>Economic Well-Being</b>		
<b>No Areas for Development identified</b>		
<b>Maintain Personal Dignity and Respect</b>		
6. Ensure all directly provided services meet or exceed all the National Minimum Standards	A performance framework has been developed to scrutinise CSCI reports and findings, and corrective actions are taken in response to all CSCI inspections of directly provided services. Sedgefield Home Care Service has recently received a judgement of excellent from CSCI.	All Services meet National Minimum Standards
<b>Leadership</b>		
<b>No Areas for Development identified</b>		

## Commissioning and Use of Resources

<p>7. Continue to develop personalised services</p>	<p>Adult and Community Services are taking forward the governments personalisation agenda in its broadest sense and are currently developing a programme for implementation, which includes:</p> <ul style="list-style-type: none"> <li>• Developing joint commissioning strategies (with PCT) for Learning Disability and Adult Mental Health Services</li> <li>• Developing a joint intermediate care strategy (with PCT) and</li> <li>• Extending the availability of Direct Payments and Individualised Budgets.</li> <li>• Developing a Preventative Services Framework</li> <li>• Confirming unit costings for all directly provided services</li> </ul>	<p>March 2009</p> <p>March 2009</p> <p>150 per 100,000 adults</p> <p>March 2009</p> <p>March 2009</p>
<p>8. Complete reviews and implement changes to in-house services</p>	<p>Learning Disability Day Care – Next phase of work is underway in Easington, with strong focus on community engagement. Currently, 45.5% of people are attending day care in the community.</p> <p>Residential care – Project plan in place and overseen by a multi -disciplinary project board chaired by the portfolio member. Detailed option appraisals being worked up for the 5 homes in Phase 1 of the programme. Recommendations to be considered by Cabinet at the end of phase 1.</p>	<p>45% of people attending day care in community</p> <p>Report to cabinet in March 2009 re: Phase 1 options for Residential Care.</p>