

Here for you, how did we do?

Local account for Kent Adult Social Care



April 2014 - March 2015

Report highlighting the achievements, improvements and challenges of KCC social care during the past year and our vision for the future.

Contents

Foreword.....	1
Introduction.....	2
Kent and its people.....	3
Facts and figures about Kent.....	4
What do adult social services do?.....	5
Structure of adult social care.....	7
Headline figures.....	8
Challenges and savings.....	11
Transformation programme.....	12
Care Act.....	13
How we spend our money.....	15
A customer journey.....	17
Quality of Services.....	19
Adult Social Care Working with Health.....	21
Independence.....	25
Quality of Life.....	29
Compliments, comments and complaints.....	33
Safeguarding.....	35
Sensory and autism services.....	37
Contact details.....	40
Glossary.....	41
Feedback.....	45

This document is available in alternative formats and languages.

Please call: 03000 41 61 61

Text relay: 18001 03000 41 61 61 for details.

Or search 'Local Account' on www.kent.gov.uk

Images Kent County Council.
NHS photo library images page 24 & 28.

Foreword

By: Graham Gibbens, Cabinet Member for Adult Social Care and Public Health and Andrew Ireland, Corporate Director for Social Care, Health and Wellbeing.



Graham Gibbens



Andrew Ireland

We are pleased to publish, "Here for you, How did we do?" the Local Account for Kent County Council Adult Social Care for April 2014 – March 2015.

This Local Account describes the achievements, improvements and challenges of KCC Adult Social Care in the past year and sets out our vision for the future.

There continue to be big challenges ahead in adult social care, we are changing the way in which we deliver our services so we can continue to offer quality care and value for money for the future. We are also committed to improving social care outcomes within the constraints of a challenging financial climate. We have already made essential savings and we are working to become even more efficient. We are doing this through reducing paperwork, simplifying processes and cutting red tape, as well as looking at the way we commission services to get better value for users and the council. At the same time, we are making significant investment in vital support services, which will help people, stay independent for longer, offer greater support for carers and reduce avoidable hospital admissions. We are also working more closely with our partners in the NHS to integrate health and social care. The people of Kent have told us they want real choice in their care, they want personalised care which suits them and they want to stay independent for as long as possible.

We know that quality care matters to people and we will continue to work to find innovative and efficient ways to deliver these services.

In 2014-15, we have strived to:

- keep vulnerable adults safe
- work with fewer homecare providers to deliver services that are high quality, value for money and support you to live independently in your own home
- increase investment in enablement services (see glossary) and Telecare (see glossary) provision to enable people to regain their independence and remain at home
- reduce the number of permanent admissions to residential care
- support more people through a person-centred process and to receive a personal budget
- support more people with a learning disability into employment
- use surveys and other feedback to look at what we are doing well and what needs improving
- work with health to plan and provide joint services.

Many people, including those who use our services, their carers and voluntary organisations, were crucial in putting this Local Account together and we would like to thank all those who contributed. We will continue to listen to and work with people in Kent to build a sustainable service for the future.

Introduction

Welcome to this year’s annual report for Adult Social Care in Kent. This is the fourth year that the report that has been produced in partnership with you, the people who use our services and carers, as well as the voluntary sector, members, district councils and staff. In the past, the Care Quality Commission (see glossary) used to assess how well Local Authorities were performing in Adult Social Care. They no longer do this, and as part of national changes, all Local Authorities are now asked to produce a document in partnership with their residents to enable them to hold the authority to account.

As a result “Here for you, How did we do?” has been produced. It will provide an update on all the key areas of challenge that we focused on last year, report on progress, as well as include information on all the key topics that you have asked for.

Throughout this document we will provide updates on the top ten issues you have told us are most important to you. It is critical that you know how we are going to tackle any issues in the future, to reform the care that you receive.

You told us your top issues are:

1. Personal care packages
2. Equipment - What equipment can we help with?
3. Equipment – Telephone numbers for returning equipment Telecare/Lifeline
4. Queries regarding funding
5. Case managers’ name and contact numbers
6. Repeatedly calling, leaving messages for case managers
7. Who can help you with the housework, gardening and maintenance tasks
8. Options for homeless people such as the elderly or vulnerable adults
9. Whether an individual is known to Social Services

We would like to thank everyone who contributed to the production of this report; it is paramount that we hear your voice.

Feedback from you is enormously important. If you have any questions regarding the data or content of this report and would like to submit your comments, there is a feedback form on page XX. Similarly if your personal experience does not match with what we’ve said in the this report, we’d very much like to hear from you.

Symbols used in this report



This symbol shows what is new this year.



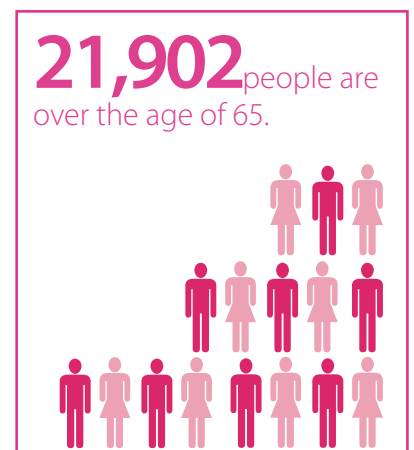
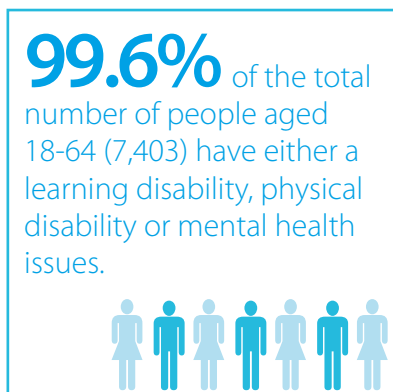
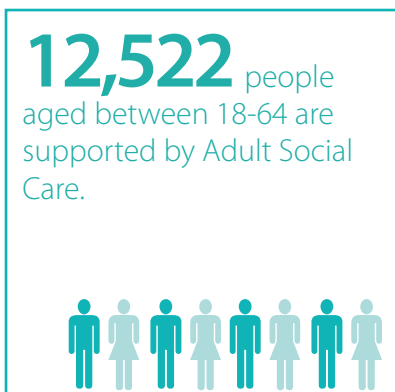
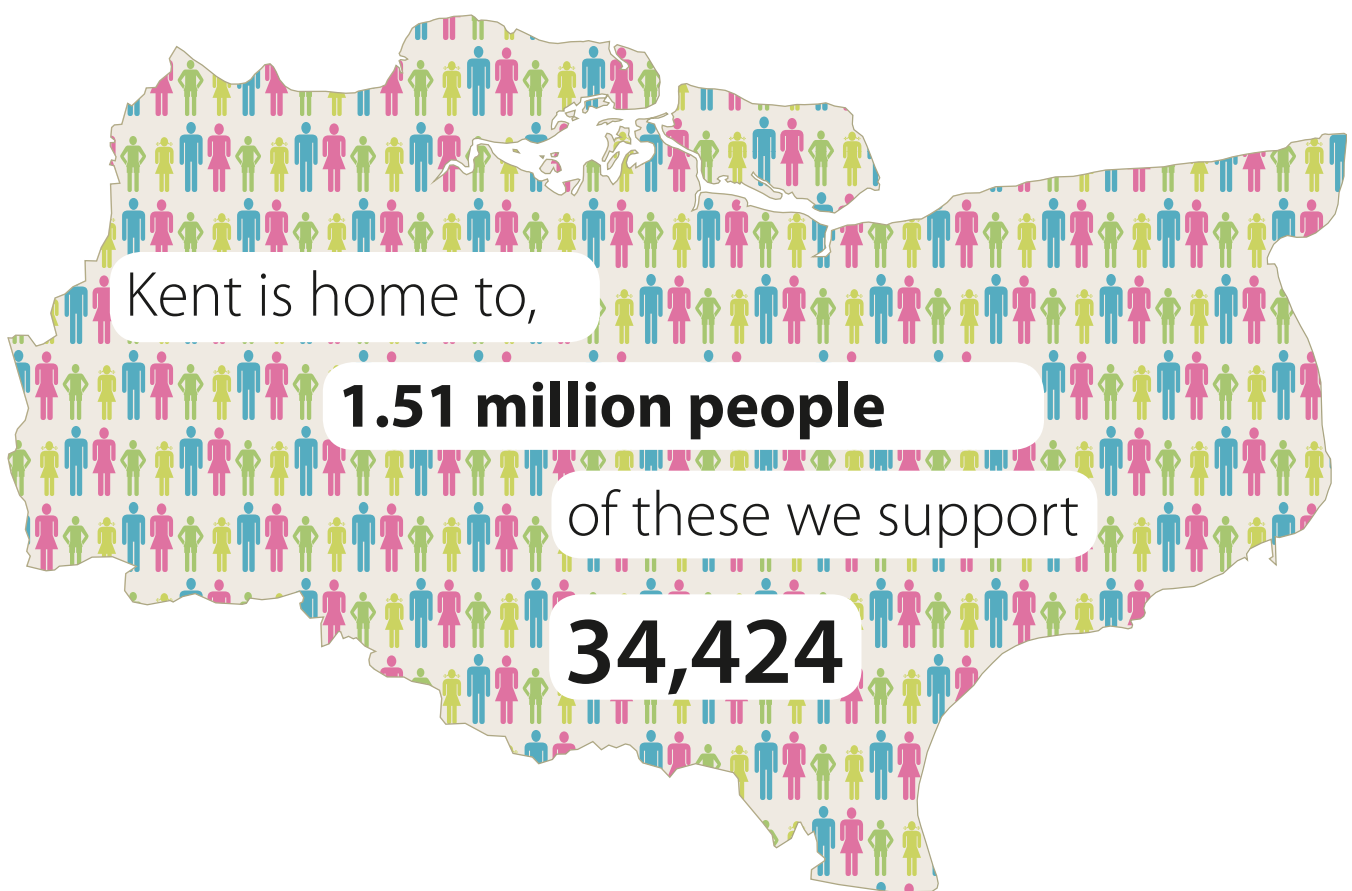
This symbol shows where there is an update on a specific item highlighted last year.



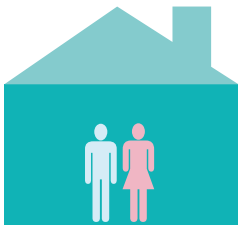
Kent and its people

KCC believes and recognises that the diversity of Kent’s community and workforce is one of its greatest strengths and assets. The different ideas and perspectives that come from diversity will help the council to deliver better services as well as making Kent a great county in which to live and work.

Further information on the council’s objectives for equality and diversity can be found at www.kent.gov.uk/diversity




Facts and figures about Kent (excluding Medway)

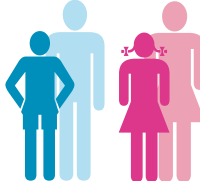


People living in urban areas make up 73% of the Kent population.

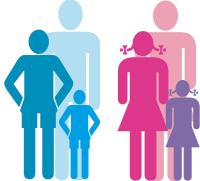
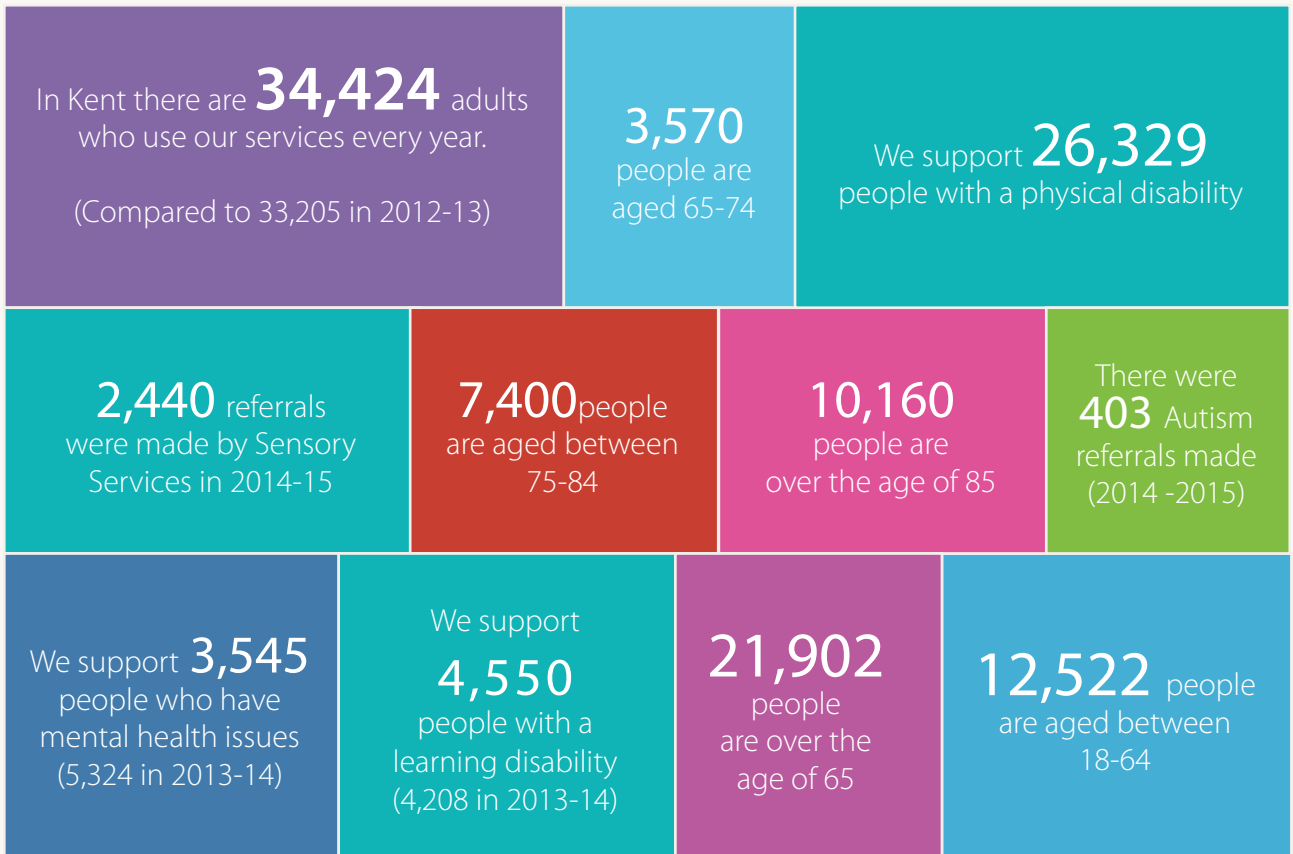
Kent has an ageing population with the number of 65+ year olds forecast to increase by 43.4% by 2026.



Just over half of the total population of Kent is female 51.1% and 48.9% are male.



Kent has a greater proportion of young people aged 5-19 years and people aged 45+ years than the national average.

What do adult social care do?

KCC Adult Social Care has a statutory responsibility for the following:

- assessment of your needs
- planning of your support
- arranging of your services, where appropriate
- provision of community care services for adults living in Kent who qualify for social care support.

The aim of all the services we provide is to help you lead a life which is as full and independent as possible.

Kent Adult Social Care support:

- older people
- adults with physical disabilities
- adults with sensory disabilities including dual sensory impairment and autism
- adults with learning disabilities and disabled children
- adults with mental health issues
- adults moving from children's services to adult services
- adults who give voluntary care to family members or friends.

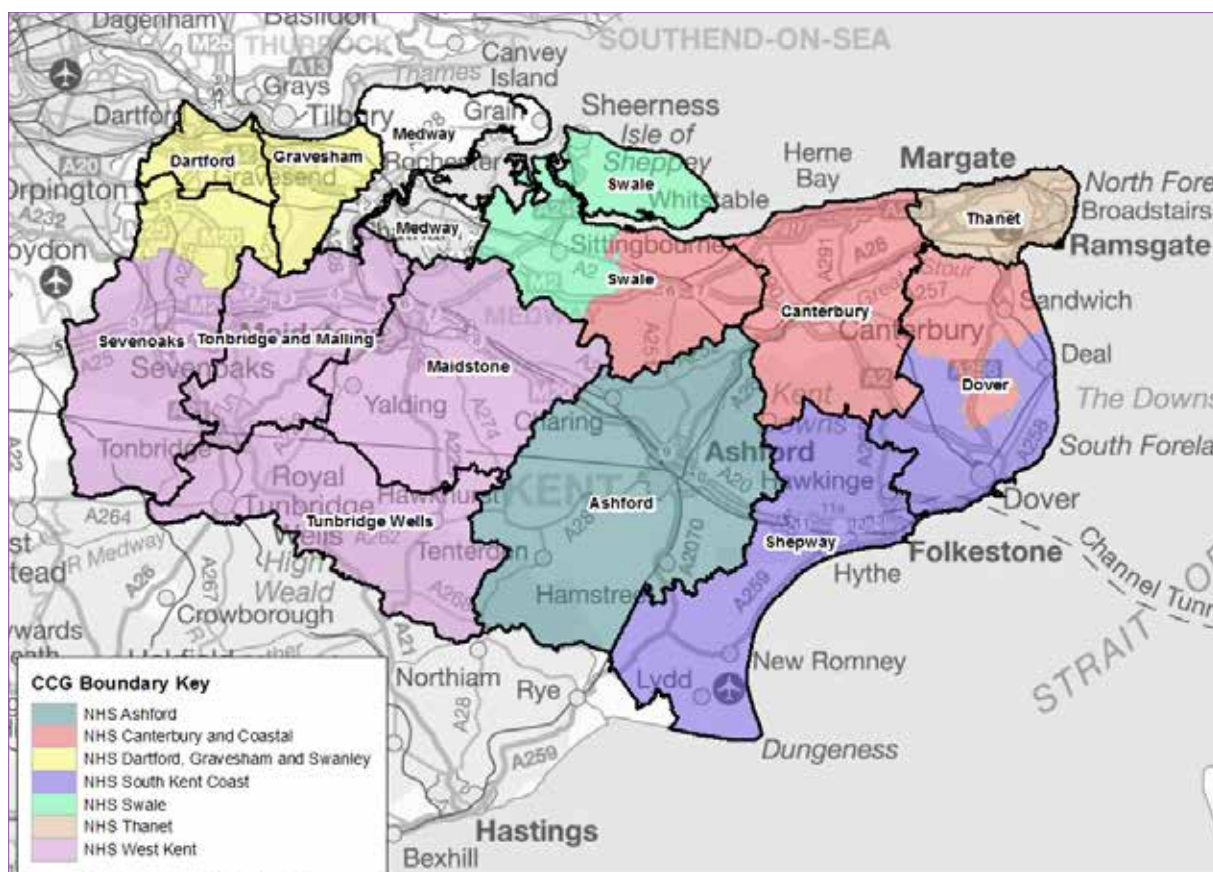
For more detailed information on all of our services you can access 'For You - A guide to Adult Social Care'. The booklet explains how adult social care works in Kent and includes important information about finding out what your needs are and how you can make the best choices about your life. Contact us if you would like a copy of "For You – A Guide to Adult Social Care" – see page 48 for our contact details.

We also have a commissioning team who are responsible for buying social care services to ensure that the right level of support is provided at the right time, right place and at the right cost for vulnerable adults, children and young people and carers in Kent.



Public Health is responsible for providing services that will improve and protect the health of the population of Kent.

This map illustrates the new boundaries for adult social care in Kent which, now align with the Clinical Commissioning Groups (CCGs - see glossary) so it will be easier to provide joint health and social care services to residents.



*Please note the coloured areas detail the CCG boundaries, the outlined areas are the district boundaries, resulting in some overlap.

CCG	Registered population*
NHS Ashford CCG	124824
NHS Canterbury and Coastal CCG	212050
NHS Dartford, Gravesham and Swanley CCG	249965
NHS Medway CCG	288630
NHS South Kent Coast CCG	200950
NHS Swale CCG	106872
NHS Thanet CCG	141140
NHS West Kent CCG	466063
Kent and Medway	1790494

*source: PCIS population June 2014

For more information visit: www.kent.gov.uk/about-the-council/information-and-data/Facts-and-figures-about-Kent


Structure of Adult Social Care and Public Health

There are 4 divisions within Adult Social Care and Public Health



Headline figures

34,424 adults in Kent use our services every year.



21,902 people are over the age of 65.

This is 1.35% of our population which is lower than the national average.

12,522 people aged between 18-64 are supported by Adult Social Care.

99.6% of the total number of people aged 18-64 have either a learning disability, physical disability or mental health issue.

Assessment

23,971 People received an assessment of their needs.

This is a slight decrease from last year's total of 24,973.



19,216 Carers had their needs assessed to identify the support they need to continue caring (15,830 in 2013-14).

Personal Budgets

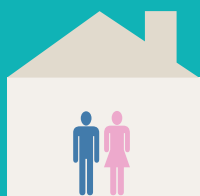
4,150 People decided to take their Personal Budget as a Direct Payment (See glossary) (3,785 in 2013-14).

2,134 People received their Direct Payment through a Kent Card (see glossary).

This is higher than last year's 1,221.

Services in the community

12,356 People received a home care support service to enable them to stay in their home. This is 0.83 % of our population which is lower than the national average.



84.1% of people could return to their homes due to enablement services (see glossary). This is an increase on 2013/14.

8,131 People received enablement services (see glossary) in comparison to 2013 where approximately 8,222 people received this service.

2,660 People received a day care service.

This is 0.18% of our population, which is lower than the national average.

Residential and Nursing Care

There were approximately **4,064** people in permanent residential placements during 2014/15.

This represents 17.8% of the population who use our services.



1,243 people were resident in nursing care homes during 2013/14.

This represents 5.4% of the population who use our services.

413 suppliers provide services in relation to permanent residential placements.

143 suppliers provide services in relation to nursing care homes.

Reviews

19,583 people received a review of their needs as of March 2014.



Carers

1,111 Carers received a 'something for me' payment (see glossary); this represents 5.78% of carers who are supported.

Complaints

538 statutory complaints were received.

Most complaints related to poor communication between our clients and their relatives, as well as disputes over decisions.

407 enquiries were received, relating to request for services, communication, financial assessments, and continuing health care etc.

63% of the 538 complaints received were either partially or completely upheld.



Compliments

Below is a sample of compliments received about our services.

"All we hear from the 'media' is total negativity regarding any service that may in the slightest way be connected with our NHS or GP services. What you do proves the opposite. You have gone out of your way to make sure that not only have you put me in touch with certain organisations to whom I was unaware but organised them to contact me, offering invaluable help."

Mr P, Ashford

"Thank you to the case manager for providing a wide range of support and advice on suitable adaptations making everyday living easier for a client with a neurological disorder. The Case manager was a constant provider of professional support."

Mrs A, Margate

"The carers have been very patient. They suggest, not demand when helping. They listened, discussed and incidentally make a good cup of coffee. Please give the carers my grateful thanks."

Ms D, Tonbridge

For more detailed information regarding KCC's performance please refer to the Quarterly Performance Monitoring Reports which can be found on the website:

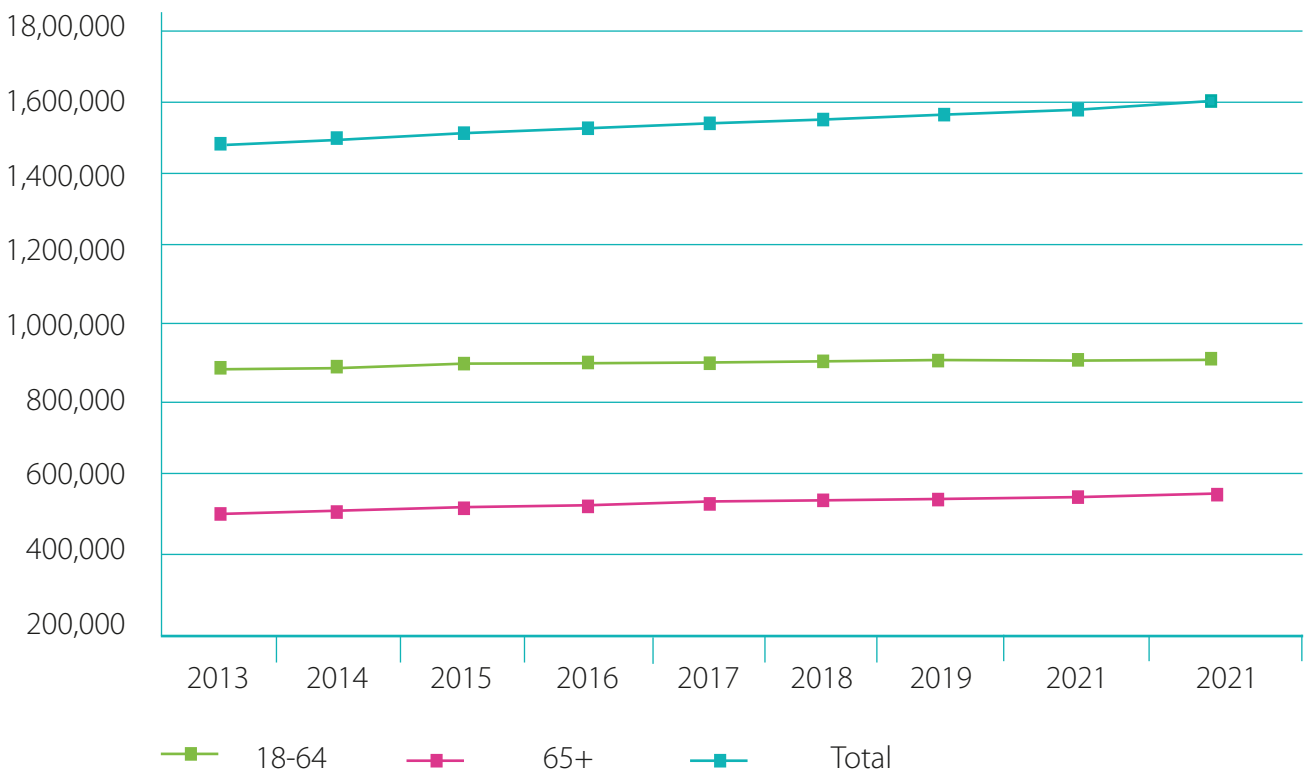
www.kent.gov.uk/about-the-council/information-and-data/council-performance

Challenges and savings

Public services and Adult Social Care services in particular are facing four huge challenges:

1. people want better quality and choice in the services they use
2. the population is living longer with complex needs putting further demand on social care
3. the financial climate is imposing massive constraints on local authorities
4. delivery of joint services with the NHS and other partners.

By 2021 the population of Kent and demand on services will have increased. The graph and table below detail the projected population growth up to 2021



Age Band	2014	2015	2016	2017	2018	2019	2020	2021	2022
18-64	877,000	882,200	887,700	892,900	897,000	900,700	904,900	908,900	912,000
65+	293,600	300,600	306,900	312,600	318,800	325,100	331,400	338,000	344,900
Total	1,496,700	1,510,600	1,524,100	1,537,300	1,550,700	1,564,100	1,578,800	1,593,200	1,606,400

Transformation Programme

Kent Adult Social Care has looked at transforming existing services, delivering better outcomes for people, working more closely with health and making savings.

Planning for this began in 2012 and there will be three stages of transformation over a period of four years in order to achieve the desired outcomes.

The biggest challenge is to ensure people are at the centre of their care and live as independent a life as is possible given their needs and circumstances. During the transformation we will work with other organisations, including people who use our services, carers, the public, staff, the NHS, agencies and the voluntary and community sector.

The transformation programme will focus on:

- putting services in place which prevent people from needing adult social care, making sure people can live independently and preventing people from going into hospital as much as we can
- helping people stay in their own homes but also making sure that they do not become lonely or isolated
- the way our staff work, making them work more efficiently and reducing duplication
- reviewing the way in which we buy the same level of services
- providing more choice in the services available for people known to social care and also for those who support themselves
- more joined up services with health to further reduce duplication. (See section on Health Integration)
- making sure that carers receive the support they need
- offering a greater variety of accommodation for those who are not able to continue living independently making sure that people who live in residential homes can still be active members of their community supporting people to look after themselves.

- The transformation of Adult Social Care will also contribute towards the savings the council needs to make as a whole.

The first stage of the transformation programme is nearly complete and already we've achieved:

- an increase of 40% of people receiving an enablement service
- an increase of 120% of people receiving a Telecare service (see glossary)
- 2,648 service users have been helped to live more independently following an independence review
- an improvement in the way social care teams work, with more assessments and reviews being undertaken
- a reduction in the number of providers delivering domiciliary care (see glossary). This makes it easier for Adult Social Care to ensure the quality of the service is good.

The next stage of the transformation programme, phase 2, is about to get underway which will continue to work across Adult Services to enhance productivity and it is hoped it will lead to further savings, whilst improving outcomes and the quality of life for the people of Kent. We will seek to further improve the use of a broader suite of enablement based services with a focus on maximising service user independence (Self-care, self-management). Under commissioning we will continue to build upon the foundations facilitated through delivery of phase 1 activity including integrated commissioning.

Phase 3 will continue to focus on maximising the value of integration and the council's relationships with prime service providers, in line with a focus on improved service user outcomes and the realisation of whole system efficiencies.

You can read more detailed information about the wider council transformation and how it plans to deliver better outcomes in the 'Facing the Challenge' documents on our website.

Care Act

The Care Act is a new piece of legislation that was given royal assent on 14th May 2014 and places new duties on local authorities in relation to social care. This new law will replace a number of laws passed by Parliament since 1948 and is only applicable in England. The law came into force from April 2015.

A new national minimum eligibility criteria has been introduced which sets out who and how people qualify for care and what type of support is available. There are new duties to provide support for carers in their own right, if they meet the carer's eligibility criteria.

Other measures include a nationally defined universal deferred payments scheme which is available to people permanently residing in care homes, who own property, as well as independent personal budgets for people who pay for their own care and support.

In summary the main changes are as follows:

New National Minimum Eligibility Criteria: Based on needs caused by a physical, mental impairment or illness that have significant impact on specific outcomes and the well-being of an adult

New Rights for Carers: New duties to provide support to carers in addition to the existing legal duty to carry out an assessment

Universal Deferred Payments: Nationally defined universal deferred payments to be administered by local authorities

Prevention: Legal duties on local authorities to provide information & advocacy to plan and prevent care needs

Statutory Safeguarding Adults Board: Will fulfil specified duties, such as the safeguarding adults reviews where there is concern that safeguarding arrangements could have been more effective



Delegation of Social Services Functions: Power for local authorities to delegate social care functions except safeguarding, decisions on charging, integration and direct payments

Prisoners: New duties on local authorities to meet the care and support needs of prisoners and people in approved premises.

The Care Act is a significant change programme which affects what we do and how we best support people who need social care and their carers.

During April 2014 – March 2015 we

- Modelled demand for carers assessments
- Commissioned additional assessments through our carers assessment and support service
- Provided training to providers
- Updated the Kent Carers information handbook for Care Act compliance
- Developed carers direct payments
- Sent out communications via our carers orgs, Kent.gov.uk and other medians



- Spoke with carers and providers at various forums about the Care Act
- A visit by The Department of Health also focused on the Care Act – we took representatives to meet carers and providers to discuss the changes.

KCC is working to keep everyone informed about the changes. Further information can be found on the KCC website as well as through our partner organisations. www.kent.gov.uk/careact

Additional information from the Department of Health is available at: www.careandsupportregs.dh.gov.uk

The Department of Health has also produced some useful factsheets which are available at: www.gov.uk/government/publications/care-act-2014-part-1-factsheets

New laws in The Care Act mean councils must have an independent advocacy service for people who find it difficult to have a say in their care and services and do not have someone to help them with this.

Independent means the service is not controlled by the council and only thinks about what the people they are helping want.

Independent advocacy is about giving people as much control as possible in their lives. It helps people understand information, say what they want and what they need and get the services they need.

During the last 12 months KCC have prepared for the implementation of independent advocacy by:

- Working with finance to carry out an initial assessment of the implication of the Care Act on provision, using existing activity
- Reviewing service demand

- Holding discussions with other local authorities and advocacy experts to share ideas and plan local implementation
- Holding Care Act consultation meetings with a whole range of existing Advocacy providers – regarding capacity and implications of the Act
- Working with Training and Development to plan the training needs of the workforce
- Raising awareness and promoting the changes
- Developing referral forms and monitoring returns with the providers .



How we spend our money

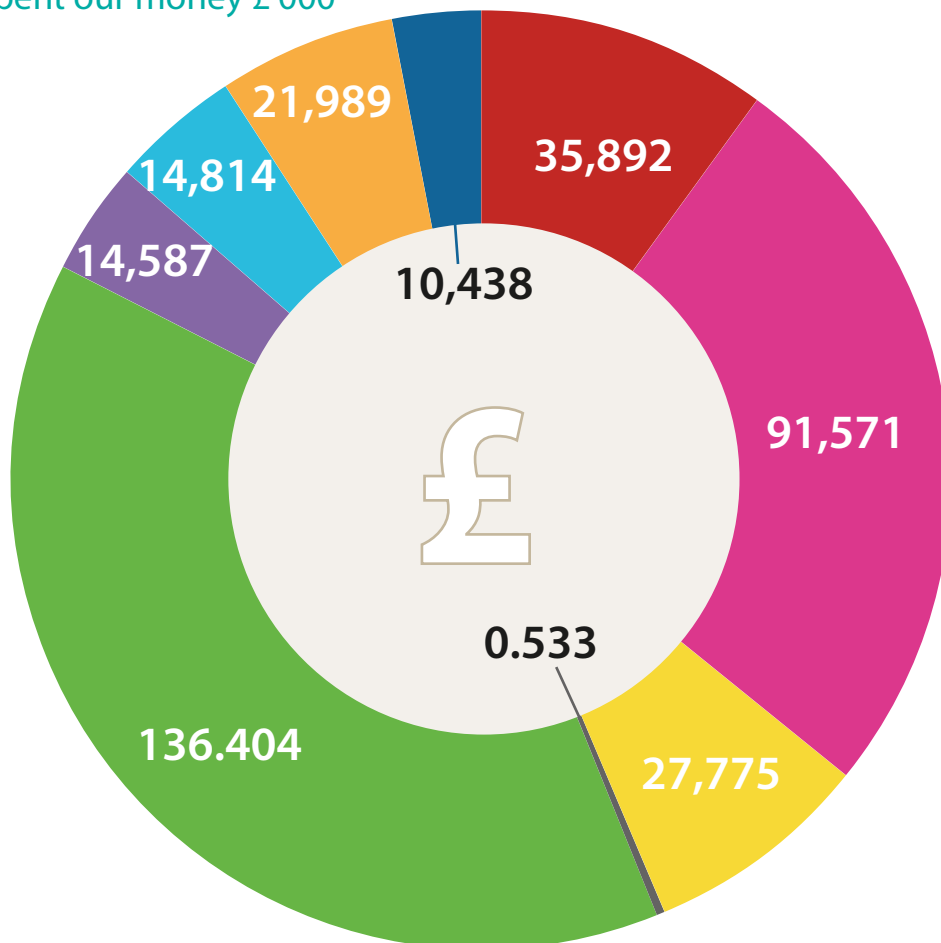
KCC's net expenditure is £1.8 billion per annum and the budget is split into three areas:

- direct services to the public - £1.6 billion
- financing items - £129 million (authority wide costs that are not service specific)
- management, support services and overheads - £101 million.

The Adult Social Care net budget is £ 354 million per annum, below is an illustration of how this is spent across all our client groups.

For more detailed information about Kent County Council's budget and spending please visit the website: www.kent.gov.uk/budget

How we spent our money £'000



- | | |
|---|---|
| Assessment and related services | Mental health issues (18+) |
| Older people (65+) | Other adult services (equipment etc) |
| People with a physical disability (18-64) | Supporting People and Social Fund |
| Sensory impairment (18-64) | Management, commissioning and operational costs |
| Learning disabilities (18+) | |

Service	Net (£'000s) 2014-15	Percentage of Budget
Assessment - Staff costs for carrying out community care assessments, support plans and reviews	42,406	12.0%
Residential care and nursing care including non-permanent care such as respite	164,881	46.6%
Domiciliary Care services provided to individuals in their own homes & those within extra care housing	17,045	8.5%
Direct payments - Money which is passed directly to individuals so they can purchase and manage services to meet their eligible needs	35,290	10.0%
Day care, Community Support Services & Meals	21,306	6.0%
Non-residential client charging – client contributions towards community based services	9,756	-3.7%
Enablement - Intensive short term support which encourages people to be as independent as possible	6,396	1.8%
Advanced Assistive Technology	4,605	1.3%
Voluntary organisations Contributions for social support related services	14,345	4.1%
Support for vulnerable people - Supporting People & Social Fund	21,989	6.2%
S256 Social Care Monies for Health Outcomes	-27,965	-7.9%
Management, commissioning and operational costs	9,756	2.9%
Total adult spend	354,003	

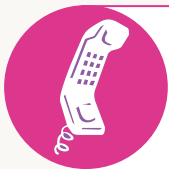
The table shows the expenditure by service. This has been updated in 2014 -15 to reflect the new responsibilities and changes in the way certain services are recorded therefore a direct comparison with 2013-14 is not possible.

A customer journey

Getting the right care and support is important and you need to take time to consider all the options and information available. Many people will manage their support needs themselves, often with help from family and friends. Some people are not able to do this and need help from Kent Adult Social Care.

If you need support from Adult Social Care, we will work with you to make sure you are in control of the process and have the choice over the options available.

To find out if you are eligible for assistance from us, we must assess you. The first assessment identifies your needs and the second assesses your ability to contribute to the cost of your support. We also have a duty of care to ensure all information provided remains confidential.



1. Contact

If you feel you need support please contact the Kent Adult Social Care Team, see page 40. This can be done on your behalf by a relative, GP, neighbour, friend or carer. When you contact us we will start an assessment of your needs based on what you tell us. By providing you with the right information, advice, pieces of equipment, we can sometimes resolve your needs at this stage.



2. Community Care Assessment

If your needs are more complex we may need to visit you to carry out a full assessment. During the visit you will have the opportunity to tell us about your situation, how you currently manage and the support you would like to receive. We will also tell you what services you are eligible for.

The assessment will cover:

Enablement: This is short term intensive homecare services which help you live more independently. Enablement services can be for up to six weeks, are free of charge and can also include the provision of equipment which we arrange for you.

Estimated Personal Budget: This is the amount of money we think you will require to meet the cost of your needs.

If you are not eligible for support from Kent Adult Social Care, we can put you in touch with other organisations that may be able to help you arrange support, that you pay for yourself.



3. Financial Assessment

If you are eligible for assistance from us and you need us to be involved in your ongoing support, you will also need to have a financial assessment.

This is an assessment of your ability to pay for the cost of your support needs and it will clarify what contribution Adult Social Care can make towards these costs. It is also an opportunity to check you are receiving all the benefits and tax credit monies you are entitled to.



4. Support Plan

If you are eligible for assistance from us, we will discuss all the options that are available to you. You will produce a support plan, with our help which, will set out how your needs will be met and the outcomes you would like to see. Your personal budget, the amount of money your care will cost and any contributions Kent Adult Social Care or you make, will also be agreed.



5. Arranging, managing and paying for support

Once your support plan is agreed, you will:

- a. Arrange the support you require, as detailed in your support plan
- b. Receive any contribution we agreed to make towards your support needs so you can use this money to pay for them
- c. Manage your personal budget in the way agreed as part of your support plan

If you are unable to arrange support yourself, or with the help of others, we can do this on your behalf. We will then invoice you each month for any contribution you must pay towards the cost of your support.

New Quality of Services

Update

Monitoring the quality of care and support that is provided is vital in maintaining high standards of services. Over the last year, we have reviewed the way in which we monitor the quality of services, particularly when we have renewed our contracts with providers.

Homecare

Since June 2014, Kent County Council has been working with 23 Home Care Agencies who secured contracts with us to provide care and support to people in their own homes. By working with a smaller number of Home Care Agencies, we have introduced new arrangements which involve a named contact holding regular communication with each of the 23 contracted Home Care Agencies. This has enabled us to develop closer working relationships, a greater understanding of how home care is delivered and work with Home Care Agencies to ensure a better quality of support for people who need it.

These new arrangements also provide a link for Case Managers to share any concerns or compliments on behalf of the person receiving care and support. This allows us to continuously gather and review information received to ensure Home Care Agencies deliver a quality service or if necessary that we endeavour to work with them to improve.

We were keen to learn from what had happened with the move over to new Home Care Agencies; therefore feedback has been collected from a variety of people involved in this process. These views have been vital to ensure that improvements can be made in future.

The feedback gathered identified that contracts with the Home Care Agencies have generally worked well and the majority of people are having their support delivered effectively and



their needs met. However, due to the diverse geographical areas within Kent, we need to readdress how care and support is delivered in the more rural and isolated areas.

We are also working with Care Agencies and our Operational Teams on smarter, more efficient ways of working to ensure a continuity of support and a trusted team of care workers people can rely on; with support delivered by local people in local areas.

We are reviewing current contract performance alongside our home care commissioning strategy. This will ensure the Council's Adult Transformation vision to deliver better outcomes for people who need care and support is achieved and that their needs are always at the heart of the service.

New The Mental Health Crisis Care Concordat

The Mental Health Crisis Care Concordat is a national agreement between services and agencies involved in the care and support of people in crisis. It sets out how organisations will work together better to make sure that people get the help they need when they are having a mental health crisis.

In February 2014, 22 national bodies involved in health, policing, social care, housing, local government and the third sector came together and signed the Crisis Care Concordat. Since then five more bodies have signed the Concordat, making a total of 27 national signatories.

The Concordat focuses on four main areas:

- Access to support before crisis point - making sure people with mental health problems can get help 24 hours a day and that when they ask for help, they are taken seriously.
- Urgent and emergency access to crisis care - making sure that a mental health crisis is treated with the same urgency as a physical health emergency.
- Quality of treatment and care when in crisis - making sure that people are treated with dignity and respect, in a therapeutic environment.
- Recovery and staying well - preventing future crises by making sure people are referred to appropriate services.
- Although the Crisis Care Concordat focuses on the responses to acute mental health crises, it also includes a section on prevention and intervention.

Mental Health Crisis Care Concordat: the joint statement

We commit to work together to improve the system of care and support to people in crisis because of a mental health condition are kept safe and helped to find the support they need - whatever the circumstances in which they first need help – and from whichever service they turn to first.

We will work together, and with local organisations, to prevent crises happening whenever possible through prevention and early intervention. We will make sure we meet the needs of vulnerable people in urgent situations. We will strive to make sure that all relevant public services support someone who appears to have a mental health problem to move towards Recovery.



New Older People and Physical Disability (OPPD) Service

The launch of the new OPPD service took place in October 2014 and is designed to deliver better care. A new way of working has been introduced in assessment and related services resulting in reduced waiting times, faster referrals and a more efficient service. The changes have led to:

- 70% reduction in waiting times
- 20% reduction in time spent on paperwork, freeing up staff for frontline work
- 60% reduction in overdue reviews
- A more consistent service
- A saving of £3.69m this year.

The OPPD service will continue to evolve and develop in response to change within KCC and wider on-going changes in the health and social care economy. During the next few months the service will gradually increase access hours to 8am to 8pm, seven days a week, including Bank Holidays, with Out of Hours cover continuing outside of these hours. The changes are essential preparation, as the county council works with partners in the NHS to integrate health and social care under the Integration Pioneer programme (see glossary).

Adult Social Care working with Health

Kent County Council is working with many other organisations such as, Kent Community Health NHS Trust, Kent and Medway Partnership Trust and CCGs, to work with people, carers and the voluntary sector to provide joint services and funding to help people manage their own health at home and in the community.

We want you to have a good experience of our joint services and to make sure that you only have to tell your story once.

You can read more in the 'Joint Health and Wellbeing Strategy' and 'Delivering Better Healthcare' on our website.

Integration with Health – providing services with health

Kent is one of fourteen national Integration Pioneers (see glossary). This means that the Department of Health (DOH - see glossary) has chosen KCC to provide joint services with health sooner than other local authorities. A greater number of people are living with multiple long term conditions which, is a challenge locally and nationally to the public's health. It also means that we can work together to provide services in a way that improves outcomes, experience of care and makes the best use of resources by minimising duplication.

The aim is to make health and social care services work together to provide better support at home and earlier treatment in the community to prevent people needing emergency care in hospital or in a care home.

What does this mean for you?

- Better access to Health and Social Care staff working together in GP Practices
- More effective joint services which will lead to greater independence

- Better care at home and fewer admissions to hospital and residential care, including rapid community response particularly for people with dementia
- To live comfortably at home and die at home, if that is your wish
- People will know about the information that is held about them and agree to how it is shared with other services. This will enable Health and Social Care services to ensure that people have the right support at the right time and do not have to repeat their story.

The Kent Health and Wellbeing Board (see glossary) oversee the integration of health and social care. Kent's local Health and Wellbeing Boards are responsible for ensuring progress of delivery within CCG (see glossary) areas.



We wanted to develop joint social care and health teams and neighbourhood care teams further – Significant benefits are already being identified within the programme however they will look and feel slightly different in each area. Some examples of success to date include:

The Integrated Discharge Team in North Kent

In October 2013, Kent Community Health NHS Trust, Darent Valley Hospital (DVH), Kent County Council, IC24 (out-of-hours GP service) and Kent and Medway NHS and Social Care Partnership Trust were commissioned by NHS Dartford, Gravesham and Swanley Clinical Commissioning Group to provide a multi-disciplinary Integrated Discharge Team (IDT).

The IDT is a team made up of nurses, doctors, therapists, pharmacists, case managers and mental health specialists working across acute and community settings.

Their aim is to reduce admissions, ensure patients are proactively managed to reduce the length of their stay in hospital and to enable patients that are medically stable to leave in a timely manner. The goal is to ensure patients receive the most appropriate treatment, delivered by the most relevant health care worker in the most appropriate setting; all of the time. There have already been some significant results from this integrated approach:

- Decreasing trend in emergency admissions
- Reduction in the number of patients having to wait more than four hours in the Emergency Department since January 2014.
- Since November, timely access to specialist mental health assessments out of hours has improved
- Since January on average, more than 50 per cent of patients are going home with enablement including equipment. No one coming through the IDT to date has ended up in permanent care.

A patient had had multiple admissions due to chest pain, with 15 attendances at the ED in the space of one month. The patient was seen by an IDT nurse in the ED, and was assessed and referred to an IDT community cardiac specialist nurse who met the patient in hospital and explained the support that would be provided. This included access to specialist nurses, coping strategies, a medicine management plan and, most important of all, support to self-manage. The specialist nurses play a key role in educating and enabling patients about their condition. With this particular patient, that is what has made the difference to them remaining well in the community. The patient was maintained in the community without presenting back to the ED.

The idea going forward is to reduce the number of patients who present to the ED in the first place. A register detailing all patients known to have long term conditions will be held by the IDT. They will all have anticipatory care plans which will facilitate an integrated approach to the management of each patient.

There have been many similar examples since the implementation of the IDT. Of 59 referrals received by the specialist nurses in March 2014, 20 were referred on to community matrons or were already known to them. All other patients were contacted by the specialist nurses and received varying levels in intervention/input. Three of these people are now using telehealth to support them and their clinician.

West Kent Integrated Rapid Response Service

This scheme is enabling patients with more complex needs to remain at home through enhanced decision making via a multi-disciplinary team consisting of medics, paramedics and clinicians. The key to the success of the Enhanced Rapid Response Service (ERRS) is the joint working between health, social care and ambulance services, and by providing a fast response to patients.

West Kent's enhanced rapid response service was set up in November 2013 and has seen well over 5000 patients since it launched. The majority of interventions are in relation to admission avoidance and supported discharge. Case reviews are demonstrating that the scheme enables more complex patients to remain at home due to enhanced decision making via a multi-disciplinary team of medics, paramedics and clinicians. The service particularly targets people aged over 75 and includes clinical treatment, rehabilitation and support, linking these with reablement programmes.

A Care Plan Management system project has started in West Kent, led by the CCG on behalf of the Kent Integration Pioneer programme. The aim of the project is to provide person-centred digitised care plans that are shared across all care professionals involved in a person's care.

Ageless Thanet... Making Thanet a great place to grow old

Social Enterprise Kent has secured £3m of Big Lottery to lead the 'Ageless Thanet' project (part of the national Ageing Better campaign).

Working closely with the CCG, social care, local government and local voluntary and private sector organisations, the project draws on the strengths, skills and expertise within the partnership to deliver high quality services for older people that will improve their quality of life. Our aim is to make Thanet a great place to grow old and by delivering a wide range of cultural, physical and artistic activities in the heart of neighbourhoods, we are engaging with those who are most socially isolated and in need of help and support.

For more information please see our website. www.sekgroup.org.uk/ageless-thanet



Porchlight Health Inclusion Project

The Porchlight Health project covers Margate Central and Cliftonville West, the two most deprived wards in Kent. The project has delivered frontline services to individuals with complex needs which are not conventionally met by statutory services and has improved local delivery while reducing the overall cost of support. The project worked with the most vulnerable adults to assist them in navigating local services and move between transition points in their lives which, resulted in better outcomes for the individuals, particularly in terms of their health and wellbeing.

Extending GP services

We're taking part in a national initiative designed to improve access to general practice and develop new ways of providing GP services. Practices taking part in the trial are piloting a range of options to make services more accessible to patients including:

- extended GP services at local hubs from 8am to 8pm, seven days a week
- an urgent home visit service
- enhanced community care with short-term residential facilities in the community to avoid hospital admissions
- a new rapid assessment service for patients with urgent mental health needs, delivered by a primary care mental health specialist, either at a patient's home or at their GP surgery.

A new extended access GP service was launched last October, at the Royal Victoria Hospital in Folkestone. Highly trained minor

injuries nurses support the GP service and GPs now have full access to patients' records – something that patients have voiced overwhelming support for.

Folkestone Walk-in Centre became a Minor Injury Unit, focusing on the treatment of injuries such as suspected fractures of arms or lower legs, minor burns, bites and stings, for everyone aged 12 months and above. Deal Minor Injuries Unit extended its opening hours and will continue to treat minor illnesses.

South Kent Coast is one of nine pilot sites nationally to test Personal Health Budgets for people other than those needing continuing healthcare. Integrated Personal Budgets have been offered to patients to enable them to take control of their health and social care support and buy services that meet their needs.



Independence

We know that most people want to stay in their own homes for as long as possible and remain independent but we also know that people can become isolated. We have therefore continued to develop and increase accessibility to community facilities and to a range of services dedicated to increasing independence and supported living. These services include enablement (see glossary), intensive and targeted support to ensure people maintain or regain independence, assistive technology (see glossary), adaptations in the home and a wide range of community support services to improve quality of life. This year in particular we have focused on:

Shared Lives

We are always looking at different ways we can provide care and the Shared Lives scheme is just one example of how we're transforming the lives of Kent residents.

Shared Lives offers people over the age of 18, support placements within a family home for long term, transition, short breaks and day support. The Shared Lives service has been in existence for 25 years this year. It was initially set up for people with a learning disability but the service is now suitable for people with learning and physical disabilities, mental health issues, people on the autistic spectrum, older people and people living with dementia.

Shared Lives is not just about care but about opening the door to choice, satisfying experiences and a sense of belonging. The service is regulated by the Care Quality Commission (CQC) and comes out on top for all key outcomes. Kent is currently rated as a "GOOD" service. There are currently 153 adults in shared lives placements and 127 hosts (end of March 2015.) (190 adults placed and 133 hosts as of August 2015) For more information and if you have any questions about Shared Lives, please call 03000 412 400 or email the team: sharedlives@kent.gov.uk.



Case Study

Douglas's Shared Lives story

Douglas was 52 and living with his elderly father. He had put on weight, due to lack of exercise and rarely left the house. His family initially decided that he would be moved to a residential home. However someone mentioned that he may be suitable for Shared Lives and he was referred across. His brother initially was not happy with the idea that he would move in with another family but met the host family and decided to give it a go. Douglas moved in with Rod and Lee and has been living with them for 2 years, along with another Shared Lives user called Noel. During his time he:

- has lost 5 stone
- has developed a love of walking the dog
- is often out of the house and uses the bus system on his own.

Douglas is now involved in trampolining, cricket, he works at the local stables and has been on holiday for the first time in 20 years. With Rod and Lee's consistent and continuous support he has transformed into a more independent and happier person. Douglas's brother now thinks that Shared Lives is the best thing that could ever possibly have happened to him. By sharing their life, Rod and Lee have radically change Douglas's life for the better.





Promoting Independence Reviews (PIRs)

Promoting independence through review (PIR) was implemented within KCC because lots of people improve from the time they first come into the service, often in a time of crisis and a comprehensive review of their needs means that we are able to identify if they can be less dependent on the homecare they are receiving and 'get their life back'.

The revised approach to reviews has now been rolled out across the County with over 6500 reviews being carried out leading to substantial savings for the Council. These savings can then be used to reinvest in other forms of social care provision.

Promoting independence reviews provide a thorough review of a person's needs to ensure they are receiving the right level of support and to work with them to maximise their level of independence so that they can continue to live in their own homes for as long as possible. Here is one example of how a promoting independence review helped someone 'get their life back'.

Case Study

Mrs S is a 53 year old lady who at the start of the review process received a Direct Payment for her care. Mrs S had well controlled schizophrenia, ME and dizziness. She tended to stay in bed all day because she had chronic fatigue and fear of the TV with food brought to her by Care Workers.

The review identified that Mrs S had previously been mobile and that the level of fatigue was enhanced by a lack of confidence. The KCC Enablement service was provided for a period of three weeks to work with Mrs S on these issues. At the end of the enablement period, Mrs S was able to manage her own personal care and prepare and cook her own meals. The reviewer also recommended other services to help reduce Mrs S' social isolation and make her feel part of the community again.

Approved Mental Health Professional (AMHP) service



In Mental Health (MH) we are working with our partners, Kent and Medway Partnership Trust and contributing to a Planned Care Programme for the transformation of adult community mental health services. We are currently carrying out a detailed workforce mapping exercise to understand the impact of recent and planned service developments on core business. This has included the recent establishment of a designated (AMHP) service operating 24/7, 365 days of the year.

Kent Pathways Service

We are aiming to redesign the Pathways to Independence project that was piloted in 2013. The aim of the service will be to support individuals with a learning disability to achieve an **increased level of independence**. Short-term training will equip individuals with **new skills and improve outcomes** (see success stories below). This will lead to a reduction in their weekly support package. The project will focus on three key areas:

- Identifying service users who are eligible, new and existing.
- Identifying how our existing capacity will be released to support the service
- Set up an improvement cycle to ensure the best possible outcomes for our service users, supported by operational guidance.



Pathways to Independence: Success Stories

"S feels that she controls the support by the structured weekly programme and an end date as her goal, the numbered weekly progression has spurred her on and her confidence has grown with each week." – Support worker and Pathways user

"Wow, what a different lady she is from last year. She travels to and from all work placements and loves it." – Care manager

"The support I have had has been good. I would recommend it. It has helped me out. Thanks." – Pathways user

The Riverside Active Lives Network

The Riverside Active Lives Network is a Gravesend based user-led charity for adults with physical disabilities, promoting independence through their activity focused day centre. What makes this service special is that until January 2014, like many other day services up and down the country, the service had been funded through a traditional local authority block contract.

Following an extensive review of the contract and after several engagement meetings with those using the service, a decision was made to end the block contract and transition each individual onto a direct payment through the Kent Card scheme.

Kent County Council was the first Authority in England to use a prepaid card for Direct Payments and is seen as the leading Authority in this area both locally and nationally. The current Kent card has been an innovative way of delivering direct payments in social care since 2007. The Kent Card has proved to be an effective way to empower Kent citizens to take control over the services they access to support their needs and the user-led Riverside Active Lives Network has proven to be an outstanding example of this.

Since April 2014, with the continued support of KCC's Community Support Commissioning Unit, members of the Riverside Active Lives Network have used their direct payments to develop an outcome focused user-led service. From forming a board of trustees made up of both service users and carers, to becoming a registered charity, the service has gone from strength to strength.



Paul Kitchener, who has cerebral palsy, has been a long standing member of the day service since 1999. Paul has always had a keen interest in computers and

taught himself how to use a PC with one hand before moving on to a Maltron Expanded Keyboard. Between 1994 and 1998 Paul went to college attaining BTEC and City & Guilds certificates in IT.

When asked whether he would build the website for the Riverside Active Lives Network, Paul was quick to say yes and in his own words he now "feels great. I get to use my skills for a service that I love attending."

The website can be reached at:
www.riversideactivelivesnetwork.co.uk



In January 2015 The Riverside Active Lives Network secured funding for their own minibus and members were delighted to have been selected as one of the services visited during a visit by the Turkish Ministry earlier this month.

(Delegates from the Turkish Ministry meeting members of the Riverside Active Lives Network during their visit in January 2015.)

For more information on the Kent Card please go to www.kent.gov.uk/careandsupport

Integrated Community Equipment Service (ICES)

ICES play a crucial role in helping us to support the most vulnerable people in Kent to remain in their own home. Through the provision of equipment, people are enabled to carry out everyday activities independently or are provided with equipment which supports them to be cared for at home.



Feedback from service users, care managers, case managers, social workers, Occupational Therapists, NHS clinicians and many others told us that we can deliver a service which better meets people's needs and is more cost-effective and simpler for staff to use.

With demand for equipment in Kent rising by 16% in the last year and predicted to continue increasing, we are commissioning a service which will make the best use of our financial resources whilst being more responsive to service users' needs.

A Section 75 agreement has been agreed for community equipment services, so KCC and the seven Kent CCGs are now jointly commissioning the new fully ICES.

This new service will reduce care home/foster care and hospital admissions and assist with timely discharge from hospital. It also supports the changes being implemented by the Care Act.

In addition to the new ICES, **there will be a new contract for a Digital Care and Telecare service** that will bring together telecare installation and monitoring, service user support and staff training under the responsibility of a single provider.

What are the benefits to customers?

- Service user choice through a customer-initiated delivery model.
- Seven day a week deliveries, with timed delivery slots.
- Support for rural areas and community based events using a mobile demonstration vehicle.
- Improves the co-ordination of care as different health and social care professionals will be able to have a single, integrated view of the person's equipment record.
- One customer service team for equipment and one customer service team for telecare.
- Support offered to self-funders, including access to information and retail facilities.

Other benefits include:

- Mobile accessible, web based catalogues and ordering systems with ability to live-track orders.
- Ability to see what equipment somebody already has at home or school.
- Equipment services will provide seven day a week deliveries to support hospital admission prevention or to facilitate timely hospital discharge.
- New ICT systems to manage demand and budgets.
- Secures better value for money through effective recycling of equipment and access to non-stock recycled equipment on other contracts held by the provider.

The two new services will be launched from 30 November 2015 and both contracts will be for a period of five years, with the option to extend for a further two years.



Quality of life

Our aim is to enhance quality of life by personalising the way individuals are able to access the support they need. It is also important that we measure how well we are meeting people's needs, monitoring outcomes and striving to continually improve this, despite the challenges we face.



Good Day Programme

The Good Day Programme has been running since 2008 and was established in response to the many people in Kent, who wanted to see a change in the way people with a learning disability accessed day services across the county.

The programme develops community-based day opportunities, for people with learning disabilities, commissioned in a way that maximises the use of the same facilities as others in the community. It supports a community approach and supports community



partners to improve access, including having more 'Changing Places' so anyone who needs assistance with their personal care can still access their community.

Every person centred review plan is organised around what the person wants to do during their days and will include leisure, social, educational, employment and vocational activities.

Our aim is to help people:

- Choose what they want to do during the day, evenings and weekends.
- Have support when and where they need it.
- Feel equal citizens of their local community.
- Have opportunities to lead a full and meaningful life.
- Each district is shaping their community-based services in different ways, below is an overview of each area.

Ashford

The Ashford Community Day Service is based in two community hub locations giving full access to the local community:

- The Stour Centre (Ashford Leisure Trust) which offers a changing place and access to sports facilities.
- Ashford Gateway which offers a changing place, sensory facility and activity rooms.

Canterbury

There is a Community Day Service at Northgate Ward Community Centre but we also have a base at Thannington Resource Centre, both of which have adult changing places. Local facilities are used as much as possible in order to build links with the community and which can be accessed by public transport although this can be difficult on occasions.

Dartford

Dartford Community Day Service is based at 2 Essex Road and offers activity space and an accessible kitchen. The service also utilises space at The Bridge in Dartford which has sensory facilities, a changing place and fully accessible kitchen, and The Yew Tree building, which has a changing place and sensory facilities.

Gravesham

Building work to renovate the Gravesend Social Education Centre has now been completed and includes new sensory facilities, a changing place, fully accessible kitchen and activity space. Throughout the renovation works, the service continued to offer variety of activities within the community and support people to access these. The service has built firm links with the community and utilises space at Cascades, Woodville Halls, Milton Church and Gravesham Place. They also participate in and run social events for the whole community.



Maidstone and Malling

The Maidstone and Malling Community Day Services are based in four community hubs:

- **Meadowview**, Maidstone which offers a day service, a garden and is the main office
- **Trinity Foyer**, Maidstone town centre which offers a day service with changing places facility
- **YMCA**, Maidstone, which offers a day service, changing places facility and a disability sports programme, including: trampolining, archery, football, curling, Zumba and boccia as well as a fully inclusive gym.
- **West Malling Cricket Pavilion**, offers a day service and an allotment.

There is easy access to a number of the local community facilities and activities which, include the leisure centre for swimming, cinema, sports activities at the YMCA, local coffee mornings at the Salvation Army, tending to the allotment and looking after planters at a local country park, along with golf, fishing, living skills and preparing for employment.

Sevenoaks

The Community Day Service is based in the heart of Sevenoaks town centre, uses part of the local Leisure Centre as a base and offers a changing places facility. Access to the immediate community is easy by foot and people who live further afield have access to the nearby bus and train station.

Shepway

The Shepway Community Day Service is based over four community hub locations:

The Bridge Community Resource Centre in Hythe, which offers sensory facilities and a changing place.

Folkestone Sports Centre, which offers a large sensory room, changing place and access to all sports facilities.

Romney Marsh Academy (Phase 2 named by service users) in New Romney, offers access to the local community.

Cheriton Community Network on Cheriton High Street, offers access to the local community in addition to music and singing sessions.

Swanley

The Swanley Day Service is currently based at the junction in St Mary's Road, however following a consultation, works are underway to create a new base within the Gateway. The service aims to transition to its new base in the new Swanley Gateway building during Spring/Summer 2015. Activities organised include swimming, computer skills, shopping, work



training, going to the cinema, going to college or just spending time with friends. It will also include training people how to get out and about safely using public transport, if they wish.

Tonbridge

This Community Day Service offers access to local facilities such as attending the local church, swimming and the youth hub. All facilities are accessed via public transport although this can be difficult on occasions.

Tunbridge Wells

Evolve Day Services based in Edenbridge, is very close to the local high street and local amenities. The service is based in two locations, three days are spent based at the Eden Centre and the other two days are based at the local leisure centre. The Eden Centre offers activities such as cooking, arts and crafts, and a sensory room. Encouragement is given to access public transport but the service has its own vehicle which, caters for those with specific needs.



Gravesend Community Day Services centre

The centre is undergoing a complete revamp to update all the facilities; work commenced in July 2014 and was completed by April 2015. During the first phase four rooms were successfully revamped. There's now a new sensory room, modern kitchen with adjustable sink and cooker, new care lounge, where several daily activities occur, and a new changing places hygiene room.

The feedback from service users has been fantastic. "The Water bed feels really good" Brett. "Thumbs up from Amrit". Comments regarding the New Kitchen include; "It's big and bright and new, I like cooking in there" Julie, "It's good, and has changed like all the new things in there to use" Louise.

The revamp has been a remarkable challenge for everyone involved and the staff have worked exceptionally hard to make sure all services continue to be provided despite the dust and rubble throughout each phase. Thank you for everyone's hard work.

Westview Enablement

West View is an integrated Health and Social Care Centre that aims to provide a range of services for older people. The accommodation provides Intermediate Care, residential and respite care. Intermediate Care provided at West View enables people recovering from illness to receive the support and rehabilitation they need to help them return home rather than go into permanent care. Individuals can also be admitted to West View as an alternative to going into hospital should they find themselves in crisis and facilitate discharges from acute hospital beds. This service is supported by the Intermediate Care Team comprising of Occupational Therapy, Physiotherapy, speech and language therapists, stroke specialists, dieticians, neurology services and case management. Recent new ways of working for staff at West View have included registered general nurses taking on the role of arranging enablement directly, in order to speed up discharge for service users with less complex needs, and thereby freeing up case management time to focus on complex case work.

One example is that of an elderly lady who was referred by the Intermediate Care Team having been visited at home. She was suffering with severe back pain due to fractured bones in her spine as a result of Osteoporosis. Her stay at West View lasted for a period of 4 weeks, where she was supported by Physiotherapists, Occupational Therapists, a local GP, and case management. This team worked together with the West View nursing staff team to plan her goals and arrange her discharge home. Equipment was provided and fitted at her home prior to discharge and enablement was also arranged. Upon being discharged the lady was pain free, more confident with her mobility and the Intermediate Care Team has continued to support her at home.

This success story is one of many out of 290 admissions during 2014 to the West View Integrated Care Centre, intermediate care units.

Public Health

It is not just Adult Social Care helping you to maintain your independence, Public Health are also working on a number of prevention programmes focusing on Dementia, postural stability and flu.

Postural stability class is an exercise programme funded by Kent County Council Public Health to prevent falls in older people. Evidence suggests that a course of Postural Stability classes are effective in improving balance, confidence, and in strengthening muscles, therefore reduce the rate of falls in vulnerable groups by up to 50%. Falls prevention is a key priority for Kent Public Health, particularly because we have an aging population and our aim is to support them to live independent and fulfilling lives.

For more information or if you have anyone who you feel will benefit from these classes please contact Access to Resources (A2R) directly on fallsprevention@kent.gov.uk or telephone 03000 417708.

Compliments, comments and complaints

Feedback from you is enormously important. We want to hear about your experiences of our services. Complaints and compliments can help us improve the services we provide to all customers. We investigate all the complaints we receive and respond as quickly as possible.

During the last 12 months, the complaints and enquiries received in Adult Social Care were analysed to determine if there were any organisational lessons or insights we could obtain from the feedback.

In 2014-15 we received:

- 538 complaints
- 407 enquiries
- 760 compliments.

Of the complaints:

- 170 were not upheld
- 133 partially upheld
- 206 upheld
- 17 withdrawn
- 12 other.

The main reason for complaints were:

- Communication Issues
- Delays
- Charging disputes
- Quality of Care

The Key themes and issues from complaints received were anonymised and discussed at the Quality and Practice Groups. Topics and the outcomes of these included:

- The production of a booklet entitled "Your Care Bill Explained". This was produced as a consequence of a number of complaints and enquiries received from the public about the difficulty in understanding the information contained in the invoices people received about their charges.
- There was also a reminder of the need to provide people with information about charging when a residential care placement



is being considered. This includes a letter for the service user or their representative to sign to say they have received the information about the possible charges. Several people said they were unaware of the charges or that some aspects of the charging were unclear (such as third party top up for care costs).

- It was evident from some complaints that relatives and family members sometimes felt they were not communicated with regarding decisions or changes in circumstances for an individual. (Although the client's right to confidentiality also has to be recognised).
- There were a number of complaints relating to safeguarding where families did not feel they were kept sufficiently informed. The **Making Safeguarding Personal** initiative has helped to address this and to ensure the service user remains central to the Safeguarding process.

- One complaint highlighted the need to ensure that all assessed eligible care needs should be taken into account when reviewing a person's needs so that the care package is not reduced and needs are not left unmet.
- Any delays in the provision of support should be addressed where a need has been identified and the Care and Support Plan is agreed. This includes where a Direct Payment has been agreed but there is a delay in the support being arranged. If there is going to be a delay then the service user should be kept informed.
- Complaints provided a reminder that good record keeping should be maintained, particularly where decisions are made or a significant change takes place for the service user.

You can make a complaint about our services whether you use them or not. You can also complain if you have been affected by our actions or decisions. You can either complain on your own behalf or with the help of someone else such as a relative, carer, friend or advocate. We may need to seek consent from you to ensure you agree to the complaint being raised by someone else on your behalf. A member of our complaints team can assist if you need help to make a complaint or require an advocate.

We've written a short guide to making a complaint, comment or compliment which can be found on our website.

You can also compliment us, here are a few examples of complements we have received.

- Paula has been an absolute godsend to us all. Her support has been completely and utterly valuable. Nothing is too much trouble and she always goes above the call of her duty. I would be grateful if you could pass on our thanks for everything she has done for us and we hope she will continue being a source of support for the future. Mrs D - Folkestone

- Some weeks ago my wife and I had a visit from an Occupational Therapist within your organisation. My wife has been disabled for over twenty years and struggles for any mobility, the result of Rheumatoid Arthritis, two bouts of Viral Meningitis and latterly, a stroke. The staff member was punctual, educational and overall, professional in her approach to us and certainly provided my wife with some hope that some things could be done which could help. A very short time after her departure we had a knock at the door (following a telephone call arranging an appointment) and a very pleasant workman briskly installed some handles outside the front and rear doors and a further gradual step to assist exit and entry. I have no hesitation in fully commending the Occupational Therapist, and your department in this matter. Mr M - Maidstone

- I want to thank you for all you did to try and give my Dad some optimism of regaining a degree of mobility at a time when things really were looking bleak for him. We are all very grateful for the time and effort you put in to help him. Mrs S - Headcorn
- I visited many care and respite centres before placing my wife with you and want you to know that none of them came close to the standards of care, supervision, cleanliness and all round professionalism maintained. Mr E - Ramsgate
- I'm sure you are up to your ears in work but I just wanted to say a sincere thank you for all you did to help with my mother following her stay in the local hospital. She is going from strength to strength and it's good to hear her laughing again. I know it's fashionable to knock Social Services but this without a doubt is a success story. Mr P - Canterbury

Safeguarding

Safeguarding (see glossary) is about protecting children, young people and vulnerable adults from abuse or neglect. Abuse is a breach of a person's rights and may be a single act or happen repeatedly over a period of time. Abuse may be deliberate but may also happen as a result of poor care practices or ignorance. It can happen anywhere.

To make sure that everyone is treated with the dignity, care and respect they deserve, safeguarding is a top priority.

Making Safeguarding Personal

'Making Safeguarding Personal' has been successfully integrated into adult safeguarding, ensuring vulnerable adults are at the centre of our practice. The launch events took place in November 2014 and are now available to view online on the Kent.gov website.

A multi-agency package of workshops for safeguarding leads across Kent has been developed and was delivered in the Summer 2015.

'The Care Act 2014' guidance was published in October 2014 by the Department of Health and came into effect as of 1 April 2015.

Extensive work has been undertaken by KCC and multi-agency partners, many of them being led by the Safeguarding Adults Board (SAB), to ensure that we were Care Act compliant, for example:

- The Policy, Protocols and Guidance document has been revised in line with the Care Act
- Integration of Making Safeguarding Personal, which was implemented in January 2015
- Ongoing work to revise processes and forms used
- Making information accessible to all
- Implementing Quality in Care

- Transforming Care – This is the second phase of the Winterbourne Programme (see glossary) and we continue to integrate between Health and Social Care to prevent inappropriate hospital admissions for people with learning disabilities experiencing mental health issues or episodes of challenging behaviour that could be managed in the community.

A Safeguarding Adults and Mental Capacity Act Development Framework is being developed to support practitioners at all levels. This will help increase knowledge, skills and understanding of their roles and responsibilities within Adult Safeguarding, Mental Capacity Act and the Deprivation of Liberty Safeguards.

Adult Social Care and Community Wardens are ensuring that victims are supported, furthermore we have in place a range of preventative strategies to try and stop people becoming victims in the first place. Community wardens visited over 1,000 scam victims as part of the 'Stop the Scammers' campaign, in order to educate and support the scam victim.

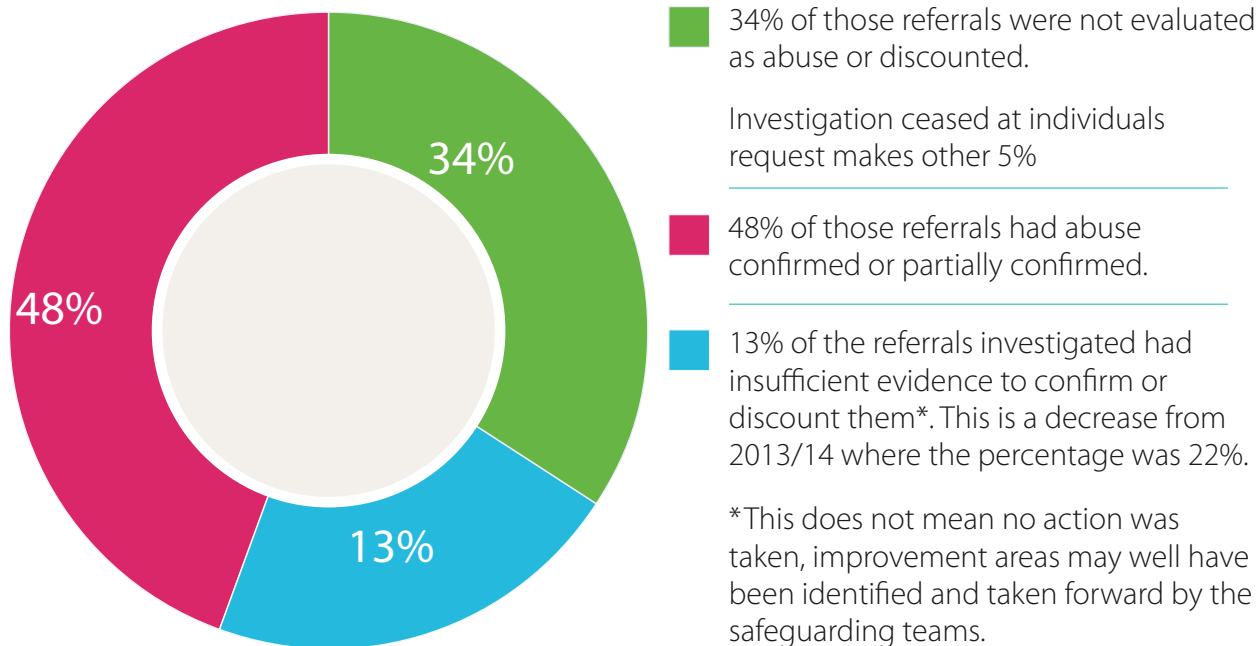
Our safeguarding commitments to you:

1. We will ask you at the beginning what you want to happen.
2. We will listen to you.
3. We will be polite and respectful
4. Your privacy will be respected.
5. We will tell you what we are doing and why.
6. We will make enquiries carefully and sensitively
7. We will tell you what our findings are and provide you with the support you require.
8. We will ask for your views again at the end to see if we have met these standards.

Facts and figures

3273 safeguarding referrals were received during 2014/15 in comparison to 2013/14 when there were 3,176.

In addition to this another 3,382 safeguarding contacts were received but did not meet the criteria to be referred for investigation.



What should you do if you suspect or have witnessed a vulnerable adult being abused?

You should contact Adult Social Care and ask to speak to the duty officer on 03000 41 61 61 for Kent and 01634 33 44 66 for Medway. We advise against approaching the person directly.

If you wish to discuss your concerns outside normal office hours you can contact the Out of Hours Team on 03000 41 91 91 for Kent and 08457 62 67 77 for Medway.

If you think that someone may be at immediate risk of harm you should contact the police by calling 999.

For more information visit:
www.kent.gov.uk/adultprotection

An 'easy read' safeguarding guide for vulnerable adults with learning disabilities is available. The guide tells you how to get help from someone who is trusted. The guide can be found at local libraries and council contact points, it is written in plain English and uses simple colour pictures to describe the different types of abuse and forms of hate crime.

Sensory and Autism Services

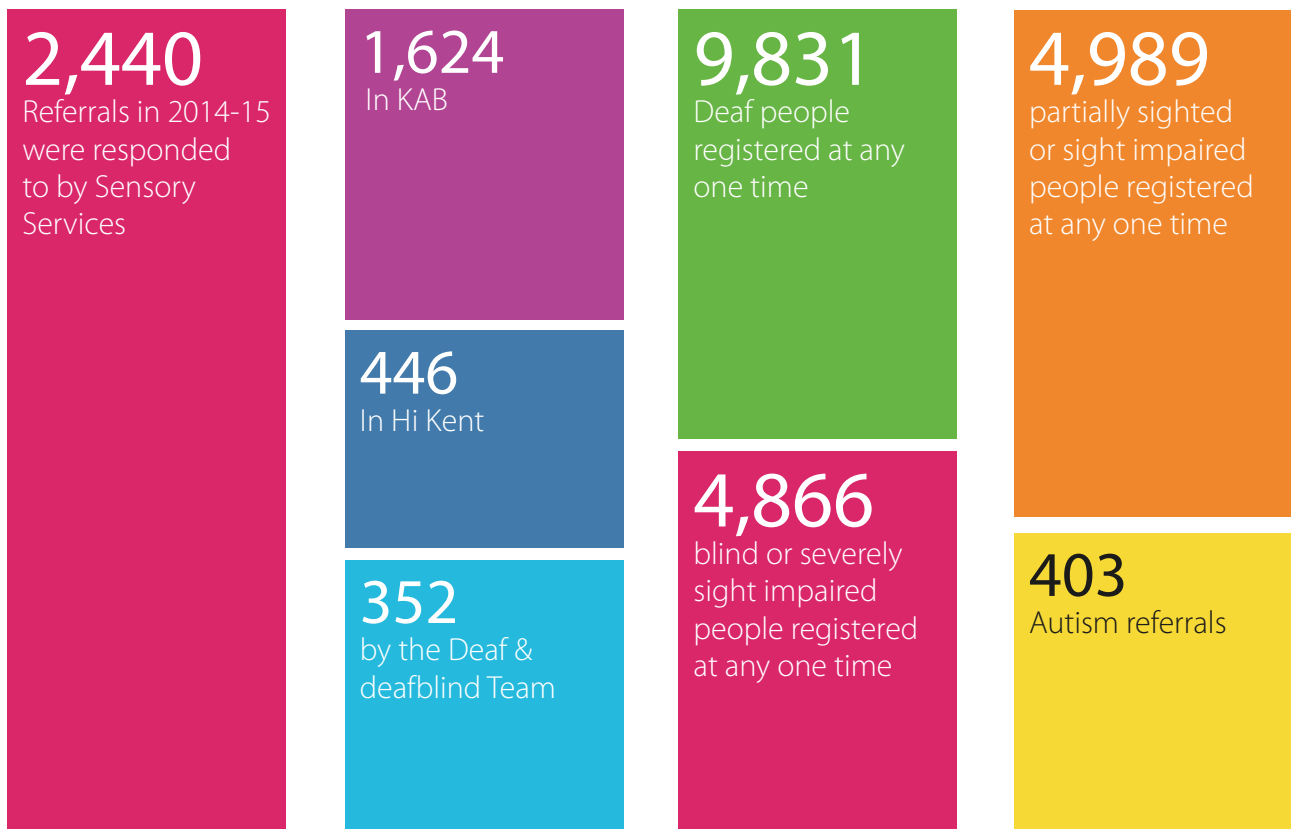
Kent Adult Social Care has its own specialist unit for sensory impaired people (d/Deaf, sight impaired, deafblind) and individuals with an autistic spectrum condition. The unit comprises both in-house teams and voluntary organisations: Hi Kent (see Glossary) the Royal Association for Deaf people (RAD - see Glossary), Kent Association for the Blind (KAB - see Glossary) and Advocacy for All (see Glossary).

Specialist teams for d/Deaf and deafblind people have been merged (April 2015) to provide one countywide Sensory Services team, based alongside a countywide Autism team in Ashford. These specialist teams provide a number of services including: information and advice, assessments, short term enabling help, personal budgets and equipment.

Hi Kent provides equipment assessment and provision for older people and a hearing aid maintenance service and has resource centres in Maidstone and Canterbury. Kent Association for the Blind (KAB) provides: assessments, rehabilitation training (mobility, daily living and communication skills training), registration as sight impaired and has resource centres in Maidstone and Canterbury. KAB also provides a Guide Communicator service – a specialist one to one support service for deafblind people. The Royal Association for Deaf People (RAD) provides interpreting services for d/Deaf and deafblind people. The Unit manages this contract on behalf of a number of public agencies in Kent.

Advocacy for All provides 11 peer support groups for people with an autistic spectrum condition across Kent.

Headline figures





In the Local Account for 2013/14 we said we would:

Sensory Strategy

Complete the work looking at the needs of sensory impaired people, a Sensory Strategy for Kent and a plan to improve services for people with learning disabilities who are d/Deaf, sight impaired or deafblind.

We completed a Sensory Joint Needs Assessment which considers the numbers and needs of sensory impaired people in Kent to help us with the future planning of services. We finalised the plan for people with learning disabilities and sensory impairments and the Sensory Strategy.

Sensory and Autism Services Transformation

We also said we would commence a transformation programme for the Sensory and Autism Services Unit to improve the efficiency and effectiveness of services and deliver better outcomes for service users.

We established a Sensory and Autism Redesign project and carried out the first two phases of the project. We relocated the teams to one central location in Ashford, established a new Sensory Services team, a Business Support team and a new referral and duty service for the unit.

Eye Clinic Liaison Officer project

We further developed the Eye Clinic Liaison Officer (ECLO) service.

ECLOs are based in Eye Clinics in hospitals and provide information and advice, emotional support, initial assessments and signposting to sight impaired people. This service is provided by KAB and has received some very positive feedback:

“The service is a great thing – and excuse the pun but it has been such an eye opener for me.”

“Tell the lady at the hospital she was brilliant and I think it’s really important that people have someone to talk to when they come out of the doctors. Especially if it is their first time at the hospital – it is shocking to be told you are blind.”

We continue to provide support to maintain this service and work with the Local Eye Health Network to raise awareness and promote the service.

Autistic Spectrum Conditions (ASC) Strategy and Neurodevelopmental Pathway

We continue to develop an Autistic Spectrum Conditions (ASC) Collaborative and an Autism Strategy and work with Health colleagues to develop an All Age Neurodevelopmental Pathway.

The ASC Collaborative is a group of people from various agencies involved in working with people with autism. To help develop an autism strategy for Kent the group considered national legislation and policy, Best Practice elsewhere in the country and the situation locally for people with autism.

Work was also undertaken with Health and KCC colleagues to develop a Kent wide pathway for both children and adults with a neurodevelopmental condition, particularly autism and ADHD. This aims to improve diagnostic and post diagnostic support services.

Development of the ASC team

We are continuing to develop the ASC team to meet the high demand for assessment and support and develop innovative and cost effective solutions to meet needs.

We have established an ASC Enablement pilot project based on Occupational Therapy skills training and the provision of equipment to promote the independence of people with autism.

We continued to develop the team and looked at various ways to manage demand such as providing assessments at Gateways. We worked with individuals with autism and their families and carers to find new ways to successfully manage their issues and situation.

New

Autistic Spectrum Conditions Enablement project

We have set up an ASC Enablement project and used new tools and techniques to help people with autism develop independence skills. We trialled equipment such as squeeze jackets and weighted blankets and apps such as “Brain in Hand” which help reduce people’s anxiety and stress. Some very positive outcomes were achieved by individuals. This is an innovative project of national interest.

Case Study

Martha is a 19 year old female who has complex Obsessive Compulsive Disorder (OCD) and autism and attends a specialist school. She lives at home with her parents and is very dependent on her mother for all personal care, and meals. She has very high anxiety affecting her ability to travel and has not been to school for 3 months. She has severe sleep difficulties and does not go out alone.

After an intensive period of skills training provided by the ASC Enablement service she is now washing and dressing independently, making family meals, attending school, travelling independently and safely, having work experience in a charity shop, eating and drinking in public places, sleeping better and showing a significant increase in confidence and self-esteem.

Contact Details

Getting in Touch

There are several ways for you to contact us.

Telephone

For non-urgent calls please contact us Monday to Friday between 8.30am and 5.00pm

Call our contact centre

The contact centre is based in Maidstone and is open for business 24 hours a day, 7 days a week.

Telephone: 03000 41 61 61

Text relay

A text relay service is available for Deaf, hard of hearing and speech impaired customers and is available 24 hours a day, 7 days a week.

Text Relay: 18001 03000 41 61 61

Out of hours service

Not every crisis occurs during office hours. Kent and Medway Social Services provide for these times with our out of hours service which can offer advice, support and help to ensure that vulnerable people are not left at risk.

Telephone 03000 41 91 91

Calls from landlines are typically charged between 2p and 10p per minute; calls from mobile typically cost between 10p and 40p per minute.

Email

You can email us with queries or questions about any of our services or information.
social.services@kent.gov.uk

Website

www.kent.gov.uk/adultsocialservices

Visit a Gateway

Gateways are the new way for you to find public and voluntary services with the added convenience of being in a town centre or high street location. Comfortable, modern places make it easier to reach over 40 specialists, voluntary and charitable agencies. There are currently nine gateways across Kent:

- Ashford Gateway Plus
- Tenterden Gateway
- Dover Gateway
- Thanet Gateway Plus
- Gravesham Gateway
- Tonbridge Gateway
- Maidstone Gateway
- Tunbridge Wells Gateway
- Sheppey Gateway
- Swanley (opening 2015).

Listening, responding and improving

Kent County Council welcomes all comments, complaints and compliments. We aim to provide good quality services and we need your help to tell us how we are performing.

If you wish to make a complaint contact us

Email: complaintsteamadults@kent.gov.uk

Web: www.kent.gov.uk/haveyoursay

Tel: 03000 410 410

Text relay: 18001 03000 410 410

Or you can write to:

KCC Adult Social Care
Complaints Team
Invicta House
County Hall, County Road
Maidstone,
ME14 1XX.

Glossary

Assistive Technology: These technologies help you to maintain independence. Telehealth provides equipment and devices used to remotely monitor aspects of a person's health in their own home. Telecare can be a combination of remotely monitored passive alarms and sensors to maintain independence at home

ASC (Kent Autistic Spectrum Conditions Team): This integrated specialist team aims to address the unmet needs of adults with autism, including those with Asperger's Syndrome, who do not meet the eligibility of Learning Disability services. The service is jointly commissioned by Kent County Council (KCC) and Kent and Medway NHS and Social Care Partnership Trust.

Audits: Regular audits will be undertaken by the police, adult social care and health, to determine where improvements can be made and ensure that policies and procedures are being followed.

Autism Collaborative: The collaborative is a collection of stakeholders including clients and carer representation, the local authority, health and all the main voluntary and charitable organisations. The aim of the group is to examine services and ensure that they are meeting the needs of adults with autism. If not how the group might plan to meet any gaps in services. The Collaborative will draw together various pieces of work from all sectors in order to fully complete the Kent Autism Strategy.

Better Care Fund: The Better Care Fund (BCF), worth £3.8 billion was announced by the Government in the June 2013 spending review. It is designed to support the transformation and integration of health and social care services, to ensure local people receive better care.

BME: Black minority ethnic residents in Kent.

Care Quality Commission (CQC): The CQC is responsible for the inspection and registration of services including, care homes, independent health care establishments and the Shared Lives Scheme.

Clinical Commissioning Groups (CCG): A Clinical Commissioning Group is the name for the new health commissioning organisation which replaced Primary Care Trusts in April 2013. CCGs make it easier for us to work directly with our partner organisations and make the best use of resources.

Countywide Safeguarding Group: This is a meeting for senior managers within Kent County Council chaired by the Director of Commissioning for Social Care, Health and Wellbeing. The group reviews safeguarding activity across the county, to ensure that robust systems are in place to provide appropriate support to individuals who raise allegations or concerns about adult abuse.

Dementia Care Mapping (DCM): is a set of observational tools designed to evaluate quality of care from the perspective of the person living with dementia.

Department of Health (DH): They lead, shape and fund health and care in England, making sure people have the support, care and treatment they need, delivered with the compassion, respect and dignity they deserve.

Direct Payment: Direct Payments are cash payments to individuals who have been assessed as having eligible social care needs, that require support from KCC. The amount paid is less any contribution that is required by the individual following a financial assessment.

Domiciliary Care: Domiciliary care can help people with personal care and some practical household tasks to help them to stay at home and live independently.

Enablement: Enablement is a short term, intensive service that can help you remain in your own home or regain independence if you have been ill or in hospital.

Good Day Programme: This programme enables people with learning disabilities in Kent to choose what they want to do during the day, evenings and weekends, have support when and where they need it, and be an equal citizen of their local community.

Hi Kent: Is a registered charity for deaf and hard of hearing people, who work in partnership with Kent County Council. They carry out assessments of need for people aged over 65 years old, provide advice and a range of equipment.

Integration Pioneers: are looking at innovative ways of creating change in the health service which, the Government and national partners want to see spread across the country. Kent is an integration pioneer.

KAB: Kent Association for the Blind is a rehabilitation service for people who are blind or partially sighted in Kent. They aim to provide a quality service sensitive to the individual's needs to help them attain the highest levels of independence.

Kent Card: The Kent card is a secure way of receiving Direct Payments without the need to open a separate bank account. The card is a chip and pin visa card and works in the same way as a visa debit card. It can be used to pay a Personal Assistant (PA), makes record keeping easier and reduces paperwork.

Kent Health and Wellbeing Board (HWB): The Kent Health and Wellbeing Board leads and advises on work to improve the health and wellbeing of the people of Kent. It does this through joined up engagement across the NHS, social care, public health and other services that the board agrees are directly related. The board aims to reduce health inequalities and ensure better quality of care for all patients and care users.

Kent Wide Carers' Publication: is an information booklet for carers about the range of support services available in your local area.

MDTs: Mutli-Disciplinary Teams are joint teams between Social Care and Health that aim to minimise duplicate referrals.

Occupational Therapy: The Occupational Therapy Service provides assessment, advice, equipment and adaptations for disabled people living in their own homes.

Personal Budget: A Personal Budget is money paid by us (Kent Adult Social Care) to you so that you can arrange your own care and support services.

Promoting Independence Reviews: assess your abilities and difficulties with managing every day activities. We will work with you to identify what you are able to do and what you hope to be able to achieve, in order to continue to live independently. The Promoting Independence Service helps you to maximise how much you can do for yourself, and regain or learn new skills before any decisions are made about your ongoing support needs.

The Royal Association for Deaf (RAD): is a British charitable organisation who promote the welfare and interests of Deaf people. They provide employment and legal advice, host activities and support groups for families with parents and/or children who are deaf or hard of hearing and also offer an interpreting service.

Safeguarding: Safeguarding is about protecting children, young people and vulnerable adults from abuse or neglect. The policy aims to tackle how adult abuse can be prevented through community cohesion, communication, good practice and to ensure that everyone is treated with dignity and respect.

Safeguarding Adults Board: The board consists of representation by senior management from the council, CCGs, Police, carers, voluntary and private sector representatives. A range of these partners may be involved in an investigation/

enquiry regarding suspected abuse or neglect. The board also arrange serious case reviews (which will become Safeguarding Adults Reviews under the Care Act) where there is concern that safeguarding arrangements could have been more effective.

Shared Lives: This scheme helps vulnerable adults who want to live as part of a family or household find somewhere suitable. It is similar to fostering but for adults rather than children. Placements can either be on a short or long term basis or act as a stepping stone towards independent living.
www.kent.gov.uk/sharedlives

Telecare: describes any service that brings health and social care directly to a user (generally in their homes). It enables people, especially older and more vulnerable individuals, to live independently and securely in their own home by providing them with personal and environmental sensors in the home. These remotely monitor over a 24 hour period and should something happen like you have a fall, a warning is sent to a response centre and the required help is sent to assist you.

Telehealth: is part of this, but relates specifically to remote monitoring of a person's vital signs, including blood pressure, weight and blood glucose.

Transformation: Over the next four years KCC will be looking at how their existing services currently operate, the difference they make, and if there's a better way to do things. They will also bring services together to avoid duplication and improve efficiency, shaping them around people and place. This is known as Transformation.

Data Sources

- ONS mid-year estimates 2012
- PCIS population June 2014
- Health and Social Care Information Centre (HSCIC) website
- Office of National Statistics (ONS) website
- Direct Payment services report
- Residential Monitoring and Non Residential Monitoring services report
- KCC Annual return reports

Feedback

Your view is important to us. This is your opportunity to have your opinion about the content of this annual report. With your feedback we can make the necessary improvements for next year's annual report containing information that is relevant to you.

The following questionnaire asks for your opinion about the annual report for adult social services 2014/15.

1. I am (please tick)

- An adult who has received or is currently receiving care services in Kent
- A Carer, informal, family, unpaid
- A provider of adult social care services in Kent
- A member of staff employed by Kent County Council
- Other (Please write below)

2. Please advise us which sections you found most helpful and informative?

3. Please advise us which sections you found least helpful and uninformative?

4. Is there any aspect of the annual report you do not understand?



5. Are there any issues that you feel are not addressed?

6. Overall how would you rate this annual report? With 5 being excellent and 1 being poor, or use the faces below. Please circle your choice.



If you have any additional comments please include them here.

Thank you for taking part in this questionnaire.

Please send completed questionnaire and return with provided prepaid envelope to:

Local Account Feedback
Performance and Information Management Team
Social Care, Health and Wellbeing
Kent County Council
3rd Floor Invicta House
County Hall, County Road
Maidstone
ME14 1XX

Email: kentlocalaccount@kent.gov.uk

Twitter: You can follow us on twitter, www.twitter.com/@Kent_cc

Online: You can give us feedback online at: www.kent.gov.uk/about-the-council/strategies-and-policies/adult-social-care-policies/local-account-for-adult-social-care



