

Adult Social Care in Herefordshire 2013-14

Our Local Account



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Our vision is: “To enable residents to live safe, healthy and independent lives and to maintain service provision, to those with eligible need, within the available resources”.

Introduction - social care in a changing world

Herefordshire's elderly population is increasing at a faster rate than in many other areas. Although they are generally more affluent than the English average, their need for support is increasing.

Over the last few years we have had to rise to the challenges presented by reduced funding and changes to national policy. As well as caring for the elderly population, we have to meet the needs of future generations of older people and young adults with complex disabilities.

In addition, we have a duty to meet the support needs of a growing number of family carers.

During the past year we have worked with partners in the NHS, service providers, community groups, service users and their families, to make changes to the way services are provided. These changes were not just about managing our finances better, but about making sure that people who use our services have choice and control about their care and have a greater say in who provides that care.

Our aims are clear. We want to make sure Herefordshire residents:

- Are kept safe, healthy and able to remain independent for as long as possible
- Have choice and control with services that are affordable
- Are offered services that are integrated across health and social care
- Have access to supportive local communities
- Are able to access efficient and effective services that meet their support needs

This Local Account (2013-14) tells you our story so far and how we plan to continue our journey over the next few years. We have included case studies which illustrate how some of the changes made have had a positive impact on local people.

We would like to thank our service users, their families, our providers and all staff involved in the changes that have taken place, and that lie ahead, for their continued support.



Cllr Graham Powell
Cabinet member for health and wellbeing



Helen Coombes
Director of adults and wellbeing

How care is provided in Herefordshire

Friends and families

According to the 2011 census, 21000 citizens regularly provided at least one hour of care per week for someone with long term ill health, disability or frailty. 6700 of them reported giving over 20 hours of care per week¹.

The council

- Conducts community care assessments and helps people plan how to meet their needs
- Funds services for people whose needs are eligible (based on national guidance)
- Gives grants or contracts with other organisations for support services
- Gives support to carers
- Gives advice
- Provides some services itself, for example, handyman services, Blue Badges

The third sector (voluntary and community sector)

- Advice and information
- Practical support
- Day services
- Community transport
- Mutual support

The health service

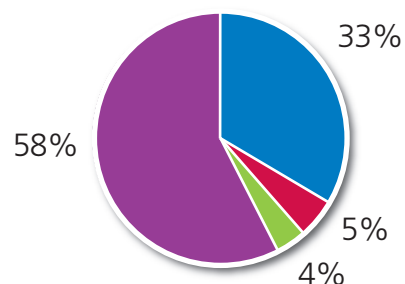
- Meets people's needs for health, social care and support often intertwine and local GPs and hospitals work closely with social care organisations, especially following a period in hospital
- Funds the nursing element of all nursing home costs and will meet the full costs where a person has overriding continuing health needs
- Through 2Gether NHS Trust undertakes social care assessments and care management of local people with significant mental health problems on behalf of the council as part of a wider mental health provision

Independent residential and nursing homes and homecare agencies

87 residential and nursing care homes and 40 care agencies worked with some of the most vulnerable people in the county, including people lacking in mental capacity, people with mental health problems, learning disabilities, and physical frailty and disability.

The majority of care home places in the county are not paid for by Herefordshire Council².

Who uses care home beds in Herefordshire?



- council funded permanent placements
- council funded short term and respite placements
- NHS funded residents
- other - mainly self funding residents

Supporting carers

Herefordshire Carers Support is a local organisation commissioned by the council to offer advice, information and support specifically to unpaid carers of all ages. Over 4,500 carers are registered with the organisation and can receive help and support to make positive changes to their caring roles. For example, registered carers receive:

- Help with taking stock and planning for future needs on an individual basis and with others in regular support groups
- Information on taking a break from the caring role and looking after yourself
- Signposting to other services that provide information about specific conditions
- Training to help build skills knowledge and confidence
- Networking opportunities, to name a few

Challenges identified in our last Local Account

Progress in 2013-14

We aimed to:

What we achieved:



Provide sustainable, value for money services

Redesigned and recommissioned a range of services with new contracts taking effect 2014 - 15

Undertook an open book review of costs with independent sector care homes



Give clients more choice and control

Increased number of people signed up for personal budgets and direct payments



Work with partners and communities

Facilitated regular meetings with the Making it Real Board (see page 7)

Agreed a joint action programme with local NHS for the Better Care Fund



Shift from high cost services such as residential care, to supporting people in their own homes for longer

Managed the increase in the number of clients supported in residential care

Other achievements

Continued to receive high levels of user satisfaction and quality of life

More vulnerable adults were kept safe from abuse than in the previous year

Managed to stabilise spending

Established an Adult and Wellbeing directorate within the council - bringing together adult social care and housing



Key highlights of the journey so far

2008

Herefordshire Council and Herefordshire Primary Care Trust establish a single management structure to become Herefordshire Public Services.

April 2011

Health and social care join forces to form Wye Valley NHS Trust – the first integrated provider of acute, community and social care in England.

2012

National reforms lead to primary care trusts being replaced by clinical commissioning groups.

Sept 2013

The council brings social care back into the council. It also changes the way some of the social care services is provided so that service users can use direct payments to buy these services.

Health services for people with learning disabilities is transferred from Wye Valley NHS Trust to 2gether Foundation Trust.

The council develops a new structure and Adults becomes a single directorate.

Council embarks on a programme of commissioning to bring new providers and a fresh approach to services in the county.

March 2014

The council extends arrangements for 2gether NHS Trust to provide mental health and substance misuse services pending a strategic review in 2014.

Some of the things we have achieved in 2013-14

Following national NHS reforms, we ended the agreement with Wye Valley NHS Trust in 2013 and took back the social care aspects of the service, such as initial contact, assessment, safeguarding and review, as well as welfare rights.

The council also decided that a number of other services would be reviewed and put out to tender. These included:

Day opportunities

We embarked on a series of conversations with existing users of day opportunities about how activities run in the council's day centres could be packaged together and put out to tender.

As a result of talking to service users and their carers, we put a membership-based scheme out to tender and appointed Aspire Living Ltd to deliver a new-style service.

Shared Lives

Ategi, a registered charity with extensive experience of supporting adults with learning disabilities, was appointed to manage the council's former Adult Placement service. Transition to the new arrangements was carefully managed to minimize disruption to service users. Ategi plans to expand the service and further develop the respite break service.



Norfolk House (sheltered housing scheme)

Working very closely with existing tenants, we appointed Reach (Supported-Living) to take over the management of Norfolk House. The closure of the kitchen service created a dilemma – we needed to save money but at the same time make sure residents continued to receive the services they need. Staff helped tenants to explore different options for purchasing a meal and the majority vote was to use a local pub to deliver lunches instead of providing an in-house kitchen facility.



Community Equipment Store

The council worked in partnership with Herefordshire's Clinical Commissioning Group to appoint NRS Healthcare to manage the county's Integrated Community Equipment Store. Community equipment stores provide equipment to adults and children to help them live safe, healthy and independent lives.

NRS Healthcare is an experienced contractor of these services and has a strong performance record. As the store will remain on the same site, the impact of the management changeover was minimal to service users.

Sensory Impairment

Vision Links was awarded the contract for providing sensory impairment services in Herefordshire. Disruption for service users was kept to a minimum as existing council staff were transferred across to the new provider and the service was delivered from the same locations.

We set up a Making it Real programme

We established a Making it Real programme to help make social care more personal for the people who use it.

This was part of a national campaign to encourage service users and their carers to become involved in helping local authorities agree priority areas for future developments. Age UK, Herefordshire Council, Herefordshire Disability United and Services for Independent Living registered with the programme and surveyed adults receiving adult social care using the Making it Real survey questions that were set nationally.

160 people responded to the questionnaire and feedback set the three priorities for Herefordshire as follows:

- To make good quality information available for prospective service users, their families and carers
- To make self-directed support from the council more widely understood and less complicated
- To promote active and supportive communities so that people feel valued, know about and can attend a wide range of activities.

Following the survey we appointed a principal social worker to work with the teams on improving practice and dealing with changes to systems and processes, both designed to provide better, more effective services to people.

We signed up to the Social Care Commitment

This means we promise to:

- Work responsibly
- Uphold dignity
- Work co-operatively
- Communicate effectively
- Protect privacy
- Continue to learn
- Treat people fairly



We published a policy, Community Care and Meeting Your Eligible Needs

In March 2014 we published this policy, which sets out our vision for the next three years and pledges to actively ensure that Herefordshire residents:

- Are safe, healthy and are able to remain independent for as long as possible;
- Have choice and control with services that are affordable;
- Can access services that are integrated and joined up at the point of delivery across adult social care and health;
- Have access to supportive local communities;
- Are able to access efficient and effective services that meet their support needs.

The policy also explains what services are available to people needing help and support, how that support will be provided, how people's needs will be assessed and how funding will be allocated.

We launched a telecare service to help people live independently

Following a review in October 2013, we began a 12 month campaign to develop the use of technology to support our service users and carers. This involved setting up a training programme for all professionals across health and social care to help them understand what tools are available (such as telecare) and how individuals can be supported at home with this equipment. We also created a telecare adviser service in the council to help health and social care professionals find the right solution for individuals they are working with.



We reviewed Home and Community Support (domiciliary care)

Helping as many people as possible continue to live independently in their own homes is a major priority for health and social care. Home and community support (domiciliary care) helps to achieve this, and as a result, demand for the service is growing. As well as making sure we get good value for money, we also need to make sure we have good systems in place so that support is provided in a targeted way to those that need it most.

During 2013-14 we consulted with the organisations that provide this service in Herefordshire about reducing the rates the council pays. We also talked about a framework that providers could apply to be part of, and that service users could choose from, in order for the council to purchase their care needs. The framework includes electronic care monitoring and arrangements to make sure all care and support is linked to people's care plans.

We created new homes for people with learning disabilities

Working in partnership with the Sanctuary Housing Group, the development of 10 new homes for people with learning disabilities began at Coningsby Street, Hereford. The apartments are all self-contained but the development also has some communal areas (kitchen/living room/training rooms) to enable the residents to share and enhance their life skills to live independently. The homes are located in the city centre close to all necessary services including travel, shops, training and close proximity to other services for support.

Henffordd Gardens

Herefordshire Housing Ltd (HHL) opened their first assisted living scheme in Edgar Street, Hereford to provide accommodation for people over 50+ years. Henffordd Gardens provides 30 high quality apartments offering the very latest in assistive technology, providing telehealth and telecare support to individuals, fully supporting the principles of Homes for Life and responding to economic changes by bringing together housing care and support.

How are we doing?

1. Improving the quality of life for people with care and support needs

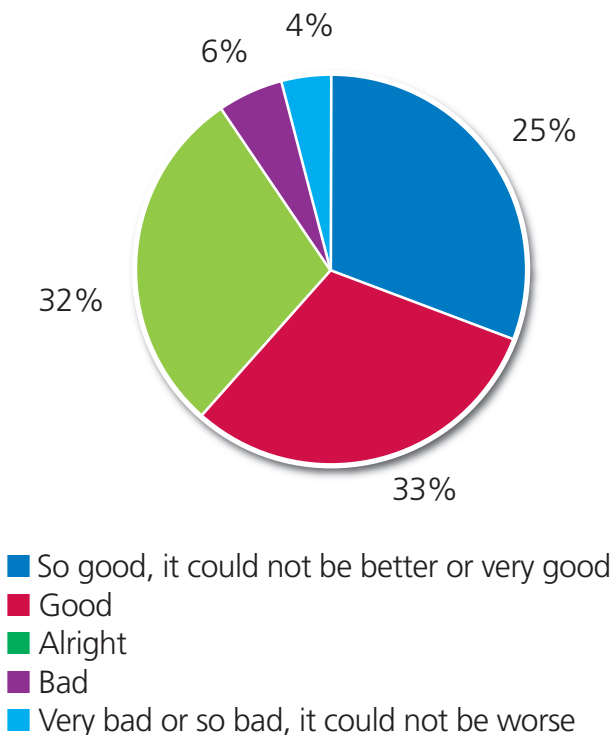
Social care service users report high quality of life

More personal budgets and direct payments making a difference

Work needed to improve how direct payments are managed

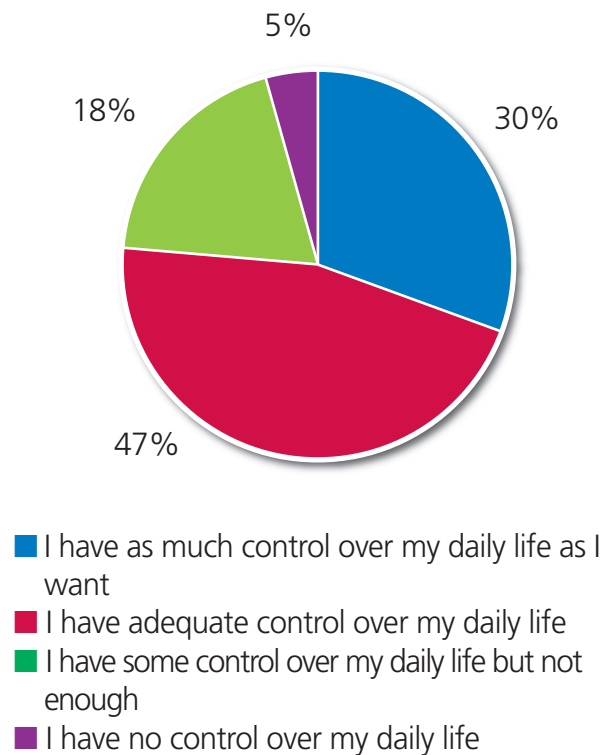
In a survey of service users funded by the council in 2014,³ most people said they thought their quality of life was good.

Herefordshire - Thinking about all the different things in your life, good and bad, how would you say you feel about your life in general?



Most people also said that they had enough control over their lives.

Herefordshire - Which of the following statements best describes how much control you have over your daily life?



Direct payments

One way to increase people's control over their lives is to let them know how much money is available to pay for their support (personal budget) so that they can be more involved in planning their care. Greatest control can be achieved when clients choose to receive this budget in cash as a direct payment to use to purchase their own care.

The numbers of clients receiving personal budgets and direct payments rose in 2013-14 but is still just at or below the national average.⁴

Feedback from service users highlighted that many found the direct payment process too restrictive and complicated. We have now appointed direct payment advisers to help make the process less complicated and answer any questions people may have.

“15 years ago I had a Direct Payment and it gave me my life back”

“The direct payments process is cumbersome”

Direct payments - Jonathon's Story

CASE STUDY

28 year old Jonathon has learning difficulties, can't communicate verbally, is visually impaired, has mobility problems and has severe seizures. He uses a direct payment from the council to employ personal assistants to support him to enjoy a good quality of life by participating in activities that he enjoys. Thanks to his staff team, family, support from the local community and the direct payments, Jonathan has a rich and varied social life.

His mum, Rose, said: "Jonathan attended Barrs Court Special school when he was younger and we worried about what support he would have when he left.

"Without having the choice that direct payments provide us with, it is likely that Jonathan would have attended a day centre. We felt that wasn't the right option for him.

"Employing personal assistants has worked out really well for him. They all know and understand him well and make sure that he gets to do the things he enjoys doing and making the most of his life. He's also able to pay for occasional overnight and/or holiday care



which helps his family take a break from time to time. And I have been able to go back to work."

Emma is his lead personal assistant and she helps him with staffing, paying bills, organising holidays and regular activities. "I've worked with Jonathan for nine years now and although he can't communicate verbally, I know him well enough to understand what he enjoys doing," says Emma.

"I can tell by his body language and the sounds that he makes – he's very good at letting us know if he doesn't want to do something or wants to have a lie in!"

2. Delaying and reducing the need for support

Getting the right information at the right time is often what people and their carers need to continue living with maximum independence.

- over 40% of contacts made to the council's social care team received advice, information or were signposted to other organisations and did not need further assessment or support⁵
- 73% of council supported service users who looked for it, found information about services easy to find. This is similar to the English average and similar councils.⁶
- 758 people received advice and support during 2013-14 from the council's welfare benefits team, to help them claim all their benefits

It is almost impossible to count how much support voluntary groups give to keep people independent. There is a rich tapestry of support in Herefordshire for people who may need support but who do not meet the criteria for council support.

The council's reablement service worked with 640 referrals in the first half of 2013-14 to give short, planned programmes of help to reduce people's needs for long term support. The service was changed in the latter half of the year to focus more on giving rapid response to emergency situations while a new reablement service was designed to be contracted in 2014-15.

Some of the support provided by voluntary organisations is funded by the council and the organisations also raise money from charitable sources and grants. A lot of support is provided by people giving their time freely. Social workers will refer people to these support groups where appropriate.

Public Health became a council responsibility in 2013 and works with all age groups to promote healthy lifestyles. The focus in 2013-14 has been to help people make healthier lifestyle choices and work with partners and share intelligence to make a difference.⁷



⁵ Data based on annual RAP return made available on <http://factsandfigures.herefordshire.gov.uk>

⁶ Data based on annual Adult Social Care Outcome Framework return made available on <http://factsandfigures.herefordshire.gov.uk>

⁷ Priorities and work to promote the health of Herefordshire's population is described in the annual report by the Director of Public Health.

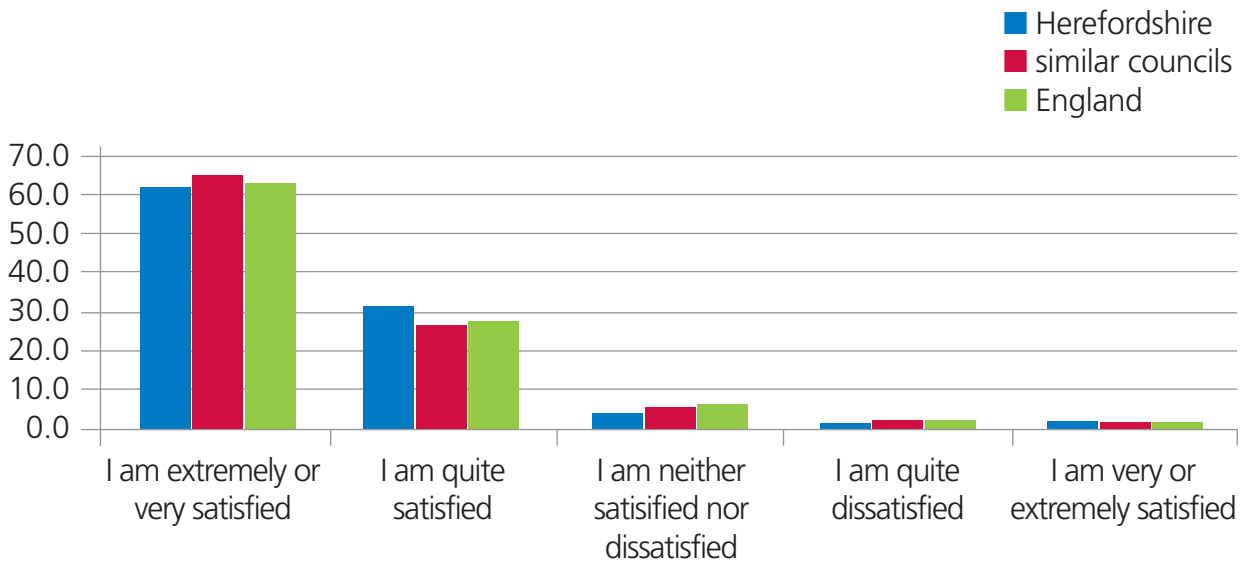
<http://factsandfigures.herefordshire.gov.uk/2286.aspx> To see data about Herefordshire's position follow the links on the page <http://factsandfigures.herefordshire.gov.uk/health.aspx>

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

Most service users felt positive about the care they received most of the time, and the large majority of key services met national standards. However, some reported poor experiences and raised concerns over standards of care in some places. Respondents to the annual survey of users reported similar high levels of satisfaction as in previous years.

- Over 60% said they were extremely or very satisfied with overall services.⁸
- Respondents scored their quality of life as 19 out of 24 based on factors such as their personal hygiene, comfort, nutrition, social contact. The national average was 19.1⁹

How satisfied are you with the care and support you have received?



Care homes: What did the regulators think?¹⁰

The Care Quality Commission (CQC) regulates care in England and inspected 84 of Herefordshire’s 87 homes.

- 66 were compliant with all the national standards
- 18 were non-compliant in some respects and were required to make improvements
- The CQC issued formal warning notices in three cases
- This is slightly worse than last year when the CQC inspected 85 homes and found 14 of them non-compliant in some areas.

What the residents said about care homes

61 care home residents answered the annual user survey

- 69% said they were satisfied or very satisfied with their support and care
- 74% said their quality of life was good or very good
- 89 relatives responded to questionnaires from the council’s quality team. 85% of these agreed that they were satisfied with the care provided for their relatives.

⁸ Data based on annual Adult Social Care Survey report made available on <http://factsandfigures.herefordshire.gov.uk>

⁹ Data based on annual Adult Social Care Outcome Framework return made available on <http://factsandfigures.herefordshire.gov.uk>

¹⁰ CQC inspection data available from the CQC website (www.cqc.org.uk)

Care home experience

CASE STUDY

In one care home, a quality assurance visit by the council identified that 18 out of 20 residents were satisfied with the overall quality of care. However, concerns raised by one resident included:

- Occasionally at busy times, I have to wait a bit long to be helped to the toilet.
- Sometimes I have to wait for assistance to get out of bed due to work load of staff and breaks they need.
- Plenty of activities but unsuitable for a blind person with osteoporosis
- Meals tend to be on the heavy side.
- Feel vulnerable and the care is not as good as I got in my own home with carers coming in.
- I have a large room with all my own things except the bed which is most uncomfortable.

"We know that this is a very suitable placement for our son in many ways. He is comfortable and happy, and he is part of a community. This is very important. He has shown a marked improvement in his life skills, and he has occupation and leisure activities that he enjoys and in which he excels. Pottery, for example, has been a source of great satisfaction to him and has revealed a serious talent and skill. His keyworker and most of the staff are doing a great job, but there have been issues: he was manhandled on the previous unit; one of the teams is inconsistent and unhelpful in their dealings with our son; and some staff are less than vigilant. The majority of staff are very professional and look after the residents in a professional, warm and dignified manner. Our son is happy."

Comments from a relative

Inspections

During the year the council had concerns with three care homes and worked with them to improve standards of care successfully.

Homecare agencies

There were 40 homecare agencies registered in the county in 2013-14.

The CQC inspected 25 of them.

- Four did not meet all the national standards and one of these achieved compliance within the year.
- Last year, the CQC inspected 25 agencies and found that two of them did not meet all requirements.



4. Keeping adults safe

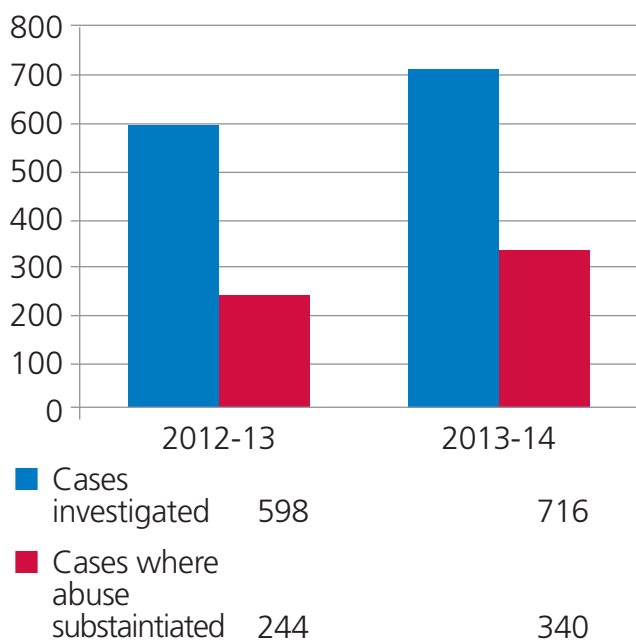
More vulnerable people protected in 2013-14

Safeguarding vulnerable adults from abuse in Herefordshire is led by the Herefordshire Safeguarding Adults Board which co-ordinates the responses of different organisations.¹¹ 716 safeguarding investigations were concluded in 2013-14¹²

- 47% of them were fully or partly substantiated

- In 44% of cases the alleged perpetrator was known to the subject but not a care worker; in 43% of the cases the alleged perpetrator was a care worker. In 13% of cases the perpetrator was a stranger
- Most subjects of investigation were over 85, and in 36% of completed investigations some question was expressed about the person's mental capacity

Safeguarding investigations and conclusions



- A larger number of concerns were raised, which were reviewed and judged to not need a safeguarding investigation
- Most concerns were raised by staff in social care or health care but also by police officers, relatives and friends
- Most abuse was alleged to occur in the user's own home (48%), followed by care homes (35%) and hospitals (8%)



Keeping people safe from...

Domestic violence

Social workers were informed that Mrs Philip, an older lady receiving social care, had been taken to hospital following a suspected assault by a relative.

A social worker met with the police, social care staff, hospital staff, Mrs Philip and Mrs Philip's family to plan how she could return home safely. The police were able to prevent the suspected attacker coming near Mrs Philip; her relatives and care agency agreed a plan to give her extra support in the short term. In the longer term, with police advice, a security camera was installed at Mrs Philip's home.

Neglect

Nurses in a community hospital noted that Mr Ellis had pressure sores. Equipment and nursing care was put in place at once to relieve his condition and senior nurses investigated to see if his sores had arisen because of poor nursing. The conclusion in this case was that the pressure sores could have been avoided by following the hospital's nursing guidelines more closely. Extra training was given to the staff in the relevant wards to improve their practice and reduce the chances of other patients suffering. The incident was notified to the safeguarding board and recorded as a case of abuse by neglect.

When someone lacks mental capacity to consent to care or treatment, it is sometimes in their best interests to deprive them of their liberty to protect them from harm. Having mental capacity means being able to understand and retain information and being able to make a decision based on that information.

Where a person is at risk of deprivation of liberty within a care home or hospital, Herefordshire Council will arrange an independent assessment. In 2013/14, 83 cases were processed. Following a recent Supreme Court judgement, this number is expected to rise significantly in 2014/15.



An example of how our social workers keep people safe

Jane is an elderly lady who receives care in her own home. Reports are received claiming that she isn't being looked after properly. The social worker would typically think:

1. How can I find out about Jane's wishes and needs?
2. How can I find out more about the situation? Are the concerns justified?
3. Who do I need to involve? For example, Jane's relatives, her care agency?
4. Does Jane understand what is happening and can she make her own decisions about the situation? (Does she have mental capacity)?

If it turns out that Jane had suffered due to neglect

5. How can we stop this happening and reduce the risk of it happening again?

They would then use the procedures agreed by the Herefordshire Safeguarding Adults Board to arrange meetings, record what happened and work with others to put things right. In this case the outcome is likely to include agreeing improvements with the care agency, arranging regular visits by social workers and relatives to check that care had improved, and informing the Care Quality Commission (the Government body which inspects and regulates care agencies).



Types of alleged abuse

	Number	Percentage
neglect	294	32%
physical	227	25%
psychological and emotional	153	17%
financial	153	17%
institutional	47	5%
sexual	41	4%
discriminatory	9	1%
	924	100%

Examples of cases investigated included:

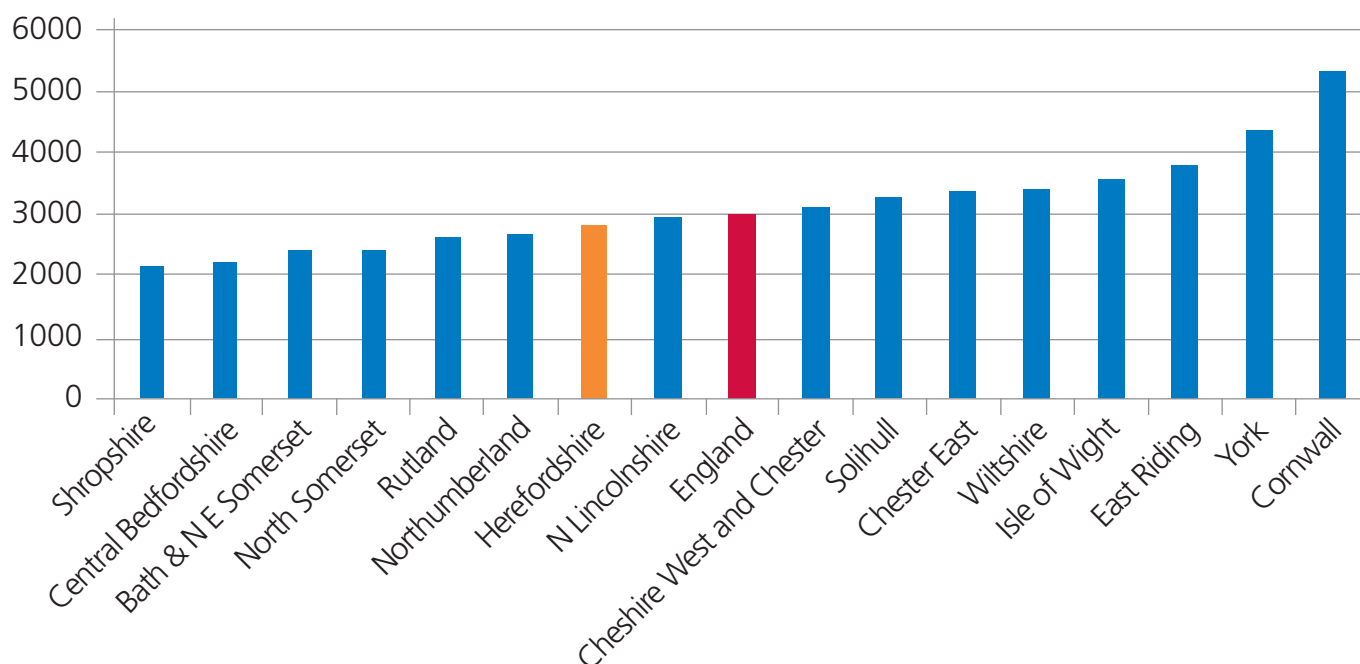
- allegations that patients had developed bed sores due to neglect or poor care
- concerns that staff members, strangers or family were using their position to benefit unfairly from the vulnerable person's money.
- physical and verbal abuse by carers or other service users

Spending and service levels

Does Herefordshire Council support more social care services users than elsewhere in the country?

Compared to similar councils, Herefordshire is 7th out of 16 and supports less than the English average.¹⁴

Herefordshire and similar councils.
Social care clients per 100,000 adult population



Like most councils in recent years Herefordshire has been targeting resources on people with most needs and consequently supports fewer people with more intensive services to enable a return to independence.

How dependent are the users of Herefordshire's adult social care services?
Do they have more needs than other areas?

Herefordshire's clients have significant disabilities:¹⁵

- 20% cannot get around indoors without help
- 23% cannot get in and out of bed or a chair without help
- 6% cannot feed themselves without help
- 66% cannot manage their finance and paperwork without help
- 47% cannot bath or shower without help
- 33% cannot dress or undress without help

- 23% cannot use the toilet without help
- 18% cannot wash their hands and face without help
- 27% do not go out of their home at all
- 61% report a degree of physical pain or discomfort
- 54% report a degree of anxiety or depression
- 19% report the design of their home meets a minority of their need

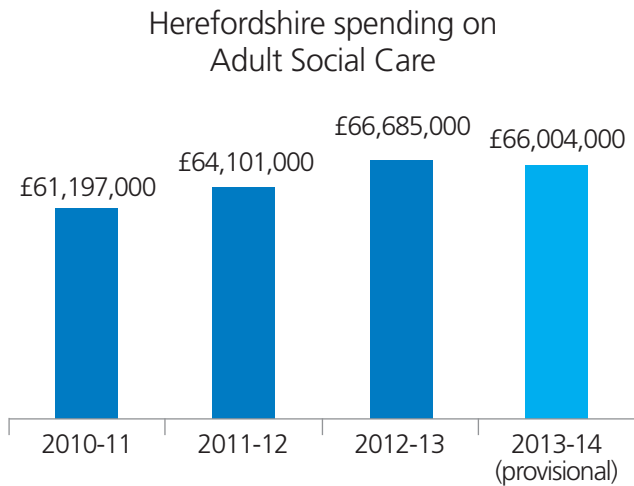
This is similar to the English average so Herefordshire clients do not appear to have significantly greater or lesser needs than clients in other counties.

¹⁴ Data based on annual RAP return made available on <http://factsandfigures.herefordshire.gov.uk>. Similar counties are identified by the Dept. Of Health and Professional Accountancy Associations

¹⁵ Data based on annual Adult Social Care Survey report made available on <http://factsandfigures.herefordshire.gov.uk>

How much does Herefordshire Council spend on social care?

The need for adult social care has risen in recent years and as a result spending has increased in Herefordshire.¹⁶ Spending stabilised in 2013-14 and the council has a strategy to respond to the funding gap created by the cuts in government funding.¹⁷



The growth in need is caused by the increasing number of older people and the complex needs of some younger disabled people.

Herefordshire Council supports slightly fewer social care clients than the national average.

Clients have similar level of needs to the English average.

Spending was similar to 2012-13.

Plans are in place to respond to reductions in government funding and the council's new responsibilities.



Most of the money that Herefordshire Council spends on social care is spent on care homes or homecare agencies. 2012-13 is the latest year with national figures available for comparison Herefordshire paid less for an hour of homecare but more for residential and nursing care.

How does Herefordshire's expenditure compare?¹⁸ Although not among the highest spending authorities, Herefordshire does spend more than most similar councils. For comparison, 2012-13 is the latest year with national figures available.

	Herefordshire (2012-13)	Similar councils (2012-13)
Cost of one hour of homecare	£15	£17
Cost for a week in a nursing home for an older person	£571	£470
Cost for a week in a residential home for an adult with a learning disability 18-64	£1,364	£1,274

	Spend per 10,000 population	Spend per service user
Herefordshire 2012-13	£4,475,000	£13,165
Average spend by similar councils in 2012-13	£4,205,000*	£11,902

*median of aca comparator group



Our plans and challenges for 2014-15

Helping you stay independent for longer

Our commitment to keeping people independent for longer will continue as we grow our telecare and assistive technology service and put it out to tender: simple technology can be used to remind people to take their medicine and to help monitor falls amongst other things. We will also develop short intensive programmes of support (known as reablement) to help people return to independence quickly following a period in hospital, illness or a crisis.

Direct payments

Working with service users we will develop a new direct payment policy which will be easier for people to understand and will offer people more flexible use of their payments.



Working closer with health

We will also be working much closer with our health colleagues to join up services better and help prevent admissions to hospitals and residential care. This is part of a national priority to integrate health and social care, and will help people in need of urgent care, have their care and support needs met more effectively.

Part of this includes changing the way people's needs are assessed so that they take place outside the intensity of the hospital environment and allow people to make better informed choices around their future care.

The Care Act (2014)

2014/15 will also see the biggest changes in social care legislation in 60 years with the introduction of the Care Act. This will have many implications for the local authority and a team of people will be working to ensure the council complies with its new statutory duties from April 2015.

Some of the key areas will focus around:

- Information, advice and guidance to ensure that people get the right care and support at the right time to maximise choice and control over their lives.
- Market shaping to ensure that services are available to meet the needs of Herefordshire residents.

Safeguarding

Keeping adults safe from harm is everyone's business. The council will review its safeguarding processes in 2014-15 and put plans together to improve our safeguarding services with a focus on better outcomes for service users.

We aim to make safeguarding personal so that people who need support are listened to and given choice over how that support is provided.

Involving you more

Over the next 12 months, we will continue to focus on putting individuals at the centre of their care planning and refresh our approach to personalisation. We will do this by working with an expert by experience: someone who has first-hand experience of using services themselves. This person will refocus our Making it Real Board and develop a toolkit to provide guidance and support for meaningful involvement and co-production. This will involve service users and carers and run across all adult social care projects. This will help improve the range of services available so that people can choose how their needs are met.





CASE STUDY

Andrew's personalisation story

How living with the Gilbert family has given him the confidence to make choices

Andrew has been living with the Gilbert family since 1997. Born with a learning disability and very little hearing which has had an impact on his speech, he came to live with the Gilberts when he was 31. He'd been in care all his life, and as a result, was quite institutionalised and lacked confidence.



When Andrew first came to live with the Gilberts, he used to go to a day centre each day, but as he began to build up his confidence, he went to Holme Lacy College to develop his literacy skills, horticulture and work with small animals. He did incredibly well there winning awards including Student of the Year and this, together with the support he received from living in a family environment, gave him the confidence to make choices for himself. Andrew likes to go to the Ryefield Centre once a week where he helps to cook in the café. He also goes to the Widemarsh Centre, works in the garden one day a week, goes out with his friends and family (he loves dancing) and works at Hereford Community Farm.

Sandra said: "A lot of people don't know about the Adult Placement Scheme which is now known as Shared Lives, but it's been going for years in Herefordshire. We think it's marvellous. It doesn't always work for everyone but can be a stepping stone to help people gain confidence, become more independent and make decisions about the way they want to live their lives."

Useful information

1. Access to adult social care

Adult social care enquiries: 01432 260101

ASCAdviceandReferralTeam@herefordshire.gcsx.gov.uk

2. Healthwatch Herefordshire

01432 364481

www.healthwatchherefordshire.co.uk

3. Care Quality Commission

The independent regulator of all health and social care services in England.

03000 616161

www.cqc.org.uk

Further Reading

1. Facts and figures about Herefordshire

www.factsandfigures.herefordshire.gov.uk

2. Making it Real

www.thinklocalactpersonal.org.uk/

3. Spotlight on adult and wellbeing

www.herefordshire.gov.uk/subscribe

Sign up to receive an email alert every time we publish a new edition of Spotlight on adult and wellbeing, our regular newsletter for people interested in adult social care

Feedback

This document has been produced by Herefordshire Council. We'd like to know what you think of this report and how you would like to get involved in developing future reports. Please complete our feedback form online at www.herefordshire.gov.uk/lafeedback

Alternatively you can email your views to adultscpip@herefordshire.gov.uk or you can use the form on the reverse of this page and return it to:

Adult social care performance team

Herefordshire Council, Nelson House, Whitecross road Hereford HR4 9DG

We will use your feedback to help shape the next Local Account (2014-15)

Feedback form

1. How did you find out about the Local Account?

Poster Website Newspaper Library Herefordshire Council website

Other - please specify

2. What do you think of the:

Content with 1 being poor and 4 being excellent

Please select 1 2 3 4

Facts & figures with 1 being poor and 4 being excellent

Please select 1 2 3 4

Case studies used in the report with 1 being poor and 4 being excellent

Please select 1 2 3 4

Photographs used with 1 being poor and 4 being excellent

Please select 1 2 3 4

3. Overall, how would you describe this Local Account? Tick as many as necessary

Interesting Confusing Informative Boring

Structured Not enough information

Comments (to add further information or if you would like to be involved in future reports please fill in your email address in the box below)

4. If you have any ideas on how we can improve our Local Account, please tell us (i.e., design, more information, language used, etc.)

5. Are you a user of our adult social care services, or do you care for someone who does?

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