### Appendix 'B'

**KEY STRENGTHS AND AREAS FOR IMPROVEMENT BY PEOPLE USING SERVICES**

<table>
<thead>
<tr>
<th>Key strengths</th>
<th>Key areas for improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All people using services</strong></td>
<td><strong>Development of support to people with long term conditions.</strong></td>
</tr>
<tr>
<td>• Promotion and support of health and wellbeing.</td>
<td>• Identify with health partners reasons for delayed discharges and work to reduce them.</td>
</tr>
<tr>
<td>• Partnership working with health.</td>
<td>• Increase the provision of extra care housing.</td>
</tr>
<tr>
<td>• Few delayed discharges attributable to council.</td>
<td>• Improve the quality of care in council run care homes.</td>
</tr>
<tr>
<td>• Good progress in development of preventative services.</td>
<td>• Increase the numbers of people utilising direct payments and other forms of self directed support, including individualised budgets.</td>
</tr>
<tr>
<td>• Developments in provision of telecare.</td>
<td>• More people to be supported into paid and voluntary work.</td>
</tr>
<tr>
<td>• Development of self assessment processes.</td>
<td>• Increase the numbers of staff accessing safeguarding training.</td>
</tr>
<tr>
<td>• Effective engagement of people who use services and their carers.</td>
<td>• Develop one point of contact for safeguarding referrals and ensure that safeguarding data is robust.</td>
</tr>
<tr>
<td>• Effective and improved care management processes.</td>
<td>• Guidance on personal relationships and sexual health to be available to all people using in house or purchased care services.</td>
</tr>
<tr>
<td>• Reduced the numbers of adults admitted to residential care.</td>
<td>• Work to continue with the Director of Public Health in the development of a Joint Strategic Needs Assessment, and strategic overarching commissioning framework.</td>
</tr>
<tr>
<td>• Improved and good performance in provision of direct payments and development of other forms of self directed support.</td>
<td>• Development of Individual Service Agreements and improved quality monitoring.</td>
</tr>
<tr>
<td>• Information from complaints used to inform improvements to service provision.</td>
<td></td>
</tr>
</tbody>
</table>
- More people accessing continuing care funding. Effective arrangements for resolution of disputes.
- Improved support for people to access employment and voluntary work.
- Effective processes to ensure local residents likely to need social care assistance maximise their income.
- Procedures and multi agency arrangements in place to safeguard vulnerable adults.
- Mental Capacity Act Training provided to staff at all levels and Independent Mental Capacity Advocacy service established.
- Dignity agenda being taken forward by Dignity Champions headed by Director of Older People’s Services.
- Four star rating in Comprehensive Performance Assessment, with direction of travel judgement of improving well.
- Improved year on year performance, resulting in better outcomes for local people.
- Continued modernisation of services, in line with national and local priorities.
- Strong and effective performance management.
- No recruitment and retention difficulties.
- Provision of leadership development programme.
- Reduction in sickness absence.
- Improvements in performance achieved, whilst also undertaking a programme of efficiency savings.
- Medium term financial strategy, budgets and capital programme judged to be soundly based.

systems for voluntary sector provision.
- Council providing good value for money.
- Preferred provider scheme to encourage quality and premiums paid to encourage specialist provision in independent sector.

**Older people**

- Very good levels of intensive home care.
- Reduced numbers of older people admitted to residential care.
- 97% of older people admitted to residential care are accommodated in single rooms.
- Ensure low level support meets older people’s needs.
- Development of Single Assessment Process.

**People with learning disabilities**

- Very good performance in helping people with learning disabilities to live at home.
- Reduced numbers of people with learning disabilities admitted to residential care.

**People with mental health problems**

- Increased support for people who misuse substances.
- Very good performance in helping people with mental health needs to live at home.
- Provision of more community based support for people with mental health needs.
- Development of robust systems to record mental health reviews.
- Development of forums and information for people with HIV/AIDS and who misuse substances.
- Further development of Crisis Resolution/Home Treatment Service so that it is available across the county.

**People with physical and sensory disabilities**

- Good performance in helping people with physical disabilities to live at home.
- Timely delivery of equipment and minor and major adaptations.
- Good progress in development of services for deaf-blind adults.
<table>
<thead>
<tr>
<th>Carers</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Good support to carers by providing services and breaks.</td>
</tr>
<tr>
<td>• Improved accessibility of breaks to carers from the Black and Minority Ethnic (BME) Community.</td>
</tr>
<tr>
<td>• Engagement with BME carers.</td>
</tr>
<tr>
<td>• Use of volunteers and positive and mature relationships with voluntary, community and faith sectors.</td>
</tr>
<tr>
<td>• Support services for carers to continue in or gain employment.</td>
</tr>
</tbody>
</table>
KEY STRENGTHS AND AREAS FOR IMPROVEMENT BY OUTCOME

Improved health and emotional well-being

Lancashire County Council ensures that people have access to information / advice to enable them to enjoy good physical and mental health and there are opportunities for physical activity. People who use services have access to appropriate treatment and support to ensure improved health and emotional well-being. The council needs to ensure that systems are effective in recording the reviews that take place in mental health, in order to be satisfied that reviews are taking place as required.

Key strengths

- The council, together with partners, has produced a range of written information aimed at improving the health and wellbeing of the people of Lancashire. In addition, various health awareness and training events are undertaken to promote healthier lifestyles. The council has identified the need to ensure that information is accessible to hard to reach groups.
- The council has made good progress, with partners, in relation to the provision of alcohol and drug services. The number of people with a substance misuse problem that the council is working with has increased during 2006-07 and the council achieved 94% of its target to retain drug misusers in treatment programmes for 12 weeks or over.
- Relationships with the newly reconfigured Primary Care Trusts have been established and, with the exception of North Lancashire Primary Care Trust, have been formalised through partnership agreements.
- The council is working well in ensuring that it is effective in ensuring that hospital discharges are not delayed, with only one delayed discharge per 100,000 of the population aged 65 and over being attributable to the council.
**Key areas for improvement**

- The council needs to continue to work with the Primary Care Trust in order to provide more community based support for older people with mental health needs.
- Work in identifying and providing social care and health support to people with long term conditions is underway, with evidence of some joint work and training initiatives. The council is aware that this work is in its early stages and that further progress, together with partners, is needed.
- Delayed discharges overall are lower than comparator councils and represent very good performance, but have increased in the year. Work with health partners needs to continue to identify the reasons for the delays so that preventative strategies and services impact on these figures in 2008-09.
- Robust systems to record the reviews of people with mental health needs are needed to ensure that people’s needs continue to be met by the support provided.

**Improved quality of life**

Lancashire County Council ensures the independence of people who use services and their carers, including those in need of a specialist service. There is a strong and developing focus on early prevention to reduce higher level support services to ensure an improved quality of life. There is evidence of a positive impact on improving the quality of life for people through Telecare and the Falls strategy, and also services to carers becoming more accessible through access to carers’ assessments.
**Key strengths**

- The council has increased the provision of low-level support to people with learning disabilities and people with mental health needs to help them live at home. Performance is rated as very good. It has also continued its good performance in relation to supporting physically disabled people to live at home.

- There is evidence that the council is providing good levels of support to carers through the provision of breaks and other services. The council was successful in improving the accessibility of breaks to black and minority ethnic carers during the year.

- The needs of people with physical disabilities are addressed by the timely delivery of equipment and completion of minor adaptations and by a reduction in the time waiting for a major adaptation. 84% of people in Lancashire receive equipment within 7 days; the average waiting time for minor adaptations decreased from 3.5 to 3 weeks; and work on major adaptations now begins in less than 8 weeks from assessment.

- The council is making good progress in relation to preventative services. Very good levels of intensive home care are provided, a reablement service has been established, and a falls prevention strategy, with a particular emphasis on medication management, is in place. There is evidence that these strategies are beginning to impact on improved outcomes for people in Lancashire.

- Although the council reports slow initial take up of Telecare, many initiatives during 2006-07 should impact on provision of the service in the coming year. There is evidence that the provision of Telecare is improving the quality of life of people in receipt of the service.

- The council has made good progress in providing services for deaf-blind adults.
**Key areas for improvement**

- The number of older people receiving low levels of support in order to help them to live at home has decreased and prompts questions about performance. The council provides a number of credible reasons for this decrease, including a move towards more people accessing directly non care funded services. The council needs to ensure that it has systems in place in order to ensure that people are receiving services that meet their needs. The further development of the low level needs framework may inform this area.
- The council provided 4 additional extra care housing places during 2006-07 and also reports that innovative schemes have been developed to provide enhanced care to people in sheltered housing. The council is aware that further provision of extra care housing is needed. Funding has been secured and the council is confident that an additional 59 extra care housing units will be built during 2007-08.
- The local area market analyser (LAMA) indicates that the percentage of council run care homes meeting National Minimum Standards decreased slightly and this is slightly below that of the private sector.

**Making a positive contribution**

Lancashire County Council encourages people to be involved in policy development and decision-making and there is evidence of improved outcomes as a result of this consultation. The council has developed good relationships with the Voluntary Sector and aims to build these further as part of its well being and prevention strategies.
**Key strengths**
- The council has made some progress in establishing systems that enable people to undertake self assessments through the provision of an ‘on line’ questionnaire on the council’s website, together with an on line self referral form. This will require further development in order to provide this service to people not able to access the website.
- People who use services and their carers, across most client groups, are effectively engaged in influencing support processes and services. The council has had some success in engaging black and minority ethnic (BME) communities, for example through the Asian Carers group and survey of BME elders. This work is well embedded in the council and well established partnership boards provide strategic influence through local strategic partnerships.
- The council has an in-house volunteer service, which provides support to 400 people. The council reports that it has mature and established relationships with the Voluntary, Community and Faith Sectors. The newly appointed Programme Director of Well Being and Prevention is charged with building on these relationships during 2007-08.

**Key areas for improvement**
- The council has identified that further development is needed to improve information services and establish forums for engagement with people with HIV and AIDS, and also further development of the forum for people who misuse drugs and alcohol.

**Increased choice and control**

Lancashire County Council ensures people have access to timely care management processes and provides people, including young people approaching adulthood, with sufficient information to enable them to make an informed choice. The single assessment process needs to develop further as this has not progressed as the council planned. A broad range of services is provided, but further progress is needed in encouraging more self directed care.
**Key strengths**

- There is good evidence that the council provides effective and improved assessment and care management processes. The council has made improvements in relation to the timeliness of assessments commencing within 48 hours, and being completed within 2 weeks and 4 weeks. The percentage of those receiving a service within 4 weeks of their assessment increased to 96% and is very good performance, although less people received a service following assessment. The council improved performance so that now 96% of people assessed for a service receive a statement of their needs. The council has received positive feedback in relation to the quality of the assessment process.

- The range of preventative services provided by the council is impacting on reducing the numbers of adults and older people admitted to residential care.

- Good progress has been made in reducing the numbers of people with learning disabilities living in permanent residential accommodation.

- The council has improved performance in relation to the provision of direct payments and this performance is rated good, although lower than comparator councils. The council has adopted the ‘In Control’ principles in order to facilitate self directed support for people with learning disabilities. There has also been significant improvement in the take up of funding from the Independent Living Fund as a result of the council employing six dedicated temporary posts for this purpose.

- The council has complied with the Local Authority Social Services Complaints (England) Regulations 2006 by designating the Head of Strategic Development as the Complaints Manager within Adult and Community Services, thus making complaints investigations independent from operational line managers and direct service providers. There is evidence that the council is using the information from complaints to improve the experience of people accessing social care services.

- There is evidence that advocacy services are available to adults using social care.

- The council has effective arrangements in place in order to ensure that support planning takes place for young people moving from children’s services to adults.
**Key areas for improvement**

- The council has not made the progress it anticipated in relation to the implementation of the single assessment process. Progress is not in line with that of other councils, although it is acknowledged that the council has pursued an electronic rather than paper record.
- In order to promote increased choice and individualised care, continued work is needed to further increase the numbers of people utilising direct payments and other forms of self directed support, including individualised budgets.
- The Crisis Resolution/Home Treatment service needs further development so that this is available across the county.

**Freedom from discrimination or harassment**

Lancashire County Council has clear published eligibility criteria and people, including people funding their own care, are able to access an assessment for services through the council. There is evidence that the council commissions specialist services with advocacy and interpreting services available for the needs of the diverse population. The council has made good progress in increasing the take up of services from under represented groups.

**Key strengths**

- Eligibility criteria are clear and easy to understand and are currently set at moderate, although the council is considering changing the criteria to substantial during 2007-08.
- The council has improved the accessibility of services to ethnic communities, as assessments and provision of a service following assessment are now provided to ethnic communities in a similar ratio to that of the whole community across all client groups.
- Action is being taken by the council to increase the take up of services for under-represented groups. For example, a number of initiatives aimed at raising awareness of social care services among BME communities have been undertaken in mental health services.
- The council has published its Disability Equality Scheme and Race Equality Scheme within its overarching corporate equality strategy ‘Making a Difference’. The strategy has been developed following consultation with council employees and with people who use social services. The council is working towards level 5 of the Race Equality Standard.
Key areas for improvement
- None.

Economic well being

The council, in partnership with other agencies, assists people to access and maximise their income and therefore improve their economic wellbeing. The council supports people into paid and voluntary work and has modernised its employment services to assist people to access the right employment opportunities and increase choices available. Further work is needed to maximise such opportunities. The council is providing support to carers to retain or return to employment.

Key strengths
- More people are accessing continuing health care funding and disputes over funding are effectively dealt with at the relevant panel.
- The council, together with partners, has developed and modernised support services to help people into paid and voluntary work. This includes the modernisation of mental health employment services, resulting in the closure of the sheltered employments scheme and the development of an integrated health and social care employment service; and the introduction of a pre-employment course for disabled adults. These support services are beginning to have positive impact on access to paid and voluntary employment.
- Support services to boost the confidence of carers and develop new skills, together with direct support through direct payments, and respite care etc, are made available to help carers return to work or remain in employment.
- Effective processes in partnership with the Welfare Rights Service and voluntary sector are in place to ensure that local residents likely to need social care assistance maximise their income. This includes a welfare check during the fair charging assessment and training for social care staff in welfare benefits. Work has been undertaken to identify where take up of benefits is low and the positive outcome of the interventions is that over £20 million was generated in additional benefits for people in Lancashire.

Key areas for improvement
- More people need to be supported into paid and voluntary work.
Maintaining personal dignity and respect

The council has made good progress in improving its safeguarding processes, but this important area of work requires further development in order to ensure that most people are safeguarded from abuse. The evidence provided confirms privacy and confidentiality are assured to ensure personal dignity and respect for people who use services.

Key strengths

• The council has established a Safeguarding Adults Action Plan in line with the guidance in No Secrets and the ADASS National Framework of Standards. A multi-agency Safeguarding Board, together with 3 local adults safeguarding networks, have been established across the county. The safeguarding coordinator and training posts are now established and taking forward this work.
• An Independent Mental Capacity Advocacy service has been established in partnership with neighbouring councils and staff have received initial Mental Capacity Act awareness training.
• The council has designated a number of Dignity in Care Champions, headed by the Director of Older People’s Services, to take forward the dignity agenda.
• 97% of older people admitted to residential care are accommodated in single rooms.

Key areas for improvement

• Whilst good progress has been made in relation to safeguarding adults, there is a need for a continuing focus on this area, so that the newly established multi-agency safeguarding board begins to impact on improving multi agency working. During the year, a high number of council staff accessed safeguarding adults training, but this is very low compared to other councils. It is essential to ensure that data in relation to safeguarding referrals is robust. The system of alerting safeguarding concerns could be simplified to ensure easier access by furthering plans to move this function to the customer service centre, thus providing one point of contact.
• The council provides written policies in relation to personal and sexual relationships for all its ‘in house’ services and staff receive training specific to this area of work. It would be helpful if the written guidance were extended in order to cover other services purchased by the council.
Capacity to improve

There is effective leadership in place and the council has a clear focus on both improving outcomes for the community and improving efficiency. People who use services are consulted on provision as part of strategic planning. Workforce planning is effective and sound performance management arrangements are in place. The council has begun to work with the Director of Public Health to provide a detailed analysis of the needs of groups in the population. Joint commissioning and integrated commissioning arrangements are in place with relevant Primary Care Trusts and work to develop an overarching commissioning strategy should follow from the development of the needs analysis. It will be important to ensure that the needs of people who fund their own care are included within the strategy. The council secures services that provide value for money with good use of joint commissioning.

Key strengths

LEADERSHIP

- The council achieved a four star rating in its Comprehensive Performance Assessment, with a direction of travel judgement of improving well.
- Council plans for improvement have resulted in improved year on year performance, resulting in better outcomes for local people. It has continued to modernise the delivery of services, in line with national and local priorities.
- The council has demonstrated success in relation to the involvement of people who use services and their carers in strategic planning and is making good progress in moving towards more preventative services, by moving the focus towards lower level needs.
- The council continues to have a strong and effective approach to performance management. Overview and Scrutiny Committees have been restructured and are using performance information more effectively as a basis for their decisions. In addition to performance information on the electronic systems, which can be drilled down to individual team level for performance monitoring, the council is also developing qualitative measures based on feedback from people using services.
- The council has reported no recruitment and retention difficulties in the year.
- The council has continued to provide a Leadership Development Programme for all managers in the adult services directorate.
- The council has achieved success in reducing sickness absence and plans to reduce this further in the coming year.
COMMISSIONING AND USE OF RESOURCES
• The improvements in performance have been achieved, whilst also undertaking a programme of efficiency savings.
• The Audit Commission has judged the medium term financial strategy, budgets and capital programme to be soundly based.
• The Audit Commission also found that the council is providing good value for money.
• The council has a preferred provider scheme which independent sector providers can only join when they have demonstrated quality in areas defined by the council. Additional premiums are paid to encourage specialist provision, for example dementia care. Systems are in place to monitor the quality of care provided, which will be subject to further refinement during 2007-08.

Key areas for improvement
LEADERSHIP
• None.

COMMISSIONING AND USE OF RESOURCES
• The council acknowledges it needs to continue to work with the Director of Public Health in the development of a Joint Strategic Needs Assessment, and strategic overarching commissioning framework, and ensure that this addresses the needs of both people in receipt of public funding and people funding their own care.
• The council acknowledges there is a need for individual service level agreements to be established for all voluntary organisations in receipt of council funding and for better systems for monitoring the quality of service provided by the voluntary sector to ensure that consistency across the county.