

BRIEFING NOTE

TO: SOCIAL CARE AND INCLUSION SCRUTINY AND PERFORMANCE PANEL
DATE: 18 NOVEMBER 2010

**RE: COMMUNITY-BASED SUPPORT SERVICES FOR VULNERABLE ADULTS
WORKING GROUP REPORT**

Purpose

To receive the report of the Community-Based Support Services for Vulnerable Adults working group established by the Panel at its meeting on 10 June 2010.

Background

The Panel identified community-based support services for vulnerable adults as an important subject to review. The working group investigated a number of issues, including the Community Alarm System (CAS), as well as proposed changes to the council's in house home care and Neighbourhood Community Officer (NCO) services.

The Panel are asked to consider the final report and approve the recommendations for submission to Cabinet.

Recommendations

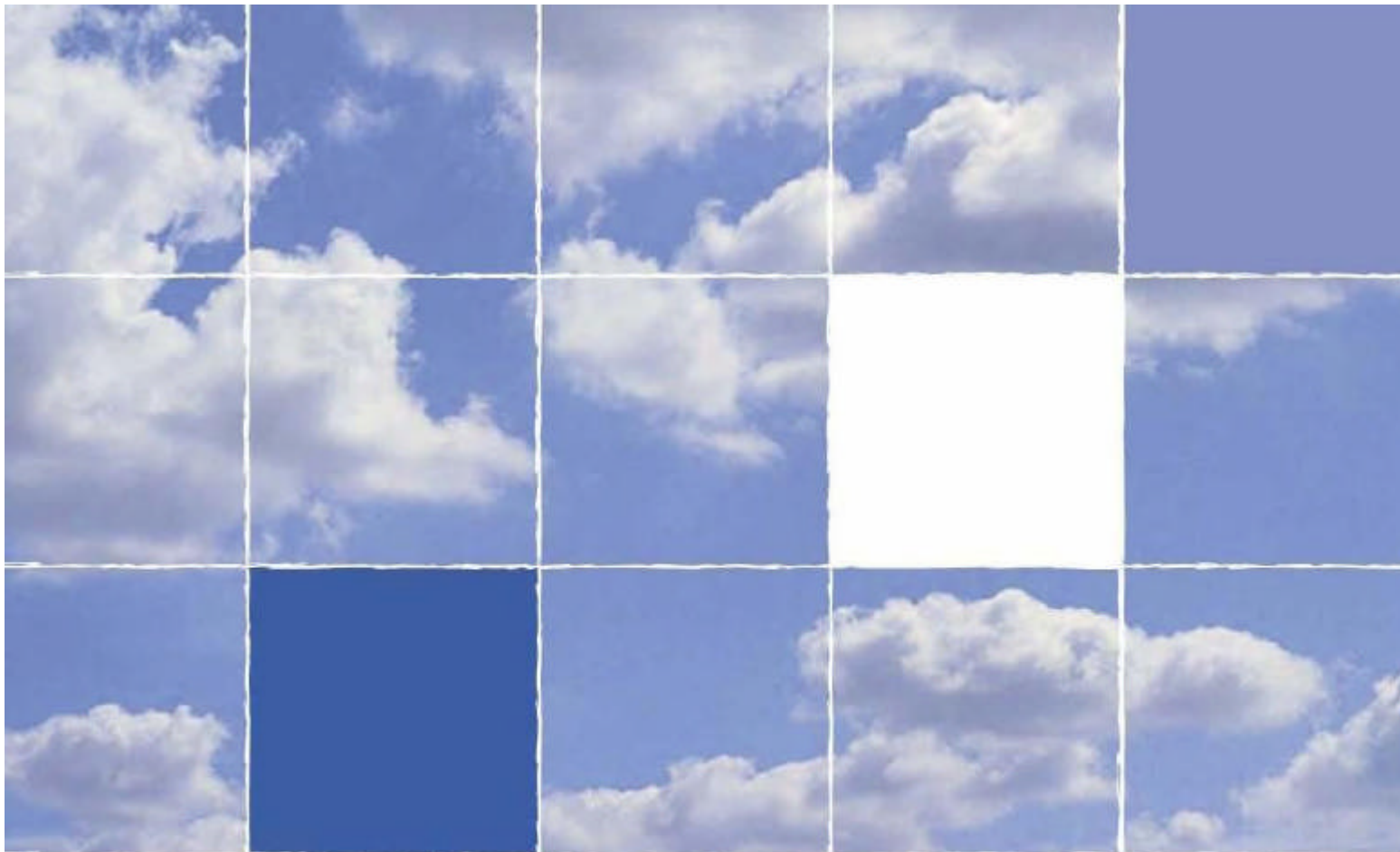
That:

- 1. it was important that Community Alarm Schemes (CAS) continued to be supported in Walsall, acknowledging the strategic objective to move all users to the newer pendant system;**
- 2. effective joint working between the council and Walsall Housing Group (whg) operated to ensure that local need for community alarms was met, with a joint-statement made by the two organisations to provide reassurance that this would continue to be the case in the future and that no users would "fall through the net";**
- 3. the council retained the capacity of a well-developed in house team of Neighbourhood Community Officers (NCOs) and home care assistants.**

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Review of community-based support services for vulnerable adults

**Report by the community-based support
services for vulnerable adults working
group**

**To be presented to the Social Care and Inclusion Panel
– 18 November 2010**



Walsall Council

Chair's Foreword

The working group was established to consider a number of issues related to the introduction of restructured community-based services by the council and local partners aimed at the delivery of a multi-level response service across the borough for vulnerable adults.

I would like to thank all those who have assisted the working group over the last few months including, the other members of the working group, officers from within Social Care and Inclusion and Procurement, as well as representatives from Walsall Housing Group (whg), union representatives and Councillor Pete Smith.



*Councillor Tim Oliver
Lead Member, in house home care working group
Chair, Social Care and Inclusion Scrutiny and Performance
Panel*



*Councillor
Joan Barton*



*Councillor Rose
Burley*



Councillor Val Woodruff



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Introduction

The Social Care and Inclusion Scrutiny and Performance Panel identified the re-structuring of community-based services for vulnerable adults as the appropriate issue to investigate during the 2010/11 municipal year. The Panel were keen to understand how the council's in house home care service, neighbourhood community officers and community alarms service would be restructured in partnership with the Police and Fire Service to assist this group of local residents in maintaining their independence.

Terms of Reference

The working group held an initial meeting to consider its terms of reference.

The agreed terms of reference were:

1. Review the restructuring of in house home care and Neighbourhood Community Officer services;
2. Review the restructuring of the Community Alarms Service;
3. Review the development of a cross-agency neighbourhood support service for older and vulnerable adults in the borough. This issue will form a later part of the working group's activity.

The working group's full terms of reference can be viewed at appendix 3.

Membership

Councillor Tim Oliver	Lead Member, <i>Labour</i>
Councillor Val Woodruff	<i>Liberal Democrat</i>
Councillor Joan Barton	<i>Labour</i>
Councillor Rose Burley	<i>Labour</i>

The working group's investigation was assisted by a number of witnesses:

Michael Hicklin	Service Manager (Provision)
Julie Bride	Assistive Technology & Telehealthcare Manager
Gary Fulford	Group Chief Executive, whg
Rob Gilham	Director of Housing Services, whg
Debra Berry	Head of Housing Services, whg
Sue Laws	Unison
Jim Goodall	Unison
Doug Matthews	Unite
Dave Harrison	Unite

Methodology

In order to complete their work the working group held two meetings. This included discussions regarding key issues with officers, a local Councillor, union representatives and Walsall Housing Group management team:

The working group held three witness sessions and spoke to:

- Trade union representatives from Unite and Unison;
- Councillor Pete Smith;
- WHG representatives

Report Format

The report is a summary of the evidence the working group received along with comments and suggestions for future action.

Community-based support services for vulnerable adults

Community Alarms Service

Council perspective:

How Community Alarm Systems (CAS) operate

CAS currently offers two types of alarm connection. There are scheme properties which have the system hard wired into the fabric of the building which then connects to a central telephone line, and properties that have dispersed alarm units, these are individual units that connect to an individual's telephone line. There are around 150 schemes in operation supporting approximately 4,000 people. whg owns approximately 2,300 properties that contain a hard wired system in the fabric of the building. The service operates to the Telecare Services Association (TSA), which accredits CAS, pre-requisite of answering 98.5% of emergency calls within 1 minute, and 99% within 3 minutes.

Recent developments

In 2007 British Telecom (B.T.) announced that they were introducing the 21st Century Network (21 CN). The impact of this is that schemes which are pre-1992 will not be supported and will become obsolete. The council advised all housing associations via letter of these changes and offered technical support.

In response some housing associations have undertaken their own decommissioning plans to replace their old alarm systems. However, most other housing schemes did not respond to the letter or other promotional activity, including coverage in local print media and the council's internet pages.

New initiative

A new partnership initiative is also underway between the council and the Fire Service. Old and vulnerable adults receive fire safety checks and at the same time smoke alarms and pendant alarms are also fitted, together with key safes. These schemes can also include a bogus caller system with a silent alert button to the emergency services, where a need is identified by the police. Pendants also have a speech module and operate on a reasonably wide range.

This is provided via a limited internal funding stream for any vulnerable residents who have broad medical needs as determined via a social worker assessment. It is anticipated that in the future funding the schemes will attract a charge.

Issues of Concern

The working group met with Councillor Pete Smith who highlighted potential points of concern in relation to elderly residents in receipt of Community Alarm Systems (CAS).

- It was Councillor Smith's understanding that in certain circumstances elderly local residents would receive letters from whg explaining that their existing alarm system was being decommissioned and that they would have to apply for a pendant system;
- It was also Councillor Smith's understanding that where a system has failed and the cost of repair is in excess of £500 whg take the decision to decommission as they consider them uneconomical at that point. This position was confirmed by the council's Assistive Technology & Telehealthcare Manager. It was the council's understanding that where a CAS is removed a resident has to demonstrate that they meet certain criteria in order to receive a pendant system;
- The working group was pleased to note that in the specific instance highlighted by Councillor Smith a positive conclusion was achieved. A Neighbourhood Community Officer (NCO) provided assistance to the elderly resident in completing the appropriate forms and a pendant was installed within days. However, it was clear that such a scenario created the potential risk of vulnerable adult residents not having access to the CAS.

The view of the working group

The working group welcomed this scheme and the praised council officers for the partnership activity undertaken with the Fire Service. The group also observed that this type of activity was critical in enabling individuals to remain independent and in their own homes;

The working group observed that it might be helpful if a cost/ benefit analysis of tele-health-care was undertaken. This would be particularly helpful in relation to its importance as a preventative service and reducing care costs over the longer term;

The working group were very concerned regarding the apparent approach being taken to the operation of CAS. In particular, where a CAS is removed from an existing service user and the need for certain criterion to be met before a pendant system can be fitted;

The working group were also concerned that there was a danger of whg preferring to decommission schemes as the cost of replacement is borne by the council. With a further issue the possibility that whg might choose to move the not economical to repair a CAS break point to a much low level e.g. reduced from £500 to £100.

The working group expressed strongly the importance of avoiding unmet need and that no one was allowed to simply fall through the net. Council officers had explained that it was difficult to know when a resident's alarm system has been decommissioned as whg do not always provide guidance. It was determined that it would be important to invite the whg management team to meet with the working group to discuss their perspective of CAS.

Meeting with Walsall Housing Group (whg)

The working group met with Gary Fulford, Group Chief Executive, whg, Rob Gilham, Director of Housing Services, whg and Debra Berry, Head of Housing Services, whg.

- whg explained that they had 2,294 customers with hard wired alarms. However, these were not necessarily older and/ or vulnerable residents. In many instances alarms were not in use and residents frequently requested the removal of alarms. whg have decommissioned approximately 250 alarms over 6 schemes. The working group noted that this included schemes that had been decommissioned by the council prior to the introduction of the protocol. whg also explained to the working group that they had been informed by the council that it may not be possible to secure a maintenance contract after the current financial year for the CAS due to the system becoming obsolete;
- whg informed the working group that the management of the repair of CAS was originally a pre-stock transfer issue. It became apparent that work was being undertaken by a contractor on behalf of the council. However, this work was carried out without reference to whg who only became aware of this activity upon receipt of an invoice for £200,000;
- The working group heard that since 2009 a protocol (appendix 2) had been place between whg and the council to address the issues set out above. This agreement includes that where an alarm repair costs in excess of £500 WHG will have three days to determine if they wish to repair a system or take an alternative course of action. For example, this might result in individuals over 60 years of age being referred for a social care assessment to decide whether an alarm system is required;
- The working group identified other concerns including delays in the installation of CAS or other parts of the process and the potential impact on service users.

Current issues:

whg explained to the working group that existing notional age restrictions for some properties are under review as there is currently limited demand at present for property from older residents (60+) while demand amongst younger age groups is growing. This might mean the removal of CAS where they are not required.

- Individual social care assessments are undertaken to determine the need for a CAS by the council, with assistance provided by whg in the making of applications by individuals;
- Difficulties in undertaking this activity have been experienced and include customers not engaging or refusing to take part in assessment. If this type of problem is encountered, or there is difficulty in contacting an individual whg now advises the council;
- whg were keen to state to the working group that it always seeks to work jointly with the council on issues relating to the decommissioning of CAS.

The view of the working group

- *The working group welcomed the protocol but identified the risk that those who were not known to the system might “fall through the net”. This danger might also apply as a consequence of a failure to share knowledge or limited interaction between the council and whg;*
- *The working group also welcomed a proposed further meeting between council officers and whg to discuss the issues raised. Subsequently a meeting took place in October 2010, outcomes included a revised protocol (appendix 1);*
- *It was noted that at present the CAS is used approximately twice a month suggesting that the system experiences relatively low demand. However, it was the view of the working group that it is likely that there will be more pressure from government going forward evidence of the local provision of support to enable individuals to remain independent. There are currently over 3,000 whg residents over the age of 65 who do not take part in the scheme. However, their increasing vulnerability means that demand from this group for CAS will grow in the future;*
- *The working group wished to see an acceleration of a rolling programme to replace CAS with pendant schemes without detriment to existing users.*

Review of the restructuring of in house home care and Neighbourhood Community Officer (NCO) services

Impact of changes within Adult Social Care

Council perspective:

The working group heard that the proposed changes represented a move to more flexible care services. These service will be adults 18+, rather the previously only those 65+, with critical need and pathway to re-ablement key.

- The objective is the development of six-week care pathways supported by social care and health services. For example, frail elderly care pathway: first 72 hours 24/7 support; followed by five visits within each 24 hour period; the number of visits would be reduced over subsequent 24 hour periods for up to six weeks.
- There are 165 staff within the in house home care service, with 34 NCOs. The restructure will consider the function of the care assistant, contact from NCOs and the use of self-directed care services. Across the six area bases NCOs and home care assistants will be split into three groups of two;
- The working group learned that the timescale for implementation was April 2011 with the consultation with staff set to conclude at end of October 2010;
- NCOs are not responsible for care delivery. Instead they provide support for completing benefit forms and undertake safe and well checks. The care response element will continue to be provided by care services.

The view of the working group

- *The working group welcomed the proposed improvements to services as well as the structured consultation with staff. However, these were services that have witnessed significant changes and it would be important to meet with union representatives to gain their perspective on the impact of proposals on staff.*

Review of the restructuring of in house home care and Neighbourhood Community Officer (NCO) services

Impact of changes within Adult Social Care: Meeting with union representatives

The working group met with Sue Laws (Unison), Jim Goodall (Unison), Doug Matthews (Unite) and Dave Harrison (Unite).

The union representatives highlighted a number of issues:

- Concerns were expressed regarding work being undertaken to develop lean specialist services, including increasingly the flexibility of staff to undertake other work. There is a fear amongst the workforce that this may be preparation for services to be out-sourced to the private sector. However, the Executive Director for Social Care and Inclusion has indicated his preference for the retention of an in house service;
- Clarification as to whether there would be a number of different care pathways developed, or whether a generic pathway approach would be used;
- Concerns were voiced regarding the possible impact on services if joint funding provided by the NHS was reduced;
- Reassurance was also sought from senior officers that the distinctions between the role of a home care assistant and a NCO were fully recognised. In particular, that there was no overlapping of duties, but rather clearly defined roles. However, the union representatives were keen to stress that they accepted the principle that developing the flexibility of job descriptions will enable jobs to be retained.

Operational issues

A home care working group currently operates consisting of union representatives and management which is revising the home care assistant job description. This process has highlighting a number of concerns, including:

- i. the revised job description includes the requirement to administer classified, as well as prescribed medication;
- ii. a further concern exists in relation to the handling of cash on behalf of care recipients. This includes a number of security issues. While some action has been taken, for example three signatures are required, there are doubts regarding the security of any system when providing support for care recipients with dementia;

- iii. a further concern relating to ensuring that NCOs would be asked to operate in areas that were reasonably located for their home address.

The view of the working group

The working group highlighted the importance of integrating health and social care which demanded effective use of funding and resources. While the working group agreed with the union representatives that an in house service must be retained, it also noted that at this point the unions were not portraying any alarm at the general direction being taken. However, the working group was keen for a satisfactory conclusion to the operational issues that had been raised;

The working group noted the concerns expressed by the union representatives regarding the possibility of services being prepared for out sourcing. It would be important that the council retained the capacity of a well-developed in house team of NCOs and home care assistants, both in terms of flexibility and emergency or crisis response;

The working group also noted the concerns expressed in relation to the PCT if the service is too reliant on joint funding.



Recommendations

That:

1. it was important that **Community Alarm Schemes (CAS)** continued to be supported in Walsall, acknowledging the strategic objective to move all users to the newer pendant system;
2. effective joint working between the council and **Walsall Housing Group (whg)** operated to ensure that local need for community alarms was met, with a joint-statement made by the two organisations to provide reassurance that this would continue to be the case in the future and that no users would “fall through the net”;
3. the council retained the capacity of a well-developed in house team of **Neighbourhood Community Officers (NCOs)** and home care assistants.



Whg/ Community Alarm Services Repairs Reporting Protocol

1. As agreed on 15th October 2010, the 11th August 2009 protocol would be updated immediately to reflect change to repairs over £500 system.
2. Community Alarm Services (CAS) will carry out all repairs to hard wired community alarms in whg properties up to £500 per repair.
3. whg will pay the invoices for repair work, and they are to be addressed FAO Debra Berry
4. Community Alarms will advise within 1 working day of any repairs that will cost more than £500 in an email FAO Debra Berry and Jayne Cooper. Repairs costing over £500 do not provide value for money and therefore any systems costing over £500 for repairs will be decommissioned.
5. CAS are to work with Tunstall to improve the reporting frequency to identify alarms in need of repair ensuring there is minimum delay in response
6. Whg will contact all customers affected by the alarm system to be decommissioned, to offer advice and support within 3 working days of notification. Information will include re-housing options and how to make a referral to social services for a dispersed alarm- either temporary or permanent- if the customer feels they require the alarm service.
7. As soon as CAS are aware of a major repair issue, they will cross reference the information they hold to identify vulnerable customers who will require an alarm. A Walsall Council colleague will visit to the vulnerable customer to issue a dispersed style of alarm as soon as possible.
8. Reports of repairs or concerns from CAS are to be addressed at all times to Debra Berry (debra.berry@whgrp.co.uk) and Jayne Cooper (jayne.cooper@whgrp.co.uk) – to both addresses at all times.
9. All whg colleagues have been advised not to record or organise a repair should they be contacted by a colleagues from CAS. They will be informing the CAS colleague to follow the agreed protocol.
10. Unless whg has received notification of issues via the protocol agreed it will not be accountable to resolving them.
11. Jayne Cooper and Julie Bride will continue to meet quarterly to review this arrangement.



Whg/ Community Alarm Services Repairs Reporting Protocol

12. As agreed on 11th August 2009, Community Alarm Services (CAS) will carry out all repairs to hard wired community alarms in whg properties up to £500 per repair.
13. whg will pay the invoices for repair work, and they are to be addressed FAO Debra Berry
14. Community Alarms will advise within 1 working day of any repairs that will cost more than £500 in an email FAO Debra Berry and Jayne Cooper.
15. Jayne Cooper and Debra Berry will advise within 3 working days if whg wish to pursue this repair with CAS or have an alternative strategy.
16. whg will contact all customers over the age of 60 years affected by the alarm system requiring repair to offer advice and choices within 5 working days of notification. Choices will include information on re-housing options and information on making a referral to social services for a dispersed alarm- either temporary or permanent- if the customer feels they requires the alarm service.
17. whg will decide to agree or organise repairs over £500 if they offer value for money and make business sense. CAS will be advised of any decommissioning of the alarm service to be carried out regardless of reasons but could include cost of repair or age of the system. Customers living in blocks to be decommissioned and over the age of 60 years will be given advice as in point 6.
18. Reports of repairs or concerns from CAS are to be addressed at all times to Debra Berry (debra.berry@whgrp.co.uk) and Jayne Cooper (jayne.cooper@whgrp.co.uk) – to both addresses at all times.
19. All whg colleagues have been advised not to record or organise a repair should they be contacted by a colleagues from CAS. They will be informing the CAS colleague to follow the agreed protocol.
20. Unless whg has received notification of issues via the protocol agreed it will not be accountable to resolving them.
21. Jayne Cooper and Julie Robinson will meet quarterly to review this arrangement. First meeting to be held in September 09. whg will arrange dates and meeting room.

Appendix 3

Work Group Name:	In House Homecare / NCO / CSA Response Service
Panel:	Social Care & Inclusion and Performance Panel
Municipal Year:	20010/11
Lead Member:	Councillor Oliver
Lead Officer:	Mick Hicklin
Support Officer:	Matt Underhill
Membership:	Cllr Oliver; Cllr Burley; Cllr Woodruff; Cllr Barton

1.	Context
	The In House Home Care Service, Neighbourhood Community Officers and Community Alarms Service are going to restructure in partnership with the Police and Fire Service to deliver a multi-level response service across the borough for vulnerable adults.
2.	Objectives
	<p>The development of cohesive neighbourhood support service for older and vulnerable adults in Walsall: aimed at maintaining self directed independence and the prevention of unnecessary care packages.</p> <p>The service would be at the heart of a preventative strategy; and intrinsically linked to any initiative or pathway that attempts to prevent hospital admissions.</p>
3.	Scope
	<p>Vulnerable adults need choice and control in their lives to help them maintain independence. In the Department of Health report <i>Use of Resources in Adult Social Care</i> (DH OCT 2009) four elements are listed as being crucial to the development of modern services. They are:</p> <ul style="list-style-type: none"> • Development of a universal service • Early Intervention • Self-directed support • Development of Social Capital <p>Resources in Adult Social Care the need to focus on supporting people at home.</p> <p>The Social Exclusion Unit suggested that cross agency partnership working; in effect the virtual or actual joining up of services for older people, would improve outcomes for those who were starting to be affected by their age, frailty or particular condition.</p> <p>Services in Walsall remain unconnected and silo based. The recent restructure in Adult Social Care has moved away from client stereotypes. This will help commissioners and operational staff to re-develop outcome focused services around future pathways.</p>

	Presently however, the residual in-house services are in need of further development and re-alignment.
6.	Equalities Implications
	<p>The re structured services will offer support, tackle inequalities and encourages independence.</p> <p>This service is intended to be in line with key government direction outlined in the Department of Health report <i>Use of Resources in Adult Social Care</i> (DH OCT 2009)</p> <p>An equality impact assessment has been initiated.</p> <p>Walsall Councils Equality Scheme (disability, gender, and race) 2010-2013 talks about the population of Walsall and details the equality gaps. Review how our current and future client base compares against these; links to diverse communities via Women's Groups, Disability Groups, Black and Minority Ethnic Groups.</p>
4.	Who else will you want to take part?
	<p>Operational Officers and Managers. Police. Fire Service. Voluntary and private sectors. Access & Response Centre. Trade Unions.</p>
5.	Timescales & Reporting Schedule
	This will happen over the next 6-12 months with a final implementation date of 01/04/11
6.	Risk factors
	<ul style="list-style-type: none"> • Availability of suitably skilled staff. • Availability of suitable community resources • Risk of displaced workforce. • Transition from traditional service model to reablement / enablement model