

Thurrock Coalition



Informing future Thurrock Council Local Accounts through Coproduction

Introduction

The Objective of this Report

This Report will provide an evidence base upon which Thurrock Council can refresh and update the Adult Social Care Local Account for 2018 onwards that takes account of and acts upon the lived experiences, views, feedback and needs of individuals, family members and carers as well as the Social Work and Third Sector professionals working in Thurrock.

About Thurrock Coalition

As the formally recognised User-Led Organisation for Thurrock, Thurrock Coalition has been set up to ensure that individuals get all the information they may require to get the support and care that they or their families /relatives need. We link to a whole range of groups and individuals in the borough. We know about the rights and entitlements of residents of Thurrock. We provide advice and information on a range of issues affecting disabled and older people. One of our main aims is to consult and engage with residents of Thurrock to help shape and influence Thurrock Council policies and strategies around Adult Social Care. We provide and deliver:

- Advice, Information and Guidance on a range of Disability-related issues
- Consultation & Engagement with Disabled people, older people, their families & carers
- Co-ordinating events to raise awareness of contemporary issues of concern to Thurrock residents.
- Specialised training to promote the Social Model of Disability, equality, diversity and inclusion - raising awareness of peoples' rights, responsibilities, duties and entitlements and to remove physical, environmental and attitudinal barriers that disable people.

Background to Local Accounts

The focus of Local Accounts centres upon letting individuals, family members and carers who are resident in a specific geographical area know about the vital role that Adult Social Care undertakes in terms of promoting and maintaining wellbeing, as well as who they key demographic groups are and also monitoring key progress and setting and measuring progress over a given period of time.

The current framework surrounding Local Accounts emerged following the abolition of the Care Quality Commission Annual Performance Assessment in 2011 and the subsequent move towards Self-Assessment by Local Authorities. There is, however, no specific guidance covering what should be in the Local Account. Generally speaking though, the document should include:

- An account of the quality and outcome priorities that the Council has set.
- Progress made in achieving these during the past year.

A summary of the current context and key challenges and developments facing Adult Social Care Directorates both nationally and locally can be found in the Appendices to this Report.

Local Accounts in Thurrock – A way forward

Local Accounts covering previous years in Thurrock, specifically 2016/17 identified 10 key areas of priority and achievement. The priorities were split in to 2 groups of 5 and discussed, and debated at 2 consecutive meetings (in April and May of 2017 respectively) of [Thurrock Diversity Network Limited](#), a Community Benefit Society, consisting of over 60 individual and organisational members with an active, campaigning interest in Disability and Diversity issues, championing lived experience examples and supporting effective change and service improvement through constructive dialogue with the Local Authority.

Thurrock Diversity Network Limited (TDN) ran workshops in April and May 2017 looking at the Local Account 2016/2017. TDN gathered questions and queries and suggestions on the 10 Priorities and sent them to the Senior staff in Thurrock Council Adult Social Care.

The Council analysed the feedback and compiled a response at the Disability Partnership Board in September 2017 with some formal recommendations and suggestions to improve future Local Accounts

Thurrock Diversity Network Limited forwarded a number of key questions and suggestions to the Co-Chairs of the Thurrock Disability Partnership Board, including the Assistant Director of Adults and Community Development, the identified issues were addressed and responded to at the September 2017 meeting of the Thurrock Disability Partnership Board.

3 Recommendations for future Local Accounts were then made by the Disability Partnership Board, namely:

- i) To Co-produce any future Local Account for Thurrock, in partnership with individuals, family members and carers with lived experience of local services, third sector and other interested parties.
- ii) To move from a 12-month cycle to 24 months to allow time for reflection, change and progress to be more effectively measured, built upon and celebrated.
- iii) For Local Account workshops to be facilitated by an external third party in collaboration with Thurrock Coalition.

The Local Authority also agreed that Future Local Accounts will:

- Be focussed on what service users and members of the public want to see in it

- Provide links to relevant websites where further information about projects can be sought.
- Provide more examples of successes and outcomes achieved.
- Be honest in what has gone wrong and what needs to be improved.

The Workshops – at a glance

The Workshops were facilitated by [Community Catalysts CIC](#) with operational and content support from [Thurrock Coalition](#). There were 3 separate workshops, each lasting approximately 3 hours, each aimed at a specific audience, a mix of individuals, family members, carers, Adult Social Care and third sector professionals.

The Workshops – the Process

Aimed at:

- Members of Thurrock Diversity Network who have lived or work experience of health and social care services and supports in Thurrock
- Members of the public who have experience of or an interest in health and social care services and supports in Thurrock
- Professionals and practitioners who deliver services or guide people through the health or care systems

Purpose:

- Inform people about the Local Account – its purpose and past progress
- Thank people who have been involved in the past for their contribution
- Demonstrate that contribution equals action and impact
- Engage people in contributing to a new Local Account

The Workshops – The Programme:

Adult Social Care in Thurrock

- What it is
- Current focus and challenges

What is the Local Account?

- What it is
- Why we do it
- What it covers

Looking back

- 2016/17 Local Account
- Gathering views on the 10 priority areas – Do participants recognise them? Are they the right priorities?
- Issues discussed, plans developed and action taken

Moving forward

- Things the Council is doing well
- Things the Council needs to improve
- Identifying and setting priorities for the future

Looking Back - The 2016/2017 Local Account Priorities

Participants were asked to consider the 10 Priorities from 2016/17 and discuss awareness of progress and achievements against each Priority, whether the Priorities are still relevant and to suggest some positive actions to consider. We have summarised the discussions below.

Priority 1: Continue to join up health and social care services through the Better Care Fund, to support people better

Summary of participant's views

- Thurrock First is established, the triage system is good in principle but people have experienced long delays and difficulties in getting through.
- Work still to be done on prevention
- Overall LACs are good, but some duplication in workload, individuals highlighted situations where there was a lack of specialism and a need to signpost to Third Sector organisations more effectively.
- Contact Information and referral options for LACs needs to be publicised to the general population. This feeds into a wider issue around publicising telephone and contact information on the Council's website as well as a wider Positive Marketing Strategy to celebrate the "visible" achievements of the Adult Social Care Directorate.
- In terms of integration, the various specific electronic systems need to be able to talk to one another and share information, including for example: LAS/LCS/SysmOne/NHS/Mobius as well as the specific teams on the ground: Hospital discharge/Community Team/Hospital Team – these all need streamlining.

Priority 2: Continue to strengthen communities and build community resilience by supporting small community based services

Summary of participant's views

- Individuals expressed the importance of having support to access the right activities in the community relevant to their age and respective peer group, so for example, not just bingo or crochet, but more active clubs such as dancing or computer training. Difficulties around mental health, isolation and loneliness were also highlighted, particularly in the evenings. Funding arrangements, complexities and longevity were also highlighted as a concern for participants.
- Community hubs and volunteers are good
- A discussion followed around the production of digital community asset maps and Stronger Together, and Thurrock First (as both organisations are producing such maps. There was a degree of confusion over how many maps existed, how they can be accessed and how best to use them, and whether the LACs had ongoing input
- More could be done to publicise the Social Prescribers project and the work they do, as a number of participants had not heard of them.
- Individuals also discussed Micro Enterprises, how to find out more and who has responsibility for ongoing quality assurance. Participants were of the view that Direct Payments and Micro Enterprises working well for Service Users who now get more choice and control

- There is room for further improvement of communication between professionals and groups which in turn can build upon further insight into promotion and referrals

Priority 3: Increase the use of direct payments to allow people to manage their own care

Summary of participant's views

- The new Direct Payments Project Manager Role is a really positive development. There is a need for people to be supported to be aware of all relevant Direct Payments information and responsibilities before signing up.
- There was a feeling that in terms of Mental Health there is a massive lack in uptake of Direct Payments.
- Micro enterprises are working well. Give(s) people choice and continuity
- There needs to be an effective and meaningful and local Direct Payments brokerage service
- There needs to be support available for individuals who lack capacity/understanding and have no family or friends? i.e. Discussion and awareness of the availability of legal protection for family/friends making decisions for people who lack capacity

Priority 4: Implement online self-assessments

Summary of participant's views

- The Local Authority should develop online carers assessments in co-production with the relevant third sector organisation(s)

Priority 5: Complete the re-modelling of home care services to improve choice and quality

Summary of participant's views

- For wellbeing / independent living – wellbeing is not promoted as a lack of accessibility through a lack of communication undermines the effectiveness of provision
- Care providers in a particular area sometimes don't have capacity to take on a care package. If a client can't manage a DP, what happens? Need to ensure a choice of providers in an area.
- What happens when micro agencies aren't micro? (For example, when they get too big).

Priority 6: Roll out the delivery of Shared Lives in Thurrock

Summary of participant's views

- Participants suggested that the initiative is really positive but the model and its potential needs to be publicised and communicated much better
- Short Breaks vs Shared Lives
- Participants discussed issues with transition from fostering into Shared Lives and potential implications on choice and control for individuals.

Priority 7 – Put in place an independent system to ensure that our processes to financially assess individuals are fit for purpose

Summary of participant's views

- Give people feedback in accessible formats
- Thurrock is good at asking people their views
- There is a need to improve financial assessments so people fully understand the process, and there various technical aspects, including, for example: what is covered under Disability-related expenditure
- There is a danger that financial assessments can be seen as intrusive so that care needs are not pursued. Reassurance and communication as to the reasoning and purpose of financial assessments need to be key considerations in this regard.

Priority 8: Re-tender the Healthwatch service to improve scope, ensuring quality of service

Summary of participant's views

- Good service for people struggling locally with under doctoring and concerns around hospital transport and the proposed changes to hospital services, including Orsett. What will the new contract say about advocating for patients and campaigning for positive service improvement in this specific context locally?
- People are still struggling to access timely healthcare appointments
- Need more services for individuals with sensory impairments

Priority 9: Develop a specialist autism service

Summary of participant's views

- The Autism Action Group urgently needs a Commissioning officer and permanent Local Authority Co-Chair.
- Is this Priority going to be wider than a housing project?
- Choice is key – 6 houses are commendable but is only the tip of the iceberg.
- Segregated housing is not great and the site is isolated
- What about housing for people with Dementia?

Priority 10: Keep vulnerable people safe

Summary of participant's views

- There used to be lots going on in my life – college, safety, cleaning, gardening. All stopped
- Safeguarding working well with Advocacy Services
- Needs a proper public campaign “Everyone’s business!”

Moving forward – Things the Council are doing well and things the Council need to improve

The workshop discussions then went on to discuss aspects of projects and initiatives that the Council are doing well, and secondly, elements that the Council needs to improve. We have collated some Key Positive Headlines and Aspects to improve, identified from across all 3 workshops. The full verbatim feedback appears in the Appendices to this Report.

Positive Headlines

- The wide range of Community Development Initiatives – Hubs, LACs and Micro Enterprises
- Supporting the Thurrock Coalition Lasting Power of Attorney Champions Project
- Work relating to Direct Payments
- Thurrock Carers Service
- Rapid Reablement and Assessment Service
- Health & Wellbeing pilot
- Building a vibrant care market
- Approach to Consultation and Co-production

Key aspects to improve

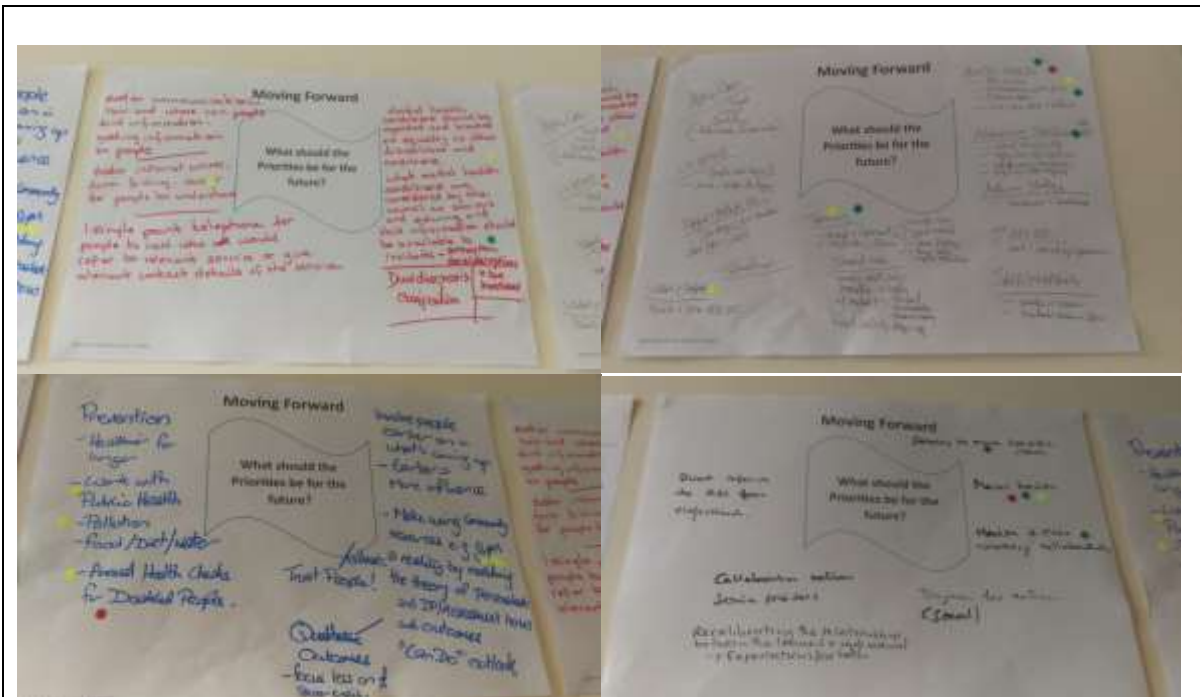
- Marketing, publicity and advertising what Adult Social Care funds (and does not fund). Raise the profile of Adult Social Care/Charges/Partners/Groups etc. Good News!
- Moving towards and supporting people with online assessments
- Home Care
- Referrals from LACs to specialist Third Sector advice
- Communication and publicity around Thurrock First, including managing call volumes

- The Council website – Need to include telephone numbers and make the site easy to navigate – Should adopt and use the Three Click Navigation Rule.¹ Information needs to be in a range of accessible formats for different needs – not just digital only.
- GP/Primary health, relationships and mental health – early intervention and prevention.
- Continue to improve joint working including the integration of IT systems, more intuitive information sharing, and “looking outside the box” for creative solution focussed assessments of need, using the array of Community Development Initiatives and Third Sector organisations

Moving Forward - Identifying and setting priorities for the future

Participants were then asked to discuss and note down areas of Priority for the Council to consider and take forward. Based upon the range of discussions and experiences shared, a total of 72 priority topics/issues were subsequently identified.

Each individual was asked to vote for their top 3 Priorities that were of most importance to them.



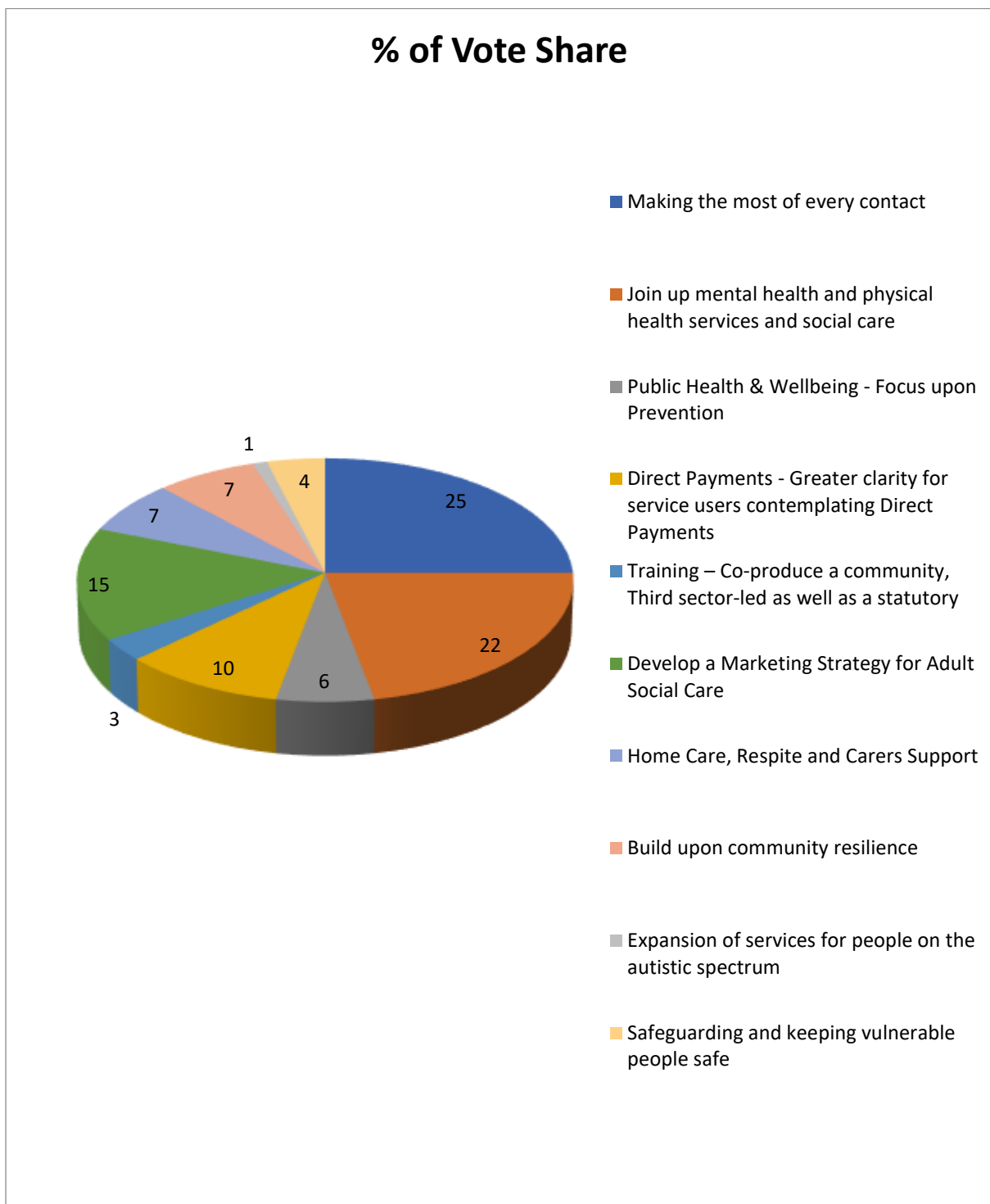
A sample of the Voting process for the new set of Priorities for the Thurrock Council Adult Social Care Local Account

¹ The *three-click rule* or *three click rule* is an unofficial *web design rule* concerning the design of *website navigation*. It suggests that a user of a *website* should be able to find any information with no more than *three* mouse *clicks*.

Voting for the Priorities

Following the voting, a degree of overlap became evident which then made it possible to group the priorities by topic and theme. The following 10 Priorities emerged from the discussions, views, suggestions and recommendations from all 3 workshops.

The overall percentage of vote share for each priority is displayed below:



The 10 Suggested Priorities for 2018-2020

1. **Making the most of every contact - Tell Us/Ask Us Once** – Ensure that systems are intuitive so that individuals only have to tell their story once, and are listened to and any changes are discussed and updated accordingly. Centralised IT systems, i.e. social care, NHS, Mental Health. Carry out an holistic approach to information gathering. Broaden access to information - Better internet access, No jargon! Make the website user-friendly. Embrace the changes in technology but still use a range of options - Online assessments – a good idea – useful for some but still need existing (face-to-face) process for those who need it (i.e. those not digitally active). Make published information easier for people to find, and understand, publish telephone numbers for specific departments on the Council website so individuals can talk to actual people.
2. **Join up mental health and physical health services and social care** – take a holistic and Social Model approach to impairments. For example – Mental Health conditions should be regarded and treated as equally as other impairments and conditions. Which mental health conditions are considered by the Council as serious and enduring? This information should be available to residents so they can consider options and be involved.
 - Pro Active
 - Integration with Adult Social Care
 - Focus upon Prevention and avoid crisis. Recognise that A&E is not an appropriate solution
 - Learning Difficulty and Mental Health and falling between the gaps is still a problem
 - Continue to join up Health & Social Care – focus upon investment, planning and implementation. Ensure services are established to meet specific needs and that health & social care are working collaboratively
 - Consider infrastructure and staffing investment as population ages and grows
3. **Public Health & Wellbeing - Focus upon Prevention** – healthier for longer – work with public health, consider effects and impact of:
 - Pollution
 - Food/diet, water quality
 - Annual health checks for Disabled people
4. **Direct Payments - Greater clarity for service users contemplating Direct Payments** around the administration, choices, options for support and how they can be used creatively. Recognition of the flexibility of Direct Payments by staff and individuals to foster collaborative working. Make using community resources e.g. the gym accessible in reality by matching the theory of Personalisation and DP/Assessment hours and outcomes not to resources/money. Focus on qualitative outcomes - focus less on the paper trail/process and resources. Trust people to make decisions – wise or unwise. Adopt a “can do” solution focussed outlook. Continually Co-produce and Review Direct Payment

policies alongside individuals who use the service. Further development of Direct Payments to meet individual needs, choice and control

5. Training – Co-produce a community, Third sector-led as well as a statutory offer –

include Thurrock Coalition and others (3rd sector delivery) and Thurrock Adult Community College:

- Save money
- Keep safe
- Equality, Diversity and Disability
- Digital intervention

6. Develop a Marketing Strategy for Adult Social Care

- What do you do?
- How do you tell us?
- Ordinary Language
- Digital AND non-digital
- Continue to engage with the voluntary sector
- More effective communication – good news / bad news / general sharing

7. Home Care, Respite and Carers Support

- Better support for carers – oversee the development online Carers assessments (where appropriate to the individual).
- Provide clarity and updates on home care options including Direct Payments
- Respite Services offer to be improved or be more flexible
- Home care should be taken back in house to ensure quality and safeguarding
- Look into HomeShare

8. Build upon community resilience - Re-invigorate Community Forums and provide each with a budget to spend to support local people, as they will be best placed to know who needs help and how to provide it. Continue to support voluntary groups as they are an essential cog in the model envisaged for community resilience – supporting volunteers is not cheap!

9. Expansion of services for people on the autistic spectrum – 6 housing units is a good start but we need more, and to also promote autism awareness in communities

10. Safeguarding and keeping vulnerable people safe

- Learning Disability Health checks – People are dying – there needs to be a local strategy to address this
- Individuals with Sensory impairments – vulnerable people missing out – not always aware that support is available (statutory and community) - the Sensory Strategy needs to be refreshed
- Safe spaces/places/ zones for vulnerable people
- Public Awareness Campaign on how the public are responsible for keeping people safe

Conclusion and Next Steps

Following the work of Thurrock Diversity Network Limited and the subsequent directions from the Disability Partnership Board, the Thurrock Local Account – “Looking back and moving forward” initiative and workshops (in collaboration with Community Catalysts) explored awareness and progress against current Local Account Priorities, whilst discussing areas of good progress and achievements as well as recognising areas for further improvement and development. This culminated in the identification of 10 new Priorities for the Thurrock Local Account going forward.

Thurrock Council are advised to consider the issues raised throughout the engagement exercise and workshops.

It is hoped that the identified Priorities and actions be used to inform the new Local Account for 2018-2020 in this area and that this initiative provides a blueprint for the co-production and development of future Local Accounts in Thurrock. It is suggested that the Priorities, associated actions and progress of the Local Account be reported to the Thurrock Disability Partnership Board and the Health & Wellbeing Overview & Scrutiny Committee from time to time, along with any recommendations the co-production of future Local Accounts.

Thurrock Coalition – October 2018

Appendices

Thurrock Diversity Network – Thurrock Local Account – Looking back and moving forward:

Verbatim Collated views on the current Local Account Priorities

Current Priority	Participant views
<p>Priority 1: Continue to join up health and social care services through the Better Care Fund, to support people better</p>	<ul style="list-style-type: none"> • LAC has not contacted after initial meeting. Not returned calls • Join Up Health, Social Care and Mental Health • Thurrock First – Phones not working – long wait • The serious end of integration falling apart • Prevention – not always clear who does what • LACs – some issues with LACs – duplicate what other services do, but lack specialism – need to signpost better • LACs information not communicated – want to use them - can't find them. No referral for agencies • Social Care has varying contributions • Communication very poor • Systems – GDPR is a huge issue – it wastes time! “They won't talk to me!” • Thurrock First Triage Team working on joining things up • Not being met • One pot of money – joined up approach • “Need Systems that talk” <ul style="list-style-type: none"> - LAS/LCS/SystemOne/NHS/Mobius - Hospital discharge/Community Team/Hospital Team – all need streamlining • Keeping people safe should be fundamental • Stop the jargon • Order of the priorities - people first - Not money! • Population growth, government funding for Adult Social Care
<p>Priority 2: Continue to strengthen communities and build community resilience by supporting small community based services</p>	<ul style="list-style-type: none"> • I do a lot of work for people in the day but sad and on my own at night, not ready for the bingo club, I would like computer classes or dancing. Who pays for it? • Community hubs and volunteers are good

	<ul style="list-style-type: none"> • Stronger Together feels exclusive and now a map is being done by Thurrock First – are the Council paying for 2 maps? • No one knows the Stronger Together Admin – The map doesn't explain enough. LACs to input? • Social Prescribers not known to users. • Not everyone uses the Doctors frequently – locums • Micro Enterprises – Quality? Who checks? • Direct Payments and Micro Enterprises working well for Service Users who now get more choice and control • Priority 2 is partially being met – LACs and Micro Enterprises • Funding again! • Lack of communication between professionals and groups • Lack of insight into promotion and referrals • Need to publicise the strategy to help the reality so people know that services are available – “Don't know what we don't know” • Fairness – Differences - people who live with carers and those “in the system”
<p>Priority 3: Increase the use of direct payments to allow people to manage their own care</p>	<ul style="list-style-type: none"> • DP Project Manager Role – sounds good- need to publicise work/achievements with DP Users • Mental Health – Massively lacking in Direct Payments uptake • Micro enterprises are working well. Give(s) people choice and continuity • No brokerage service • What about people who lack capacity/understanding and have no family or friends? • Legal protection for family/friends making decisions for people who lack capacity • Need for Direct Payments information and responsibilities before signing up
<p>Priority 4: Implement online self-assessments</p>	<ul style="list-style-type: none"> • Need online carers assessments
<p>Priority 5: Complete the re-modelling of home care services to improve choice and quality</p>	<ul style="list-style-type: none"> • For wellbeing / independent living – wellbeing is not promoted as a lack of accessibility through a lack of communication undermines the effectiveness of provision • Care providers in a particular area sometimes don't have capacity to take on a care package. If a client can't manage a DP, what happens?

	<p>There should be a choice of providers in an area.</p> <ul style="list-style-type: none"> • What happens when micro agencies aren't micro? (For example, when they get too big).
Priority 6: Roll out the delivery of Shared Lives in Thurrock	<ul style="list-style-type: none"> • Communicate the model and its potential much better • Short Breaks vs Shared Lives • Issues with transition from fostering
Priority 7 – Put in place an independent system to ensure that our processes to financially assess individuals are fit for purpose	<ul style="list-style-type: none"> • Give people feedback in accessible formats • Thurrock is good at asking people their views • The desire to provide seamless single point of access to facilitate service users can be compromised by contractual targets • Is this an independent provider? • Need to improve financial assessments so people fully understand the process and what is Disability-related expenditure • Financial assessments seen as intrusive so that care needs are not pursued. • Social Care support - As opposed to cost of hospital care and quality of life • Prevention is better than cure
Priority 8: Re-tender the Healthwatch service to improve scope, ensuring quality of service	<ul style="list-style-type: none"> • Good, independent • Should advocate for people and campaign against service closure – Orsett – impact. • Unable to access healthcare • Short time before appointment, unable to organise appointment • Need more services for Visual impairment • Unable to get a social worker
Priority 9: Develop a specialist autism service	<ul style="list-style-type: none"> • Autism Action Group – urgently needs a Commissioning officer and permanent Local Authority Co-Chair. • Is this going to be wider than a housing project? • Choice is key – 6 houses are great, but... (Tip of the iceberg). • Segregated housing is not great. • Site is isolated • What about housing for people with Dementia?
Priority 10: Keep vulnerable people safe	<ul style="list-style-type: none"> • There used to be lots going on in my life – college, safety, cleaning, gardening. All stopped • Safeguarding working well with Advocacy Services • Needs a proper public campaign “Everyone’s business!”

Thurrock Diversity Network – Thurrock Local Account – Looking back and moving forward:

Workshop 1 – 16/8/18 (Morning)

Things the Council is doing well and Things the Council needs to improve

Moving Forward	
Things the Council is doing well	Things the Council needs to improve
<ul style="list-style-type: none"> • Funding befriending • Community Hubs Development • Healthwatch funding and are independent • Some LACs are good • Thurrock Coalition Lasting Power of Attorney (LPA) Champions Project is great • Working with Thurrock Coalition – Co-production of strategies/policy, events, interviews, hearing the User-voice. TDN Meetings, the Council listening to us, on how to improve • Direct Payments with Micro enterprises • Council buildings are accessible and have user-friendly signs • Community hubs are a great opportunity • Stronger Together – great opportunities but room for improvement <ul style="list-style-type: none"> - Asset map - Greater links with other providers - Clear up LAC roles – LAC get out onto their own patch “pound the streets” to really get to know people, cafés, businesses • Service Users appreciated • Micro-businesses option • Continuity of care • Choice and managing Direct Payments • Thurrock Carers Service 	<ul style="list-style-type: none"> • Ways of advertising what you fund • Stronger Together website – both in content and the existence of I.T. • Online assessment – not there yet • Council reception – gone digital before the community has! Business Seating – really? • LACs – some do not understand limits of role re: specialisation / advice • Home care is still not working • The start of Thurrock First was not communicated. • Support to access transport – not enough Direct Payment hours • Access to gym – need support to improve Health & Wellbeing • Housing maintenance and insulation • Need more information about Disabled Facilities Grants • Communication – I.T. PC training support • No telephone numbers on the Council website – a very disabling communication barrier • Hospital Discharge process – “after care” • Communication – some people are not aware of the services and how to access them • Longer time to use Direct Payment • Some people are not able to use computers and apply for services online • Online Assessment – increase a sense of loneliness • More cost effective ways to engage individuals, community and providers re: views and consultation e.g. online, Healthwatch, use existing community groups and agencies who already engage people

	<ul style="list-style-type: none"> • More training for staff and volunteers. Volunteers should not be used in positions when responsibility should be on paid staff • Better promotion of all services and community groups supporting Adult Social Care (Care Act Responsibility) • Why so many maps? <ul style="list-style-type: none"> - Stronger Together - Thurrock First - Funded by Council & Health • Better Social Care input into mental health teams • No use of Direct Payments • AMHP input not respected • No integration [leading to] crisis/serious incidents • Using Services e.g. Carers or Advocacy or LACs to do Needs Assessments/Carers/O.T. etc. • Making every contact count rather than involving a third party (Thurrock First) • Waiting list for services • Mental Health currently separate from Mental Health Needs
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Thurrock Diversity Network – Thurrock Local Account – Looking back and moving forward:

Workshop 2 – 21/8/18 (Morning)

Things the Council is doing well and Things the Council needs to improve

Moving Forward	
Things the Council is doing well	Things the Council needs to improve
<ul style="list-style-type: none"> • Micro enterprises have offered more services and options • Care and Support rates are competitive • Taking up the ethos of the Care Act and adhering to the rules – such as offering an advocate so not just 1-to-1 which can be scary for a vulnerable adult • FABA – Finances not discussed at Assessment – Allows the focus to be on “Needs” • Changing terminology (making user-friendly) • Micro Enterprises • Local Area Co-ordinators 	<ul style="list-style-type: none"> • Creativity of Micro enterprises needs to feed through to Social Services, particularly assessments • Social workers should do what they say [they are going to do]. Particularly to a person with special needs because this can create mental health issues • Better Care Fund needs to work because a person in the middle in need of support needs the support sooner rather than later. • Joined up services and systems • Continued learning of community resources and engagement

<ul style="list-style-type: none"> • Rapid Reablement and Assessment Service • Health & Wellbeing pilot • Giving people choice and control (DP) / External Services • Not restricting by commissioning a few agencies (vibrant market place) • Communication improving • LAC is working well • Micro Enterprises • Improving joint working with health • Workshops to review Local Account • IT Access • Community Networks • Strength-Based 	<ul style="list-style-type: none"> • Need better support mechanisms to manage and engage and support with choice and control • Not enough information on new services and how they work etc. • Raise profile of Adult Social Care/Charges/Partners/Groups etc. Good News! Do Better! • Working with voluntary sector • GP/Primary health, relationships and mental health • Empowerment of Service Users • Shared Lives • Continue to improve joint working • Integration of IT systems • Information sharing • Looking outside the box • Working in silos
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Thurrock Diversity Network – Thurrock Local Account – Looking back and moving forward:

Workshop 3 – 21/8/18 (Afternoon)

Things the Council is doing well and Things the Council needs to improve

Moving Forward	
Things the Council is doing well	Things the Council needs to improve
<ul style="list-style-type: none"> • Local Area Coordinators • Micro enterprise projects • Shared Lives • Social Prescribing • Thurrock First – Works well for health and social care – an excellent “one stop shop” • Changing the home care to local teams with regular carers is a good thing • Consultations are good provided the council listen and act on residents opinions and ideas 	<ul style="list-style-type: none"> • Better communication channels between the public and social care • Better environment for people to live in so they feel “good” in their community • Have safe zones for vulnerable people. • Council information needs to be available in accessible formats other than online. • Phone numbers needed as elderly and vulnerable people and those with no computer • Fear about integration of health and social care and how health services will be provided in the community. Could lead to poorer health and more need for social care services • The Council are not using extra income from new build housing (CIL / S.106 Money) to plough into social care and infrastructure and GP/Health centres, schools etc.

	<ul style="list-style-type: none"> • People being housed in Thurrock from London boroughs need services too – how is this funding recouped?
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Identifying and voting for the 10 New Priorities for the Thurrock Council Local Account

Moving Forward – Workshop 1		
Grouping/Theme - Priority	Topic Area	Up-votes (To vote for, increasing a cumulative tally of popularity.)
1	Making the most of every contact	★ ★ ★ ★
10	Keep vulnerable people safe – Better safeguarding	★
2	Join up Health & Social Care – still needs investment, planning and implementation	★
2	Join up physical and mental health services and social care	★ ★
	Use local providers and community groups	
	Strengthen communities and build community resilience - needs investment, planning and actions	
2	Mental health For example – Mental Health conditions should be regarded and treated as equally as other impairments and conditions. Focus on prevention – avoid crisis and A&E. Which mental health conditions are considered by the Council as serious and enduring? This information should be available to residents so they can consider options and be involved.	★ ★ ★ ★ ★
	Services to meet specific needs	★
2	Health & care working collaboratively	★
	Direct referrals to Adult Social Care from professionals	
	Collaboration between Service Providers	
	Recalibrating the relationship between the council and individual and expectations for both	
	Diagnosis for autism (speed)	

1	Better communication – how and where can people find information – getting information to people	★
1	Better internet access, form filling, easier for people to understand	
	Dual Diagnosis - clarification	
3	Prevention – healthier for longer – work with public health – focus upon: <ul style="list-style-type: none"> - Pollution - Food/diet, water quality - Annual health checks for Disabled people 	★★★★
	Involve people earlier on in what’s coming up. Involving earlier will provide more opportunity for increased influence	
4	Make using community resources e.g. the gym accessible in reality by matching the theory of Personalisation and DP/Assessment hours and outcomes not to resources/money. Focus on qualitative outcomes - focus less on the paper trail/process and resource Trust people to make decisions – wise or unwise. Adopt a “can do” solution focussed outlook	★★★
	Home Care: <ul style="list-style-type: none"> - Small, local, quality - + older people services – wider offer 	
	Learning Disability Health – People are dying – there needs to be a local strategy to address this	
	Profound and Multiple Learning Disability – there needs to be a local strategy to address this as numbers are going up	
10	Sensory Impairment – individuals miss out – refresh local strategy for support	★
	Transition strategy – consider the current and future needs of individual young people with profound and complex needs and plan accordingly in a co-productive manner	
5	Training – need a community and statutory offer – include Thurrock Coalition (3 rd sector delivery) and Thurrock Adult Community College: <ul style="list-style-type: none"> - Equality, Diversity, Disability - Save money - Keep safe - Digital intervention 	★★
	Shared Lives Needs promotion	

	Look at the Model – e.g. Student accommodation, Shared Houses Get Social Workers to sign up	
2	Mental Health <ul style="list-style-type: none"> - Pro Active - Integration with Adult Social Care - Prevention - Learning Difficulty and Mental Health and falling between the gaps is still a problem 	★ ★ ★ ★ ★
6	Marketing Strategy for Adult Social Care <ul style="list-style-type: none"> - What do you do? - How do you tell us? - Ordinary Language - Digital AND non-digital 	★
	Autism Strategy <ul style="list-style-type: none"> - Inclusive and partnered 	
	Third Sector <ul style="list-style-type: none"> - Joint/joined up commissioning 	
	Safeguarding <ul style="list-style-type: none"> - Needs a Review - Numbers seem low 	

Moving Forward – Workshop 2		
Grouping/Theme - Priority	Topic Area	Up-votes (To vote for, increasing a cumulative tally of popularity.)
1	Making information accessible for everyone	★ ★
	Community involvement	
	Brexit plan?	
	Public Relations (PR) Share good stories	
	Breaking down barriers	
6	Engagement with the voluntary sector	★

	Shared Lives – clarity, contract/service?	
1	Centralised IT systems, i.e. social care, NHS, Mental Health	★
6	More effective communication – good news / bad news / general sharing	★ ★ ★
1	Tell Us/Ask Us Once – one set of information gathering	★ ★ ★
	Joined up systems	
6	More engagement with the third sector	★ ★ ★
	Ease “red tape” – more responsive service process	
	Connected Thurrock – Sharing information – Accessible formats	
	Meaningful work for Disabled people	
	Less Jargon	
	Community-Led Quality control	
	Council Departments less divided and talk to the community	
	“In house” is not independent	
	Local and National Support – work together	
	Focus upon the person in need of support not the cost – quality not quantity of specialised services – listen and learn!	
	Is commissioning the right way forward? Small hours – not enough support	

Moving Forward – Workshop 3		
Grouping/Theme - Priority	Topic Area	Up-votes (To vote for, increasing a cumulative tally of popularity.)
7	Think about Home Share	★ ★

1	Simplify things!	★ ★
	Domestic Violence Services – LAC, Shared Lives etc.	
1	Embrace the changes in technology but still use a range of options	★
7	Better support for carers – fairer assessments	★
4	Clarity and updates on home care options including Direct Payments	★
10	Public Awareness Campaign on how the public are responsible for keeping people safe	★
1	Online assessments – a good idea – useful for some but still need existing process for those who need it (i.e. not digitally active)	★
7	Respite Services to be improved or be more flexible	★ ★
	Safe zones for vulnerable people	
6	Better communication channels and consultation	★ ★
	Services to stay in Thurrock – to create a better environment for people to continue living in the community	
4	Further development of Direct Payments to meet individual needs, choice and control	★
2	More focus on provision of infrastructure and GP surgeries and health centres as population expands	★
10	Home care should be taken back in house to ensure quality and safeguarding	★

9	Expansion of services for people on the autistic spectrum – 6 housing units is a good start but we need more, and also promote autism awareness in communities	★
4	Greater clarity for service users contemplating Direct Payments around the administration, choices, options for support and how they can be used creatively	★
8	Re-invigorate Community Forums and provide each with a budget to spend to support local people, as they will be best placed to know who needs help and how to provide it	★ ★ ★ ★ ★
	Funding for voluntary groups as they are an essential cog in the model envisaged for community resilience – supporting volunteers is not cheap!	
1	No jargon! Make the website user-friendly!	★ ★

A summary of the current context and key challenges and developments facing Adult Social Care Directorates both nationally and locally

