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Buckinghamshire Council

Adult Social Care

Local Account 2020/21

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Your Local Account

Welcome to Adult Social Care's Local Account for 2020/21. This document lets you know how Adult Social Care helped residents with care and support needs and their carers between April 2020 and March 2021.

It is a chance for us to let you know what we have achieved and what improvements we have made over the past year. The Local Account also gives us an opportunity to respond to what you have fed back to us over the past year.

Things have been very different this year, so we will include updates in response to the COVID-19 pandemic, highlighting the hard work of our teams and the resilience of our partners and communities.

What is a Local Account?

The Department of Health recommended that all local authorities with an Adult Social Care directorate publish an annual Local Account. The reason for this is for residents to see how well Adult Social Care services are being delivered and what is needed to improve in their area.

This document details how we have worked collaboratively with our partners to make a difference to the lives of residents in our community through trusted, personalised and universal social care support, so people have choice and control and can maximise their wellbeing and independence within their local community.

Our vision is to make the best use of the resources available to help the residents of Buckinghamshire lead fulfilled lives.

Foreword

At the end of 2020/21, we all had to adapt to a very different way of living as the COVID-19 pandemic hit the UK. All of our lives were affected by the pandemic and the various restrictions that we had imposed upon us.

Our initial biggest concern was to make sure that the residents we support were safe and well. We quickly set up community phone calls to see how they were during the uncertain times, to ensure the welfare and wellbeing of our residents was considered, and put alternative support in place if they needed it. For

some people who would have used our day and employment services, we found different ways to support them.

We have collectively found a way to navigate through the pandemic and will continue to support you and listen to you so that we can consistently improve and deliver services to our community. This is an ongoing situation and we will tell you more about what we have done since April 2020 in next year's Local Account.



A handwritten signature in black ink, appearing to read 'Angela Macpherson'.

Angela Macpherson
Deputy Leader & Cabinet Member
Health and Wellbeing

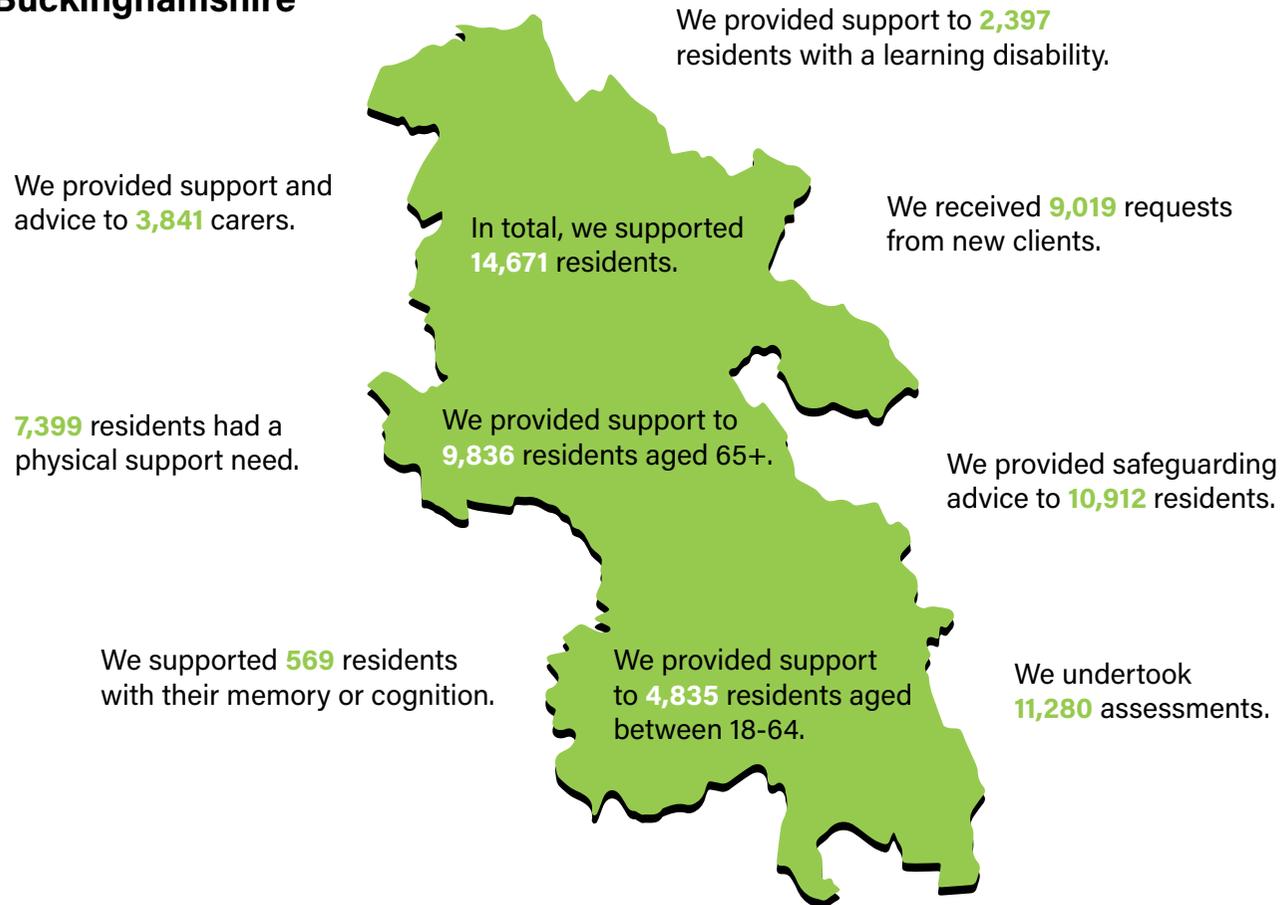


A handwritten signature in black ink, appearing to read 'G. Quinton'.

Gill Quinton
Corporate Director
Adults and Health Directorate

Facts and figures about Buckinghamshire

In 2020/21, approximately **540,059** people were living in Buckinghamshire



Our 'Better Lives' strategy

Here at Buckinghamshire Council, our vision is for people to lead 'Better Lives'. We want to ensure that residents stay as independent as they can for as long as possible. We want to support residents to live healthier lives and offer extra support when needed to help residents to regain their independence.

- We want to help residents to help themselves by promoting wellbeing and self-reliance at all stages of their lives
- We want to support adults at risk to be safe, in control and to make choices about how they want to live
- We want to support communities to be strong, healthy, safe and resilient
- We want to ensure that residents of Buckinghamshire are supported in the best way and given the right support at the right time, whilst at the same time making sure our services are sustainable for the future

A closer look at our Better Lives Strategy

One of the ways we do this is by developing meaningful and appropriate day opportunities and employment opportunities in the community to enable people to live fulfilling lives.

The outcomes we want Better Lives to achieve both now and in the future are:

- For more residents to live independently without the need for long-term services
- Fewer residents to be in residential or nursing care
- More residents to stay living independently after leaving hospital
- Young people moving from children's services to be better prepared for adulthood
- More residents to have control over their support through direct payments

Together we will identify which Better Lives stage is appropriate for each service user depending on their abilities and strengths.



Stages of the Better Lives strategy



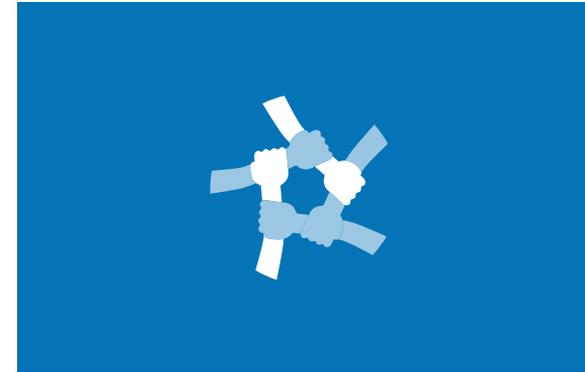
Helping people to live independently

Making it easier for residents to take care of themselves and remain independent.



Helping people regain independence

Working with residents who have experienced a crisis in their lives to regain skills.



Helping people to live with support

Working in partnership with the resident, their family and community to provide long term care.

Living independently

By this, we mean focusing on what support is needed to enable residents to stay well and live fulfilling lives safely and independently in their communities. Our goal is to help those who are currently being supported by family, friends and community networks and ensure there is a consistent approach to prevention with our partner organisations. This approach will give the opportunity to build on the strengths of individuals and communities and help develop these into sustainable, long-term possibilities.



Living independently

Prevention

Prevention Matters helps people to regain confidence and independence. It also helps residents to find support networks if they feel anxious, lonely or isolated or have difficulty leaving their home.

A variety of prevention services are funded by the council such as lunch clubs, music therapy, befriending services and other social activities.

In the past year, Prevention Matters has offered a befriending service to residents when their usual support networks were not available due to lockdown restrictions. Over 5,200 calls were made to residents who were at risk of social isolation.

Buckinghamshire Council also offered virtual support via telephone as well as online to help residents engage with their communities, maintain independence and reduce loneliness.

If you think you or someone you know could benefit from Prevention Matters, referral forms can be found at www.connectionsupport.org.uk, or you can speak with them by calling **01296 484322**.

🔍 Additional COVID grants of up to **£390,000** were offered to voluntary and community providers to help support residents during the pandemic.

🔍 In 2020/21, **721** residents received support from Prevention Matters.

Living independently

Equipment/aids in the home

In 2020/21, 6,399 residents were provided with equipment to help them feel safe and confident in their home and remain as independent as possible.

Types of equipment include:

- Aids to support daily living and enable people to complete tasks for themselves, e.g. bath lifts, handrails, perching stools, etc.
- Manual handling aids to support carers to undertake their caring role safely
- Equipment to support residents with sensory impairments
- Equipment to help people move safely into and around their home

During the COVID pandemic, additional measures were put in place to minimise and eliminate any potential risk of infection transmission when any equipment was delivered or installed.

🔍 In the past year, the Integrated Community Equipment Service made over **102,000** deliveries to residents, including delivery of over **16,000** pieces of equipment to support social care needs. More than **8,000** Technology Enabled Care devices - for example, pendant alarms - were also installed, helping people to live independently.

Information and advice

Following feedback from residents, we launched a range of new [factsheets](#) to ensure residents can access information and advice in an easy, readable format. These factsheets cover a wide variety of subjects across Adult Social Care and can be printed or sent electronically via email. Workers are encouraged to use these to make sure we are actively sharing information and advice with residents.

Living independently

Carers

Helping support the wellbeing of carers is essential for Adult Social Care, even more so during the pandemic. 5,673 phone calls were made to carers which resulted in a number of people being referred to Carers Bucks to offer day-to-day support. We offered grants to support carers in their vital roles, distributed PPE kits and arranged cover for care whilst carers attended COVID tests and vaccination appointments.

In addition to this, there was an increase of 1,311 carers who registered with Carers Bucks and GPs this past year.

Carers Bucks has also launched a new all-age carers support service to help carers from five years of age upwards. This service works closely with schools and the wider community across Buckinghamshire.

 We now support **3,841** carers across Buckinghamshire.

Moving forward, further work will take place with partners to ensure we transform how we support carers across Buckinghamshire. Buckinghamshire Council will continue to support and fund Carers Bucks, who are available to offer support, information and advice for unpaid carers across the county.

Do you know a carer who needs support?

 mail@carersbucks.org

 0800 777 2722



You've been brilliant! You supported me at the beginning with my mother, and now I'm a carer for my husband. I remember one of you came to my GP surgery to give an information session and as I listened, I realised 'Oh! That's me! I'm a carer!' Our 'message in a bottle' emergency plans are only in place as a result of your information and advice. Thank you!

Helping people to live independently: Our focus for 2021/22

- Improve the information and advice offered to residents via Care Advice Buckinghamshire and the Bucks Online Directory
- Enable residents to remain independent in their homes through the use of technology
- Adult Social Care will work with partners to develop a multi-agency hub to ensure residents can access support quickly and easily
- Ensure the outcomes for residents help them remain as independent as they can for as long as possible
- By working together with health colleagues, children's services, community boards and other partner agencies, this will improve the service offered to residents and help to ensure they only have to 'tell their story' once
- Improve employment, training and volunteering for residents with with a learning disability and/or mental health problem

Regaining independence



By this, we mean focusing on supporting people in a crisis so they are better able to cope and helping young people to live as independently as possible as they transition to adults' services.

Regaining independence

Home First & Discharge to Assess (D2A)

Throughout the pandemic we have worked closely with our health partners to make sure people are discharged from hospital as soon as they are well enough. Many hospitals introduced the Discharge to Assess process on a temporary basis during the pandemic to reduce the spread of COVID-19 and free up capacity to treat more serious patients.

The term 'Discharge to Assess' means that depending on what support is needed, people are either able to go back to their own home with support in place or receive short-term care in a residential/nursing home. This has improved the flow of patients through our hospitals and means individuals can have their longer-term care needs assessed in a more suitable environment.

🔍 78% of the **1,059** residents we supported through our reablement service were independent after six weeks.

Moving forward, work will continue during 2021/22 to develop a more integrated Home Independence service. Social care will work closer with the Hospital Discharge team to reduce unnecessary duplication of work between the teams. Our Occupational Therapy and Home Independence service – previously known as the 'Reablement' service – will also work with health colleagues to ensure that residents can access timely and personalised short-term care and reach their potential independence.

'Reablement' is a way of helping someone remain independent, by giving them the opportunity to re-learn or regain some of the skills for daily living that may have been lost as a result of an illness, accident or disability.

Reablement: case study

“Mrs K was discharged from hospital following a hip replacement, and referred to reablement with a goal to regain full independence with daily tasks at home. Mrs K was very determined to get back to being independent and was discharged from hospital with four visits a day to support with washing, dressing, meal preparation and medication management. Mrs K lives alone in a bungalow, where all rooms are on one level and a free-standing toilet frame and walking frame were also ordered to enable safe discharge home.

The reablement worker noted a significant amount of progress in short time frame and within one week, the visits were reduced from four to two each day. The following week, Mrs K became independent with medication management which was now in a Dossett box. With practice and encouragement, she also became independent with meal preparation. With Mrs K’s determination and commitment to achieving her goals, significant progress was being made each visit. Soon, visits were providing verbal prompting and guidance only.

Reablement ended after two-and-a-half weeks as Mrs K reached her goal of being fully independent in all daily tasks. No ongoing care and support was required. When asked how she would rate the care received from one to five, Mrs K’s view was that she would rate Reablement a 10 if she could. She said the workers were patient and allowed time for her to improve. She felt motivated to do things for herself.”

Regaining independence

Mental health and wellbeing

Oxford Health NHS Foundation Trust works alongside Buckinghamshire Council to arrange social care support for anyone who may require access to mental health services.

This year, a 24/7 mental health support line was launched in Buckinghamshire which is free to call and can be accessed through the NHS 111 telephone number. The round-the-clock helpline is in place to make it quicker and easier for people in Buckinghamshire to get the right advice they need for their mental health and emotional wellbeing.

NHS England have made further investment to support the recruitment of additional mental health workers who will link closely with GP surgeries and partners from the voluntary community sector. Therefore, people in Buckinghamshire with a severe mental illness will soon be able to access mental health support more easily, which will enable them to live healthier, happier, more independent lives.

🔍 Between April 2020 and March 2021 there have been **2,161** calls made to the Mental Health Helpline.





Do you need to contact mental health services?

NHS Mental Health 24/7 Support Line

 NHS 111

Healthy Minds Bucks

 01865 901 600

 www.oxfordhealth.nhs.uk/healthyminds/contact/

Buckinghamshire Council Community Mental Health Teams

 Aylesbury – 01865 901 287

 Chiltern – 01865 901 344

 www.oxfordhealth.nhs.uk/service_description/adult-community-mental-health-teams/

Helping people to regain independence

Our focus for 2021/22

- We will work closely with health partners to ensure safe and timely hospital discharge and ensure residents and carers are central to hospital discharge planning and receive quality information and advice
- Increase residents' access to short-term interventions to help people regain independence and achieve their goals, such as home independence
- We will work collaboratively with children's services to support them on their journey and encourage preparation for preparing for adulthood
- In conjunction with residents, we will look to review the future of the Day Opportunities and Overnight Short Breaks Service



Living with support

By this, we mean focusing on people who need longer-term social care services, ensuring the support they receive helps them to achieve the outcomes they need and want.

We share responsibility with residents, their families and their communities and try to meet people's needs in a way which centres on them, delivers the outcomes they want to achieve and results in a better quality of life. Wherever possible, we support people to remain at home with family and friends, developing and maintaining a strong social network. We want to work with people to help them understand and manage everyday risks, whilst taking care to safeguard people from significant harm.



Living with support

Brokerage Support Service

This service supports residents to source care to meet their individual needs. The service is open to residents who fund their care privately, fund care through a Council funded Direct Payment or are being discharged from hospital.

The service includes:

- Support from an experience and qualified independent broker who will negotiate with care providers on your behalf to find a range of affordable options.
- A care navigator who will give unregulated financial advice, highlight the state benefits that are available and check that the proposed care package is affordable in the long term.

The independent brokers negotiate with care providers on prices and source a range of options to give people choice and control over their care and support. This is particularly important for residents and their families who may be navigating the care system for the first time.

During the period from April 2020 – March 2021, there were 146 referrals for residents who were supported by the Brokerage Support Service, helping residents to get the care they need at affordable prices.

Living with support

Partnership working

In 2020/21, we undertook 5,616 reviews. Reviewing residents' care and support needs, whether scheduled or unplanned, provides additional opportunities to establish whether current supporting arrangements are achieving the outcomes residents wish to aspire to.

553 residents receive their care in a supported living placement. This type of care is designed for people who may need extra support that they are unable to receive in their own home. Supported living enables people to live independently but with specialist staff available should they need assistance.

1,434 residents are using a direct payment to manage their care and support needs. A direct payment is a sum of money given to someone to offer them greater choice and control over their care arrangements. People can employ their own staff or contract directly with an agency.

Day opportunities

We continue to develop our new approach to community opportunities. The last 12 months have been a challenging time for both users and providers of community opportunities. As part of our commitment to ensure people with care and support needs could access services which were Covid-19 secure, we worked closely with our contracted providers to deliver innovative and bespoke solutions. This ranged from virtual cooking and music lessons, through to increased outdoor activities such as community gardening.

Due to the COVID-19 pandemic and in line with government guidelines, our Seeleys short breaks service closed in March 2020. It reopened in the summer to ensure that our most vulnerable residents were still able to receive support.

 We have **307** residents who attend a day centre as part of their day opportunities.

Living with support

Advocacy

In 2021/22, we will work with our independent advocacy service, POhWER, to expand our use of independent advocacy across the service. Advocacy enables people to speak for themselves, express their views and wishes, and be integral to the decision-making surrounding their care and support needs.



A new contract for the Integrated Advocacy Service will commence on 1st July and includes a new Community Advocacy Service alongside the statutory advocacy.

🔍 During the last 12 months, POhWER received **157** requests for advocate support.

🔍 **348** new cases for Independent Mental Capacity Advocacy, including 210 older people aged 75+ years.

🔍 There were **354** new cases for Independent Mental Health Advocacy, which included 19 0-15-year-olds and 44 16-24-year-olds.

Living with support: case study

“To identify if there were any issues around the treatment of Mr D’s care, a meeting was held with his community medical team, the care manager from his care agency and Mr D’s family. I had ensured Mr D’s family had visited him prior to the meeting, so they could find out his views prior to the ‘stress’ of a formal meeting. Mr D voiced his clear views on a number of factors around his care and was of the view that his care has been greatly improved by having one-to-one support and this meets his needs throughout the day. Mr D spoke about his pain with movement and that he thought his pain management medication could be improved.

Mr D stated that he was not happy with his drinks being thickened, but that he understood why it needed to be done. On reflection, most of the time working with Mr D focused on upholding his right to self-determination and helping him secure the care he needs to return home.

However, after building a better rapport with Mr D it was apparent that there was a need to increase his social interaction to reduce his social isolation and have someone other than a family member to talk to. Mr D raised this in the meeting and given his physical inability to attend groups, a befriender will be arranged to regularly visit Mr D. The MS Society has been asked to arrange a befriender who has a good knowledge of his condition.”

Helping people to live with support

Our focus for 2021/22

- Following feedback from residents, we will be launching a 'named worker' initiative to reduce the number of different workers that people have. By providing people with a named worker, this will promote positive working relationships and make it easier for people to contact us
- Review how people receive support at home by developing how we work with care providers to ensure people are supported in their home for as long as possible
- Improve how we support people with mental health conditions by reviewing our social care mental health function
- Improve the support for residents who are living in supported living



COVID-19: How we supported our communities

During the last 12 months, we have supported more residents than ever before. Many households were forced to shield or self-isolate or experienced furlough and this in turn exacerbated already difficult situations. Households struggled to access essential goods and medicines and many more suffered and continue to suffer financial hardship and increased risk of family breakdown and domestic violence. The pandemic and the resulting lockdowns also presented challenges for children, families and those without local support systems and we put together a range of provisions to help depending on individual circumstances.



Distributed **658 food parcels** to residents who are shielding and provided 110 food parcels to households via the Helping Hands Service update

Responded to **10,058 Covid** enquiries to our Buckinghamshire Council Customer Service Centre (as at 11 Feb 2021)



Provided 333 residents to date with basic care support including picking up prescriptions

Launched a trial using pre-paid cards for financial support for some of our most vulnerable clients, reducing travel and potential contacts during lockdown



Arranged and delivered a series of webinars for care homes to support them in responding to the emergency, led by Public Health

Visited 100% of our care homes to start administering vaccination



Processed **656** local emergency support requests



Developed a Covid-19 webpage/dashboard on the Council's website for keeping the public informed regarding infection numbers locally



Supplied 140 care providers **additional Covid-19 funding**, and 131 care homes & 85 providers accessed the **Infection Control Fund**



Completed over **21,500 'keep in touch' calls** to our most vulnerable adult social care clients in partnership with the voluntary community sector

Provided **funding from eight community boards** to enable the Chilterns Dial-A-Ride to offer free transport to and from medical appointments for people in the local area

Provided additional resident support through the national 'shielded residents' scheme - currently over **17,700 people**

Converted Olympic Lodge in Aylesbury to a **240 bed** special social care facility for vulnerable adults



Launched the **Buckinghamshire Local Support Hub Model**, providing support to over **5,000 shielding residents**

The concessionary bus pass scheme for older and disabled residents was extended to allow pre 09:00 travel in the first lockdown to give access to the early morning "silver shopper" opening hours and then in the current lockdown **to help with access to vaccine appointments**



Safeguarding adults



'Safeguarding' means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's general wellbeing is promoted in accordance with section 1 of the Care Act 2014. This includes having regard for the views, wishes, feelings and desired outcomes of the adult at the beginning, middle and end stages of the process.

Safeguarding adults

During 2020/21, we undertook a review of our safeguarding processes and the way the team worked. We have since undertaken a considerable amount of work to make improvements to ensure that we make a difference to the outcomes and the quality of the experience of the people who have used our services.

Making Safeguarding Personal means it should be person-led and outcome-focused. It engages the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.

The number of safeguarding concerns reported to Adult Social Care during 2020/2021 was 10,900, up from 9,100 the previous year. Neglect, acts of omission and self-neglect are the most reported types of alleged harm for Safeguarding concerns.

🔍 In 2020/21, 1,378 (12%) of safeguarding contacts progressed to a safeguarding enquiry.

If you are worried about an adult at risk, please report it to us. For less urgent concerns, you can visit our website and complete a referral form. However, if you feel the person is in immediate danger, please dial 999.

You can also call the Safeguarding Adults Team between 9am to 5:30pm Monday to Thursday and 9am to 5pm on Friday on 0800 137 915.

Outside these hours you can call our Emergency Duty Team on 0800 999 7677.

Safeguarding (continued)

Abuse types for Safeguarding concerns	
Neglect and acts of omission (excludes self-neglect)	3,800
Self-neglect	2,500
Physical abuse	800
Psychological abuse	800
Financial or material abuse	700
Domestic abuse	400
Sexual abuse	200
Organisational abuse	100
Sexual exploitation	30
Discriminatory abuse	20
Modern slavery	10

Safeguarding concerns reported by	
Independent providers	3,100
Police	2,600
Ambulance service	2,500
Health partners, excluding ambulance	1,500
Family/friends/neighbours	400
Social care staff	400
Other areas	500

Safeguarding: case study

“A’ is a young man with ADHD, Asperger’s and depression. Over the years, A’s case has always ‘fallen through the gap’ as he doesn’t have a learning disability due to his high IQ but doesn’t meet the criteria of mental health intervention either.

He has been living alone in the community since his family moved away a few years ago. He was assessed by the Learning Disability Team as having an eligible need, so a personal assistant (PA) was organised using a Direct Payment to help him to access the community and maintain his home.

During COVID, A’s mental health deteriorated. He contemplated suicide, the PA service broke down and he began hoarding rubbish. A’s neighbours reported the hoarding to the local environmental health services as the rubbish was spilling out into the front garden. This was forwarded to the Safeguarding Team at the council as A was in receipt of services.

When social care became involved, A was very reluctant for anyone to enter his home. After first talking on the telephone, then meeting on his doorstep, A found the confidence to allow the social worker access to his flat. The flat was piled high with rubbish, with a small path enabling access to the fridge, sink, toilet and sofa.

A gave the worker permission to speak with his mum, as he was finding the situation overwhelming. This enabled us to understand more about how he came to be living alone with a failed care package. Given the seriousness of the situation, A allowed social care to work with him to make some small changes, as well as a referral to P3, specialist hoarding service.

P3 have worked with A to clear the property and develop strategies to maintain it to a certain standard, and they continue to support him to this day. Social care also liaised with the Housing Association as threats of eviction had been made.

Safeguarding: case study (continued)

These were all small but positive steps which helped A to improve his wellbeing. As he was actively engaging in the safeguarding enquiries and following the plan we had devised together, I was able to finalise the enquiries. We continued to work with A to complete a review of his care needs and determine if any other support services would be more appropriate.

Over the Christmas period, A's mental health took another turn and he was talking about ending his life again. With his family so far away, he felt unable to cope. Due to this being a prominent mental health need, A gave permission for social care to speak with his GP and mental health professionals. As a result of this, A started counselling and received support to improve his mental health.

However, as a result of his review and the gathering of information from his family and health professionals, I made a professional judgement that

A's needs would be best met in a supported living placement. This would enable him to gain confidence, skills and independence, which he had not been able to do since moving from his family home.

'A' moves into supported living at the end of this week. He is very anxious but he and his mum are very thankful that appropriate and proportionate support is now being provided, and he has the opportunity to enhance his mental health and wellbeing."



Safeguarding Adults Board

The Buckinghamshire's Safeguarding Adults Board (BSAB) has a responsibility for safeguarding adults to protect adults at risk of harm or abuse and to enhance their wellbeing and daily experiences.

We will continue to improve our approach to making safeguarding persona. This means ensuring our practice is person-led and outcome-focused.

Contact us

 bsab@buckinghamshire.gov.uk

 01296 387146

 www.buckssafeguarding.org.uk/adultsboard/

The Safeguarding Adults Board Plan 2020/2023 set out our vision and priority areas:

- 'Talk to me, hear my voice' Engage with our communities to understand their needs and listen to what they say so that it informs our decision making and planning.
- Understand the nature of neglect (including self-neglect) and abuse and put structures in place to reduce cases.
- Ensure that professionals working with adults with care and support needs have the required knowledge and training for their roles.
- Make safeguarding personal and ensure that the work of the Board is informed by service users and carers.
- Work as a multi agency partnership.

Safeguarding

Our focus for 2021/22

- Develop a multi-agency hub to make the council's first response to people quicker and more effective
- Launch a new safeguarding campaign to promote awareness and encourage residents to refer any concerns to Adult Social Care/Safeguarding. The campaign designs will be created with service users to ensure they are easily understood and effective. The designs will consider different demographics and audiences to make sure we increase awareness of the need to protect vulnerable adults in communities
- Launch a suite of factsheets to offer advice to people involved in safeguarding, explaining the process and what people can expect
- Update the safeguarding pages on the website to ensure we offer comprehensive information and advice on how to identify safeguarding concerns and how to report any concerns
- Engage with residents through a series of co-production events to improve the understanding and experience of the impact of safeguarding

Our residents' voice



Our residents' voice

Engagement with residents

Councils are required to undertake a survey of those who have received help and support. In 2020/21, we received 579 responses to this survey. Analysis of the survey and text comments showed common themes about how care and support could be improved.

- People appreciate the good quality of care that was provided despite the challenges of the pandemic
- Care, support and equipment enable people to be independent, have a better quality of life and live in their own homes for as long as possible
- People find the unannounced frequent change of carers and schedules challenging and feel this makes it difficult to build trusting relationships
- People believe that the quality of carers varies and some carers need more training and experience
- People are aware of the demand put on the care sector which causes carers to be stressed and

rushed and may also negatively affect the quality of the service

- People with limited IT skills or no access to computers may find it difficult to access information and advice
- Some people commented on limited communications and low responsiveness from both the council and care providers
- Many people feel unsafe due to mobility issues (fear of falling, being unstable on feet, being wobbly)
- Some people feel that they are not provided with as much support as they need or feel that getting the care is difficult

It is important that we hear your views and opinions on the services we offer, so we now send out monthly surveys asking you what your experience was like with Adult Social Care. We want to understand where things could be better, but also areas where we might be doing things well.

Our residents' voice

Community engagement & co-production

Our vision for co-production is to ensure that people who use services and carers are involved from the start. They will actively help define and design local priorities and policies and deliver and evaluate services to inform Adult Social Care decision making in areas that impact on their lives.

In October 2020, a service user/carer forum was established to provide additional opportunities for residents to share their experiences and agree a programme of actions and activities to improve the delivery of services. For example, making changes to the new webpages for Adult Social Care which will be available in August 2021.

To find out more or get involved, please contact us at QSPPracticeandquality@buckinghamshire.gov.uk.



Our residents' voice

Compliments and complaints

Last year we said we would continue to improve our responses and people's experience of complaints. This year we received 44 complaints, which is a 47% decrease since last year. 75 concerns were also resolved within 48 hours and did not progress further.

Over the next year, we will continue to encourage workers to resolve any dissatisfaction immediately and seek a resolution to their concerns where possible.

As a result of these complaints, we have created clear practice guidance for workers, reviewed our processes, amended documentation, created new factsheets and provided additional training for staff.

We also received 212 compliments, which is the highest figure we have ever recorded!

“Heartfelt thanks to you and your band of angels whose care and compassion, gentleness and kindness brought light into the darkness with each reassuring visit. I cannot thank them enough for how they have looked after my husband and supported me. Worth their weight in gold.”

“She is definitely one of the best, if not the best and most experienced social worker we have been lucky enough to have.”

“Thank you for your professionalism but more importantly the human touch you offered. It’s nice to know that we still have decent people like you out there, so on behalf of my Mum, Dad and brother, I would like to thank you for all the things you did behind the scenes and for the advice and support you offered our family.”

“Her commitment to supporting us has been nothing short of phenomenal. Her consistency and tenacity to provide results is astonishing.”

“Under difficult circumstances I recently came across B. She was calming, kind and never once got frustrated with my endless phone calls and needing of reassurance.”

Our residents' voice

What you said and what we did

Examples of changes we have made in response to resident feedback.

We welcome your feedback as it helps us find out what is going well and what we can improve.

Workers do not have a good understanding of people with autism

We enhanced our autism training for workers

Getting hold of staff was sometimes difficult

We introduced direct duty lines that are available on the website for residents to speak directly with workers and teams

It would be easier if social care worked together with health colleagues to respond to complaints

We are now arranging initial meetings with partner organisations to discuss complaints to ensure they are responded to in a timely manner and to seek a resolution for the complainant

Sharing information is not always consistent

Training and discussions have taken place with staff to ensure all relevant information is shared with residents

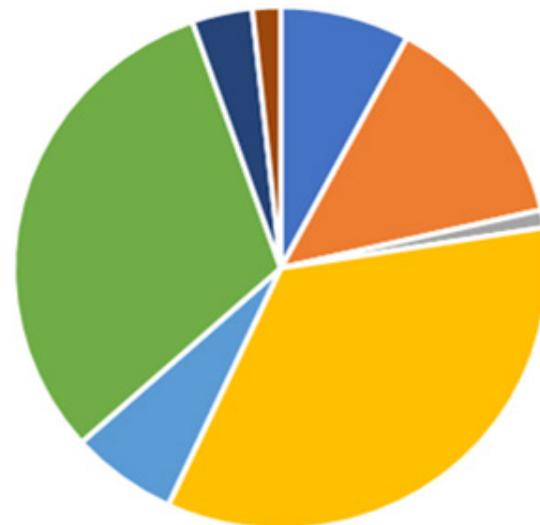
Our residents' voice

Our focus for 2021/22

- Continue to co-design with residents the new Adult Social Care webpages to offer residents high quality information and advice. We are reviewing and updating these pages in response to any feedback we receive from residents across the year
- Establish a set of customer standards, describing what service users can expect from Adult Social Care staff. This will improve communication and outline to staff what is expected of them in order to reduce the number of times customers need to make calls
- Develop a co-production framework which aligns to the wider council approach by ensuring people and communities have a say in the services they receive and the way in which they receive them
- Develop a co-production training programme to enhance the skills of staff across the Directorate to support the development of a co-production approach to service design and delivery



How Adult Social Care spent its money



- Integrated Commissioning
- Safeguarding
- Mental Health
- Senior Management & iBCF

- Access
- Learning Disability
- Older People 65+ / PSD
- Quality, Performance & Standards

Our social care packages are categorised depending on the resident's main care need (e.g. learning disability, mental health, physical support).

Most of the money spent on supporting these residents goes on residential or nursing care services or community care services such as home care, day care, supported living schemes or direct payments.

Buckinghamshire Council spent approximately £431 million in 2020/21. £153 million was spent on Adult Social Care. The chart shows how this was spent.

Glossary

Assistive technology

Equipment that helps a person carry out daily activities and manage more easily and safely in their home. Examples include medicine dispensers, memory prompts, pendant alarms, etc.

Day opportunities

Opportunities for a person to do things during the day whilst living in their own home. These may include social activities, education or the opportunity to learn new skills.

Direct payment

A sum of money paid to a person on a regular basis by their council so they can arrange their own support instead of receiving social care services arranged by the council. Direct payments are available to people who have been assessed as being eligible for council-funded social care.

Home care

Care provided in a person's own home by paid care workers to help them with daily life. Home care workers are usually employed by an independent agency and the service may be arranged by a local council or the individual themselves.

Independent Mental Capacity Advocacy

An advocate who has been specially trained to support people who are not able to make certain decisions for themselves and do not have family or friends who are able to speak for them.

Independent Mental Health Advocacy

Advocacy that is independent of mental health services and can help people get their opinions heard and make sure they know their rights under the law. IMHA can make a big difference to people's experience of detention, particularly in certain secure settings.

Integrated care

An organisation that brings together different health and care services - such as hospitals, a clinical commissioning group, a council, GPs, etc. - in a specific area. The aim is to work together to make better use of public money and provide better care for people who live in the area.

Making Safeguarding Personal

A sector-led initiative which aims to develop an outcomes focus to safeguarding work, and a range of responses to support people to improve or resolve their circumstances in sometimes complex situations.

Placement

A place that is arranged for a person to live, work, spend time or go to school if they have particular needs.

Reablement

A way of helping someone remain independent, by giving them the opportunity to relearn or regain some of the skills for daily living that may have been lost as a result of an illness, accident or disability.

Technology Enabled Care

A new way of talking about care which incorporates services such as telecare, telehealth, telemonitoring, digital health and devices like alarms, monitors, apps or wearables – any technology-based solution that improves care in our homes and communities.



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