

Strategic theme: 21 st Century Health Care	Flintshire County Council					
Broad Outcome: Ensuring people receive the help they need to live fulfilled lives	Outcome 3					
Why we focused on this outcome? <ul style="list-style-type: none"> To maximise the independence of the ageing population and meeting the challenges of dementia. To prevent homelessness for people who are alcohol and drug dependent, victims of domestic violence, ex-offenders and young people including care leavers. To avoid unnecessary admission to hospital and support early and successful hospital discharges. To work with BetsiCadwaldr University Health Board (BCUHB) to develop the Enhanced Care Model in all localities in Flintshire as a result of the Health Review <i>Health Care in North Wales is Changing</i> 						
Key Measure from the Improvement Plan Additional measure WG Tracking Indicator						
	Outturn 2012/13	Target 2013/14	Outturn 2013/14	Target RAG	Trend	Target 2014/15
How much did we do? Input/ throughput indicators taken from any source including the tracking indicators in the <i>Programme for Government</i>						
<ul style="list-style-type: none"> Agreeing the regional plan for telecare / telehealth 	Not Applicable	March 2014	Achieved	G	N/A	Not Applicable
<ul style="list-style-type: none"> Commissioning Plans in place for: - <ul style="list-style-type: none"> Learning Disability Mental Health Services Dementia 	Not Applicable	November 2013	Achieved	G	N/A	Not Applicable
<ul style="list-style-type: none"> Development of one co-located community based health and social care team within Holywell locality 	Not Applicable	March 2014	Achieved	G	N/A	Not Applicable
Number of homes disabled adaptations were provided to, to promote independence (measure of demand/pressure on service to be reported each year, hence no targets set for future years)	404 homes	Not Applicable	583 homes	N/A	Improved	Not Applicable

Appendix 3

<ul style="list-style-type: none"> Referrals to the Homesafe Service (victims of domestic abuse) (measure of demand/pressure on service to be reported each year, hence no target set for future years) 	170 people	Not Applicable	215 people	N/A	Improved	Not Applicable
How well did we do it? Qualitative assessment of effectiveness/ evidence from surveys/ output data etc						
<ul style="list-style-type: none"> The average number of calendar days taken to deliver a Disabled Facilities Grant for adults (PSR/009b) 	277 days	300 days	247 days	G	Improved	260 days
<ul style="list-style-type: none"> The average number of calendar days taken to deliver a Disabled Facilities Grant (PSR/002) 	283 days	300 days	246 days	G	Improved	260 days
<ul style="list-style-type: none"> Rate of delayed transfers of care for social care reasons (SCA/001) 	1.11 per 1,000	2 per 1,000	2.59 per 1,000	A	Downturned	2 per 1,000
Is anyone better off? Quantative evidence of the outcome achieved using tracking indicators from the <i>Programme for Government</i> and your single integrated plans						
<ul style="list-style-type: none"> Percentage of referrals where support was maintained or reduced or no further support was required at the end of a period of Reablement (SCAM2L) 	72.7%	71-75%	76.6%	G	Improved	71-75%
<ul style="list-style-type: none"> Number of adults receiving a personal budget for services via either a direct payment or Citizen Directed Support (IA1.1L4) 	215 people	210-220 people	302 people	G	Improved	210-220 people
<ul style="list-style-type: none"> Homeless prevention for at least 6 months for households and individuals (including care leavers) (HHA/013) 	83.41%	85-90%	84.89%	A	Improved	85-90%
<ul style="list-style-type: none"> Gather patient stories where the patient has had positive experiences of Enhanced Care Service (one off activity) 	Not Applicable	3	Achieved	G	N/A	Not Applicable
<ul style="list-style-type: none"> The percentage of identified carers of adult service users who were assessed or reassessed in their own right during the year who were provided with a service (SCA/018c) 	72%	73-78%	85%	G	Improved	76-81%

Additional Notes

Key Achievements for 2013/14

The Reablement and First Contact (Duty) teams are now fully established with the Reablement model embedded across Social Services for Adults. We have submitted a bid to WG for Intermediate Care Funding to further develop our partnership approaches in reablement and rehabilitation. There has been an increase in referrals for reablement in 2013/14 with 77% of those completing a package of reablement resulting in a package of care that was the same or less than they had previously had.

We chair the regional Telecare Programme Board which has been extended to include a trial of Telehealth, and the regional bid has been approved. We have invested in our capacity to hold telecare equipment locally and the number of people accessing telecare and telehealth continues to increase.

A new joint DFG Home Adaptations Improvement Action Plan with the aim of improving the time taken to deliver DFGs and minor adaptations in Flintshire has been agreed with Housing and is being monitored through team and joint meetings. It includes more minor adaptations going directly to Housing, thereby increasing the time OT's have for more major and complex work, "making best use of resources and avoiding duplication - do it right do it once".

We have reduced the times taken to deliver major adaptations with the average time people have to wait being 246 days, better than the all Wales average of 271 days, and better than our average last year.

Timescales for the completion of major and complex adaptations will continue to be a challenge. The move to e-tendering for Disabled Adaptations through the DFG process has yet to be completed.

The Learning Disability Commissioning Strategy 2012 - 2018 has been developed and aims to give people with Learning Disabilities more choice of where they live and who supports them to live as independently and safely as possible. Service users and carers were amongst the partners who developed the plan with an initial consultation workshop providing invaluable information about their expectations and needs. People told us about "living independently" "what makes a good home", and about "short term care".

The Mental Health Commissioning Strategy 2013 - 2018 builds on a joint vision with Health. Our strategy will see us build on the strong foundations to further promote the recovery approach, by increasing the training, education and work opportunities we offer. As part of the commissioning process we did test the market but decided to sustain our in-house model which, with a modest level of funding, is delivering good outcomes that complement the services we commission from the Voluntary Sector.

The final adult commissioning strategy to receive approval in 2013 was the Older People [Dementia Care Long Term Placements] Commissioning Strategy 2013 - 2018. It's focus is primarily residential care services but it recognises that much work is needed to improve the quality of life for people living with dementia in all settings. The overarching objective of this strategy is to ensure that people living with dementia have access to high quality person centred dementia care in the most appropriate settings to meet their needs and that there is sufficient provision available within Flintshire's boundaries.

Joint commissioning of dementia services with BCUHB continues to be a challenge – recommendations made by CSSIW after the recent inspection have been incorporated into an action plan which we are monitoring through Modernising Social Services Board.