

How Are We Doing?

The Local Account for Adult Social Care Services

1 April 2017 – 31 March 2018

**This document is designed to provide you with an overview
of Adult Social Care**

Contents

Welcome to the 2017/18 Local Account for Adult Social Care	3
What is Adult Social Care?	4
Care in Birmingham – Did you know?	5
How is Adult Social Care Money Spent?	6
Adult Social Care Outcomes Framework	7
Enhancing quality of life for people with care and support needs	8
Delaying and reducing the need for care and support	10
Ensuring people have a positive experience of care and support	12
Safeguarding adults whose circumstances make them vulnerable and protecting them from avoidable harm	13
The Adult Social Care and Health Programme	15
Good News Stories	16
Owning and Driving Performance	16
Birmingham Older People’s Programme	16
Service User Feedback	18
Peer Challenge	19
Social Care Quality Audits	20
How Well Do You think We Did In 2017/18?	20
Sources of Further Information	21
Appendix 1 – Our Overall Performance for 2017/18	22
Appendix 2 – List of similar authorities	24

Welcome to the 2017/18 Local Account for Adult Social Care

This document provides a summary of our progress for adults who are in receipt of social care support over the past year.

The social care services provided for adults in Birmingham form part of the wider Directorate for Adult Social Care and Health. The Directorate is committed to improving the outcomes for all citizens who require care and support to improve their quality of life.

To achieve this amid significant national and local budget pressures, transformation needs to take place to change the way social care is delivered. The Customer Journey work is seeking to build a social care service based on the community model, achieving resilience, independent living whenever possible and exercising choice and control.

A lot of change has taken place over the past year, and this document clearly states how we have performed against national standards during this time. The improvement in customer satisfaction shows that we are heading in the right direction, but there is still work to be done to strengthen our performance.

The Directorate has embarked on a programme called Owning and Driving Performance that is designed to change the way we work and develop a performance culture. The impact of this approach is being recognised by staff, citizens and our partners.

The Directorate is driving forward the Vision for Adult Social Care and Health by focusing on independence, choice and control for citizens, community based services and a much more integrated relationship with health. The Three Conversations social work model, and our commitment to Prevention First, is achieving positive outcomes working with citizens, building on people's strengths as well as connecting them to their community.

We remain passionate about ensuring that the most vulnerable people feel safe and have speedy access to the best social care support available that will safeguard their health and wellbeing.

The Directorate is proud that our staff continue to feature as nominees and winners of local and national awards. This shows that, despite the challenges that we continue to face, we are a city that cares and can achieve excellent outcomes.

We know that the quality of care and support matters to the citizens of Birmingham and through our joined up approach with care providers, voluntary and community organisations, we are concentrated on ensuring that we improve the quality of life for those who need care.

We would welcome your views on this document, our performance and how well you think Adult Social Care performed in Birmingham.

Graeme Betts
Corporate Director
Adult Social Care and Health
Birmingham City Council

Councillor Paulette Hamilton
Cabinet Member
Health and Social Care
Birmingham City Council

What is Adult Social Care?

What do we do?

Adult Social Care services in Birmingham support people aged 18 years and over to live as independently as possible in their local community.

What are our responsibilities?

We are responsible for the following:

- Discussing your needs with you;
- Agreeing a support plan with you;
- Offering information about support and services available in the local community and throughout the city;
- Arranging services where appropriate;
- Providing community care support where this is appropriate;
- Offering support, equipment and adaptations to enable you to live safely and independently at home.

Who do we help?

- Citizens of Birmingham who require care and support;
- Citizens who provide voluntary care for relatives or friends;
- Young people with disabilities aged 14 and over that are in transition to adult social care services.

Care in Birmingham – Did you know?

OLDER ADULTS 65+

There were 21,980 **requests for support or care from new clients** in 2017/18, a **4.5% increase** from the previous financial year.

5,507 citizens who have been **receiving care for twelve months or more** had their care reviewed in 2017/18, a **5.9% decrease** from the previous financial year.

2,885 citizens were **living in a residential/nursing home on a long term basis** as at 31/03/2018, a **1.0% increase** from last year.

4,919 citizens accessing **community based services** as at 31/03/2018, a **0.7% decrease** from last year's figure of 4954, of these 764 citizens accessed **Direct Payment or part Direct Payment**, a **37.7% increase** from last year.

YOUNGER ADULTS 18-64

There were 12,336 **requests for support or care from new clients** in 2017/18, a **7.8% increase** from the previous financial year.

3,051 citizens who had been **receiving care for twelve months or more** had their care reviewed in 2017/18, a **12.7% increase** from the previous financial year.

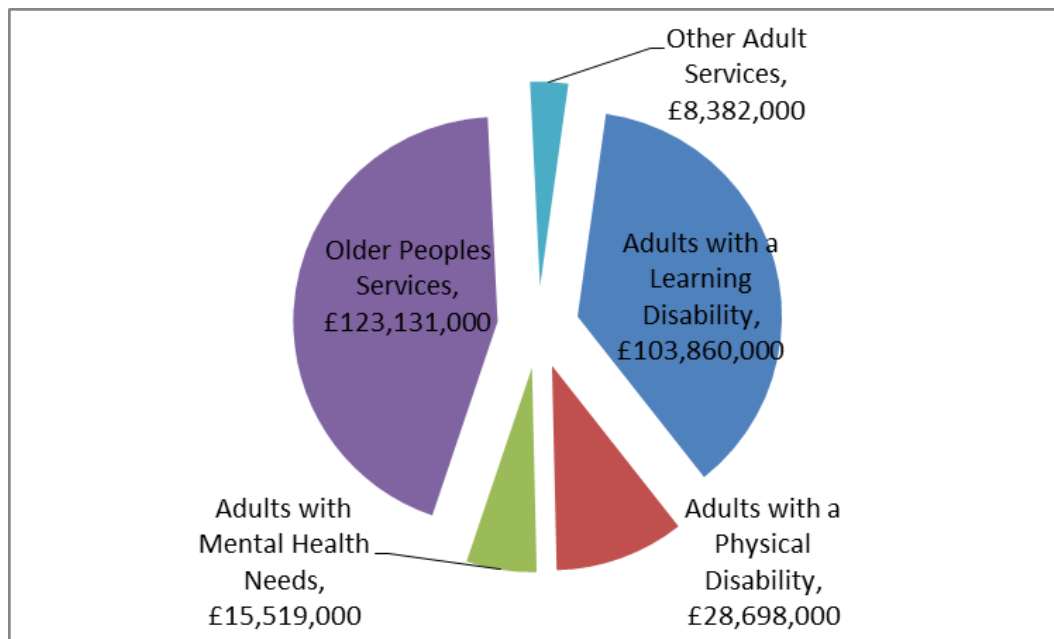
1,085 citizens were **living in a residential/nursing home on a long term basis** as at 31/03/2018 a **0.4% decrease** from last year.

3,388 citizens accessing **community based services** as a 31/03/2018 a **4.2% increase** from last year's figure of 3250, of these 1,260 citizens accessed **Direct Payment or part Direct Payment** a **9.1% increase** from last year.

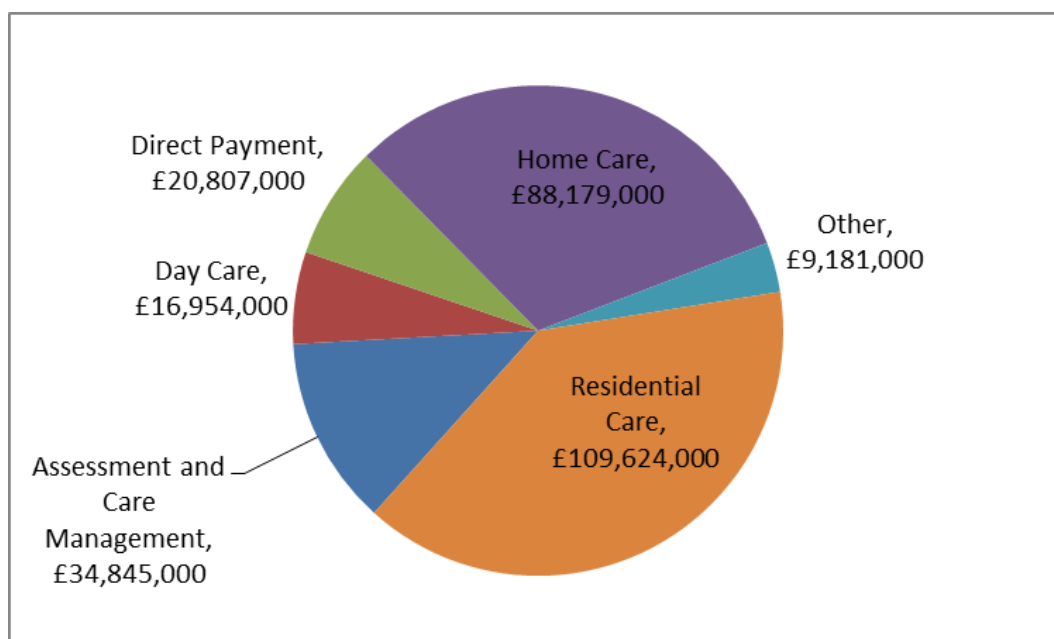
How is Adult Social Care Money Spent?

In total, the net expenditure for adult social care services for the period 1 April 2017 to 31 March 2018 was £279.6m. This includes expenditure on assessment and care management as well as the direct costs of services delivered to citizens.

Adult Social Care Expenditure by Primary Need 2017/18



Adult Social Care Expenditure Assessment by Service Type 2017/18



Adult Social Care Outcomes Framework

The Adult Social Care Outcomes Framework (ASCOF) is a set of measures published by the Department of Health. They aim to measure the impact of adult social care support on a person's life. These measures are of value both nationally and locally for demonstrating the achievements of adult social care.

The ASCOF covers four areas, each having a number of outcome statements to monitor against. These areas are:

1. Enhancing quality of life for people with care and support needs;
2. Delaying and reducing the need for care and support;
3. Ensuring that people have a positive experience of care and support; and
4. Safeguarding adults whose circumstances make them vulnerable and protecting them from avoidable harm.

Our Local Performance Account is written around these four areas. For each area we outline what we achieved in 2017/18 and how we performed.

You can find more information about ASCOF on the NHS Digital website at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/687208/Final_ASCOF_handbook_of_definitions_2018-19_2.pdf

1. Enhancing quality of life for people with care and support needs

This measure looks at social care-related quality of life, including:

- People managing their own support so they are in control of what, how and when support is delivered to match their needs;
- People being able to find employment when they want, maintain a family and social life, contribute to community life and avoid loneliness or isolation;
- Carers ability to balance their caring roles and maintain their desired quality of life.

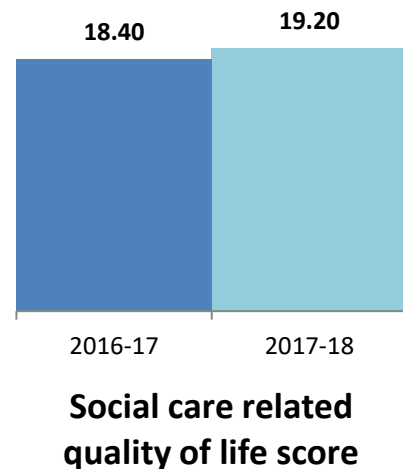
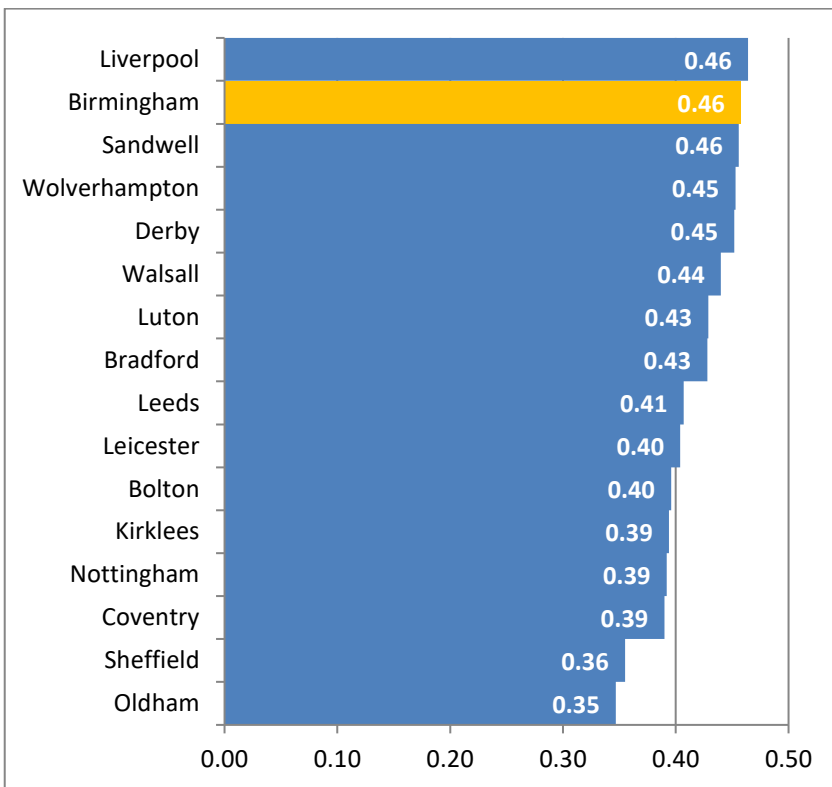
How well we did do in 2017/18?

Quality of Life Score (1a)

We measure 'Quality of life' using the answers to questions in an annual survey sent out to those receiving a service from us. This is called the Adult Social Care Survey. Survey questions cover areas such as choice and control, personal cleanliness, access to food and drink, whether their home is clean and comfortable, safety, contact with other people, how people spend their time and the impact of needing help to do things.

Our adjusted score for social care-related quality of life of 0.46 was above the national average and above the average for similar authorities. There was an increase in our unadjusted quality of life score, from 18.4 in 2016/17 to 19.2 in 2017/18

Birmingham's Ranking Against Comparator Authorities



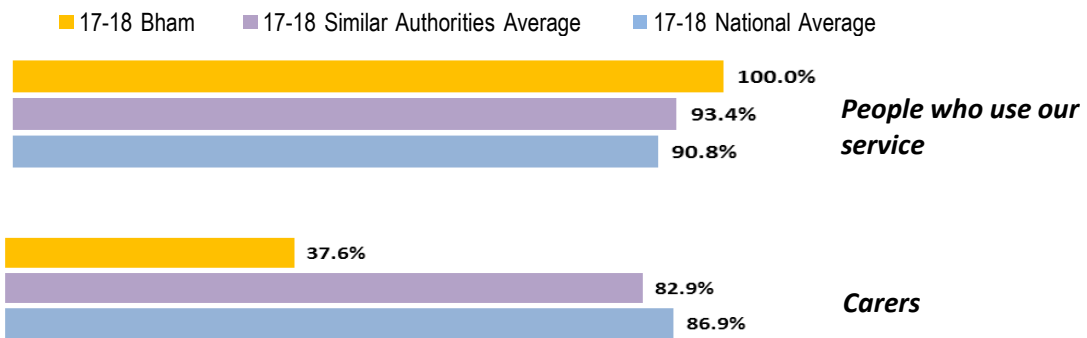
Adjusted Social care-related quality of life – impact of Adult Social Care services

Proportion of Adults and Carers receiving self-directed support and direct payments

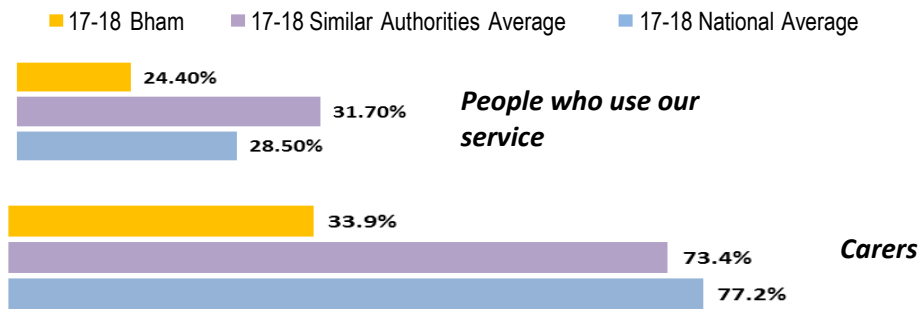
These measures track progress on increasing the independence and control of service-users and carers over the care and support they receive through the use of personal budgets and direct payments.

The proportion of people who receive self-directed support was above the national average and above average for similar authorities. The proportion of service users receiving Direct Payments was below the national average but increased from the previous financial year, from 21% to 24.4% in 2017/18. There was a reduction for carers figures due to a review of the service, this has now been concluded and will be available in next year's figures.

The proportion of people who receive Self-directed Support



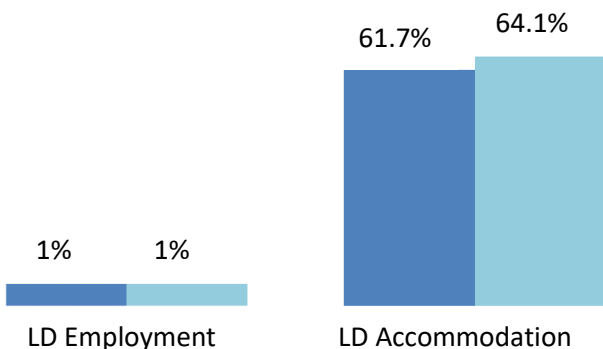
The proportion of people who receive Direct Payments



Employment and Living in the Community

Wherever possible people with learning disabilities should be able to find employment and live in their own home or with family. The percentage of people with Learning Disabilities in paid employment has remained the same as last year at 1%

The number of people with learning disabilities living in their own home or with family increased from 61.7% in 16/17 to 64.1% in 17/18



2. Delaying and reducing the need for care and support

This measure is concerned with preventing people from becoming reliant on ongoing social care and support and where they do, that it is provided in the most appropriate setting. It means that:

- Everybody has the opportunity for the best health and wellbeing throughout their life and can access support and information to help them manage their care needs;
- People and their carers are less dependent on intensive care services as a result of earlier diagnosis, intervention and enablement;
- When people develop care needs the support they receive takes place in the most appropriate setting enabling them to regain their independence.

How well we did do in 2017/18?

Admissions to residential and nursing care

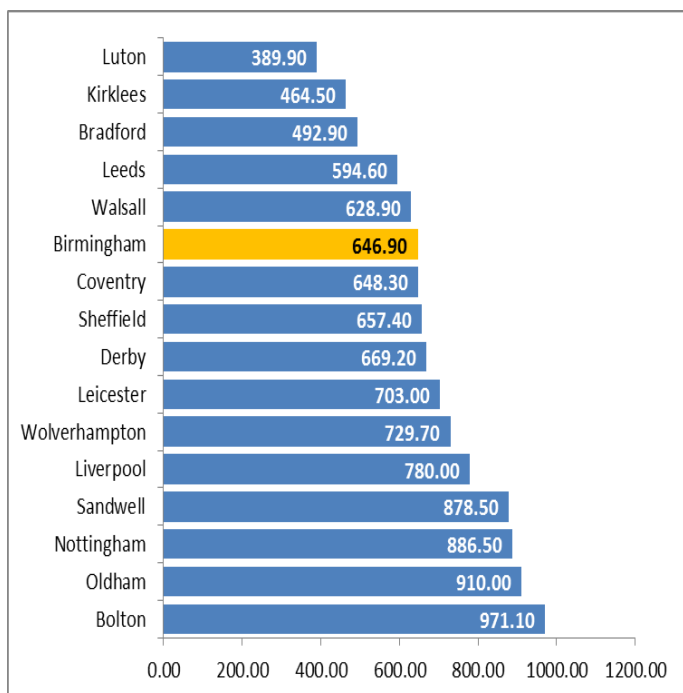
In line with the strategic direction to increase independent living and care in people’s own homes, we aim to **reduce** the number of people whose support needs are met by admission to residential or nursing care.

There was an increase in the permanent admissions to residential care compared to the previous financial year, rising from 552.4 to 646.9 per 100,000 for Older Adults and from 11.4 to 11.8 for Younger Adults. The increase in these numbers is partly due to a change in reporting, however we still compare well to our statistical neighbors especially in younger adults.

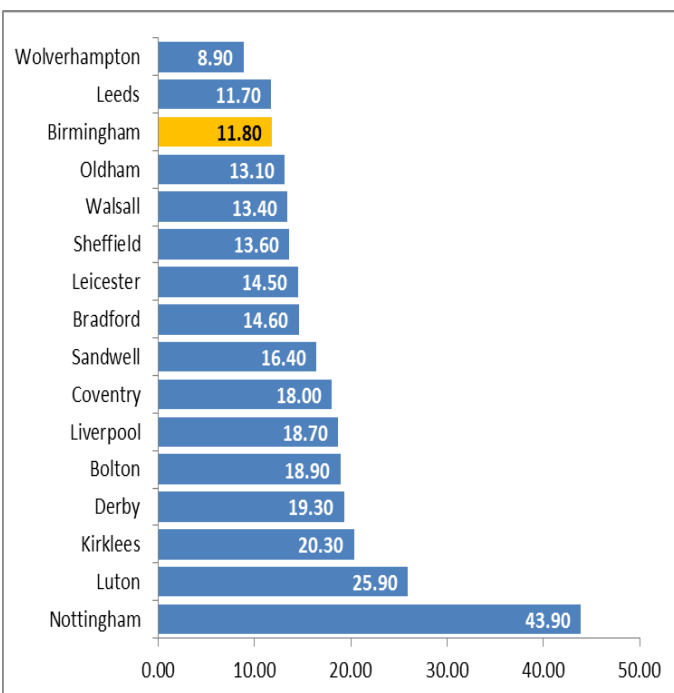
Long-term support needs met by admission to residential and nursing care homes, per 100,000 population

Birmingham's Ranking Against Comparator Authorities

Admissions to residential care – older adults per 100,000 population



Admissions to residential care – younger adults per 100,000 population



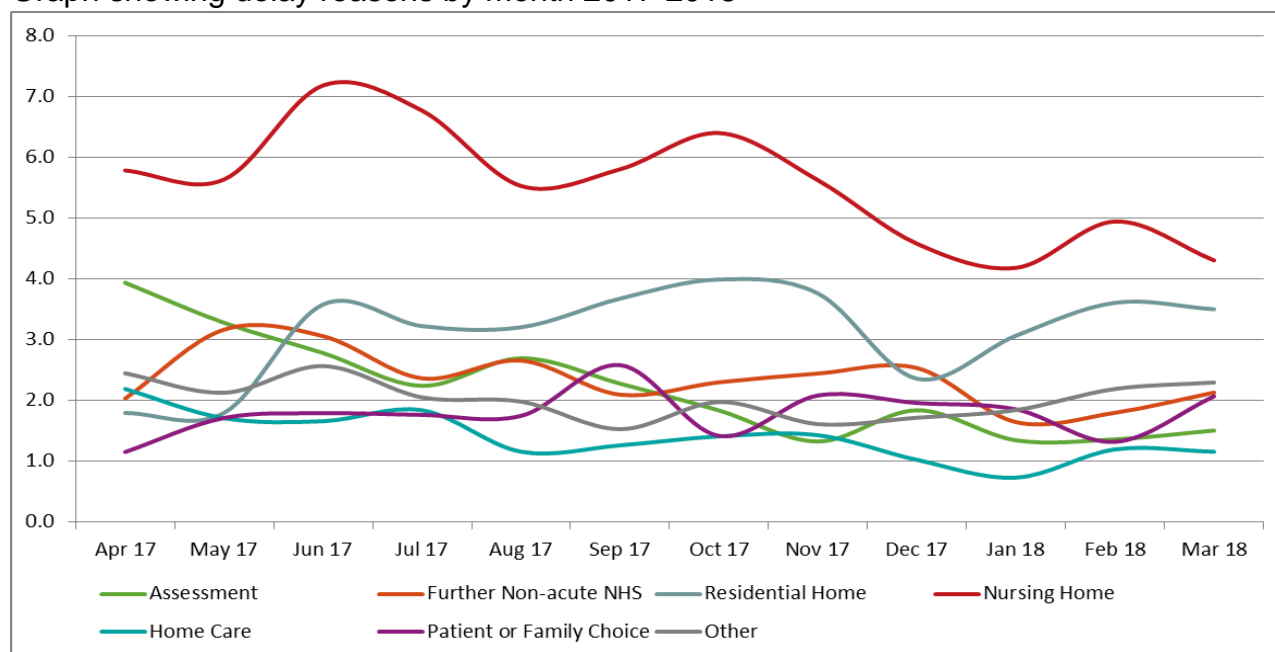
Delayed Transfers of Care

A delayed transfer of care occurs when a patient is ready to leave hospital but is prevented from doing so for one or more reasons. This measure reflects the ability of the whole care system (hospitals, community-based care and social care) to ensure that patients are transferred to the next stage of care and support appropriately. The average daily number of delayed transfers of care per 100,000 of the population in 2017/18 was 18.3 a decrease from 20 in 2016/17. Those attributable to Social Care fell from 13 in 2016/17 to 10.5 in 2017/18.

Table showing delay reasons by month 2017-2018

Delay type	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17	Oct 17	Nov 17	Dec 17	Jan 18	Feb 18	Mar 18	Year
Assessment	3.9	3.3	2.8	2.2	2.7	2.3	1.8	1.3	1.8	1.3	1.4	1.5	2.2
Further Non-acute NHS	2.0	3.2	3.1	2.4	2.7	2.1	2.3	2.4	2.5	1.6	1.8	2.1	2.3
Residential Home	1.8	1.8	3.6	3.2	3.2	3.7	4.0	3.8	2.4	3.1	3.6	3.5	3.1
Nursing Home	5.8	5.6	7.2	6.8	5.5	5.8	6.4	5.6	4.6	4.2	4.9	4.3	5.5
Home Care	2.2	1.7	1.7	1.8	1.2	1.3	1.4	1.4	1.0	0.7	1.2	1.2	1.4
Patient or Family Choice	1.2	1.7	1.8	1.8	1.7	2.6	1.4	2.1	2.0	1.9	1.3	2.1	1.8
Other	2.4	2.1	2.6	2.1	2.0	1.5	2.0	1.6	1.7	1.8	2.2	2.3	2.0
Total	19.3	19.4	22.6	20.2	19.0	19.2	19.3	18.3	16.0	14.7	16.4	17.0	18.3

Graph showing delay reasons by month 2017-2018



3. Ensuring people have a positive experience of care and support

This is concerned with measuring people’s experience of care and support. It means that:

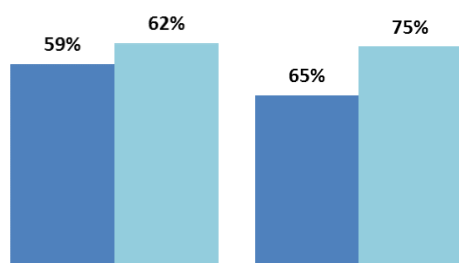
- People who use social care and their carers are satisfied with their experience of care and support services
- Carers feel that they are respected as equal partners throughout the care process
- People know what choices are available to them locally, what they are entitled to, and who to contact when they need help
- People, including those involved in making decisions on social care, respect the dignity of the individual and ensure support is sensitive to the circumstances of each individual

How well we did do in 2017/18?

We measured the effect of support on people using Birmingham’s adult social care services in terms of:

- Satisfaction with care and support services
- Access to information and advice
- Involvement of, or consultation with, carers about support planning

There has been an increase in the proportion of people using services who were ‘extremely’ or ‘very satisfied’ with their care and support services 59% in 2016/17 to 62% in 2017/18. Similarly, the proportion of people who find it easy to find information about support increased from 65% to 75%.



Overall satisfaction of people who use services with their care and support

The proportion of People who find it easy to find information about support

4. Safeguarding adults whose circumstances make them vulnerable and protecting them from avoidable harm

This is concerned with keeping vulnerable people safe. It means that

- Everyone should be able to enjoy physical safety and feel secure
- People are free from physical and emotional abuse, harassment, neglect and self-harm
- People are protected as far as possible from avoidable harm, disease and injuries
- People are supported to plan ahead and have the freedom to manage risks the way that they wish.

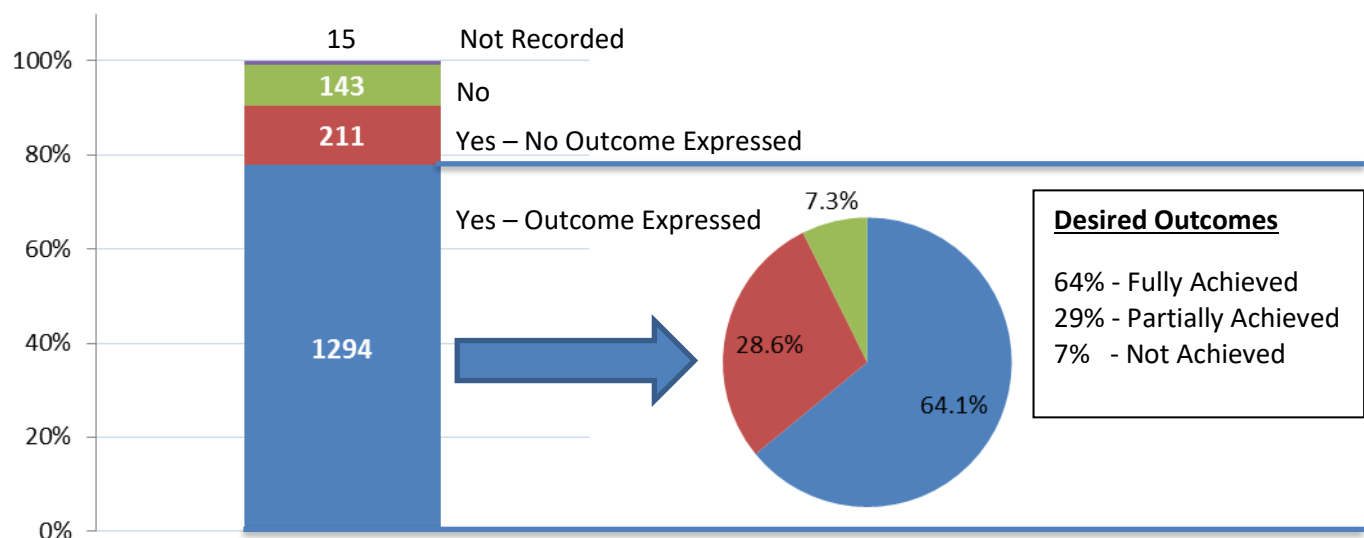
How well we did do in 2017/18?

Safeguarding people – Making Safeguarding Personal

This is the second year of Making Safeguarding Personal (MSP), an initiative aiming to develop an outcomes focus to safeguarding work. MSP is about engaging with people about outcomes they want at the beginning and middle of working with them then ascertaining the extent to which those outcomes were realised at the end. MSP seeks to achieve;

- A personalised approach that enables safeguarding to be done with, not to, people
- Practice that focuses on achieving meaningful improvement to people's circumstances rather than just on 'investigation' and 'conclusion'
- An approach that utilises social work skills rather than just 'putting people through a process'
- An approach that enables practitioners, families, teams and SABs to know what difference has been made

Out of a total of 1663 MSP enquiries, **90%** were asked what their desired outcomes were. **93%** of those expressing an outcome had their outcomes fully or partially achieved.

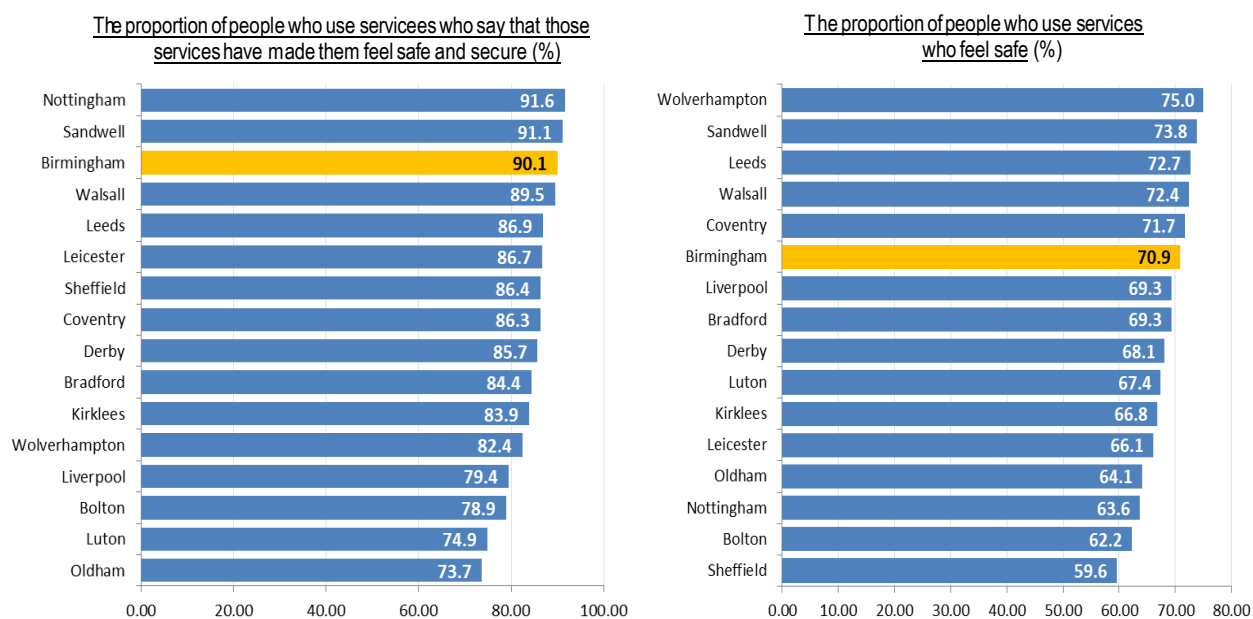


Proportion of people who use services who say that those services have made them feel safe and secure

In the Adult Social Care Survey, the proportion of people in receipt of care who said the care they receive makes them feel safe has fallen slightly from 92.3% in 2016/17 to 90.1. This is above the national average and is one of the highest compared to similar authorities.

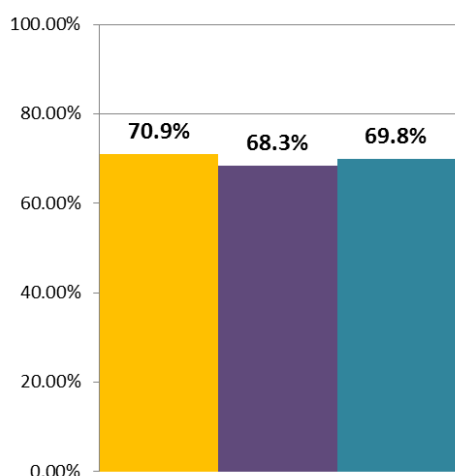
The proportion of respondents that said they felt safe was 70.9%, above the average of 68.3% for similar authorities.

Birmingham's Ranking Against Comparator Authorities

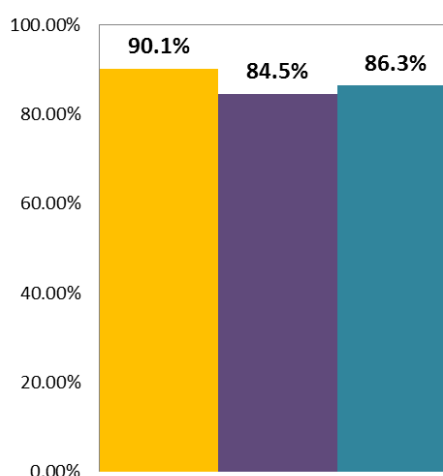


Safe and secure comparison by similar authorities and nationally

■ 17-18 Bham ■ Similar Authorities Average ■ 17-18 National Average



The proportion of people who use services who feel safe



The proportion of people who use services who say that those services have made them feel safe and secure

The Adult Social Care and Health Programme

The programme was established to implement the Directorate Improvement and Business Plan 2017 – 2021. The programme has three core Projects each with a number of workstreams to drive forward the transformational change required to deliver savings and improved outcomes for citizens.

Community Assets Project

People cherish their independence and prefer to live at home or in the community with support if necessary. The Directorate is investing in building community capacity and resilience ensuring that people are able to access support in their community which in turn allows them to continue living independently at home. The Community Assets project is now in the process of commissioning lead partner organisations to support community groups, third sector organisations, and other bodies in developing Neighbourhood Networks. People will be able to access local community groups and activities to support their independence and wellbeing. Social workers and health professionals will also be able to link people to neighbourhood networks.

Early Help and Prevention Project

The vast bulk of people do not want to be dependent on others but will accept one-off or ongoing social care support if it helps them to maintain their independence. The Early Help and Prevention project is aimed at ensuring people have access to one off or ongoing social care support. Work is progressing on developing an Equipment and Technology Strategy. This will ensure that the right equipment and technology is easily available for citizens to support meeting or preventing a social care need. Work on improving Day Opportunities is aimed at supporting citizens to:

- Lead a normal life with access work or volunteering opportunities
- Maintain contacts within the community and avoid social isolation
- Achieve their aspirations for independence and control in daily living

Personalised Support Project

The social work service has moved to constituency working as the first phase of implementing a new social work model. The next phase is currently underway work is progressing on implementing the three conversations model as well as the Customer Journey which is designing the future social work service. The Customer Journey aims to reorganise social work and care management services, and reclaim practice, building on the community model to ensure the service is delivered on a locality and constituency basis. This will strengthen strategic alignment with our health, voluntary and community sector and corporate colleagues, strengthen workers' affinity to their locality, strengthen joint working with partners from other services and increase knowledge about the assets available in their local area. Building on the implementation of the connect2support website the Information Advice and Guidance workstream is developing a comprehensive offer to ensure that people have access to appropriate information in a suitable format to meet their needs.

The Adult Social Care and Health Programme is also supporting improvements in areas such as better budget management and financial controls, increasing the uptake of direct payments and improving performance in relation to Delayed Transfers of Care.

Good News Stories (Linked to 3 Conversations)

Story 1

A young man with an acquired brain injury presented to his GP as he felt he was putting on weight and becoming depressed due to his becoming more isolated. The GP advised the young man to see a social worker and get a referral to a specific brain injury service.

The innovator met with the young man and explored his concerns as well as what he really wanted to get out of having their assistance. The young man identified that he would like to be more active outside his home and work on losing the weight that he had gained. The innovator knew a local gym where public health had funded training for fitness instructors to work alongside people with additional support needs. The innovator introduced the young man to the gym who in turn began attending regularly. The young man is now losing weight, feeling better about himself and becoming more socially active.

Story 2

A 95 year old woman is living independently with regular check-ins from her daughter. The daughter wanted to book a holiday as her last holiday was cancelled due to concerns about leaving her Mum not looked after. The daughter was determined to have Mum placed in respite so that she knew she was safe while she was away.

The innovator met with Mum who had capacity and stated that she did not want to go into respite as she preferred to be in her own home and look after her cat. The innovator was aware that a local residential home was looking to become more involved in their community. The innovator checked with the home on whether they would be keen to allow the woman to drop-in during the day while the daughter was away and then return home at night. The home agreed and with the information the daughter and Mum made private arrangements for the time during the daughter's holiday.

Owning and Driving Performance

We recognise that we need to change as an organisation in order to respond to the changing needs and expectations of citizens. To this end Adult Social Care and Health has embarked on a programme called Owning and Driving Performance that is designed to change the culture of our working practice to better deal with change, decision making and resource management. Staff from across the Directorate have positively engaged with the goal of empowering self-reliance, problem solving and confident decision making.

Birmingham Older People's Programme: Making Birmingham a great place to grow old in

The Ageing Well Portfolio is one of the key priorities of the Birmingham and Solihull Sustainability and Transformation Partnership (STP). Within the Ageing Well Portfolio, the Birmingham Older People's Programme is taking the lead in Birmingham. There are 3 work streams that make up the Programme:

- **Prevention:**

The aim for this work stream is to create a universal wellbeing offer so that older people to manage their own health & wellbeing, based in local communities and utilising local resources. It will address the issues that lead to older people entering into formal health & care systems, such as social isolation, falls and carer breakdown.

- **Early Intervention:**

The focus for this work stream is the transformation of intermediate care services within Birmingham to deliver better outcomes for individuals and improve system efficiency. Independent analysis of the current recovery, reablement and rehabilitation services undertaken in 2017 showed that there could be financial benefits ranging from £27.1m to £37.5m pa if the current system was transformed.

- **Ongoing Personalised Support:**

Some older people will need ongoing support to remain living in their own homes and communities. These services aim to maintain individual wellbeing and self-sufficiency, keep older people safe and enable them to be treated with dignity, stay connected to their communities and avoid unnecessary admissions to hospitals or care homes. This work stream will change the way these services are delivered such that they wrap around the individual.

- **Sustainability and Transformation Partnership:**

Birmingham and Solihull STP is a collaboration of public NHS and council social care commissioners and providers across Birmingham and Solihull working together with partners in the voluntary, community and independent sectors to find the most effective ways to manage the health and care needs of our population within available resources and provide high quality, sustainable care for the future.

<https://www.livehealthylivehappy.org.uk/>

Service User Feedback

There is a designated complaints team who oversees all compliments and complaints for Adult Social Care and Health

Compliments

During 2017-18:

- 256 compliments were received
- 78.5% compliments were made regarding the Staff Conduct followed by 15.2% compliments regarding Service Quality and Standard of Care was 6.3%

Extracts from compliments received:

- “Worker was patient, informative and helpful and made the experience less stressful and did an amazing job”.
- “Worker provided a personal, caring and professional service”.
- “Worker communicated clearly and responded to queries in a timely manner”.
- “The Visual Impairment team provided good support to me”.

Complaints

During 2017-2018:

- 206 statutory complaints were received, an increase on the previous year;
- 902 individual complaint elements were investigated of which:
 - 522 complaint elements were not upheld
 - 213 complaint elements were upheld
 - 95 complaint elements were partially upheld
 - 65 complaint elements were inconclusive and
 - 7 complaint elements where no finding could be made.
- The Complaints Team continues to strive to meet its internal target of responding to complaints and will continue to improve on this performance for the forthcoming year.
- Quality of service had the highest overall reasons for complaints received.
- 18 statutory complaints where there was Ombudsman involvement either an enquiry made or investigation undertaken
- 2 where maladministration was found by the Ombudsman
- 7 are currently on-going with the Ombudsman
- 9 where the Ombudsman has closed and no further action taken or investigated and no maladministration found.

Learning from Complaints

The Learning from Complaints Meeting is held bi-monthly to discuss the detail of learning from complaints received by the directorate including Local Government and Social Care Ombudsman complaints. Some of the wider learning recommendations for this period are as follows:-

- The Complaints team provide a weekly report to managers advising of which complaints allocated to them remain active. When information received is assessed by the Complaints team rather than taking some information into the complaints process this can be processed as a request for service in the first instance to progress matters quickly on behalf of the service user. In order to ensure all requests for service are actioned/progressed it was agreed that these would also be reported on weekly to ensure requests were actioned and no further delay incurred.
- The family of a service user may wish for their loved one to be accommodated within a home of their choice, however, the local authority should continue to provide offers of accommodation within the agreed budget to the family and clearly record this on the service users file. Where the fee for the home of choice is higher than the local authority's agreed budget a top up fee is applied (this is private arrangement between the care home and the third party). Staff need to ensure the family are provided with information regarding third party top up arrangements. Where a top up arrangement is in place the third party agreement must be signed by the third party and an electronic copy recorded on the service users file.
- Officers must ensure that where care is being sourced by the directorate for service users who fund their care themselves in full that the service user/family are advised at the time that this is a service for which the directorate will apply an administration fee.
- Service users/families must be provided with the information leaflet 'Your social care and support – how much you will have to pay?' at the time of support planning. Service users/family must be informed that where the service user is assessed as having to pay a contribution towards their care that the contribution will be charged from the date the service commences. This will ensure that when the invoice is received at a later date (backdated to the start date when care was provided) that the service user/family will be aware of the need for payment. All information provided/discussed with the service user/family regarding the payment of care contributions must be clearly recorded by the officer on the service users file.
- When investigating a complaint, officers must ensure that where the complainant has advised that another local authority has sought legal advice regarding the issue of concern that we do not accept this advice as being correct and legal advice where required should be sought from the directorate's own Legal Department.
- When Social Workers leave the directorate there should be clear processes in place to ensure casework is transferred and a new worker allocated to ensure continuity of service.
- There should be a clear process in place for the transfer of cases between hospital and community social work teams.
- Where something has gone wrong staff should provide an apology either written or verbally as soon as possible in order to address the matter.

Birmingham City Council Adult Social Care Peer Challenge

Birmingham has not had a peer review in the last 12 months, the next one is scheduled for May 2020, we are currently identifying areas in which we feel we require peer scrutiny, in addition to the areas in which the peer team will assess Birmingham.

Social Care Quality Audits

As part of an ongoing audit and evaluation of work being undertaken by social care workers in Adult Social Care and Health we are gathering feedback from citizens we work with. This includes postal questionnaire feedback and team managers quality audits which involves managers making personal contact with citizens to gain feedback. The postal audit is sent to all citizens who had an assessment in a selected month. The team manager audit provides a more detailed analysis of the work undertaken in a random selection of assessments undertaken in a month. The Team Manager Audit report was completed in December 2018.

Overall workers performed very well in the how the intervention was completed. With over 87% achieving a good or satisfactory standard in all of the following areas:

- Involving the citizen and their voice being heard throughout the intervention 90%
- Being clear what outcome the citizen wanted 87%
- Building relationships and treating the citizen with respect 87%

Citizens and carers also reflect this with 88% reporting that they are treated with respect and 84% agreeing that social care worker was clear about what was important to them.

How Well Do You think We Did In 2017/18?

Birmingham's Adult Social Care Comments, Compliments and Complaints Process

For information about the comments, compliments and complaints process for Birmingham's adult social care services please contact:

Complaints Team
Strategic Services
Birmingham City Council PO
Box 16465
Birmingham B2
2DG
Phone: 0121 303 5161 (option 1)
Email: customercareteam@birmingham.gov.uk

Web: https://www.birmingham.gov.uk/info/20018/adult_social_care_and_health/116/comments_compliments_and_complaints_about_adult_social_care_services

Sources of Further Information

Adult social care information and advice for Birmingham

If you think that you or someone you care for needs social care support, please call the Adults and Communities Access Point (ACAP) about getting an assessment of your (or their) social care needs: 0121 303 1234.

Protecting adults from abuse and neglect

Information about abuse of vulnerable adults is available on Birmingham City Council's website at:

www.birmingham.gov.uk/safeguardingadults

If you think there has been a crime, call the West Midlands police on 0345 113 5000. In an emergency, phone 999.

If it is not an emergency but you are worried about possible adult abuse, please call the Adults and Communities Access Point (ACAP) on 0121 303 1234.

Birmingham City Council performance

www.birmingham.gov.uk/info/50130/performance

The Council's website gives information on services including:

Healthwatch

Healthwatch England is the independent consumer champion for health and social care in England.

www.healthwatch.co.uk/

Healthwatch Birmingham

The local Healthwatch in Birmingham is available at: www.healthwatchbirmingham.co.uk/

Forward Carers

Forward Carers is a West Midlands based carer support service, here to make a real difference to the lives of people caring for an elderly frail, sick or disabled family member. Our aim is simple – to improve the physical and mental wellbeing of carers, young and old, including parent carers, so that families stay healthier and happier together, for longer.

<https://forwardcarers.org.uk/>

Appendix 1 – Our Overall Performance for 2017/18

ASCOF ID	Indicator	2016/17	2017/18	National Average	National Rank	
1A	Social care-related quality of life score	18.4	19.2	19.1	63	↑
1B	The proportion of people who use services who have control over their daily life	70.0%	78.3	77.6%	69	↑
1C1A	The proportion of people who use services who receive self-directed support	100.0%	100.0%	90.8%	1	→
1C1B	The proportion of carers who receive self-directed support **	95.8%	37.6%	86.9%	136	↓
1C2A	The proportion of people who use services who receive direct payments	21.0%	24.4%	28.5%	97	↑
1C2B	The proportion of carers who receive direct payments **	95.3%	33.9%	77.2%	126	↓
1D	Carer-reported quality of life score	7.0	N/A*	7.7	N/A*	
1E	The proportion of adults with a learning disability in paid employment	1.0%	1.0%	7.0%	146	→
1G	The proportion of adults with a learning disability who live in their own home or with their family	61.7%	64.1%	78.0%	143	↑
1I1	The proportion of people who use services who reported that they had as much social contact as they would like	37.3%	46.5%	45.9%	66	↑
1I2	The proportion of carers who reported that they had as much social contact as they would like	28.3%	N/A*	35.5%	N/A*	
1J	Adjusted Social care-related quality of life – impact of Adult Social Care services	0.4	0.5	0.4	2	↑
2A1	Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population	11.4	11.8	13.9	64	↑
2A2	Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population	552.4	646.9	611.1	91	↑
2B1	The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services	77.5%	73.1	83.3%	137	↓

ASCOF ID	Indicator	2016/17	2017/18	National Average	National Rank	
2B2	The proportion of older people (aged 65 and over) who received reablement/ rehabilitation services after discharge from hospital	2.9%	2.3%	3.3%	98	↓
2C1	Delayed transfers of care from hospital, per 100,000 population	20.0	18.3	10.98	138	↓
2C2	Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population	13.0	10.5	3.6	147	↓
2D	Outcome of short-term services: Home care enablement	58.1%	49.7	74.9%	145	↓
3A	Overall satisfaction of people who use services with their care and support	58.6%	62.1%	64.5%	104	↑
3B	Overall satisfaction of carers with social services	25.9%	N/A*	39.0%	N/A*	
3C	The proportion of carers who report that they have been included or consulted in discussion about the person they care for	59.0%	N/A*	70.6%	N/A*	
3D1	The proportion of people who use services who find it easy to find information about support	65.0%	74.5	73.4%	58	↑
3D2	The proportion of carers who find it easy to find information about support	47.9%	N/A*	64.2%	N/A*	
4A	The proportion of people who use services who feel safe	66.0%	70.9	69.8%	66	↑
4B	The proportion of people who use services who say that those services have made them feel safe and secure	92.3%	90.1	86.3%	40	↓

* Not reported on this year

** There was a reduction for carers figures due to a review of the service, this has now been concluded and will be available in next year's figures.

Appendix 2 – List of Similar Authorities

One of the ways in which we measure our performance is by comparing ourselves against a group of 15 other local authorities with a similar demographic profile to Birmingham. These are:

Bolton
Bradford
Coventry
Derby Kirk
lees Leeds
Leicester
Liverpool
Luton
Nottingham
Oldham
Sandwell
Sheffield
Walsall
Wolverhampton

**If you need this information in another format or language
please contact:**

Citizen Voice Team
Strategic Services
Birmingham City Council
PO Box 16465
Birmingham
B2 2DG
0121 464 4133