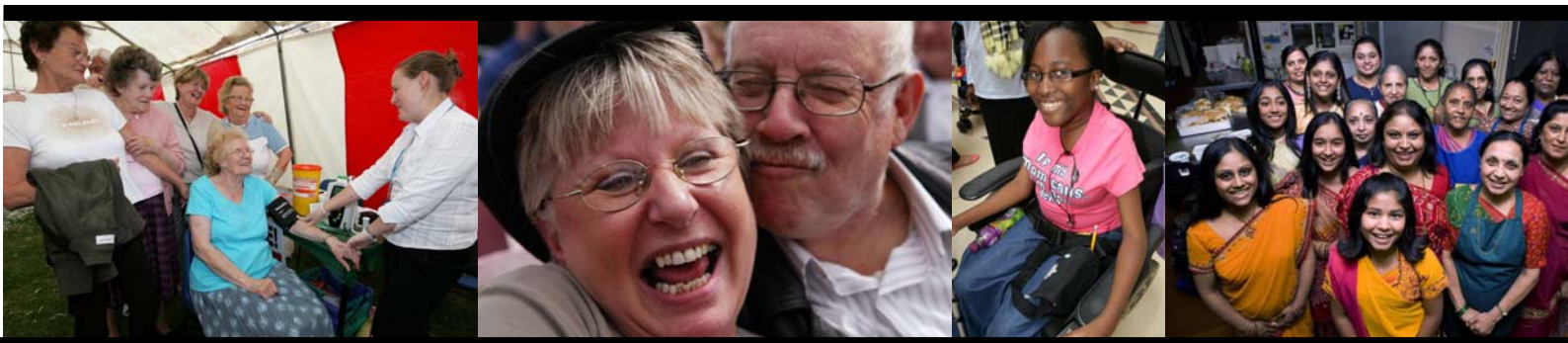


Adult & Community Services



Annual Review Meeting

Information provided in support of the
Annual Review by the
Commission for Social Care Inspection

August 2007



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Introduction

2006/2007 saw Barking and Dagenham building on the progress of earlier years in the delivery of high quality services to our local community.

Adult and Community Services embedded a new structure across the Department, providing the mechanism for the delivery of a range of services in a truly cohesive way, both across the Council but also across the wider partnership.

The year has seen notable successes, which include:

- The Department again managed to bring expenditure in within budget for the 2006/7 financial year;
- 5 Blob performance across many areas;
- Ministerial recognition as national leaders in Individual Budgets and Direct Payments;
- Adoption of Disability Equality Scheme in December 2006, based on significant user consultation, led by a local third-sector organisation;
- Consulting on plans to reshape home care services to focus on reablement (independence, staying in your own home);
- Adoption by Executive in March 2007 of the Neighbourhood Management Strategy, a pioneering and comprehensive approach;
- Delivery of Mental Health inspection action plan;
- Retender of entire (eight service) drug treatment system in the course of one year;
- 'Housemark' award for work of Outcomes, recognised by Chartered Institute of Housing and National Housing Federation;
- Launch of Books on Prescription scheme in January 2007;
- Completion of construction of Barking Learning Centre (increasing local public sector employability) in March 2007;
- Highest ever retention rates in drugs services;
- Modernising residential care for older people to meet the needs of growing numbers with dementia;
- The development of new and innovative services to address domestic violence, significantly impacting upon the number of offenders brought to justice;
- Delivery of the improvement plan from the Supporting People inspection ahead of time;
- The DAAT Drug Intervention Project recognised nationally as good practice;
- Effective introduction of new Fair Access to Care criteria without disruption.

Progress has been substantial: Barking and Dagenham Adult and Community Services has lead a significant programme of change, reinforcing our commitment to providing a strong service to the local community. This document provides evidence of our on-going dedication to supplying services to the highest standard, and illustrates some of the many ways in which we have made a positive impact on the local community in the past year.



Active and healthy

The majority of areas within Barking & Dagenham are within the 20% most deprived in England. Men and women live for nearly 2 years less than the average for England. Therefore a priority for ACS is promoting improved health and emotional well-being. To facilitate this, in a number of areas, we have worked to provide improved access to information and services.

Our local health improvement priorities include increasing the take-up of breast and cervical screening and equity of access to care, and reducing obesity, emergency admissions for long term conditions and the numbers of people who smoke.

During 06/07 as part of our ambitious public health programme we have developed a range of initiatives including:

- Books on Prescription
- Heritage Walks
- Health Champions
- Weight Wise
- Allotment project
- Operation Market Garden

Mental health wellbeing initiatives, such as Books on Prescription, give people access to a wide range of self-help books that cover a number of mental health issues including anxiety, anger, phobias and eating disorders. This is delivered by prescription, given by GPs or other health staff. The service is supported by the distribution of health

information leaflets, in a variety of formats, in Pharmacies, Leisure Centres, Libraries, Open Learning Centres, Children's Centres, Social Care establishments and Neighbourhood Housing offices.

Furthermore, work in 2006/07 saw the Libraries Team working with the Advice and Brief Intervention Team (ABIT) to develop Computerised Cognitive Behavioural Therapy (CCBT). This scheme makes it easier for individuals and groups to access guided self-help. CCBT can be undertaken by the person themselves at their own pace and in their own time, rather than waiting for

sessions with professionals. It involves a series of steps to address the issue, e.g. anxiety. Users can be guided by a member of the ABIT team, if they wish during weekly drop-in sessions.

As well as the Books on Prescription scheme there is also increased provision of general health and healthy eating information, available from libraries across the borough.

There is a range of programmes that have been designed to tackle

health problems related to lack of fitness and inactivity. Exercise classes on prescription are offered through joint working between the PCT, GP's and Leisure Services. In 2006/07 approximately 400 people were given a prescription, of whom, 45% completed the full course.

“The Council and its partners are providing a good range of preventative services for older people... there are a range of preventative services offered by the voluntary sector such as an outreach programme for BME older people and a Befriending Service. The Home Library Service is provided to over 400 people in individual homes and to over a thousand in sheltered accommodation, church halls, nursing home and other establishments. Over 90 per cent of borrowers are over 65 years old. Partnership working is also resulting in the provision of initiatives aimed at falls prevention, such as local exercise groups for older people to prevent falls by strengthening muscles and improving mobility. Such services are promoting the independence and well being of older people.”

*Corporate Assessment,
Audit Commission 2006/2007*

During the early part of 2006 performance levels in relation to hospital discharges were generally good. Pressures arose during the second half of the year. The Council successfully assisted the PCT in decommissioning 60 non-acute beds at St George's Hospital, Hornchurch, however, BHRT's implementation of the 'Fit for the Future' plan, together with the shift into the new Queen's Hospital, Romford, resulted in the closure of a further 277 acute beds across the local health economy. This impacted seriously on our ability to maintain performance at the levels that we had been achieving.

With support from the PCT an additional £20k was made available to help reduce delays. We have worked closely with BHRT and the PCT to review our joint systems and processes and to explore risk-sharing agreements.

Despite this significant loss of resource, social care systems have held up and the levels of delays attributable to social care began to reduce significantly in February 2007. These have continued to fall and the average is now well below 5 delays. The PCT have also lowered their delays and these are also now below 5 each week.

By reviewing external provision with providers we are creating new contract specifications that prioritise health and well being. During 06/07 we drew up specifications for community meals to provide a wider choice of nutritionally balanced meals and outcome-based homecare services designed to promote independence. In early 07/08 these services were re-tendered.

Age Direct has over 300 members who regularly meet to discuss health and social care issues. One concern members had was that older men did not always feel comfortable about getting involved in community projects. So they developed an ambitious allotment project based on the idea of the 'garden shed' culture to appeal to men. It's now flourishing – with men and women, young and old participating.

Winner of the Municipal Journal 'Achievement of the Year' Award for Partnering with Health Services

Following the discussion on Major Adaptations at the 2006 Annual Review Meeting we undertook a whole system review of our Community Disability Service. We identified a need for a number of changes to processes and these were implemented in 06/07. This has resulted in an improvement in our waiting times for assessment. Through financial modelling we

identified that significant additional resources would be required if we were to achieve top quartile performance. During the 2007/8 budget setting process Elected Members prioritised this service and £700k was redirected as a result. At the beginning of 2007/8 as this cash injection, together with new

approaches to commissioning, takes effect steady improvement can be demonstrated and by mid year we will be delivering major adaptations within 35 weeks.

Our successful early adoption of TeleCare within extra care housing schemes such as

Fred Tibble Court has demonstrated how individuals with high level needs can be supported within the community. We have therefore conducted a Value for Money review of the Care-line service, this will help us re-design this widely used community alarm service to offer a broader range of Telecare options to a wide range of users, many of whom will not receive assessed services.

In September '06 the Executive agreed to revise our eligibility criteria, only providing assessment and subsequent services to those people with critical and substantial needs in the future. This was applied from 11th December '06 to all new users and to

In order to improve our performance on major adaptations within Council owned rented accommodation, significant resources were released and an independent review conducted. This highlighted areas for improvement from which an action plan was devised and targets set. The commissioning and procurement for equipment was overhauled leading to significantly improved Value for Money. For example by combining with Essex County Council we were able to reduce the cost of a stair lift from £4500 to £3000 (fitted and maintained). Similar achievements have been seen with level access showers. Together stair lifts and showers make up around 50% of major adaptations. The new system has also improved waiting times, with some people now waiting less than 6 weeks for a stair lift. The average time continues to fall and we are on track to hit the 35 week target soon.

existing users from the first review. Following the Members' decision, publicity materials were issued to key statutory and voluntary partners, who receive briefings and staff training on the changes. Despite a significant number of reviews in the 4th qtr of 06/07, using the new thresholds we have seen no increase in the number of complaints relating to assessment. We consider that this is due, in part, to the wide range of preventative services the Council has in place. It is planned to review the impact in 2007/8 once the new arrangements are bedded down.

The Unique Care project was agreed in early 2007, this will provide clusters of GP practices with their own social worker and community nurse in order to fast-track people to services and prevent the need for hospital or residential care by promoting independence. This is an innovative partnership between social care, the PCT and Supporting People.

We have continued to develop the Single Assessment process for older people. All staff who are involved in the assessment process are actively using contact and overview assessments electronically for all Service Users over 65, with information available to partners on an individual case basis. We continue to work with Health colleagues through the Adult Trust to develop links into the new NHS Care Records Systems and piloted in 06/07 encrypted email systems to ensure secure exchange of information.



Living and working

Supporting people to live and work independently is a key way in which we can help to build a strong community. This is why we are dedicated to extending user control, encouraging independence, self-support, and education. We are also developing housing support for vulnerable people. We have worked to meet these aims in a number of ways.

Funding for the Single Point Access (SPA) Team was agreed in 2006/07. The team will seamless services to people across Housing, Social Care, Supporting People, the PCT and the voluntary sector. The team of 5 people receive referrals from other professionals for people who would be 'hard to house' (for example they might have rent arrears, anti-social behaviour orders or drug or alcohol issues). The SPA team links housing with support, care and health packages to ensure the tenancy has the best chance of being sustained and positive outcomes for users.

Over 300 people living in B&D receive direct payments. This level of take up of direct payments (DP) has ensured that B&D has been one of the top five authorities nationally three years running (PAF indicator C51 results). Of the 300 people receiving DPs, 100 are over 65 years of age. This level of success with direct payments played an

important part in ensuring B&D was chosen as one of 13 individual budget pilot sites. The pilot runs from March 06 to December 07. It led to the successful development of a resource allocation tool working across all service groups and ensuring that individuals

receive a clear, up-front idea about how much money is available for their support. This allows the individual to remain in control of deciding what services they receive.

We have devised new social care roles called Support Brokers. They assist individuals to plan and organise what they want. The flexibility of this approach allows those satisfied with existing services to keep them, and also gives people options for building up more individually tailored

support, using Direct Payments and other routes.

We have worked with Supporting People and Independent Living Fund to integrate all these funding streams for our users. By doing this we have made assessment

quicker and easier – this means users do not repeatedly have to give their personal information to different service providers and funders. Particularly of note is that this successful pilot has

not resulted in increased costs.

As a leading authority in the provision of Extra Care housing, ambitious projects such as D'Arcy House have been launched. This

"The Council is providing a good range of services to support the independence of vulnerable older people and aims to shift provision from residential care to community care with examples such as the home from hospital scheme and home support. Performance on the take up of direct payments is very effective with 180 people in 2005/06 and as a result the Council is one of 13 Councils selected to pilot individual budgets. Difficult decisions regarding the closure of residential care homes have been taken which has allowed the development of a number of extra care sheltered schemes in partnership with housing associations. An innovative example is Fred Tibble Court, offering 31 flats as a specialist facility for people living with dementia."

***Corporate Assessment,
Audit Commission 2006/2007***

With support from an advocacy agency, Disabled Service Users at the Lodge Avenue scheme are involved in considering the pooling of their care packages through an Individualised Service Fund so that they could co-operatively commission a care provider directly to meet their needs.

has been developed in partnership with Hanover, and is set to open in October 2007. This extension of Extra Care housing has made a considerable reduction in the Council's perceived dependence on residential care. On 24th October the Council agreed to consult on re-shaping services for older people to provide more specialist services which would meet the needs of an ageing population. The proposals included:

- re-modelling an existing home to provide specialist dementia services, and the closure of the remaining 2 homes which no longer met modern expectations of good quality care;
- re-shaping the home care service with the Council providing an intensive short term re-ablement service for all new packages, and some specialist care for people with dementia, and the majority of longer term home care being delivered through Direct Payments and Individual Budgets, and newly commissioned home care services provided by the independent sector.

The consultation concluded in late February 2007, and led to the agreement to remodel Lakerise old people's home to provide up to 28 long term places for people with dementia, and a self-contained short term/respite facility. It was also agreed to remodel an adjacent sheltered scheme to create a specialist dementia unit. Lakerise will reopen in January

January 2007 saw a major one day Stakeholder Conference on occupation and employment services for people with mental health problems. The day took stock of existing mental health day care service provision, with a view to developing more person-centred, tailored support packages to help people re-enter the world of work. Amongst others, Miles Rinaldi from the Social Inclusion Unit (who co-authored the national guidance) presented on the redesign of day services in SW London to facilitate the employment of vocational workers in CMHTs. This has been a vital part of the redesign of our own services, informing a new strategic direction for day care. Implementation is underway.

2008 as a specialist dementia residential care home. We have worked with the Centre of Excellence at Stirling University, who provided design and staff training advice. Existing residents have been reviewed and moved to alternative independent sector provision.

The restructuring of the in-house home care service is being undertaken with the re-commissioning of independent sector homecare services, with the new service going live in Autumn 2007. This will build on the safe effective service delivered by the in-house home care service rated as "Excellent" by recent CSCI inspections.

We have worked to improve performance in terms of 'move on' where residents move from short stay accommodation to sustain a permanent tenancy. This has been achieved through partnership work and joint training with providers. Successful 'move on' has risen from 55% to 80% since February 2007.

The Council committed funds to help start a new dementia carer support initiative, with North East London Mental Health Trust, creating Admiral Nursing Service for which one postholder has now started.

Successful events have been held in partnership with Carers of B&D to encourage access to services and increase awareness of direct payments and support opportunities. Following feedback, emergency support has been enhanced, through the implementation of the Carers' Emergency Respite Service, providing two carers at short notice on request.

Clean and green

Between October and December 2006 we consulted local residents on our 'Cleaner, Greener, Safer' Campaign. The campaign aimed to improve services across Barking and Dagenham and to encourage local people to help us in making the borough a better place to live. 60% of those asked said our borough was a cleaner place than it was a year ago.

One of the employment initiatives supported by the LAA Economic Development and Enterprise sub-group is a recycling project run by the Osborne Partnership which provides training and employment for people

with Learning Disabilities. It is hoped that this project will become a self financing social enterprise. This was developed in partnership with the private sector in the 2nd half of 2006/7 and started operations early 2007/08.

The introduction of Neighbourhood Management in 2007/8 will increase the focus on improving the quality of local people's environments, and supporting local communities, including 'vulnerable people', to make a difference.

This Autumn, D'arcy Gardens in Jack Jones Way, Dagenham will open. The Borough's newest extra care housing scheme has been developed by Hanover Housing in partnership with the Council.

The scheme is highly sustainable, it has grass covered roofs, solar panels and wind turbines to provide energy and "grey water recycling" and will be the greenest extra care housing scheme in the UK.

Residents of other extra care schemes were consulted and improvements to extra care housing which they suggested have been included in the building and in service design.

**D'arcy Gardens:
Artist's Impression**



Be safe, feel safe

A key concern for many local residents is how safe they feel in their homes and on the streets of Barking and Dagenham. Good partnership working is key to promoting safety and reducing the fear of crime. This will be further strengthened by the introduction of Neighbourhood Management in 2007/8.

We have implemented a number of initiatives, these include:

- an increase in Street Wardens;
- the provision of practical security advice for victims of crime;
- Distraction Burglary Awareness Days;
- issuing memo minders to help deter distraction burglars;
- Introduction of 'no-cold calling' zones;
- Work with Age Concern and Victim Support together with statutory partners in Fire and Police Services to provide security and safety checks, and smoke alarms to older people at home.

In providing security advice, running Distraction Burglary Awareness Days and issuing memo minders, we have worked with libraries to make sure that people have the information they need about these services and know when and where they can access advice.

We have focused on targeted events such as on the Gascoigne estate where a programme of home security was undertaken by the

council to prevent burglary and where intergenerational activities brought young and old together to dispel myths and promote a feeling of safety.

The Council takes its lead responsibility for safeguarding vulnerable adults seriously. During 2006/07 the Adult Protection Committee has been strengthened and appropriate senior representation has been secured from all partner agencies.

A very high proportion of in-house and external provider staff have attended training in adult protection issues. Some of the training provided has been tailored to meet the particular needs of specialist teams such as mental health and the drugs teams.

As a result almost all our provider teams, both internal and external, have some members of staff who are trained in these issues. As a result of this heightened

awareness, there has been a significant increase of approx 20% in the number of appropriate adult protection (AP) referrals received when comparing the year under review with 2005/06.

40 people have completed the specialist training for managers and investigators, this

included people from partner organisations such as BHRT & Age Concern. We are, therefore well placed to provide prompt and sympathetic responses to Adult Protection concerns as they arise.

In continued attempts to reduce incidents of domestic violence we have worked alongside partners to develop the Domestic Violence Intervention Project – a non-court ordered perpetrator programme. This cross-borough

In response to shared concerns about the number of adult protection issues arising in care homes a Workshop style conference was organised at CEME on 9th November 2006 in partnership with colleagues from Havering, Redbridge and CSCI. The aim was to reinforce the notion that good practice in care homes is one important way to ensure that adults are safeguarded from harm. The conference was attended by Care Home managers and owners from across the three boroughs and feedback suggests that it was welcomed by all concerned.

project has been receiving referrals since January 2007. It offers a 32 week programme for male perpetrators of domestic violence within heterosexual relationships and is accessible to child protection services, health professionals, substance misuse agencies, family courts, CAFCASS, community organisations and to men who wish to self-refer.

In addition to this the project works with domestic violence perpetrators in same sex relationships, female perpetrators of domestic violence and male victims of domestic violence where requested and provides a support service for the partners and ex/partners of men who access the perpetrator programme. This service will focus on risk management, enabling women to access local support services where they exist and providing short-term individual support where not. By March 2007 perpetrators brought to justice had risen from 23% in 2006 to 37% and processes are in place which will ensure even greater intervention in the coming year.

Working to Secure by Design standards with police partners we ensure that we are designing out crime, and building accommodation where people can be safe and feel safe – new accommodation at D’arcy House will meet this standard.

Throughout 2006/07 the Drug and Alcohol Action Team undertook an adult substance misuse need assessment. The process involved analysing extensive data from 2005/06, consulting with key partners, service users and their carers to explore the

In partnership with the Primary Care Trust and the Metropolitan Police, we have been able to jointly fund an innovative Conditional Discharge scheme. The new project uses Conditional Discharge to enable the courts to grant bail, with the condition that the offender attends and engages with drug treatment services. Lack of attendance or engagement will result in breach of bail and be enforced immediately. We are confident that the scheme will increase the number of patients in treatment, and improve retention, which will in turn reduce crime in the borough, without the level of additional resourcing that intensive Drugs Intervention Programmes have historically required.

The Community Safety Team had a complaint from the Independent Living Team stating that some of their clients with learning disability were being abused by a group of children. We organised a restorative justice conference between the vulnerable residents and the children of one particular family who were highlighted as being responsible for the harassment and abuse. The children acknowledged the effect their behaviour had on the vulnerable residents and agreed to improve their behaviour. They created a written agreement, to which terms they have kept. At a follow up meeting one of the residents confirmed that the children always said hello to him now and helped him with his shopping and that the conference had been a great success.

issues surrounding the treatment system. At the same time, the DAAT have redesigned the entire substance misuse treatment system to ensure the needs of the local population are met. The needs assessment backed up the need for a specialist prescribing service within the borough, which has now been commissioned, and further clarified the importance of having a “gateway to treatment” service. Referral sources and

routes were also explored as part of the needs assessment process, and it was discovered that referrals from tier one agencies were lower than expected. As a result, a set of common referral and assessment tools have been developed, integrated care pathways and guidance have been drafted and a service directory listing all substance misuse

services available in the borough has been written and shared with all tiers of service provision. Waiting times for substance misuse services in the borough continue to be well within national targets, despite going through the retendering process, waiting time targets are written into all service specifications and monitored regularly through DAAT contract monitoring processes.

The findings from the needs assessment were used to inform priorities and actions within the Adult Drug Treatment Plan 2007/08 including the need for training for tier one agencies. Barking and Dagenham’s research was held up as a model of good practice

by the National Treatment Agency.



Enjoy and achieve

The Council actively seeks to involve Carers and Service Users in a range of activities which will help them build confidence in their own abilities and participate in the wider community, whilst increasing their skills and qualifications. The increasing diversity of Barking & Dagenham's population means that services and volunteering opportunities increasingly need to take account of cultural and religious diversity.

As part of the borough's skills strategy, the Council recognized the need to increase employability of local people in public sector services such as health and social care. The Barking Learning Centre (construction completed March 07 for June 07 opening) uses high quality design to attract people previously 'turned off' learning, and is delivered in partnership with the local College and University.

A number of local voluntary organisations receive funding both from the Council's corporate grants fund and the Adult Social Services budgets to provide non-assessed services such as advice, advocacy and support networks for carers, disabled or elderly people. Barking and Dagenham Direct staff and Care Managers are made aware of the need to promote these services.

One of the ways we are assisting individuals to achieve their full potential is through the highly successful specialist day service for

people with severe autism. This innovative service, based at the Heathlands Centre offers 12 people care, support and learning experiences. The service has been accredited by the Autism Society and two other local authorities (Tower Hamlets and Havering) have recognised its value by commissioning places.

Recognising the importance of the transition process for young people leaving school and the impact that decisions made at this time can have on their lives, a new post of Group Manager for Transitions was established at the beginning of 2006/07. Since he began work in the summer of 2006, the Group

Manager has carried out a full and comprehensive needs mapping exercise and consulted young people and their parents to design a new service model.

As a result of the foundations established in 2006 through needs mapping and a full review of young people with complex needs aged 16+ who will need support in adulthood, early in 2007 we agreed to establish a multi-disciplinary operational team with staff from a number of disciplines (social care, health,

education) to care manage the process of transition for young people with complex needs, and oversee the process of transition planning beginning at Year 9. The team is being recruited to and will be operational in November.

Mental Health Services and Capital Volunteering within Barking and Dagenham have proven to be a force for positive change in people's life.

Roy has lived most of his life in Dagenham. As well as having used drugs for 16 years, Roy has experienced a number of severe mental health problems.

As Roy started to turn his life around, he discovered the opportunities in volunteering through community paper 'The Citizen'. He has since volunteered in roles such as supporting people with mental health issues back into employment, and managing other volunteers in a recycling project.

Roy has said of his experience "Volunteering is a way of making good on my past. I lost access to my family and experienced psychosis because of drugs... Now I'm part of a service user forum and often stand up to talk in front of groups of people."

A Person Centred approach will be taken to all year 9 planning across the authority. An interactive computer based tool which has been endorsed by the Valuing People Support Team, has been piloted in a number of schools (specialist and mainstream) in Barking & Dagenham and will be rolled out for full implementation in September.

An Employment event is planned with Learning and Skills Council and Day Service Providers to look at improving pathways to work for people with Learning Disabilities.

As part of the borough's new community cohesion strategy, the Community Development Service is working with the Volunteer Bureau to develop a strategy to increase volunteering in the borough. Libraries work in partnership with the Adult College to deliver training for volunteers to enable them to develop the skills necessary to participate in community association governance etc.

Within mental health services, work was undertaken to reorganise occupational therapy services in line with DH commissioning guidance. The result

includes a Consultant Occupational Therapist for Employment & Vocational Opportunities (EVO), employed by North East London Mental Health Trust. This service works in partnership with JobCentre Plus to provide monthly employment advice sessions at the Hedgecock Centre, and also co-facilitates improved care co-ordination. A further Employment Adviser, funded by the London Development Agency, and seconded from Tomorrows People, provides vocational assessments and assistance for service users to access employment, training and vocational opportunities. Business setup support is also given to service users through the Barking & Dagenham Small Business Centre funded by the Local Enterprise Growth Initiative.

Through the Crime & Disorder Reduction Partnership, the Council actively supports the Borough Neighbourhood Watch. Through this work we have now supported a network of over 200 volunteers, many of whom are older people, in the borough, providing a link between community and police in their neighbourhoods to ensure that people feel safe and can enjoy their local environment.



A strong community

Barking and Dagenham is a community that is working to bring together diverse elements to build a stronger future for everyone. In an extensive engagement programme in relation to Community Cohesion we looked at a number of ways in which the Council could help promote togetherness, and we outline some of our actions here.

Carers for whom English is a second language have recently participated in a course to improve their English and thus empower them in seeking out services and expressing their views.

Service user involvement is encouraged in all services. Examples are:

- SURF – Service User Reps Forum (a borough wide forum for Drug and Alcohol service users);
- CHAT – mental health user group supporting the mental health partnership board LIT;
- Learning disability user forum, advisory partners, including CSCI “Experts by Experience”;
- LD Partnership Board.

In a comprehensive consultation exercise that used innovative techniques such as a video cube and graffiti wall, as well as more traditional methods we asked local people what their priorities are for a strong community. The survey went into social clubs and shopping centres as well as door to door interviews. This innovative approach, and its success in attracting responses from disaffected communities has attracted considerable attention from other councils and statutory agencies.

Key themes that emerged were togetherness, respect, fairness and safety, as necessary elements in a cohesive community.

A detailed action plan has been developed, and implementation is underway.

We are currently awaiting external accreditation for level three of the Equality Standard for Local Government.

The Council received praise for its approach to stakeholder engagement in preparing its Disability Equality Scheme from the Disability Rights Commission. The Council commissioned local organisation Centre for Independent Integrated Living, to carry

out the engagement activity, based on their extensive community knowledge and engagement expertise. The result is a scheme with considerable ownership from the local community.

In January 2007, the Council recognised the significance of the inclusion agenda and established a new inclusion sub-group of the LAA, chaired by the Corporate Director of Adult and Community Services.





Leadership

The Council has undertaken a corporate re-structure and appointed an experienced Director of Adult and Community Services. Furthermore, we have been successful in recruiting Heads of Service and Group Managers from excellent authorities. New Group Manager posts have been created and filled and the organisation of the lower tiers is almost complete.

The new ACS Department brings together the strands of health, social care and community and neighbourhood services which combined will deliver a real change to the residents of B&D. The adoption of Neighbourhood Management by the Council, with its innovative pan-Borough approach will see the delivery of truly localised services across the partnership.

In concert with the reconfiguration of the corporate structure of the local authority, external partners both statutory and voluntary have increasingly been invited into the decision making structures. This has strengthened leadership through the shared ownership of the vision for the Borough. For example, as a consequence of consulting with service users and carers resident in the borough, groups were set up in 2006/07 to

ensure that the voice of these 'experts by experience' has a conduit into and representation at senior decision making boards. This is mirrored internally within the Council, with participation in the Capital

Ambition Programme forming part of its improvement plan. The Capital Ambition bid demonstrates a strong emphasis on leadership development amongst its middle managers.

A number of successful all staff events were held during 2006 where staff from across the new Department were brought together to think about the opportunities created by the alignment of new services. These include Community Safety,

Libraries and Heritage and Neighbourhood Management together with Adult Social Care. These were interactive events which aimed to listen to staff as well as brief people

on changes. The Departmental Management Team (DMT) analysed the results of feed-back received from the days, together with the results of the 2006 staff survey and produced a 10 point plan to ensure good communication across the Department.

DMT took responsibility for delivering different elements of the 10 point plan which included a commitment to produce a monthly staff bulletin edited by

20 households behind Sainsbury's Car Park were complaining about the behaviour of young people in the car park in terms of disorder and its effect on their quality of life. Residents felt that Sainsbury's were not interested in their problem and just in making money. The Council set up a mediation meeting with Sainsbury's management, residents and the police. From the meeting an action plan was agreed, the Council led on working with Sainsbury's to improve lighting, cctv and security in the car park, addressed the behaviour of the young people involved, and set up a system whereby the residents could have direct contact with the store manager so as to raise issues with him directly. The issues have been resolved to the community's satisfaction.

Barking and Dagenham is an LAA Pilot authority. The recent Corporate Assessment report from the Audit Commission said: "The Council demonstrates effective community leadership through the Chief Executive, officers and in its partnership working, for example in the development of a Community Development Trust in Barking Riverside. Officer and Councillor relationships work well and the Council has the capacity it needs to deliver its ambition. This has been facilitated by a recent restructure and a committed and motivated workforce."

staff from across the Department (edition 4 shortly to be released).

In October 2006 the Heads of Service and Group Managers in Adult Social Care entered the LGC Challenge 'Management Team of the Year' event held over 2 days in Birmingham. This included teams from over 150 authorities across the country and provided opportunities for team building, and joint working on common (if unfamiliar) tasks. Due to the success of the event Adult and Community Services are leading a team from across the Authority in 2007.

Building on the success of our Healthier Communities and Older People's Sub Group and learning from our Children's Trust we set up an Adult Trust in shadow form in 2006/07. It is chaired by the Chief Executive of the PCT and

is the key delivery mechanism for the wellbeing agenda, joint commissioning and integration within the local health and social care economy.

The Council is committed to the development of its workforce and has achieved Investors in People accreditation. We invest strongly in both NVQ and Social Work training alongside a comprehensive corporate training programme. Annual appraisal, 6 monthly reviews and supervision are well embedded.

A strong link exists between the Council's corporate vision and service planning. Heads of Service are challenged to demonstrate how their service plans contribute to the community priorities and that appropriate connections are made with other services and partners.

"The Council and its partners have a well developed strategic approach to services for older people that goes beyond health and social care and cuts across a range of mainstream services including housing, libraries and leisure. The Older People's strategy has a comprehensive focus on independence and well being and addresses the quality of life issues such as income, transport and reducing fear of crime. There is also a clear and positive focus within the strategy on tackling age discrimination and addressing the training and employment needs of the over 50s. The strategy is based on a clear assessment of need and links to the LAA. An implementation plan is in place but as this is relatively recent, July 2006, the impact to date of this plan is limited."

***Corporate Assessment,
Audit Commission 2006/2007***

Commissioning & use of resources

The Council recognises the importance of commissioning and use of resources. Our goal is to build on our strong foundations and become regional and national leads in commissioning. Improved use of resources is more important than ever in today's financial climate.

A working group has recently been formed, chaired by the Joint Director of Public Health, to undertake a Joint Strategic Needs Assessment. In partnership with the PCT (building on the Joint Strategic Needs

Analysis) we intend to be the first commissioning authority to fully utilise e-commissioning to achieve better outcomes.

Achievements in 06/07 include the development of an outcome based contracting tool that won 'House Mark' status from the National Housing Federation and the Chartered Institute for Housing. This innovative tool has also been submitted to CSIP as an example of best practice and we are awaiting results.

The re-inspection of Supporting People by the

Audit Commission recognised significant improvement in commissioning/review processes and Value for Money. This learning has been mainstreamed across the whole of Adult and Community Services.

Changes in the FACS eligibility criteria agreed last September and the consequent review processes have helped to bring the

06/07 budget in on target with little or no evidence of undue hardship to service users.

There is a three year financial strategy designed to ensure that services continue to be delivered economically, effectively and efficiently.

The recent Corporate Assessment by the Audit Commission report said, "Financial management is strong and there is a good focus on value for money. This is integrated with a well established approach to performance management and the Council has been successful in instilling the right culture and values so that it is at the heart of decision making." Praise was also given to financial processes and management in the recent Supporting People inspection report.

The Community Meals tender process is complete and has produced a significant saving without compromising quality.

For the DAAT service users and carers are regularly consulted on changes to the treatment

system and are an integral part of the annual substance misuse needs assessment and treatment planning processes. The Service User Reps Forum have given suggestions to improve the retention of clients in treatment such as payment of fares to treatment appointments, which the DAAT have taken on board and will be piloting in the coming months. Service users will soon be

represented on the Joint Commissioning Board, after the training requested by service users has been completed.

The Department again brought expenditure within budget for 06/07 financial year and has embarked upon a further modernisation programme of in-house services as part of the 07/08 budget process, that will again deliver savings for reinvestment in services.

The National Treatment

Agency for Substance Misuse together with the Healthcare Commission undertakes improvement reviews across the field of substance misuse. In 2006/07 commissioning was reviewed nationally and the B&D was awarded 'excellent' status. This award reflects the commitment of the ACS Department in achieving value for money through the robust procurement of

effective services set within a commissioning framework.

All contracts within the Commissioning division were reviewed during 2006/7. This established levels of strategic relevance, quality, value for money and outcomes achieved. This information has been used to set a tendering timetable for the next three years (services that are medium/high risk and/or medium/high cost are prioritised for early tender). The Meals on Wheels service was prioritised and tendered.

A new provider was awarded the contract who provided better references, higher spends on ingredients and 20% lower overall charges. Area based block contracts for homecare are currently in the tender process with 140 initial responses (following market stimulation exercises) that

have been short listed to 21 for the next stage.

The review carried out in 2006/7 has enabled a strategic approach to tendering and commissioning, built the market and has enabled better use of resources.

ACS continues to work well with the local PCT in finance terms and secured significant contributions to alleviate budget pressures in residential care at the end of 06/07. We are planning more co-operation and alignment of budget processes in 07/08.

The Department is fully engaged in the Council's attainment of Gershon efficiency savings and has contributed

significantly in the areas of reduced agency staff usage, reduced absence and modernised working practices (for example, mobile working).

Substance misuse budgets were set to be overspent by £750,000 (30% of the total budget), but ended the year on-budget amidst many other successes. At the end of the 2006/07 financial year, retention in treatment has almost doubled to 70%, achieving the NTA target for the first time in the borough's history; the Young People Substance Misuse Plan is amongst the highest performing in London; data is 100% quality assured; the numbers in treatment LDP target has been achieved; and the Drug Intervention Programme is a model of excellence across London.

These successes have been achieved whilst re-tendering and/or redesigning all treatment services. The borough has the first Barking Dagenham specific young people's tier 3 service. Service users have an active voice, and are involved to the point of delivering presentations to professionals and councillors.

Appendix: Consultation activity

The information in this Appendix illustrates the extensive consultation undertaken with partners, service providers and users over the past year.



1	The support needs of carers	
	<p>Who we consulted and what they said</p> <p>310 people from BME communities identified a need for more information on the services within the borough. Carers also requested more support with integration in the main communities.</p>	<p>What we did</p> <p>Produced an information directory for carers and service users, and leaflets to give a clear understanding of how to access services. Increased pathways to carers' assessments with Carers of Barking and Dagenham. Regular training and feedback to assessment teams of carers' views and needs undertaken via team meeting and carers' service review.</p> <p>A yearly diary of respite trips and events for carers and service users, and to date 6 or 7 respite trips for 'Hard to Reach' carers and BME carers have been organised.</p> <p>A BME support officer was appointed to aid community cohesion.</p>

2	The modernisation of older people's services including residential and home care	
	<p>Who we consulted and what they said</p> <p>Residents and relatives of each of three homes, staff working in homecare through team and patch meetings, PCT, voluntary groups and trade unions were consulted at seminars. A group of 45 carers of older people with dementia met the Head of Service and Corporate Director at an event organised by carers of B&D and Age Concern. Independent advocacy was provided for people without relatives or friends and to support the consultation process.</p> <p>Some residents and relatives welcomed a move enabling them to be nearer to their carer/ relatives; others expressed anxiety about moving.</p> <p>The voluntary sector and PCT welcomed the Council's proposals, firstly because of a greater focus on older people with dementia, and secondly the development of a more focused assessment and initial service home care team.</p>	<p>What we did</p> <p>Executive considered the results of the consultation and agreed to refocus the directly provided residential service for older people with dementia. These developments include a resource centre and for a flexible respite-day/evening care arrangement. An added benefit is the opportunity to include an extra care supported sheltered unit adjacent to the home.</p> <p>Residential: Each resident had a comprehensive assessment, inclusive of the views of relatives, carers and advocates, who played a major part in the selection of the new placement. Residents and carers dictated the pace of the move. Some residents were placed in an environment more able to meet their needs, i.e. older people with learning difficulties, and those with cognitive impairment.</p> <p>Staff were provided with individual skills assessments with an independent practitioner. Training followed in order to enable staff to learn chosen skills. Council Career training opportunities were available to staff, including mentoring, interviewing skills etc.</p> <p>Home Care: The Council agreed to restructure the service and to phase in staffing implications.</p>

3	Gender equality	
	<p>Who we consulted and what they said</p> <p>Staff, trade unions, voluntary sector groups and residents of Barking and Dagenham were involved in a consultation exercise asking how the Council can improve services for women, men and transgender people in the Borough for the Gender Equality Scheme.</p> <p>Three main priorities were highlighted:</p> <ul style="list-style-type: none"> ■ Flexible working options ■ Workforce development: wider roles and different jobs; ■ Equal pay 	<p>What we did</p> <p>The information was used to help the Council develop a three year action plan - the Gender Equality Scheme which was published on 30 April 2007. Achievements of the action plan will be monitored annually. The first year review is due in May/June 2008.</p>

4	Provider outcomes tools and local outcomes measures	
	<p>Who we consulted and what they said</p> <p>Supporting People providers covering a range of client groups including homelessness, older people, mental health and learning disability. About 35 people attended. Providers welcomed the session which clarified their understanding of how the work they do with their service users links into local and national objectives.</p>	<p>What we did</p> <p>We shared the information that was provided at the meeting with other providers via email. We had further discussion in Team Meetings and decided to follow up this work by inviting local providers to present their own outcomes frameworks. This led to increased awareness amongst providers of the need to demonstrate measurable outcomes for service users, and increased awareness of how local work impacts on national objectives.</p>

5

Engagement to inform the Community Cohesion Strategy

Who we consulted and what they said

1,408 people took part in the consultation, which asked:

- how they felt about Barking and Dagenham now
- what changes they wanted to see in B&D in the future
- what they thought would make B&D a good place to live
- how they thought the Council could promote respect, togetherness, fairness and safety within the community
- about willingness to engage in future consultations.

94% of the total participants were residents, but the survey also encompassed voluntary and community sector organisations, small businesses and social enterprises.

Key findings included:

- the key to a strong community is togetherness
- the acceptance by the broad majority of the four themes of togetherness, respect, fairness and safety as key elements for a good and cohesive community.
- BME residents and groups were more optimistic with more positive perception of B&D, Council and partners.
- some people did not feel engaged with the wider community and were sceptical about improvements.
- there is a common perception that access to services and resources is not fair.
- local environmental improvement and safety were seen as the two most important things for the borough.
- some people were unclear about how regeneration-led changes within the borough would directly benefit them and their families.

What we did

The conclusions and recommendations from the consultation were as follows:

- Continuing the dialogue: need to build engagement through more regular and ongoing doorstep contact. A pro-active approach. A long-term and meaningful process to encourage greater involvement.
- Safety: both white and ethnic minorities thought there should be more things for young people to do.
- Increased work between the Council and Safer Neighbourhood teams in relation to young people.
- Extension and promotion of neighbourhood watch schemes as a way of fostering cohesion.
- Improving the local environment: further consultation work to find out where people specifically feel there is a need for environmental improvement.
- Targeted 'clean sweeps'.
- Specific initiatives to improve the tidiness of front gardens.
- Promoting pride in B&D: regeneration is not seen as universally positive as it ties in with peoples concerns about the rate of change in the borough. Therefore care needs to be taken in communication on this matter to reassure people.
- A campaign to promote the high expectations required of residents: whoever they are or wherever they have come from, to look after the area.
- A need for strong community engagement in the community cohesion strategy to ensure representative involvement of the community.
- In addition to communicating information that rebuts myths and misinformation it is necessary to create a space where people feel able to express concerns and anxieties.
- Employment of deliberative approaches such as citizen's panels and 'barefoot consultants'.
- To answer the repeated call for a return to the perceived community spirit of the past measures such as: events, communications (i.e.: community newsletters), support for the creation and maintenance of residents organisations, shared challenges.

6	Individual budgets	
	<p>Who we consulted and what they said</p> <ul style="list-style-type: none"> ■ IBSEN: Independent Evaluation of Individual Budgets. 74 randomised service users (from physical and sensory impairments, learning disabilities, mental health and older people services) took part as well as Voluntary Sector and Care Management staff. ■ Resource Allocation System: 63 randomised service users from physical and sensory impairments took part. They offered direction on the appropriate development of questions within a Resource Allocation Tool. ■ Development of Individual Budgets via Steering Group with voluntary sector and service user involvement. ■ Brokerage Forums: 10 voluntary sector partners consulted with us on the development of support/ brokerage services. ■ Coffee mornings: Informal carer and service user expressed views on individual budgets. 	<p>What we did</p> <ul style="list-style-type: none"> ■ IBSEN, Independent evaluation of Individual Budgets is an ongoing evaluation which involves a consultation process that will eventually inform the Government direction with regards Self Directed Services ■ Our consultation on Resource Allocation System assisted in the design of a single electronic Resource Allocation Tool ■ Development of Individual Budget's via Steering Group involvement will inform the future direction of Individual Budgets at a local level ■ Brokerage Forums with the voluntary sector will inform the future direction of brokerage services at a local level. ■ Coffee mornings will inform the future direction of Individual Budgets at a local level.

7	Age Direct General Consultation	
	<p>Who we consulted and what they said</p> <p>Age Direct forum of users and carers generally, but with a focus on homecare.</p>	<p>What we did</p> <p>We shared information at following Homecare meeting and new Home Care contracts will address a number of issues of concern that were raised, such as electronic monitoring of carer visiting times.</p>

8	Learning Disability Partnership Board	
	<p>Who we consulted and what they said</p> <p>People with learning disability and carers, through the Advisory Partners' Group, an umbrella group which links to all key user groups, for example, in residential care settings, day centres, or with young people at Trinity School.</p> <p>Carers of people with learning disability hold monthly coffee mornings, supported by the Partnership Board. A carer from Barking & Dagenham's LD Partnership Board is one of the carer reps on the London-wide 'Big Partnership Board'.</p>	<p>What we did</p> <p>Some examples of activities include: service users invited in reps of Transport for London to discuss problems using public transport and changes in bus routes; regular involvement with Safer Neighbourhood Teams regarding issues of bullying and harassment; a successful 'consultative' sports tournament involving 150 service users.</p> <p>Carers met with the manager of the Borough's passenger transport service and devised a 'form' on which to share information about service users with the escort service.</p>

9	Disability Equality Scheme	
	<p>Who we consulted and what they said</p> <p>This consultation was carried out by the Centre for Independent Integrated and Inclusive Living (CIIL) with support from the Equalities and Diversity Team. Various disability/ impairment groups were involved in the consultation process.</p> <p>Nine main themes emerged around the issue of things felt to prevent disabled people from having equal access to services. These were Lack of training and understanding; Making assumptions; Improving physical access; Access to services delivered by Customer First; Access to information on existing Council services; Availability of accessible information; Intelligence gathering in relation to specific services; Information and involvement with regeneration initiatives; Community and personal safety.</p>	<p>What we did</p> <p>As a result of this consultation we developed the action plan within the DES which will be monitored by the disability forum, demonstrating our ongoing support for user involvement. DES implementation sub-groups have been convened and are currently developing SMART action plans to implement specific themed sections of the DES. Changes are being made to Council policy and procedure in order to take account of, and be more inclusive of, the needs of disabled people.</p> <p>This document is being recognised as a best practice approach to the development of a Disability Equality Scheme. The Disability Rights Commission has recently included it in its research around user involvement.</p>

10	Adult Substance Misuse Needs Assessment	
	<p>Who we consulted and what they said</p> <p>As part of the needs assessment 2006/7, service users and carers were asked to comment on the finding of the needs assessment and give their feedback as to what it was showing the Drug and Alcohol Action Team. We were advised that the process could be expanded to look at other problematic drug users not just opiate and crack users. Ideas were given about retaining people in treatment.</p>	<p>What we did</p> <p>The Drug and Alcohol Action Team are looking at the possibility of building other drugs into the 2007/8 needs assessment process. The DAAT have secured funding for a pilot to pay service users fares to treatment appointments with the aim of retaining them longer.</p> <p>As a result of this consultation a more robust process will be achieved and will help to ensure that the treatment system is more efficient at engaging and retaining people. Links have been made to a core group of service users who are now becoming involved with further work with the DAAT.</p>

11	Transitions	
	<p>Who we consulted and what they said</p> <p>Carers groups were consulted about the current systems and procedures for young people in LBBB, giving an outline of their views.</p>	<p>What we did</p> <p>Their views were taken into account when developing the new transitions service and has led to the development of a PCP model which will be implemented in September 2007.</p>

12	Mental Health Partnership Board (Local Implementation Team)	
	<p>Who we consulted and what they said</p> <p>Service users have established regular monthly forum (CHAT), facilitated by HUBB and TULIP (provider organisations). A newly created, large and growing body of enthusiastic mental health service users and recovered users, CHAT help inform and monitor service operations and developments.</p>	<p>What we did</p> <p>CHAT meet regularly in the Civic Centre, seen as an important sign of the support received from the Council. Elected Members attend. The meeting prepares for the Mental Health Partnership Board and provides input on service delivery.</p>

13	Reshaping mental health services	
	<p>Who we consulted and what they said</p> <p>North East London Mental Health NHS Trust is currently consulting on closing outdated inpatient services provided in Brentwood, some 12 miles from the Borough, with the aim of replacing it with smaller services, more local, and simultaneously expanding community-based services. Input from service users has been a consistent feature of the process.</p>	<p>What we did</p> <p>NELMHT has been able to adapt the model to take account of stakeholders' views of the design and location of services.</p> <p>A clear embodiment of vision and strategic direction for mental health services, piloted in Barking & Dagenham in 2006/07, the concept is now being rolled out across three other London Boroughs.</p>

14	Focus Weeks on the Gascoigne Estate, Barking	
	<p>Who we consulted and what they said</p> <p>Four focus weeks have been run on this estate, which has some of the most significant crime and deprivation indicators across the borough. 300 crime and disorder questionnaires have been completed, and we are pleased with our success in engaging at such high levels in what has been a traditionally disengaged estate.</p> <p>Anecdotal reports to elected members and others have told us of the improvement to the estate that these weeks have brought and the activity is now being subsumed into the area's Neighbourhood Management strategy</p>	<p>What we did</p> <ul style="list-style-type: none"> ▪ The implementation of the 'community payback' scheme, where offenders support the delivery of solutions to address what the community identifies as a concern. ▪ All ground floor flats on the estate having window locks replaced in a tremendously successful anti-burglary initiative. ▪ 63 untaxed/ abandoned vehicles removed. ▪ Community Mediation, where young people most at risk of coming to Police notice engaged with older people in the estate's warden-controlled block, increasing recognition by the young people of the impact of behaviour and reducing fear amongst older people. ▪ 130 tonnes of domestic refuse and 59 tonnes of bulk refuse removed ▪ Chain Reaction workshops involving 43 young people from the estate and Youth outreach workers engaged with young people on the estate

15	Tell Us	
	<p>Who we consulted and what they said</p> <p>Tell Us is a campaign that allows people to directly air their views and offer their suggestions. Contacting Tell Us is easy: they can be reached through the Barking and Dagenham website, by telephone, by freepost, and there are a forms and boxes for suggestions to be posted in main Council reception areas, leisure centres, housing offices and libraries.</p>	<p>What we did</p> <p>These are just some examples of the suggestions that came through to us that we were able to take positive action on:</p> <ul style="list-style-type: none"> ■ “Bottom row of books seem to be too low for older persons – Vicarage Field. Few more seats at entrance. Hope that new library will not have floor level shelves” ■ “Provide boxes in libraries where pensioners, single people can put vouchers for schools”. ■ “Shorter waiting time for internal decorating for the elderly in sheltered accommodation” ■ “Have a surgery outside normal working hours and an estimated time for waiting in reception”

