




Appendix A

Adult & Community Portfolio 2010/11 Update Report


The following summary outlines the key progress against the aims and objectives set out in the 2010/11 Adult and Community Services (ACS) Portfolio Plan.

-  Good progress has been made and end of year target will be achieved
-  Action at early stage, end of year target is still likely to be achieved
-  Little progress so far, uncertainty about achieving end of year target


Outcome 1: Enhancing opportunities for all to have greater access to information and services and the ability to make choices to exercise control over their own lives. 15 actions have made good progress; 6 actions are at the early stage of implementation and 1 action may not be achieved.

1.a Locally relevant quality information and advice about care and support need is easily available to enable control and inform choice.


1.a 1 Maximise the use of technology to enable people to access up to date information and advice on a range of services and support options through a specially commissioned web portal (SIB).

-  Information advice and guidance web portal commissioned. Fifteen people recruited through the Future Jobs Fund in partnership with libraries to provide the right assistance to people to enable them to access website information about care and support services range libraries across the borough.


1.a 2 Develop a strategy to inform the future provision of quality assured information, advice and guidance and ensure that it is available and accessible to all through different formats and channels and meets the needs of all people in the community (SIB).

-  The Information Advice and Guidance Strategy has been written with input from voluntary and community sector organisations and other public organisations as well as other departments of the Council. It will be presented to the next Supporting Independence Board in November for final consultation and agreement on next steps.


1.a 3 Develop a self assessment web site that signposts people to appropriate support and services (SIB).

-  The Information Advice and Guidance web portal commissioned will allow people to self-assess to make decisions about the services and care they might need. Service users and staff will be able to take advantage of this by December 2010.

1.a 4 Evaluate the learning from the Age Concern Bromley and Mencap Brokerage services to determine a model of brokerage across Bromley providing a range of options across all user groups for people who do not meet the criteria for social care funding or who wish to self fund and need help to plan their lives and access support and services (SIB).


-  The Commissioning team are currently developing future models of brokerage in the light of experience both in Bromley and nationally and evaluation is currently underway.

1.a 5 Develop a council wide and partnership approach to the accessibility of universal services e.g. leisure, adult education, transport, employment, healthy living and health improvement along with housing and supported living options (SIB).

-  The Information Advice and Guidance information Strategy includes input from a wide range of voluntary and public organisations, as well as other Council departments. The web portal commissioned will signpost to services from all relevant organisations including other Council departments and will be implemented by December 2010.

1.b Have a diverse and high quality market in care and support services to offer real choice and control to service users and their carers.

1.b 1 Supporting development of the market by working with businesses and local Voluntary Organisations (SIB)

-  A Dragon's Den event was held in August as part of a project to stimulate the development of a micro provider market within Bromley. Providers were given the opportunity to pitch their ideas to a group of "Dragons" - people with learning disabilities who will use their personal budgets to commission day time activities which are

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tailor made for them. The event was well attended and 6 providers have sent in proposals to be considered by the "Dragons" for the next stage in the project.

1.b 2 Hold a social care business event to communicate needs to a wider market.

↑ A stakeholder event was held on 20th April where providers met with a range of stakeholders to learn about the different projects within the Supporting Independence in Bromley programme including information about Personal Budgets, Assistive Technology, Re-ablement, Micro Providers and the Community Retail Model. Workshop sessions were held to discuss the challenges and issues which face providers under the personalisation agenda. The event was well attended and feedback from delegates was that they found it useful for networking and sharing ideas.
This year's portfolio planning day on 23rd November will also focus on the social care market and how customers will be supported in their choice of services.

1.b 3 Ensure availability of a range of high quality specialist housing schemes and care homes through working with RSLs and care home providers.

↑ Two new schemes have opened during Quarter 2: One which provides supported living for 7 people with learning disabilities, and another which provides a home for 13 people with mental health needs. Discussions are under way with a care home provider with a view to securing a contract for the future provision of up to 9 new standard care home places for people with dementia.

1.b 4 Work with Bromley care homes through the residential providers forum to raise standards in line with Care Quality Commission Standards.

↑ The Care Homes provider's forum continues to provide an important link to facilitate continuous improvement in services commissioned by the Council. For example, nationally there has been criticism by the Care Quality Commission regarding the standards relating to the safe administration of medication in care homes. In Bromley this has been addressed by working with the Care Home Forum and through Bromley PCT undertaking a medication training audit. From the audit and action plan has been developed and regular updates on progress are followed up at the Care Homes Forum.

1.c Support service users to stay independent for as long as possible.

1.c 1 Maximise usage of tele-care and tele-health equipment e.g. Crown Meadow ECH and the PCT Re-provision Project for people with learning disabilities (SIB).

↑ Currently 156 people have telecare installations which support them to live independently within their home and we are on track to reach the target of 233 people with telecare installations by March 2011. Bromley is one of 12 local authorities which have been selected to be part of the DOH pilot scheme to evaluate mainstreaming telecare in line with value for money principles. Telecare has also been installed at 20 community based units for people with learning disabilities based at Swingfield Court and Lancaster House. A similar installation is currently under way within the units at Crown Meadow.

1.c 2 Agree and implement a revised Intermediate Care strategy jointly funded with the PCT to maximise the rehabilitation potential of people to support them to remain in their own homes

↑ A commissioning strategy is well underway with plans to present at the January PDS meeting. The aim is to increase community based care, to prevent hospital admissions.

1.c 3 Improve access to simple items of equipment which support independent living by developing a community equipment retail model. This will enable people to access expert advice and purchase simple items of equipment for daily living from accredited retailers in the high street (SIB).

↑ 12 retailers in the Borough are currently being trained to provide simple items of equipment for self funders and people who do not meet the criteria for social care funding. Training and accreditation will be completed by the end of October. Proposals for changing over from current arrangements to prescriptions for equipment for people who do meet the criteria for social care funding and the provision of complex equipment will be considered by the SIB board in November with the aim of implementing by early 2010.

1.c 4 Establish re-ablement as a default service for people with social care needs (SIB)

↑ Re-ablement is now a mainstream service. We are building up the capacity of Re-ablement Facilitators to give appropriate and timely response to the increased referrals. We aim to maintain at least 60% of people leaving

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Re-ablement without needing long term care based on the outcome that for the 6 months up to the end of August 2010 the average has been 62% not needing long term care. Within the existing ACS structure there are now 7 full-time and 2 part-time Re-ablement assessors working in the Hospital and Community teams. A communication plan will be implemented in November to ensure local GPs and our health partners are fully aware of this mainstream service and its referral process.

1.c 5 Assist eligible service users to remain in their own homes through the provision of advice, handyperson services, small grants and loans to carry out repairs and adaptations where appropriate.

↑ Since April 2010 6 loans to improve properties have been approved, alongside 41 disabled facilities grants and 16 home repair assistance grants being approved. There were 1353 referrals for the handyman scheme and 881 people assisted with one or more small jobs or adaptations, 218 of these were linked to hospital discharge. Currently the performance for the period is on target.

1.c 6 Work with the PCT to develop an integrated Care Management and District Nursing service focussing resources on those most in need. The most appropriate health or social care professional will hold case responsibility improving the user experience by reducing the number of people with whom the service user must communicate whilst assuring a quality service from a team of specialist workers (SIB).

↓ Initial meetings are currently being held with Bromley PCT Community Provider Unit to determine a way forward for this service. Full integration will not be achieved this year however it is hoped to make progress once the new Bromley Healthcare organisation has been confirmed.

1.c 7 Secure alternatives to residential care for older people through:-

- The completion of Crown Meadow Court extra care housing scheme – 60 homes
- The provision of further extra care housing places, including commencement of another 50 home scheme in the north of the borough
- Securing the development of a new care home in the east of the borough.

↑ The contracts for housing support and care in the new extra care housing scheme at Crown Meadow Court were awarded in September 2010. The scheme is expected to open in Spring 2011. Funding and planning permission has been secured for a scheme on the Anne Sutherland House site in Penge and it is anticipated that work will start on site in late autumn. A third scheme is about to start on site at Bromley Common.

1.c 8 Work with providers to ensure that services are available for people who wish to exercise choice with their personal budgets/direct payments through:-

- Agreeing the future strategy for the provision of day care and respite services to provide more choice.
 - Ensuring that there is a range of supported accommodation available to older people.
 - Support the development of micro-providers for specific services
- ← Detailed proposals for day care and respite/short breaks for people with learning disabilities have been produced and the business cases are being finalised with a view to new services being in place during the first half of 2011.

1.d Provide choice and control over how support needs are met.

1.d 1 Enable more service users to have total control over their care by offering personal budgets to all service users and carers when their needs are assessed or reviewed. (SIB).

↑ Currently 1029 people are supported by a personal budget, of which 370 have a direct payment. The timetable for full roll out is outlined under aim 1d2 and we are currently on track to meet the target of 30% of service users having a personal budget by March 2011.

1.d 2 Enable more service users to have total control over their care and support by streamlining the direct payment process and increasing uptake.

By October 2010 offer a personal budget to:-

- All new service users/carers (with assessed needs for ongoing support)
 - All service users whose care plans are subject to review (SIB).
- ← Full roll out of personal budgets to older people and people with physical and sensory disabilities will take place in late December once an automated system for allocating personal budgets (Resource Allocation System) is available. Implementation for people with learning disabilities will commence in January, and an

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implementation plan for people with mental health needs will be agreed by December.

1.d 3 Develop an accreditation scheme for personal assistants so that people can access safe services and support (SIB),

← Draft models of accreditation have been developed and discussed with external providers. Initial investigations have been completed with other boroughs to look at the scope for developing a joint scheme and a full project plan and implementation timeline is yet to be finalised.

Outcome 2: Maximise Health and Quality of Life outcomes for vulnerable people through closer partnership working. 13 actions have made good progress; 3 actions are at the early stage of implementation 1 action may not be achieved.

2.a There are effective partnerships with people using services, carers and other local citizens.

2.a 1 Establish a stakeholder group to support development of the Supporting Independence in Bromley programme which includes people using services, carers and other local citizens (SIB).

↑ Bromley's Expert by Experience group, established in 2009, has recently presented a report to the SIB Board requesting financial support to develop into a user led organisation. The Board encourages and supports further development of the group and has offered support from Community Links Bromley.

2.a 2 Establish co-production by supporting development of an Expert by Experience group (SIB).

↑ We continue to support user led organisation by encouraging XbyX to take co-production development forward over the next period.

2.a 3 Strengthen the voice of users within existing organisation and support development of a user led organisation that will contribute to policy and service design and development in the future (SIB).

↑ Bromley's Expert by Experience group, established in 2009, to support the development of the SIB programme led in ACS have also extended their support to more Council wide developments of policies and publications. Recent examples of issues where they have been involved include transport issues and disabled access to Council buildings.

2.b Provide better access to community support and improve health outcomes through working with NHS partners and the voluntary and independent sectors.

2.b 1 Increase joint commissioning with health partners to focus more effectively on prevention.

↑ A revised commissioning strategy for Intermediate Care has been jointly developed with the PCT. There will be an increased focus on preventing admission to hospital and on providing help in the community. The strategy involves some changes in the number of residential / hospital based Intermediate Care places and will require consultation prior to implementation.

2.c Reduce health inequalities for the most vulnerable within Bromley.

2.c 1 Implement action plans arising from the rapid health needs appraisal, Gypsy traveller needs assessment and learning disability needs assessment.

↑ In response to the rapid health needs assessment, a dementia peer support project in Mottingham has been commissioned from Bromley Mind. The project is currently in the set-up and planning phase. An action plan has been agreed following the learning disability health needs assessment which is now being overseen by the Good health sub-group of the learning Disabilities Partnership board. The gypsy traveller needs assessment highlighted the need for greater engagement with the gypsy traveller community, and they are now actively involved in the Council's Experts by Experience group. As a result of the needs assessment the Help Literacy card has been introduced for all people with literacy difficulties.

2.c 2 Update JSNA and include more detailed information on people with physical disabilities and on end of life care needs.


← The final draft of the Joint Strategic Needs Assessment is currently being circulated for comments / consultation

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2.d Develop support services for older people with mental health needs.

2.d 1 Increase the number of people with dementia accessing day opportunities and receiving specialist support at home.


-  New contracts for Day Services were set up in June 2010 with increased capacity for dementia in mainstream day care. There are 25 places for people with moderate dementia at Bertha James, and a further 15 at the Saxon Centre. Waiting lists for day care provided by Bromley Mind and the Alzheimer's Society are being managed with the intention of improving access and reducing waiting times.

2.d 2 Provide targeted training for staff in extra care housing schemes to increase access for older people with dementia to ECH schemes and prevent moves into residential care.


-  The dementia skills training project is well under way. Bromley Mind are going into Extra Care Housing schemes to provide training and support to staff. So far this training and support has been provided to staff at Norton Court, Apsley Court, Lubbock House and Durham House.

2.e Develop alternatives to residential care within the borough to promote independence.


2.e 1 Enable people with a learning disability who are living away from Bromley to return to supported living placements within the borough.

-  The Padua Road Supported Living Project in Penge has provided 7 flats for young people with learning disabilities with the opportunity to move back to Bromley to live in the community increasing choice and control and reducing reliance on traditional residential care.


2.e 2 People with learning disabilities will move from campus accommodation into supported living during 2010/11

-  All schemes to support the final 37 people in the community now have property solutions. 2 properties still require planning approval, which should be determined during quarter 3. All care support contracts have been awarded except 1, which will be awarded during quarter 3. Of the 37 people remaining in campus accommodation, 16 will move by 31st March with the remaining 21 people moving during the first quarter of 2011/12.


2.e 3 Develop a wider range of housing options for people with mental health needs to ensure that move on opportunities exist and an appropriate level of support is provided to prevent and reduce the need for residential care.

-  13 flats for people with mental health problems are now available at Stafford House. These flats provide service users with a supported living facility each with their own individual care plans, preparing them for a supported pathway back into full community living.

2.e 4 Support young people in transition to ensure opportunities for supported living and daytime occupation.

-  The Transition Team has identified accommodation for all young people who left college in 2010 together with individual support plans to provide daytime occupation. All young people requiring alternative accommodation are now assessed with a view to making supported living placements. The team holds "matching panels" to identify groups of young people who may be compatible and able to live together. The team then introduces young people and their families to each other to develop compatible groups for supported living. The team is making greater use of direct payments and employment initiatives to reduce reliance on traditional day care services and to help young people maximise their potential.

2.e 5 Work with Young People service to ensure an effective transition with the ambition of all children living in the community once they become adults.

-  All young people aged 16+ have a transition plan. The Dynamite Project has piloted the use of personal budgets for young people to enable them to purchase carers breaks reducing reliance on traditional residential respite services. The team has secured grant funding to develop a full guide to transitional and adult services to support young people and their families through the process of transition. The Transition Team works alongside young people's services in the Transition Strategy Group and the Transition Operational Group to promote supported living services for young people. The Transition Team have quarterly meetings with both Children's Disability Team and Physical Disability & Sensory Team to consider new cases coming through to ensure that there is better planning.

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2.f Improve energy efficiency in homes and return vacant houses to use.

2.f 1 Carry out work, offer grants and loans or take action (e.g. EDMO) to bring 15 private sector dwellings back into use.



Work has been completed on the first property subject to an EDMO, and this property is now let to two clients with learning disabilities and their carer. Costs incurred by the renovation are being recovered from the rent being charged. Also another interim order on a second property was approved in August. However due to delays by the owner, progress has been slow, resulting in the final order potentially being approved within the next quarter. Currently 46 vacant properties have been bought back into use under this scheme.

2.f 2 Pilot 'Hard to treat Homes' solid wall insulation scheme to reduce carbon emissions in 5 households via the Coldbusters Grant and 10 empty properties



We have completed works to one empty property, using funding from the Energy Savings Trust. So far this year 5 building companies have received insulation training, at no cost to the Council. However the pilot indicates that it is not cost effective to finance this work via the Coldbusters scheme.

2.f 3 Work with utility companies and grant providers to assist people on low incomes to address fuel poverty by switching to social tariffs, helping them to pay off fuel debt and installing heating and insulation where appropriate.



Although the latest figures are not yet available from our external partners, in the last two years of working with the utilities companies using their CERT (Carbon Emissions Reduction Target) funding, Bromley had the highest number of insulation installations in London.

2.f 4 Work with the London Development Agency (LDA) to deliver the RE:new programme to 1,000 properties in an area of poor thermal comfort.



Bromley has withdrawn from this project due to the financial risks that the Borough would have been exposed to. However, we are running a smaller scale project with Osborne Energy and Southern Electric in Biggin Hill Ward that has no financial liability for the Council.

Outcome 3: Enable vulnerable and disabled people to participate actively in their local communities and provide access to employment opportunities (paid and unpaid). 13 actions have made good progress; 2 actions are at the early stage of implementation and 1 action may not be achieved.

3.a Develop a 'promoting independence' model that encourages community participation and increases access to services.

3.a 1 Ensure that all carers are routinely offered carers' assessments, direct payments and carers' support services.



All staff have been given targets for carer's assessments in their personal objectives to ensure that they understand their individual responsibility to ensure that all carers are offered assessments. 34.86% of carers are receiving services compared with the target of 25%. This is good performance compared to comparator authorities.

3.a 2 Through the strategic 10 year partnership with Carers Bromley provide more advocacy and peer support activity for carers.



The number of Carers' assessments has continued to increase and a mutual Carers' training resource for people developed by Bromley Mencap for people with learning disabilities is being promoted by Carers Bromley as a useful tool for all carers. The Carers Consultation on Self Assessment will be used to inform the development of advocacy and support for carers in Bromley.

3.b Service users and carers contribute to service planning and delivery of council services/projects; their views are heard and incorporated.

3.b 1 Monitor and report publicly on the quality of care services commissioned by the Council through the 'Quality of Care Homes' and the 'Quality of Domiciliary Care' Annual Reports available on Bromley's web site



Annual reports on the Quality of Care Homes and Domiciliary Care are published and available on the web site.

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3.b 2 Ensure involvement of people who use services in policy development and the strategic decision making process by supporting development of an Expert By Experience group.

Bromley's Expert by Experience group continues to be encouraged to develop into a user led organisation and is now involved in policy development. Recent examples of issues where the group has been involved include transport issues and disabled access to Council buildings.

3.b 3 implement the priority actions arising from the Transport review to ensure that vulnerable people can use public transport safely.



The mobility Forum has now been set up, and its first meeting was held in July.

Agreement for funding for travel training for people with learning disabilities was obtained in July. Training will focus on more intensive work with 10 individuals plus group work in schools. The co-ordinator is currently being recruited.

3.c With partners develop more work based opportunities (paid/unpaid) for people with disabilities or recovering from mental illness.

3.c 1 Increase the number of vulnerable service users (PDSI,MH) who are accessing work (paid/unpaid)



Bromley's performance remains good against the pressures of the current economic climate. Currently 158 learning disability people have maintained their employment despite a reduction in employment opportunities. Additionally new initiatives are underway including

- working with specialist providers in the voluntary/ community sector the PD team have referred 4 people to voluntary opportunities.
- working with Remploy to try to increase work preparation services in the borough, which are currently not accessible as they are based in central London.
- Staff in the Physical Disabilities and Sensory Impairment team have worked closely with HeadWay to contribute to new local scheme.
- One service user with a severe physical disability has been helped to establish a micro-enterprise – a fruit and vegetable stall in Bromley.

3.c 2 Increase the number of people with learning disabilities in paid work in the borough through social businesses and through Jobmatch and Job Carve.



At the end of September 2010 158 people with learning disabilities and known to the Council were in paid employment, a net increase of 15 since the beginning of the year. Of the first cohort of 20 participants in the Thyme Out project 3 have started paid employment, 4 have gone one to further training and 13 (including some of those who now have paid jobs) started work experience placements.

3.c 3 Work with partners to ensure that carers support enables carers to remain in or seek employment opportunities.



Training is being provided for all staff to ensure that they understand the statutory requirements and how to meet the needs of carers. The training (which has been made mandatory for all care management staff) has been reconfigured to improve access and increase attendance.

3.d Focus on preventing homelessness by working in partnership to introduce new initiatives, maximise and make the best use of the supply and range of affordable housing.

3.d 1 Reduce the number of households who are residing in temporary accommodation to 390 by March 2011.



Despite the continued increase in the number of households approaching threatened with homelessness, through the housing advice and options provided we have continued to reduce the number of households in temporary accommodation achieving the Government 50% reduction target during September.

3.d 2 No 16 or 17 year olds will be housed in Bed and Breakfast accommodation unless an emergency placement. Expand the number of alternative placements through the 'Nightstop' short term supported lodging service.



Zero target continues to be achieved.

3.d 3 Through effective use of Mortgage Rescue funds and debt management advice, reduce the number of people made homeless through repossession.

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There is a dedicated officer in post to ensure early intervention & maximisation of the effectiveness of the range of mortgage prevention tools available. This includes contacting all cases facing mortgage repossession hearings, to offer sign posting advice and where applicable detailed prevention casework. The money advice surgery continues to operate effectively and in the first half of the year offered 26 surgeries accommodating 78 households. In quarter 1, 2 cases were also successfully completed through the mortgage rescue scheme.

3.d 4 Deliver an early intervention home visiting service to reduce homeless presentations



Home visiting is now an established part of the options & assessment process which currently has assisted in preventing, relieving and delaying homelessness for 1009 households in the first six months of the year.

3.e Develop the range of Housing Options available within Bromley.

3.e 1 Work with additional Housing Associations to encourage them to open up their property registers to Bromley Homeseekers increasing available property.



This work cannot be progressed until the implementation of auto banding. It is unlikely at this stage the implementation will be completed until the end of the financial year. The technological solutions on offer for progressing auto banding to our original timescale posed too great a financial risk. However, the aim is for auto banding to be automated by the start of the next financial year.

3.e 2 Work with the private rented sector to encourage more landlords to let their properties through Bromley Homeseekers.



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3.e 3 Work closely with RSLs to identify overcrowded households and to address under occupancy.



We continue to work closely with registered social landlords and are currently undertaking a refresh of the data we hold on overcrowded & under occupied households. This will feed into a further campaign to visit the most severely overcrowded households and promote the range of options available in the toolkit we have developed. During Qtr 1, we assisted 14 households who were previously under occupying their accommodation to move to smaller accommodation.

3.e 4 Work with RSLs and developers to provide a level of Affordable Housing to at least meet statutory and high priority needs and enable temporary accommodation reductions/overcrowding, special needs (e.g. ECH, LD) targets to be met.



One PCT Re-provision scheme delivering 4 wheelchair accessible homes for 4 service users has been completed. A further scheme that will deliver 4 fully wheelchair adapted homes for this programme achieved planning permission. A scheme of 7 flats, including 2 wheelchair adapted flats has been completed as part of the Supported Living Initiative. Planning consent has been secured at the Ann Sutherland House site to enable the delivery of 41 one bed flats and 9 two bed flats, all wheelchair accessible, for Extra Care Housing. The refurbishment and extension works at Stafford House have been completed and providing 13 studio and one bed supported flats for mental health service users. Town and Country Housing Association purchased 8 family homes within the Borough that will be rented to local people as part of the Settled Homes Initiative. Q2 saw the successful completion of the Hostels Reconfiguration Programme with 15 self contained temporary accommodation units and 26 general needs units.

3.e 5 Explore, with partner RSLs, the potential for a viable Foyer scheme in the borough.



To date, whilst a few sites have been considered, none have proved suitable or viable. The recession has made sites hard to find and registered social landlords (particularly their Lenders) more cautious about anything that is not mainstream housing. Capital funding is scarcer – even more so given the recent reductions in the Homes and Communities Agency budget – and this will continue for the foreseeable future. The source of Revenue Funding that had been identified – Supporting People Grant – will not be increased in future and has had its Ring Fencing removed and so is likely to come under greater pressure

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given the need for Councils to closely review their expenditure.

3.e 6 Implement the London wide Accessible Housing Register and encourage social landlords operating in the borough to adopt the scheme.



Initial meeting and presentation held with registered social landlord partners and commitment provided by registered social landlords to seek to implement the accessible housing register. Work is currently underway by the registered social landlords to scope the volume and extent of work required to implement the register and options for completion of this work.

Outcome 4: Ensure the safety and protection of vulnerable adults through a Safeguarding framework that protects people from risk of abuse and neglect. 15 actions have made good progress; 1 actions are at the early stage of implementation.

4.a Social Care workforce has capacity, skills and expertise in Safeguarding.

4.a 1 Ensure the multi-agency training plan is based on practice skills competencies framework and has been implemented effectively.



The Training Competences framework was reviewed in March 2010 to inform the 2010/2011 safeguarding training framework and training is now being commissioned on a quarterly basis against the revised 2010/11 training plan. During quarter 2 training at competence level 1 has been provided to 335 staff from across a range of providers and health and social care settings. 16 staff have been trained to level 2, and 12 staff have been trained to level 3. Outcomes from the training delivered is reviewed quarterly to ensure that the training remains at an acceptable quality level. Current feedback from the training shows that the satisfaction rates have been high for level 1. Additionally, the external safeguarding review completed in June also confirmed that safeguarding training is highly valued by care managers.

4.a 2 Care and health workers work closely together to improve care practices



The multi-disciplinary Care Homes Liaison agency group continues to meet regularly to share information about safeguarding concerns in registered care homes and monitor care practice, the outcomes of investigations, and training and support activities carried out by the Nursing Home Liaison team. The Care Home Liaison Team has held training sessions for the staff from care homes to improve knowledge of urinary tract infections and hydration. South London Health Care Trust is implementing a new protocol for grade 3 pressure sores together with a process for alerting.

4.a 3 Improve the consistency of practice by staff and all agencies by ensuring those undertaking tasks have the necessary skills and competencies.



The format content and delivery of the multi-agency awareness alerter training is regularly reviewed. Practice and consistency has improved as evidenced in recent quality audits. The recent external review of safeguarding confirmed the positive impact that the revised training programme has on improved practice, thus ensuring people in vulnerable situations are effectively safeguarded.

4.a 4 Refine the BSAB training competence framework in terms of key agencies and implement effectively.




The Safeguarding training programme is subject to continuous review using delegate feedback and QA monitoring. Following the close monitoring of key agencies attendance at training courses; the E learning package was show cased at the Safeguarding conference 30th June. This method of learning will assist providers and health professionals to access learning for their continual professional development. The Training and Awareness Subgroup for BSAB is now in the process of developing the training strategy for 2011/2014. Work is underway with Bexley and Greenwich to jointly commission mental health safeguarding training and with LB Lewisham to commission joint training for level 1 alerter and awareness training.

4.a 5 Ensure staff (ACS and providers) are trained appropriately in safeguarding practices in accordance with

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care professional standards


 Additional safeguarding case recording guidance was issued to teams in June 2010. Also 4 training sessions were run by the safeguarding team for care management teams. This was followed up with 5 team workshops held in September by an independent assessor from the Government Office for London to reinforce good practice issues. Following involvement of police officers from the Public Protection Desk in a meeting of the Safeguarding Adults Practice Standards group, 3 joint training sessions have been held to establish joint learning of safeguarding practice and professional standards. A further 2 sessions will be held shortly.

4.b Our workforce effectively delivers modernised services.


4.b 1 Target recruitment activity on key staff groups and minimise the use of agency staff within ACS.

 Recruitment activity is targeted to meet service requirements and this is carefully monitored with recruitment to all posts agreed at assistant director level. This includes the use of agency staff.

4.b 2 Produce a workforce development strategy for the social care workforce (SIB).


 The Workforce Strategy Group has been established and met once. The next steps are to establish external partners and agree a plan to take the work forward within the current quarter.

4.b 3 Continue training and awareness around deprivation of liberty safeguards from 1st April 2010.


 A half day training course is held every month for staff from provider organisations, the PCT staff and LBB staff.

4.c Promote excellent customer service through effective complaint handling.

4.c 1 Develop in house training programme to improve customer complaints resolution. Run weekly complaints clinics to support managers in a) writing good quality responses and b) meeting timescales.


 In September there were no overdue (20 days) social care complaints as a result of the weekly complaints surgeries. The Complaints Made Easy training has been well received by staff and further sessions are now scheduled for December and January. The Complaints manager is closely monitoring response times and provides assistance to ensure the quality of responses is to a high standard.

4.c 2 Encourage customers to share their experiences of our complaints process and improve business processes as a result.


 Two feedback surveys have been sent to service users who have made a formal complaint. The information will be reported in the 6 month complaints report. In quarter 2 every complaint which was upheld was followed up with a feedback and lessons learnt letter and this information now routinely feeds into lessons learnt from complaints as reported to PDS through the Annual Report. CQC have recognised the demonstrable learning from complaints as a key strength in adult social care as part of this years performance assessment

4.d Improve quality assurance of services and safe practices.

4.d 1 Ensure cases meet the threshold for safeguarding investigations, and risks are appropriately identified and managed.

 Revised risk assessment tools, safeguarding referral and screening procedures have been developed with the input from Bromley Safeguarding Adults Board policy and procedures sub-group with training and advice provided by the Adult safeguarding manager and the Consultant lead practitioners for safeguarding. Safeguarding alerts are triaged by the duty officer with oversight by the Consultant Lead Practitioners. The recent external safeguarding review has confirmed that the role of the consultant lead practitioners has had a positive effect upon the consistency of safeguarding practice in terms of appropriate response and application of safeguarding thresholds for service users.

4.d 2 Undertake case file audits to check compliance with practice standards and procedures.

 Safeguarding case file audits are undertaken each quarter with findings fed back to practitioners, team and senior managers. The recent external review of safeguarding confirmed; that the department's quality assurance arrangements are robust and that performance management and quality assurance systems had been further strengthened with rigour and scrutiny of practice. This is evidencing positive improvements in safeguarding practice.

4.e Vulnerable adults are protected through the engagement, contributions and commitment of partner agencies towards the work of the safeguarding board.

Appendix A

Adult & Community Portfolio 2010/11 Update Report

4.e 1 Strengthen joint performance management, compliance and monitoring processes to ensure staff from agencies meet minimum practices standards.

- ↑ Detailed safeguarding information relating to investigations is now available to all operational teams and fortnightly monitoring meetings with Care services assesses safeguarding performance. Statutory partners now have an assessment tool to measure performance against the nationally recognised ADASS quality standards which will enable the BSAB to receive monitoring information and therefore consider ongoing performance across the partnership.

4.e 2 Target care homes and domiciliary care providers to participate in BSAB training programmes to raise standards to promote the benefits of skilled and proactive work force.

- ↑ Safeguarding is a standing item on the agenda of the Provider Forum Training Consortium. Safeguarding Training is promoted to partner agencies and care providers as follows:
 - via the BSAB Newsletter in August 2010
 - via a link on the Bromley Council website
 - as a standing agenda item for Provider Forum meetings.
 - targeted marketing of training opportunities to individual homes.Using performance data about safeguarding and training now enables routine targeting of training with providers. .

4.e 3 Promote wider involvement and action within the Council to improve community safety and reduce risks from harassment.

- Minimise the risks faced by people who live in situations of ongoing vulnerability.
- Personalisation risk assessment.

- ↑ The Safeguarding Adult Links and Development (SALAD) Group involves key staff across council departments in working together on improving safety and risks for adults who are or may be in vulnerable situations. Each representative is a champion for adult safeguarding in their area forming an important link to channel communication with teams and keep awareness raised at the front line. Following a number of fire related deaths of vulnerable service users across London, work is underway with the Bromley Fire Brigade to reduce fire risks amongst vulnerable service users, with workshops planned in October to promote the issue to professionals.

A policy and procedure called Positive Risk Taking is being piloted and will be evaluated in January 2011.

4.e 4 Strengthen the links with the Community Safety and Public Protection and other Portfolios to obtain better outcomes for vulnerable people.

- ↑ The Adult Safeguarding Annual Report is now presented to the Public Protection PDS and Portfolio Holder meetings the Safer Partnership Board as well as to the Adult and Community PDS and Portfolio Holder meetings and Health, Social Care and Housing Partnership. Community Safety are represented on the Bromley Safeguarding Adults Board and this year's first adult safeguarding conference "Protection through Partnership" featured how the strengthened links between adult safeguarding and community safety work in safeguarding people who, for example, are vulnerable to rogue traders and other criminal activity. The recent external review of safeguarding found good evidence that sound practice in using a spectrum of preventative services and evidence that this included community safety services