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Foreword

I am delighted to be asked to introduce the Community Care Plan. It is published at a time of great change for Health and Social Care Services.

From April 2001 local authorities have a new duty to provide for the personal, economic, social and environmental well-being of their communities. The County Council will build on existing joint working in order to fulfil this Community Leadership role.

The NHS Plan has been published and lays out expectations that Health and Social Care Services will work more closely in partnership.

A shared vision and strategic planning, effective joint funding and commissioning, alongside good working relationships will promote partnership across the community in order to provide quality services.

The Executive Partnership Board has been established as the means of jointly delivering this challenging agenda.

Services will be responsive to the needs of users, promoting their independence and enhancing their chances in life. We will ensure that those for whom the services are provided have a stronger voice in the decision making process and the delivery of services.

In future, as services become more integrated and user focussed, Joint Investment Plans will be the vehicle for outlining service developments.

In the meantime, the Community Care Plan is prepared in partnership with health services, district councils and people in the local community. The Plan shows how we will work together over the next four years to meet the health and social care needs of the community.

It demonstrates our commitment to high quality services to sustain the health and well being of the people of Buckinghamshire.

Hugh Carey
Cabinet Member for Adult Social Care

September 2001

Part One

Introduction

The Community Care Plan, this year a four-year plan, is intended to provide adult users of services and their carers, and others with an interest, with information about how services are planned and delivered.

The Community Care Plan should be read in conjunction with:

- **Help at Hand** a directory of adult care services
- and
- **Better Care, Higher Standards** the charter for long term care in Buckinghamshire about what you can expect from community care services

For information about services plans for children and their families, and young people making the transition to adult services, ask for a copy of:

- **Quality Protects Management Action Plan**
- **Youth Justice Plan**
- **Education Development Plan**
- **Connexions Business Plan**
- **Behaviour Support Plan**

For copies contact your:

- Local social services
- GP surgery
- Local library

or

- Telephone 01296 382935 and ask for a free copy

For contact details, see page 73, or for this and other information about community care services, visit our web site on www.bucksc.gov.uk

Executive Summary

The Community Care Plan 2001-2005 outlines current joint working arrangements between:

- Health,
- Housing,
- Social Services.

Arrangements that are driven by national guidance, including:

- White Paper ñ Modernising Social Services,
- The NHS Plan,
- Health Improvement & Modernisation Plan,
- National Service Frameworks.

National Service Frameworks and Health Improvement & Modernisation Plans are developed through local consultation with users and carers, and the drawing up of local:

- Joint Investment Plans

Service plans for adult care services outlined in this document describe how this activity is translated into a programme of measurable work, the aim of which is the better delivery of services and, therefore, better outcomes for people who use the services.

Service plans for:

- | | |
|--------------------------------------|---------|
| • Older people. | Page 34 |
| • People with a learning disability. | Page 41 |
| • Users of mental health services. | Page 48 |
| • People with a physical disability. | Page 53 |

The outcomes are measured through targets set in:

- Service Plans.
- Local and National performance indicators.
- Consultation on the Health Improvement and Modernisation Plan.
- The Long Term Care Charter.

and published every year in the:

- Local Performance Plan.
- The Health Improvement & Modernisation Plan.
- The Long Term Care Charter.

What is Community Care?

Community Care is the help and support that people need so that they can live as independently as possible, either in their own home or in a residential or nursing home in the community. Community Care includes:

- **Adult Care Services** arranged by **Social Services** including:
 - Information, advice and support.
 - Home care.
 - Meals.
 - Short breaks for carers.
 - Equipment and adaptations for daily living.
 - Residential care.
 - Services for deaf and / or blind people and minority ethnic groups.
 - Day services and community support.

- **Health Services**, provided by **Primary Care Groups and Trusts**, including:
 - Community nursing and other health services for people living in their own homes or in residential or nursing homes. *For example:*
 - General Practitioners (GPs)
 - Dentists
 - Opticians
 - Pharmacists
 - Specialist health services.

- **Housing Services** arranged by the **District Councils** including:
 - Accommodation to suit special needs, including sheltered housing and specially adapted housing for people with physical disabilities.
 - Financial help for people with disabilities when their homes need altering to make them more suitable.
 - Grants to pay for home improvements or repairs.

- **Education for Life Long Learning and Employment Opportunities.**

The Changing Face of Buckinghamshire

The Statutory Authorities in Buckinghamshire

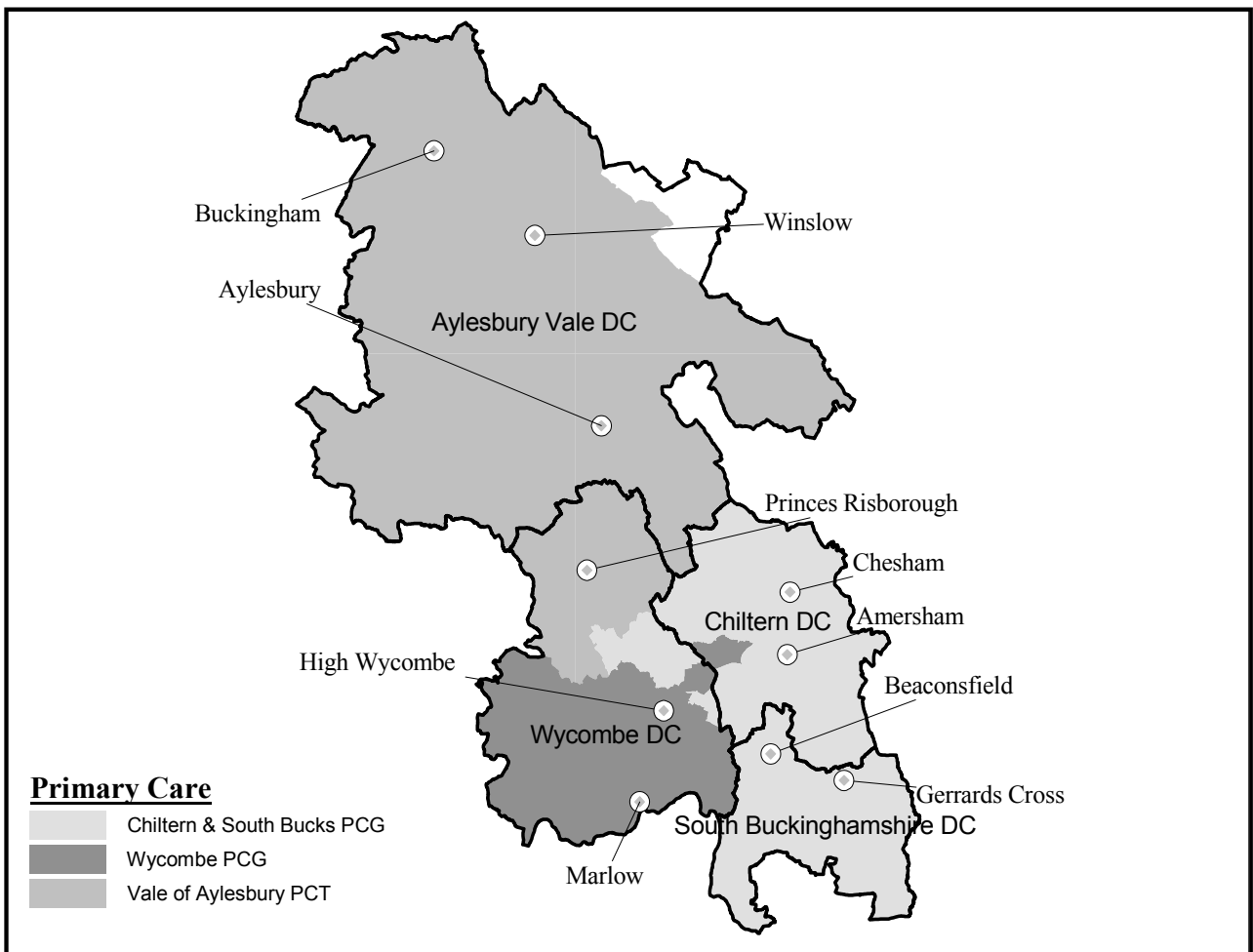
Buckinghamshire County Council

The Buckinghamshire County Council (BCC) area comprises:

- **Four District Councils** Aylesbury Vale (AVDC), Chiltern (CDC), South Bucks (SBDC) and Wycombe (WDC)
- 153 Parish Councils, 9 Town Councils and 36 Parish meetings.

Buckinghamshire Health Authority

The Buckinghamshire Health Authority (BHA) covers Buckinghamshire County Council area and Milton Keynes area. The main providers of Health services in the area are the **NHS Primary Care Groups and Trusts**.



Map showing NHS Primary Care organisations, District Council areas and major towns in the Buckinghamshire County Council region

Projected Population for Buckinghamshire 2001-2005

The following population projections form part of Buckinghamshire's population, household and dwelling projections for 1996-2011 (updated July 1998). The projections have been produced using the Buckinghamshire population and household projection model, developed from and influenced by the Cheshire and Chelmer population projection models. In common with them, it projects future populations using a housing-led methodology. When using these projected population figures it must be remembered that these projections are a statement of what would happen to population numbers in the future if all the assumptions made in producing them were realised.

The overall population in Buckinghamshire is set to rise between 2001-2005, however this is not a linear increase.

Figure 1 shows the projected population for Buckinghamshire is due to increase by 0.4% between 2001-2003, slowing to a rise of 0.2% between 2003-2005.

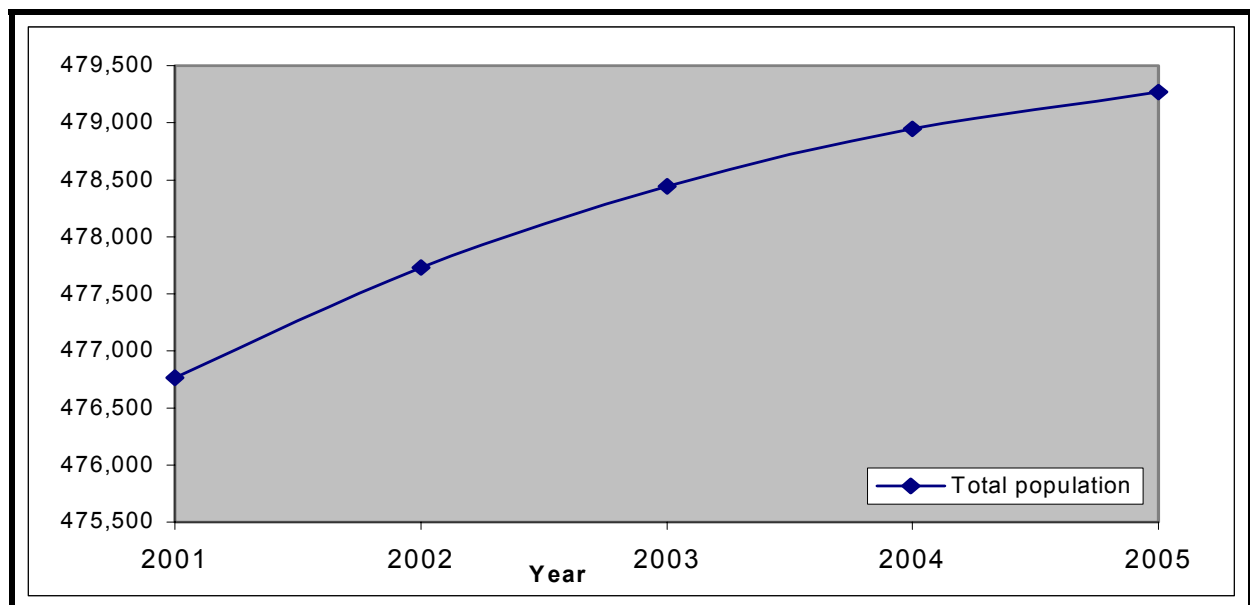


Figure 1: Projected population increase in Buckinghamshire 2001-2005

Figure 2 shows the projected population increase will not be evenly distributed across the age groups. In general the population of Buckinghamshire is predicted to age.

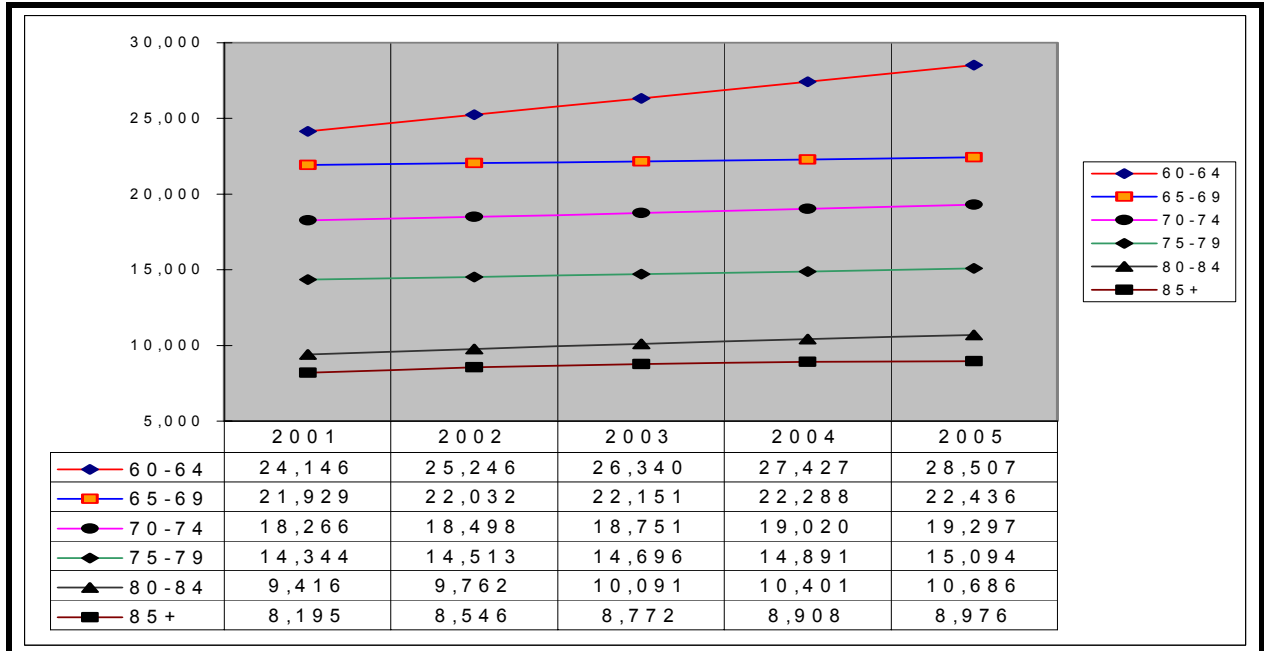


Figure 2: Total, projected population trend for age groups 60+

From **figure 3** it is possible to see a further pattern in the data, with the increase concentrated in two age groups, 60-64 (18% increase) and 80+ (12% increase) between 2001-2005. Although one age group (30-44) does decrease between 2001-2005 by 12%.

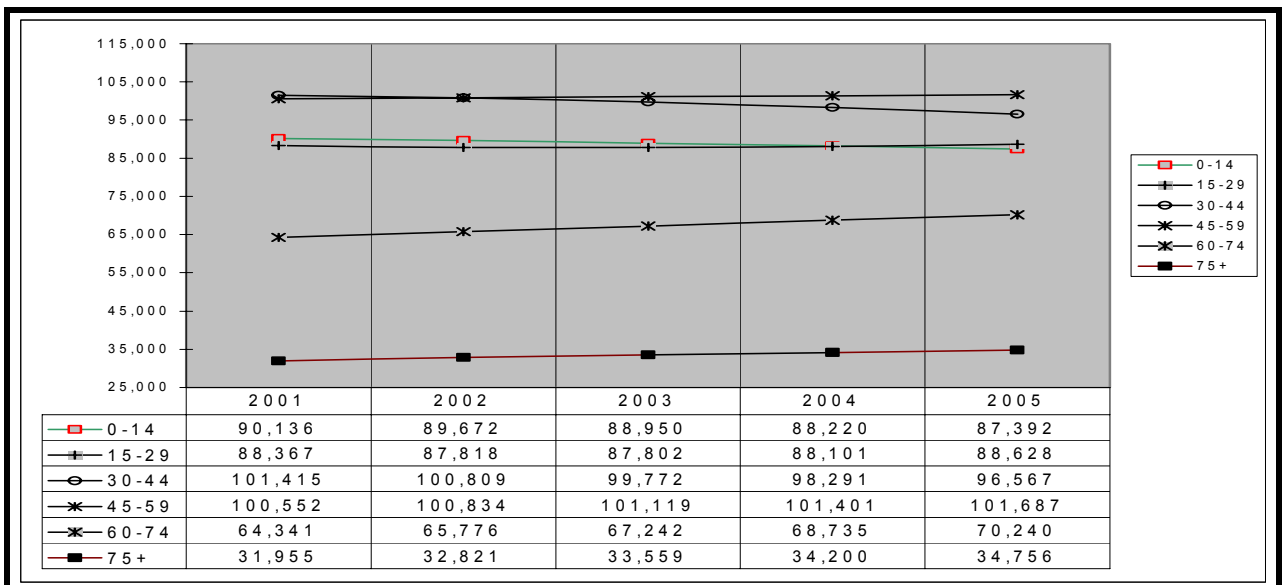


Figure 3: Total, projected population trend by age group (2001-2005)

At the District level, **Figure 4** shows that two visible trends are apparent, the age composition of Aylesbury Vale will continue to maintain a younger population when compared to the other Districts, despite a projected rise in 45-60 age group. Whilst Chiltern, South Bucks and Wycombe Districts will see a fall in the 0-14 and 30-44 age groups and a large increase in the 60+, age range. Chiltern District will see the largest fall in the 0-14 and 30-44 age group, and Wycombe District the greatest increase in the 74+ age group.

Overall, Aylesbury Vale's total population is projected to increase between 2001-2005, whilst Chiltern, South Bucks and Wycombe Districts will decrease in this time period.

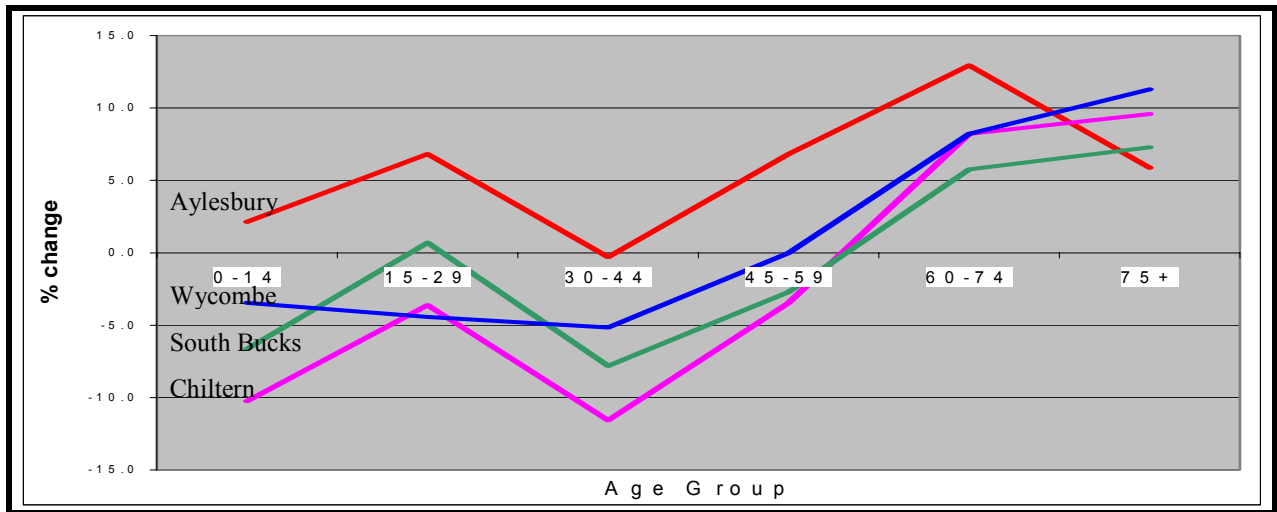


Figure 4: Population changes in the Districts (2001-2005)

Projected Household Changes

Figure 5 shows how households for Buckinghamshire are projected to increase by 3.7% between 2001-2005. Reflecting the projected increase in population figures, households in Aylesbury Vale are projected to increase by a greater amount than the County as a whole, 7.3%.

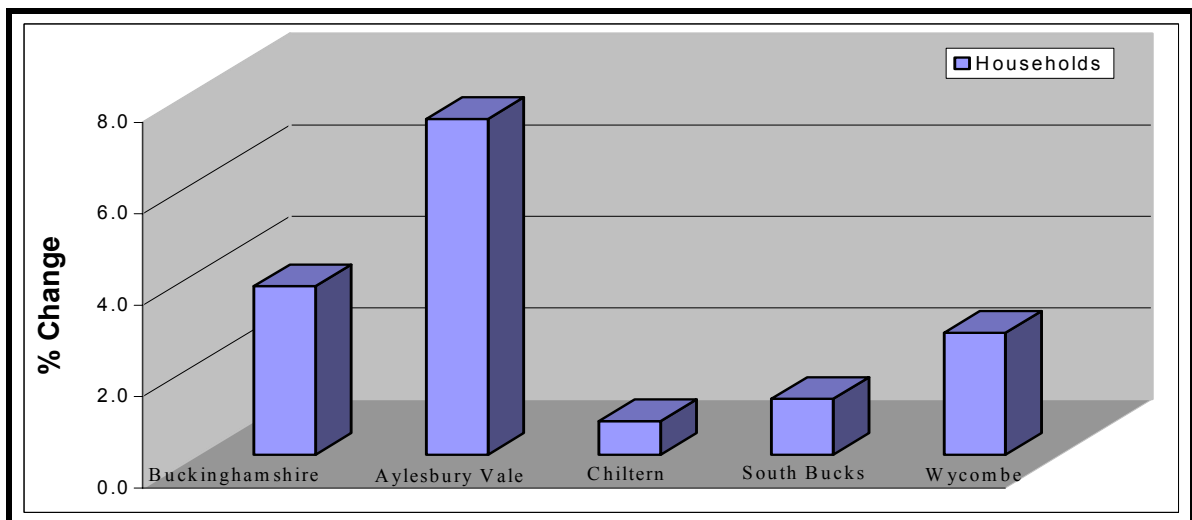
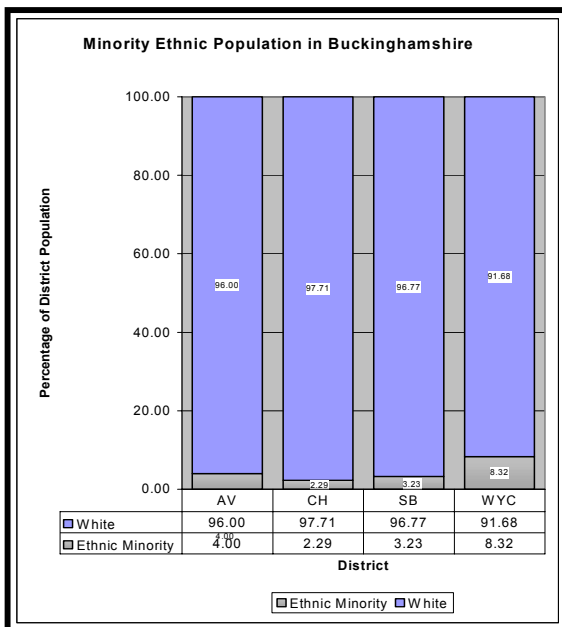


Figure 5: Projected household change for 2001-2005

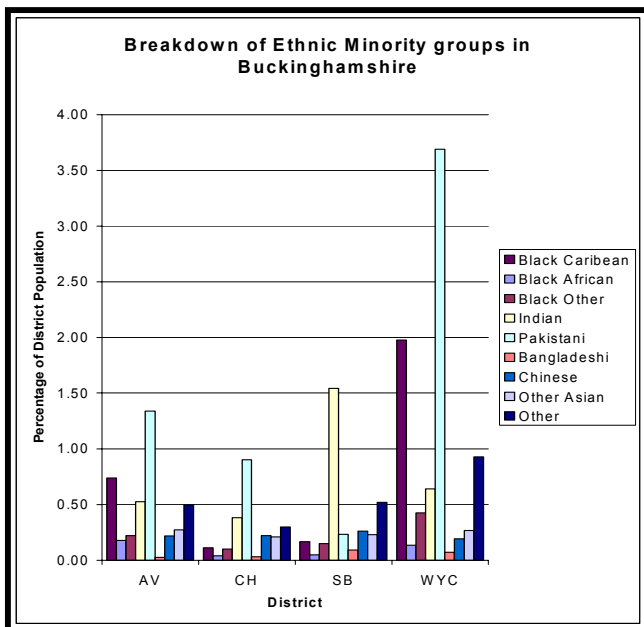
Ethnicity of Buckinghamshire

In 1991, at the last Census, 23,408 of the population of New Bucks were from non-white ethnic groups. With a population of 456,202, this accounts for 5% of the population. The distribution of minority ethnic groups is not evenly spread over the County. Wycombe District has the highest percentage (8.3%) of its residents from non-white ethnic groups, followed by Aylesbury Vale District (4%), South Bucks District (3.2%) and Chiltern District (2.3%).

The graphs below illustrate the breakdown of ethnicity in Buckinghamshire. To give a general picture, **Graph 1** highlights the split between white and non-white residents in each of the Districts, while **Graph 2** focuses in on just the minority groups to show the different ethnic groups that make up this minority part of the population.



Graph 1



Graph 2

For more information about services for minority ethnic groups, please turn to page 61, or ask your local social services office for the leaflet 'ethnic monitoring - why we ask about your origin'.

For more information about the demography of Buckinghamshire please contact: Leanne Simmons, Research Team,  01296 395000

The Strategic Aims of the Council Plan

What the County Council can do is decided by policies, some agreed locally, and others that are required by national government. All these form the Council's Policy Framework in a four-year rolling programme. Every year the performance of the County Council is measured and published in the Local Performance Plan.

The Strategic Aim for Adult Social Care is **Strategic Aim 6** in the County Council's Local Performance Plan. It is:

“To meet the assessed care needs of individual adults promptly and effectively within available resources.”

Strategic Aim 6 has supporting policies they are:

- 6a** Provide for preventative help, rehabilitation and other care arrangements to enable older people to maintain their dignity and independence.
- 6b** Facilitate opportunities for people with a learning disability to achieve their potential and to participate fully in the life of their community e.g. supported employment, supported living, access to community resources and lifelong learning.
- 6c** Encourage people with physical disabilities to maximise independence and maintain a reasonable quality of life e.g. increased use of direct payments.
- 6d** Through joint working with the new Mental Health Care Trust, ensure that our mental health clients live as independently as possible, taking into account the safety and wellbeing of themselves and others.
- 6e** Devise improvement plans that achieve service quality and efficiency targets.
- 6f** Proactively establish partnership arrangements with Health, Primary Care Groups and Primary Care Trusts, and other key partners to provide seamless 'one stop' access points for users of our services.
- 6g** Work with the Health Authority to meet its responsibilities under the NHS Plan by explaining its policy and performance to the County Council on a periodic basis.
- 6h** Evaluate unit costs to achieve best value and where feasible reduce costs to similar authorities.
- 6i** Put in place the necessary management information to enable the service to be managed as efficiently as possible.
- 6j** Develop policies that take into account the ability to pay and which support clients to claim all relevant state benefits, protecting the provision of care to those most in need.
- 6k** Develop and implement service strategies that reflect the resources allocated to Adult Care Services.

Service Plans are then developed which set out the targets and outcomes to deliver the Adult Social Care Service Aim and Supporting Policies.

Community Care Plan (a statutory plan) outlines this activity and also provides service users and their carers an opportunity to be consulted about the provision and achievements of services.

Making the Links

The County Council, working in partnership with other organisations, takes into account statutory legislation, other statutory plans, like the Community Care Plan, and local plans that affect the work of the Council.

Statutory legislation affecting the delivery of Services

• National Health Service Act 1977	• NHS & Community Care Act 1990
• National Assistance Act 1948	• Health and Public Health Act 1986
• Carers (Recognition and Services) Act 1995	• Health Act 1999
	• Crime & Disorder Act 1998
• Carers & Disabled Children's Act 2001	• Disability Discrimination Act 1995
• Mental Health Act 1983 (undergoing major revision)	• Chronically Sick and Disabled Persons Act 1970
• Direct Payments Act 1996	• Disabled Persons (Services Consultation and Representation) Act 1986
• Human Rights Act 1999	

For Strategic Aim 6 the links with other Local Service Plans are

• Joint Investment Plan for Older People including Older people with Mental Health Problems, 2000/03	• Mental Health Local Implementation Plan for the National Service Framework
• Joint Investment Plan - Learning Disability	• Health Improvement & Modernisation Plan for Buckinghamshire
• Joint Investment Plan - Welfare to Work	• Department of Health Training Plan
• Joint Investment Plan ñ Mental Health	• Economic Development Action Plan
• Carers Action Plan	• Preventative Strategy 2001-2002
• Partnership Grant Action Plan	• Special Needs Housing Strategy
• Community Care Plan	• Supported Housing Plan
• Local Transport Plan	• Community Safety Plan
• Long Term Care Charter	• LA21 Strategy

For more information about the Local Performance Plan visit the Council's web site www.bucksc.gov.uk, call in to your local Social

Services office or  01296 395000 and ask for a copy.

Health, Housing and Social Services Working Together

The Partnership Forum

The Buckinghamshire Partnership Forum (previously the JCC) is the County-wide health and social care forum with senior representation from social services, education, district councils, Health (including primary care groups and trusts) as well as users and carers and voluntary organisations.

The Partnership Forum has met regularly, since 1999 to develop the partnership agenda in health and social care. The agendas this year have shown how grass root issues ñ hospital discharge arrangements, development of a physical disability resource centre, direct payments - can reach the strategic forums. However, the challenges of partnership working continue.

New Developments

Effective joint working is needed to progress the initiatives promoted by the Government e.g. Supporting People and Health Improvement & Modernisation Plans (HIMPs) which are developed through the Joint Investment Plans (JIP's) for each client group. In addition there are two major initiatives promoting partnership working:

- NHS Plan.
- Modernising Local Government.

Strategic Planning (Specialist Groups)

Specialist Groups are responsible for the development of strategic plans for specific areas of service. Their membership includes a wide range of staff from the statutory agencies and people representing users of services and their carers. The following groups are formally linked to the Partnership Forum and their chairs are listed below.

Children and Families	-	Clive Lee, Social Services
Learning Disabilities	-	Janice Campbell, Social Services
Physical Disabilities	-	Beryl Ramsey, Social Services
Mental Health	-	Kate Kennally, Social Services
Older People	-	Joan Elliott, Social Services
Supported Housing	-	Chris Flahey, Social Services

Currently, these strategic planning groups are at different stages in their development and during 2001/2002 it is hoped that there will be a growing consistency in the strategic approach taken and the patterns of reporting to the Partnership Forum.

Working with Voluntary Organisations

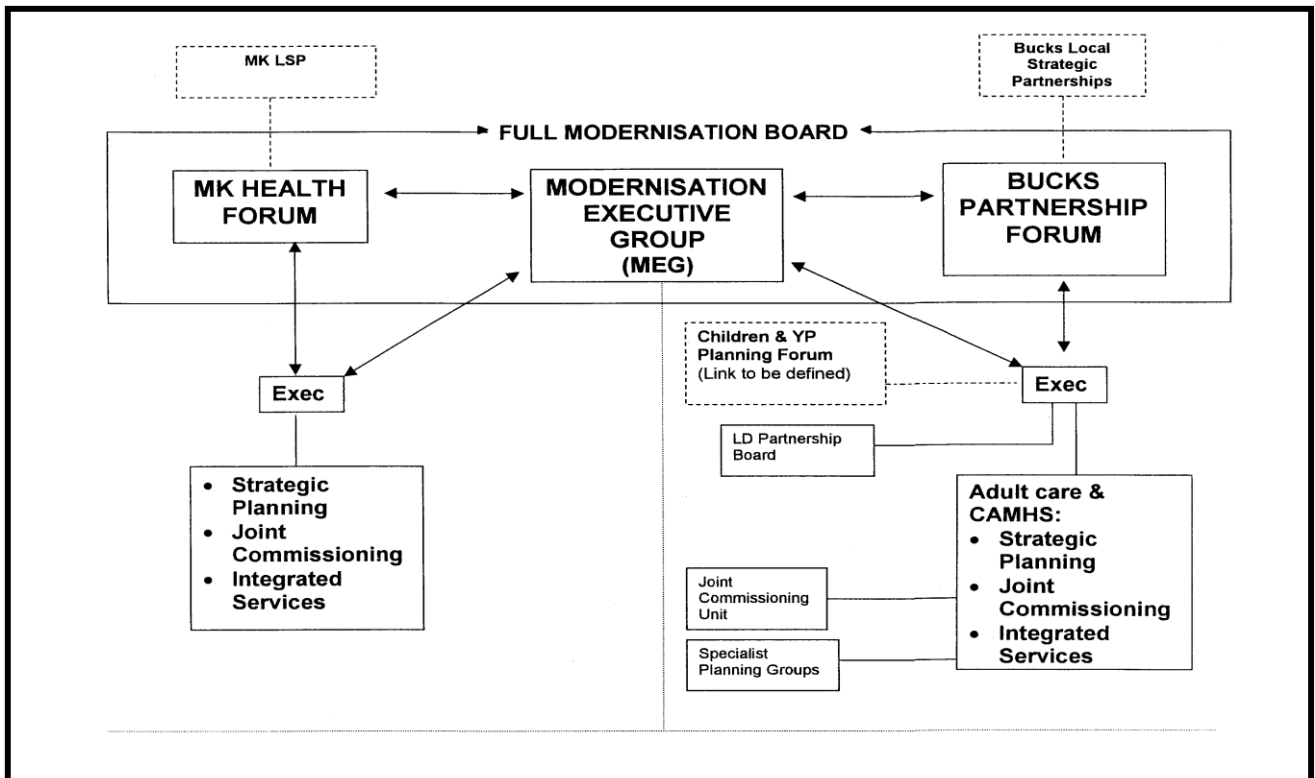
The Locality Forums

With three development workers in post, the past year has seen the forums become real associations of voluntary organisations, users and carers who are increasingly participating in the County-wide strategic planning process and are ensuring that local issues are placed on the wider planning programme. They have contributed significantly to a programme of consultations for the Long Term Care Charter and the Community Care Plan.

The Locality Forums have made every effort to achieve the full allocation of places on the Partnership Forum and on the Specialist Groups for Learning Disability, Physical Disability, Older People and Mental Health. Patients, service users and carers who are interested in becoming representatives on these groups should contact the Locality Forum in their area.

The NHS Plan

Key proposals in the NHS Plan, which was launched July 2000, include the requirement that there should be a Modernisation Executive Group (MEG) to oversee the implementation of the NHS Plan and in particular the partnership agenda.



Proposed Partnership Arrangements

NHS Plan Implementation

The joint working structure will soon be much strengthened by being incorporated into the arrangements for a local Modernisation Board. The Partnership Forum will become a significant part of these enhanced arrangements, which will also include the creation of an executive partnership board to drive forward the business. The new arrangements are expected to be in place by the autumn 2001.

During the period 2001/2005 the goal will be to make these arrangements truly effective and make a difference to people's lives.

Buckinghamshire Community Action

Buckinghamshire Community Action is an independent registered charity that works to support the broad needs of community groups in Buckinghamshire and Milton Keynes. It aims to improve local community facilities through promoting voluntary action and self-help. As a Countywide umbrella organisation for the voluntary sector, Buckinghamshire Community Action provides a wide range of support services and advice to the voluntary, statutory and private sectors. The principle areas of activity include:

- Identifying local needs.
- Community care consultation.
- Rural community development.
- Charity information.
- Funding advice.
- Village hall support services.
- Community transport.

For more information about

The Partnership, Locality Forums, specialist groups and the NHS, contact

David Jones  **01296 395000**

John Spargo  **01296 310000**

or contact the Community Care Information Officer

Kim Whitbread  **01296 421036**

or contact Buckinghamshire Community Action

Catherine Johnstone  **01296 421036**

Money Matters

Social Services Spending Overview

Overall the County Council plans to spend £365m in 2001/02. This represents £22m (6.3%) more on services than the previous year. For Social Services the 2001/02 net budget is £69m, an increase of 7.2%. Even this increase cannot meet in full the costs of an increasing population and rising demands.

The Social Services budget is 20.6% over the amount the government considers the Council "needs to spend to provide a standard service" (known as the Standard Spending Assessment or SSA). This is one of the highest spends above SSA of any County Council and demonstrates the Council's commitment to Social Services.

In policy terms the focus is on prevention and managing provision away from less effective and more expensive residential care to less expensive and more effective care in the community.

Modernising Social Services - Grants

The government has continued to support Social Services through a range of Specific Grants. They are:

	£000
• Promoting Independence Grant (previously Partnership Grant and Prevention Grant)	1761
• Training Support Grant	234
• AIDS Support Grant	13
• Mental Health Grants	707
• Children and Adolescents Mental Health Services Mental Health Grant	23
• The Carers Grant	310
• Drug and Alcohol Misusers Grant	26
• Asylum Seekers Grant	376
• Childrens Services (Quality Protects)	609
The total of these grants for 2000-2001 is	£4,059

Each grant clearly identifies the outcomes that must be achieved in order for the grant to be received. An increasing number of these targets must be achieved jointly with Health.

Community Care Plan 2001 - 2005

In 2001/02 there is additional focus on **intermediate care** to prevent the unnecessary admission to hospital or residential care and to facilitate by appropriate rehabilitation the early discharge from hospital to the community.

Looking forward, there is to be a new "IPSS Performance Fund" grant from 2002/03. In the first year the Council's share of this will be dependent on performance in the area of intermediate care during 2001/02.

Medium Term Financial Outlook

Spending Pressures are expected to continue to exceed increases in available resources. The NHS Plan and the government's "Response to the Royal Commission on Long Term Care" have many financial implications for Social Services but equally many of these are impossible to evaluate fully until more detail is available.

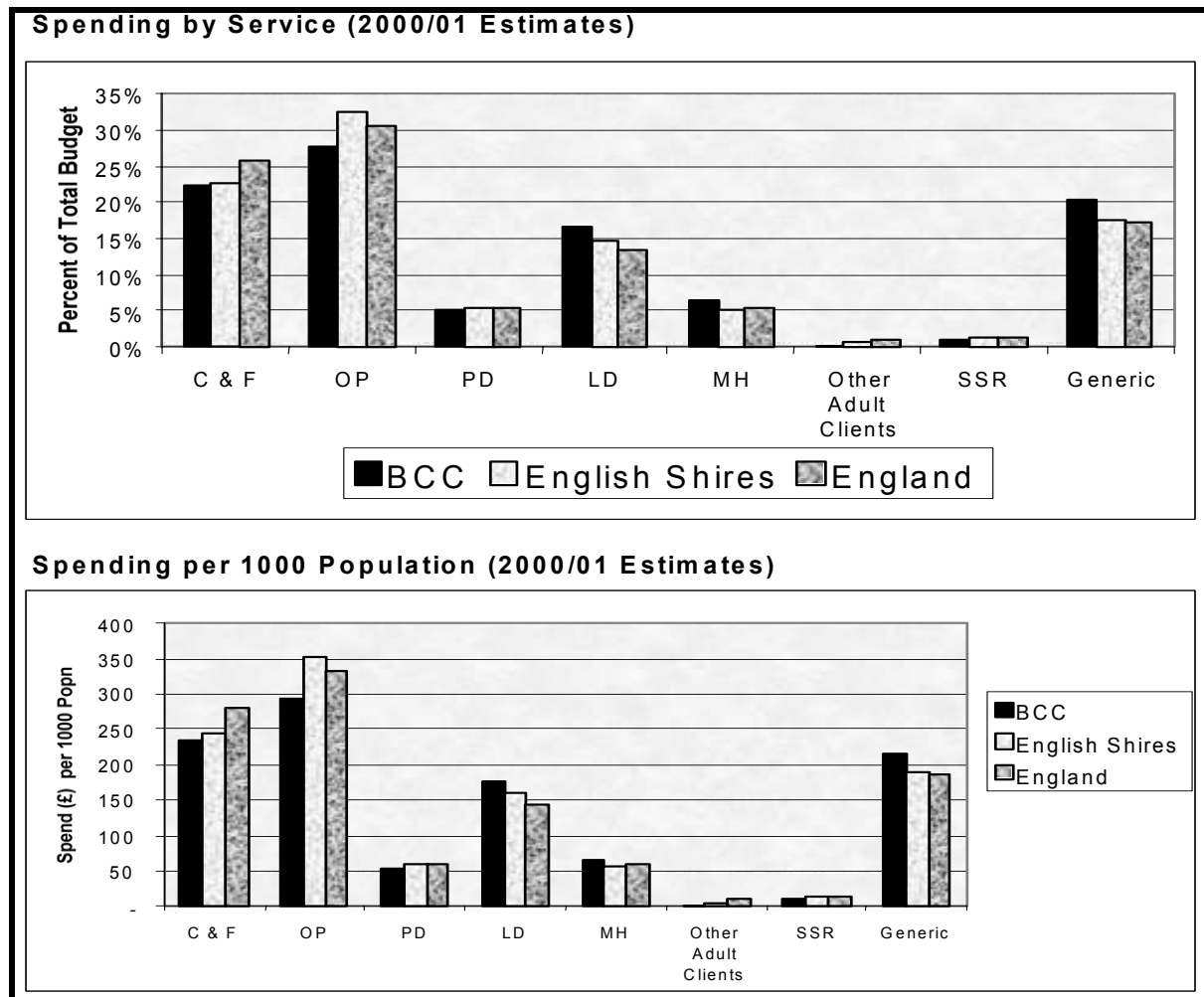
Many of the current initiatives within both Health and Social Services should result in outcomes for clients that are both more appropriate and less expensive (e.g. enabling people to live in their own homes for longer). We will need to ensure that we take maximum advantage of the short term funding (grants) available to develop services in these ways in order to help bridge the gap between resources and the need for services.

The 1999 Health Act "s31 flexibility" has made possible much closer integration between Health and Social Services. Within the period of this plan we will have joint organisations delivering services for Mental Health and for Learning Disability clients. We can also expect to be taking advantage of the possibilities offered by pooled budgets.

2001/02 Budget

The total 2001/02 budget for Social Services is £69m of which £51m is spent directly on services for adults. This is summarised in the following table.

	2000/01			2001/02			% increase between 1999/00 & 2000/01
	Gross	Income	Net	Gross	Income	Net	
	£000	£000	£000	£000	£000	£000	
Older People	45,956	(18,084)	27,872	46,822	(18,102)	28,720	3.0%
Mental Health	5,583	(2,547)	3,036	6,318	(2,539)	3,779	24.5%
Learning Disability	16,683	(5,865)	10,818	18,663	(6,321)	12,342	14.1%
Physical Disability	7,613	(2,314)	5,299	9,095	(2,940)	6,155	16.2%
Total Adults	75,835	(28,810)	47,025	80,898	(29,902)	50,996	8.4%



Note: C&F = Children & Families OP = Older People PD = Physical Disability
 LD = Learning Disability MH = Mental Health SSR = Service Strategy & Regulation

Costs to service users

Home Care and other Non Residential Services Charges

Social Services make no charge for an assessment for services, however, the services provided as a result of the assessment have a charge depending on the person's circumstances. The charges for some of the services are related to state funded financial benefits the person may be getting.

- New National Guidance for Home Care and other non-residential social services charging is due to be published soon.

Residential Care Charges


First announced in the NHS Plan are changes to the **Charges for Residential Accommodation Guide (CRAG)** which introduce a 12 week property disregard and the new capital limits effective from 9 April 2001. Clients with capital in excess of £18,500 will be subject to increased charges close to full cost.

Direct Payments

The Community Care (Direct Payments Act 1996) gives Social Services the power to make direct cash payments to individuals in lieu of community care services that they have been assessed as needing, subject to eligibility and priority criteria. People who receive these payments will then use the money to purchase services to meet their assessed needs.

Joint Finance Funding for the direct payments projects in Buckinghamshire comes to an end in June this year. £50,000 has been identified by Social Services to fund a support service offering advice and assistance to people to enable them to use direct payments. It has been suggested it should be managed by Social Services who want to expand the scheme. The service will continue to be provided by People's Voices.

Recent Government guidance had indicated the Direct Payment Schemes should now be available for older people and people with a learning disability in addition to those with physical disability and those with mental illness.

**For more details about
Social Services funding
Contact Gavin Kinsman  01296 382372**

Health Spending Overview

The National Health Service (NHS) is currently undergoing a major change to the way it provides and commissions services, to continue to ensure that healthcare in the 21st Century is delivered efficiently, effectively and equitably.

Buckinghamshire Health Authority, together with the Buckinghamshire Primary Care Groups and Trusts (PCG/Ts), will continue to improve and develop the provision of health services in Buckinghamshire. Working with colleagues from both the NHS and other agencies, it will work within the Health Improvement & Modernisation Plan (HIMP) to ensure that the limited resources at its disposal are put to the most effective use for the population it covers.

Funding to the NHS in 2001/02

The total national cash-limited revenue budget is £37 billion, which in real terms represents an increase of 6.3% over 2000/2001. This 6.3% increase will continue for the next three years.

Funding to Buckinghamshire

For 2001/02, Buckinghamshire Health Authority's budget has increased from £406.75m to £438.892m, which represents an increase of £32m over 2000/2001 (a 7.9% increase).

The Health Improvement & Modernisation Plan (HIMP)

The Health Authority, with its partner agencies, is required to produce a three-year programme for Health Improvement in Buckinghamshire. Each year, progress against this plan is summarised and published, alongside the key objectives and outcomes intended for the year ahead. The Health Improvement & Modernisation Plan (HIMP) is a crucial multi-agency programme of work affecting the health and welfare of all residents of the County. The plans for community care services are reflected in the HIMP.

Changes to the Health Service over the Next Five Years

The NHS Plan, improvements in medical and information technology and doctors training are the driving forces for new ways of working in the NHS. Primary Care Trusts (PCT's) are being formed, Health and Social Services need to work more closely together through the National Service Frameworks which are being developed.

Within the boundaries of Buckinghamshire County Council there is a single PCT, **Vale of Aylesbury PCT** and two PCG's (currently consulting over the proposal to form two PCT's).

PCT's will hold budgets to commission most healthcare services, and will work closely with other agencies such as Social Services to meet local health needs and the Countywide targets set by the Health Improvement & Modernisation Plan. PCT's differ from PCG's in that they are self-governing bodies that commission healthcare and provide certain health services previously run by local NHS Trusts.

With the commissioning role spearheaded by Primary Care Trusts the role of Buckinghamshire Health Authority is to provide a strategic overview and performance management to local organisations. In April 2002, Buckinghamshire Health Authority is planning to merge with Berkshire Health Authority and Oxfordshire Health Authority to create a new Strategic Health Authority (St.HAs). Public consultation on these proposals will be taking place in the autumn of 2001.

With effect from 1 April 2001 the Secretary of State approved the establishment of **Buckinghamshire Mental Health NHS Trust (BMHT)**. Mental health and learning disability services, previously provided by AVHCT and South Buckinghamshire NHS Trust, have been transferred to the new Trust. Learning Disability services are being managed within this Trust until April 2002 when new arrangements for integrated services with Social Services will be put in place.

NHS Partnership Development Fund

Partnership Development Fund (PDF) will continue to fund innovative community-based services. There are separate funds for Buckinghamshire and Milton Keynes PCT/PCGIs. PCG/PCTS in consultation with the local authority, district councils, voluntary organisations, and user/carer representatives will award, evaluate and monitor bids under this scheme, this responsibility having transferred from health authority to PCG/PCT on 1 April 2001.

The budget for 2001/02 for Buckinghamshire and Milton Keynes will be in the region of £1.65m per annum. This will fund existing projects and new projects in line with the HIMP and other specific implementation plans like the Joint Investment Plans (JIPs).

Other NHS Funding Commitments

In the past, BHA has commissioned a range of services from the voluntary and independent sector, to ensure that there is a wide range of healthcare services available to the people of Buckinghamshire to choose from.

In 2001/02 the PCT/PCGIs will assume responsibility for this budget, which includes funding for services such as hospice care. The budget for 2001/2002 will be in region of £4.8m

**For more details about
Health Authority funding
Contact: Paul Pattison  01296 310062**

Getting Value for Your Money

National Priorities, Best Value and Performance Measures

National Priorities

Under its Modernising Health and Social Services programmes, the government wants to see the pace of modernisation increase **so that the public feel the benefit of services that are fast, fair, convenient and excellent**. National Priorities guidance sets out the context in which HIMPs (Health Improvement & Modernisation Plans) and JIPs (Joint Investment Plans) will be developed to achieve the Government's aim.

The HIMP is the local plan to deliver the high level priorities and targets set by the national modernising programme. The JIP is the local 'business plan' setting out the resources required to meet the targets. National priorities for 2000/01 ñ 2002/03 have been identified against a number of themes with specific targets set for priority areas within each theme. The themes are:

- Improving health.
- Saving lives.
- Fast and convenient services.
- Caring for vulnerable people.
- Modernising strategies.

National Service Frameworks (NSFs) and Strategies

The Government has also issued a series of National Service Frameworks (NSFs) and strategies for specific service areas or care groups, which include:

- NSF for Mental Health.
- NSF for Older People.
- National Carers Strategy.
- White Paper ñ 'Valuing People' -The National Strategy for Learning Disability.

These initiatives set standards and establish performance measures against which progress within an agreed timescale is measured.

Monitoring Performance

The White Paper **'Modernising Social Services'** also requires that Social Services measure their performance against a range of priorities and target indicators mainly based on the National Priorities. A three times a year pattern of monitoring has been established and the performance reported contributes to the County Council's overall Best Value Performance.

Performance is measured and monitored in Buckinghamshire through:

- **Opinion Surveys**

In the main survey of public views undertaken this year jointly with the district councils for example:

- 94% of users of social services were satisfied with the services they were receiving.

- **Local User and Carer Satisfaction Surveys**

User and carer satisfaction survey forms are routinely sent out with every care plan inviting the client to comment on the performance of Social Services, of course not all the forms are returned, but of those that did return forms:

- 83% felt they were receiving the service they needed.
- although 64% said they had not received a copy of 'Hearing the Customer's View' which explains the Social Services complaints system.

- **National and Local Performance Indicators**

There are national and local performance indicator measures for Adult Social Care. Information to measure these indicators comes from user and carer surveys and the social services information database.

Performance Measures

Performance Assessment Frameworks (PAFs)

Performance Assessment Frameworks for Personal Social Services and the NHS are part of a wider performance assessment system, built around the Best Value regime. One of the key priorities is to ensure that social services and the NHS work closely together.

In almost all areas, health and social services have a contribution to make to each other's activities but in three specific areas both organisations have a major contribution to make. These are:

- Cutting health inequalities.
- Mental Health.
- Promoting Independence.

The joint target areas include reducing:

- The growth in emergency admissions of people aged over 75.
- Emergency psychiatric re-admissions.
- The numbers of delayed discharges of over 75 year old occupying an acute hospital beds.

Progress in these and other areas is monitored in a number of ways, including performance indicators. To ensure both councils and health authorities are held accountable for the delivery of the improvements needed to meet the targets, both the NHS and Personal Social Services Performance Assessment Frameworks (PAFs) include interface indicators.

Regular in-year assessments of performance are also being carried out. The NHS Executive Regional Offices and the Social Services Inspectorate Social Care Regions have been focusing on joint assessment of these interface priorities.

Best Value Performance Indicators (BVPI's) give social services the opportunity to measure its performance against other authorities. For example last year Buckinghamshire social services performed well against other authorities in the:

- 'Percentage of people receiving a statement of their needs and how they will be met' (BVPI 58), 92% in Buckinghamshire as against 90.58% nationally. Buckinghamshire has set a target of 95% for next year.

It also illustrated that improvement was required in:

- 'The number of older people aged 65 and over whom the authority helps to live at home, per 1000 adults' (BVPI 54), 48.09 per thousand in Buckinghamshire as against 73.42 per thousand nationally.

Local indicators show that last year, for example, in the:

'Percentage of inspections of residential homes for adults which should have been carried out which were carried out' (BCC SS2). Buckinghamshire achieved 100%

Best Value Reviews

Under the Government's Best Value Initiative, the Council also has to show that it is providing quality services at a reasonable cost by the most economic and effective means. It does this by:

- Challenging the reasons why and how the services are provided - is the service still necessary? Are we doing it the right way?
- Comparing performance with others, not just other councils but private business as well.
- Consulting with residents, service users and providers to make sure their priorities are the councils' priorities.
- Competing to secure effective services and fair competition.

As part of the process the Council has to:

- Show an improvement in services year on year against national and local indicators of performance.
- Review services every five years through a series of best value reviews

In 2001 Social Services was involved in a review of:

- Meals on Wheels ñ completed October 2001
- Laundry Services - completed
- Learning Disability services - completed in December 2001.
- The Mental Health and Older Peoples Mental Health services ñ completed December 2001
- Support for Carers - completed in December 2001.
- Older Peoples Services - completed in November 2001 with a further review in 2002/03 of specific service aspects arising from the 2000/02 review.

Next year (2002/03) reviews are planned for:

- Physical Disability services.

Outcomes of the reviews will be published in the yearly Local Performance Plan.

Joint Review of Social Services by the Social Services Inspectorate and the Audit Commission

Joint Reviews are undertaken on behalf of the Social Services Inspectorate (Department of Health in England), the Social services Inspectorate (Wales) and the Audit Commission. An independent assessment is provided of how well the public is served by social services in each council in England and Wales. The Review covers how councils organise and deliver services to meet the needs of vulnerable people in their communities.

At the end of each Review a judgement is made on the findings. Councils are placed in a table according to how well local people are being services by their social services and how they have set up systems to sustain or improve their performance.

Buckinghamshire's Social Services is subject to a Joint Review in November 2001 and the results will be published and made public in the Spring of 2002.

For more information about:

The Joint Review

Contact Lynne Ward  01296 382504

Measuring Social Services Performance

Contact Paul Greenhalgh  01494 475039

Best Value Reviews

Contact Rebecca Cooper  01296 382192

Part Two

Introduction

In partnership with Health and Housing authorities, in line with National Policy towards independence and rehabilitation, the Council's priority is the provision of services which will promote:

- Choice
- Dignity
- Independence

This involves working with others to make sure that people:

- Have all the information they need to make choices.
- Know how to contact services to ask for help
- Get the right health care
- Get a suitable, safe and comfortable place to live in

And that

- Carers are helped to care

To check these things are happening, users and carers will be asked at regular intervals if services have helped them to stay safe, independent and comfortable. One way this will happen is through the Partnership Forum.

Over the next five years the organisation of services will be affected by changes in the NHS with the development of Primary Care Trusts and related reconfiguration of other NHS services. These developments will take place in partnership with service users and their carers. The Council will be a major partner in these changes.

Services will continue to be shaped by what the law says and by the money the Council is able to provide.

Services will continue to be provided on the basis of an individual assessment of a person's needs involving that person, their carers and appropriate professionals.

Getting the Services you Need from Social Services, Health and Housing

Social Services

Social Services provides Adult Care services for:

- Older People - people over 65.
- Adult services - for people with disabilities or chronic illness over 18 but under 65.

Care managers/care workers are based in three local area offices in Aylesbury, Amersham and High Wycombe. They offer information and advice on a range of services that people may be eligible for from social services and advice about other agencies that can offer support if they are unable to help.

Eligibility for Social Services

Eligibility is determined by assessment of the person's needs. Needs are considered in three stages.

The **first stage** decides whether the person qualifies (is eligible) for help from the social services. On the basis of the information received (the referral) a decision is made about whether to arrange for an assessment of the persons needs.

Once eligibility for an assessment has been established, the degree of urgency for a full assessment is worked out. The time it takes from referral to full assessment will depend on the level of risk and urgency.

Priorities for assessment are:

Urgent priority: contact is made within 24 hours if for example:

- The physical safety of the person and/or other people is at great risk now.
- Action is needed now to stop the person going into hospital or residential care.

High priority: contact is made within 7 days if for example:

- There are serious concerns about the safety of the person or their carer.
- Substantial support is needed now if the person is to remain at home.

Medium priority: contact is made within 21 days if for example

- Illness or disability means the person needs a daily visit to provide care or contact.
- Difficulties are beginning to affect the mental health of the person or their carer.
- The person is isolated with no contact with their family or friends.

Low priority: contact is made within 28 days if for example:

- The person has some difficulties in coping on their own.
- Social contacts are limited by illness or disability.

The **second stage** is a full assessment. An assessment describes what a person is able to do on their own, the difficulties they need help with, what help the person gets already, what support the person needs now to help them stay in the setting of their choice.

The **third stage** looks at the available resources and how best to meet the identified needs. Because services have to be provided within limited budgets and resources used as effectively as possible in a fair and consistent way across the County, priorities for receiving services have to be applied.

- High priority for services are for people who have urgent needs or are in crisis.
- Medium priority for services are for people who have essential needs and where a crisis is possible but preventable.
- Low priority for services are for people who need something that is desirable but it is not essential.

When working out the priority for receiving services, account is also taken of the help and support the person gets from people in their local community.

Since 1997/98 people with a learning disability, people who fall into HIGH priority bands, people who fall into MEDIUM priority bands and live alone and/or do not have enough support from others e.g. from a carer, have been offered a service.

At present it is not possible to offer services to people who fall into the LOW priority bands, but they will be put in touch with other local organisations that may be able to help them.

Health

Health Services are provided free at the point of delivery. They give help at a doctor's surgery, at home, or in hospital to people who are ill. Health services are also provided for people with a long-term illness or disability.

Information and advice on health can also be provided by:

- **NHS Direct - telephone 0845 4647** - this is a help line contact with a nurse at anytime day or night.
- The doctor, practice nurse or health visitor at the surgery.

Housing

District Council Housing Departments, based in each of the four districts, help with advice about the letting of specialist accommodation or nomination to a Housing Association providing specialist accommodation.

The Long Term Care Charter

To ensure that people are getting a quality standard in services provided or arranged by local housing, health and social services, the government published the national charter, **'Better Care, Higher Standards - a charter for long term care'**. A local charter has now been published which outlines the standards that people can expect from the services they receive, and what to do if the standards are not met. The charter has been distributed via:

- The Health Authority to the Primary Care Groups and Trusts and surgeries.
- District Councils to housing agencies and associations.
- Social Services to area offices and voluntary organisations.

Copies are available to members of the public from any of these points of contact

The aim of the charter is to encourage services to work together to make sure resources are used in the most effective way. Every year a consultation on the Charter will be organised through the Locality Forums in each district to give users and carers of services an opportunity to say whether they feel the standards are being met. Targets will be set in the coming year to measure performance against the standards and the Council will publish the results in the Community Care Plan yearly summary.

What to do if things go wrong with the services

Health, Housing and Social Services all have procedures about what to do if things go wrong. If initial efforts to sort the problem out have not been satisfactory, contact the local office and ask to speak to the complaints officer. If you are still not satisfied contact your local Councillor or Member of Parliament. Your local library or Citizens Advice Bureau will tell you who they are.

Local advocacy organisations and community health councils can offer support if help is needed to make a complaint.

For more information about:

Service standards and complaints procedures contact:

**Your local Social Services, District Council or GP Surgery
and ask for a copy of**

'Better Care, Higher Standards a charter for long term care'

Service Plans for Older People

Who are the services for?

Services for are for people **over the age of 65** whose independence, safety or quality of life may be seriously undermined by their frailty or disability. For these older people the Council will organise services aimed at maintaining or restoring their capacity to live safely in a setting of their choice, with a greater degree of independence, self-confidence, self-respect and dignity.

Over the next four years older people, will see:

1. Increased responsiveness to older people's requests for early, preventative help, to maintain their independence

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Numbers of people contacting voluntary organisations Funded by Promoting Independence grant for 3 years	7010 enquiries were made to Age Concern. 438 applications for benefits were made, of which 89% were successful	Project anticipated to end March 2002	SSD Age Concern
% of items of equipment costing less than £1000 to be delivered within 3 weeks (BVPI* 56)	85 % of items of equipment were delivered within 3 weeks	86%	SSD Health
Reduce inappropriate emergency admissions to hospital (PAF* 41)	Winter planning measures in place. Intermediate care schemes being developed to further reduce unnecessary hospital admissions		SSD Health

2. Increased use of new patterns of care that help people to regain their independence as far as possible through rapid and effective rehabilitation care.

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Numbers of people receiving rehabilitation care each year	225 rehab packages were delivered this year	468	SSD Health Housing
Number of people receiving intensive home care packages per 1000 population (based on annual survey) (BVPI* 53)	TOP team in Wycombe is fully developed Rapid Response Team developed in Aylesbury		SSD Health
Number of people helped to live at home age 65 & over per 1000 population (BVPI* 54)	51.94 per thousand i.e. 3470 people	73.42 per thousand i.e. 4906 people	SSD Health

3. Increased availability and flexibility of appropriate short term breaks for carers to help carers to continue caring in circumstances where clients would otherwise lose their independence.

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Numbers of carers receiving a short break. (Carers Grant)	27 carers supported through additional respite care grant allocation from the carers grant to social services ¹		SSD Vol orgs
Numbers of carers receiving an assessment of their need	Problems identified with collecting this data		SSD
Carers satisfaction survey returns	Carried out on 6 monthly basis		SSD
Voluntary organisation support for carers (Prevention Grant)	Support worker (Dementia specific) based in Aylesbury <ul style="list-style-type: none"> • Support to 27 carers • Support group 10-14 attendees • 277 calls to support worker 		SSD Health Vol orgs

4. The development of more diverse forms of accommodation and support and a greater variety of provision to enhance opportunities for rehabilitation and independence, including Extra Care housing and short term 'step down' beds in residential and nursing homes

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Numbers of 'step down' intermediate care beds	4 beds available	48	SSD Health Housing
Number of 'extra care' units		96	

¹ For more information about services to carers offered by voluntary organisations under the Carers Grant, please turn to Page 58.

5. The quality of services organised for clients maintained

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Percentage of care packages provided by a single provider	89%. The introduction of patchi contracts means that service users will benefit by not having so many different people providing their care.	100%	SSD Health Housing
Number of Home Care staff achieving NVQ Level 2 - 636 staff.	80	85% of Home Carers employed in 2005	SSD
Percentage of Residential homes inspected (BCC* SS2)	100%	100%	SSD
Availability of single rooms in residential homes (BCC* SS1)	80%	95%	SSD

6. The prompt identification and response to changing needs

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Time taken in waiting for assessment to start following referral	Monitoring systems being implemented		SSD
Percentage of people receiving a statement of their needs and how they will be met (BVPI* 58)	New measure method now in place	92%	SSD
Service users receiving a review (BVPI* 55)	Incomplete data	90%	SSD
Service users/clients who said matters of race, culture, religion were noted.(BVPI* 60)	63%	72%	SSD
Ethnicity of adults receiving a service following assessment noted (PAF E48)	data not available		SSD

7. An Increased number of clients remaining in their own homes

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of admissions to residential and nursing home care aged 65 and over per 10000 population	65.1 per 10000 i.e. 435 people	65.1 per 10000 i.e. 435 people	SSD Health Housing
Number of people helped to live at home aged 65 and over per 1000 population (BVPI* 54)	51.94 per 1000 i.e. 3470 people	73.42 per 1000 i.e. 4906 people	

* see glossary page 83

For more information about performance indicators see page 24.

Current Issues

The National Service Framework for Older People

The National Service Framework for older people has now been published. This has set 8 standards for achievement for Health and Social Services to ensure:

- High Quality care and treatment regardless of age.
- Older people treated as individuals, with respect and dignity.
- Fair resources for conditions which affect older people.
- Easing the financial burden of long term residential care.

The NHS Plan identifies provisional milestones and Key Targets for 2001/2002. The underpinning strategies are aimed at achieving the vision and improving the overall experience of users from the NHS and Social care.

Winter Planning

Mid and South Bucks NHS Trusts and PCGs have allocated winter planning monies for Residential and Nursing Home placements. To assist with the winter planning arrangements the DoH has allocated additional Promoting Independence Grant of £722k to Social Services for the financial year 2001/2002 only.

The Wycombe TOP Therapy Team

The Wycombe TOP (Team for Older People) Therapy Team has been awarded a certificate from the South Bucks NHS Trust staff award scheme in recognition of the outstanding contribution it has made to healthcare in South Buckinghamshire. This service, based in the Wycombe Team for Older People, is funded for 3 years from the Social Services Partnership Grant.

The staff provided through the Trust includes an occupational therapist, a physiotherapist and rehabilitation support workers. Together with the care management team they work to promote the independence of older people through timely assessment of individual rehabilitation and equipment needs.

Assistant Director Older People

Appointment of an Assistant Director Older People in July 2000 will mean that services for Older People will be managed within a specialist management structure. Recent restructuring of specialist operational teams should improve service delivery and partnership.

Older People with Mental Health Problems

The new Buckinghamshire Mental Health Trust has adopted as a priority the opportunity to develop services for older people with mental health problems.

Best Value Root and Branch Review

A best value review of Older Peoples services is due to start in June 2001 and to be completed in January 2002.

The review of specific issues arising from this review will start in April 2002 and report in November.

Housing initiatives for Older People

The main priority is to develop Extra Care supported housing as an alternative to residential care. Discussions are underway with District Councils and key housing associations to consider development opportunities. Current developments in relation to housing for older people include:

Heritage Care

The transfer of the 5 Resource Centres to an external provider **Heritage Care** will mean the opportunity to redevelop services. In partnership with English Churches Housing Association, the redevelopment to meet the new government standards will include intermediate care and extra care units and a better physical environment for service users. Building work has already started at **The Croft**.

Heritage Care hope to provide 24 extra intermediate care beds and 36 extra care units this year. This will offer more people the opportunity for rehabilitation and recuperation following hospital admission or serious illness.

Abbeyfield

A new EMI unit is being planned at Bradbury House. It is hoped to start building next year. The 15 bed unit with a day care unit for use of the residents and the community should be opened in 2003.

Fremantle Trust

Fremantle Trust has plans to redevelop their care homes to meet **the 'Care Homes for Older People- national minimum standards'**. One such in the pipeline is:

Farnham Common House. In partnership with Buckinghamshire County Council, South Bucks District Council and Beacon Housing Association, Fremantle Trust have plans to demolish the old building and build a new state of the art purpose built 50 bedded Home. Facilities will be organised around small group living communities within the Home with large single rooms and en-suite facilities for all the residents. There will also be facilities for dementia care. It is hoped the new home will be completed within the next four years.

Licensed Victuallers

The Licensed Victuallers Nursing Home, a Royal Charter Home in Denham, in partnership with the Anchor Housing Association is planning a major redevelopment programme over the next six years to provide Sheltered Housing on site as well as the current Nursing and Residential care Home provision.

New sheltered housing Beaconsfield

14 flats with a warden on site are planned for this new sheltered housing development in Beaconsfield. Development is expected to start in 2002.

Costs of care services for Older People, including Older People's Mental Health

The net expenditure by social services in Bucks per head of population for people over 65 in 2000/01 was 65.88. This compared to the top group or quartile of other County councils of 78.83. The target for 2001/02 for Bucks is an increase to 68.15.

	Gross Expenditure £1000	Income £1000	Budget for 2001/02 £1000
Support Costs	3,115	-121	2,994
Residential Care	14,677	-7,846	6,831
Nursing Care	11,301	-5,249	6,052
Day Care	2,079	-589	1,490
Support at Home ñ Home Care	14,332	-3,358	10,974
Support at Home ñ Other	1,318	-939	380
Total Services for Older People	46,822	-18,102	28,720

Care Service Savings

Buckinghamshire County Council currently spends 20.6% more on Social Services than the amount Central Government calculates is required (the Standard Spending Assessment or SSA). Because the Council must live within its means next year and over the medium term, all budget managers have been asked to deliver 2% efficiency savings.

Area of Saving	Impact
Rationalise Day Centre provision	Review Day Centres as recommended in Root and Branch Review. This is likely to involve the closure of one or two centres as well as developing more relevant services at other centres to meet current care needs.
Domiciliary care	Better control of budgets including better links between budgets for internal provision and external purchasing. Improving information management and recording systems and processes. This saving assumes that the number of new clients remains at the current level, but the number of clients ceasing to receive a service increases from the current level. This will need careful monitoring.
Residential and Nursing Care	<ol style="list-style-type: none"> 1. Reduce the number of residential placements during 2001/02. This reflects the impact of intermediate care schemes and other 'modernisation' initiatives that help people to remain in their own homes. 2. This reduction assumes that the number of new nursing care placements each month remains as in the current year, but that the number of clients leaving the service (dying) increases over the average seen so far in the current year. This will need careful monitoring. The current waiting list for placements will not be reduced.
Review of arrangements for the provision of Meals	Volumes are dropping with consequential increases in unit costs. This leads to the need to review provision and contracting arrangements. A best value review starts in January. (Some home care time has already been successfully freed up by the introduction of a 7-day service from Slough).

Community Care Plan 2001 - 2005


Area of Saving	Impact
Minor works- cash freeze on non pay budgets	Reduction in non pay budgets in real terms which will need to be managed
Review charges for non residential care services	Savings shown are based on an increase of 4% and includes all client groups.
Additional income generation based on the ability to pay	A review of the charging policy to reflect ability to pay. This proposal would be subject to consultation
Domiciliary Care	<ol style="list-style-type: none">1. The introduction of épatchí contracts, which will reduce the proportion of clients supported by more than one provider and reduce costs.2. Reduction in the size of new domiciliary packages

For more information about:

Service plans for older people please

Contact Dwina Wheatley  01296 395000

For other organisations that can help:

 **01296 382935 and ask for a copy of
Help at Hand - the Directory of Adult Care Services.**

Service Plans for People with a Learning Disability

Who are the services for?

Services are provided on the basis of an individual assessment to adults with learning disabilities.

The Council will organise services aimed at promoting people's independence through the ability to make choices, take acceptable risks and fulfil a social role. It will also work to raise awareness in the community of the abilities and needs of people with learning disabilities to play their part in the community, and challenge discrimination

In the next four years people with a learning disability will see:

1. Partnership with service users, their advocates and carers fully established as the basis for planning and delivering services

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
% of main planning groups and whole service reviews where service users and carers actively participate	Service users and carers have been involved in 8% planning and service review groups. Involvement has also been established in <ul style="list-style-type: none"> • LD Joint Planning Group/ projects • Supported living • Community Team (CTPLD) developments • Leadership for change • Joint Investment Plans • Learning Disability Consultation Group - representation extended to service users. 	100% of significant groups and reviews by 2004/5	SSD Users Carers Advocates Health Housing

2. All service users having a person centred plan

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of people who have Person Centred Plan (PCP)	PCP in place for all people within Current Manor House. reprovisioning programme and LD day services. Targets in place for people in employment & using education.	100% of client group receiving services following a PCP	SSD Education Housing
% of reviews in PCP format	New measure		
% of people receiving a statement of their needs and how they will be met (BVPI* 58)	New measure method now in place	90% will receive a statement of needs	

3. Improved access to education and employment

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of employment or college opportunities for people with a learning disability following an assessment by SSD	New measure	reviews by 2004/5	SSD Education

4. Increased availability and flexibility of short term breaks and other supports for carers, e.g. domiciliary care, crossroads care, etc to increase life choices

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of short term breaks used (funded from Carers Grant)	Number of individual rooms at Seeleys respite care increased to 12 beds and staffing levels increased.	All carers will have access to support following assessment	SSD
Number of residential respite nights used	Baseline for LD to be established		SSD

5. An increased range of accommodation choices available in Buckinghamshire to support a range of lifestyles.

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of new living arrangements set up - residential care, supported living, own tenancies	Supported Living project begun. Users identified for pilot projects. Information being developed.	30% of care arrangements to be made in new provisions or user's own home. Review in 2004/5	SSD Health Housing
People with LD helped to live at home	Baseline for LD to be established		SSD Health Housing
People with LD supported in residential care per 1000 people (AC*- C3)	Current number of people supported is 295		SSD

6. Single point of access to services for people with LD and their carers through development of joint Community Teams (CTPLD), integrated services and joint commissioning within a pooled budget.

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Outcome achieved	Project development plan completed and development programme established subject to new national guidance as part of LD White Paper on Community teams.	The development of integrated health and social care teams across the County implemented in 2002 resulting in User and Carer satisfaction with a single point of access to services	SSD Health

Outcome 7 and 8 will be further developed after 2001. Measures have been changed to be more specific and measurable. The National Strategy for Learning Disability will bring new expectations of outcomes measures and targets.

7. Prompt and professional assessments and reviews of care needs

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Files audited by managers to ensure high standard	Monitoring systems currently being implemented to measure this		SSD
Number of reviews (BVPI* 55)	Reviewing officer appointed and has completed reviews of most res. care placements		

8. Reduce residential and nursing home placements as needs change

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of reviews	Increased emphasis on carers supports, supported living and community support		SSD Health Housing
	Reviewing officer appointed and has completed reviews of most res. care placements		SSD

* See glossary page 83

For more information about performance indicators see page 24.

Current Issues

The Learning Disability White Paper

The Learning Disability White Paper was published in March 2001 and called '**Valuing People**'. It is the first White Paper on learning disability for thirty years and sets out an ambitious and challenging programme of action for improving services. The proposals are based on four principles

- Civil rights.
- Independence.
- Choice.
- Inclusion.

Learning Disability Joint Investment Plan

How services are delivered for people with learning disability will be significantly altered by the development of integrated health and social care services led by Social Services. Central to the Joint Investment Plan is the principle that people who have a learning disability are people first and services are delivered in a **Person Centred Way** - that is it supports the principles of an 'Ordinary Life' promoting Rights, Independence, Choice and Inclusion.

Key Action areas have been identified for the development of the Joint Investment Plan with identified priorities:

- Planning for life.
- A place to live.
- Education and Employment.
- Family Carers.
- Community Support.

PATH (Planning Alternative Tomorrows with Home).

Funding has been secured for the development of a Partners and Policymaking course for Buckinghamshire in partnership with the National Development Team.

Cultural Life Service

Partnership funding for a further two years is helping to support this scheme which is aimed at promoting the equality of opportunity for adult Asian women with learning disability living in the Aylesbury area. The service at present runs for two days a week at the Cultural Centre in Aylesbury and is hoping to develop in the future.

BASE scheme

People with learning disability will significantly benefit from the Welfare to Work initiatives and from the new employment service provided by the BASE scheme (see page 71).

User and carer involvement

Providing appropriate care for people of all ages with learning disability, using a Person-Centred Planning approach will continue to challenge current ways of providing services. In addition, current service users and their carers, supported by **'Nothing about us without us'**, a report from the Learning Disability Service Users Advisory Group, are increasingly influencing how services become more responsive to individual needs.

Access to general services

The new integrated services will aim to be more responsive to people who have challenging behaviour and to ensure that people with learning disability have improved access to general services in the community e.g. health care, educational and social opportunities.

Best Value Review

A Best Value Review, Working with Health, is due to report in June 2001.

Learning Disabilities Planning Register and Planning Database for Children with Disabilities

The Buckinghamshire Learning Disabilities Planning Register

The Register, a joint financed resource, based in Social Services, holds details of adults in Buckinghamshire with learning disabilities including details about their accommodation, occupation, respite care, health, mobility, sensory impairments, mental health and the carer.

People are under no obligation to register but are asked to do so if they are using a service for people with learning disabilities or are likely to use such a service in the future. This is so that service planners and commissioners in Social Services, Health, Education and voluntary organisations can build up a more complete picture of current service use and future requirements. It is estimated that around 80% of those in Buckinghamshire with moderate, severe or profound learning disabilities are known to the Planning Register.

Planning Database for Children with Disabilities

In February 2001 the Planning Database for Children with Disabilities was established. It is a statutory requirement under the Children Act that Social Services should hold such a database, which includes children with learning disabilities, physical disabilities, sensory impairments, severe behavioural/ emotional difficulties, psychiatric illness or chronic ill health. As with the Learning Disabilities Planning Register, registration is voluntary. The aim is to develop a resource, which is multi-agency and owned by families of children with disabilities.

Housing Initiatives for People with a Learning Disability 2001-2005

Manor House

The re-provision of Manor House in Aylesbury is well underway. 93 people with learning disabilities currently living there are being resettled into supported housing in the community.

Some people will live in small registered care homes, others will have their own tenancies with support packages tailored to their needs.

The three providers involved in developing these services are **Hightown Praetorian Housing Association, Choice Support, and Turnstone Support.**

A number of properties have been purchased and are in the process of being refurbished. It is anticipated that all Manor House residents will be settled into their new homes by the end of this year.

Other housing initiatives

Other housing initiatives include:

- Development of supported living options.
- Redevelopment of a residential service for people with autism.
- Redevelopment of Oaklands hostel in Aylesbury.
- Unstaffed group homes ñ developing more flexible options, e.g. self-contained accommodation.

Costs of Care Services for People with a Learning Disability

	Gross Expenditure £i000	Income £i000	Budget for 2001/02 £i000
Support Costs	559	-50	509
Residential Care	11,561	-3,954	7,607
Day Care	5,128	-934	4,194
Support at Home ñ Home Care	343	-68	275
Support at Home ñ Other	360	-282	78
European Social Fund Scheme	313	-263	50
Joint Finance Funded Schemes	304	-167	138
Old Care in the Community Funded Schemes	94	-603	-509
Total	18,663	-6,321	12,342

Learning Disability Service Savings


Buckinghamshire County Council currently spends 20.6% more on Social Services than the amount Central Government calculates is required (the Standard Spending Assessment or SSA). Because the Council must live within its means next year and over the medium term, all budget managers have been asked to deliver 2% efficiency savings.

Area of saving	Impact
No inflation on grants to voluntary organisations	No impact
Total of minor savings identified over a large number of budget headings	No impact
Minor works - cash freeze on non-pay budgets	Reduction in non-pay budgets in real terms which will need to be managed
Income Generation	
Review charges for non residential care services.	Savings shown are based on an increase of 4%, and includes all client groups
Other income	From the Education service re: the use of the Endeavour Centre
Development of Person Centred Planning	Reallocation of resources to Education and employment opportunities, by managed reduction of staffing at Day Centres
	Further savings to be identified across all adult disability services
More efficient transport arrangements, including staggered start times for Day Centres. Using transport more flexibly, reducing costs and journey times by linking with other transport e.g. home to school	
Review costs of individual residential care placements, by commissioning in different ways. Part of the Best Value Review, assess possible savings from residential care costs by commissioning in different ways	
Improved usage and income management for block purchased respite care	

For more information about outcomes and targets for people with a learning disability please contact:

Neil Fillingham  01296 382045

Other organisations that can help please:

 **01296 382935 and ask for a copy of Help at Hand - the Directory of Adult Care Services.**

Mental Health Service Plans

Who are the services for?

The services are for local people, under the age of 65 with mental health care needs as a result of severe and enduring mental illness, their carers and communities. The aim is that they should be supported to live as independently as possible and make choices about their lives. This has to take into account their own safety and well being and that of their carers and other members of the community.

For services for Older People with mental health care needs please refer to service plans for Older People.

In the next four years people with mental health care needs will see:

- 1. Improved crisis response through the provision of 24 hour access to care available equally across the County**

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Emergency psychiatric readmission rate (AC*-A6) (shared PI with NHS)	13.4 % Dedicated mental health telephone helpline SANELINE in place, providing quarterly information to support service planning. No funding for additional services currently available.	12.8	SSD Health

- 2. Assertive outreach services developed that seek out vulnerable people who find it hard to stick with care and treatment they need**

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of assertive outreach teams in place	Housing support workers in CMHT providing outreach to users in housing need. Revolving Doors project expanded to those with dual diagnosis and in contact with criminal justice system. Limited progress made in establishing multi agency outreach services	2	Health SSD Housing
% of service users on enhanced CPA and at risk of losing contact getting an assertive outreach service (NSF)	Base line being established	100%	Health SSD
Emergency Psychiatric readmission rate	13.4%	12.8%	SSD Health

3. Increased integration of health and social services so that people with severe and enduring mental health problems and their carers can get access to a range of services through a single route- Community Mental Health Teams - (CMHT)

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
% of SSD mental health care managers working in health and social care teams managed by a single manager	14% Multi agency project has developed recommendations for integrating assessment procedures and management arrangements between health and social care to be implemented by the Mental Health Trust and Social Services 2001/02	100%	SSD Health
Extent to which effective joint commissioning of mental health services is in place.	Plans to establish joint commissioning agreed	Joint commissioning of services with pooled budgets in place	SSD Health

4. A safe, timely service with adequate numbers of trained staff, qualified and unqualified

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of clients on CPA with care programme	91%	100%	SSD Health
Unit cost of residential and nursing care for people with mental illness understood in the context of Bucks County Council (AC*-B15)	367	385	
Admissions of supported residents aged 18-65 to residential/ nursing care AC*-C3	April-July 2000 = 8		
Admissions of supported residents aged 65 and over to residential/ nursing care AC*-C3			
% of Adults with mental health problems helped to live at home (AC*-C31)	1.9 increase in number of residential placements for dual diagnosis in the Wycombe area suggesting work needs to be done to develop a broader range of services	2.5	SSD Health Housing
Intensive home care as a proportion of intensive home and residential care (across client groups)	18.7		SSD
% of staff working in social care who have completed core skills mental health training	Mental Health trainer appointed to manage a pooled budget for training. Honorariums for ASW's awarded	90%	SSD Health

5. Carers of people with severe and enduring mental health problems are well supported in their caring roles

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Users/carers who said they got help quickly	Baseline to be established Carers Education and Support Programme commissioned. Links with GP Project to identify unknown carers and offer support.		SSD
Number of carer assessments undertaken (AC*-D42)	Recording of carers and carers assessments started June 2000		
Number of short -term breaks offered	Baseline to be established		

Outcome 6 is for 2000/01 only. The measure has now been incorporated into Outcome 3

6. All services can demonstrate how they respond to specific requirements expressed by users.

How it will be Measured	Progress in 2000/01	Partners with users and carers
	Dedicated mental health advocacy services now in place across the County. User focused monitoring of services developed and funded by SSD	SSD Vol Orgs

* see glossary page 83

For more information about performance indicators see page 24.

Current Issues

Buckinghamshire Mental Health Trust

How the Council delivers mental health services will be substantially altered during 2001/02 with the creation of an integrated health and social care Mental Health Trust for Buckinghamshire on the 1st of April 2002.

This development is consistent with the NHS National Plan and the Mental Health National Service Framework. The Council will need to ensure that appropriate governance and management arrangements are in place to enable the delegation of local authority functions to the Mental Health Trust.

National Service Framework for Mental Health Services

A Joint Investment Plan and accompanying action plan has been drawn up to deliver the seven standards within the NSF. Key areas of the Action Plan are:

- Integration of care programme approach and care management and health and social care teams.
- Development of Assertive Outreach service.
- Reshaping community support services to provide more flexible, integrated services.

- Developing services for carers of people with a mental illness including short breaks, education and support and carers assessments.
- Developing joint health and social care health information systems.
- Investing in staff training and initiatives to support the recruitment and retention of staff.
- Developing joint commissioning for mental health services.

Welfare to Work

The Welfare to Work initiative and the Buckinghamshire Association for Supported Employment (BASE) local employment scheme will impact on mental health service users who will have increased opportunity to obtain employment.

Best Value Root and Branch Review

A Best Value review of mental health services is currently being undertaken. This review due to be completed by May 2001, has been deferred until new working arrangements are in place.

Housing Initiatives for People with Mental Health Difficulties

Floating support service

The Connections floating support service was established in June 2000, to assist people with a range of needs to maintain their tenancies. Connection has recently received Partnership Development Fund monies, to further develop services to people with mental health problems.

Alternative housing initiatives

Recent locality profiling work indicates Bucks has a higher than average provision of nursing/long stay beds. This suggests potential for the development of alternative options to 24 hour nursing care.

Similarly there is a need to increase access to individual supported tenancies, as an alternative to shared group home accommodation.

Costs of Mental Health Care Services

	Gross Expenditure £i000	Income £i000	Budget for 2001/02 £i000
Support Costs	1,173	-5	1,168
Residential Care	2,556	-673	1,883
Nursing Care	567	-328	239
Day Care	725	-26	699
Support at Home ñ Home Care	158	-3	155
Support at Home ñ Other	722	-152	621
Joint Finance Funded Schemes	103	-12	91
Old Care in the Community Funded Schemes	95	-560	-464
Mental Illness Specific Grant (70%)		-368	-368
Mental Health Grant (100%)	82	-348	-266
Specific Grants from DoH (Drug Misusers, HIV/ AIDS)	86	-64	22
TOTAL COSTS	6,318	-2,539	3,779

Mental Health Service Savings

Buckinghamshire County Council currently spends 20.6% more on Social Services than the amount Central Government calculates is required (the Standard Spending Assessment or SSA). Because the Council must live within its means next year and over the medium term, all budget managers have been asked to deliver 2% efficiency savings.


Area of saving	Impact
Cash freeze grants to voluntary sector	Current services may not be able to be maintained
Total of minor savings identified over a large number of budget headings	No impact
Minor works- cash freeze on non-pay budgets	Reduction in non pay budgets in real terms which will need to be managed.
Other savings reductions	
Reduce placements for drug and alcohol services from 2 per month to 1.5 per month	Increased demand in the current year and will result in a waiting list. Will impact on PAF performance.
Review Day Care Services, including developing a shared resource with Health where appropriate	Reduction in choice of Day Care placements
Review of community support and Group Homes	A planned review of community support. Will reduce voids in Group Homes and re-target community support to people with highest need. People with lower need may not receive a service

**For more information about:
outcomes and targets for people with mental health needs contact:**

Judith Burton  **01494 732124**

National Service Framework for Mental Health contact

Kate Kennally  **01494 475044**

For more information about other organisations that can help  **01296 382935** for a copy of 'Help at Hand' - the Directory of Adult Care Services.

Service Plans for People with a Physical Disability

Who are the Services for?

The services are for people with a physical disability, including people with sensory impairments, brain injury or living with HIV.

In the next four years people with a physical disability will see:

- 1. Consultation and Participation - A more powerful voice for people with a physical disability in Buckinghamshire as the basis for developing services user participation in the development of an agreed joint strategy with all the relevant statutory agencies as the basis for joint action to deliver a range of services**

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
% of main planning groups where service users actively participate	User group being developed through physical disability resource centre	Two workshops to have been held in 2002 : Ensured local consultation process is in place	SSD Health Housing
	Physical Disability strategy group formed, progress delayed by reconfiguration of Health and Social Services and personnel changes	To have produced and agreed a Joint Strategy in 2002 Planning groups Identified in 2002 pertinent to PD issues	
Number of service users involved		2002 level of representation as baseline to set target for participation level People with a wide range of disabilities participating in service planning and mentoring	SSD

Outcome 2 - User needs better identified (outcome 10 2000)

Prompt and professional assessments and review of care needs involving service users to identify changing individual need, provide access to appropriate services or identify gaps in service to inform planning. User needs better identified and updated

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
% of people receiving a statement of their needs and how they will be met (BVPI* 58, AC*-D39)	Service users are receiving regular reviews. Systems to aggregate information being developed. Baseline for physical disability to be established	100% of users have an annual review	SSD
		Improved joint information and comprehensive register developed in 2002 to collect data about unmet need and service deficit used routinely to monitor and develop more appropriate services	
Improved joint information including a more comprehensive registers that service needs can be better predicted	Number registered between April- July 2000: Blind 122; Deaf 0; Disabled 19.		

Outcome 3 - Improved range of services (Outcome 4 2000)

Improved range of services, day, respite and residential, that respond to users' expressed wishes to live in the community

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Adults with physical disabilities helped to live at home (AC*-C29)	Brain injury strategy group has met with user representatives to identify gaps in the strategy and to identify future stages of implementation relative to identified service need. The supported employment scheme (BASE) will include people with PD among the 150 people participating each year.		SSD Health Housing

Outcome 4 - new patterns of care (Outcome 7 2000)

Increased use of new patterns of care that enable people with physical disabilities to regain their independence

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of people accessing employment opportunities	Intensive rehab only relevant to traumatic disability e.g. road traffic accident. Number of households receiving intensive care is increasing Baseline for Physical Disability to be established	Education and employment opportunities widely available for people with physical disabilities	SSD Health Housing
Number of people on Direct Payments		100% of people assessed as able to manage Direct Payments are offered them	SSD

Outcome 5 - short term breaks (Outcome 8 2000)

Increased availability and flexibility of appropriate short term breaks and other supports for carers e.g. domiciliary care, crossroads care, etc, to increase their life choices.

How it will be Measured	Progress in 2000/01	Target 2004/5	Partners with users and carers
Number of people accessing short term breaks	New services for carers, provided by Crossroads, and through care management assessment	All carers will have access to support following assessment	SSD Vol Orgs

The remaining outcome measures have been incorporated into the 2001-2005 measures

	Progress in 2000/01
Increased responsiveness to requests from people with physical disabilities for early preventative help to maintain their independence	To March 2000 Buckinghamshire Association for the Blind (BAB) carried out 1626 telephone assessments of which 120 were referred for a Rehab. Officer to visit and 70 referred to a volunteer visitor
Maintain the quality of services organised for clients	Approx. 81% of packages of care for people with physical disabilities as of July 2000 were provided by a single provider. A higher proportion of people now require 24 hour care which cannot always be provided by a single provider
Reduce residential and nursing placements as needs change	Availability of care staff to meet the complex needs of people with severe physical disability has reduced the capacity to maintain some people in the community.

* see glossary page 83

For more information about performance indicators see page 24.

Current Issues

Disability Discrimination Act

How the Council delivers services for people with physical disability will be influenced by the new expectations contained in the Disability Discrimination Act and the Welfare to Work policy.

These will focus on the rights of people with disability to receive support to access services and to obtain work.

These are likely to bring additional costs and to influence the priority given to younger people with physical disability.

There are significant costs incurred in providing appropriate care to meet the special needs of younger people with severe disability.

BASE

The target for the years 2001/2 is the full take up of places available to people with a physical disability on the Buckinghamshire Agency for Supported Employment (BASE).

Human Rights Act

New expectations within the Human Rights Act will give more rights to service users who consider that services are not appropriate.

Integrated Care Trusts

Council services will also be affected by the proposals in the NHS plan for integrated Care Trusts and the changes within primary and secondary care.

Best Value Root and Branch review

This review is due to start in 2002.

Housing Initiatives for People with Physical Disabilities 2001-2005

Adapted property initiatives

Some initial work has been undertaken to consider cross district nominations for adapted property.

Buckinghamshire is currently considering the use of a planning model for assessing the housing and support needs of wheelchair users.

Disabled Facilities grants

There are a range of specified situations for which a **Disabled Facilities Grant** is available to provide aids and adaptations in the homes of people with disabilities. Grants are means tested and are provided by the District Council.


Costs of Social Care Services for People with Physical Disabilities


Social Services	Gross Expenditure£i000	Income£i000	Budget for 2001/02£i000
Support Costs	654		654
Residential Care	1,846	-874	973
Nursing Care	1,889	-935	953
Day Care	364	-12	352
Support at Home ñ Home Care	3,047	-928	2,119
Support at Home ñ Other	1,230	-153	1,076
Joint Finance Funded Schemes	65	-37	27
Total	9,095	-2,940	6,155

Physical Disability Service Savings

Buckinghamshire County Council currently spends 20.6% more on Social Services than the amount Central Government calculates is required, (the Standard Spending Assessment or SSA). Because the Council must live within its means next year and over the medium term, all budget managers have been asked to deliver 2% efficiency savings.

Area of Saving	Impact
Total of small savings identified over a large number of budgets	No impact
ILF Budgets - reduce budget to reflect forecast outturn	No impact
No inflation on grants to voluntary organisations	May lead to some providers being unable to continue to provide services to the same level
Review charges for non residential care services	Savings shown are based on an increase of 4% and includes all client groups
Aids and adaptations	Indications are that government grant will be available to fund additional spending in this area

For more information about outcomes and targets for people with physical disabilities contact: Beryl Ramsey  01494 475000

For more information about other organisations that can help  01296 382935 and ask for a copy of Help at Hand - the Directory of Adult Care Services.

Helping Vulnerable Adults and Older People Remain Independent and in Their Own Homes

Supporting People

Supporting People is a new central government programme which is to be introduced in April 2003. The programme is designed to complement existing care services by providing and improving housing related support services.

The aim is to address the present, fragmented funding situation and provide a more systematic approach to the assessment of need and the provision of flexible services to meet that need. This will be facilitated by bringing together a number of existing funding streams into one Supporting People budget and will not, therefore, involve the provision of any new money.

In Buckinghamshire, work has started in preparation for the implementation of Supporting People. A Core Strategy Group has been established, including representation from Social Services, the four District Councils, Probation, the Health Authority, and two housing providers.

Funding is available from DETR to set up a small Supporting People team to undertake the detailed work required over the next 2 ñ 3 years. The recruitment process for this team is underway. Part of the work of the team will be to establish communication systems to ensure information on progress is shared as widely as possible. The budget will be administered at County level in Buckinghamshire, through a partnership involving the County Council, District Councils, Probation and Health Services.

Typical examples of the kind of service that will be covered by **Supporting People** are:

- Resident Warden services for older people
- Community alarm services
- Floating support services
- Supported Housing schemes for a range of client groups including people with learning disabilities, physical disabilities, mental health problems, vulnerable single homeless, and ex-offenders.

Young People at Risk or Leaving Care

Priority areas for development include young people leaving care and teenage mothers. Leaving care workers are now in place in Social Services, and have linked up with a local housing association to establish some clients in tenancies with appropriate support. A Countywide joint protocol between housing and social services has been set up with regard to 16 and 17 year olds. This provides the basis for joint working, although its

success has been limited by resource constraints. Further discussion is planned with District Councils and other agencies to consider opportunities to expand provision for this client group.

District Council initiatives to help vulnerable people remain independent

Scheme	Aylesbury Contact	Chiltern Contact	South Bucks Contact	Wycombe Contact
Access Guide	Madeleine Howe 01296 585458	M. Butler 01494 729000	Roger Paine 01753 676211	Alan Switalski 01494 421438
Alarm services	Steve Tredwell 01296 585465	A. Blaik 01494 732012	Aid Call 01753 511241	Community Call Service 01494 421667
Disabled Arts	Dan Clucas 01296 585206	David Gardener 01494 732056	Leisure Section 01753 748347	Jayne Bradley 01494 421887
Grants to repair or improve private housing.	Martyn Chuter 01296 585605	Martin Holt 01494 732056	Steven McDonagh 01753 748308	Keith Goldham 01494 421705
Handy man/ van scheme for simple repairs, including home security and safety work carried out by reliable trades people.	Martyn Chuter 01296 585605	Martin Holt 01494 732056	Pete Squires 01753 748310	Help the Aged Handy van scheme 01255 473999
Better Homes = Better Health provides assessment of need and targets assistance	Martyn Chuter 01296 585605	Martin Holt 01494 732056	Pete Squires 01753 748310	Keith Coldham 01494 421609
Home Repair Assistance for vulnerable people to help them to live comfortably in their own homes, and undertake essential repairs.	Martyn Chuter 01296 585605	Martin Holt 01494 732056	Steven McDonagh 01753 748308	Harry Quarrell 01494 421738
Leisure facilities for disabled people	Ian Barham 01296 585185	Tom Clitheroe 01494 732200	Hamish Pringle 01753 676215	Paul Marston-Weston 01494 421804
Provision of concessionary bus fare passes .	Lesley Yates 01296 585655	Jean Templeton 01494 732252	Reception 01753 533333	Jill Haines 01494 421232
Dial-a-Ride scheme	Co-Ordinator 01296 330088	Co-Ordinator 01494 778400	Co-Ordinator 01753 676223	Co-Ordinator 01494 441818
Staying Put scheme which helps people to remain in their own homes.	Martyn Chuter 01296 585605	Martin Holt 01494 732056	No scheme at present in this area	Anchor Trust 01494 474295

Services for Carers

Probably about 90% of the care provided to people in Buckinghamshire is provided by family or friends. Social Services provide care to approximately 9,500 people. Of these people we estimate 70% have a carer. Social Services, Health and Housing recognise the need to support carers in their caring role and to talk and listen to carers to find out how services can be improved and developed to help them.

The National Carers Strategy - Caring for Carers

In 1999, in response to the national Strategy, community care agencies in Buckinghamshire developed a local 3-year Action Plan to improve services for carers. **The Carers and Disabled Children Act** came into force in April this year. The Act requires local authorities, among other things, to ensure that Direct Payments schemes include carers and parents of disabled children. The government has also asked local authorities to review their plans this year to take into account the extension of the carers grant (a further two years) and to offer the opportunity to review progress against the provisions of the new Act.

During 2001-2005 we will continue to:

- Make information about services for carers more accessible, including their right to an assessment of their own needs.
- Support carers by involving them in the assessment of the person they care for, and in the provision of any services arranged or provided.
- Support primary health care teams in their task of actively seeking to promote the wellbeing of carers by recognising their caring role, Making contact with unknown carers and ensuring that their needs as carers are addressed.
- Continue to ask the views of known carers and build on the information they give us.

We will continue to develop additional services or new services to let carers take a break from caring, using the Carers Grant.

The Carers Grant

The Carers Grant has been made available to provide short breaks for carers to help and support them in their caring role. This year the government has asked local authorities to take into account more formally the needs of parent carers of disabled children and young carers.

In 2001 a total of £398,933 has been made available in Buckinghamshire to provide short breaks. 75% of the money is to be spent on services for carers of adults, 20% on services for parent carers and young carers, leaving 5% to administer the grant.

Last year, 22 different initiatives for adult carers and 5 for parent and young carers, mainly provided by independent or voluntary organisations, were made available across the County to give carers a break and a total of 1043 carers were able to have a break.

All short break initiatives will be reviewed this year to make sure they are the breaks that carers want. Systems are in place to monitor expenditure, to measure the effectiveness of these projects and to ensure best value. A report is sent each year to the Department of Health outlining the progress made in Buckinghamshire in making short breaks available to more carers.

Carers Satisfaction Surveys

Carers satisfaction with services provided for them and the people they care for are monitored by social services in a number of ways. One is a satisfaction form that is sent out with each care plan following an assessment of need to those service users who are supported by a carer. A satisfaction form is also made available to carers to return about their experience of the short break service. Returning the form is voluntary and carers can choose to identify themselves on the forms. The information provided by carers in this way is taken into account in service planning considerations and in the provision of short break services.

For more information about short break opportunities, education courses, training, outings and other opportunities including relaxation classes and other therapy sessions for carers contact the local carers centres in Wycombe or Aylesbury.

Carers Centres in Buckinghamshire

Buckinghamshire has two Carers' Centres – one based in High Wycombe covering the south of the County and one based in Aylesbury for the north of the County.

The South Bucks Carers Centre,

Oakley Hall, 8, Castle Street High Wycombe, Bucks HP13 6RF

Contact: Patti Vincent,



01494 463536

The Aylesbury Vale Carers Association,

Rycote Place, 30/38 Cambridge Street, Aylesbury HP20 1RS

Contact: Jennie Lea,



01296 392711

Each centre has a small team of workers who provide information and advice and a range of activities to support a wide cross section of carers. In particular, both have dedicated posts to work with young carers and carers from ethnic minorities.

Development workers based in each of the two carers' centres visit GP surgeries regularly to provide ongoing support and information about services to staff and newly identified carers. They try to ensure that all carers are aware of their right to an assessment of their own need and to make their views about services currently being provided known through the assessment process, complaints procedures and other means.

Involving carers in strategic planning

To continue to ensure that carers are involved in the strategic planning and provision of services, the three Locality Forums who have links to specialist client groups have been set up to provide a local input into the strategic planning process. They are run by and are principally for users, carers and the voluntary sector. The locality forums are based in the Aylesbury, Chesham and Wycombe.

Please contact the Locality Forum Worker at:-

Aylesbury Vale Locality Forum,
Temple House,
Temple Square,
Aylesbury HP20 2QH
☎ 01296 338722

Chiltern and South
Bucks Locality Forum
c/o CVS, 150 High Street
Chesham HP5 1EF
☎ 01494 778644

Wycombe Locality Forum
Wycombe District Council
Queen Victoria Road
High Wycombe HP11 1BB
☎ 01494 421850

For more information about:

Buckinghamshire's Caring for Carers Action Plan Contact:

Joan Elliott, ☎ 01296 382615

Hedy Richards, ☎ 01296 382944

Other organisations that can help

☎ 01296 382935 and ask for a copy of

Help at Hand ñ the Directory of Adult Care Services

Services for Minority Ethnic Groups

Valuing Diversity ñ A New Policy Statement for the County Council

In 2000/2001, the County Council formally adopted its revised policy on promoting equal opportunities. It has adopted the title Valuing Diversity to emphasise its commitment to a more proactive commitment that promotes differences as positive and valuable and which enhance the quality of life of the community.

The Policy Statement

Buckinghamshire County Council is committed to achieving equality of opportunity as an employer of people, provider of services, educator and community leader. The Council places considerable emphasis on understanding, acceptance and appreciation of individual differences.

Response to the Stephen Lawrence Enquiry

The Action Plan developed by the County Council in 1999/2000 to respond to the Stephen Lawrence Enquiry has been extended to ensure that the County Council strives to improve its performance against the Commission for Racial Equality's (CRE) standards for local government. Current assessment suggests that the County Council has achieved level one and is making substantial progress through level two.

Each service within the County Council is required to implement an action plan to address the particular needs of its own staff and services. The Action Plan for Adult Care Services has three objectives:

- Ensuring that people from minority ethnic groups are involved in providing feedback and influencing the development of ethnically sensitive services.
- Improving information and access.
- Ensuring that staff are supported and able to respond appropriately to people from ethnic minorities.

Ensuring that People from Minority Ethnic Groups make their Views Known and Influence the Development of Ethnically Sensitive Services

The role of the Community Relations Forum is valuable in involving representatives of the ethnic minority communities in a regular meeting with County Councillors and senior managers.

The Racial Equality Councils (RECs) met with senior social service managers in the last 12 months and all who participated agreed that the detailed discussion has been invaluable. The RECs now have a representative on the Partnership Forum.

Ethnic monitoring of service users provides important information to enable feedback from people from ethnic minorities to inform service planning processes in a number of different ways. Complaints procedures are an important way that racial issues can be addressed. We have recruited complaints investigators from minority ethnic backgrounds to enable people to have more confidence in the system.

During 2001/2005

The programme of work will include:

- Regular and improved opportunities for people from ethnic minorities to be involved in planning services.
- This year there will be a half-day workshop involving social services managers, RECs and others who are very involved in working with the minority ethnic groups. It is likely that this could become a regular event.
- When the extent of recording of ethnicity is sufficient, analysis of this information will be undertaken within adult social care services to inform the planning process.
- A new system to enable people to identify racial incidents is being introduced throughout the County Council.

Improving Information and Access

In the last two years there have been successful information fairs in High Wycombe, Aylesbury and Chesham. Leaflets and videos are available in Asian languages.

During 2001/2005

- Training about ethnic monitoring is now an integral and regular part of the training programme and will continue.
- On the Bucks County Council website, information is being prepared about local and national resources which staff can contact when considering the particular needs of service users from ethnic minorities.
- The training strategy has a clear statement of expectation about how all trainers are expected to ensure that any training course demonstrate that it values diversity and is multi-cultural in its content and approach. This will be kept under review.
- A Black Workers Support Group is now established. In the near future, it is expected to clarify its aims and objectives. This will include consideration of how it raises issues with senior managers.
- The recruitment issues are being considered by human resources division.
- Four training days have been commissioned to help develop awareness for middle and front line managers of the Valuing Diversity Policy.

For more information about ethnic minority issues contact:

Lynne Ward,  01296 382504, Judith Burton,  01494 732124 or

Jeffrey Orange,  01494 475228

Racial Equality Councils: Aylesbury  01296 425334 Chesham  01494

778503, High Wycombe  01494 527616

For other organisations that can help  01296 382935 and ask for a copy of 'Help at Hand' in the Directory of Adult Care Services.

Advocacy Services

Advocacy is about supporting and if necessary representing individuals so that they can express their needs, influence decisions and gain increased choices by becoming more aware of and exercising their rights.

Advocacy Strategy

Last year we said we would develop a strategy to make sure that advocacy services were available for anyone who needed an advocate. We said:

- Standards were needed to ensure that advocates were properly trained and supervised.
- That training should be provided for advocates.
- That community care agencies should promote the value of advocacy to their staff and to users of services.

The strategy continues to be developed by a project group, with representatives from the statutory authorities, local agencies, voluntary organisations, and users and carers. In addition the strategy will be developed to take account of the development of PALs in NHS Trusts and the relationship between Pals and independent advocacy services.

Funding the Strategy

In June 2000 the Partnership Development Group (Health and Social Services joint funding) agreed a package of £95,000 per year over the next three years to deliver the advocacy strategy.

The investment would aim to:

- Increase the capacity in advocacy services for learning disability.
- Develop mental health advocacy.
- Implement the standards.
- Explore the potential for developing advocacy for ethnic minorities.
- Develop training programmes.

Advocacy Standards

The standards for advocacy developed by users themselves and called **Policy, Guidance, Principles and Standards for Advocacy** has now been published. The document has been endorsed by Health and Social Services, Housing Trusts and other agencies involved in providing advocacy and community care services.

Training





The project group has identified the first three priority areas for training. They are:

- Advocacy awareness training.
- Organisational development funding for independent advocacy services.
- Workshop on the role of professionals and independent advocacy services.

Minority Ethnic Groups Advocacy Research Project

Aylesbury Vale Advocates has undertaken a project looking at the needs of minority ethnic groups and advocacy. It has identified present need and how it could be met. The project reported at the end of March 2001 with recommendations.

Organisations that can provide Advocacy Services in Buckinghamshire

Aylesbury Vale Advocates	 01296 432313
Age Concern Buckinghamshire	 01296 431911
Peoples Voices	 01494 793143
Talkback	 01494 434448

For more information about the advocacy strategy contact:

Janice Campbell  **01296 382074, or**

Kate Kennally  **01494 475044**

For a copy of the advocacy standards contact:

Leaflet Line  **01296 382935**

Substance Misuse

Substance Misuse Reduction

Drug and alcohol misuse creates problems in many areas of the lives of people affected by it, including social and family relationships, health, finance, housing and welfare.

The full extent of illegal drug use is, by its nature, difficult to assess accurately. Most of the information we have relates to known service users. It is however, estimated that for every person known to use services, there are another ten at least hidden in the community. In the same way, it can be difficult to record accurately the numbers of people who misuse alcohol.

Services provided to those who misuse drugs and alcohol and those who care for them, have to take account of their particular circumstances and needs, and will often require the involvement of several different agencies.

Services within the County are provided through collaboration between Health, Social Services, District Councils, Police, Education, Probation and the Voluntary/Independent Sector.

These services include:

- Assessment and support
- Specialist care management services
- Advice and counselling
- Training education and information
- Prescribing services
- Community and residential detoxification

This is an important area of shared work between a whole range of involved and interested partner agencies.

Social Services is represented at Assistant Director level on the Drugs Action Team for the County and at Service Manager level on the Joint Commissioning Group.

Drugs Reference Groups for the range of substance misuse concerns cover the County and our front-line staff are fully involved in these.

Through these partnerships with Police, Voluntary Organisations, Education, we work to provide linked services that meet local need.

Within Social Services, we fund rehabilitation placements for people whose substance misuse poses serious risks to their own health or well-being or those of others. Our Probation partners and ACT (voluntary organisation) are developing structured Day activity. This was initially in response to Probation's responsibilities towards those on Drug Treatment and Testing Orders (DTTOs), but will also offer well-focussed day activity to Social Services' clients who do not need residential placement for rehabilitation.

We have two specialist care manager posts (one at each end of the County) who work with people with substance misuse problems which are often combined with mental health needs. They maintain strong links with Substance Misuse and Mental Health Services.

Housing initiatives

2001/2002 will see the development of other alternatives to residential rehabilitation placements using Department of Health funding, as well as the extension of structured day activity.

The tea warehouse direct access project in Wycombe opened in May 2001, and includes a number of beds for people with drug and alcohol problems.

Discussions are underway with a view to developing direct access provision in Aylesbury.

The Connection floating support service has widened the range of support available for drug and alcohol users.

For more information about substance misuse

Contact: Judith Burton  01494 732124

Vulnerable Adult Protection against Abuse

Buckinghamshire Vulnerable Adults Protection Forum

The Buckinghamshire Vulnerable Adults Protection Forum is responsible for developing and implementing policies, procedures and practices for the protection of vulnerable adults from abuse. It is also responsible for monitoring abuse and for providing the necessary training for staff.

It is a multi-agency forum which includes representatives from Buckinghamshire Social Services, Thames Valley Police, Probation, District Councils, Registration & Inspection units from Health and Social Services, NHS Trusts, Providers and Carer and User organisations.

The existing guidelines have been updated and re-launched in April 2001 as the 'Buckinghamshire Interagency Procedure for Adult Protection'. This was in response to the Department of Health's document entitled "No Secrets" (2000), which provides guidance on developing and implementing multi agency policies and procedures to protect vulnerable adults from abuse. The policy is a recognition by a number of agencies in Buckinghamshire that vulnerable people can be abused and is an agreement to work together to ensure their safety.

In addition to this the protocol between Buckinghamshire Social Services and Thames Valley Police has also been revised and is now entitled 'Joint Protocol for the Investigation of Adult Abuse'. It details the process for investigating allegations of abuse of vulnerable people.

The key documents that form the basis of the Forum's work are:


- Buckinghamshire Interagency Procedure for Adult Protection.
- Joint Protocol for Investigation of Adult Abuse.

The Forum organises staff training in abuse matters and also promotes the Buckinghamshire Social Services **freephone CARELINE (0800 137915)**. This enables callers to report any concerns about the mistreatment of vulnerable children and adults.

The Forum will continue to:

- raise awareness of abuse
- provide training
- develop joint working
- identify best practice
- improve policies, procedures and practices
- improve monitoring systems

Organisations that can help protect people from abuse:

Thames Valley Police, Family Protection Unit  01296 396936
Social Services Area Offices (see page74)

CARELINE  0800 137915

For more information about Vulnerable Adults Protection Forum contact:

Janice Campbell,  01296 382074, Bill Nicol  01296 395000

Life Long Learning: Education and Employment

Continuing Education and Social Services

Lifelong Learning Services work though out the community in Buckinghamshire with all ages and all community groups. All the services have targets within a range of statutory and non-statutory plans to help tackle social exclusion and the skill shortage. They also have a major role in helping to promote an improvement to the community's quality of life via the informal and formal education role.

The services provide:

- Libraries, Museums and Archives.
- Youth and Community Services.
- Continuing Education.

Lifelong learning has promoted:

- English as a second language provision.
- Working with disaffected young people via project work in communities and through contributions to Community Safety and Youth Offending teams.
- Books on Wheels and mobile library services to housebound readers and residential homes and Continuing Education services to those same establishments.
- Working with Adult Learning Disabilities.
- Maternity, health, fitness, parenting skills, drugs awareness and education, and many more courses and information are provided in many locations throughout the County.
- Leisure based learning activity based on the arts, sport and literature enabling individuals to take advantage of the many learning opportunities whatever their age, or personal restrictions.
- Skills based formal training to assist adult learners to move into work or change direction in their employment.
- Cascade based training for young people, teachers and other members of the community in e.g. drugs awareness and parenting skills. This enables them in turn to pass on their knowledge to other members of the community.
- A range of purpose built and mobile facilities reaching most communities.
- Significant information and advice provision to direct people to the right source of help and further advice on most issues of concern.

The Future

We will be working to:

- improve our accessibility to all community groups and to individuals by working with the support of partners.

We will do this to:

- improve the quality of life of individuals by providing the highest quality and range of services within the available resources.

The Welfare To Work Joint Investment Plan

The purpose of the JIP is to address ways in which health and local authorities, together with other relevant agencies will work together to improve opportunities for disabled people who wish to work, to take up or return to paid employment. The strategy for achieving this is based around four strands

- Providing active help and encouragement for people with disabilities to move into work
- Take obstacles to work out of the benefits system
- Making sure work pays
- Promoting radical change in the work place to ensure equality and opportunity

The Buckinghamshire Agency for Supported Employment (BASE)

The project, financed with the help of a £500,000 European Social Fund grant, sets out to match the needs of local employers with the skills of people between the ages of 17 to 65 who have physical, learning disabilities or mental health problems. Since the project began last July, BASE has helped 36 people to find paid employment. Clients are offered a variety of opportunities to help prepare them for paid employment, a further 96 people are now in preparatory training and education.

For more information about

Lifelong Learning Contact: John Whitter,  01296 383108

Welfare to Work Contact: Janice Campbell  01296 382074

BASE scheme Contact  01844 275797

Training the People who Provide Community Care

Staff Training

The Training needs of social care staff in Buckinghamshire County Council are part of the process of planning services. Training is provided to ensure staff are competent to deliver the required level of service and respond to the legal and policy requirements of both central government and the local community. This is part of the wider programme of development for all staff to effectively manage and deliver services for the County Council.

Funding is provided from a number of sources. The Department of Health gives grants for specific service areas e.g. mental health, and through a general training fund. There is also funding from a number of inter-agency groups, again for particular training e.g. prevention of abuse of vulnerable adults. Funding for training can also be provided from various partnerships, which are developed to meet the working closer together agenda. Any change in policy or legislation will have implications for training, and Buckinghamshire is committed to ensuring its workforce is developed and up to date with best practice. Key guidance for training will be from the following:

For Adults - Modernising Mental Health Services; The NHS Framework for Mental Health; The NHS Plan; The Mental Health Act White Paper; Learning Disability White Paper.

For Older People - Better Care, Higher Standards; Promoting Independence; Quality and Choice for Older People's Housing; The National Service Framework for Older People.

Qualified Staff



The Department of Health provides an annual grant to councils to provide training so that social care staff can acquire relevant qualifications and improve knowledge and skills necessary for them to deliver services to clients.

For certain categories of staff there will be a requirement in the future to be registered with the new **General Social Care Council**. The above qualification will be the first requirement for registration. The main priorities for qualifications are as follows:

- All domiciliary staff to be NVQ level 2 by 2006
- All residential child care workers to be at NVQ level 3 by 2005
- All foster carers to be given the opportunity to train to NVQ level 3
- All qualified children and families social workers (in all settings to hold the Child Care Post Qualifying Award by 2005).

Working and Training in Partnership

The inclusion of staff from partner agencies in the statutory, voluntary and independent sector in training activity will be actively promoted within the resources available.

For more information about staff training in Buckinghamshire Contact:
Kathleen Anne Began  01296 382186, John Graham  01296 382385

Voluntary Agency Contacts

Advocacy

Aylesbury Vale Advocates 01296 432313
 Peoples Voices 01494 793143
 Talkback 01494 434448

Age Concern

Buckinghamshire 01296 431911

Alcohol & Drug Dependency

Alcoholics Anonymous 07000 121200
 Addiction Counselling Trust ... 01494 461361

Alzheimers Society

Aylesbury..... 01296 712847
 High Wycombe..... 01494 530303

Blind & Partially Sighted

Bucks Association for the Blind
 Aylesbury..... 01296 487556

Carers Support

Aylesbury Vale Carers Centre.. 01296 392711
 South Bucks Carers Centre..... 01494 463530

Community Health Councils

Aylesbury Vale 01296 483222
 South Buckinghamshire..... 01494 445910

Depression

BAMH 01296 437328
 MIND..... 01494 448279

Disability

Independent Living..... 01296 398616

Hearing Impaired

RNID 01296 434839
 RNID Textphone 01296 436722

Heart Problems

British Heart Foundation..... 01763 242414

Hospital Transport

Chesham Voluntary Transport . 01494 785249
 Red Cross Voluntary Transport 01494 525361

Meal on Wheels

Local Social Services office..... see next page
 Dial a Shopper..... 01296 425873
 Wiltshire Foods 01296 682888

Red Cross

County Headquarters.....01494 525361/2/3

Rheumatism

Arthritis & Rheumatism Council 01246 558033
 Arthritis Care..... 01494 711033

Shopmobility

Aylesbury01296 336725
 Chesham01494 774842
 High Wycombe01494 472277
 Marlow01628 405218

Wheelchairs

Independent Living Foundation 01296 315066

For more information about other voluntary organisations in Buckinghamshire see iHelp at Handi Directory of Adult Care Services in Buckinghamshire, and Buckinghamshire County Council's web site www.Buckscc.gov.uk

Statutory Agency Contacts

Benefits Agency

Aylesbury.....	01296 314700
High Wycombe	01494 555200
Disabled line.....	0800 882200

Councils

Buckinghamshire County Council Social Services area offices:

Aylesbury Social Services	01296 395000
Amersham (Chiltern & South Bucks) Social Services...	01494 729000
Wycombe Social Services	01494 475000

Aylesbury Vale District Council	01296 585858
Chiltern District Council	01494 729000
South Bucks District Council.....	01753 533333
Wycombe District Council.....	01494 461000





Parking ñ Orange/Blue Badge Scheme

Buckinghamshire County Council.....	01296 382721
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Health

Buckinghamshire Health Authority.....	01296 310000
Buckinghamshire Mental Health NHS Trust	01296 393363
Chiltern South Bucks Primary Care Group	01494 794252
South Buckinghamshire NHS Trust.....	01494 526161
Vale of Aylesbury Primary Care Trust	01296 504200
Wycombe & Area Primary Care Group.....	01494 524761

Public Meetings

Stoke Mandeville Hospital NHS Trust,  01296 315000		
Date	Time	Venue
7 June	8 a.m.	Committee Room, Stoke Mandeville Hospital
5 July	8 a.m.	Committee Room, Stoke Mandeville Hospital
2 August	8 a.m.	Committee Room, Stoke Mandeville Hospital
6 Sept	8 a.m.	Committee Room, Stoke Mandeville Hospital
4 Oct	8 a.m.	Committee Room, Stoke Mandeville Hospital
1 Nov	8 a.m.	Committee Room, Stoke Mandeville Hospital
6 Dec	8 a.m.	Committee Room, Stoke Mandeville Hospital
South Bucks NHS Trust,  01494 526161		
Date	Time	Venue
25 July	9.30 a.m.	Education Centre, Amersham Hospital
26 Sept	9.30 a.m.	Education Centre, Wycombe Hospital
28 Nov	9.30 a.m.	Education Centre, Wycombe Hospital
Health Authority,  01296 310000		
Date	Time	Venue
27 June	10.30 a.m.	Board Room, Verney House
25 July	10.30 a.m.	Board Room, Verney House
26 Sept	10.30 a.m.	Board Room, Verney House
28 Nov	10.30 a.m.	Board Room, Verney House
Vale of Aylesbury PCT,  01296 504200		
Date	Time	Venue
12 July	9.00 a.m.	Lincoln House, Princes Risborough
9 Aug	9.00 a.m.	Committee Room, Manor House
13 Sept	9.00 a.m.	Rose Centre, Winslow
11 Oct	9.00 a.m.	Committee Room, Manor House
8 Nov	9.00 a.m.	Thame Barn Centre, Thame
13 Dec	9.00 a.m.	Committee Room, Manor House

Wycombe Area PCG, ☎ 01494 524761		
Date	Time	Venue
26 June	3pm ñ 6pm	Committee Room 3, Wycombe District Council
24 July	3pm ñ 6pm	Committee Room 3, Wycombe District Council
28 Aug	3pm ñ 6pm	Committee Room 3, Wycombe District Council
25 Sept	6pm ñ 9pm	Committee Room 3, Wycombe District Council
23 Oct	3pm ñ 6pm	Committee Room 3, Wycombe District Council
27 Nov	3pm ñ 6pm	Committee Room 3, Wycombe District Council
18 Dec	3pm ñ 6pm	Committee Room 3, Wycombe District Council
Chiltern & South Bucks PCG, ☎ 01494 732020		
Date	Time	Venue
21 June	7.00 p.m.	Chiltern District Council, Amersham
19 July	9.30 a.m.	Fitzwilliam Centre, Beaconsfield
29 Aug	1.00 p.m.	Chiltern District Council, Amersham
19 Sept	7.00 p.m.	Chiltern District Council, Amersham
18 Oct	9.30 a.m.	Room 1, Fitzwilliam Centre, Beaconsfield
21 Nov	1.00 a.m.	Chiltern District Council, Amersham
13 Dec	7.00 p.m.	To be announced
Aylesbury Vale Community Health Council, ☎ 01296 483222		
Date	Time	Venue
19 July	7.00 p.m.	St John Ambulance , Tindal Road, Aylesbury
18 Oct AGM	7.00 p.m.	St John Ambulance , Tindal Road, Aylesbury
15 Nov	7.00 p.m.	St John Ambulance , Tindal Road, Aylesbury
21 March 2002	7.00 p.m.	St John Ambulance , Tindal Road, Aylesbury
South Buckinghamshire Community Health Council, ☎ 01494 445910		
Date	Time	Venue
2 July AGM	2.30 p.m.	Bassetsbury Manor, High Wycombe
3 Sept	7.00 p.m.	St Andrews Church Hall, Stoke Poges
5 Nov	10.30 a.m.	Methodist Church Hall, Prestwood
Buckinghamshire Mental Health NHS Trust, ☎ 01296 504595		
19 Oct	10.00 a.m.	Venue to be arranged
16 Nov	10.00 a.m.	Venue to be arranged
14 Dec	10.00 a.m.	Venue to be arranged
18 Jan 2002	10.00 a.m.	Venue to be arranged

Appendix A: Comments on Last Year's Plan

Last summer service users and their carers were asked, through the local Locality Forums, what they wanted to see in the next Community Care Plan.

In all, about 350 people gave their views and comments. These views were taken into account during the HIMP consultations in the Autumn and a full report from all three localities was presented to the Director of Social Services in November 2000.

Comments on Services for Older People

- There is a need to do proper annual medical checks for individuals.
- Need for more residential places and a wider range of options for service users.
- Concern about the reduction of residential placements. Even if there are increased and better care at home arrangements, there will still be a need for residential places, with more opportunity for short term respite/rehabilitation programmes in a residential setting.
- More facilities for Drop-In services.
- Concern that the Intermediate Care services, available to all client groups will erode the services available to older people.
- More general housework, including gardening, is seen as a really useful support to the older person and to carers in general.
- Many elderly people are isolated and lack the stimulation of company and exercise.

Response to the comments

The National Service Framework (NSF) for Older People published in April this year has reaffirmed Buckinghamshire's ongoing commitment to providing person centred care for older people and their carers. That is the promotion of older people's health and independence and fitting services around people's needs. To illustrate this, Buckinghamshire appointed an Assistant Director for Older People last July and this Spring has provided more care manager posts for the older people's teams which will mean improvements in service delivery.

Concerns about reduction in residential provision have been taken on board. But it is also the case that some people are having to consider residential care because the opportunities for convalescence, or intermediate care, to let them recover to their maximum ability before returning home, have been too few. We want to ensure that older people are given a real choice about where and how they live and that means providing services that prevent unnecessary hospital admission and effective rehabilitation services to prevent premature or unnecessary admission to long term residential. Far from eroding intermediate care services for older people, we are expanding these services to fulfil the milestones outlined in the NSF for Older People.

The issues of housework and gardening are being seriously considered. Housework is already available as part of personal care packages to service users and their carers. The Carers and Disabled Children's Act will also give more

opportunities to provide these kinds of carer support services in the future. The Carers' Grant initiatives have also enabled some carers, those who are unable to get a short break in any other way, to get help with housework. The growing requests for help with gardening will be considered again this in the autumn.

Issues of isolation and loneliness are very real. Again, as part of the Older People's NSF, we are working more closely with colleagues in the District Councils and Health to get more and better information to older people about local opportunities available to them. We are also working with older people's representatives to look at how to develop the kinds of service, including 'drop-in' centres, that older people have identified they want. Unfortunately, all this work has to be done within resource limitations, which means choices have to be made about what we can afford to, and must do now and what may have to wait.

The Service Plans for Older People in this years Community Care Plan show how we are taking forward services over the next four years.

Comments on Services for People with a Learning Disability

- People with a learning disability do not have a high enough priority within the new health structures.
- Residential placements are still needed for people with a Learning Disability when age generally intends to increase their needs.
- Respite care provision is needed in Aylesbury as Seeley's is not always practical.

Response to the comments

On the first point, the health needs of people with Learning Disability are specifically commented on in the Learning Disability Joint Investment Plan, with special reference to:

- access to primary care services.
- access to specialist services.
- challenging behaviour.
- people with learning disabilities and other needs.
- people with Down's syndrome and dementia.

The National Strategy 'Valuing People' also has a specific focus on health needs of people with LD including both access to mainstream services and specialist services.

Learning Disability health service within the new Mental Health Trust is being undertaken for this year only whilst the new integrated service is developed.

On the second point about people needing alternative accommodation and support. We are now seeking to develop more opportunities for supported living for people but also acknowledge that this is only one option and there are a significant number of people who will require / have a preference for residential care. This is reflected both in 'Valuing People' and our own LD JIP.

Respite care provision is needed in Aylesbury as Seeley's is not always practical. It is acknowledged that the current residential respite provision is primarily focussed in the south of the County and not easily available to those people living

in the north. We are committed to reviewing the provision of respite care in its broadest sense with the target of a 10% increase in short-term breaks available over the next year.

Comments on Services for People with Physical Disabilities

- If residential care is being reduced, specialist respite care must be increased.
- More services are required to provide information for blind people.
- Signing services need to be available for more than just the initial hospital consultation.

Comments on Services for People with Mental Health Problems

- 24 hour access arrangements welcomed, but more out-of-hours service/drop-in services are needed for mentally ill people.
- AVDC must be signed up to provide suitable housing to meet the needs of mental health users. One additional property per annum for move on accommodation is not enough.
- More information about housing and residential provision is needed.
- What support is on offer for people who do not fall into the category of 'severe' or 'enduring' mental health needs that will prevent them from becoming so.
- Eating disorders should not be merged with mental health.
- Carers of mental health patients need more support.

Comments on Substance Misuse Services

- Should have separate entry within the Community Care Plan.
- Needs a designated service, a prevention service and special provision.
- When a family member is involved the needs of carers, especially young carers must be taken into account.

Comments on Services for Carers

- More care for carers is needed, by awareness raising in surgeries and social services, by identifying and meeting their needs.
- More respite care needs to be made available.
- Still not enough carers know about the 'short breaks' arrangements in Bucks.

Response to the comments

National Service Frameworks for all client groups and the aim of the Carers grant is to ensure that all eligible carers, and not just those in receipt of services from the statutory agencies, know about, and have access to organisations providing services under the terms of the grant. We are hoping to improve on our current performance over the next year with specific focus on:

- **Carers access support.**
- **Respite care.**
- **Needs of older carers.**
- **Improved information for family carers.**

Most of the new government guidance, including 'Valuing People' requires GPs to focus on early identification of needs of carers. We will continue to work with primary care colleagues through the Carer Centre GP project workers to identify hidden carers and offer information about carer services in the locale.

Last year 1284 carers received a short break service, we aim to increase that number by 30% in the next year.

Comments on Services for Minority Ethnic Groups

- Representation needs to include Community Leaders not just the REC's.
- Drop in Centres for elderly people from the Asian community are needed in Wycombe.
- More interpreter services like those offered by WDC to support ethnic minorities, including signing services are needed.
- Ethnic minority consultation does not seem to have resulted in any noticeable changes in service provision.
- Need for interpreting services to be easily available for hospital patients.

Response to the comments

Aylesbury Vale District Council also offer an interpreter service and services are also available through the ethnic health development worker based at Amersham hospital for hospital patients. The contact number is 01494 734160.

Contact 01494 445083 for signing services information for clients in Aylesbury and Wycombe.

Comments on Hospital Discharge Services

- Arrangements are often patchy and there are too many delayed discharges.
- There is not enough good co-ordination between agencies.
- Need to have more information about what is a delayed discharge and why it is happening.

Direct Payments

- What has happened to them?

This is an area of specific focus nationally. Valuing People makes specific reference to Direct Payments and guidelines are to be made available

Response to the comments

Please see page 20 of this document for current information about Direct Payments

Transport

- People who need services and have no personal transport are not able to access services.
- Available services not used to maximum effect.
- Dial-a-ride is not coping with the need.
- Perception that transport is being done on the cheap, relying on volunteers.
- Need for better co-ordination of transport as many buses remain unused for parts of the day.
- Lack of transport means there is reduced opportunities for socialising.

Response to the comments

The issue of transport received comment in the consultation with service users on our Learning Disability JIP and Best Value Review as being identified as that area which is most problematic for people. Specific areas identified:

- Spending long periods of time on the transport.
- Having to go via day-centres to access other activities.
- Inflexibility of transport services.
- Services are often unreliable.
- There are difficulties for people who have mobility problems particularly those who use wheelchairs.
- Particular difficulties in rural areas in regard to public transport.
- Public transport (inc. taxi services) insensitive to the needs of people with LD.

Information

- Need better information about services.
- Better targeted information is needed about service access for users/carers and between different agencies.

Response to the comments

Last year the planning committee brought together partner organisations to share financial responsibility and pool resources for a series of Community Information Fairs to raise awareness about community services on offer in the County. Two Fairs were held in Wycombe, one in Aylesbury and one in Chesham. We enjoyed collaboration with colleagues from the Aylesbury Vale District Council, Buckinghamshire Fire and Rescue Services, Aylesbury Vale Carers Association, Thames Valley Police and the Racial Equality Council, and Aylesbury Vale Health Trust. In the future organisations will invite each other, where appropriate, to provide information about themselves when holding similar information giving events.

BUCKINGHAMSHIRE'S campaign to raise the profile of Social Services with potential users received a special mention at the final awards ceremony of the national Social Services Information Network autumn conference.

Buckinghamshire's poster campaign, designed to draw attention to the help Social Services can offer if problems beset older people, caught the attention of the judges. The poster, carried on the back of Aylesbury buses, showed a couple with the caption: "Married for forty years. By the time of their golden wedding anniversary he will have forgotten her name."

Throughout the next four years we will continue to develop and improve the ways in which we try and give people the information they need, when they need it and in ways that are meaningful to them by:

- Encouraging GP surgeries to make use of information about services regularly sent to them by social services.
- Encouraging staff to provide appropriate information when contacting new clients or service enquirers

- **Ensure Council and District council offices, and libraries hold full and up to date information about services.**
- **Making up to date information available on the Internet.**

Consultation

- Does it really work? It is often too much too late; there needs to be more real involvement.

Response to the comments

The comments here are also reflected in the consultation on the LD JIP and Best Value Review ñ particularly from carers. Carers identified key areas for improvement, such as:


- **Better communication.**
- **Better information.**
- **Feedback from the consultation process ñ we want to know our views have made a difference.**
- **Please try and co-ordinate these consultations ñ we have consultation indigestion.**
- **Preference for face to face contact rather than endless questionnaires ñ people value the opportunity for discussion and support from others.**

Users: 150 users were canvassed on the LD JIP & Best Value Review consultation. They took interest and pleasure in being asked. They value the fact that their views are considered important.

District Councils

- Time scales for processing applications for grants, equipment, etc, would be welcome. The process is too lengthy.
- Budgets often run out, creating delays for handrails, etc.
- Handyman van schemes very welcome.

For more information about Locality Forums and how to contribute and comment, contact your local forum.

Aylesbury Vale contact: Bob Taylor  01296 338722

Chiltern and South Bucks contact: Janet Pring  01494 778644

Wycombe contact: Malcolm Bailey  01494 421850

Glossary

Glossary of Terms

AC	Audit Commission Indicator
AIDS	Acquired Immune Deficiency Syndrome
AVDC	Aylesbury Vale District Council
BAB	Buckinghamshire Association for the Blind
BASE	Buckinghamshire Agency for Supported Employment
BCC	Buckinghamshire County Council
BCCPI	Buckinghamshire County Council Performance Indicator
BHA	Buckinghamshire Health Authority
BMHT	Buckinghamshire Mental Health Trust
BVPI	Best Value Performance Indicator
C&F	Children and Families
CDC	Chiltern District Council
CRAG	Charges for Residential Accommodation Guide
CRE	Commission for Racial Equality
CTPLD	Community Teams for People with Learning Disabilities
CSDP	Chronically Sick and Disabled Persons
DETR	Department of Transport Local Government and the Regions
DTTO	Drug Treatment and Testing Orders
GP	General Practitioner
HIMP	Health Improvement Plan
HIV	Human Immunodeficiency Virus
JIPs	Joint Investment Plans
LD	Learning Disability
MEG	Modernisation Executive Group
MH	Mental Health
NHS	Nation Health Service
NSF	National Service Framework
NVQ	National Vocational Qualification
OP	Older People
PAF	Performance Assessment Framework Indicator
PCG	Primary Care Groups
PCP	Person Centred Plan
PCT	Primary Care Trusts
PD	Physical Disability
PDF	Partnership Development Fund
REC	Racial Equality Council
SSA	Standard Spending Assessment
SSR	Service Strategy and Regulation
SBDC	South Bucks District Council
TOP	Team for Older People
WDC	Wycombe District Council

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