









Better Lives
2022-2025
A strategy for the future of adult social care in Buckinghamshire

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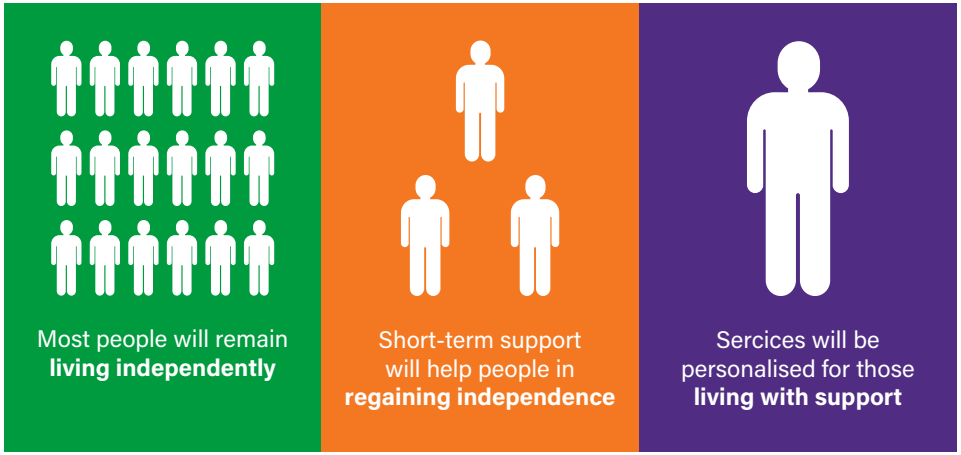
Introduction

Our residents consistently tell us that they want to live as independently as possible for as long as possible, and that they should be able to rely on the council for support and guidance to help this happen. In response to this, we launched our Better Lives Strategy in 2018. The strategy sets out how we aim to help people to live healthier lives and to regain their independence, whilst offering a little extra support when needed.

We want to improve adult social care and create sustainable services for residents of Buckinghamshire. By placing a much greater emphasis on prevention, delaying the need for formal services, and enabling people to live independently for longer, this strategy is helping us change the way we support residents.

There are three key parts to our Better Lives strategy: living independently, regaining independence and living with support. These are explained further in this document. This updated strategy builds on the learning and achievements of the last 3 years and sets out our priorities for the next 3 years.

Financial pressures are growing year on year, and adult social care will need to support more people due the ever-growing population and the long-term impacts of Covid. With all our partners, including the voluntary and community sector, we have a role to play in helping individuals, their carers and communities to recover from the impact of the pandemic. This will be a challenge for the council and our partners, and means that we will need to do things differently to make sure people get the support they need at the right time.



Angela Macpherson
Deputy Leader & Cabinet Member
Health & Wellbeing

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Corporate Director
Adults and Health Directorate

Better Lives outcomes

Both now and in the future:

- more residents will live independently without the need for long-term care
- fewer residents will require support in a residential or nursing setting
- more residents will return to living independently after leaving hospital
- younger people moving on from children's services with care and support needs will be better prepared for adulthood
- people will have more choice and control over their own care, drawing upon community resources as widely as possible
- people will experience more seamless care and support across social care and the NHS

The Better Lives approach - three key parts

Helping people to live independently

Firstly, we will:

- work closely with communities, local groups and the voluntary sector to improve the support available in local areas
- make it easier for people to build strong local networks of support
- make sure that a wide range of information and advice is easily accessible so that people can quickly find the support that they need

Helping people to regain independence

If additional support is needed, we will:

- work with individuals and their families to come up with plans to help prevent problems from getting worse
- provide short-term support to help people recovering from an illness or injury or living with long-term social care or health conditions to gain or regain the skills they need to live independently

Helping people to live with support

Finally, if longer-term support is needed, we will:

- offer people more choice and control over their support
- work closely with the individual, their family and their community to achieve the best outcomes
- consider the individual's desired outcomes when deciding how best to support them within the resources available
- support the development of a wide range of services to help people live more independently

At all times, we will work with people to help them find solutions to daily risks and challenges – allowing them to remain living as independently as possible whilst keeping them safe from significant harm.

Better Lives principles

Following these principles will help to ensure that residents of Buckinghamshire are able to lead fulfilled, satisfied lives.

- decisions are taken with people rather than for them
- support is proportionate to the person's needs and focuses on what they can do and not what they can’t
- people are supported to live independently for longer
- a focus on prevention and short-term intervention helps people regain the skills they need to continue living independently
- services are sustainable for the future
- decisions are evidenced, reasoned and recorded
- our workforce is supported and skilled to deliver the changes
- we robustly monitor, manage and evaluate our performance

How does our approach work?

Living independently

What this means

To help people to live independently for longer, we will ensure more support is available locally, from the voluntary and community sector and from the community itself. Information and advice will also be easily available and accessible which will in turn help people to lead independent and fulfilled lives.

To make this work we will:

- make sure people can easily access information and advice
- make it easier for people to build strong local support networks
- work with communities, local groups and organisations to build upon the support and opportunities available in local areas

What has changed as a result of the 2018-21 strategy?

We have significantly improved our information service. The number of people aged 18-64 we provided with advice and guidance has increased by 73% and more than tripled for people aged 65 plus. This means that many more people are accessing the information they need as quickly as possible.

Our focus for the Better Lives strategy 2022-25

Over the next 3 years we will:

- continuously improve the information and advice available by working with the voluntary and community sector and other professionals
- build better connections to improve support for people experiencing mental health issues and victims of domestic abuse
- work with carers to improve the support available to them
- develop more opportunities for people to be supported by their communities, both in the short and longer term

Living independently case study - Peter

Peter had a varied career in security services. He was forced into retirement through redundancy and ill health a few years ago. Despite his poor health, Peter continued to live independently.

Lockdown and self-isolation changed everything for Peter. The effect of this was that Peter stopped caring properly for his home or himself.

In the summer, the police were called out by neighbours who were worried about Peter. The police alerted the council's adult safeguarding service as they were concerned about how he was looking after himself, hoarding and the condition of his home.

Peter was shocked by the police and council being called in. He described it as a wake-up call and was keen for support to get back on top of things before they got any worse. The council was able to arrange for a swift deep clean of Peter's house, help Peter organise a regular cleaner and keep in light touch contact with him. Life has now improved for Peter who is also thinking about moving back to Devon where he has stronger social connections.

Living independently case study - Phil

Phil lives alone and keeps his home immaculate and always makes sure that he is personally well presented.

Phil is blind, caused by diabetes. A recent stroke severely affected his mobility and he has become very unsteady. After falling several times getting in and out of the bath and over-bath shower, Phil took the difficult decision to rely on strip-washing at the kitchen sink. Over-grown ivy stopped him from opening windows and had started to grow through and around the window panels and Phil was embarrassed by the condition of the property.

Phil suffers from depression and anxiety. Being unable to shower and feel properly clean has affected his mental health further and Phil's GP referred him to the council for support.

With Phil's agreement, an application was made for grant funding for a walk-in shower. The occupational therapist working with Phil also came up with an interim solution which would allow Phil to safely get in and out of the bath whilst waiting for the walk-in shower to be installed. At the same time, she alerted his landlord to the problem with the ivy.

The occupation therapist visited Phil the day after the walk-in shower was installed. Phil had made use of the shower as soon as the workmen left and the landlord had been out to clear the garden and removed the ivy. The changes made a big difference for Phil, who described them as giving him back his life, pride and independence.

How does our approach work?

Regaining independence

What this means

Some people are likely to need more support in the future. However, helping people to plan for the future can often prevent problems from getting worse and help people to stay independent, reducing the need for long-term care.

Where people are recovering from an illness or injury, we will help them to get back to their best health and fitness as soon as possible through short-term care, with support from their families, communities and other organisations.

To make this work we will:

- support people to live well with long-term conditions, recover from illness or injury and regain their independence quickly and safely
- provide short-term health and social care support when needed, to help people remain as independent as possible
- support people to return home from hospital as soon as possible when they are well enough by helping them to regain the skills they need to live healthy and independent lives.

What has changed as a result of the 2018-21 strategy?

Working closely with our NHS colleagues, we have significantly reduced the waiting time for short-term support services (from 8 days in 2019 to less than 3 days in 2021). Meanwhile, the proportion of people helped to recover, enabling them to remain living independently at home, has increased by 77%.

Our focus for the Better Lives strategy 2022-25

Over the next 3 years we will:

- build on our improvements and significantly increase the number of referrals for short-term support so that more people can regain their independence
- improve the use of technology to help people live as independently as possible

Regaining independence case study - Lorraine

Lorraine is 78 and living with her daughter. She was referred to the council by her GP who felt that Lorraine needed more support. Lorraine had become increasingly frail and had been living upstairs, as she was very anxious about using the stairs. Lorraine also loved to have a long, hot bath but was now unable to get in and out of the bathtub.

When the council's occupational therapist visited, she saw that Lorraine was also struggling to get in and out of bed, although once up she could move around well with a walking frame.

Although Lorraine was not complaining about her living situation, she knew that she would struggle to get downstairs in an emergency. Most importantly, living upstairs separated her from the family social life and increased her dependency on her daughter who had to bring Lorraine's meals to her upstairs.

The occupational therapist was able to arrange for a special handrail so that Lorraine get downstairs. Equipment was also provided so that Lorraine could use the bath and get in and out of the bed more easily.

Lorraine hadn't known that she would be entitled to help from the council. The changes have meant that Lorraine can now join in with family life and meals, play with her grandchildren in the garden and enjoy trips outside her home.

Regaining independence case study - Mark

This story is a tribute to Mark's determination, but it also shows how the council is able to support people back to independence.

Four years ago, Mark was a fit and healthy dad with a busy job. Unexpectedly he contracted a traumatic illness which left him paralysed from the waist down. After much work, a year on Mark was able to leave hospital but still needed intensive social care visits each day to help him with everyday tasks such as washing and dressing.

Despite his disability, Mark was determined to continue working and to regain as much independence as possible. The NHS provided physiotherapy, and with the daily support from the carers, Mark was able to return to work. During 2020, his employer provided him with an adapted car so he could drive himself to and from the office. He also got a motorised scooter which meant he could start an independent social life. As Mark continued to build up his strength and capability, he found he needed less and less social care support.

It's been a long, tough journey for Mark, but by September 2021 he was living independently once more and no longer needed any help from the council.

How does our approach work?

Living with support

What this means

People will have more choice and control over the support they receive, whether it is funded by themselves or the council. We also understand the vitally important role of carers and know that they may also need support.

We will support the development of a wide range of services within local communities to allow people to live as independently as possible.

To make this work we will:

- ensure we assess people's needs at the right time
- fully involve individuals and their carers in decisions
- offer all carers an assessment to ensure we identify any support they need to help them in their caring role
- work with partners to improve the service offered to residents and help to ensure they only have to 'tell their story' once

What has changed as a result of the 2018-21 strategy?

We have helped more older people to live at home for longer rather than in a nursing or residential home. There has also been a steady increase in the number of people with mental health issues supported within the community and the number of adults in contact with secondary mental health services who are living independently has increased by 80%.

Our focus for the Better Lives strategy 2022-25

Over the next 3 years we will:

- work with carers to improve the support we offer to them
- improve the range of housing options for people in need of support
- make it easier for people to have a choice in how their care needs are met
- ensure that people can be supported in their home for as long as possible by working with care providers to review how people receive support at home
- improve the support for residents in supported living accommodation

Living with support case study - Adrian

Adrian is a young man who was living on his own after his family moved away. Adrian has Asperger's Syndrome, Attention Deficit Disorder and also suffers from depression. During the 2020 lockdown, his mental health deteriorated badly. He started hoarding and his neighbours, realising that he was also deeply unhappy, contacted the council. Adrian was very suspicious of the social worker and it took some weeks to build a good relationship with him - first by talking on the telephone, then meeting on his doorstep - and finally Adrian found the confidence to allow us into his flat.

Each room of the flat was piled from floor to ceiling with rubbish, with a narrow path so he could reach the fridge, sink, toilet, bed and sofa. Adrian acknowledged that he was overwhelmed and he didn't know how he had reached this position.

Adrian allowed us to work with him and the first big change was clearing his flat out and a deep clean. He worked with the council and followed the plan that had been agreed with him to take care of his flat and look after his physical and mental health. Unfortunately, despite his best efforts and additional support, Adrian's mental health became worse and he struggled with each day. It was agreed with Adrian that he needed a more supportive living environment to help him manage his daily life better.

Adrian is now living in Supported Living. He has his own flat with people on hand to encourage him to look after himself and support him to socialise. Adrian says his mental health is much better and he has started developing some new interests.

Living with support case study - Dave

Dave was discharged from hospital into a care home. A multi-agency meeting was being held with Dave and his family to review his treatment and what support he needed so he could return home. The particular concern was Dave's physical frailty - it was a fall which had triggered the stay in hospital.

Council staff met with Dave and his family before the multi-agency meeting to understand Dave's views before the "stress" of a formal meeting. Whilst much of the multi-agency meeting focused on Dave's medical and care needs, Dave made it clear a priority for him was to reduce his social isolation and reduce reliance on his family. Due to Dave's lack of mobility, he was unable to visit groups, so a volunteer from a local befriending charity began regularly visiting Dave to help him to develop more of a social life.

Dave is now back home and continues to receive visits via the befriending charity, and his wellbeing has significantly improved. Plans are in place to support Dave to start venturing outside which he's been really enjoying. Although Dave will continue to receive support from the council, he is so pleased to be able to get out and about and is feeling much more positive about his situation.

Living with support case study - Susie

Susie was struggling to cope with her grief following the suicide of her brother and death of her husband. Susie found herself unable to keep up with housework and everyday tasks. Hoarding became an issue and Susie became very depressed. She also had a serious chronic health condition which she was struggling to manage; she was frequently running out of medication and missing appointments. Susie struggled to read and write and didn't use a computer which meant she wasn't able to make use of services that were available to her.

Helped by her landlord, Susie moved to a smaller and more manageable home. Sadly, this took her away from a close friend and the familiar neighbourhood that held happy memories.

A lot of professionals had been working with Susie but she was struggling to attend appointments or follow through on plans. Susie's situation worsened and she was referred to the council by both her GP and suicide bereavement support worker. It was clear that Susie needed long-term support to manage daily life.

Isabel is a Personal Assistant who now works with Susie 3 hours a week to help her organise and attend appointments, manage her home, exercise and re-build a social life. They've built a strong relationship and often go out shopping and to gardens and events, which Susie really enjoys. Recently, with Isabel's support, Susie felt able to visit her parents' graves, which she found a great comfort.

Working together

It is essential that we involve the people who use the service in discussions about how future services are developed. For this strategy, we sought advice from service users, their families and carers, as well as councillors and social care staff, in line with the Care Act 2014.

We will continue to support you and listen to you so that we can consistently improve and deliver services to our community.

We will:

- co-produce and design services with people receiving support from adult social care
- consult with services users and be open and transparent about what we are doing and why
- ensure our staff have the skills and experience they need to deliver the Better Lives strategy through a comprehensive training and development programme and develop systems that will support staff to focus more on the people using services
- embed Better Lives outcomes in partner organisations to support with the integration of health and social care

Community engagement and co-production

Our vision for co-production is that people who use services and carers are involved from the start. They will actively help define and design local services to inform adult social care decision-making in areas that impact on their lives.

We have established a service user and carer forum to provide additional opportunities for residents to share their experiences and agree a programme of actions and activities to improve the delivery of services.

What our staff say

I'm Sue Lightbown - I'm a qualified social worker and have worked with Buckinghamshire Council for 15 years.

During this time, I've seen many changes in the approach to working with clients. Out of all of these approaches, the Better Lives approach supports the social worker to focus on being really person-centred and creative to achieve the best outcomes for the individual. It focuses more on the strengths and aspirations of the clients rather than just their needs, and helps them to think about their goals and what help they would like, and this makes it so much more rewarding for me.

Sue Lightbown
Social Worker

After 30-odd years in banking, I really wanted to work in a frontline caring role. Following a couple of years in the NHS, I came to work in social services – initially specialising in care and support for people with learning disabilities.

The Better Lives ethos really supports me to take a person-centred approach, supporting our clients to be as independeant as possible and get as much of what they can out of life. And I can also see how the unavoidable but necessary paperwork and record-keeping is being continuously improved to support the outcome-based approach. Five years on, I still love the job.

Sandie Kemp
Social Work Assistant

For more information

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buckinghamshire.gov.uk/care-adults

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Key documents and links:

Joint Strategic Needs Assessment (JSNA)

Our Market Position Statements

The Care Act 2014

Buckinghamshire Council