

**Council Name:** Oxfordshire

This report is a summary of the performance of how the council promotes adult social care outcomes for people in the council area.

The overall grade for performance is combined from the grades given for the individual outcomes.

There is a brief description below – see Grading for Adult Social Care Outcomes 2008/09 in the Performance Assessment Guide web address below, for more detail.

**Poorly performing** – not delivering the minimum requirements for people

**Performing adequately** – only delivering the minimum requirements for people

**Performing well** – consistently delivering above the minimum requirements for people

**Performing excellently**- overall delivering well above the minimum requirements for people

We also make a written assessment about

**Leadership** and

**Commissioning and use of resources**

Information on these additional areas can be found in the outcomes framework

To see the outcomes framework please go to our web site: [Outcomes framework](#)

You will also find an explanation of terms used in the report in the glossary on the web site.

**Delivering Outcomes Assessment**

**Overall** Oxfordshire County council is performing:

**WELL**

Outcome 1:

[Improved health and emotional well-being](#)

The council is performing: **Well**

Outcome 2:

[Improved quality of life](#)

The council is performing: **Well**

Outcome 3:

[Making a positive contribution](#)

The council is performing: **Well**

Outcome 4:

[Increased choice and control](#)

The council is performing: **Well**

Outcome 5:

[Freedom from discrimination and harassment](#)

The council is performing: **Well**

Outcome 6:

[Economic well-being](#)

The council is performing: **Well**

Outcome 7:

[Maintaining personal dignity and respect](#)

The council is performing: **Adequately**

*Click on titles above to view a text summary of the outcome.*

## **Assessment of Leadership and Commissioning and use of resources**

### **Leadership**

There has been significant investment in adult social care in Oxfordshire over the past 3 years to help address the challenges of the changing demography in the area and the need to implement the transformation agenda. The council has a clear vision for the transformation of social care and has conducted a self-directed support learning exercise in two districts which has now been extended to all care groups in the north of the county. Although the number of people benefiting from personal budgets is still fairly low in Oxfordshire, compared with other parts of the country, the council has plans to progress this over the next 2 years and these plans need to be realised so that more people can exercise greater choice and control over the services they receive.

The council has considerable financial resources in four pooled budgets and contributions to three of these have been increased further in the past year, which they have been monitoring and managing with the Primary Care Trust. The council is the lead organisation for older people, people with physical disabilities, and equipment pooled budgets, and the learning disabilities pooled budget.

In terms of managing their workforce, the council has achieved lower staff turnover, less vacancies, less staff sickness and a lower proportion of staff with their ethnicity not stated than similar councils and the national average, as a result of focused activity in all of these areas.

Previously, it was identified that the provision of practice learning in Oxfordshire was below the average of similar councils. Whilst Oxfordshire County Council do supply placements to students on social work courses, they have also been developing their own apprenticeship scheme over recent years, with good rates of success, to encourage people to work in social care and this continued in 2008/09.

### **Commissioning and use of resources**

There are a number of examples of the council working in partnership with other agencies to deliver appropriate health and social care services to people. Local strategic partnerships operate in each district council area to ensure local targets are met. There are substantial pooled budgets for many of the care groups, which are being well-managed, and joint commissioning strategies are being developed across all care groups.

The Oxfordshire Joint Strategic Needs Assessment has been identified as a good example of the analysis of local needs and recent work has allowed the council to review health and social care needs against the take-up of services to understand local inequalities. They need to continue to progress this work to ensure that local service delivery is meeting the needs of people living in the county.

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Whilst there is some engagement with people who use adult social care services and their carers and staff, the level of engagement is variable and more work needs to be done by the council to promote wider representation, especially of older people. The council is developing currently its new 'Taking Part' team and the impact of this team needs to be measured over the coming year.

Oxfordshire needs to act on plans underway with local providers, with whom they have block contracts, to prepare for the transition to personal budgets.

## **Summary of Performance**

### **Outcome 1: Improved health and emotional well-being**

The June 2009 CQC service inspection report concluded that Oxfordshire was performing well in supporting improved health and wellbeing.<sup>1</sup>

Oxfordshire had made some important and significant improvements to address problems with people having delays in their discharge from hospital. The rate of people being delayed (where the delay was attributable to the council) had halved and was below the average of similar councils. In addition, the average number of days delayed per week (attributable to the council) had halved. However, many people in Oxfordshire still experience delays in being discharged from hospital in a timely manner where the delay is not attributable to the council. The Council needs to continue to work closely with health and strategic partners to reduce this further.

The effectiveness of Oxfordshire and its NHS partners' combined performance in achieving independence for older people through rehabilitation and intermediate care was below that of the average of similar council areas. This indicates that the council and the NHS in partnership need to be more effective in helping people achieve independence through rehabilitation and intermediate care.

The percentage of adults and older people receiving a review, under the council's care management arrangements, had improved significantly since 2007/08 and was above the average for similar councils.

People in Oxfordshire are generally healthy and life expectancy is, on average, greater than in other areas. The council's Health and Wellbeing Board is actively driving priorities across the county. The council provided a range of information to assist people in managing their health and long term conditions. The council have been working to identify people whose health is significantly poorer than others and work is underway to prevent inequalities of health and escalation of long-term conditions in the local area.

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<sup>1</sup> A CQC inspection of Oxfordshire took place in June 2009 and is due to be published on 20 October 2009. The focus of the inspection was:

- Safeguarding adults;
- Improved health and wellbeing for older people;
- Increased choice and control for older people;

This annual performance assessment report makes some reference to the service inspection report. The judgements in the service inspection report are fully taken into account (within the wider evidence set) in the judgements made in the 2008/09 annual performance assessment. Oxfordshire County Council's leadership should read the service inspection report and the annual performance assessment report together as one integrated communication from CQC. CQC requests that the County Council develop one action plan to address the recommendations in the service inspection report and the 'What the Council needs to improve' bullet points in this annual performance assessment report.

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There is some effective work with people to improve access to and take up of health and social care services including people with mental health difficulties who have benefited from services that promote health and wellbeing. People with a learning disability have benefited from increased initiatives that have promoted healthy living. The falls service in Oxfordshire is delivering good results and has notably reduced the number of people who fall and need admission to hospital.

Oxfordshire has been working to engage with people who misuse drugs through a number of approaches including people who would not normally enter treatment services. There has been a significant improvement in the uptake of treatment.

There has been joint monitoring between the council and Primary Care Trust (PCT) to ensure people receive good quality and nutritious, healthy meals in all residential services.

The joint council and PCT End of Life strategy clearly outlines the standards of person centred care required to meet individual needs and preferences. The PCT recognises the need to improve performance in this area and is working to support a higher number of older people to die at home. There are some gaps in arrangements to ensure that people who wished to die at home were effectively enabled to do so. The council needs to work with strategic partners to ensure that people at the end of their life are enabled to receive appropriate palliative care in accordance with their wishes.

## **Outcome 2: Improved quality of life**

The rate at which the council supported people to live independently through social services had dropped since 2007/08 and was a little below the average rate for 2008/09 for similar councils, although Oxfordshire was not a significant outlier.

There is evidence to show that, generally, people in Oxfordshire are helped to enjoy a good quality of life and there are a wide variety of social, leisure and learning opportunities for people in the county.

The council's rate of expenditure on Telecare equipment and services was similar to the average of comparator councils – but the rate of expenditure on infrastructure was low compared to the average of similar councils.

Unfortunately, the council has not delivered on its plan for additional extra care housing in the last year due to delays in construction and this has impacted on the number of people helped to live independently and in a better environment. The council needs to ensure that this shortfall is addressed in 2009/10.

The average waiting time for adaptations was in line with the waiting times in the average of similar councils. The rate of people waiting for major adaptations was in line with the rate in the average of similar councils, and the rate of people waiting for minor adaptations was well below the rate in the average of similar councils.

## **Outcome 3: Making a positive contribution**

The service inspection concluded that there was a variable level of engagement and more work to do to promote wider representation and involvement of older people in planning, commissioning, monitoring and review of health and social care services. Although, some people who use services and their carers are actively encouraged to participate in shaping services and are consulted on contract monitoring to ensure these services deliver quality and

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meet the needs of people using them. There are some good examples of where the views of people have impacted directly on the contracts of some service providers.

There are a number of innovative projects in Oxfordshire that are benefiting people by enabling them to make a positive contribution in the community and, in some cases gain employment locally. Volunteering in Oxfordshire is thriving and the council recognises the significant and important role that volunteers have in creating and implementing services in the county to ensure the wellbeing of local communities. The value of volunteering is recognised in a number of strategies, contracts and funding arrangements that are in place in Oxfordshire.

The Oxfordshire Local Involvement Network (LINK) is becoming established and is starting to reach out to local communities and harder to reach groups in order that it can represent their interests in its work with the council and health partners over the year ahead. They are developing their strategies currently and the council need to encourage the development of the LINK over the coming year to ensure its voice is heard on key issues for people. Given the newness of the LINK and their lack of involvement in social care previously, the council also needs to help them develop their understanding of social care so that they can contribute effectively.

#### **Outcome 4: Increased choice and control**

The service inspection concluded that Oxfordshire was performing well in supporting increased choice and control.

There was commendable improvement in the timeliness of completing care management assessments. Oxfordshire was performing better than the average of similar councils. The council's performance indicates an effective and responsive beginning of the care management process for local people. In turn, that also increases the chances that people will be satisfied with what the outcomes are for them.

The percentage of care management assessments leading to service provision for people was higher than in 2007/08 but lower than the average of similar councils. The council suggests that this is a result of their actions to provide services directly to people. However, the council needs to ensure it can evidence that this is the case, as the alternative is that it signals a decline in services to people.

The council's performance in the timely provision of service following assessment was also very good and better than the average of similar councils.

The council's performance with respect to social care service users receiving self directed support was in line with similar councils. The roll-out of personal budgets has also started in Oxfordshire. A learning exercise has begun in the north of the county and all new service users in that area are offered a personal budget. People elsewhere in the county can be considered for a personal budget on request or if it is determined as beneficial to them. The rollout of self-directed support will begin in the summer of 2010 to ensure that all eligible people have a personal budget by March 2011. The council needs to implement these plans so that people in all areas benefit from exercising better choice and control over their services.

The council's performance with respect to carers (and specifically carers receiving needs assessment or review, and a specific carer's service or advice and information) was below the average for similar councils. The council suggests that this is a result of carers wishing to access services directly. However, the council needs to ensure it can evidence that this is the case, as the alternative is that it signals a decline in services to carers.

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The council's performance with respect to adults with learning disabilities in settled accommodation was commendably high compared to the average in similar councils.

The council ensures there is a range of services available to enable people to exercise choice and control over their lives and live more independently through the provision of a variety of options to meet people's needs.

There is a range of social care information available and this is being further developed. Efforts are being made by the council to tailor information to individual needs and preferences and the role of the Access Team has been strengthened.

Oxfordshire County Council has made sure that all young people moving into adult services had a plan in place before the age of 18 last year to ensure they are well supported. It also has one of the largest adult placement schemes in the country from which a number of people are benefiting.

The service inspection found that the council's arrangements for managing complaints and compliments needed to be strengthened.

### **Outcome 5: Freedom from discrimination and harassment**

The service inspection concluded that the council should strengthen their focus on equality and diversity and ensure staff are well trained in these areas.

The Place Survey indicated that Oxfordshire's performance for fair treatment of people by services was the same as the average performance of similar councils.

The council has now significantly improved its recording of ethnicity data for people being assessed and for people receiving services. Oxfordshire is now performing better than the average of similar councils.

The council has now achieved level 3 of the Equality Standards for Local Government.

The council has improved the provision of information on mental health and wellbeing for people from black and minority ethnic communities and there are other projects in Oxfordshire that enable people in other ethnic communities to access information and advice more readily.

The local Joint Strategic Needs Assessment is used by the council to monitor fair access to services. Localities have been identified where the balance of social care and health needs appear to be high and yet service uptake is low. The council and its partners are using this information to understand and address local inequalities and the provision of services in these areas.

### **Outcome 6: Economic well - being**

The rate at which the council supported people with learning disabilities into employment was commendably high compared to the performance of the average of similar councils. There are several schemes to help people with learning disabilities into paid employment.

There are a large number of initiatives in place in Oxfordshire to help improve the economic wellbeing of people living in the county, including carers, by helping them into employment. Also, as a result of joint working between the council and other government agencies, a large number of people have received advice on claiming benefits to which they are entitled, which has resulted in more people receiving monetary assistance to help reduce their financial worries.

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There has been major investment by the council to support working carers locally to help them return to or continue to work whilst balancing their carer responsibilities and this has meant greater financial independence for them. The council have also been raising the awareness of working carers through local publicity and in conjunction with Jobcentre Plus and the carers' centres.

The council recognises the importance of supporting people in Oxfordshire through the current economic climate by providing information and practical help to people and local businesses.

The council have started to rollout personal budgets to people in the north of the county. People elsewhere in the county can be considered for a personal budget on request or if it is determined as beneficial to them. Oxfordshire plans to roll this out from summer 2010. The council needs to progress their plans to extend this to all parts of the county so that more people can benefit from the improvements to their economic wellbeing and flexibility over services they receive that this system provides.

### **Outcome 7: Maintaining personal dignity and respect**

The June 2009 service inspection concluded that Oxfordshire was performing adequately in safeguarding adults.

The rate of safeguarding referrals about older people had increased from 2007/08 to be above the rate in the average of similar councils. This indicates the council had been effective in reducing the risk of under-reporting of safeguarding incidents about older people. It is noteworthy, however, that the number of safeguarding referrals from partner services is much lower than in comparator councils.

For people with learning disabilities, people with physical disabilities, people with mental health needs, and people who use drug services the rates of safeguarding referrals were still significantly below the rates in the average of similar councils. This indicates that there is a risk of under-reporting of incidents.

The percentage of safeguarding referrals in 2008/09 that were about people self-funding their own residential care was above the average in similar councils. This indicates that the council is being successful in ensuring self-funders are well included within the Oxfordshire safeguarding arrangements.

However, the percentage of completed safeguarding cases fell last year and the council needs to ensure that cases referred to them are resolved quickly and appropriately.

The percentage of relevant staff in the council and independent sector that had had relevant safeguarding training was above the average of that in similar council areas. This indicates a thorough approach to relevant training by the council.

In the CSCI 2007/08 performance assessment summary letter, the council was encouraged to monitor and progress key findings resulting from the then recently concluded internal reviews on safeguarding practice. As a result, two action plans have been developed, one of which has been reviewed and the second is being approved currently. The outcome of the third review has yet to be finalised. In the meantime, a number of initiatives have been introduced, including a new safeguarding team, monthly reporting, an external audit of improvements to safeguarding procedures, and improved information on safeguarding to raise awareness.

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Almost all people admitted to residential or nursing care were offered a single room in Oxfordshire which means they were afforded the privacy they deserved.

In September 2008, Oxfordshire had more people placed in registered services that were rated as poor by the Care Quality Commission than the council had had in September 2007 (that is all placements within and outside the council area). The council has been working closely with those providers to help them to improve and there is a system in place to alert the council when there is a decline in the quality of registered services. However, the small number of people remaining in services that are rated as poor need to be closely monitored and efforts made to relocate them if at all possible or appropriate. The council needs to continue to ensure that people who remain in these services are protected properly

## **Outcome 1: Improved health and emotional well-being**

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The council is performing: **Well**

### **What the council does well.**

- The council had made some important improvements to address problems with people having delays in their discharge from hospital. The rate of people being delayed (where the delay was attributable to the council) had halved and was below the average of similar councils, and the average number of days delayed per week (attributable to the Council) had halved
- The percentage of service users who received a care management review had increased markedly and the council's performance was now above the average of similar councils.
- Advice about falls prevention is routinely available and the council have managed to significantly reduce the level of reported falls.
- More people who use drugs are benefiting from being in effective treatment programmes as a result of increased engagement.

*The service inspection found that the council and its partners had:*

- A number of arrangements in place to help older people recover from illness and to improve their health and wellbeing.
- Worked well to identify and support individuals and groups who had the poorest health outcomes.
- Good arrangements in place to support people with long-term conditions.
- Enhanced home and community based services and reduced the numbers of people being admitted to care homes.

### **What the council needs to improve.**

- Many people in Oxfordshire still experience delays in being discharged from hospital in a timely manner where the delay is not attributable to the council. The council needs to continue to work closely with health and strategic partners to reduce this further.
  - The council and its NHS partners' combined performance in achieving independence for older people through rehabilitation and intermediate care was below the performance of the average in similar council areas and needs to be addressed.
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*The service inspection found that the council and its partners need to:*

- Ensure older people and their carers know how they can keep themselves fit and well and that they have easy access to the help they need.
- Strengthen joint working to prevent people from having to go into hospital and to enable timely and flexible discharges from hospital.
- Address gaps in arrangements to help more people to die at home in accordance with their wishes.

## **Outcome 2: Improved quality of life**

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The council is performing: **Well**

### **What the council does well.**

- The number of people who continue to benefit from Telecare services has increased.
- Services for people with autistic spectrum disorder are wide-ranging.
- There is considerable evidence available to show that in partnership with district councils, and voluntary organisations, there are a range of social, leisure and learning opportunities for older and vulnerable people.
- The rate of people waiting for minor adaptations was well below the rate in the average of similar councils

### **What the council needs to improve.**

- The council needs to deliver on their plans for 140 extra care units in 2009-10.
- Oxfordshire need to reduce completion times for major adaptations and achieve timescales in West and South Oxon, and Vale of White Horse District Councils comparable to those achieved already in Oxford City and Cherwell areas.

## **Outcome 3: Making a positive contribution**

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The council is performing: **Well**

### **What the council does well.**

- The council values and encourages volunteering within their services. There is a wide range of opportunities and good take up amongst people in Oxfordshire, resulting in high levels of volunteering.
- There are a variety of initiatives to help carers into employment in Oxfordshire.
- The MIND Café and Restore project are very beneficial for people who use services and several people have been helped into employment as a result.

### **What the council needs to improve.**

- The council needs to have a consistently good level of engagement with, and representation and involvement from, older people in the planning, commissioning, monitoring and review of social care services.
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## **Outcome 4: Increased choice and control**

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The council is performing: **Well**

### **What the council does well.**

- There was commendable improvement in the timeliness of completing care management assessments. The council's performance indicates an effective and responsive beginning of the care management process for local people.
- The council's performance in the timely provision of service following assessment was also very good and better than the average of similar councils.
- The council's performance with respect to adults with learning disabilities in settled accommodation was commendably high compared to the average in similar councils.

*The service inspection found that the council and its partners had:*

- Ensured most older people were given a say in how they wanted their needs to be met.
- Improved awareness of and support to carers, with some innovative work to enable carers to have their needs met.
- Increased the range of support people could access to live safe and independent lives.
- Encouraged the use of volunteers and community groups in delivering support to older people.

### **What the council needs to improve.**

- The council needs to progress its plans for rolling out personal budgets across the county to more closely match the national performance.

*The service inspection recommended that the council and its partners should:*

- Continue to improve the quality, availability and accessibility of information and advice so that people are well informed about their options.
- Ensure reviews of individual need focus on outcomes and address the management of risk.
- Strengthen arrangements for managing compliments and complaints.

## **Outcome 5: Freedom from discrimination and harassment**

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The council is performing: **Well**

### **What the council does well.**

- There has been wide distribution of information on mental health services for people from black and minority ethnic groups.
- Information days have taken place for new migrants to the Oxfordshire area.

### **What the council needs to improve.**

- The council should strengthen their focus on equality and diversity.
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## **Outcome 6: Economic well - being**

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The council is performing: **Well**

### **What the council does well.**

- The rate at which the council supported people with learning disabilities into employment was commendably high compared to the performance of the average of similar councils.
- A large number of carers were supported to either achieve or stay in employment and there was significant investment in the carers' employment services.
- There has been an increased uptake and additional promotion of benefits to which people are entitled through the joint work of the council and various agencies.
- A substantial number of people have been supported into employment and supported whilst in work by the Oxfordshire Employment Service.

### **What the council needs to improve.**

- The council needs to progress their plans for rolling out personal budgets across the county so that more people are able to benefit from the personal control over their care provision that this flexible system offers.

## **Outcome 7: Maintaining personal dignity and respect**

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The council is performing: **Adequately**

### **What the council does well.**

- The percentage of relevant staff in the council and independent sector who had had relevant safeguarding training was above the average of that in similar council areas.
- The rate of safeguarding referrals about older people had increased from 2007/08 to be above the rate in the average of similar councils. This indicates the council had been effective in reducing the risk of under-reporting of safeguarding incidents about older people.

*The service inspection found that the council and its partners had:*

- Put in place new arrangements to keep people safe.
- Tightened systems for checking the quality of adult safeguarding work and learning from investigations.
- Taken firm action to deal with service providers who did not provide a good service.
- Undertaken specific work with people with learning disabilities to help them to keep safe.

### **What the council needs to improve.**

- For people with learning disabilities, people with physical disabilities, people with mental health needs, and people who use drug services the rates of safeguarding referrals were still significantly below the rates in the average of similar councils. This indicates that there is a risk of under-reporting of incidents.
  - The council needs to work on improving their completion rates for safeguarding referrals.
  - The council needs to seek an improvement in safeguarding referrals from partners other than health
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- The small number of people remaining in services that are rated as poor need to be closely monitored and efforts made to relocate them if at all possible or appropriate. The council needs to continue to ensure that people who remain in these services are protected properly.

*The service inspection found that the council and its partners should:*

- Ensure that all people know how to raise concerns if they are at risk of or are being harmed in some way.
  - Ensure that all staff are well trained and work together to protect people from harm.
  - Ensure all key agencies are involved in preventing, investigating and monitoring the outcomes of work to keep people safe.
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