Our plan for living and ageing well in Camden





"Working together, we'll help you to remain independent, safe and part of your local community."

National media coverage of the growing pressures and chronic underfunding of adult social care has highlighted that what we have is a broken system.

As funding reduced, many homecare services and care homes became reliant on zero hour contracts and the minimum wage. While social workers, spending more time on processes, ran the risk of losing sight of what was most important to the people needing help.

Humane and sustainable social care is central to the Council's vision for Camden. We have invested in the London Living Wage and the Ethical Care Charter. We are re-commissioning homecare services so they work as valued partners in our local health and care neighbourhood teams, providing high quality care and support to residents, which promotes independence and enables them to play a full and active part in community life.

We want all our social workers, occupational therapists and support workers to work with people, as experts in their own lives, supporting them to reach their potential and focusing on what matters to them. To achieve this we need to change the way we work and build a new relationship between the Council and Camden residents. This change focuses on how we support people to be as independent as possible and regain control of their lives, and promote citizenship, valuing the contribution of older and disabled people.

This plan is not just about the support adult social care offers, it is about a whole-system approach, tackling the barriers people face to achieving health and wellbeing. This means the Council will work to find innovative housing solutions, to help people to be active and to be part of their local community.

We will work closely with our partners in the voluntary and community sectors and the NHS to achieve our ambition. We are committed to delivering the Local Care Strategy and Camden's Health and Wellbeing Strategy.

Most importantly, we will continue to work with Camden residents, including people with care and support needs, their families and friends, to learn from their experiences and benefit from their ideas. Many Camden residents have provided us with very useful feedback and suggestions which have helped the development of this plan and we will continue this dialogue.

In Camden, we value the important role that all our carers play and we also recognise that care and health is an important and a growing industry that offers employment opportunities for local residents.

We will continue to campaign for more government funding for adult social care. And we will work to build on the strengths of our citizens and communities to make sure that age, disability or health conditions are not barriers to living a safe and thriving life in our borough.



Councillor Georgia Gould Leader of Camden Council

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1. Introduction – key principles

We live in a rapidly changing world. People are living longer, often with complex health conditions, so the number of people requiring adult social care will continue to increase and the type of support they require will diversify. Technology continues to transform our everyday lives and, as society adapts, so do our expectations.

Adult social care is about enabling people to have the best possible lives. We want people to be as independent as possible, to have more choice and control over their support and to be central to any decision-making.

However, evidence suggests our current system draws people into statutory services rather than building independence and resilience. For example, our data shows that comparatively more people will receive long-term support in Camden and higher numbers of people are placed in residential or nursing care.

Our ambition is to support people to live healthy, active and independent lives for longer. We plan to focus on what is most important to the person, to recognise their strengths and their networks and to help people to stay connected in their communities.

Research¹ tells us that people want to be independent. To help us achieve this we will use community resources first when developing solutions with our residents. We expect citizens to play a larger role in helping both themselves and others in the future, with support from the Council and our partners where needed. As a whole system, we aim to reduce health inequalities and improve the lives of residents by building on individual skills, resources and informal networks of support.

We will apply a consistent approach through all stages of life, from young disabled people moving into adulthood to support at the end of life.

In December 2016, the Council's Cabinet agreed a key set of principles that underpin our new model:



We aim to work with people to help them find their own solutions and put them in the driving seat wherever possible.

GoodGym – a community of runners who combine getting fit with doing good, stopping off on runs to do physical tasks for community organisations and to support isolated older people with social visits and one-off tasks.

¹ Think Local, Act Personal – a Partnership established in 2011 aimed at supporting and promoting the continued transformation of health, care and support.



2. Why do we need to change the way we work?

It is the right thing to do. There is increasing national recognition that adult social care needs to work differently to meet the aspirations of residents. This means a return to our core professional values, recognising people as experts in their own situation and being more community-based, focusing on linking people into their local networks. This is a move from the current focus on a professional assessment of the person's needs and a response of providing formal, often long-term services, without considering alternatives, which may reduce dependency and lead to better quality of life.

The Care Act 2014 gave new statutory duties to local authorities to support people to maintain

their wellbeing and independence. The Act enshrines the principle of individual wellbeing, placing this at the heart of the care and support system. It promotes independence and cites the importance of partnership working, with a drive towards greater integration between different services to improve people's outcomes.

Feedback² from people who use Camden adult social care services have indicated that, whilst there are aspects of services that promote independence and choice that are valued, there is more work to do to improve the way we deliver care and support services, e.g. improving ease of access to information and advice, and better co-ordination of some services.

² Annual Survey 2016, Carers Survey 2016, plus feedback from focus groups

Changes in population and impact in Camden

There are key changes in Camden's population that will have an impact on the demand for adult services over the next 10 years.

People are living longer, often with multiple long-term health conditions and this means that the number of people requiring support will continue to increase and the type of support they require will become more complex.

The highest percentage growth to 2027 will be the over 75s. The number of people in this age group will increase by approximately 41% or, in other words, 5,100 more people aged over 75.

Most people with physical disabilities or limiting long-term health conditions in Camden are aged 55 plus. Whilst overall, people in Camden are living longer, on average the last 20 years of their life is spent in poor health, and there are huge inequalities in life expectancy in Camden.

The number of people with a learning disability, and the complexity of their needs, is increasing due, in part, to better health technologies leading to increasing life expectancy and the rising numbers of young people with complex needs surviving into adulthood. Each year about 20 young disabled people turn 18, including on average 6 to 8 with profound disabilities.

Just over a quarter of the 734 people³ known to Camden's Learning Disability Service are aged 20 to 29. They are also living longer and 11% are now over the age of 65 years. The events at Winterbourne View⁴ and the subsequent report into premature deaths of people with learning disabilities highlighted concerns about access to care and support for people with learning disabilities. They are three more times likely to die early compared with the general population and suffer disproportionately from specific health issues, including coronary heart disease, respiratory disease and epilepsy.

Population projections suggest that the number of adults with autism in Camden will increase year on year, to almost 2,500 by 2040. As awareness and recognition of autism is growing, so are the numbers of people being diagnosed and identified as having additional care and support needs.

Camden currently has the third highest prevalence of serious mental illness in the country and the seventh highest incidence of common mental health problems, such as anxiety and depression. The associated economic impacts of mental health conditions are estimated to be equivalent to £750 million a year in Camden.

As the population ages and health needs increase, a growing number of residents will become carers. It will become increasingly important to raise awareness of the needs of carers, and improve access to support and training for them, if we are to succeed in building on people's strengths.

The increasing diversity of Camden requires commissioners and providers to ensure provision of services are culturally sensitive and provide equity of access responsive to a changing population.

Financial context

By 2018/19, government cuts will mean Camden Council's funding will have more than halved compared to funding levels in 2010.

A fragile social care market and rising costs are adding to budget pressures nationally.

Furthermore, the social care workforce generally has been poorly paid and under-skilled, with a direct impact on the quality of care. The Council is committed to the Ethical Care Charter and the London Living Wage and this has had a positive impact, to some degree mitigating risks.

³ March 2017 data

⁴ Winterbourne View was a hospital in South Gloucestershire for people with learning disabilities and autism.

However, there remain significant challenges in securing the right workforce and sufficient local supply of provision to meet increasingly complex needs.

In recognition of these pressures, central government allowed councils to raise a social care precept of up to 6% via Council Tax over 3 years. The Council agreed to raise 3% this year and 3% in 2018/19. The 2015 Spending Review included a direct grant (known as iBCF) to local government from 2017/18 for 3 years for adult social care that will enable the Council to continue to actively support the whole system and further develop services that underpin hospital discharges and admission avoidance.

Evidence from national work across adult social care⁵ shows that councils which have delivered efficiency programmes based on the development of a new strengths-based 'contract with citizens and communities' have been more successful in delivering sustainable change that both improves outcomes for people and savings for the council.



"Changing the way that existing services are delivered will in most cases not be sufficient. There needs to be a fundamental change in the expectations of individuals, communities and service providers if the most is to be made of diminishing resources while securing public wellbeing."

3. Working with people to develop our plans

Through focus groups, workshops and conversations, we have worked with residents and service users, as well as a wide range of partner organisations, staff and Council services to understand how we need to change adult care services and the Council's broader approach⁶. We have analysed research, visited, and learnt from other local authorities who have already embarked on similar changes and are reporting success.

Most people we spoke to in Camden were enthusiastic about the idea of a strengths-based approach and supported the idea of the Council having a different relationship with residents. Residents and other stakeholders felt that practitioners having more time to spend with people would be valuable. They felt that this approach would improve people's confidence and self-esteem, that having more connections to the local community would reduce loneliness and that better links with other Council departments, such as leisure, housing and transport, are vital to support wellbeing.

In terms of challenges, there was a concern that informal carers and community organisations would need more support from the council if they were to take on greater responsibilities. It was felt that there was a risk of people feeling pressured in a time of crisis to come up with strengths, and then feeling as if they were failing if they could not identify any. Some service users feared that this could mean a reduction in their personal budgets that could have a negative impact, potentially creating a crisis or setback for them.

In delivering these plans, we will ensure a fair and consistent approach to supporting people. Social workers will work differently with people, drawing out their strengths. They will know more about the communities they are working in so they can help effectively link people to the

⁵ LGA Adult Social Care Efficiency Project Final report LGA Learning disability services efficiency project final report

⁶ Cabinet Report 18th October 2017 provides full details of engagement that has taken place

support they need. We will work with voluntary and community sector partners to strengthen community capacity.

4. A new relationship between the Council, the community and Camden residents

Our Supporting People, Connecting Communities plan aims to create a 'new relationship' of shared responsibility between citizens, communities and the Council. It recognises what people have told us and responds to the changing context.

The 'new relationship' recognises how older and disabled residents can contribute to life in Camden and aims to build on individual and community strengths, foster resilience, reduce reliance on statutory services and focus on improving lives. We want Camden to be a place where all adults can benefit from every opportunity a dynamic borough like Camden has to offer.

We plan to embed a 'strengths-based' model, so that we help people build on their strengths and focus on the things that work to overcome the barriers preventing them reaching their potential. We will take a whole-life approach - consistent with the Council's Resilient Families work – to make sure this approach supports early planning for adulthood.

To be successful we need to achieve systemic change with support from the Council as a whole and our partners. Supporting People, Connecting Communities reflects a broader Council commitment to building the resilience of residents and communities. This includes working with voluntary and community partners to tackle social isolation, enabling support into employment, developing innovative housing options and building a sustainable health and care workforce with job opportunities for local residents.

Homeshare – where lodgers provide help around the house, as well as companionship, is a flexible solution that can benefit many people with support or housing needs. Homeshare builds relationships, often between two generations, recognising that people who take part have needs and something to give.

Our plan aligns with the Local Care Strategy, which aims to make care accessible, personcentred, co-ordinated, preventive and effective. It promotes self-care and a local neighbourhood model – a whole-system approach with GPs, social workers, homecare, nurses and the voluntary sector working together.

Moving forward the Council will increasingly be a facilitator, not a provider or purchaser of services, enabling people to live independent and fulfilling lives as active citizens within their local communities.

"A strengths-based approach to care, support and inclusion says 'let's look first at what people can do with their skills and their resources and what can the people around them do in their relationships and their communities'. People need to be seen as more than just their care needs – they need to be experts and in charge of their own lives."

Alex Fox, Chief Executive of the charity Shared Lives

Ms S is 70 years old, has a brain injury and finds it hard to get around due to mobility problems.

Traditionally, Ms S would have been assessed and provided with a homecare service to assist her with personal and domestic care. This support would have encouraged dependency and would not have improved Ms S's quality of life.

Using strengths-based practice the social worker discovered that Ms S loved shopping in second hand shops and flea markets but was unable to go alone. He found out that Ms S got on well with her next-door neighbour and over a cup of tea, the three of them agreed that the neighbour would be happy to go out with Ms S once a week to look at the shops and have lunch out. The social worker also referred Ms S to the care navigators at her GP practice to support her with arranging and escorting her to her hospital/medical appointments. The occupational therapist provided support so that Ms S could shower by herself and the social worker linked her in to Age UK's 'At Home' service so that she could use her attendance allowance to fund a carer to assist in cleaning her flat.

Ms S is currently managing well without any formal adult social care services, is maintaining her independence and is able to pursue her interests.



We aim to embed a strengths-based approach, so that:

we enable people to maximise independence - help you to stay well and connected

in times of crisis, we offer early help to regain independence - help you when you need it

we work closely with people to meet their long-term care and support needs – **ongoing support for when you need it**

when people are at risk of abuse or harm, we will **help you to stay safe**

Strengths-based approach

"Even in the most challenging and difficult of times, there are things we can do to give people strength and hope that things will get better. One of the ways we do that is by focusing on what matters to people, their talents, resources and their own unique perspective on life.

People are experts in their own lives and usually the best solutions come from their own experiences with support from others. It's a deliberately empowering approach, supporting individuals and families to be in control of life decisions, bolstered with the tools and support networks to succeed."

Lyn Romeo, Chief Social Worker for Adults (England)



At the centre of our plan is adult social care services working differently. We will make sure that all our practitioners are consistently working in a strengths-based way and that our systems and processes adapt to achieve this. This means our staff spending more time building relationships with people, focusing on what they want to achieve, their capacities and linking them into their local communities. We will consistently apply the national eligibility threshold and ensure the best use of resources, enabling people to have as much choice and control over their support as possible.

The new Centre for Independent Living (CIL), due to open at Greenwood Place, Kentish Town, in 2018 is an exciting development for Camden.

Co-designed with disabled people, it will be run by disabled people, putting them in the driving seat. The CIL will act as a community resource where people can get information, advice and support from their peers to help connect them with their local communities.

People with mental health conditions, those with learning disabilities and physical impairments will be able to come together in a vibrant place and participate in training, volunteering and paid employment opportunities so that they can benefit from

Camden's economic development. The CIL will offer support to people who fund their own care and people who want to use direct payments so that they have more control over their care and support. It will act as a voice for disabled people and play a vital role in connecting voluntary and commercial providers.

Help you to stay well and connected

We aim to help people to stay well and better connected in their communities, to tackle social isolation and to improve quality of life. We believe this will help us to prevent, delay and reduce the need for formal care and support services. This means tackling barriers to accessing community facilities, making information accessible and ensuring there is good advice on how to maintain good physical and mental health.

RecommendMe App – a free online way for the over 50s to find and be recommended activities and services. Part of the Ageing Better in Camden partnership, this digital platform can connect a user to relevant services, activities and peer groups. Personalised recommendations are developed for each user based on their interests, their physical, mental and social capacity, geographical location and the activities undertaken by their peer group.

Camden consists of many vibrant communities, with a proud history of active citizenship and a well-established voluntary and community sector. Our strategic neighbourhood partners provide a strong platform to support delivery of the strength-based approach and offer a range of activities - from health and exercise classes to gardening and IT activities - as well as formal and informal links with sections of the community which the Council might otherwise struggle to reach.

A weekly men's cooking club for budding chefs, supported by a network of volunteers. The cooking club, at Abbey Community Centre in Kilburn, is run by **North London Cares**, a community network set up to tackle isolation by running social activities that bring different generations together.

The Council's adult social care service will ensure that our staff have good networking skills and better understanding of local communities. We will listen hard, understand what matters to people and connect them with support that will enable them to get on with their chosen life.

Peer Mentoring, run by VoiceAbility, pairs people with mental health conditions who are further ahead with their recovery with people closer to the start of their recovery journey to support them to make positive steps forward. Both mentors and mentees say that it significantly improves their wellbeing and several mentors have used this as a springboard to employment.

The wider Council supports prevention and early intervention through, for example, commitments to:

- train and empower more of our employees so that they can 'make every contact count'
- build community awareness and strengthen the key role communities have in contributing

to promoting healthy lifestyle choices, tackling issues of loneliness and isolation, prevention and potential harm (safeguarding) - for example, through a better understanding of mental health or dementia

- work together with the voluntary and community sector on 'Community Impacts' to build on existing good work and explore creative opportunities for the future, including on the four key priorities identified⁸
- support opportunities for social action and innovation, through schemes such as the RecommendMe app and GoodGym, and activities that bring different generations together
- build on the joint Housing and Adult Social Care Scrutiny Panel work and look to develop innovative housing options. This includes using our housing workforce to help reduce isolation and tackling under occupancy of housing with schemes like Homeshare (see page 9)
- promote active lives through developing a new sports and physical activity strategy in Camden, looking for broader opportunities to explore the role of libraries and the home library service and supporting access to the range of cultural opportunities in Camden
- create age and disability friendly environments: exploit opportunities through new developments, including the Council's Community Investment Programme, to deliver our strategy. For example, continue to design new accommodation to a lifetime standard, housing that is adapted as our residents get older and building ground-floor units that are disability-friendly.

The **Green Gym** - which Camden's parks team runs with Conservation Volunteers - brings people together in our green spaces to get active by carrying out conservation works.

⁷ Making Every Contact Count (MECC) is a whole system approach to reducing inequalities and promoting early intervention and prevention by capitalising on the thousands of conversations that staff are already having every day across the system. The MECC training equips staff with the skills, knowledge and confidence to raise issues appropriately, give advice and signpost to further support

⁸ Community Impact Priorities currently are Rough Sleeping, Mental Health, Youth Offending, Supporting People in the Community

Kilburn Older Voices Exchange – a group of older people, service users, family carers and volunteers, which aims to improve the quality of life for older people in Kilburn, West Hampstead and beyond. They are involved in a number of projects to promote wellbeing, e.g. successfully lobbying for increasing community seating in areas that enable people to have a rest on route to the shops, or stop for a chat.

Help when you need it

When there are times of crisis, we will work with people to help them to regain control of their life and put in place tailored foundations to help prevent another crisis. There will be other times when short-term support is needed - for example, to help people with learning disabilities or mental health needs into employment.

The short-term support we offer will include:

- an integrated and timely early help offer with health colleagues, such as reablement and therapies to support people to get back on their feet
- using the latest digital technologies to help people stay independent - for example, using smartphone-based applications, sensors in the home and technology that helps connect people who are lonely
- better identification and management of physical health issues for people with learning disabilities, including making sure that more of our residents with learning disabilities are known by GPs and have good health plans in place
- earlier access to help for people experiencing mental health conditions, including support for people with autism, and enhancing primary care mental health services
- support for people to remain active during the day, including into paid employment and training opportunities to help build resilience, making the most of third sector resources and links with employers to support people in their employment journey.

Mr and Mrs A are in their seventies. Their only son lives in Australia but keeps in regular contact by Skype.

Mrs A has chronic obstructive breathing disorder, rarely leaves her home and does not like her husband to go out without her due to anxiety about her health. Mr A currently manages all of the household tasks, provides support with personal care and takes his wife to all her medical appointments.

Mr A contacted adult social care in distress as he was in crisis and felt that he needed to stop all of his caring activities and move out. A social worker visited the same day and spoke to Mr and Mrs A. She established that Mr A wanted to continue living with and caring for his wife but was finding it very difficult not to have any time alone. He is a keen bowls player and really misses playing and socialising after a match. Mrs A said that she wanted someone with her all the time due to health worries. The social worker arranged to visit again over the following days to talk through options with Mrs A and keep her company, meaning Mr A could go out on his own and have a much-needed break.

The social worker found out that Mrs A would like to get out a bit more herself and would also like people to visit her. They discussed Mrs A's interest in art and, through an internet search, found there was a local art group that her husband could drop her off at. Mrs A mentioned that she had friends that she had lost touch with and could contact and also a niece who lived locally. She was also willing to trial assistive technology to see whether having this would help her feel sufficiently confident to be left alone.

The immediate response by the social worker to the crisis and the time she was able to spend with Mrs A meant that the traditional response of putting in ongoing respite care was not required and Mr and Mrs A were able to use their strengths and informal support networks to improve their quality of life.

Ongoing support for when you need it

We will work closely with people to meet their long-term care and support needs. Our aim is to identify what they want to achieve and explore what strengths, informal support networks they may already have, and what may exist within their local community that they would like to get involved with. We will establish what people's eligible needs are and how best to meet these - for example, encouraging more 'direct payments', independent living and 'shared lives' options.

We will develop an integrated approach for people with more complex needs – for example, creating multi-disciplinary teams that will bring together GPs, social workers, homecare workers, community nursing, therapists and palliative care services which will co-ordinate a better response.

We will develop the adult social care provider market through health and social care commissioning to:

- promote diversity and quality in the care and support market, including embedding quality assurance and good employment practices
- ensure there is a range of provider services, shaped by the demands of individuals, families and carers and self-funders, that offers value for money
- develop the personal assistant market
- achieve a more consistent pricing structure for residential and nursing home placements across the five North Central London councils (Camden, Islington, Haringey, Barnet, Enfield) through a shared pricing framework and e-procurement approach.

Mr M is in his nineties and has a heart condition, mobility issues (uses a walking aid), and is in the early stages of dementia.

He lives at home and spends time with his friends who bring food round and play cards with him. His son visits weekly to keep him company and support him with medical appointments and finances.

Using a traditional care management approach, Mr M would have been assessed for services and received formal care from an agency arranged by adult social care. He may also have been referred to a day centre to alleviate social isolation.

Using a strengths-based approach, Mr M's social worker established that Mr M would rather choose his own personal assistants and so arranged for him to receive direct payments, managed by his son. This meant that Mr M had more control over his care and could choose people with whom he could establish a good relationship. Occupational therapy and assistive technology input made the home as safe as possible, reducing the amount of care required and therefore increasing Mr M's independence.

As Mr M loves to get out and has an interest in history, the Community Connectors have linked him into the local historical society. Mr M's friends and family, adult social

care and community organisations are all working together to make sure that Mr M is as independent as possible.



Help you to stay safe

As now, when people are at risk of abuse or harm, we will support them to help keep them safe. Our safeguarding partnership aims to mobilise the community to report possible abuse and help protect people by connecting them to their communities.

We will continue to work closely with the Council's Community Safety Partnership on issues around hate crime, mate crime, tackling scams and work with victims of domestic violence and abuse.

We aim to respond to safeguarding concerns so that people who have experienced harm and abuse are involved as much as they want to be and feel they are empowered and supported to get the outcome they want.

We will continue to offer support to help people retain their independence and exercise choice and control over the key decisions in their lives.

Mr B is a 47-year-old man who has a learning disability, enjoys living alone and is very house-proud.

He was visited by someone offering to pave over his front garden, handed over £4,000 in cash the next week and never saw them again. His social worker raised this as a safeguarding concern with Mr B's consent and encouraged Mr B to call the police, which he did. The social worker made sure that Mr B was involved in all discussions and that what he wanted was central to decision-making. Mr B decided that he wanted to stay living at home and not move into a 'safer' environment such as supported living but he also did not want to lose any more money.

With Mr B's agreement a range of protective actions were taken - for example, a smoke alarm, door chain and spy hole were installed and valuables were treated with

'smart water'. Mr B was involved in all aspects of the safeguarding decision-making and achieved what he wanted, which was to feel safe, less at risk of financial exploitation and be able to stay at home. Mr B said that it was important that he was able to talk things through with the social worker.

5. How we will work together to deliver our ambition

Our plans build on existing partnerships with the voluntary and community sector and the joint work of the Local Care Strategy. Together with NHS Camden Clinical Commissioning Group (CCG), we have agreed a series of key activities that will deliver the ambition set out here and in the Local Care Strategy – based around the following work programmes.

Strengths-based practice

We will be working with teams to embed strengths-based practice across our social care workforce using a specific '3 conversations' model, developed by Partners 4 Change⁹. We will test this approach through a number of innovation sites starting in November 2017 and aim to implement it fully by November 2018.

This model focuses on working with people on what matters to them, what needs to change for them to live independently and regain control of their life, and how we can help them to make the most important things happen.

Supporting people at home

As part of the Local Care Strategy, this theme focuses on enabling people to remain at home for longer, reducing admissions to hospital or care homes, and helping people return home quickly. We aim to develop integrated teams that bring together health, social care and community resources at a neighbourhood level. Homecare will operate in neighbourhoods with an outcomes focus and there will be more use of technology to enable social contact and

to help people to live more independently at home.

Mental health services are also developing neighbourhood hubs with enhanced primary care support so that people can access skilled support earlier to address their mental and physical health needs before they escalate.

We will develop floating support for people with learning disabilities so it is more flexible to changing needs, is sufficiently specialist to support those with more complex needs, and more effective in helping people to develop their confidence and independent living skills.

We aim to support carers to sustain their caring role, ensuring that effective and accessible services are in place.

Supporting people in the community

As part of the Local Care Strategy, this theme aims to support residents to be more connected in their local communities by widening access to mainstream and universal employment, education and leisure opportunities.

This includes redesigning day services and the significant development of Camden's first Centre for Independent Living, run by disabled people and based at the new Greenwood Centre. The Centre for Independent Living will strengthen, including through co-location and integration, links between employment and support services for disabled people and we will develop a new carers' hub.

We will also continue to develop information and advice, building on Camden Care Choices, review advocacy and interpreting provision and work with local residents to improve understanding about how to improve the accessibility and reach of services – including a focus on building a dementia-friendly Camden.

In mental health, we will continue to shape the Resilience Network, which will be central to ensuring that people with a range of mental health needs access employment and training opportunities, build connections with their communities and have the chance to contribute.

Camden Care Choices - a powerful online resource for residents, carers, professionals and anyone else looking for information about social care in Camden. It includes a directory of services and activities, alongside information on resources in the community and equipment available to help people stay independent at home. The site is designed to be accessible and viewable on a range of devices. We are developing the site further to ensure it links to other sources of information on health and social care more effectively. Camden Care Choices fully supports the strengths-based approach by providing up to date information on community resources.

camdencarechoices.camden.gov.uk

Housing and accommodation

This theme will adopt a multi-agency approach to assess the current and future needs of the people of Camden. We aim to develop innovative housing options to meet those future needs and draw upon the learning from the Housing and Adult Social Care Scrutiny Panel¹⁰.

We will:

- introduce a discretionary Disabled Facilities Grant policy to aid a more flexible approach
- promote independence and choice by developing a range of new supported living opportunities for residents in the borough, using the latest technologies, and reducing the use of out-of-borough residential care placements

¹⁰ Housing and Adult Social Care Scrutiny Panel – The panel was established by the Housing Scrutiny Committee in recognition that Camden's population is ageing - to explore what needs to be done to support Camden's population in terms of their housing needs – with the aim of ensuring that people can remain independent, healthy, well-supported and in their homes for as long as possible.

- make better use of the range of existing housing options to help people remain independent in their own homes for longer
- ensure residents with health and social care needs who do not need specialist housing are able to access independent housing options within the borough
- make best use of opportunities for new developments through our regeneration and planning policies and to provide new accommodation options in the borough
- explore further the opportunities through Shared Lives schemes to enable people with learning disabilities or mental health needs to live in family environments, or for older people to access alternatives to traditional models of respite provision
- explore ways to help older tenants remain in their own home (provided they are not under-occupying significantly) e.g. through adaptations or alternatives such as the Homeshare scheme (lodgers provide help around the house but also companionship) and drawing on networks of neighbours to help.

Digital innovation

We aim to harness the latest digital and 'assistive technologies' to transform care services and to help people to stay independent for as long as possible.

We will review our current technology provision across health and social care to inform our future digital strategy with the aim of achieving a whole systems approach to innovation.

For example:

- innovative technologies to support carers
- apply new solutions, such as using smartphone-based applications
- use technology as a way of connecting people who may otherwise be at risk of social isolation

- use technology to enable people to self-monitor their own health
- use care technology within homes to enable people to live independently, where suitable, as an alternative to direct care
- enable people to interact with our services through digital channels
- further develop integrated electronic records
- support our plans to improve access to information, e.g. developing online care accounts available through the Camden Account
- maximise the opportunities enabled by partnership working with neighbouring boroughs through our ICT shared service arrangements.

Building a confident workforce

For a good quality, sustainable health and care system, we need to attract and retain staff with the right values, skills and expertise. Using a strengths-based approach requires confident practitioners who are able to build strong relationships with people they work with, and who understand the local area and the range of communities within it.

Hopscotch Asian Women's Centre

provides a range of services and activities including: a homecare service to black, asian and minority ethnic (BAME) communities, recruiting and training staff from local communities who speak the same community languages and providing culturally appropriate care; individually tailored and culturally sensitive employability support for disadvantaged BAME women.

We are committed to having a well-trained workforce who have the opportunity to access a range of attractive career pathways and we will provide opportunities for learning and development for staff throughout their careers.

For example, through excellent supervision, ensuring access to regular research and reflective practice sessions, provision of a comprehensive training programme and shadowing and mentoring opportunities.

Camden has invested in our health and social care provider market through a commitment to pay the London Living Wage and implement the Ethical Home Care Charter. We will continue to work with local businesses to promote good working practices.

The health and care sector plays an important role in Camden's economy and we want to ensure it continues to grow and offer good career opportunities for local residents.

The Council aims to stimulate innovation and support economic growth and will explore having some commercial space at the Greenwood Centre to enable local businesses to innovate and develop new forms of care and health technology.

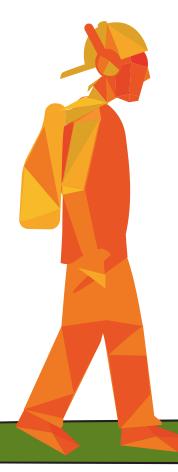
The strengths-based approach applies beyond the role of the Council's adult social care service, and we aim to work with partners to create a shared culture of building strengths and resilience.

How we will measure and monitor success

We will measure our progress through developing an Outcomes Framework (Appendix A, see pages 18 to 19) with performance measures aligned to this strategic plan. We expect this framework to be further informed by our transformation work and we will therefore review and update it to reflect this.

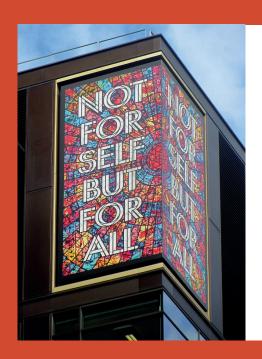
During January to March 2018, we will further develop the Adult Social Care Transformation Programme, which is overseen by the Adult Social Care Transformation Board.

We will monitor progress through staff and resident feedback and engagement opportunities provided by, for example, the Citizens' Assembly, Ageing Better in Camden, the new Centre for Independent Living, Camden's Disability Oversight Panel, Planning Together and VoiceAbility.



		Supporting people, connecting communities		
	Appendix A. Living and ageing well in Camden - outcomes framework			
Seeing people as experts in the		elp you to remain independent, safe and part of your local community." their own lives, we aim to prevent, reduce and delay the need for formal pendence by focusing on the potential of individuals and their local		
Strategic goals	Outcome	Measure		
Help you to stay well and connected	Residents are able to access information, advice, guidance, basic equipment or suggestions of local activities and community services, healthcare, housing and transport to maintain their independence, improve their wellbeing and live more healthy, active lives.			
	To improve access to information and advice, ensuring it is as accessible as possible; improve suggestions to community-based prevention and support.	 Proportion of contacts signposted to other providers Proportion of contacts signposted to other providers who return within 6 months of contact Visits to Camden Care Choices (web pages) Number of pieces of equipment issued by the first contact team. For development: Proportion of people satisfied with the outcome at First Contact The effectiveness of Camden Care Choices The effectiveness of use of equipment in meeting outcomes. 		
	To improve early identification and management of health issues for people with learning disabilities.	 Proportion of people with learning disabilities registered with a Camden GP who have received a learning disability health check Proportion of the above who have received a learning disability health check and have been provided with a health action plan. 		
Help when you need it	Residents regain their independence and continue to live independently, with foundations in place to help prevent a crisis, maximising strengths and local networks of support, as well as maintaining their role within their local community.			
	To ensure wherever possible that people access reablement or enablement services following hospital admission – to reduce delayed transfers of care and avoid admissions to residential or nursing care.	 Delayed transfers of care from hospital per 100,000 population Delayed transfers of care from hospital which are attributable to adult social care per 100,000 population Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation service Proportion of new older people (aged 65 and over) discharged from hospital to residential and nursing care, as opposed to long-term community care. For development: Proportion of people in receipt of short-term services satisfied with the outcomes, and/or the quality of services. 		
	To support people to remain active during the day, provide support into paid employment and identify training opportunities to help build resilience.	 Proportion of adults with learning disabilities in paid employment Proportion of adults in contact with secondary mental health services in paid employment. 		
	To support people with learning disabilities to develop new skills and become more independent.	For development:Number of people with learning disabilities accessing short-term floating support with a skills development outcome.		
	People with learning disabilities have access to healthcare interventions when they need them.	The wait from referral to Camden Learning Disability Service healthcare treatment is less than 18 weeks.		

Strategic goals	Outcome	Measure	
Ongoing support for those who need it	Outcome: Residents with ongoing support needs live as independently as possible with individually-tailored solutions that promote their strengths and maximise community assets.		
	To increase the use of assistive technology.	For development:To measure the extent and effectiveness of use of assistive technology.	
	To promote choice and control through increased take-up of direct payments for those residents with ongoing support needs.	Proportion of people using social care support who receive direct payments.	
	To promote independence by developing new supported living opportunities for residents in the borough and reduce admissions to residential care.	 Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population. 	
	Relative reduction in the number of residents needing long-term ongoing services.	 Number of people who receive long-term ongoing services Proportion of people who use services who find it easy to find information about services. 	
	To improve the proportion of people who use services who have control over their daily life.	 Proportion of people who use services who have control over their daily life. For development: 	
		 Proportion of people who were asked during their assessment about the outcomes they wanted and those outcomes were fully met. 	
	To ensure people experience the best outcomes through the most cost-effective support.	 Proportion of adults with a primary support reason of learning disability support who live in their own home or with their family Proportion of adults in contact with secondary mental health services living independently, with or without support Proportion of people receiving residential and nursing care against those receiving long-term care at home Proportion of people receiving long-term support who have had annual review. 	
	To support carers to sustain their caring role.	Overall satisfaction of carers with social services.	
Help adults stay safe		experienced harm or abuse are empowered and supported to and have control over key decisions.	
	Safeguarding practice is person-centred and focused on the outcomes that the person wants to achieve.	 For concluded safeguarding enquiries where outcomes were expressed - the proportion where outcomes were fully-achieved Proportion of people who use services who feel safe. 	
Use of resources	Outcome: Effective use of reso	urces is evident and quality is maintained	
	To ensure there is a range of provider services, shaped by the demands of individuals, families and carers (and self-funders), that offer good quality and value for money.	 Take-up of the Care Certificate Proportion of regulated services (residential, nursing care and homecare) used by the Council which are rated good or above. For development: Evidence of shift of balance of spend. 	
	To develop a confident workforce and improve staff recruitment and retention rates to permanent posts.	 The proportion of agency staff against permanent workforce. For development: Measure of reflective / strengths-based practice. 	



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