· 1	•	Impacts to date
	statement - September 2015	
o promote swellbeing revent care and	<ul> <li>wellbeing, supported by the Principal Social Worker role and a number of professional lead staff.</li> <li>The Community Agents service commissioned primarily to support older people in rural areas also identify carers who can benefit from support.</li> <li>Through direct face to face contact they can provide people with</li> </ul>	
	promote wellbeing revent care and	Adult Services have updated the Council website to promote care and support, and signposted services.     We have a workforce who understand Care Act duties to promote wellbeing, supported by the Principal Social Worker role and a number of professional lead staff.     The Community Agents service commissioned primarily to support older people in rural areas also identify carers who can benefit from support. Through direct face to face contact they can provide people with information and support to access appropriate agencies, whilst helping them to make informed choices. They link in closely with Cheshire East Councils Local Area Co-ordinators in identifying local day opportunities and support groups.     Social Care Local Area Coordinators have developed strong links with community hubs and cross feed information and advice developments regularly as well as collating information on alternative services in the community to underpin prevention and assist individuals with their wellbeing needs.     Think Local, Act Personal events have taken place to promote relationships and public engagement on social care issues.     Work with health colleagues planning for integrated teams has improved connections around wellbeing.     Adult Social Care have improved links with Public Health in promoting physical and emotional well being.     The Life Links project delivered by Peaks and Plains is a planned, preventative outreach service, targeting people and their carers, who may

		and making referrals to local non-statutory services (including commissioned services) they look to improve health and wellbeing, therefore preventing unnecessary access to health and social care services.	
2	A duty to provide an information and advice service about care and support	<ul> <li>through the third sector organisation Advice Cheshire East , which along with the Cheshire East Council improved website and revised factsheets provide information and advice.</li> <li>A directory of resources has been published for those needing guidance on care, health and wellbeing services.</li> <li>Plans are underway to ensure we have a fully connected ICT marketplace</li> </ul>	There has been approximately 700 enquiries to the Care Act Help Line in relation to universal services between April 2015 and September 2015 with the majority being visted face to face.  Other methods of enquiry included telephone and email with an additional 784 web hits suggesting an element of self help.
3	A requirement to carry out an assessment of both individuals and carers wherever they have needs, including people who will be "selffunders", meeting their own care	<ul> <li>documents and trained all staff through e-learning and dedicated, focused training sessions to ensure all staff apply the national minimum eligiblity threshold for support.</li> <li>A Transition Coordinator has been appointed whose role is to ensure that transition for children and young people with disabilities from Childrens</li> </ul>	6,135 individuals were assessed and a further 832 Carers received a Carers Assessment in their own right during the first 6 months. 19 carers received funding support through a Direct Payment in order to support them in their caring duties. The Council currently commissions care services for approximately 200 self funders which supports their choice.

costs.	Practice guidance for staff has been written which sets out the offer to	
	carers and what is available at each stage of the assessment process. This	
	includes information about accessing early intervention and prevention	
	services, the carers' reablement service, carer support groups and Direct	
	Payments for carers.	
	Joint events for social care staff and carer support services have been held	
	at which the offer to carers has been promoted and developed.	
	A review on carers assessments practice and processes as well as	
	promotional information has been undertaken to inform improvements	
	on engagement with Carers during the second half of the year. A Carers	
	Panel has been established to consider carers funding requests and to	
	ensure links are robustly made with universal services or reassessment	
	needs for the person requiring care and support services.	
	Adult Social Care had expected a larger number of carers to come forward	
	for assessment, and steps are being taken to address this through further	
	training, care provider events, improved communications, engagement	
	with community support groups, the Carers Reference Group.	
	A dedicated Mental Health worker is undertaking carer assessments	
	within the mental health services. We are piloting this specialist role for	
	carers' assessments to see if this offers greater consistency and value to	
	carers. Early indications are that this approach is successfully identifying	
	an increased number of carers but this initiative will be evaluated properly	
	at the end of this financial year.	

- A duty to facilitate a vibrant, diverse and sustainable market of care and support provision and to meet people's needs if a provider of care fails.
- A consultation with the care market has begun to address issues facing the market such as the introduction of the national living wage, pension reforms and recruitment and retention challenges within the care sector.

  CEC has established a dedicated team to undertake quality assurances visits to all contracted care provided but with an initial focus on the care home market. A
- Adult Social Care has developed a joint approach with the CCG's for contract monitoring and quality assuring commissioned services to ensure services are meeting peoples needs.
   result CEC is now undertaking regular visits to care providers. Providers have a minimum of one quality assurance visit a year. Where improvements / actions
- Adult Social Care and the CCGs have also developed joint procedures and processes for provider failure. Adult Social Care also liaise closely with the CQC on any concerns regarding registered provider services to ensure a joined up response. In addition there is a focus on developing effective preventative and early intervention services to reduce the reliance on traditional commissioned services to allow people more choice with a focus on reablement to support individuals to maintain their independence.

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This approach also allows CEC to work with providers to address any concerns that may be identified as part of their CQC inspection and to offer assurances to senior managers, residents and family members that where there are concerns that appropriate actions are being taken to address them. Since the introduction of the QA Team the number of providers in default and at risk of closure or contract termination has reduced from eight in September 2014 to none in December 2015 and there has been no further closures in this time.

5	A duty to apply the national minimum eligibility threshold for support – a minimum level of need which will always be met in	staff apply the national minimum eligiblity threshold for support which extends into addressing moderate needs and promoting preventative support.  • Staff have access to robust information and dedicated reference resources	There will be a focussed piece of work on reassessment in the first 3 months of 2016 with a remit to strengthen practice and promote personalised approaches across the services.
6	every council area  A requirement to offer a universal	,	All customers wishing to defer charges, not just the 23 new users under The Care Act are provided with regular
	"deferred payment" scheme, where people can defer the costs of care and support set against the value of a home they own	property assets prior to the introduction of the Care Act. The  Departments' Deferred Payment Policy has been reviewed and consulted on. There were 150 existing customers who had entered into a deferred	information on their deferred charges and interest charge figures. One individual has been able to access the Council's discretionary policy to defer charges for community based services.
7	A duty in some cases to arrange "independent advocacy" to facilitate the involvement of an adult or carer in assessing needs and planning for	<ul> <li>the Council's contracted services to support individuals with their assessment and support planning</li> <li>A further 335 advocacy support services have been provided via general</li> </ul>	353 individuals have been supported through advocacy services. However, due to the lower threshold under The Care Act for advocacy support a higher number was anticipated. Work is being undertaken to better understand this.

	care.	been issued to support front line staff in application of advocacy services.	
8	A duty to provide social care support to people in Prisons and bail hostels	Social Care has undertaken 14 social care assessments at 30 September 2015 and one individual with significant care and support needs has been found to be eligible. Some prisioners have also been eligible for	The Council funds services in Styal prison which provides care and support to a number of prisoners both with eligible needs and with identified wellbeing needs. The Carers Federation are continuing to work with Styal in order to promote access to this service for prisoners.
9	A duty to strengthen Safeguarding Adults Boards and to make safeguarding 'personal'	<ul> <li>Adult Social Care have introduced an independent Safeguarding Board Chairperson.</li> <li>Training has been extensive through professional leads to ensure the social care workforce fully understands and applies in practice the requirements of Making Safeguarding Personal.</li> <li>Policy and processes have been reviewed and implemented, including the introduction of a practitioner toolkit and regular multi-agency safeguarding forums and governance meetings.</li> </ul>	722 safeguarding enquiries have been dealt with from April to September 2015.
10	A responsibility to embed the right to choice through care plans and personal budgets	planning and personal budgets, as well as developing a comprehensive carers offer.  • Support is available for individuals wishing to direct their care and support	The Local Area Coordinator role has been identified as a key resource to ensure that community assets are maximised. Additional LAC resources have been introduced to build on choice and support independence.

preventative services may be positively impacting resulting in reduced	
need for care and support the option of a Direct Payment for individuals	
will feature strongly in the reassessment work planned during January to	
March 2016.	