



Draft Universal Adult Social Care Information and Advice Strategy 2010 – 2015 Consultation Event 1st August 2011

Introduction and Aim

Warrington Borough Council has produced its draft Universal Adult Social Care Information and Advice Strategy to set out what arrangements will be made to ensure adult social care information and advice is available to all and easily accessible. The strategy has seven inter related priority action areas, one to one assistance, hard copy information, people who fund their own care and support, website My Life, My Way, digital inclusion, marketing and training. The Council wanted service users, carers and Third Sector organisations views and comments in order to inform the development of the strategy.

The aim of the workshop was to gather views from service users, carers and representatives from Third Sector organisations who work regularly with service users and carers. The attendees were asked their thoughts on:

- Have the correct priority action areas been identified?
- What do you think are the main issues in implementing the strategy, thinking about the seven priority action areas?
- What sort of support could you provide to the development of a universal adult social care information and advice service?
- Any other issues?

27 people attended the event, broken down into:

- 13 service users and carers
- 14 representatives from Third Sector organisations who work regularly with service users and carers

Feedback from the Event

Have the correct priority action areas been identified?

Gaps in areas:

Multidisciplinary Working – or more emphasis on this in the strategy

Support Brokerage – people still struggle with jargon. Somebody knowing what is out there and able to advise ‘clients’ of this. This would ensure a degree of choice.

Needs to expand what is information and advice to include people’s rights, as well as service, accessibility and choice.

What do you think are the main issues in implementing the strategy?

- Continuity and Consistency

Continuity of information can’t depend on who you talk to. There is no consistency in support; there is a need for a named person/ organisation to keep the information updated. Need consistency of information across all categories i.e. one to one, website and hard copy information, and across all agencies. Need to be proactive in keeping the information up to date again



across all categories i.e. one to one, website and hard copy information. There is a need for a common standard to refer people to other services.

- Making it a Universal Service

Making the service universal, including all relevant agencies, schools and the Third Sector. Services need to know about the wider Third Sector and what support it can offer.

The Fire Service offers many services including home visits; need to use these contacts to help with the service

GP Surgery staff/ Commissioners need to be involved in the service. Use the CAB services in GP Surgeries. It could be a requirement of WBC contracts to provide information.

Schools need better information and advice to support children into adulthood. Do schools have an information and advice worker? Universities should include information and advice as part of courses. Utilise student skills as information giver.

Need to work more with family members and carers. Expert by Experience courses are beneficial to service users.

- Capacity

The Capacity of services creates problems, services don't promote themselves due to lack of capacity. Need to recognise that some services might not still be here when the strategy is being implemented, due to cuts in funding.

- Neighbourhood Boards

Better information about Neighbourhood Boards and areas are needed, little knowledge of them by the public. Need to promote themselves and their remit more. They are not seen as being able to give information/advice to people. There could be Information Champions in the Neighbourhood areas, but would need promotion and training.

- Information

Need to support people to understand the information and the consequences not just provide the information.

Need to capture what information outlets are out there already.

There is a lack of recognition and support for people with rare conditions.

Information/advice given to carer/client/ patient needs to be recorded.

Use a Quality Mark e.g. the Information Standard

Use of terminology is an issue – no jargon should be used in information

Information given should be rapid and relevant whether the information is provided by one to one assistant, hard copy or by the website.

First assessment of client/ patient vitally important to providers, sharing of intelligence

- Partnership working

Transition from Children to Adult Social Care – poor information and advice is available, this was highlighted several times.



Priority Action Areas

- One to One Assistance

Need to have a good relationship with the person you are having one to one assistance with. Key workers don't know what is out there, information wise. Need a commitment to get back to people. One to one assistance is essential for most vulnerable

- Hard Copy Information

Who will do the audit? There is a vast amount of information. It is best to have a good system in place rather than undertake an audit. Costly to have hard copy information and it goes out of date very quickly. Need different formats including easy read. Also need facility (smarter web based product) to produce hard copies, and help or link to contact a 'person' if you are struggling with the web. Need to link to national information e.g. Age UK, Carers, CAB, MENCAP etc.

- People who fund their own care

Continuing debate around capacity, there is conflict in information. Care Managers/ Social Workers still don't know the role of Warrington Disability Partnership in Direct Payment support. There is a low uptake in personalised budgets for mental health service users. Need more information about people's rights and their rights of appeal. Healthcare entitlements also need more promotion, what people are entitled to, including promotion to private sector care homes and family and friends. People need more confidence and information on the quality of service provision – Care Quality Commission Reports (are these in the public domain to make informed choices?)

- Website – My Life, My Way

Postcards do not have publication or review dates on them, the font size is too small and they are not easy read. The website is still confusing to use, not easy to navigate. More discussion with service users and potential service users is needed. Who monitors/ checks the services that are on the website and how often? There was a concern that older more vulnerable people do not have access to the internet and also are not actively involved in the community, so don't access Libraries etc. The website is good around mental health i.e. language. An alert system for the website was thought to be a good idea, so if new services are put on the website or changes are made to other services people will be alerted. It also keeps the website in people's mind if they are getting regular updates. Could referral forms be put on the website for services, so they can be downloaded?

- Digital Inclusion

By when do the council expect this part to be achieved by? What work is already underway for digital inclusion? Does this cater for people in crisis?



Access to affordable personal ICT equipment is a strong statement with big implications. There will be financial issues.

This part of the strategy should link into WBC's Assistive Technologies Strategy.

Digital Inclusion could be developed to Skype into meetings/ forums for people who find it difficult to attend different meetings. Also the use of texting software could be developed. Digital inclusion could also be used on home visits by various agencies.

- Marketing

Needs to involve the public in the marketing strategy and use Social Networking Sites. Could also use schools, e.g. children designing logos etc, get the children interested but also promotes to the wider family. There were concerns with how the older generation would get the information about the service, needs to be widespread promotion. Need to have common marketing that all partners (including Third Sector) feel secure enough in to sign up to. How will HealthWatch's new functions of providing information and advice fit into the service and fit it to the marketing strategy?

There needs to be marketing about changes in behaviour as well as marketing the service, particularly for socially isolated and vulnerable people. Need to sell the benefits of the service.

- Training

Who are relevant staff? And at what level will the training be targeted?

Training should extend outside of WBC and Social Workers to include other partners and the Third Sector. Training could be offered to carers/ relatives to support service users. There were concerns with the cost of training and staff implementing what they have learned.

Training should be motivational and vocational as well as 'fact based', service users could be trained to deliver some training.

Training of staff is needed to embrace information/ advice beyond service users – to raise public awareness as potential service users.

What sort of support could you provide to the development of a universal adult social care information & advice service?

BHA – Care Navigation post, needs to fit into strategy. BHA are currently going through the Information Standard, use experience of this, could fit into strategy?

Multi Cultural Forum - Offer training in different languages

Mental Health Forum could offer support

Warrington Disability Partnership could help and support to link the Warrington Community Directory (WCD) database to the Warrington Access Guide

Neighbourhood Areas act as information hubs

The Third Sector to share all their information outlets/ systems with the Council. Different groups could promote and advertise the information.

Support service users to access information, then cascade the information to others. Voluntary sector need to actively seek out training and alerts to



promote best practice for service users. Set up a working group for the Third Sector.

Key points raised were:

- Make the strategy Universal, everyone needs to be involved
- Need consistent information – joined up working within the statutory and voluntary sector
- Choice – people find it difficult to make choices in crisis
- A blanket information service is not enough, need to support people through
- Use of a Quality Standard for the information
- Children and Adult Social Care Services need to work together in particular Transition
- Better understanding of the Neighbourhood Boards is needed
- Alert system for My Life, My Way website
- Training of staff, first point of contact, also offering training to other partners and the Third Sector
- Behavioural change within the public
- Set up a working group for Third Sector
- Marketing – needs to involve a wide range of individuals and organisations working together. A consistent marketing approach needs to be agreed by all agencies