

Overall summary

Local authority rating and score

London Borough of Hounslow



Quality statement scores

Assessing needs

Score: 2

Supporting people to lead healthier lives

Score: 2

Equity in experience and outcomes

Score: 3

Care provision, integration and continuity

Score: 3

Partnerships and communities

Score: 3

Safe pathways, systems and transitions

Score: 3

Safeguarding

Score: 3

Governance, management and sustainability

Score: 3

Learning, improvement and innovation

Score: 3

Summary of people's experiences

Most people who used services felt safe. According to the Adult Social Care Survey 69.4% of people who used services were able to access information about support easily.

We did however receive mixed feedback from people who used services about their experiences of dealing with Hounslow Council.

Some people who used services, found that they could easily access the local authority's care and support services and when they did, they had no concerns about the timeliness of assessments and care planning. They told us their assessments were person-centred, reflected their preferences, what they wanted to achieve and how they wanted to live. We also heard from some people who did not feel listened to and who told us their assessments did not take account of what they wanted to achieve or what was important to them.

Most people who used services had choice over their care and support. Some people we spoke with who used services were satisfied with the quality and availability of support. Uptake of direct payments as a means of receiving support were low for both people with eligible care and support needs, and carers.

Preventative services provided by the council had a positive impact on well-being outcomes for people who might have care and support needs. We found that people who used Community Access Services were very satisfied with them and felt enabled to live fuller, more engaged, and more independent lives because of the support they received.

Most people had positive experiences of hospital discharge. We found that it was timely, safe, and effective. Interventions such as reablement and short-term packages of care, resulted in a better than average proportion of people being able to remain independent for longer when they returned home.

By contrast, people in the community did not always get a review of their care needs or receive Occupational Therapy assessments and the provision of equipment or adaptations to support their independence in a timely manner.

The feedback we received from carers was mixed and generally less positive, although some people did report good experiences. Most carers felt safe, but the proportion was lower than the national average. One carer reported that the social worker was responsive and supportive. Conversely, many carers found it harder to access information about support. According to the Adult Social Care Survey the proportion of carers able to access information about support easily, was markedly lower than the England average at 49.1%. The rate of carers assessments was low, and one person told us the assessment process was 'longwinded'. Another said they did not receive any support from social services. Carers were less likely to have a package of support and very few carers received direct payments. Combined with a shortage of flexible, responsive respite, Carer's ability to work, rest and to have choice and control over their lives were significantly impacted.

Summary of strengths, areas for development and next steps

People's safety was a key priority for Hounslow. The local authority had robust processes to assess and manage risk, and to ensure people were safe, pending full completion of Care Act assessments or reviews. People awaiting assessments were contacted regularly to check in, and where appropriate, short-term care provided to bridge needs until a full assessment could be completed.

Safeguarding concerns were reviewed quickly and prioritised according to clear criteria. According to the Adult Social Care Survey (published October 2022) 76.65% of people in Hounslow who used services felt they had control over their daily life and 63.64% were satisfied with their care and support.

Carers in Hounslow felt less well supported than people who used services. They were less likely to have had an assessment, found it harder to access information that they found helpful, and were less likely to have services to support them in their caring role.

The proportion of annual reviews which took place was low compared to the England average, and to the Care Act 2014 requirement that care and support plans be kept under review. Hounslow told us they prioritised assessments over reviews, but review performance was monitored and that they acted when it fell below 60%. The local authority prioritised based on risk and specific circumstances.

There were clear pathways and processes to ensure people's support was planned and co-ordinated across different agencies and services, particularly in relation to timely, safe, and effective hospital discharge.

There were no notable delays in assessments for people awaiting discharge from hospital, or out of hours in emergency situations, but there were longer waits for people in the community needing occupational therapy assessments and equipment.

Uptake of direct payments in Hounslow was lower than the England average for people who use services, and particularly low for carers.

Hounslow had a good awareness of the areas needed to develop and improve. They had recently developed a detailed Improvement Plan against which progress was regularly monitored, to address the shortfalls they had identified. These included assessment of and support for carers, reviews, access to Occupational Therapy and use of direct payments.

Joined up and integrated commissioning across health and social care worked well. Hounslow used data to understand its population and their needs and to target resources. Commissioning used pooled budgets for people with mental health care and support needs which was a creative approach and reduced demand on inpatient hospital treatment.

The alignment of Public Health under commissioning led to better joined up thinking about preventative models, which promoted independence, and reduced or delayed the need for care and support.

We found there were opportunities for Hounslow to further improve outcomes for people by ensuring what and how it commissioned was in line with best practice.

Contract management practice kept people safe but could have been used more proactively to monitor the extent to which people achieved person-centred outcomes.

Partnership working with other neighbouring boroughs, and health partners across a range of services was effective. Hounslow was a key member in the local Borough Based Partnership, which worked well, and was ambitious to deliver good, equitable outcomes for the borough.

Staff who worked at Hounslow were proud to do so, and passionate about serving the local population. The workforce was broadly representative of the local community.