

# Supporting people to lead healthier lives

## Indicative score:

**3 - Evidence shows a good standard**

## What people expect:

"I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally."

"I am supported to plan ahead for important changes in my life that I can anticipate."

## The local authority commitment:

We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.

## Key findings for this quality statement

Independence and prevention are key themes within the Joint Strategic Needs Assessment and other strategies that are developed from that, including the Joint Health and Wellbeing Strategy and Better Lives Integrated Care Partnerships Strategy. The aims of the strategies and the focus on independence and prevention were well understood by staff and leaders.

The Lincolnshire County Council website provides information about the services provided and about the various ways in which people can contact the local authority. There are links to the Wellbeing service, which is provided by a partner organisation. There are also links to the Carers service. We had mixed feedback from some people about how easy it was to find information when first using the website and that one of the main difficulties was a lack of clarity about which organisation was providing the different levels of support and how they linked with the local authority. Work is currently being undertaken with people with lived experience to review the accessibility of the website. The local authority had carried out an engagement exercise with people using the Wellbeing service where positive responses were received in terms of how the service enabled increased independence for people.

The strengths-based approach adopted by the frontline assessment and social work teams had a real focus on what the person was able to do for themselves, what their strengths were and what their current support networks were. This formed the basis of the conversation about where their need for support was. This was confirmed in our discussions with staff who were all positive about the focus on independence and wellbeing and gave examples of positive outcomes for people.

Frontline teams all spoke about working closely with other teams within the local authority as well as with partner agencies regarding the sharing of information about what services, including voluntary and community services, were available to people to support them to maintain their independence and delay or prevent their need for formal services.

There was a joined-up approach across public health, district councils, health partners and the local authority in looking at housing, based on a recognition of the effect of poor housing on a person's wellbeing and ability to retain their independence. The need for additional Extra Care housing schemes, as well as bespoke options for people with complex needs, has been identified as areas for development.

The reablement service provided to people discharged from hospital was provided by a partner organisation. Data shows that there had been a positive impact for people in terms of gaining back their independence following a stay in hospital. For example, 57% of people did not need any service following a period of reablement and 90% of people who did require a further service were more independent than at the point of discharge.

There was a real focus on enabling people who required support and unpaid carers to take up the option of receiving direct payments if that is what they wished to do. The take-up of direct payments was 41.95%, which was above the national average. People gave us examples of how using direct payments had enabled them to retain more control over their support as they were able to make their own decisions about who provided that support and in what way.