# **Overview and Scrutiny Committee**

Adults, Wellbeing and Health



21st December 2009

Transforming Social Care through Personalisation

# Report of Rachael Shimmin, Corporate Director, Adults, Wellbeing and Health

# **Purpose of the Report**

1 The purpose of this report is to update Scrutiny members on the progress being made to change the way that adult social care services in Durham are delivered.

# Background

- 2 The publication of the Government's Putting People First concordat document in December 2007, committed local authorities to a radical transformation of adult care aimed at improving choice and control for service users, an extension of advice and guidance services, and a move to more preventative / early intervention services such as re-ablement, in order to avoid more expensive packages of care later on.
- 3 Lunchtime seminars have been held for members on this issue in July and November this year, and have been well attended.
- 4 This builds on the Direct Payments initiative which has been in existence since 1996 and which offers individuals increased access to funds so that they are able to manage their own provision of social care. There are currently nearly 1,000 people taking advantage of this in Durham, either for themselves or as carers.
- 5 In October 2009, stringent performance targets were agreed between the Department of Health and ADASS, to ensure that progress is being made in the key areas and this report covers much of that ground.

# Key Areas of Transformation

By April 2011, Durham County Council must ensure:-

a. That a process is in place to ensure that all those eligible for council funded adult social care support will receive a personal budget via a suitable assessment process.

Extensive redesign of a new care assessment process with greater involvement for service users has taken place with staff being widely consulted. This process will complement the current traditional care pathway which will remain in place for those people in crisis.

b. That the transformation of adult social care has been developed in partnership with existing service users (both public and private), their carers and other citizens who are interested in these services.

Staff from the Personalisation team have been visiting groups, partnership boards and other service users and carer forums for the last year, raising awareness of the forthcoming changes.

LINk has made Personalisation one of its priorities for the present and coming year, and increased involvement of service users and carers will be a key part of the next 15 months work.

A comprehensive marketing and communications plan is in place to ensure that this work is planned, comprehensive and successful.

In Durham, in response to feedback received last at the 2008 "All Our Tomorrow's " conference, we have chosen to market this new offer to service users through the phrase " Your Life, Your Choice" – care and support designed with you.

c. That partners are investing in cost effective preventative interventions, which reduce the demand for social care and health services.

There are joint commissioning strategies in place with NHS Durham which have been prepared in the full knowledge of the personalisation agenda. This new offer to service users is likely to be extended to those people with long term health conditions in future.

The Council's preventative framework is also being delivered by the Health Improvement Plan and those partners are part of the Personalisation Project groups.

d. That citizens have access to information and advice regarding how to identify and access options available in their communities to meet their care and support needs.

There is room for an improved advice and information service, and options are being considered about how the Social Care Reform Grant can enhance the capacity, quality and timeliness of information, to assist service users to make informed choices.

e. That service users are experiencing a broadening of choice and improvement in quality of care and support service available.

This overall objective will be measured by the number of new services that providers offer over the next year, and the increased take up of non traditional services chosen by service users.

# **Recommendations and Reasons**

Members note the progress made and that a further update in provided in Summer 2010.

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### Appendix 1: Implications

### Local Government Reorganisation

None

#### Finance

The Department of Health have provided ring fenced funding through the 'Social Care Reform' revenue grant, until March 2011, which will help fund transitional arrangements for both the Council and its service providers.

### Staffing

The future service delivery workforce, both in-house and independent sector, will have to change radically to meet the challenges. A workforce strategy, resourced initially through Social Care Reform Grant, will be developed by the end of the year which will ensure that these challenges are met.

Learning and development staff and professional practice staff have been appointed to increase the awareness, knowledge base, and training for staff and roadshows have taken place in Autumn for staff members.

### Equality and Diversity

Personalised services will offer the opportunity for greater independence, choice and control for all service users and carers. Recent changes in legislation also allows those without capacity to have Direct Payments made through third parties.

Transformation of services is expected to address inequality in service delivery. Charging and contribution policies and resource allocation systems will ensure fairness and equity, and impact assessments are underway.

The Equalities Bill soon to become law will require all service users to be treated equitably in all social care issues.

#### Accommodation

None

#### Crime and disorder

N/A

#### Sustainability

Personalised services may mean an increase in spot purchasing and a greater number of providers. The least flexible services, and those that deliver least value for money, will be those at greatest risk, and this issue will affect both in-house and external providers. Market analysis and shaping will be necessary in the short and medium term to prepare current and future providers for this.

Sustainability is a key factor for the Programme Board when are taking decisions on how to spend the Social Care Reform Grant.

# Human Rights

Organisations will be expected to put citizens at the heart of a reformed system. Universal information, advice and guidance will be increased for people needing services and their carers, irrespective of their eligibility for public funding, and this will be part of the developments in the coming year.

### Localities and Rurality

This system is more flexible and can ensure that markets develop to meet needs. Commissioning of services, particularly around small and local providers, will have to be equally flexible to ensure high quality services, and the analysis of future service user need will be critical to this.

### Young people

This approach is based around the whole family and supporting family relationships. It includes a focus upon the role of carers and system development which will support integrated working children's services. This includes transition planning for those young people with disabilities coming through the system from Children and Young People' services to Adults' services.

### Consultation

This agenda has been proposed by the Government partly due to the demands nationally of service users to have outcome based services which better match their needs and aspirations, rather than continue to operate a task based system.

As indicated above, the engagement and influence of service users and carers will be a key part in the development of service delivery.

#### Health

The concordat signed by adult social care and health providers across all sectors, the NHS Executive, central and local government, professional bodies and regulators, jointly commits all signatories to a radical transformation of adult care services over the next three years.

Personal budgets through Continuing Health Care will play a part in the transformation process as will the joint commissioning strategies, the JSNA, and the joint role in promoting and developing the prevention agenda.

# Appendix 2

# **Background Papers**

Putting People First concordat – November 2007

Health and Social Care Act 2008. UK Parliament, July 2008

'High Quality Care for All: NHS Next Stage Review'. Department of Health, June 2008

Putting People First – Working to Make it Happen: Adult Social Care Workforce Strategy – Interim Statement'. Department of Health, July 2008

'Transforming Social Care', Local Authority Circular, Department of Health, 17<sup>th</sup> January 2008 (LAC, DH, 2008, 1).

'Transforming Social Care', Local Authority Circular, Department of Health, 5<sup>th</sup> March 2009 (LAC, DH, 2009, 1).

DH / ADASS circular – Progress Measures for the Delivery of Transforming Adult Care services - September 2009