# **Health and Wellbeing Board**

3 November 2015

# Care Act and Adult Social Care Transformation Update



# Report of Rachael Shimmin, Corporate Director, Children and Adults Services, Durham County Council

## **Purpose**

- 1. The purpose of this report is to provide an update to the Health and Wellbeing Board on the local and national developments in relation to the implementation of the Care Act 2014 and the transformation of Adult Care services, focussing on changes to deliver Phase 1; the new care and support duties from 1<sup>st</sup> April 2015.
- 2. The report also provides an update on the recent announcement by Government to postpone the Phase 2 reforms until 2020 which were due to come into effect from 1st April 2016, which includes the cap on care costs and appeals system.

## **Background**

- 3. On the 11<sup>th</sup> March, 2015 the Health and Wellbeing Board received a report together with a presentation covering the duties and responsibilities of the Care Act 2014 and outlining how the adult social care reforms would be implemented in Durham. Cabinet have received subsequent reports in March and September 2015 providing updates on the Care Act 2014 and transformational change within Adult Care Services.
- 4. The Care Act seeks to help and promote people's independence and wellbeing and embeds in legislation people's rights to choice, personalised care and support and personal budgets. Established under the Care Act the Better Care Fund (BCF), is a £3.9bn single pooled budget to support health and social care services to work more closely together in local areas. The BCF brings together NHS and Local Government resources that are already committed to existing core activity and provides a real opportunity to improve services and value for money.
- 5. The Act also introduces a new duty to provide preventative services, a national minimum eligibility threshold and a duty to offer information and advice to help people plan what care and support they may need for the future.

6. To meet the requirements of the Care Act the Social Care Reform Project Board chaired by the Corporate Director of Children's and Adult Services has monitored implementation and managed the risks associated with the reforms through a comprehensive project plan.

## **Care Act Implementation in Durham**

- 7. Care Act implementation and adult care transformation has sought to provide a flexible, innovative and outward facing service with the primary aim of helping people to help themselves. There is a focus on prevention and building resilience by working to ensure that there are universal local voluntary and community services available for the public to access.
- 8. Adult Care Staff continue to support those people with long term needs but work proactively to ensure that service users remain as independent as possible.
- 9. The Health and Wellbeing Board is committed to promoting integrated working between commissioners of health services, public health and social care to enhance the health and wellbeing of people living in County Durham.
- The Better Care Fund (BCF) as part of the Care Act, commenced on the 1<sup>st</sup> of April 2015 following the agreement of the BCF plan by NHS England in December 2014. County Durham's allocation from the fund is £43.735m in 2015/16.
- 11. The seven key initiatives that the fund has been committed to are as follows:
  - Short term intervention services which includes intermediate care community services, reablement, falls and occupational therapy services (£13,428,000)
  - Equipment and adaptations for independence which includes telecare, disability adaptations and the Home Equipment Loans Service (£8,562,000)
  - **Supporting independent living** which includes mental health prevention services such as counselling (£5,005,000)
  - Supporting Carers which includes breaks for carers (£1,361,000)
  - **Social isolation** which includes working with the voluntary and community sector (£1,121,000)
  - Care home support which includes dementia services (£1,774,000)
  - **Transforming care** which includes maintaining the current level of eligibility criteria (£12,484,000)
- 12. The overall aim of the BCF is to transform local health and social care services to make them more responsive and personalised to individual need. This includes making services available seven days a week, improving information and advice and clarifying lines of responsibility for coordinating care.

## Implementation of Phase 1 Reforms - Care and Support

- 13. The Council has embarked upon a number of service developments which support Care Act implementation.
- 14. A new Wellbeing for Life (WBL) service has recently been commissioned across County Durham. The service works with the public on an individual or group basis with staff and volunteers helping people to achieve their health goals. Service provision includes sign posting and advice, adult learning and participation in community opportunities to reduce social isolation.
- 15. The service is being targeted at the most deprived geographical areas of the County and aims to take a community approach to improving health and wellbeing. The focus is upon specific communities and is based around three areas; North, South-West and East Durham. Programmes are already working in communities within Shildon, mid-Durham and South Moor/Quaking Houses to improve the overall levels of wellbeing.
- 16. There are currently over 6,000 people with dementia in County Durham and with the number of people aged 60 and over with dementia expected to double by 2030. A new Dementia Strategy has been developed for County Durham and Darlington. The Council is working with NHS organisations, Darlington Borough Council and a range of voluntary and community services to implement the strategy. Actions and initiatives are planned to improve early diagnosis and give the right support to people with dementia, their carers and families.
- 17. A Palliative and End of Life Care Social Work Awareness Project has commenced which aims to promote and develop awareness and to establish improved pathways for service users.
- 18. A new equipment demonstration centre has recently opened in Spennymoor for people who have difficulty carrying out day to day activities due to illness or disability. A range of products are on display to show some of the equipment and adaptations that are available to make everyday life easier, including walking frames, perching stools, stairlift, bathlift, telecare equipment and specialist sensory support products.
- 19. In April 2015 the Council contracted with G4S for the delivery of social care into County Durham Prisons. Demand for prison social care assessments since 1<sup>st</sup> April, 2015 has not been as high as expected. As at 14<sup>th</sup> July 2015 there have been twelve assessments, resulting in seven people needing ongoing care and support and one person's need being met by the provision of equipment.
- 20. The County Durham Information Strategy 2014-16 supports delivery of the Care Act as well as enhancing our existing information service. The key outcome of this strategy is that people, including those who are most vulnerable, who want information about adult care and support, will know what is available and where to find it easily, in formats that work and make sense to them and that the information requirements within the Act are met.

- 21. New ways for people to contact the Council, through a comprehensive E-marketplace system have been developed. The Council's new website Locate care and support in County Durham went live in April, 2015 and a publicity campaign began in September 2015. Locate provides a central point for all information about adult care and support and the services available empowering people to make informed decisions about their own needs.
- 22. The Care Act 2014 places adult safeguarding on a statutory footing and requires the local authority to make enquiries, or cause others to do so, if it believes an adult is experiencing or is at risk of abuse or neglect.
- 23. County Durham Local Safeguarding Adults Board (LSAB) recognises the need to provide a proportionate response to all safeguarding concerns and has agreed that in County Durham the multi-agency process previously known as "safeguarding" will now be called "adult protection".
- 24. For the first time, carers are recognised in the law in the same way as those they care for. Carer's procedures and operating processes have been reviewed and revised along with links to carers centres. Work has been undertaken on the implications for practitioners in relation to the Care Act including carers assessments and support.
- 25. The transition service has reviewed its existing arrangements and by 1<sup>st</sup> April 2016 a countywide provision for 14-25 year olds serving disabled children and young people and their carers will be in place.
- 26. A policy for the deferred payments scheme (DPS) has been agreed. From April 2015 Council's no longer have the power to put a legal charge on a property for people entering residential care, unless the service user signs up to a deferred payment agreement (DPA). A deferred payment must be offered to people who meet the eligibility criteria and are able to supply adequate security for the debt.

## Implications and Challenges

- 27. To date the transformation programme within Adult Care Services has led to a number of service improvements and efficiencies as follows:
  - Partnership working with NHS colleagues has resulted in the service successfully improving performance in supporting people from requiring long-term care. The number of beds commissioned for residential/nursing care has reduced by 6.6% (between March 2013 and June 2015) and the number of service users requiring long term care packages has reduced by 5.8% since March 2013.

- 28. However, the service is aware of the challenges which remain including:
  - Increasing access and take up of Direct Payments.
  - Consistent and effective application of eligibility criteria.
  - Increases in the 65+ and 85 and over populations, 24.1% (101,500 people) and 36.5% (11,200 people) respectively between 2001 and 2014
  - developing a more outcomes focussed approach both in terms of commissioning services and to achieve improved outcomes for people in need of care and support.

## Phase 2 Reforms including Cap on Care Costs and Appeals System

- 29. In response to concerns expressed by the Local Government Association and many other stakeholders about the timetable for implementing the cap on care costs in April 2016, together with the impact on public sector spending and uncertainties in developing a private insurance market, the Government announced on 17<sup>th</sup> July, 2015 that it had decided to delay its implementation until April 2020.
- 30. The Government instead, will continue with other efforts to support social care, in particular through the Better Care Fund, to drive the integration of social care and the NHS going forward.

## **Regional Context**

- 31. Regional links are well established and have helped support co-operation, collaboration and sharing of knowledge in relation to Care Act implementation. In summary work is ongoing as follows:
  - Regional work programme 2015/16 in place covering the priorities of the 2015 reforms.
  - E-learning package rolled out across all twelve North East Councils, based on Skills for Care material for generic training needs provided by ME Learning and facilitated through ADASS.
  - Launch of Transforming Care a programme designed to improve care and support for people with learning disabilities and/or autism, and behaviour that challenges, A progress report on next steps and a six month progress report by the Transforming Care and Commissioning Steering Group, were published in July 2015.
  - Publication of practice guidance and advice by the Carers' Network and other organisations supplementing statutory guidance and covering Investment in Carers and whole family approaches.
  - A new forum has been set up to discuss the challenges facing commissioners and providers of preventative services. It's a new feature on the Prevention Library, run by SCIE.
  - New guidance produced following extensive input from councils and providers, which aims to help directors of adult social services and commissioners assess the sustainability of their local care markets and the providers within them in order to promote and maintain the wellbeing of their local populations.

 Regional resources have been used to produce a resource for independent financial information that can be used by LA's across the region.

# **National Policy Context**

- 32. Since the last report a number of key national policies have been announced, relating to adult social care services.
- 33. Published on 23 October 2014 the NHS Five Year Forward View sets out a vision for the future of the NHS, and details how through improvements to quality of care, staff productivity, and better procurement and with additional funding confirmed in the Budget 2015, the NHS will deliver £22 billion in efficiency savings by 2020-21. For local authorities the Government advocates:
  - Models of joint commissioning between the NHS and local government, including Integrated Personal Commissioning (IPC), a new voluntary approach to blending health and social care funding for individuals with complex needs. care plans and voluntary sector advocacy and support.
- 34. Better Care Fund-style pooling budgets for specific services:
  - Under specific circumstances possible full joint management of social and health care commissioning, perhaps under the leadership of Health and Wellbeing Boards.
- 35. In January 2015, the NHS invited individual organisations and partnerships to apply to become 'vanguard' sites for the new care models programme, one of the first steps towards delivering the Five Year Forward View and supporting improvement and integration of services.
- 36. In March, the first wave of 29 vanguard sites was chosen and in July, a second wave of eight vanguards was announced. Durham were successful as part of the North East Urgent Care Network (NEUCN) which also covers areas around Northumberland, Tees, Esk and Wear Valley, Newcastle, Northumbria, Gateshead, Tyneside, Sunderland, Darlington and Hartlepool.
- 37. The eight new vanguards will spearhead this work and, will benefit from a programme of support and investment from the £200m transformation fund. Six vanguards will cover smaller local systems which may include hospitals and surrounding GP practices and social care, while two network vanguards will be working with much larger populations to integrate care on a greater scale.
- 38. The NHS Bodies and Local Authorities Partnership Arrangements (Amendment) Regulations 2015 Consultation proposed changes include widening the potential scope of pooled budgets to include funding for primary medical care and pave the way for greater integration across community health, social care and primary care.

- 39. Making it better together: A call to action on the future of health and wellbeing boards (30th June 2015) launched by the LGA and NHS Clinical Commissioners is an ambitious call to action and a set of proposals to local system leaders and the Government to strengthen the impact and leadership of health and wellbeing boards across the country. Proposals include:
  - A national five-year funding settlement across health and care.
  - A national strategy for coordinated workforce planning and integrated workforce development across health, public health and social care.
  - A single national outcomes framework for health, public health and social care enabling HWBs to determine their priorities locally.
  - An integrated, proportionate, place-based commissioning framework which supports accountability.

## **Next Steps**

- 40. Embedding the reforms from Phase 1 of Care Act Implementation.
- 41. Further service redesign to improve the delivery of Adult Social Care Services.
- 42. Building on the use of new technology to allow more flexibility and responsiveness in the delivery of services to clients.
- 43. Ensuring the duties of prevention and wellbeing run through the whole service system from information and advice to Social Care Direct through to the specialist teams.
- 44. Future national policies and developments will be implemented as and when required.
- 45. The Social Care Reform Project Board having monitored the successful implementation of the Phase 1 Care Act reforms is to be suspended, until such time as the financial reforms and appeals system are reintroduced.

## Recommendations

- 46. The Health and Wellbeing Board is recommended to:
  - Note the content of this report.
  - Agree to receive further updates in relation to Adult Social Care transformation.

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## **Appendix 1: Implications**

#### **Finance**

Substantial efficiencies have already been delivered through this approach as part of the Medium Term Financial Plan. Further efficiencies are planned.

## **Staffing**

Workforce development will benefit staff and will help to challenge thinking and introduce new ways of working into practice. Roles and responsibilities are being amended in line with revised requirements. Embedding culture change is dependent on staff working effectively and understanding service aims, supported by managers.

## Risk

Changes need to be carefully managed to ensure social care services and the protection of adults remains robust and the system is not de-stabalised during transition.

# **Equality and Diversity / Public Sector Equality Duty**

None

## **Accommodation**

None at this stage, although modern ways of working may impact on accommodation requirements in due course.

## **Crime and Disorder**

The local authority has responsibility for the care and support needs of people in prisons and approved premises, with effect from 1<sup>st</sup> April 2015.

## **Human Rights**

None

## Consultation

Any changes to workforce will be subject to consultation with affected staff.

## **Procurement**

None at this stage.

## **Disability Issues**

None at this stage.

## **Legal Implications**

There are a number of key policy developments/initiatives that have led the way and contributed to the Adult Care Transformation agenda in County Durham. All changes must be compliant with the Care Act.