

meeting **Social Care and Health Standing Committee**

date **5 September 2011**

**ITEM 5**

## **REPORT OF THE SERVICE DIRECTOR FOR PROMOTING INDEPENDENCE AND PUBLIC PROTECTION, ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION**

### **FOSTERING ASPIRATION - SOCIAL CARE AND HEALTH: PROGRESS ON PERSONALISATION**

#### **1. Purpose of the Report**

- 1.1 The purpose of the report is to provide an update on personalisation, the plan to embed Putting People First, and to report on significant progress already made.

#### **2. Information and Advice**

- 2.1 As part of the update the Committee will hear from Mr Terry Gallagher who is a service user representative to the Programme.

Previous reports to Cabinet have provided background to the Department of Health's intention to transform the social care system.

#### **2.2 Putting People First (December 2007)**

Putting People First (December 2007) was an agreement between central and local government. It sets out how social care could be improved by extending choice and flexibility to individuals and their communities, so that they could take more responsibility and find solutions that worked better for them. Putting People First was supported by a Department of Health circular – LAC (DH) 2009 1 - Transforming Adult Social Care to support councils and their partners in the ongoing transformation.

- 2.3 In launching this circular it was recognised that, in order to deliver the outcomes of Putting People First, the present system will need to undergo further significant redesign in process, practice and culture to ensure people have access to high quality information and advice, appropriate early interventions and can exercise choice and control over the services and support they need.

- 2.4 In the context of long-term demographic changes and higher expectations, the Government has recognised that the “current system of social care delivery will need to be fundamentally re-engineered and modernised to respond to the pressures on the system”.

## 2.5 **Think Local Act Personal**

The Coalition Government’s Vision for Adult Social Care ‘Capable Communities and Active Citizens’ and its White Paper ‘Equity and Excellence: Liberating the NHS’, maintain the drive towards the personalisation of public services in health, social care and beyond. The recent Department of Health publication, ‘Think local, act personal’ builds upon the delivery and objectives of Putting People First.

The key objectives of Think Local, Act Personal are:

### **A personalised and community based approach**

Personalisation and a community based approach requires an efficient, effective and integrated service delivery alongside partnership working to support individuals and, their families, carers and the wider community - reducing the need for acute health and care support.

### **Prevention**

The overall aim is to secure a shift to a position where as many people as possible are enabled to stay healthy and actively involved in their communities for longer and delaying or avoiding the need for crisis or acute services. Social care and health will work further to develop and deliver a range of effective and accessible preventative services such as intermediate care, Linkages, re-ablement services (re-ablement helps people to regain the skills necessary for daily living, which may have been lost through deterioration in health or increased support needs) and assessment beds in the community. This is alongside supporting a range of low level services, such as access to minor adaptations.

For people who do have an ongoing social care need, then they should have maximum control and choice over their support and care.

### **Personal budgets**

A key way the Council is delivering control and choice for those who need social care is through personal budgets. A personal budget enables people eligible for social care to know how much money they can have for their support and can spend the money in ways that achieves their outcomes. The budget can be taken as a direct payment (a cash payment) or a managed personal budget.

Direct payments are a cash payment for people who would like to arrange, and pay for their own care and support services. A managed personal budget

is for people who would like the Council to arrange and manage the services on their behalf. Although a managed personal budget is personalised, it offers less flexibility to the individual. Hence, a direct payment is the preferred option to provide support for an eligible individual.

At the end of March 2011 37% people had a personal budget and the Council achieved the national 30% target.

The national target is for all eligible service users and carers to be on a personal budget by 2013.

### **Control, choice and efficiency**

The continued drive towards personalisation and improving outcomes is against a backdrop of significant efficiencies. This will involve a leaner structure, slimming down processes and designing new models, providing more integrated and accessible arrangements with health and making better use of local resources within the community or families. Personal budgets, particularly when taken as a direct payment, can achieve a more cost effective way of meeting social care need, with better outcomes for the service user.

### **Financial Implications in delivering personalisation**

- 2.6 The Government provided a ring fenced Social Care Reform grant, with an extra £520 million over three years, to transform care for older and disabled people as part of "Putting People First". Nottinghamshire's share of this is £7,497,000:
- £1.195 million in 2008/09
  - £2.813 million in 2009/10
  - £3.489 million in 2010/11.
- 2.7 The transformation must be delivered in a cost effective way and Councils are expected to contain ongoing costs within existing resources and through process reengineering. In implementing Putting People First the Adult Social Care, Health and Public Protection Department has been mindful to avoid ongoing financial commitments and realise efficiencies whilst improving outcomes for service users, carers and the public.

### **How will progress be measured?**

- 2.8 Councils are judged on five key priorities:
- a) transformation has been developed in partnership with service users, carers and citizens
  - b) all those eligible for social care support will receive a personal budget
  - c) cost effective preventative interventions are in place
  - d) all citizens have access to information and advice
  - e) there is broadening of choice and improvement in quality of care and support services.

In line with the Department of Health expectation from October 2010 all new services users and carers are offered a personal budget and that all service users, whose care plans are subject to review, are offered a personal budget.

### **Progress already made**

- 2.9 The Council has made significant progress to deliver Putting People First and all national targets have been met.
- 2.10 Recently two Local Authorities have visited the Council to learn from our work on personalisation. In particular our work on prevention, micro providers and support to self funders has received national recognition.
- 2.11 The following is a summary of the progress made:
- a) A new customer journey in place for service users that supports personalisation. A typical customer journey for an older adult will start at the Customer Services Centre where queries are speedily resolved including signposting onto preventative services such as handyperson schemes or referrals filtered through for further assessment such as the reablement service. The reablement service helps people learn or relearn the skills necessary for daily living which may have been lost through deterioration in health and/or increased support needs so that they can stay independent and recover quickly from illness. Where there are on-going support needs, a community care assessment will identify the level of ongoing support needs and a personal budget will be arrived at which means people will know how much money there is for this. They will then get the opportunity to say how the money could best be spent to meet their needs and help them achieve their outcomes in their lives through support planning. If people choose a direct payment then there is support available through direct payment support agencies to offer help with recruitment through to managing the account. This self directed support process gives individuals increased choice and control over how best to meet their needs.
  - b) making a strategic shift in the focus of care and support away from intervention at the point of crisis to a more holistic, pro-active and preventative model centred on improved wellbeing
  - c) having a universal joined up information and advice service available to all citizens utilising the Customer Service Centre and Linkages
  - d) developing a proportionate contact and social care needs assessment to deliver more effective and joined processes. The department is increasing the number of queries that can be speedily resolved through better use of signposting to preventative services and supported assessment through the Adult Access Team based at the Customer Services Centre, enabling social care staff to spend time on people with complex needs

- e) reducing the number of people who need ongoing long term support by increasing the number of people who receive a reablement service
- f) joint work between the Nottinghamshire Health and Social Care Community. This has led to;
  - Reduction in length of hospital stay
  - Reduction of inappropriate delays in discharge
  - Reduction in inappropriate admission into Care Homes
  - Improved patient pathways
  - People's independence being maximised
  - Hospital avoidance
- g) The local care workforce have been trained and supported to deliver personalisation
- h) work completed with Care Services Efficiency Delivery (CSED) within the Department of Health to meet efficiency targets. These are key areas within the Improvement Programme
- i) supported the excellent work already in place to ensure services treat people with dignity and respect
- j) reduced the balance of services in order that less than 40% of the Adult Social Care and Health budget is spent on Care Home Placements.

### **Expenditure Plan**

- 2.13 In order to imbed Putting People First, to realise the efficiency savings as part of the Improvement Programme and to build capacity, Cabinet agreed the following expenditure plan for 2011-12

	<b>Costs</b>	<b>Staffing</b>	<b>Contingency</b>	<b>Total</b>
a) Prevention and Early Intervention	30,000			30,000
b) Capacity Building	85,000			85,000
c) Information and Advice	25,000	25,000		50,000
d) Implementation of Personal Budgets			1,063,000	1,063,000
Implementation of Personal Budgets Staffing		433,000		
e) Carers	200,000			200,000
f) Support Services - Advocacy	31,000			31,000
f) Support Services - Direct Payments	10,000			10,000

	<b>Costs</b>	<b>Staffing</b>	<b>Contingency</b>	<b>Total</b>
f) Support Services – User Led Organisation's	50,000			50,000
g) Support with Confidence	45,000			45,000
h) Communication and Training	23,000			23,000
i) Re-ablement & Crisis Response		250,000		250,000
j) Social Care Clinics	5,000			5,000
k) Programme Staff		525,000		525,000
	<b>504,000</b>	<b>1,233,000</b>	<b>1,063,000</b>	<b>2,800,000</b>

2.14 To meet the key objectives within Think Local, Act Personal two key workstreams for this year are:

a) Capacity Building and Support Services

The Council has a key role in shaping and developing the market to support communities and voluntary organisations to develop new ways of addressing social care needs, and thereby allowing service users to take more choice and control.

A first step has been supporting micro providers such as social enterprises to flourish and develop innovative and creative ways to meet support needs. The Micro Provider Project continues to grow with 78 enquiries from potential providers with a breakdown of activity below:

- 31 of these are actively working with the Project Co-ordinator
- 23 are currently providing services
- 9 providers have been through the quality assurance process and are currently showing on the Nottinghamshire County Council (NCC) Directory of Support.
- 3 of these providers are also NCC approved providers – 1 direct payment support provider and 2 day service providers.
- 64 micro providers have been given information and advice and signposted to the relevant organisations where appropriate.

A further step is the development of the 'Support with Confidence' accreditation scheme for personal assistants. This provides a directory of approved personal assistants for individuals who would like to directly employ someone to provide their support. The scheme is growing with twelve on the web site and 173 applications in the pipe line.

## b) Information and Advice

The Adult Access Team at the Customer Services Centre provides a joined-up information and advice service for all individuals and carers, including those who self-assess and self-fund. From September 2011 the service will extend to offer advice, information and training on benefits.

To support access to information and advice, there is a need to provide effective provision of information to the public and staff to enable informed choices about support available at different points of the customer journey. Currently, there is a range of initiatives to meet information and advice requirements such as Nottsinfo4U, Notts50plus, and Info Scripts. The next step is to develop a shared single point of entry for staff and the public.

### **Meeting ongoing financial commitments from April 2012**

- 2.17 Efficiencies will be achieved through a system focused on early intervention, prevention and reablement, where good information and advice, practical support, appropriate housing options, reablement and joint working between health and social care will assist people in living fulfilled and independent lives, thereby reducing the number of people entering or requiring ongoing support from the County Council.
- 2.18 A key programme for achieving savings is the reduction in community care spend, through reviewing existing service users to ensure they are getting the right level of support for their support needs. Since April 2011, 2,246 reviews have been completed and a total of £2,603,139 savings achieved with a two year effect. This has been achieved through applying the resource allocation system to arrive at the personal budget; providing people's support in the most cost effective way through encouraging take up of direct payments, better use of telecare and maximising community support; applying the revised national eligibility criteria 'Fair Access to Care' and enabling people who are ineligible to find alternative sources of support; and better support to self funders to purchase their own support.

## **3. Recommendations**

- 3.1 It is recommended that the Social Care and Health Standing Committee consider and comment on the progress made on delivering personalisation.

## **4. Background Papers Available for Inspection**

- 4.1 Putting People First – Department of Health – 10 December 2007 (previously published).
- 4.2 Transforming Adult Social Care – Local Authority Circular (LAC(DH)(2008)1 – Department of Health – 17 January 2008 (previously published).

- 4.3 White Paper – Our Health, Our Care, Our Say – a new direction for community services – Department of Health 30 January 2006 (previously published).
- 4.4 Transforming Adult Social Care – Local Authority Circular (LAC(DH)(2009)1 – Department of Health – 05 March 2009 (previously published).
- 4.5 Spending Plan for Putting People First – Cabinet 29 October 2008 (previously published).
- 4.6 Think Local, Act Personal – Department of Health - 4 November 2010
- 4.6 A Vision for Adult Social Care: Capable Communities and Active Citizens Department of Health – 16 November 2010
- 4.7 Spending plans for Putting People First – Cabinet 09 March 2011 (previously published).

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