

30 March 2015

Agenda Item: 7

# REPORT OF THE DEPUTY DIRECTOR, ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION

# **IMPLEMENTATION OF THE ADULT SOCIAL CARE STRATEGY 2014/2015**

# **Purpose of the Report**

1. To report on the progress made in implementing the Adult Social Care Strategy and to invite the Committee to comment on the revised Adult Social Care Strategy, which has been updated to reflect the Care Act 2014, and recommend it to Policy Committee for approval.

## Information and Advice

- 2. The Adult Social Care Strategy was approved by Full Council on 27 March 2014. Its aim is to set the future direction of adult social care in Nottinghamshire and enable the Council to meet its statutory duties within the funding available. The strategy is in line with priority four of the Council's Strategic Plan, and with the Council's Health and Wellbeing Strategy 2014-2017.
- 3. The emphasis of the strategy is on promoting independence and wellbeing, ensuring value for money and promoting choice and control. It also aims to ensure that pathways and processes are as streamlined and efficient as possible, so that people get the right amount of support, at the right time, with the aim of promoting their independence for as long as possible. It also reflects the requirements of the Care Act 2014, which will be implemented from April 2015. Information and training for staff has been designed to explain the new responsibilities introduced by the Care Act within the context of the strategy.
- 4. Work has also been undertaken with the Institute of Public Care (IPC) to look at how to measure the successful implementation of the strategy. This work has identified where performance measures currently in place can be used to identify whether the strategy is having an impact in the required areas (e.g. Adult Social Care User Survey, Better Care Fund performance indicators, departmental performance indicators) and where there are gaps that the Council will need to address through new and/or different reporting and review mechanisms.
- 5. Major pieces of work to implement the strategy have started over the past year. Many of these are linked with work that is required to implement the requirements of the Care Act and to support the integration of social care with health, and will be familiar to the Committee from previous reports outlining progress in these areas.

- 6. The report aims to highlight progress and developments in relation to some of the key areas identified in the strategy that have not already been covered in detail in previous Committee reports.
- 7. Information, advice and early intervention: the Council is undertaking a complete revision of the Council's website through the Digital First project and this will be completed by September 2015. This work will improve the full range of both corporate and partners information available to the public and staff, and will make it easier to keep up to date. The Council is in the process of developing the new Help Yourself online solution for advice and information to enable people, carers and families to take control and make well-informed choices about their care and support and how to promote well-being. This will include information on services covering social care, NHS and the voluntary sector, and will mean that Nottinghamshire residents, service users, carers and partners will be able to access personalised information which relates to their specific situation. People will be able to find the information themselves or ask for a printed copy. It will be operational by March 2015 and will be developed as an e-market place by April 2016.
- 8. **Prevention**: the Council has revised its prevention and early intervention offer in line with the Care Act, based on the evidence of what best avoids or reduces the need for social care. Work is now underway with the three planning groups to align the Council's approach to targeting, pathways and services with that of the Clinical Commissioning Groups (CCGs) preventative approaches, for example with Bassetlaw's Social Prescribing scheme and Mid Nottinghamshire's PRISM approach and Self Care Hub.
- 9. The Council already provides a good range of services to support carers which helps them to keep people at home and in their community wherever possible. The Carers' Support Service based within the Adult Access Team has been very well-received. A recent report, Carers in Nottinghamshire, completed by Public Health in December 2014, reviewed carer experience and expectations, and a number of carers provided positive feedback on the service with appreciation for the accessibility and having a central contact point to obtain information and possible avenues for support.
- 10. In partnership with Nottinghamshire Healthcare Trust, the Council has commissioned 6.5 fte Compass Workers who support carers of people with moderate to severe dementia. There is a worker located in each Clinical Commissioning Group area to support carers at times of crisis, by offering psychological support, help to navigate around services, practical assistance and by providing expertise on dementia care.
- 11. **Assessment and care management**: tools are being developed to help with the predetermination of people's care and support needs and estimating the possible associated costs. The initial tool is an online contact that automates the provision of information and advice to those people where information and advice can meet their needs. For those people who are likely to need further support, work on a financial 'ready reckoner' is in its early stage of development to help inform people whether they will need to contribute towards the cost of their care and support and if they are likely to have to pay the full cost. Work is also progressing on the development of an online assessment to allow people and their families to undertake an initial self-assessment of their needs. This could also be completed with the assistance and support of other professionals. Assessments will always be verified by a social care professional before any Council service is provided.

- 12. In relation to ensuring care is provided closer to home wherever possible, the Council has been working hard to meet government targets set in response to the Winterbourne View report, and had moved 18 people out of hospital by June 2014. In total 28 people have been supported to move out of hospital by the Council working in partnership with local Clinical Commissioning Groups (CCGs) and also Derbyshire, Nottingham City and South Yorkshire CCGs. 18 people have moved into supported living and nine into residential care with one person staying in a step down unit until his supported living placement is ready. Four more people are due to leave by the end of March.
- 13. **Review:** The strategy refers to the Council's commitment to undertake regular reviews to ensure personal budgets are appropriate to meet need. The Central Reviewing Teams have undertaken 2,174 review interventions across older and younger adults between the end of March 2014 and mid-January 2015 to ensure people are receiving a proportionate level of support; these have resulted in savings in the region of £1.73m. These reviews are in addition to activity taking place within locality assessment and care management teams.
- 14. **Commissioning services**: Nottinghamshire is one of 10 local authorities piloting the 'Just Right' project to manage demand while promoting personalised services. This is based within learning disability supported living services and promotes partnership working with key providers. The outcomes help to enable service users to achieve a level of support that is just right for them as individuals based on their specific needs, and which promotes independence and reduces need for and reliance on care which may impede independence.
- 15. In relation to monitoring and improving quality, a Risk Register has been developed within the Market Development and Care Standards Team and is now being used to prioritise the programming of audit visits to care homes. The Risk Register is also used during the regular information sharing meetings between the Council and the Care Quality Commission to identify and agree any required actions where poor quality care has been identified.
- 16. **Structures and processes**: the Council is undertaking a great deal of work in order to make systems and processes as efficient as possible. It is anticipated that the Care Act will mean an increase in the number of assessments that the Council is required to undertake. To this end there has been a successful introduction of mobile devices (Thinkpads) for social care workers undertaking assessments and reviews from January 2015. By March 2015 it is expected these will be rolled out to the relevant staff across the County. The device allows workers to complete assessment documents and case notes remotely in the community through software called Total Mobile. There is also a project now underway which is looking at auto-scheduling appointments in social care workers' diaries, in order to make the best use of their time and to inform people as quickly as possible of when the Council will visit to assess their needs.
- 17. In addition a project is being developed to pilot the use of clinics for appropriate Occupational Therapy and Social Work assessments and reviews. These will be geographically based where analysis indicates the highest volume of cases, and a range of options will be considered within Council and Health services. Performance metrics are being devised for the work to increase capacity to undertake assessment and care

management activity, in order to be able to evidence that the initiatives work, as well as establish a baseline from which to monitor improvement and work with teams to agree what are both aspirational and reasonable activity levels.

- 18. A report on Occupational Therapy services is also scheduled for consideration at this meeting of the Committee.
- 19. Work has also been undertaken to communicate the strategy and its key messages to the public, staff and partner organisations. In September and October 2014 there were a number of road shows undertaken with frontline staff where the strategy was discussed with the Senior Leadership Team. Earlier in 2014, there were some sessions available to Team Managers to help them understand their role in supporting and embedding the strategy with staff. Further sessions for all Team Managers, following on from the recently finished corporate Leadership Development Programme, are being planned for April/May. These will focus on the cultural change and the leadership required to support staff to work in a different way.
- 20. A communications plan has been developed and this includes publication of a leaflet for the public, as well as information available on the public website explaining what the Council's offer will be in relation to adult social care. Information targeted at different audiences (e.g. Health staff, care providers) has also been developed. The public information includes a charter for adult social care, which aims to show in clear language what the Council will do and provide, and is shown below:

*	We will promote individual health	, well-being and independence
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- We will share responsibility for maintaining the health and well-being of people in our communities with families, carers, friends and other organisations
- We will work to prevent or delay the development of needs for care and support by providing advice, information and services that support independence
- We will promote choice and control so people can receive support in ways that are meaningful to them, but will balance this against the effective and efficient use of our resources
- We will work to ensure people are protected from significant harm whilst allowing people to take risks
- We will always seek the most cost effective way to provide support, in order to ensure we can continue to meet the needs of all people who are eligible for care and support

Further work is required to fully embed the key messages of the Strategy and to ensure that the capacity required to implement the Strategy is available.

- 21. Late last year, Committee approved some new temporary posts to support the transformation work required within the department, including the implementation of the adult social care strategy. Recruitment to these posts is well underway; two Lead Transformation Managers have already been recruited and an appointment has been made to the Transformation Programme Director post. It is hoped that the post dedicated to managing the Strategy implementation will be filled imminently. The Transformation Team has developed a Project Initiation Document that identifies the work streams that this post will be required to progress on starting work.
- 22. The wording of the current Adult Social Strategy has been revised to ensure it is aligned with the Care Act. This is attached as **Appendix 1**. The Committee is asked to review the revised document and recommend that it is submitted to Policy Committee for approval.

#### **Other Options Considered**

23. The strategy was approved by Full Council in April 2014. Implementation of the strategy is essential to enable the Council to fulfil its aims in relation to transforming adult social care and achieving value for money; therefore other options to this have not been considered.

#### **Reason/s for Recommendation/s**

24. The progress on implementation of the strategy is for noting. The strategy requires slight revision in wording to ensure it is up to date and compliant with the Care Act.

## **Statutory and Policy Implications**

25. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

#### **Financial Implications**

26. There are no specific financial implications identified in this report. It is intended that implementation of the strategy will help the Council to deliver savings and efficiencies within adult social care services.

#### Human Resources Implications/ Ways of Working Implications

27. Council staff will be required to work differently as a result of the implementation of the strategy and are being supported to understand the implications of the strategy, as well as the implications of the Care Act. As identified in the report, staff are already being provided with IT equipment to enable more mobile working.

## Implications for Service Users

28. The Council is committed to providing good quality social care services for those adults who are most in need of care and support, and appropriate advice and information to prevent and delay the need for formal care and support wherever possible.

# **RECOMMENDATION/S**

That the Committee:

- 1) notes the progress made to date with implementation of the Adult Social Care Strategy
- 2) agrees to receive a further update on progress in November 2015
- 3) comments on the revised Adult Social Care Strategy, updated in line with the Care Act 2014, and recommends it to Policy Committee for approval.

#### Jon Wilson Deputy Director, Adult Social Care, Health and Public Protection

#### For any enquiries about this report please contact:

Jennie Kennington Senior Executive Officer T: 0115 9774141 E: jennie.kennington@nottscc.gov.uk

Sarah Hampton Commissioning Officer T: 0115 9774969 E: sarah.hampton@nottscc.gov.uk

## Constitutional Comments (LM 05/03/15)

29. The Adult Social Care and Health Committee has delegated authority within the Constitution to approve the recommendations in the report.

## Financial Comments (KAS 04/03/15)

30. The financial implications are contained within paragraph 26 of the report.

#### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Approval of the Adult Social Care Strategy – report to Full Council on 27 March 2014

## Electoral Division(s) and Member(s) Affected

All.