

Redefining Your Council – Adult and Health Portfolio as at March 2017

Progs.	<ul style="list-style-type: none"> • Adult Social Care Strategy & market development – preventing & reducing care needs by promoting independence • Integration with health – implementing joined-up working practices and initiatives with health • Public Health Outcomes – working with key stakeholders to establish how to allocate the current budget • Care Act Implementation – implementing the changes needed for the next stage of the Care Act • Direct Services Provision – developing different ways of delivering services
Benefits to be delivered	<ul style="list-style-type: none"> • Promoting independence and preventing, reducing and delaying the need for care and support (including providing information and advice to encourage people to look after themselves and each other) • Better and more joined-up working with partners (e.g. health) to improve outcomes for service users • More efficient, flexible and mobile staff by using technology to maximise staff time and help manage demand • Providing services that are creative, sustainable, value for money and legally compliant
Key achievements in last 3 months	
Expected delivery over next 3 months	
<ul style="list-style-type: none"> • Plans are in place to trial the 3 Tier Model approach across Broxtowe starting in the summer. The 3 Tier Model is designed to help people get support at an earlier time and reduce the need for long term packages of support. • The new support planning tool was launched. The new tool allows a greater focus on activity promoting people's independence, encourages setting short term goals and how to explore increased use of existing free resources. • The Notts Enabling Service (a team that looks to find community and informal alternatives to formal paid for support for new and existing service users) is now operational. Promoting independence workers in the team will teach new skills or enhance existing skills to enable the person to become more independent. This will include daily living skills, travel training and connecting people to local amenities and helping them to use them. By increasing a person's independence, formal packages of care and support can then safely be reduced. • The Adult Access Service are now scheduling appointments for all older adults who require a social care or occupational therapy appointment. This has helped reduce the amount of time people wait for an appointment. The percentage of older adults receiving a social care assessments within a 28 day timeframe has been steadily increasing from 68% in April 2016 to an average of 82% since January 2017. Removing the administration of arranging appointments from social care staff allows them to focus more time on promoting the independence of the people they are working with. 	<ul style="list-style-type: none"> • Trial of the 3 Tier Model approach in Broxtowe will commence. This pilot will roll out a new approach based on 3 conversations and it will be monitored to understand how effective it is, how it should work and make comparisons with the existing approach to inform future practice. • Additional support for staff using the new support planning tool will be developed. The aim is to ensure that promoting people's independence through better support planning is a key focus of all social care teams. • As part of the work to support service users to be more independent, we are looking at how more people can travel independently across Nottinghamshire. A workshop will be undertaken with key partners to discuss ideas for further development of work to reduce the number of service users who need ongoing assistance with transport. • Further areas for improved efficiency of teams will be explored and this will include deciding if scheduling appointments and social care clinics could be more widely used either for different types of work or with different teams. Any proposals will be considered on the basis of ensuring that any efficiency gains can be channelled into promoting people's independence through better support planning and increasing reviewing activity. • The Adult Social Care Strategy will be refreshed, it will give a new focus to promoting people's independence, sharing responsibility with individuals,

Appendix 3

<ul style="list-style-type: none"> • Nottingham Trent University has been engaged to research the costs and benefits of embedding Social Care staff within integrated Care Teams across the county. Phase 1 work with Newark West has been completed; this involved interviews with service users and carers, a focus group with staff and collecting information about what happened to 10 people supported by the team. • Work has been undertaken with health to create an integrated database called healthscope. This database will allow primary health staff such as GP's to check if patients already have a social care package in place. • Work is taking place to understand the information that is available on health systems and would be of help to social care staff but is currently not accessible for them. A pilot to share information between health and social care is running at Kings Mill Hospital and has demonstrated how increased data sharing can be achieved. • The Short Term Independence Service (STIS) in Mansfield and Ashfield was launched. Bringing together all the services that work with people on a short term basis. Often after receiving a short term service people require less or no ongoing formal support. The STIS will mean short term services can be managed more effectively and coherently. • Work to develop the business case for an Alternative Service Delivery Model for Direct services has been undertaken. This has involved developing the business case and in particular testing assumptions made about financial viability, options appraisals, governance and new business opportunities. • Mobilisation phase of the new 0-19 Health Child Programme and Public Health Nursing Service has been completed and both went live on 1 April 2017 	<p>existing networks and greater use of available community resource.</p> <ul style="list-style-type: none"> • Information collected through the Nottingham Trent University led research will be utilised to compare the effectiveness of the different routes for this group of people in to social care to inform future practice. • Further work to develop healthscope, the integrated database will take place and regular information updates will be made to keep the system up to date. • A 3-year programme plan will be put in place to implement the necessary technical and business changes across health and social care services, to improve information sharing between frontline staff. Wider rollout of the pilot at Kings Mills Hospital will be underway to ensure that more health staff can request key data on patients from the social care systems and also to provide health information to social care staff. • Further reconfiguration and recruitment will have been completed so that the Short Term Independence Service (STIS) teams can be launched in Newark and Sherwood, and Bassetlaw. Discussions will take place with Health colleagues in those areas to ensure good communication and alignment. • An updated Options Appraisal and Business Case for an Alternative Service Delivery Model (ASDM) will be finalised and made available for consideration by Members. The Business Case considers how services currently directly provided by NCC, such as Day Service and Short Breaks might be run in the future.
<p>Key risks to delivery</p>	<ul style="list-style-type: none"> • Pressures from changing demographics and increased responsibilities from legislation may increase demand for services. • There won't be the community based support available to provide alternatives to paid support in order to reduce demand. • Maintaining service quality as much as possible in the face of falling budgets and the continued need to find savings. • Maintaining care provision in the face of increased costs and problems with staff recruitment and retention. • Adoption of nationally proposed health models may increase demand for social care services, it is important to assess their impacts to ensure that they are implemented in a way that supports the Adult Social Care strategy.