

Nottinghamshire County Council

Option for Change

	Option Ref C04			
1. Service Area	Adult Social Care, Health and Public Protection			
2. Option Title	Use of Direct Payments			
3. What we propose to do and how we propose to do it				
To review and re-launch the Council's strategy on the use and management of Direct Payments (DPs) focusing on the following:				
 Continue to promote and Increase the take-up of DPs and the use of Personal Assistants (PAs) 				
 Market development – stimulating the market to increase the availability of PAs and develop more cost effective options for people with DPs. 				
3. As a part of implementing the Adult Social Care (ASC) Strategy ensure that the assessment, support planning and commissioning of the appropriate level of care and support is done via a robust and transparent process. This will be done through a co-production approach with Service Users, ensuring their outcomes are identified, achieved and reviewed.				
1 Develop a more interne				

4. Develop a more integrated approach to providing managed care services and DP funded PA support to facilitate hospital discharge.

4. Why this option is being put forward

The Council has been very successful in promoting DPs as a realistic alternative to managed support services, and is the highest performing Council nationally with regards to the proportion of people that use a Direct Payment for their care and support needs. The speed at which this has taken place has meant that people have also used agencies for their support needs as the PA market has not been able to grow and keep pace with demand.

There is the potential to enhance the PA market so that there is more diversity of provision and increased choice for Service Users. By supporting the PA market to grow there should be a gradual reduction in the use of agencies by people who manage their own care and support through a Direct Payment. In most cases, services delivered through the employment of PAs are much more cost effective than those provided by agencies.

This will require developing, testing and establishing new systems and processes and developing a new model of PA and Direct Payments Support Services. This will require initial implementation costs and will require sufficient time for the new systems to become established. The following activities will be required:

Development of new internal Processes

- Developing and establishing robust processes for monitoring transactions and one-off costs to employ PAs
- Develop a system of vetting and barring of PAs to ensure the development of a safe and sustainable workforce
- Drive further the use of pre-paid debit cards to enable better auditing of accounts and management of budgets

Market Development

- Establishing a new model of service such as the 'Support with Confidence' model and learning from other examples of good practice
- Exploring options for PAs to collaborate within a recognised trading organisation such as a co-operative, Micro Provider or Community Interest Company (CIC). This could improve the quality of PAs care and help manage the turnover of care workers which would in turn improve care costs and sustainability
- Developing DP and PA services for people being discharged from hospital which focus on aiding recovery and promoting independence. This would give greater choice to individuals and help manage demand on the core home based services and care costs
- Levels of pay should match skills and competencies for PAs as in other areas of employment
- Developing a suite of providers who can offer pro-active re-ablement type services to maximise independence
- Liaison with officers involved in development of Pooled Budgets (as set out in the separate Continuing Health Care proposal) to enable an integrated Personal Health Budget (PHB) and DP model

Auditing and Quality Assurance processes

- Differentiating between type of service and what is included in the DP to meet costs i.e. complex personal care is more expensive than a befriending service and should be funded accordingly
- Develop internal processes to enable vetting and barring checks for all PAs
- Enhance monitoring and auditing of DP packages

5. What is the impact?

ON SERVICE USERS AND COMMUNITIES

- Improve choice of service options for Service Users
- Develop a more sustainable and safe market in terms of PAs
- May offer new employment opportunities for members of communities
- Positive impact on Service Users through the development of a more broad based, skilled and person centred workforce.
- Promote a clearer understanding of use and administration of DPs to Service Users

ON OTHER ORGANISATIONS / PARTNERS

- The work proposed in relation to market development will assist Clinical Commissioning Groups (CCGs) to meet service needs of people who want access to PHBs
- Positive impact on health partners through sharing of experience and skills in relation to PHBs

ON OTHER PARTS OF THE COUNTY COUNCIL

• To work with Economic Development where appropriate.

COULD THERE BE A DISPROPORTIONATE IMPACT ON PEOPLE WITH PROTECTED CHARACTERISTICS? (Y/N) (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation)No

• This proposal should not have a negative impact for service users.

DOES A FULL EQUALITY IMP FOR CHANGE? (Y)	ACT ASSE	SSMENT A	CCOMPANY	THIS OPTION	Y
6. Projected Net Savings to the Budget					
WHAT IS THE PERMANENT BUDGET?	[42,813	NET £000	42,715	
WHAT ARE THE PROJECTED N	IET SAVING	S TO THE B	UDGET?		
Gross Saving	2016/17 £000 151	2017/18 £000 580	2018/19 £000 1,280	TOTAL £000 2,011	
LESS Loss of Income LESS Costs of Reprovision	0 0	0 0	0 0	C C	-
NET SAVING	151	580	1,280	2,011	_
7. Estimated Implementatio	n Costs				
WHAT ARE THE ESTIMATED IM	PLEMENTA	TION COST	S?		
	2016/17	2017/18 201	18/19		
	£000		000	TOTAL £000	
Capital Costs	0	£000 £0	000 0	£000 0	
Capital Costs Revenue Costs		£000 £	000	£000	

8. Projected Permanent FTE Reductions						
WHAT IS THE CURRENT PERMANENT FTE STAFFING?				Γ	0.0	
	2016/17	2017/18	2018/19			
WHAT ARE THE PROJECTED PERMANENT FTE REDUCTIONS?	0.0	0.0	0.0		0.0	

9. Risks and mitigating actions

Risk: PA market does not develop sufficiently to achieve the anticipated increase in Service Users choosing PAs as an alternative to agency support.

Mitigation: Employment of Commissioning Officer / Market Development Officers (x1.5 (FTE) to analyse current situation and stimulate the market through targeted programmes of activity.

Risk: The development of a more vibrant PA market may be to the detriment of a vibrant agency market, with good staff choosing to move to become PAs.

Mitigation: Commissioning Officer / Market Development Officer will need to have an overview of the entire market for care staff and aim to encourage more people into both sectors of the market (employed and self-employed). This might be done by working jointly with Optimum (Nottinghamshire County Council Workforce Development) Economic Development and such organisations as Skills for Care and the care agencies to develop a co-ordinated campaign. This includes options for developing a co-operative or Community Interest Company.

Risk: Savings are predicated on Service Users choosing to use DPs/PAs; this may not be the case, especially for older people, people with mental ill health and people from Black & Minority Ethnic (BME) communities.

Mitigation: Developing a DP Experts by Experience programme to promote use of DPs and PAs. In addition, market development work needs to encourage diversity in the care market.

Risk: The skill set of the current commissioning team may not be sufficiently business orientated to understand how to stimulate small businesses – so may require support on business enterprise.

Mitigation: Develop links with Economic Development, Nottingham Business Venture, Nottinghamshire Chamber of Commerce etc.

Risk: PAs and providers may be resistant to short term re-ablement work due to the need for them to maintain income to remain financially viable.

Mitigation: Demand for services continues to increase as a result of demographic pressures and so there will continue to be a high demand for PAs.

10. Chief Officer Signoff

I confirm that in my opinion the option is realistic and achievable, and that known costs of implementation are included.	Signature	Date Signed	
	David Peason	Nov 2015	