
Meeting: Social Care, Health & Housing Overview & Scrutiny Committee
Date: 13 September 2010
Subject: Transforming People's Lives'–Transforming Care and Support Through Personalisation: Progress Report
Report of: Cllr Mrs Hegley, Portfolio Holder for Adult Social Care and Health
Summary: The report provides a summary of progress on the transformation programme since previously considered by the Committee and formally approved by the Executive in February 2010.

Contact Officer: David Jones, Transformation Project Director; Social Care, Health & Housing
Public/Exempt: Public
Wards Affected: All
Function of: Council

CORPORATE IMPLICATIONS

Council Priorities:

- Supporting and caring for an ageing population.
- Promoting healthier lifestyles.
- Increasing support for Carers (Social Care, Health & Housing Directorate Plan)

Financial:

Most of the early costs, such as consultation and the project team, are being met from the Social Care Reform Grant (this is the third and final year). As transformation is mainstreamed, costs will increasingly be met from mainstream budgets.

The development of the RAS (Resource Allocation System), the main financial risk, is underway but further work is required before the implications can be fully evaluated.

Legal:

The transformation programme's approach is consistent with current legislation. Legal input is being provided as the work progresses.

Risk Management:

Transformation is supported by regional and national work through the Department of Health and Association of Directors of Adult Social Services. Oversight is being provided by the Local Strategic Partnership through the Healthy Communities and Older People Partnership Board.

The regulator, the Care Quality Commission, is monitoring progress.

Staffing (including Trades Unions):

Over the coming months functions and roles will be reviewed and the impact will be assessed as detailed plans are developed.

Equalities/Human Rights:

All Local Authorities are required to implement a range of equality legislation which requires the Council to:

- Understand issues relating to disability, gender, gender assignment, race, religion or belief, age and sexual orientation
- Engage with service users, local communities, staff, stakeholders and contractors to identify and implement improvements
- Tackle barriers which restrict access to services or lead to poorer outcomes when using services (e.g. inaccessible buildings, poorly publicised services and lack of employees understanding about the needs of particular groups)

Customers from more vulnerable sections of the Community may have lower levels of awareness of services and as a result may find it harder to access and use services. They may also feel uncomfortable when they do access a service if assumptions have been made about the types of activity people want to participate in, or staff do not understand or address their needs. Vulnerable groups could include older people, disabled people, people with low levels of literacy, people from poorer socio economic groups, people experiencing domestic violence, some people from ethnic minority communities including migrant workers and Gypsies and Travellers, and people from lesbian, gay, bisexual and transgender communities. As the Putting People First strategy is developed and consulted on, an equality impact assessment will be undertaken to ensure that these needs are identified and addressed. Reference will be made to the specific guidance on equality issues developed by CQC and formerly CSCI. Specialist training on these issues has been launched for social care staff in Central Bedfordshire.

An Equality Impact Assessment is currently being undertaken.

Community Safety:

Risk assessment and enablement is an important part of support planning and is central to the proposed changes.

Sustainability:

No direct implications

RECOMMENDATION(S):

that the Committee considers the issues highlighted in the report and comments on progress on Transformation.

Background

1. **Putting People First** (A cross government concordat launched in December 2007) set the direction for adult social care over the next ten years. There is a broad political consensus on the need for transformation. The three year period supported by the Social Care Reform Grant comes to an end in March 2011. The new Government is to announce a 'refresh' of Putting People First in October.
2. The local response, the Central Bedfordshire '**Transforming People's Lives**' programme was considered by the Committee on 4 February and the approach was approved by the Executive on 9 February 2010.
3. The changes are seen as an essential part the Council's transformation programme and are being developed in partnership with NHS Bedfordshire and local voluntary/community organisations and provider agencies. They apply to people who fund their own care as well as to individuals directly supported by the Council.
4. **Putting People First consists of four main elements:** universal services, early intervention and prevention, social capital and choice and control.
5. **Universal services** - such as suitable housing, access to transport, including bus passes, leisure and libraries (to reduce social isolation, contribute to health and well being) and safe pavements (to reduce falls requiring hospital admissions which increases the need for longer term care), more accessible information and advice so people can make their own decisions about longer term support options illustrate that all Council directorates and other partner agencies have an important part to play.
6. **Early intervention and prevention** - There is ample evidence that re-directing investment to Telecare / Assistive Technology, health checks and re-ablement services reduces dependency and longer term costs (national research found that 58% of people utilising re-ablement did not need services afterwards).
7. **Social capital** - is about contributing to the development of relationships – such as support to carers, volunteering, and village care schemes (for example collecting pensions and taking people to appointments)– which increase the capacity of local communities to provide solutions and reduce the need for direct support from the state.
8. **Choice and control** - Self Directed Support, especially Personal Budgets. Although this report will focus more on this area because of the performance requirements, the importance of the other quadrants should not be underestimated and they are an essential part of the Council's strategic approach.

9. There are five national milestones to be met by April 2011. These relate to:
- Effective partnerships with people using services, carers and other local citizens
 - Self directed support and personal budgets
 - Prevention and cost effective services
 - Information and advice
 - Local commissioning

Progress is summarised later in the report.

Progress and Key Issues

10. In February, the Executive supported a local draft vision statement for Transforming People's Lives (see appendix 1) so consultation with stakeholders could commence.
11. **Public engagement:** In addition to presentations at a number of meetings, three main public events were held in different part of Central Bedfordshire during June. Leaflets, articles in News Central and on local radio were produced to tie in with these events. A DVD telling the stories of local people benefitting from personal budgets was 'premièred'. The events were well attended and positive feedback was received. There was general support for the Transformation programme and the questions and comments were very constructive and of a practical nature.
12. Customer Expert Panels are being established, jointly with NHS Bedfordshire, to further develop engagement with users and potential users of local services.
13. During July, three events were held for providers – for local voluntary / community organisations, nursing / care homes and domiciliary / Supporting People providers. Some organisations are already providing more personalised care and support, others have much further to go; more targeted training and development is being planned.
14. The Council is on track to achieve the five national milestones detailed in paragraph 9. CQC recently commended Central Bedfordshire on the progress made during the past six months. From being well behind, the Council is now in the middle of the field and is benefitting from learning from the early starters.
15. The following section highlights specific **developments relating to the Putting People First quadrants** (paragraphs 5 -8)
16. An information and advice strategy has been developed with partners. The web strategy will not only develop the Council's information and sign posting but improve links with local voluntary and community organisations to achieve a more joined up and accessible approach. Consultation is taking place on the content and format of the website and the production of a comprehensive series of fact sheets.

17. A prevention strategy, developed with NHS Bedfordshire, was approved in the spring. The scope of the re-ablement service is being extended and aligned with NHS intermediate care. This will result in a more comprehensive service to enable people to re-learn life skills for daily living, usually within a six week period, to significantly increase the numbers able to remain in their own home. Proposals are also being developed to expand the provision of Telecare.
18. A revised carer's strategy: 2010 - 13 is currently subject to consultation. Dialogue has commenced on developing better links with Village Care Schemes.
19. The main focus of the Transformation programme has been to give more choice and control through the introduction of **personal budgets** for cared for people. This is the amount of money paid by the Council through adult social care; for many people this is added to by other public funding such as the Independent Living Fund and by the individual and their family – the combined amount is often called an individual budget. They enable people to use funding for a direct payment, (to buy external care and support) Council or contracted services or a combination. Personal budgets have been available in Central Bedfordshire since December for older people, people with physical disabilities and people with a learning disability.
20. 251 people are benefitting from personal budgets. Traditional direct payments and personal budgets are aggregated as self directed support (SDS) and there is a local and national target of 30% of people in receipt of community based support having SDS by the end of March 2011. Performance is improving but there is a considerable way to go to reach this target. (Up to date figures will be provided at the meeting).
21. The main group using personal budgets are older people (76 %) followed by people with learning disabilities, (16%) and people with physical disabilities (8 %). The use of the funding is predominantly for contracted services (45%) and in-house services (21%) with direct payments – other (14%) and direct payments – personal assistants (13%); 7% are having a combination. Experience from other areas suggests that as the local market develops, people will make less use of Council and contracted services.
22. In common with most other councils, Central Bedfordshire is developing a resource allocation system (RAS) to provide a clear and rational way to calculate how much money a person is likely to need to arrange support which meets their outcomes. As an interim method, the Council has been using a ready reckoner based on current unit costs. As this methodology cannot be applied to people with mental health needs of working age until unit costs are available from the new Mental Health Trust, only traditional direct payments are being provided. For carers, personal budgets are also not being given but vouchers and direct payments are being used until a carers RAS is ready next year.

23. The early starter local authorities have had to make many revisions to their RAS so Central Bedfordshire is learning from them. Most begin with a supported self assessment questionnaire / needs assessment questionnaire, which give points that have a monetary value with the total being the indicative budget. The Council is evaluating options in order to choose and test a methodology which is financially sustainable and has an interface with the updated SWIFT database. It is considered prudent to take longer as this is such a critical decision.
24. The two essential steps to giving a personal budget are:
- Calculate an indicative budget (an estimated amount through a RAS - currently using the ready reckoner)
 - Complete a support plan (this can be with the assistance of a care manager, the family or a local voluntary agency).
- The support plan and personal budget must be approved by the Council to be legally compliant and the amount may be more or less than the indicative budget.
25. Unlike a care plan, a support plan should be a living document owned by the customer and must focus on achieving agreed outcomes. Risk enablement and contingency arrangements are part of the plan.
26. The seven criteria for support plans are:
- What is important to the person?
 - What does the person want to change or achieve?
 - How will the person be supported?
 - How will the person use their personal budget?
 - How will the person's support be managed?
 - How will the person stay in control of their life?
 - What is the person going to do to make the plan happen?
27. For some staff, this person centred partnership approach seems very different from care planning. Therefore, all staff undertaking support planning will have had to undertake training by mid September. The national experience is that support planning takes longer (urgent services are provided in the meantime if required) but has better outcomes for the individual and in the longer term is financially more beneficial than a traditional approach.
28. **A high level customer pathway** has been agreed by the Programme Board and the Healthier Communities and Older Peoples Partnership Board. (See appendix 2) The strategy is to invest earlier in the journey, especially through better information and advice and an expanded Re-ablement service to reduce dependency and the number of people who will require on-going funding through a personal budget. Current volumetrics (customer flows and funding) are being mapped to assist with the design of a new operational structure.
29. At the last Executive meeting a cross sector workforce strategy and action plans were approved. This will support changes in roles and functions as part of a radical re-design of the workforce.
30. Policies and procedures are being produced or revised in line with the transformation programme.

31. **Governance:** The TPL programme is following project management principles
There are five work streams:
- Transforming the customer experience
 - Transforming the market
 - Transforming the workforce
 - Transforming the support systems (ICT)
 - Transforming relationships (communications & co-production)
32. The Director of Social Care, Health and Housing chairs a bi- monthly Programme Board. This reports to the Healthier Communities and Older Peoples Partnership Board; part of the structure of the Local Strategic Partnership.
33. The foundations are now in place so the Transforming People's Lives programme should increasingly be mainstreamed and deliver better outcomes to the residents of Central Bedfordshire.

Appendices:

Appendix 1 – Draft local vision for transformation
Appendix 2 – High level customer journey

Background Papers: (open to public inspection)

Putting People First; December 2007
Report to Executive; 9 February 2010

Location of papers: Houghton Lodge, Ampthill.