

TELFORD & WREKIN COUNCIL

CABINET – 7 JULY 2009

PERSONALISATION – TRANSFORMING ADULT SOCIAL CARE

REPORT OF CORPORATE DIRECTOR: ADULT & CONSUMER CARE / HEAD OF SERVICE DEVELOPMENT

1. PURPOSE

This report summarises the conclusions reached through the Putting People First programme to develop a model for 'personalisation' of adult social care. The government's stated aim is to transform social care so that decisions and choices are led by people who use care services. The proposals described in this report set out how we could approach the organisation and arrangements for services by 2011 in meeting the transformation requirements.

2. RECOMMENDATIONS

Members are asked to:-

- **Consider the principles of personalisation for adult social care services and the implications for fundamental changes in the way care and support is organised and arranged in Telford & Wrekin;**
- **Note that a further report will be produced following pilot work so that the new model of personalised services can be considered for full implementation during 2011.**

3. SUMMARY

Putting People First was published as a government protocol towards the end of 2007. The document was signed by the Secretaries of State for government departments, including Health, Work & Pensions, Communities & Local Government, and Children, Schools & Families, plus others such as the Association of Directors of Adult Social Services. It was presented as the basis for joining up services around individuals and was the first time that such a wide-ranging protocol had been produced. The government has stated that Putting People First 'sets the direction for adult social care over the next 10 years and more'.

A programme for Putting People First in Telford & Wrekin was established from July 2008, following earlier work to consider how we should rethink community care. This programme has involved work across six main areas to develop

proposals for achieving personalisation of adult social care services. These areas are based on helping people who use social care services, families and their carers by;

- Improving ways to gain access to information and services;
- Providing brokerage to support and assist in choosing services;
- Enabling the promotion of independence and avoiding unnecessary dependency;
- Allowing more influence and control for the individual through personal budgets;
- Working with providers to develop flexible and responsive care service;
- Developing the workforce and skills for the future.

Options for each area were developed from local and national sources so that best practice and effectiveness could be identified. This work resulted in a set of proposals at the beginning of 2009 that are now being brought together as a 'target operating model'. This model sets out the process and arrangements that we will aim to have as our way of organising adult care and support to achieve personalisation of services.

Subject to the completion of pilot work, consultation and systems development, it is intended that the revised model for personalised services will be brought into effect on a planned basis during 2009-2011. It is proposed that the changes will be completed by mid 2011 so that the new approaches operate as the norm for the future.

4. PREVIOUS MINUTES

- Personalising Services – CAPS 1.9.08
- Putting People First in Telford & Wrekin – CAPS 1.9.08; Cabinet 29.9.08
Cabinet Minute CB-63

5. INFORMATION

5.1 Background

The main elements of a new model for delivery of adult social care services are:

- Improving the process of **access to our services**, through **better information and advice**. Seeking to resolve queries in a more responsive way, either to signpost to other, more relevant avenues of help (e.g. voluntary services), provide low level services (e.g. equipment, community meals), or to progress to a more detailed assessment of need or emergency service. There are opportunities here to link with services such as voluntary organisations and health for example.
- Mainstreaming **enabling and preventative services** to help individuals reduce or eliminate their level of long-term need (e.g. through falls prevention). Continuing work to prevent hospital admissions and aid discharges.

- Enabling **self-assessment or assisted assessment**. An assessment process that makes sure a person is in control and able to express how that individual wants to live their life.
- A **personal budget** for every individual that has been calculated using a clear and straightforward system. A range of options on how this personal budget is managed, from the individual themselves, to the Local Authority on their behalf.
- A **brokerage** process whereby the best deal can be found for the use of a personal budget, with staff who can provide detailed information and knowledge of the range of services on offer.
- **Working with care providers** to ensure the range of services that are wanted by our citizens, are available to buy. Ensuring these services are appropriate, good quality, provide value for money, and are safe.
- Making sure our **workforce** and staff working for independent care providers have the right level of skill and knowledge to deliver this model of care to our citizens.

Work through the Putting People First in Telford & Wrekin programme has involved considering the options for the main elements that should be part of the approach for the future. The results of this work have been reviewed through a steering group of managers and representatives from Council portfolios, the NHS Primary Care Trust and Council for Voluntary Services. This has also been supported by the Department of Health Care Services Efficiency Delivery (CSED) regional team.

The Programme Board is led by the Cabinet Member for Adult and Consumer Care and involves senior representatives from across the Council and partner agencies. The Board maintains overall control of the workstreams and actions to enable wider engagement. A number of events have been held to raise awareness and help in opening up discussion around the ideas and features of the future model for personalisation of social care services.

5.2 Proposals for the Future

The proposed model for the future is described in the attached document 'Personalising Care & Support'. At this stage, the proposals are for the main elements that would be part of the future approach and approval is being sought for the model to be adopted as the basis for more in depth work to develop specific arrangements and processes.

Subject to agreement in principle, the next phase of work will focus on ensuring that the new model will be effective in enabling people who use social care services to achieve greater control and independence. This will require significant changes and pilot projects to test that the key parts of the future model work effectively before actions for full implementation. In view of the scale and complexity of these changes, a two year programme is proposed so that the full personalisation approach is in place for all social care services by mid-2011.

In parallel with the Putting People First programme for social care, there are corresponding developments being pursued in other linked services, such as housing and the NHS. We are working to integrate or ensure that effective links are made so that each person can have the right services in place according to their individual needs and choices. Some examples of these links are for personal health and care budgets; promoting preventative services and enablement in social care and health; and supported housing so that people can continue to live in the community as an alternative to residential care.

5.3 Achieving Personalisation

The principles of personalisation have received wide support both nationally and locally. Proposals for enabling people to have choices and control in their lives are particularly important for individuals who may experience major barriers due to disabilities or age or ill-health; often through a combination of these factors.

The nature of the changes envisaged through the Transforming Social Care Grant and Putting People First are fundamental and will involve some major changes in the way we work as individuals and as a Local Authority. In view of the extent to which there are also links to areas such as health services and housing, there are corresponding changes in those organisations that we will need to make links to. An example of this is the introduction of World Class Commissioning in the NHS which includes strands such as choice, personal health budgets and enablement.

The work to implement personalisation through our programme over the next two years will require revisions to information systems, new financial processes, new roles such as brokerage, changes in the processes that we operate, such as assessment and care management, and development of external service providers so that they can operate in a more flexible way according to the preferences and choices of individual service users. The implementation programme will involve extensive discussion with service users, staff and others who will be affected by the changes. Our aim will be to ensure that there is a smooth transition to the new operating model and in relation to the changes required to achieve this such as redefining roles and providing appropriate training and skills for staff.

5.4 Consultation

An important part of the process through the Putting People First programme is to ensure that there is consultation at each key stage. The project plans will identify future consultation for people who use services, families and organisations with an interest in social care and the wider general public. As part of the developing initial ideas there was a launch event in November 2008 – with the involvement of the National Lead for Learning Disabilities - and a follow-up in February 2009 centring on emerging options. These sessions were led by the Cabinet Member for Adult and Consumer Care and the Corporate Director, with an invited audience to represent the wide range of stakeholders.

Further events will be held as part of the consultation on the final proposals and subsequently for implementation of the programme.

5.5 Equal Opportunities

Access to good quality care and support is central to the quality of life for many people who need assistance for reasons such as ill-health, disability or frailty due to old age. Historically, services have been decided and arranged on the basis of identifying a service area that the person met need criteria for. This has produced an inconsistent approach and a lack of flexibility, choice and control for the individual often linked to other factors such as social deprivation and low income. The proposals for Putting People First will place the individual at the centre of services and enable wider access to services that the person can direct according to their preferences. This will have a significant impact on achieving equal opportunities by allowing each person to ensure that factors such as age, disability, ethnicity and other considerations relating to equality and diversity are met according to their personal choice.

5.6 Environmental Impact

The proposals within this report and the attached document do not have any direct environmental implications but may lead to some increased use of transport as individuals exercise choices requiring services in different locations. However, the overall impact on the environment is likely to be minor.

5.7 Legal Comment

The proposals for personalisation have been developed following the White paper *Our health, our care, our say: a new direction for community services*, Department of Health (2006) which describes an integrated approach toward health and social care. This was reinforced by the publication of *Strong and Prosperous Communities: The Local Government White Paper*, Department for Communities and Local Government (2006) which widens the approach into the community. The approach was confirmed in the '*Putting People First*' *Concordat* published in December 2007 and as described in the body of this report.

Local authorities already have powers to make direct payments under the Community Care, Services for Carers and Children's Services (Direct Payments)(England) Regulations 2003 and the Government is considering extending this through corresponding powers and duties for the NHS to make individual budget payments.

Circular LAC(DH)(2009)1:Transforming Adult Social Care was published on 5th March 2009, which sets out further information to support Councils and their partners in this process and indicates that a Green Paper will be published by the Department of Health this year.

5.8 Links with Corporate Priorities

This report relates to the Council's priorities around promoting healthier communities and the quality of life for older and vulnerable people and promoting the health, well-being and life chances of children and young people.

5.9 Opportunities and Risks

The opportunities and risks associated with the introduction of new approaches to achieve personalisation have been identified and assessed. Arrangements have been put in place to manage the risks and maximise the opportunities that have been identified.

Part of the approach through the Putting People First in Telford & Wrekin has been to work with the corporate risk officer so that a range of risks could be established and actions proposed to reduce them. There are potential risks such as pressure for additional resources due to personal budgets being introduced or services deteriorating due to poorly implemented changes. While these risks may present problems if they aren't addressed properly, the approach that has been adopted in our Putting People First programme should avoid or minimise the likelihood of significant unresolved issues. The strong focus on effective financial management that is in place for social care services will continue and will be adapted to meet personal budgets and other new arrangements. Similarly, any transition to new forms of providing services will be carefully managed and tested through pilot work before being fully implemented.

Major changes always result in unavoidable risks but the alternative of avoiding change will lead to even greater risks if services and our approach become out-dated. The project and programme management for Putting People First in Telford & Wrekin will ensure that change is introduced as an opportunity to improve the lives of local people while minimising risks such as inadequate control of resources.

5.10 Financial Implications

One of the outcomes of the Personalisation process is likely to be a redistribution of budgets and a change in emphasis; from accounts held to pay for total costs of care provision eg home care, to accounts which will now be specific to each individual client and may result in more people opting for Direct Payments. Many authorities are looking at a Resource Allocation System which is designed to allocate resources to individual clients based on an assessment of their needs and/or required outcomes. This model is currently being reviewed as part of the Target Operating Model and a pilot to test the system will take place in due course.

The process will also change our current system of charging client contributions. We will also have the option to allocate budgets to service users *net* of client income, significantly reducing the need for invoicing. Current

charging mechanisms are informed by the cost of provision eg day care costs etc. Initial guidance from Department of Health has suggested that charging may be based upon a fixed proportion of the costs of service provision, subject to both Local Authority cap on maximum charge and clients' maximum affordability, identified through a financial assessment process.

Following implementation, there is the *potential* for a certain level of ongoing efficiency to be generated through service users directly procuring their own care packages and having the flexibility to purchase care specific to them at locally agreed prices. It is however far too early both locally and nationally, to gauge whether efficiencies are actually realisable or not. There are numerous other factors to consider, not least of which is an anticipated increased level of demand from clients who previously may not have considered a package of care.

In order to support the costs of implementation, the Dept of Health has awarded the Council specific grant allocation of c£259k for 2008/09 with further grant of £612k being receivable in 2009/10 and further grant of £763k receivable in 2010/11. The total costs of implementation will be contained within this level of resource.

The actual financial implications of Personalisation will be closely monitored through robust financial reporting.

6. WARD IMPLICATIONS / CONSULTATION

District-wide implications.

7. BACKGROUND PAPERS

Key documents that can be referred to for background information:

- "Our health, our care, our say: a new direction for community services", Department of Health, January 2006
- "Putting People First" Concordat, Department of Health, December 2007
- "Transforming Adult Social Care LAC (DH) (2008)1", Department of Health, January 2008
- "The case for change – Why England needs a new care and support system", HM Government, May 2008
- "Transforming Adult Social Care LAC (DH) (2009)1", Department of Health, March 2009

***Report prepared by Paul Donohue, Head of Service Development,
telephone (01952) 381007, email: paul.donohue@telford.gov.uk***