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Report of the Director of Adult Social Services

Executive Board

Date: 8 October 2008

Subject: Putting People First – Vision and Commitment to the Transformation of Adult Social Care

Electoral Wards Affected:

All

Ward Members consulted (referred to in report)

Specific Implications For:

Equality and Diversity

Community Cohesion

Narrowing the Gap

Eligible for Call In

Not Eligible for Call In (Details contained in the report)

EXECUTIVE SUMMARY

1. The purpose of this report is to update Executive Board on the work undertaken in Leeds, since the publication of the concordat "Putting People First" in December 2007 and the Executive Board report in January 2008 which outlined the vision and direction for the development of adult social care services in the future.
2. It provides a summary of the national and local drivers for this programme of work and summarises the main issues that have to be addressed by all Local authorities if they are to deliver successful change.
3. The main issues are accompanied by descriptions of other allied policy initiatives that support empowerment and enablement of individuals and the communities they live in and as such are contributors to the overall transformation agenda. This serves to highlight the fundamental nature of the reform agenda, the significant changes in the kind of relationship the Local Authority will have with its customers/service users and contracted providers of care services and its impact on all aspects of Adult Social Care Services (ASC) and the wider Local Authority service provision.
4. The specific work streams are described and summarised to provide some detail on the scale, scope and timeline associated with this work.

5. The report recommends Elected members note the progress made so far, continue their support through future Executive Board reports, involvement in workshops, conferences, seminars and through the elected member forum. Acknowledge the scale and scope of the transformation challenge ahead and endorse the approach we are taking in Leeds to deliver successful change and improve the outcomes for the people of Leeds.

1. Purpose Of This Report

- 1.1 The purpose of this report is to update Executive Board on the work undertaken in Leeds to prepare for the personalisation agenda, since the publication of the concordat “Putting People First” in December 2007. This requires significant whole system change with impact across all parts of the social care system. It highlights the implications for the budget setting cycle, directly provided services and workforce development.

2.0 Background Information

- 2.1 On 23 January 2008 Executive Board received a paper advising them of the publication of “Putting People First” which outlined the vision and direction for the development of adult social care services in the future.
- 2.2 Elected members agreed the endorsement of the principles and direction of travel and that they be engaged in developing the way forward through information, seminars, establishing a members forum, and scrutiny under the leadership of the Executive Board and Lead Member for Adult Social Care (ASC).
- 2.3 There have been 13 national pilot sites developing the arrangements for Individual budgets. Additionally, a number of other local authorities have developed innovative ways of supporting people with learning disabilities under a Government initiative called ‘in Control’. All local authorities have been modernising social care services to enable people to have more choice and control over their care services and have been working in close partnership with other council services, health services and the voluntary and independent sector. These initiatives together represent the direction towards the delivery of a more personalised adult social care system.
- 2.4 In the last year the service has made good progress in raising the numbers of individuals in receipt of a direct payment. However, the full transformation to offer of individualised budgets and choice and control in decision making for individuals refusing social care services requires a further step change of progress. The changes Local Authorities are introducing are being supported by a range of Department of Health led initiatives. A National Director for personalisation / self directed support has been appointed to work jointly with the Department of Health and the Association of Directors of Adult Social Services (ADASS). Regional Representatives are working with the National Director and finance to find developments will be available via the Regional

Joint Improvement Partnerships (JIP) and Regional Efficiency and Improvement Partnership (REIP).

2.5 A resource available to support Local Authorities is the organisation 'in Control'. In Control was set up as a social enterprise by a number of partners, including the Department of Health, in 2003. Its primary focus was *"to explore ways in which the current system of social care might be reformed, in particular to develop a pragmatic and universal model of Self Directed Support"*. Leeds became a Level 1 member of 'in Control' in August 2007 when the Self Directed Support project was initiated. To progress the personalisation of social care services, Leeds were invited to be one of the local authorities moving to Phase 2 membership – Total Transformation Project 2008 – 2010, a challenge that we have now accepted, this was reported as a delegated decision taken by the Director of Adult Social Services on the 27 August 2008. This will support the accelerated pace of transformational change required to enable Adult Social Care (ASC) to achieve the targets laid down in the Local Authority Circular 'Transforming Social Care for 2011'. This was issued on 17th January 2008 to support the transformation of Social Care and makes clear that *"by 2011 person centered planning and self directed support to become mainstream, with individuals having choice and control over how best to meet their needs"*. This approach has been signaled in the Department of Health's Social Care Green Paper, Independence, Well Being and Choice (2005) and reinforced in the White Paper, "Our Health, Our Care, Our Say" published in 2006, which set a new direction for community services. This approach was subsequently confirmed in the concordat "Putting People First" published in 2007.

3.0 Main Issues

3.1 Putting People First's guiding principle is to build on best practice and replace paternalistic reactive care with a system that focuses on prevention, early intervention, enablement and high quality personally tailored services. Adult social care has a championing and leadership role in creating a new high quality care system that is fair, accessible and responsible. This can only be successfully achieved by working with partners including other services within the council, NHS, other statutory agencies, third and private sector providers, users and carers and the community of Leeds as a whole.

3.2 Putting People First is one of a number of initiatives contributing to system wide transformation which are at varying stages of progress. These include:

- Joint Strategic Needs Assessment (JSNA) is a process that will identify the current and future health and wellbeing needs of a local population, informing the priorities and targets set by Local Area Agreements and leading to agreed commissioning priorities that will improve outcomes and reduce health inequalities. Work on this has commenced and the three Scrutiny Boards, Children, Health, and Adult Social Care are being made aware and consulted upon the implementation plan. This work will be ready for implementation by April 2009.
- A locally agreed approach to prevention, early intervention and enablement which has focussed on health and well being initiatives, provision of information to support self management and avoid unnecessary ill health, tackling social isolation, and a recovery and enablement approach to

support. This has particularly been targeted at disadvantaged groups, including older people with mental health needs, people from black and minority ethnic communities and people with physical and/or sensory impairments.

- Universal information, advice and advocacy services which will build on the work developed through Linkage plus and the development of the web based info store and the development of Local Involvement Networks (LINKs), jointly with the PCT.
- A common assessment process which is being worked on through the interagency Integrated Assessment Group. This work stream is designed to provide one assessment document held by the service user that will be used and updated by any professional in contact with a service user or carer. It is designed to avoid individuals feeling they have to restart the process of requesting a service every time their circumstances change.
- Person centered planning, self directed support, direct payments and personal budgets. (See Paragraph 3.3)
- Families, service users and their carers to become experts and care partners with us. (Experts by Experience). A Self Directed Support (SDS) peer group has developed with current users of Direct Payments. Membership of this group has now been extended to include those users and potential users of social care services who are involved in the development of SDS support in Leeds.
- Changes in the Community Equipment Service-Leeds Social Care and the PCT are carrying out an options appraisal of the current joint service, which includes considering the potential to adopt in whole or in part the Retail Model proposed by Care Services Efficient Delivery (CSED). The options appraisal will be completed by October 2008 and recommendations will be made to the Council and the PCT as to the most appropriate model that will best service the interests of Leeds residents.
- Integrated working with children's services for improved transition planning. This will include the involvement of young people in transition in the early implementation for SDS.
- Continued support of User led networks. The Centre for Integrated Living (CIL) is a good example of a User Led Organisation (ULO) that we will need to develop in the future but which will also need to be able to express their independence from the Local Authority by becoming an independent organisation
- Continued development of robust safeguarding systems to ensure care and support for those who are most vulnerable in line with "Independence, Choice and Risk", the Department of Health guide to best practice in supported decision making. An Executive Board report in June 2008 on Safeguarding in Leeds received information on the action plan that has been drawn up to update our current procedures, improve multi agency and multi disciplinary working and improve the safeguarding arrangements in Leeds.

3.3 Development of Self Directed Support (SDS) in Leeds

Central to the delivery of personalisation is the development of SDS. Leeds has made positive progress in preparation for the delivery of SDS and since the paper to Executive Board in January work has progressed in each of the current 10 workstreams:

- Support Planning – A draft Self Assessment Questionnaire (SAQ) has been developed which can be used for all service user groups. The introduction of a new SAQ will provide service users with a simpler method by which people who need social care support can identify and show their day to day needs for support at the start of the assessment process. A workshop has been held with service users, ASC and the voluntary and independent sector to identify the key features of a support plan and quality standards. Further work is planned to ensure all safeguarding issues are addressed through establishing a risk management panel.
- Care Management – This is focusing on the impact of SDS on the current care management service and proposing how this will be delivered. We anticipate SDS will have a significant impact on the way assessment and care management will be delivered in the future and have already identified new brokerage, advocacy, reviewing and support planning skills which will require different skill sets, competencies and new training for the ASC workforce of the future.
- Children and Young People – This group have identified those young people rising 18 who wish to pursue an individual budget. A joint working group between ASC and Children and Young People’s Social Care has been established to look at the joint commissioning issues that will deliver a more personalized, community based service. This work sits within the context of the wider work within children’s services to develop more personalized services to children and young people, being developed through integrated local services within a citywide framework for strategic commissioning. This approach has previously been outlined in a report to Executive Board and was part of a joint children’s and adults services seminar held earlier in 2008.
- Commissioning and Contracting – SDS poses significant challenges for our current commissioning and procurement arrangements. The move from block contracts and “one size fits all” to a bespoke and customized approach will require change to our current arrangements. Our relationship with our providers will change as in the future individual service users will be exercising their choice to buy from them as a customer rather than passive recipients of the services they provide. To facilitate this change a series of workshops are being held in Leeds with adult social care providers, in the private and voluntary sector including directly provided services, to deliver the changes to the market and build the flexible and creative services which will allow people the choice and control regarding their social care support. These are being jointly led with experts by experience. Work is also starting on developing transparent pricing and costs for directly provided services within the finance workstream.
- Assistive Technology – Learning from other local authorities is helping inform progress which includes working out the route from identification of needs to the provision of assistive technology when this is required. Unit

costs will be identified and the links into individual budgets, including housing costs across all tenures. This will be undertaken alongside the option appraisal for Leeds Community equipment service.

- Workforce Development and Human Resources - The key challenges for the workforce are being captured from the work within the other workstreams to ensure a workforce development strategy to raise skills and promote career development to ensure that the capacity, competency and commitment of the social care workforce can empower and support people who use services and to exercise choice and control. A conference was held on 18 September 2007 to launch SDS in Leeds for all ASC staff and this will be followed up with a second event in September 2008. We are aware of the work being done nationally by the Department of Health on developing an Adult Social Care Workforce Strategy and how other Councils are redesigning their Assessment and Care Management service and other services as a result of the impact of Personalisation – these will serve as our templates against the Leeds picture.
- Brokerage – In Leeds brokerage is described as ‘the types of support, information and advice that people may need to obtain and take control of their own personal budget, develop their own support plan and take the action needed to set up the support and services outlined in their support plan’. A literature search of brokerage in other areas is in progress and information collated about services available or being planned in Leeds. Options for a model of brokerage in Leeds will be developed with stakeholders.
- Finance – A Resource Allocation System (RAS) for Leeds is currently being tested with information from existing care plans. The RAS offers an alternative and simplified methodology for allocating money to customers in relation to risks and needs. It uses the level of need determined by the SAQ. Work is also progressing on formalising payment methods including consideration of the use of the ‘city card’.
- Management Information – The impact of SDS on current systems on the Electronic Social Care Record (ESCR) is being considered to ensure information is collected in ways that can be measured and shared with others and inform our future commissioning intentions as appropriate.
- Communication and Consultation – A communication plan for the SDS project has been developed to ensure that there is clarity and consistency of information within the project and with all stakeholders. This is needed to maintain awareness and commitment to the principles of SDS and manage the process of change effectively. A SDS Reference group has been established which initially consisted of people using direct payments but now extended to include those experts by experience who are directly involved in the project board, team and workstreams. Presentations are being made to established user groups across the city and involvement in the project has been encouraged.

3.4 Two additional areas of work are being established;

- Members Forum – Elected member engagement will be aided by a cross party Members Work Group chaired by an Independent Social care expert and supported by the Director of Adult Social Services and Chief Officer –

Access and Inclusion. An initial meeting was held in early September and members invited to attend an 'in Control' event on 8 September 2008 focusing on 'building the infrastructure in public services' for personalization".

- Early implementer – To test out the methodology developing as outlined in 3.3 an early implementer project is planned for the late autumn. This will include implementation of self directed support to a representational group of about 50 people across all user groups, including current recipients of direct payments. A number of service users from this group have already expressed interest in being part of this first cohort.

3.5 The direction of travel for the transformation of adult care services was described in Putting People First and the LAC (DH) (2008). The landscape for the delivery of SDS changes rapidly and since the publication of Putting People First in December 07 further challenges have been set down by the Department of Health who have recently advised that by 1 April 2009 that there will be an expectation that all people in receipt of a social care package will know the amount of money allocated to their care plan, and be informed they have a choice to spend the money differently. The implications of this are that the pace of change will need to be significantly increased to meet these challenges and hardening of targets, and will impact on all parts of ASC business and functions. We recognise there are particular challenges for a city the size of Leeds with the current levels of directly provided services and the requirement for us to modernise and transform these services. The framework for these changes will be exacting given the Government's target of being able to offer personalised services to everyone by 2011.

3.6 Although Leeds is making good progress towards having the infrastructure needed to deliver all the elements of SDS to assist us further we have entered a partnership with "in Control" to gain access to the benefits provided by Phase 2 membership to help meet this challenging agenda. Early indications from the national "in Control" pilot sites that about 50% of people chose to keep their existing services, 35% made some adjustments and 15% opted for a total change. This indicates that some 50% of existing pilot site service users have all or in part, changed the way their services are provided. We can reasonably anticipate customer expectations in the future around choice, personalisation and an increasing awareness will cause these numbers to rise. The risk to the Local Authority, in not transforming our existing provision at a similar pace to these changing customer expectations, will be having fully funded directly provided services that people may not wish to purchase leaving insufficient funding to give to individuals who wish to purchase. The transformation of this service will require exceptional financial and business forecasting linked to excellent intelligence on service user performance

4.0 Implications For Council Policy And Governance

4.1 The workstreams outlined in 3.3 above signal the changes required. This agenda will support the achievement of improvements in relation to the strategic outcomes for vulnerable people outlined within the Council's Strategic Plan and include contributing to the development of a Health and Wellbeing Plan; and a commitment to the Council's value of Putting Customers First as articulated within the Council's Business Plan. There will be significant challenges to be met both within the Council's People's Strategy and workforce planning

arrangements to ensure the necessary changes in focus and skills is achieved among the workforce.

- 4.2 As detailed at 4.1 above there will be an impact on a number of the Council's policies although in particular this programme of transformation will have significant implications for the Council's Financial and Asset Management Plans as these proposals seek to release resources from within existing service provision to provide both more person centred care and individualised budgets and direct payments.

5.0 Legal And Resource Implications

- 5.1 Investment priorities for the use of the Social Care Reform Grant have been agreed within the Directorate. These priorities reflect the significant investment requirements to deliver the outcomes from the Putting People First agenda, including the development of SDS, together with the range of personalisation initiatives outlined within this report.

- 5.2 The proposals outlined within this report signal a radical change in how resources currently employed, both within adult social care and the wider Council, are used to meet the needs of vulnerable people. To support the transformation of adult social care outlined in paragraph 2.5 above will clearly require the reconfiguration and/or decommissioning of existing services. Detailed estimates of both the size and timing of resource realignment is currently being considered as part of the directorate's investment planning to inform the Council's medium term financial plan.

6.0 Conclusions

- 6.1 This report updates members on the progress made by ASC and its partners in developing a more personalised system of social care support for people in Leeds. The increasing pace of change required to meet challenging government targets is highlighted and recognition given to the particular challenges for a city the size of Leeds with a high level of directly provided services together with the range of personalisation initiatives outlined within this report.

7.0 Recommendations

- 7.1 Members are requested to:

- i) Note the good progress made in Leeds towards the development of a more personalised system of social care through the SDS project and other initiatives.
- ii) Acknowledge the scale and scope of the transformation agenda, the challenge it presents and endorse the approach taken in Leeds to deliver successful change.
- iii) Support the continuing direct engagement of elected members in these developments by inviting future executive board reports, and involvement in workshops, seminars, conferences and the recently established members' forum.
- iv) Note the impact SDS will have on existing service provision including directly provided services and commissioned services in Leeds and the

need to accelerate the transformation of these services to meet the challenges and impact of personalisation and customer choice.

- v) Note that progress and the pace of change regarding the delivery of Personalisation in Leeds will be the subject of some detailed feedback from our recent inspection of Older Peoples Services.
- vi) Recommend that progress be monitored by the Adult Social Care Scrutiny Board.

Background Documents

- Department of Health's Social Care Green Paper – Independence, Well Being and Choice (2005)
- Department of Health's White Paper – Our Health, Our Care, Our Say (2006)
- Putting People First – The Vision and Commitment to the transformation of Adult Social Care (2007)
- Local Authority Circular (LAC(DH)(2008)1) Transforming Social Care

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