



Report of the Director of Adult Social Services

Scrutiny Board (Adult Social Care)

Date: 6 May 2009

Subject: Update on the progress of the Early Implementer

Electoral Wards Affected:

Specific Implications For:

Equality and Diversity

Community Cohesion

Narrowing the Gap

3.0 INTRODUCTION

- 3.1 At its meeting on 8 October 2008, the Executive Board received an update on the work undertaken in Leeds to prepare for the personalisation agenda, since the publication of the concordat "Putting People First" in December 2007. The Board requested the Scrutiny Board (Health and Adult Social Care) to monitor progress of the personalisation agenda. An initial scoping discussion was held with the Proposals Working Group at its meeting on 12 December 2008.
- 3.2 The Proposals Working Group considered and discussed the potential role and scope of the full Scrutiny Board in considering aspects of the personalisation agenda. Members of the working group commented on those areas which are already included in the Scrutiny Board's work programme and were reminded that the recent Independence, Well-being and Choice Inspection report made specific reference to the delivery of personalised services. Progress against the resulting and agreed recommendations would be routinely reported to the working group as agreed by the full Scrutiny Board (Adult Social Care).
- 3.3 The full Scrutiny Board agreed to focus on the following areas:
- The common assessment framework;
 - Resource allocation system (linked to the Council's stock of directly provided care);
 - Progress of the early implementer project.
- 3.4 At its meeting on 7 January 2009 Scrutiny Board (Adult Social Care) received verbal information on the background and current position relating to the Early Implementer, which was confirmed in a report.

3.5 On 22 April 2009 the personalization Working group received reports providing an update on the development of Self Directed Support in Leeds and the Resource Allocation System.

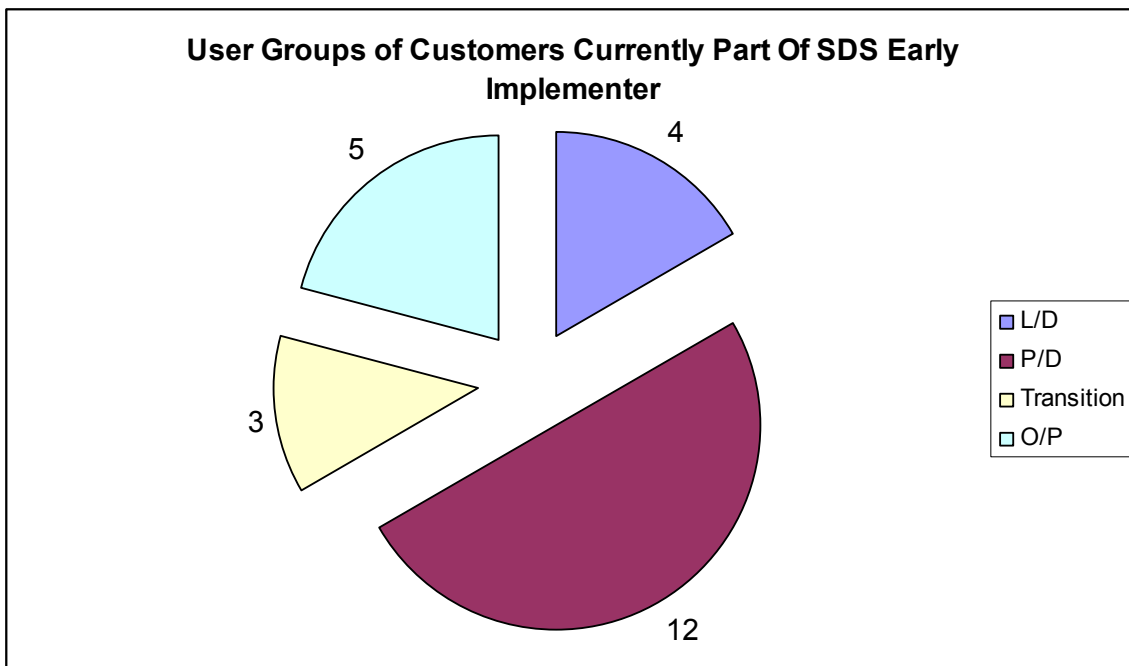
3.0 THE EARLY IMPLEMENTER – Update on progress since January 2009

2.1 The Early Implementer (EI) is the first opportunity to transfer current customers to the Self Directed Support (SDS) model, testing the operating systems developed by the business change team. It is providing a useful evaluation of progress in developing the SDS model and will provide information for Adult Social Care (ASC) on the impact on customers, carers, staff, services and the support market place. Feedback from the EI will inform future plans for the roll out of SDS.

2.1 Four social workers have been seconded to form the team who will take responsibility for care management of those customers involved. The team members have been through a selection process in which they were able to demonstrate their interest and enthusiasm for this process, and between them have experience of all key user groups. The team is line managed by the Adult Review Team Manager. Working together as a discrete team will enable them to gain the experience and expertise which will inform the roll out of SDS across Leeds, including informing the workforce development plan. The team have been through an induction period, including meeting colleagues from the early pilot sites and a session with in Control. They are supported by a Business Change Leader and work closely with the SDS project workstream leads.

2.2 The team has so far engaged with 48 existing customers across all user groups, including young people in transition from Children and Young People's Social Care. Details of the range of customers and their progress through the SDS process is given below.

- 40 customers have been visited, with 24 agreeing to be part of the EI so far. The reasons for not proceeding at this stage include the death of one customer and one admitted to residential care. For the remainder the reasons are that half are currently experiencing unstable health and the other half have now decided to exercise their choice and control by not changing their current support package.
- 20 customers have completed the Self Assessment Questionnaire (SAQ) which enables them to identify their day to day needs for support at the start of the assessment process. Only two people have chosen to complete the SAQ independently with the others seeking the support of the care manager as well as family and friends in some cases.
- The customer needs identified in the SAQ have been entered into the Resource Allocation System (RAS). This has enabled an indicative budget to be calculated which will enable customers to begin to develop their support plan.
- 17 customers have completed a baseline questionnaire which establishes their satisfaction with current services. This will contribute to the final evaluation of the EI.
- The chart below shows the spread of user groups involved in the EI so far.



- 2.3 Only a few people have completed their support plan and examples of new support plans are as follows:
- John, an African Caribbean man with learning disabilities lives with his mother. Much of his life has been spent sitting at home watching television as he has not been interested in attending traditional day services. He is planning to use his personal budget to continue with his current personal care and to employ a personal assistant who will take him to the gym, support college attendance and other activity clubs. In this way he will reduce his current social isolation, enhance his health and well-being and be exercising choice and control in meeting his needs
 - Jane, a woman with a physical disability currently receives community support for personal care and respite away from the home when her carer is away. She is now choosing to continue her personal care arrangements but employ a friend to stay with her at home on the weekends her carer is away.
 - Anne, a wheelchair user, requested a referral to the team as she was unhappy with the rigidity of her community support which could not be delivered at the times she wanted to live her life. She will now be employing a personal assistant and directing the timing and nature of her personal support in ways of her choosing.
- 2.4 The under representation of older people and those people with mental health difficulties has been recognised. The EI team is currently meeting with area teams to share the progress so far and seek further referrals particularly from these user groups so that we will have a representative group of people involved in the EI. These meetings will also provide the opportunity to continue raise awareness about the process of SDS and the implications for the new performance targets for ASC.
- 2.5 The early Implementer is enabling us to test the operating systems developed through the early phases of the project. In particular the SAQ, RAS and care management processes. So far most of the customers have chosen to go through the process supported by their care manager with some beginning the completion of the SAQ with family or friends. All issues arising from these processes are logged and considered by the relevant workstream lead and the key people meet regularly to review these and amend documentation and process as required.

- 2.6 An independent evaluation will be carried out at the end of this phase which will both report on our operating systems and the experiences and outcomes for the customers involved. The evaluation of the operating systems will be carried out by Internal Audit and the customer focus and experience by an independent person, who was a member of an Individual Budget pilot project team and formerly worked for in Control.

3.0 CONCLUSIONS

- 3.1 Good progress has been made transferring customers to the SDS model. As expected the Early Implementer has highlighted parts of our new operating systems which are working well and also where further refinement is needed.
- 3.2 Experience so far indicates that customers are finding the SAQ workable and are confident in stating their level of need but have more difficulty in establishing the level of natural support available to them in the second part of the form. To support this, when carer's needs are identified, a separate carer's assessment is being offered. The EI team will work with the communications and support planning leads to address the identified issues and produce a more customer friendly format. Members of the project team are also researching the approaches taken by other authorities and logging the comments made by customers to inform future revisions of the document.
- 3.3 Early indications are that the RAS is allocating enough money to enable customers to achieve their outcomes for the majority of low or medium level needs. Whether the money is enough to obtain the necessary services will be determined as the EI progresses. Customers with high and complex levels of need may need additional consideration and a mechanism to address this is now being developed. It is important to note that no customer will be allocated less than is necessary to provide the support needed to achieve their outcomes. The RAS will be constantly refined and updated (including whether to reduce the level of contingency, which is currently 20% in Leeds). The contingency itself will be used to provide additional funding to customers if necessary, for transitional protection, unmet need and high cost packages. Some of the challenges to date are occurring where the care market place has placed a premium on support services for some groups. The overall process will need to ensure a balance between enabling customers to exercise choice and control and having an equitable, transparent and sustainable approach to resource allocation.
- 3.4 The examples of Support Plans provided earlier in this report highlight the different ways our customers are beginning to exercise choice and control and direct their own support. As more plans are agreed we will be in a position to examine our approach to Safeguarding and Risks; ensuring that we are protecting vulnerable adults and adopting a pragmatic approach to risk enablement and management.

4.0 RECOMMENDATIONS

- 4.2 The Board is requested to note this information in respect of the Early Implementer and receive further reports on progress.