

TRANSFORMATION OF ADULT SOCIAL CARE: PERSONALISATION AND COMMISSIONING PLAN 2011 - 2015

Cabinet Member	Councillor Philip Corthorne
Cabinet Portfolio	Social Care, Health and Housing
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Papers with report	1) Future of Adult Social Care Diagram 2) Transforming Adult Social Care: Personalisation and Commissioning Plan 2011 – 2015 and appendices

HEADLINE INFORMATION

Summary	<p>The Adult Social Care Personalisation and Commissioning Plan shows how the Council will deliver personalised adult social care that will enable Hillingdon's residents to live independently in the community with housing and support services appropriate to their need, maximising the choice and control they have over the services they receive.</p> <p>This is one of four key plans or strategies being developed by the Council's Social Care, Health and Housing (SCH&H) Department. The other three are :</p> <ul style="list-style-type: none"> • Children and Families Trust Strategy 2011 - 2015 • Disabled Children's Action Plan 2011 - 2013 • Housing Strategy 2011 - 2015
Contribution to our plans and strategies	The Adult Social Personalisation and Commissioning Plan supports the objectives of the Sustainable Community Strategy and the Wellbeing Strategy.
Financial Cost	There are no additional costs to existing budget provision as a result of approving this plan. The plan is consistent with the current MTFF strategy of moving from traditional building based care services to those which enable residents to remain independent with less reliance on statutory services. The plans in this report will support the delivery of the MTFF savings and assist the department to keep within its allocated budget.
Relevant Policy Overview Committee	Social Services, Health and Housing
Ward(s) affected	All

RECOMMENDATION

That Cabinet approves the Transforming Adult Social Care: Personalisation and Commissioning Plan 2011-2015 in-principle and the direction of travel for services for adult social care services that it describes, subject to consultation with service users and other stakeholders that will lead to a further report to Cabinet.

INFORMATION

Reasons for recommendation

1. The delivery of the Adult Social Care Personalisation and Commissioning Plan is intended to result in the following benefits for Hillingdon residents:

- More effective and efficient support via an improved universal offer of information, advice and guidance
- Increased choice in support and care due to the range of commissioned providers, market management and personalisation
- Increased independence and ability to lead fulfilling lives through a strong focus on prevention and helping customers to manage for themselves
- A greater role for social networks and the community
- Improvements in support for carers
- Better value for money

Alternative options considered

2. The alternative options available to Cabinet are not to approve the Adult Social Care Commissioning Plan or to require amendments to it prior to approval.

Comments of Policy Overview Committee(s)

3. The Social Services, Health and Housing's Committee's input will be important as part of the consultation process, should Cabinet agree the recommendations in this report.

Supporting Information

4. The Plan sets out the direction of travel for adult social care services. The Plan will be supported by a range of user-specific commissioning plans for which Cabinet approval will be sought and which will address the needs of older people, carers and adults with mental health needs. The first of these, the Disabilities Commissioning Plan, is also being considered by Cabinet at its September 2011 meeting.

5. A combined adults and children's commissioning plan will be developed for Cabinet approval in 2012/13

Social Care, Health and Housing Mission and Supporting Principles

6. Guiding the development of the range of commissioning plans is the Social Care, Health and Housing mission and supporting principles. The mission is: ***"Enabling residents in need to live safe, healthy and independent lives"***

7. To deliver this mission SCH&H will:

- Improve outcomes for children, young people and families in need or at risk through coordinated, evidence-based services.
- Provide support tailored to our residents' needs through integrated working across social care, health and housing services
- Make best use of public and community resources

8. Over the lifetime of the Plan SCH&H will embrace the enabling role of local councils by applying the following five principles:

Social Care, Health and Housing Supporting Principles

1) Choice and control

We will ensure that users of services are in the driving seat in deciding how their desired outcomes will be achieved within available resources

2) Safe, healthy and independent lives

We will shift from providing long-term institutional services to providing time-limited support which helps people regain independence in the community.

3) Supportive local communities

We will achieve sustainable change by supporting individuals and communities to help themselves and each other.

4) Different for less

We will use up to date, evidence based approaches to services which are more efficient and effective.

5) Working together

The whole community has a role to play in keeping people safe, healthy and independent. Through integrated working with health and other partners, we will commission services that draw on existing networks and community capacity.

9. The Plan identifies three strategic priorities against which services should be developed and these are:

Social Care, Health and Housing Strategic Priorities

- 1) **Managing demand:** keeping residents independent, investing in preventative services to stop or significantly delay residents from requiring ongoing social care or becoming homeless or in housing need.
- 2) **Managing the support system:** efficient and effective in-house provision that is reablement focused, delivering time-limited interventions to effect change so residents can learn or re-learn crucial skills to live independently.
- 3) **Managing supply:** commissioning private and voluntary social care and housing services and developing in-house fostering that delivers support, choice and independence to vulnerable, complex and high dependency residents.

The Need for Change

10. **National policy:** the government's vision for adult social care called '*A Vision for Adult Social Care: Capable Communities and Active Citizens*' (October 2010) requires that vulnerable adults have more choice and control over the services they receive and how they are provided.

It also requires that councils move away from models of care that are reliant on traditional forms of institutional care provision such as residential and nursing homes. A further policy document, *Think Local, Act Personal: a sector wide commitment to moving forward with personalisation and community based support* (January 2011) reiterated the continued importance that central government attaches to the personalisation agenda.

11. The model of care in Hillingdon relies much on institutional care and buildings-based services. Whilst there are examples of a personalised approach to achieving the outcomes that are important to residents, the general approach still seeks to address needs through traditional services. The comparatively low numbers of residents receiving personal budgets also emphasises the need for change in the model of care. For example, in 2010/11 16.7% of users of adult social care services were receiving personal budgets compared to a national average of 35%.

12. **Changing population:** over the period of this plan and beyond Hillingdon's there will be:

- more people aged 65 and over (an 8.4% increase to 37,100 between 2010 and 2015)
- an increasing number of people aged 85 and over (an increase of 11% between 2010 and 2015 to 5,500)
- more people with health conditions related to old age, e.g. dementias (an increase of 8.7% to 2,710 between 2010 and 2015) and stroke (an increase of 26% to 4,351 between 2008/9 and 2015)
- more people with increasingly complex needs e.g. people living with more than one disability. A 2009/10 study of people with learning disabilities in receipt of community care services provided by the council showed that 54% had multiple disabilities such as physical and/or sensory disabilities, challenging behaviour, epilepsy and Down's syndrome.

13. **Public expectations:** the messages received from residents shows that they want:

- more choice and control over the services they receive
- independence in their own homes rather than living in institutional care
- access to the same opportunities as other people – this particularly relates to disabled younger people
- services that address their cultural needs
- opportunities to help themselves to stay healthy
- greater investment in prevention

14. **Use of resources:** Hillingdon is spending significant sums on residential and nursing accommodation. 2009/10 is the most recent year for which audited Council spend information is available and Table 1 below shows the proportion of the spend for each user group on residential and nursing care compared to the proportion identified by the Department of Health as good practice.

Table 1: Proportion of Spend on Residential/Nursing 2009/10 Compared with Good Practice

User Group	Proportion of Spend	
	LBH	Good Practice
Older People	51%	40%
Learning Disabilities	56%	13%
Physical Disabilities	33%	15%
Mental Health	38%	15%

Outline of Proposals

15. The Plan has a number of proposals which will deliver the three strategic priorities listed in paragraph 9 – to manage demand, manage the support system and manage supply.

16. In order to manage demand it is proposed that Social Care, Health and Housing will:

Universal Services

- Work jointly with leisure, libraries, adult & community learning and other council services to ensure that community resources are used effectively to support local residents.

Information, Advice and Guidance

- Deliver social care, housing and benefits information and advice services that are either provided directly or updated and managed by the voluntary sector and local communities to enable residents to identify for themselves how their needs can be addressed.

Carer Support

- Deliver specialist services for carers to support them in their caring role and in their everyday lives, including specialist information and advice services and developing personal budgets for Carers.

Preventative Services

- Commission preventative services that can demonstrate significant benefits in helping people to lead independent active lives as well as reduce pressures on statutory services
- Use the benefits system to reduce poverty and support independence.

16. In order to manage the support system for vulnerable adults Social Care, Health and Housing will:

Personal Budgets

- Ensure that all adult social care customers have access to a Personal Budget by April 2013.
- Through collaborative commissioning, support and develop the external provider market for personalised services
- Work with Health partners to support the development of personal healthcare budgets to enable service users to achieve positive outcomes in health and wellbeing
- Work with other Council Directorates, the voluntary sector and local communities to support social care service users to access generic public services
- Offer Personal Budget holders a 'Pre-paid debit card' to provide greater purchasing flexibility, significant reduction in onerous paperwork, safeguarding against financial abuse
- Deliver creative support planning and increased choice and control for residents. This will include working in partnership with the voluntary sector.

Housing-related Support

- Deliver advice and support to residents to help people live independently
- Ensure that housing support and adult social care services are provided in a way that maximises the choice and control for tenants, leaseholders and owner occupiers over the

services they receive and how they are provided and the ability to purchase independent support using their personal budgets.

Reablement

- Deliver a specialist reablement service to help people to maximise their ability to live independently and within their own home
- Make best use of all community intermediate facilities across health and social care as a stepping stone between leaving hospital and going home and to prevent unnecessary admission to hospital

TeleCareLine

- Further expand the assistive technology and TeleCareLine offer for Hillingdon residents to maximise independence

Safeguarding Adults

- Support adults at risk to live free from harm and exploitation

Modernise Day Opportunities Services

- Develop more choice and a wider range of community services or support to access those services that can be purchased by personal budget holders and self-funders.
- Ensure that council provided buildings-based day services have the flexibility to support people with the most complex needs and be transparently costed to enable personal budget holders to purchase these services
- Develop dementia care services and complex care to support people in their own homes or the community where possible
- Ensure that council provided or funded transport services are available to residents in the greatest need whilst providing opportunities for those residents to have the choice to develop individual and more flexible travel solutions

17. To manage supply Social Care, Health and Housing will:

Market Management

- Work with the private sector to make best use of housing supply
- Apply strategic market management through framework care contracts and leveraging economies of scale with local health services and other West London councils
- Support the development of a personalised services business model within the voluntary sector organisations
- Where Value For Money can be demonstrated, we will take a more flexible approach to procurement e.g. 'Collaborative Commissioning' with the voluntary sector rather than formal tendering
- We will offer pre-paid cards to all Personal Budget holders with a companion card for personal assistants. This will provide the council with visibility of spend by personal assistants, thus providing an element of safeguarding against financial abuse

Reduced and Renegotiated High Cost Care Packages and Placements

- Review and renegotiate costly support packages while retaining quality and good outcomes for service users

Supported Housing and Independent Living

- Reduce the use of unnecessary residential care by extending the range of supported housing options

Safe, warm, affordable environments to live in

- Support the development of affordable housing
- Reduce overcrowding and the use of temporary accommodation
- Reduce fuel poverty

Homes that are suitable and hazard-free for the people living in them

- Promote energy efficiency
- Deliver housing adaptations

Financial Implications

18. There are no additional costs to existing budget provision as a result of approving this plan. The personalisation and commissioning plan as presented is consistent with the current MTFF strategy of moving from traditional building based Care Services to services which enable residents to remain independent with less reliance on Social Care. The plans in this report will support the delivery of the MTFF savings and assist the department to keep within its allocated budget.

EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES

What will be the effect of the recommendation?

19. As a result of the recommendations a new adult social care offer will be developed for Hillingdon residents and this is illustrated in Appendix 1. It means that residents with community care needs will be supported to live independent lives in the community rather than in institutional care through the provision of supported housing. Housing-related and other support services will be developed to maximise the sustainability of community-based living.

20. Residents will have control over the community care services they receive to address the outcomes that are important to them through the use of personal budgets and imaginative support planning.

21. Improved access to information, advice, advocacy and other support services will enable residents to take early action to address their own needs and a focus on reablement will enable timely interventions to take place will help to prevent avoidable loss of independence as a result of an admission to hospital or a residential or nursing home.

Consultation Carried Out or Required

22. In the formative stages of the Disabilities Commissioning Plan a mixture of approaches to engage with service users and their carers and families have been used, including ongoing groups, specific events consulting on particular elements of change and development, as well as engagement with individual clients as part of the assessment and review process. The following gives some examples:

- Personalisation in Practice Roadshows looking at the implications of personalisation that took place between March and November 2010 and included the Disabled People's Assembly, day services like Woodside, Park View, Phoenix Centre and Poplar Farm, voluntary organisations such as Age UK, DASH and Hillingdon Carers and community groups like the Relatives of Residents in Care Homes (RRICH) group and the Direct Payments User Group.
- The day services consultation during December 2010 to January 2011 identified the need for more community based alternatives. This included a face to face survey of users of

Woodside, Asha and Grassy Meadow Day Centres and the Rural Activities Garden Centre (RAGC) as well as a telephone survey of carers.

- A survey on equipment services in 2010 asked for the views of customers on the retail model of equipment provision. The findings of the survey showed that respondents were in favour of being able to have more choice about the type of daily living equipment they could access.
- The Direct Payments User Group has been involved in the development and delivery of the support services for people with direct payments. This group with support from DASH have provided 24 volunteers to assist in the development of the Prepaid Visa card.

23. Subject to Cabinet approval of the recommendations in this report, officers will undertake consultation with users, carers and other stakeholders on the direction of travel and specific proposals contained within the Adult Social Care Personalisation and Commissioning Plan. This will complement any consultation to be undertaken should Cabinet approve the Disabilities Commissioning Plan also on the agenda for its September 2011 meeting. Consultation will include the following groups:

- the Older People's Assembly.
- the Disabled People's Assembly.
- Members, via the Policy Overview Committee and also the Member Champions for Disabled People / Equalities and Carers.
- Long-term Conditions Delivery Group, a multi-agency sub-group of the Health and Wellbeing Board that considers strategic issues relevant to people with long-term conditions and adults with disabilities.
- Mental Health Delivery Group, a multi-agency sub-group of the Health and Wellbeing Board that considers strategic issues relevant to adults with mental health needs.
- Mental Health User Group, a forum that enables adults with mental health needs to raise issues of concern to them.
- Learning Disabilities Partnership Board, a sub-group of the Long-term Conditions Delivery Group that focuses on strategic issues specific to people with learning disabilities and their carers.
- Learning Disabilities User Group, a forum for people with learning disabilities that enables them to raise issues of concern to them.
- Learning Disability Parent-Carer Reference Group, a group that represents the interests of carers of people with learning disabilities.
- Local Involvement Network (LINK). The LINK will be asked to include an online opportunity for residents to give their views about the proposals within the Adult Social Care Commissioning Plan.

CORPORATE IMPLICATIONS

Corporate Finance

24. Corporate Finance has reviewed this report and is satisfied that the recommendations of the plan are consistent with the current MTF assumptions.

Legal

25. There is a variety of legislation which governs local authorities' responsibilities in the area of adult social care. A summary of this legislation can be found in Appendix 2 to the Transformation of Adult Social Care: Personalisation and Commissioning Plan 2011-2015 ["the Plan"].

26. In May 2011, the Law Commission published its recommendations for changes in community care legislation as it applies to the community care needs of adults. It proposes a

new statute that will establish that the overarching purpose of adult social care is to promote or contribute to the well-being of the individual. It is expected that these recommendations will be reflected in an Adult Social Care White Paper due to be issued by the Department of Health in autumn 2011.

27. The second recommendation in the report asks Cabinet to approve the launch of consultation with service users, residents and other stakeholders in relation to the contents of the Plan. The legal requirements for a proper consultation exercise are known as the "Sedley requirements" which received judicial approval in the cases of *R v Brent London Borough Council, ex parte Gunning* and *R v North and East Devon Health Authority, ex parte Coughlan*. The requirements can be summarised as follows:

- consultation must be made at a time when proposals are at a formative stage;
- sufficient reasons for the proposals must be given to allow for intelligent consideration and response;
- adequate time must be given for the response;
- the product of consultation must be conscientiously taken into account in finalising proposals.

BACKGROUND PAPERS

Transforming Adult Social Care: Personalisation and Commissioning Plan 2011 – 2012
Transforming Adult Social Care: Personalisation and Commissioning Plan Appendices

The Future of Adult Social Care Offer Illustrated



