

London Borough of Hillingdon

**SOCIAL SERVICES, HEALTH & HOUSING
POLICY OVERVIEW COMMITTEE**

2009/10

REVIEW SCOPING REPORT

Proposed review title:

**THE TRANSFORMATION AGENDA AND DIRECT PAYMENTS IN
HILLINGDON**

Aim of the Review

To review the progress in delivering the new agenda for self directed support in the delivery of Social Care with particular reference to:

1. The development of the “ Universal Offer” for service users
2. Ensuring services are in place to meet individual need and choices
3. Systems of monitoring standards and safeguarding vulnerable people in the new system.

Terms of Reference

1. To monitor progress developing Self Directed Support (SDS) in these 3 distinct areas (as above).
2. To identify opportunities to develop innovative options in the provision of services.
3. To make recommendations that will help officers and partners undertake effective monitoring and safeguarding.
4. To make recommendations to Cabinet/the Cabinet Member to address any issues arising from the above investigations

Reasons for the review

Nationally, there is a strong expectation on all Local Authorities to provide more personalised services. The Department of Health’s commitment to this

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has been reiterated and developed through a sequence of major policy documents, including:

1. ***Improving the Life Chances of Disabled People*** (Prime Minister's Strategy Unit, January 2005);
2. ***Opportunity Age*** (Department for Works and Pensions, March 2005);
3. ***Independence, Well-being and Choice*** (Green Paper, Department of Health, March 2005);
4. ***Our Health, Our Care, Our Say*** (White Paper, Department of Health, January 2006);
5. ***Putting People First: a shared vision and commitment to the transformation of adult social care*** (Department of Health, 2007)

The fifth of these papers, Putting People First, set out the expectation that all Local Authorities would transit to a service delivery model for adult social care that was anchored around the provision of the greatest possible choice and control to service users through personal budgets or Self-Directed Support.

A new performance target has now been introduced - the National Indicator NI 130, 'Social care clients receiving Self Directed Support'. 2009-10 is the baseline year for the indicator, and the government has made it clear it expects "significant progress" by the year 2011-12.

NI 130 Definition/Criteria

NI 130 is defined as the 'number of adults, older people and carers receiving self-directed support and carer's specific services in the year to 31st March. To be counted, the person (adult, older person or carer) must:

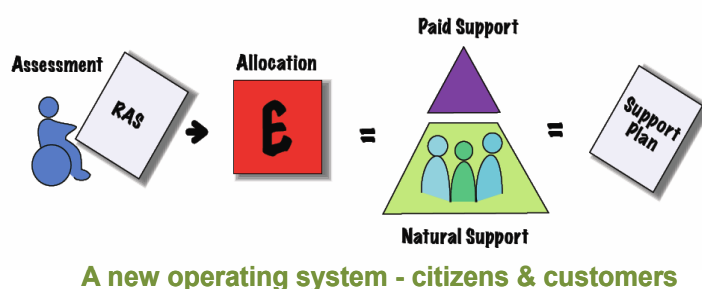
1. Be getting a direct payment; or
2. Have in place another form of personal budget, which meets the following criteria:
 - The person (or their representative) has been informed about a clear, upfront allocation of funding, enabling them to plan their support arrangements.
 - There is an agreed support plan making clear what outcomes are to be achieved with the money
 - The person (or their representative) can use the money in ways and at times of their choosing.

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The guidance states councils will need to evidence that these criteria are met through local monitoring of outcomes and satisfaction, as outlined in Putting People First.

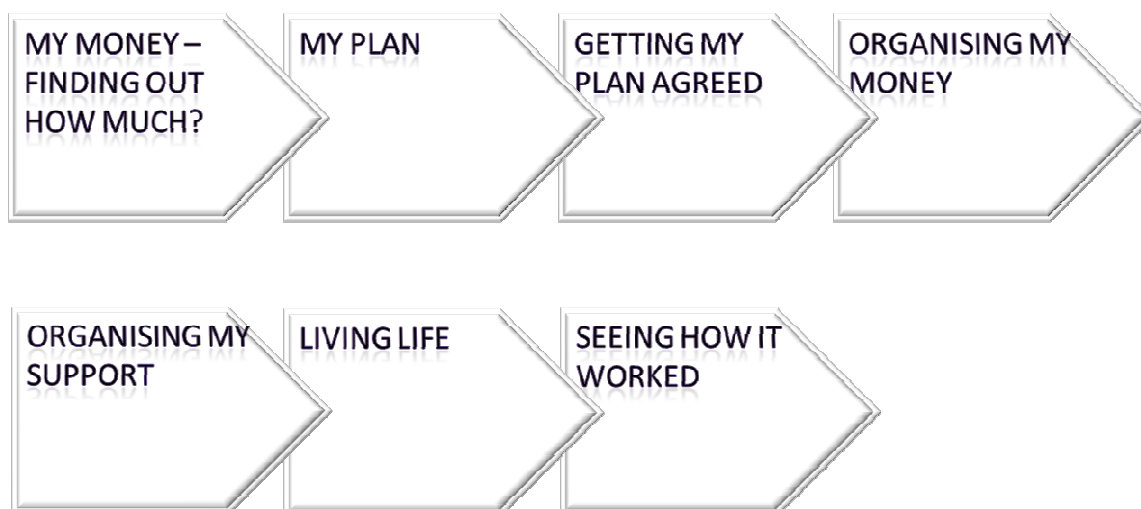
Self-Directed Support

Self-Directed Support marks a definite shift from the care management system by focusing on providing social care customers with a transparent allocation of money at the very start of the process, and being focused on the customer taking control.



Under Self-Directed Support, the customer journey can be summarised in this way:

Fig. 2



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The introduction of Self-Directed Support will make a significant impact to the delivery of all elements of social care and beyond.

There are very significant implications for the social care workforce. It is likely that care management will shift from an assessment and gatekeeping role to signposting, brokerage and safeguarding.

In addition, both Council provision and independent sector services will need to be fit for purpose and adapted to the personal needs of citizens, otherwise personal budgets will be spent elsewhere.

There are also clear implications for other services that provide more universal and targeted responses, such as leisure, transport, libraries, housing and benefits.

Key issues

1. Choice

Choice is central to the concept of personalisation. Holders of a personal budget must be able to choose how the Self-Directed Support process will work for them. This includes how the assessment, support planning, budget management and brokerage of support options takes place. In addition, there must be true choice in the market place to permit truly personalised, innovative and cost-effective solutions to be found.

2. Commissioning

The Local Authority's commissioning role will undergo a major change under Self-Directed Support. The contractual relationship between care provider and the Local Authority will shift to a relationship between the care provider and the individual. This will mean the Local Authority will increasingly focus on strategic market development rather than direct contract management.

3. Market Development

For personal budgets to provide true flexibility and choice, the external market must be sufficiently developed and rich in both micro- and macro-providers. The introduction of individual budgets is a major opportunity for voluntary and private sector providers to develop new services that truly fit the needs of social care customers. Local Authorities will have to engage in market management at local and pan-regional levels to facilitate and influence this process.

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4. The 'right support' and access to support

In order for our social care customers to make the most of the increased flexibility and personalisation that a personal budget allows them, they need to receive as much support as necessary to navigate the new system and choose the best package of support options for them. This support needs to be clearly available and take the form the customer prefers.

5. Monitoring services and safeguarding

The Local Authority's duty of care will remain under Self-Directed Support, and so there will be a continued emphasis on the development of appropriate safeguarding controls to keep vulnerable people safe. Associated to this is the need to develop an effective approach to accreditation and service monitoring for individuals and organisations that social care customers choose to contract with.

Methodology

The review proposes 4 witness sessions.

The first witness session will examine a number of case studies in detail to: isolate and think through the key issues involved against both theory and the larger comparative environment. Identify appropriate strategies for the resolution of the 'case', weigh the pros and cons of the remedial options / strategies and recommend and present a rationale for the best resolution. This approach will assist the POC to develop key questions to use at later witness sessions.

The second session will explore the potential lessons of good practice from other Individual Budget Pilot Authorities. A witness from will attend from In Control, the leading organisation for Self-Directed Support who have run two national programmes of pilots. They have published a succession of research reports drawing on this bank of evidence. This will give POC the best possible, non-partisan view on the successes, failures and blockages to the progress of transformation across the country.

The third session will take a twin focus on commissioning/market development The witnesses to this session will be the Head of Commissioning (ASCHH) who will present the key issues for commissioning, contracting and market development under the new system of adult social care. The Interim Head of Transformation will present information on the current and future plans on these issues.

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The final witness session will focus on safeguarding. The witnesses will be the Deputy Director (ASCHH) and Service Manager for safeguarding who will present on a) the principal areas in which our safeguarding services will have to adapt in future and b) the new checks and controls that are being built in to the Self-Directed Support model for Hillingdon.

Connected work (recently completed, planned or ongoing)

The Transformation of Adult Social Care in Hillingdon is part of the Adult Social Care, Health and Housing Improvement Programme.

Within the Improvement Programme, there are two ongoing major projects connected:

Project	What are the links to this project?
Transforming Housing	<ul style="list-style-type: none">• Achieving the common programme outcomes of support, choice and independence for customers• Ensuring an integrated approach to service transformation across the Adult Social Care, Health and Housing directorate• Aligning activities to avoid duplication, achieve synergies and understand any areas where the two programmes are dependent on each other
AIS Modernisation	<ul style="list-style-type: none">• Ensuring the modernised information systems in Adult Social Care (and particularly LiquidLogic's Protocol) have the appropriate functionality to support new service delivery models under Self-Directed Support.

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Proposed timeframe & milestones

The following is an indicative timetable for the review and may be revised subject to agreement of the scope of the review by the Policy Overview Committee.

Meeting	Action	Comments
23 July 2009	Agree Scoping Report /	Will include terms of reference for the review and preferred witnesses
2 September 2009	First witness session	Case Studies providing fictional examples of the types of issues faced by customers implementing Self Directed Support – Information for the case studies provided by Members of the Committee and officers from the Transformation Team
14 October 2009	Second witness session	The second witness session will consider: <ul style="list-style-type: none">○ Exploring best practice from other Local Authorities and the programme of national pilots○ A review of success, failures and blockages to progress with individual budgets across Local Authorities Witnesses will be representatives from InControl
4 November 2009	Third witness session	The third witness session will: <ul style="list-style-type: none">○ Engage with the key commissioning and market development issues under SDS Witnesses will be the Head of Commissioning (ASCHH) and the Interim Head of Transformation

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17 November 2009	Fourth witness session	<p>The fourth witness session will:</p> <ul style="list-style-type: none">○ Consider safeguarding under the new system, and the controls that are being built in to the SDS model <p>Witnesses will be the be the Deputy Director (ASCHH) and the Service Manager for safeguarding</p>
10 December 2009	Agree draft report	<p>In this session:</p> <ul style="list-style-type: none">○ The draft report will be considered○ Amendments to the report will be agreed○ Final report to be agreed by Chairman in consultation with the Labour Lead outside the meeting

Risk assessment

A risk is that the Committee's impact may be reduced if the scope of the review is too broad.

Background

FURTHER INFORMATION:

InControl

InControl are key players in the field of personalization and form a national network of Local Authorities. They have developed a range of information and key documents on Self-Directed Support.

www.in-control.org.uk

Social Care Institute for Excellence (SCIE)

The SCIE has published a range of research papers on personalisation and Self-Directed Support, which can be found here:

<http://www.scie.org.uk/publications/list.asp?st=7>

Department of Health

The full list of the DoH's publications on social care reform and personalisation can be found here:

<http://www.dh.gov.uk/en/SocialCare/Socialcarereform/index.htm>