

Adult Social Care Committee

Item No:

Report title:	Promoting Independence – next stage delivery plan
Date of meeting:	7th November 2016
Responsible Chief Officer:	Catherine Underwood, Acting Executive Director of Adult Social Services

Strategic impact

The purpose of this report is to bring proposals for the next stages of delivery of the Promoting Independence strategy to accelerate the delivery of improved outcomes for people who require adult social care as well as meeting the financial imperatives which have been set by the Council over the next three years. Underpinning the plan is the delivery of the Care Act and this supports preparation for further integration with Health by 2020, taking into account the emerging Sustainability and Transformation Plan (STP) and the Transforming Care Programme (TCP) which is implementing the recommendations of the Winterbourne Review.

Executive summary

The current Promoting Independence programme has made some good progress since its inception in May 2015 but has not delivered at the pace required. The scale of transformation to achieve the ambitions of the new approach to social care is substantial. It is also important to acknowledge that we are only eighteen months into implementation of the Care Act, the greatest legislative change affecting adult social care in 60 years, and this underpins our approach.

In building next steps, we have also considered the Social Care Institute for Excellence (SCIE) review and Professor John Bolton's work with The Local Government Association and Department of Health across authorities looking at how to predict and manage demand in Social Care. Key to the approach has been to understand how need for service is currently met and how we aspire to better meet need in the future.

A model of future service delivery - a target demand model – has been developed with agreed metrics to identify and focus delivery on interventions which have the greatest impact both in terms of outcomes that actively promote independence and reduce reliance on ongoing statutory support. The aim is to help preserve and protect resources for those in the greatest need. This approach will have a significant impact in meeting the financial challenges ahead. The results of this work have been to identify key points in the customer journey where our approach will need to change in order to enable people to meet their outcomes, retain their independence and to avoid unnecessary reliance on formal care.

This report sets out a high level programme of priority activities which are designed to have clear impact on creating the changes we seek.

The refresh of the programme of work has highlighted risk to the delivery of £49.8m of savings within three year timescales. These have been highlighted within the finance monitoring report elsewhere on this agenda. It is recommended that £10m of savings previously planned to be delivered in 2017-18 are reprofiled from 2017-18 to 2019-20, which will support the development of robust budget plans.

Recommendations:

Adult Social Care Committee is asked to:

- 1) Note and comment on the refreshed high level programme plan**
- 2) Agree to receive updates on progress**

1. Activity and performance impact to date

- 1.1 Changes in key operational and performance metrics evidence the impact to date of the Promoting Independence strategy. These include:
- a) Significant reductions in permanent admissions to residential and nursing care homes. Previously Norfolk was an outlier, but is now within acceptable tolerances compared to its family group of similar councils with admissions for older people likely to be below the median when future benchmarking data becomes available. Reductions in admissions are now beginning to reduce the overall number of people in long term residential and nursing care
 - b) A commensurate increase in the percentage of people in long term services that receive them in community settings/
 - c) Improvements in the scale and effectiveness of reablement interventions. Increased investment has seen the number of people receiving reablement increase, whilst at the same time the number of people remaining in their own home after reablement has gone up (and consistently remains above 90%); and the number of people not requiring significant long term support after reablement has increased from around 82% in 2015 to over 90% currently
 - d) Over 500 staff have been trained in the delivery of strengths-based assessments. Introduction of the “signs of wellbeing” approach and materials to support staff in having strengths-based conversations which promote independence
 - e) Initiating a Community Links pilot. Over 100 people have been seen across the county in a clinic setting. The pilot is due to continue until January when the impact will be assessed

In many cases the impact of the Promoting Independence strategy on individuals has been very positive. The new approach can provide better outcomes for people as well as producing a more sustainable system. Some examples of this are included as Appendix 2.

- 1.2 Some areas of activity and performance have yet to see sufficient improvement, and will remain operational priorities. These include:
- a) Accelerating the numbers of effective assessments and reviews in line with national standards whilst ensuring that they are Care Act compliant and take a strengths-based approach
 - b) Ensuring that assessments and reviews deliver the approaches previously agreed in transport and wellbeing payments
 - c) Accelerating change within the learning disability services to provide greater opportunities for independence within individual capabilities
- 1.3 Since July, the development of a target demand model has now been completed and we have clear targets for the change we seek to achieve across the customer pathways. This sets out how we expect people’s needs to be met in the future, what this means for service redesign and activity and how this will impact on finances.
- 1.4 Following completion of the target demand model the projected demand has been benchmarked. The assessment is that the projected levels of demand are achievable and whilst targeting below average demand, the targets are still in the range of

comparative councils. However, risks have been identified with the scale and pace of change required and the need to adequately embed the transformation, in order to accelerate the level of savings during 2017-18 and 2018-19. Following the latest assessment of the programme, the risk assessment of each saving has been reviewed. High risk savings in 2017-18 total £10m. This will impact on the budget plans for 2017-18 and it is proposed that the planned financial savings are re-profiled.

- 1.5 We have outlined the key activities for the next stages of our transformation, to better align with the delivery of the savings required in the medium term financial plan. In our initial budget planning we modelled against matching average and best family comparators. This is the foundation of the detailed delivery plan to meet these models. Next steps will define in detail the further activities required to deliver the target demand and build high level implementation plans and team level targets. A review of existing activities is also being undertaken.

2. Forming the delivery plan

- 2.1 A series of workshops has been held with key members of staff to shape the activities which we will now focus on.
- 2.2 The review of the current programme has demonstrated that whilst there has been some good progress, there have been barriers to delivery. The review has highlighted that there needs to be greater clarity and focus on the Promoting Independence implementation within the department and with partners. Key to success is the assessment and care management activity and there are cultural shifts required to underpin the new Promoting Independence programme. These behavioural and cultural shifts will form a critical part of the way forward in order to succeed with this ambitious programme.
- 2.3 Sound work has been undertaken already across health and social care to identify the demographic changes in the population. The challenge is to find new forms of care and support that promote independence and reduce reliance on statutory support. To do this effectively it is essential to ensure our interventions from first point of contact to those with people with complex needs all promote independence.
- 2.4 From the analysis of all the work undertaken to date there are a number of key findings which are informing the recommended approach to better manage demand:
- a) The effectiveness of the Council front door in finding solutions for people and their problems. This will include the effectiveness of Information, advice and guidance, short term help and the approach to prevention
 - b) Ensuring that referrals from health are managed consistently with the front door and that reablement and intermediate care work to optimum effect
 - c) Improved methods of meeting the needs of people requiring low level support including greater and better use of assistive technology and equipment which support opportunities to maximise independence
 - d) The practice and management of assessment and care management staff
 - e) The approaches taken to progression towards greater independence for those with long term conditions which support people to better manage such conditions including dementia care, such as enablement
 - f) The approaches taken towards the assets of the person being assessed and the involvement of family and community in a person's solutions
 - g) The way in which care providers deliver outcomes and new models of care and support including the availability and vibrancy of the voluntary sector
 - h) The availability and nature of supported housing solutions including supported living and extra care housing
 - i) The partnership with carers and carers' organisations

j) The use of performance measures to judge the outcomes from the care system

2.5 The delivery programme is designed to give some pace and priority to:

- a) measures which can be delivered within the financial year
- b) measures that will require preparatory work in year for full cost delivery in 2017/18 and measures which by their nature will not come on stream until 2018/19 and beyond. For example these will include working with providers to develop new models of care and support that may no longer be buildings based

2.6 They are intended to build a clear approach which will be developed with users, carers and providers in a systematic way utilising the existing regular fora in a more productive way to progress this agenda. This will include partnership boards and regular providers meetings which are well established.

2.7 The refreshed programme delivery plan identifies key high impact priority activities under three defined priority areas, namely: front door, older people and adults under 65. They will be underpinned by clear priorities for commissioning as well as workforce and cultural change. The enablers which impact on the programme such as ICT and mobile working will also be clearly identified.

2.8 As the refreshed programme is further developed there will need to be investment of resource to deliver the scale of transformation as well as the £50m financial challenge. Separate proposals for this will be brought forward as and when they have been clearly identified. Existing workstreams will be reviewed for their likely impact, and any which are not contributing sufficiently will be stopped, in order to free up resource for new work.

2.9 The refreshed programme sets out a trajectory where the level of savings will accelerate in 2017/18 and 2018/19 once the foundations for transformation are embedded and prioritised.

2.11 The Chair and Vice Chair of Adult Social Care Committee have been actively involved in the Promoting Independence Board and the need to review and strengthen the approach.

2.12 At this stage it is intended to bring a separate programme proposal in conjunction with Children's services to address the transition from Children's services to Adults as the differences in legislative responsibilities and expectation would merit a different and dedicated approach. However, the work in Adults under 65 programme will continue to support young people who are expected to require Adult Social Care until a new programme for Transitions is developed.

3.2 The most recent data from the external provider, iMPower, has been used to produce a proposed delivery approach and trajectory plan, focussing on the next six months. This is attached as Appendix 1.

4. Financial Implications

4.1 The proposed delivery plan is scoped to meet the financial targets set out in the existing medium term financial plan. However, the refresh of the programme has confirmed that whilst the targeted savings for the service are achievable, there are key risks with delivery of the savings in the original timescale. In order to support the Council in setting a robust budget plan for 2017/18, it is proposed that the high risk savings in 2017/18, totalling £10m, are re-profiled to 2019/20.

4.2 It is recognised that resource will be required to achieve the changes and therefore to release the planned savings and this will at this stage be released from existing resources.

5. Issues, risks and innovation

5.1 The proposals for delivery will continue to support Care Act compliance and fitness for purpose in any future integration with health.

5.2 The report also addresses formally the need to support staff and partners in delivery of the significant cultural change identified in the previous report to the Adult Social Care Committee on Promoting Independence.

5.4 The main risk identified is the need to recognise that this is a programme which will need to be sustained and will deliver most value in from the second year onwards as the approach gains momentum. This is critical if the savings identified are to be delivered and to ensure that early success can be built on.

6. Background papers

6.1 [1. LGA Efficiency Programme Final Report July 2014](#)

[2. ASC Committee Report on SCIE Review](#)

[3. Promoting Independence Report To Adult Social Services Committee July 2016](#)

Officer Contact

If you have any questions about matters contained in this paper or want to see copies of any assessments, e.g. equality impact assessment, please get in touch with:

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