

**Meeting of the Cabinet - 10<sup>th</sup> September 2008**

**Report of the Directorate of Adult Community and Housing Services**

**Transformation of Social Care; The Personalisation Agenda**

**Purpose of Report**

1. Cabinet is asked to approve the policy direction and framework action plan on the way Social Care support is arranged and delivered to Dudley citizens.

**Background**

2. The 'Our Health, Our Care Our Say' White Paper and the Comprehensive Spending Review 2007 outlined the key elements of a reformed adult social care system for England.
3. The Cross-Government Concordat, 'Putting People First', published in December 2007, gave shape to the overall policy. The Concordat was developed and agreed by central government departments, the Local Government Association, the Association of Directors of Adult Social Services, providers and the Commission for Social Care Inspection.
4. The Department of Health then issued a circular on 'Transforming Social Care' (LAC 2008/1) which provided details of the grant that central government would make to support the cost of implementing the new system.
5. 'Transforming Social Care' is driven by demographic pressures and changes to public expectations. By 2022, 20% of the English population will be over 65 and the number of those over 85 will have increased by 60%. Within Dudley, ONS based population projections show that the number of 85 year olds will double in the same period.
6. Whilst the development of better housing options, such as Extra Care Housing, will be crucial, the majority of older people will expect to live in their own homes for as long as possible and with more people living longer and requiring support, an increasing number of families will feel the impact of these demographic changes - for example, working parents bringing up children while caring for ageing parents; an eighty year old caring for a wife or husband with dementia
7. There is an increase in public expectations. Older people, disabled people and people with mental health problems rightly expect both equality of citizenship and support which places dignity and care at the centre of any intervention. This expectation extends to greater choice and control over the support that they might need. These expectations cannot be met through traditional approaches to delivering social care services. A fundamental change in Adult Social Care is required in order to ensure that the needs of each unique person can be met in a

way which suits their personal circumstances. This new policy is referred to as 'Personalisation'.

8. 'Personalisation' comprises a number of key elements:

- A common assessment of the person's social care needs, based on a self-assessment wherever possible.
- The assessment identifies care and support needs, which relate to an allocation of funding known as the personal budget. The client takes control of the personal budget or may ask that this be administered by a relative, carer, an organisation or the Council.
- Knowing the money available, the person takes control of their own care through a support plan to be funded within the available personal budget. This is sometimes called 'self-directed' support
- Self directed support allows more choice and control for people, identifying what is personally important to them and how they would like to see their support delivered in a way which best suits their individual needs, priorities and circumstances.
- The role of social workers will change emphasis from assessment and gate keeping of resources to advocacy, information, advice and 'brokerage', helping people to arrange their own services.

9. A case example is given below:

- Mrs Jones has retired from work to care for her husband who has been diagnosed with Alzheimer's Disease. His short-term memory loss affects almost all his daily living activities and these are undertaken by his wife.
- Currently, Mrs Jones would be referred, an assessment would be carried out by a Social Worker which would identify both her and her husband's needs and a care programme would be purchased through a contract with one or more providers. While the existing service provides a good standard of care and needs are met, there is little choice and control over when, how and by whom the service is being delivered
- Personalisation means that in future, Mrs Jones would complete a self assessment questionnaire, which would indicate her husband's and her own needs. Based on the level of needs, an amount of funding (the personal budget) would be calculated to meet the needs identified. With the personal budget available, Mrs Jones would develop a support plan according to the couple's own individual choices and preferences about their care. The Social Worker's task would be to assist Mrs Jones in making the support plan, if she needs help with this. Mrs Jones may feel that what is important to her is to spend time caring for her husband at home. She could opt to provide the majority of the care herself and use the personal budget to pay for domestic support so that she can continue in her caring role. She may also opt to pay for respite care at a day centre so that she can have some time with her friends, helping maintain her own well being and independence. She may also be put in touch with a

voluntary organisation, which may be able to provide a sitting service in their own home so she can spend some time in their garden without her husband feeling he has to come looking for her.

10. All those people with care needs by virtue of age, physical disability, learning disability or mental health difficulties, will be embraced within the new arrangements. Personalisation is closely linked with other important developments in Social Care. For example, 'Valuing People Now', the new Government guidance on Learning Disability, which will be published in the autumn, is expected to include personalisation as one of the 'four big priorities' for improving services for people with a learning disability.
11. Personalisation requires a drive to provide earlier intervention with a growth in support for preventative services and accessible, good quality public information to assist people to arrange their own services. Research shows that people benefit from timely earlier intervention at an early stage to support and maintain their well being and independence rather than relying on action at the point of crisis, and that this approach is also more cost effective.
12. Personalisation is a challenging agenda which cannot be delivered by social care alone. To achieve this transformation will require us to work across other Council services such as housing, community renewal, benefits, leisure, libraries, transport as well as with the NHS and through involvement of the Dudley Health and Wellbeing Partnership. It will also mean working with partners in independent, community and voluntary organisations to ensure a strategic balance of investment in local services.
13. We are building on a strong base in Dudley. We have many innovative services, and we have re-provided several more 'traditional' services in recent years, including residential care homes, day centres, meals-on-wheels, home care and transport. Dudley people already have quite a lot of choice and control over services and express high levels of satisfaction with those services, which are underpinned by sound financial management and an experienced and stable workforce. We having developed very flexible systems for support through Direct Payments, and a small pilot for people with a learning disability, known as 'In Control', where ten clients are now in receipt of a personal budget.
14. Central government has provided a three-year Transforming Social Care Grant to support the costs of the making these changes. A project manager has been appointed and a team is being established, comprising specialists in Finance, IT, management information, policy and Social Care to take forward this fundamental transformation of services.

### **Framework For Implementation**

15. An outline action plan has been developed to take forward the 'Personalisation' agenda in Dudley. This includes the following key elements:
16. A number of **targets** relating to the personalisation agenda have been agreed in the Local Area Agreement. Over three years, the number of those receiving a Personalised budget will increase to 500 by March 2009 and to 1,000 by March 2011.

17. We will build on the established framework for **Direct Payments**. A Direct Payment is where the individual receives a financial allocation and manages this themselves, buying from the independent sector though not being able to purchase Council services. There were 414 people on Direct Payments as at 31<sup>st</sup> March 2008.
18. A transparent **Resource Allocation System** will be developed to calculate entitlement to personal budgets and to ensure that overall demand can be met within available resources. We will need to develop new financial systems on which personal budgets can be administered; the existing processes used for direct payments would not cope with the expected increase in numbers of payments.
19. Existing systems and processes for **social care assessments** and **person-centred care planning** will be reviewed. Risk Panels or a similar meeting will be essential to manage effectively the risks of operating Personal Budgets and to ensure that client support plans are agreed and signed off which will keep the client healthy, safe and well.
20. We will measure and monitor the **impact of personal budgets** on existing services, both in-house and external. Many services will in future be commissioned by the client and this will have implications for take up of directly provided Council services and those we commission from the independent sector.
21. **Involving clients and carers** in implementing this new policy in Dudley will be critical to its success and will be facilitated through building on existing advocacy services and forums for consultation and engagement with communities and user/carer organisations.
22. **Communicating the changes** over the next three years will be vital to securing acceptance and understanding by the public, staff and partners, in particular the provision of good quality and accessible information. Using the information management skills within Libraries, Archives and Adult Learning, an information strategy is to be developed to provide a comprehensive range of good quality, accessible information. This would extend the support provided to Dudley citizens and particularly for self funders (i.e. those not eligible for social care funding) through the Libraries service.
23. **A training plan** is to be developed that will encompass the staff in the Council and the independent and voluntary sector, to ensure that the workforce is competent and confident in supporting the public to make use of personal budgets and self-directed support. This will include regional and local events.
24. Personalisation offers more choice and control but it may also carry higher risks for vulnerable adults. Implementation will therefore include strengthening our arrangements for **safeguarding vulnerable people** by appointing a Head of Service funded through the Transforming Social Care grant to take forward a programme of work on improving inter-agency co-operation, training and compliance with policies and procedures.
25. Leadership both political and officer wise will be crucial to successful transformation of Adult Social Care. A West Midlands Regional support network of Cabinet

Members for Adult Social Care has been formed to ensure cross council learning. Cllr Peter Miller, Cabinet Member for Adult and Community Services is a member. In Dudley he will be assisted with this agenda by Cllr Lesley Faulkner who has been identified as Personalisation champion. A seminar for elected all Dudley MBC Members is proposed to take place on 30th October in the afternoon at Himley Hall.

26. A West Midlands Joint Improvement Partnership has been formally established in accordance with national expectations. This is chaired by Linda Sanders as chair West Midlands Association of Directors of Adult Social Services and involves all 14 West Midlands Directors and involved the Regional Improvement and Efficiency Partnership, Care Services Improvement Partnership, Social Care Institute of Excellence and Strategic Health Authority. A key objective is to lead and steer social care across the region and a regional action plan has been developed to assist local implementation.

27. A lead officer's regional group will coordinate and support the implementation of Transforming Social Care, seeking to avoid duplication of effort and sharing learning and risk. There are national learning resources to support the changes. Dudley will take an active part in regional and national events to share good practice and disseminate learning.

### **Finance**

28. The costs of implementing the changes will be met through the Transforming Social Care grant which is available for three years. The cost of support and care for clients following implementation will need to be met through existing budgets, with the annual business planning review process taking account of the impact of the changes in shifting the balance from existing services to new arrangements.

### **Law**

29. The principles of the Putting People First concordat support the existing legislative framework for the support of citizens. There has not been a change in legislation although a Green Paper has recently been published on future funding of adult social care which may impact on the implementation process

### **Equality Impact**

30. The principles of Transforming Social Care will contribute to the Equality Agenda, in particular through the development of a transparent resource allocation system and help for citizens in developing their own support plan. An Equality Impact Assessment will be undertaken with respect to the implementation of the changes.

### **Recommendation**

31. Members are recommended to;

- Approve the development of the Personalisation agenda
- Support a members workshop on Personalisation on 30<sup>th</sup> October 2008 at Himley Hall (from 1pm with the workshop from 2pm until 5pm)
- Approve the Personalisation framework for implementation as detailed in paragraphs 15 to 27.



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#### **List of Background Papers**

'Putting People First; A Shared Vision and Commitment to the Transformation of Adult Social Care'; December 2007  
Transforming Social Care; LAC 2008/1  
Our Health, our Care, our Say; March 2006  
Independence, Well Being and Choice; March 2005