

## BRIEFING PAPER FOR HEALTH SCRUTINY

<b>Committee/Meeting:</b>  <b>Health Scrutiny</b>	<b>Date:</b>  26 July 2011	<b>Classification:</b>  Unrestricted	<b>Report No:</b>
<b>Report of:</b> Deborah Cohen  <b>Corporate Director</b>  Originating officer: Chris Hannan, AHWB, Programme Manager TASC		<b>Title:</b>  Transformation of Adult Social Care – Progress and next steps  <b>Wards Affected: All</b>	

### 1. INTRODUCTION/SUMMARY

- 1.1 This paper provides an update on the transformation of adult social care in Tower Hamlets
- 1.2 The **Transforming Adult Social Care Programme** (TASC) is the Tower Hamlets' response to the national Putting People First (PPF) initiative (December 2007). This was a cross government concordat that set the direction for adult social care over the next ten years. Traditionally the support provided to people with disabilities and older people has been service-led, rather than person centred and PPF sought to change this.
- 1.3. In January 2011 a new agreement '**Think Local Act Personal**' was published. This draws on learning from implementing Putting People First and focuses on areas of further action. It highlights the necessary connection between preventative, community-based approaches and personalised care and support and emphasis the importance of shifting of resources from crisis and acute interventions to prevention and early intervention.
- 1.4 The formal TASC programme is now coming to close, and during this time we will have set the foundations to develop the market to enable customers to have increased choice. A process is in place to ensure that all those eligible for council funded adult social care support will receive a personal budget via a suitable assessment process. We have achieved the Association of Directors of Social Services (ADASS) target that 30 per cent of social care clients should be receiving self directed support by April 2011. We are reporting to you at a time when the Directorate is about implement our new customer journey set out in section 3.2 below).

- 1.5 However the end of the formal programme will not be the end of the work to develop our services in line with the original Putting People First programme and the post “go live” next steps are described in section 4 below.

## **2. RECOMMENDATIONS**

- 2.1 Health Scrutiny is asked to note:

- the progress on our implementation of the transformation of adult social care leading up to the closure of the formal Programme; and
- The next stages post “go live”.

## **3. TRANSFORMING ADULT SOCIAL CARE PROGRAMME (TASC)**

- 3.1 Implementing TASC means that by the end of August 2011 we will have in place:

- A transformed customer journey and business processes that deliver self-directed support (the greater involvement and control of service users in the assessment and support planning). This is described more below. ***This will be fully operational in August 2011***
- A new approach to commissioning of services that enables customers to exercise real choice. ***Cabinet signed off in February 2011 the strategy: Transforming Adult Social Care and Commissioning as Market Shaping and Development and this is now being implemented and will take two years to implement fully.***
- A resource allocation process using an Indicative Budget calculator that is a guide to a service user’s personal budget allocation.
- A comprehensive approach to the engagement of service users and carers in the TASC programme. THINK has been a key partner in developing this.
- Technology that supports the workforce in operating the self-directed support process: ***the client database, Frameworki, has been redesigned to ensure that the new customer pathway processes are supported.***
- A community catalogue. ***This can be found on the Council’s website although this is an interim solution until an e-market place is developed later in the year. This will offer individuals information on the range of services that they might select to go into their support plans.***

### ***The New “Customer Journey”***

- 3.2 This is about putting in place a new operating system which moves from the organisation and delivery of services on a care group basis to one that is functionally based. This means that services from 1<sup>st</sup> September will be organised into three groupings as described in the table below:

<b><i>Service</i></b>	<b><i>Description</i></b>
<p><b><i>First Response Service</i></b></p> <p><i>Located at: Gladstone Place and Royal London and Mile End Hospital (Hospital Service)</i></p>	<p>The first Response service aim is to resolve 80% of people’s concerns at first contact through information/advice giving and speedy provision for simple levels of support. People who need additional support will be passed on to the Reablement service</p>
<p><b><i>Reablement Service</i></b></p> <p><i>Located at Gladstone Place</i></p>	<p>Reablement will provide a period of intensive support to people to help them accommodate their illness or impairment by learning or relearning the skills necessary for daily living. It will identify services provided by the council and services elsewhere that can help prevent people from needing ongoing support. This service will deliver a programme that seeks to help people maximise their independence. For people that remain in need of (and are eligible for) ongoing support they will be eligible for longer term support.</p>
<p><b><i>Longer Term Teams</i></b></p> <p><i>Located at Gladstone Place (East team) and Albert Jacob House (West team)</i></p>	<p>Longer Term Teams will work with people to see how best their ongoing needs can be met. They will agree a support plan with individuals that describe the outcomes and types of support the person wants. Individuals can choose to receive a cash personal budget to pay for their support.</p>

- 3.2 However this is more than just re-organising existing services. The transformational aspects are in the responsibility of the Local Authority to provide a First Response service to all comers that offers information and advice and signposting to universal services and in the development of reablement (short term rehabilitation) for anyone who would benefit from this input. It is only at the stage of moving to long term care that eligibility criteria are imposed.
- 3.3 This enacts the vision in Putting People First and Think Personal, Act Local of the importance of prevention and early intervention and of constructing services along a pathway of need in which the numbers of people reaching long term support are reduced because of earlier intervention from services.

3.4 The new services will be staffed by social workers, occupational therapists and other social care “officers”.

#### **4. NEXT STEPS**

4.1 The end of the formal programme and go live at the end of August is not the end of the work in Tower Hamlets to deliver the highest quality of adult social care. Key next steps include:

- Work on increasing volume of personal budgets until all service users have them
- The further promotion of cash personal budgets
- Improving the quality of support plans and empowering of service users to evaluate and advise on the support they receive
- An evaluation of the Independent Living Support Service ( ILSS) and whether we make more use of third party provision for support planning
- Increasing the range of provision available on the Community Catalogue through the creation of an e-market place (possibly with other boroughs)
- Ongoing work with providers to help them transform their way of working to be able to respond to service user led purchasing of services rather than old style Local Authority led procurement
- Reviews of services not included in phase 1 of TASC i.e. Occupational Therapy, Sensory services and redesigned customer journeys for Learning Difficulties and Mental Health services

4.2 The above work will also include the continuing development with Community Health Services to deliver a more integrated approach through the use of case management systems within the community that supports those with long term conditions to self manage their conditions more effectively.

4.3 Finally over the last 18 months the Directorate has made a significant investment of time and money into new back office systems which are now fully coming on line. This is critical in supporting the new customer facing services and in enabling us to track closely the financial impact of the changes that have taken place over the last year.

#### **5. CONCLUSIONS**

5.1 The changes described above are probably the most significant changes to the delivery of Adult Social Care since the introduction of Community Care legislation at the end of the 1980s. For many the possibility of directing the content of one’s support plan and then being able to control what services are taken up represent the culmination of many years of campaigning. For others the prospect of cash personal budgets and the responsibility of organising one’s own support is less attractive and we are mindful of that in how we work with service users.

- 5.2 The Local Authority's responsibility for Safeguarding is undiminished and risk assessment and risk management are part of safe support planning and are built into our new processes.
- 5.3 The end of August and the go live of the new customer journey on 1<sup>st</sup> September will represent a major milestone for the Directorate but not the end of the work to transform our services.