CABINET	AGENDA ITEM No. 6
16 DECEMBER 2013	PUBLIC REPORT

Cabinet Member(s) responsible:		Councillor Fitzgerald, Cabinet Member for Adult Social Care	
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## ADULT SOCIAL CARE TRANSFORMATION AND PERSONALISATION

RECOMMENDATIONS		
FROM : Director of Adult Social Care	Deadline date: 16 December 2013	

### For Cabinet:

- 1. To note the report about the ongoing Transformation to a Personalisation model in Adult Social Care;
- 2. To note the next stages in the Transformation to a Personalisation model in Adult Social Care; and
- 3. To discuss and feedback any comments to the Adult Social Care Transformation Team.

### 1. ORIGIN OF REPORT

1.1 This report is submitted to inform Cabinet of the scope and progress made on the Transformation programme for Adult Social Care.

## 2. PURPOSE AND REASON FOR REPORT

- 2.1 The purpose of this report is to:
  - a) Enable review of progress against the Cabinet Decision to:
    - Revise the Eligibility Criteria for Adult Social Care from high/moderate to critical/substantial in line with Department of Health categories with effect from April 2013 for new service users and for existing service users from the date of their annual review or sooner if there is a change in circumstance which merits earlier review;
    - ii. Provide Reablement to all existing and new service users who would benefit:
    - iii. Offer longer term transitional support to younger adults with long term conditions including those who fall below critical/substantial needs as part of the Council's preventative offer;

- iv. Re-commission and further invest in 'a preventative offer' available to the wider community;
- b) Provide the Cabinet with an overview of the internal background, and external drivers for the transformation of Adult Social Care Services in Peterborough.
- c) Inform the Cabinet on the scope and progress made on the Adult Social Care, Transformation Programme; and the expected delivery date of the Detailed Business Case upon which the Council will decide on the future operating model to be implemented from April 2014.
- 2.2 This report is for Cabinet to consider under its Terms of Reference No. 3.2.1 "to take collective responsibility for the delivery of all strategic Executive Functions within the Council's Major Policy and Budget Framework and lead the Council's Overall improvement programmes to deliver excellent services" and No. 3.2.3 "to take a leading role in promoting the economic, environmental and social well-being of the area".

#### 3. TIMESCALE

Is this a Major Policy Item/Statutory Plan?	NO	If Yes, date for relevant Cabinet Meeting	

### 4. TRANSFORMATION AND PERSONALISATION: AN UPDATE

## 4.1 <u>Background and Context</u>

- 4.1.1 The Council is experiencing the most challenging period in recent history. The recent senior management restructure agreed by Cabinet recognised that "one size fits all" services are no longer appropriate, we need to target what we do to bring the greatest benefits.

  We need to:
  - Ensure residents can access the right help at the right time to stay independent as long as possible and reduce the need for long-term specialist care
  - Help people to help themselves so we can target limited resources on protecting the most vulnerable
  - Ensure that all service we are responsible for make a really positive impact on people's lives and deliver real value-for-money
  - Maximise our opportunities to bring investment into the city to reduce our reliance on Government funding
- 4.1.2 Within national Adult Social Care Policy these principles have been developing for some time, within the Personalisation model. Personalisation for Adult Social Care was first introduced in 2001 with the National White Paper Valuing People. This was later strengthened with the Our Health, Our Care, Our Say: A new direction for community services in 2006 and later the Putting People First concordat, agreed across all government departments in 2007. An updated three-year action plan for embedding Personalisation Valuing People Now was released by the Department of Health in 2009. The main principle behind these national strategies is to put the individual at the centre of their care and support plans, to empower them to lead independent, fulfilled lives and to ensure that people's own choice and control was that the heart of all social care operations.

- 4.1.3 Peterborough is catching up on the Personalisation agenda and requires extensive transformation within our social care culture and operations to achieve a truly person-centred approach. We need to put Peterborough at the forefront of best practice and innovation if we are to meet the future challenges.
- 4.1.4 There are both barriers and expectations around Personalisation in the city. There is a significant customer and patient expectation now as a result of lifestyle changes of the population. People want more choice and good quality services that are flexible and personalised to individual needs.
- 4.1.5 There is a vast and growing demand in the country due to increases in life expectancy. Over the next 30 years nationally our population will age but will remain alive significantly longer than previous generations, with over 15 million people having at least one Long Term Condition.
- 4.1.6 In Peterborough for over a year we have been undertaking the intensive groundwork to create the foundations for a positive, enabling transition to a social care system that puts the customer first.
- 4.1.7 On 10 December 2012 Cabinet agreed to commence consultation on changing Adult Social Care Eligibility Criteria from high/moderate to critical/substantial; and subsequently, on 25 February 2013 agreed to raise the Eligibility Criteria and extend Reablement and Preventative Services to people whose care needs fell below the newly defined criteria.
- 4.1.8 To effectively enable this focus on independence, choice and control, Adult Social Care services need to become outcome-led and place more emphasis on prevention and early intervention, which also reduces the need for continuing, expensive and high dependency care services. Adult Social Care is continuing to review how services are delivered and we are doing so with this vision in mind:

## 4.1.9 Transformation will enable:

- Customers will receive clear and accessible information and advice focused on prevention and early problem resolution;
- Customers will be supported to maximise any opportunity to facilitate their own care needs to live independently with more control over their lives;
- Customers will only be asked once for any information needed;
- Customers to have choice around services and support which are easily accessible;
- Customers are listened to and provided with opportunities to comment formally on the quality of services received; and
- Customers receive safe and responsive services and any safeguarding concerns are acted upon throughout the customer journey.
- 4.1.10 Adult Social Care is working with our strategic partner, Serco, to build operating models which are jointly delivered to the benefit of Peterborough City Council and its customers. This builds upon the existing Serco delivered operating models in Revenue and Benefits, Business Support and Payments Management.
- 4.1.11 In transforming services, Adult Social Care are also able to maximise the opportunity to review and improve the mechanisms they have in place to work more corporately with other

- services, such as Children's; where the two services 'touch' through transition. This will further enhance the customer journey through different social care pathways.
- 4.1.12 The transformation will also have significant impact on the professionals working in our area, the voluntary and community sector, current and future private sector care providers and people who may require social care in the future.

# 4.2 <u>Factors Driving Change</u>

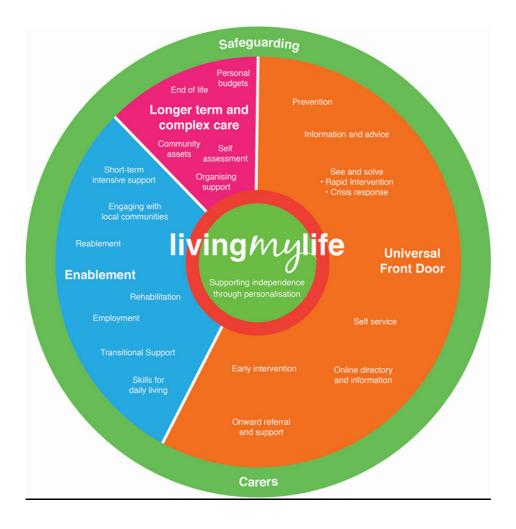
- 4.2.1 Aligning Peterborough Adult Social Care service with national policy and future legislation and initiatives, including:
  - A Vision for Adult Social Care (2010 7Ps: Prevention, Personalisation, Partnership, Plurality, Protection, Productivity and People;
  - Putting People First (2007);
  - Valuing People Now (2003, 2008 and 2009);
  - Health and Social Care Bill (2012) puts clinicians at the centre of commissioning, frees up providers to innovate empowers patients and gives a new focus to public health; and
  - Clinical Commissioning Groups responsible for commissioning health and care services from April 2013, and introduction of the Integrated Transformation Fund and commissioning arrangements for Health and Social Care.
- 4.2.2 Creation of a service which is equipped to deal with growing demand:

By 2020 approximately 30,300 of the population of Peterborough will be aged 65 and over, growth of around 22%, 8,500 of these being aged 80 and over.

Current and predicted population of Peterborough aged	2011	2020
65 and over	census	projection
People aged 65-69	6,909	8,300
People aged 70-74	5,792	8,000
People aged 75-79	5,026	5,500
People aged 80-84	3,803	4,200
People aged 85-89	2,258	2,800
People aged 90 and over	1,090	1,500
Total population aged 65 and over	24,878	30,300

- 4.2.3 About 1 in 4 (3,420) older people aged 65-74 in Peterborough are thought to live alone. This increases to 1 in 2 (6,214) older people aged 75 plus. By 2020 the total number of people aged 65 and over living alone is expected to rise to over 11,000 with 7,000 of these being aged 75 plus.
- 4.2.4 In the 20011 census 9.6% of the Peterborough population, around 1 in 10, stated that they provided some level of unpaid care. Of the 17,690 people providing unpaid care 4,342 provided 50 hours of care or more per week.
- 4.2.5 The following are the estimated numbers of older people living with the common life limiting conditions. The percentage increases expected by 2020 are in the main due to demographic growth of the older people population, particularly growth of the population aged 85 plus.

- 4.2.6 Alongside a growth in numbers of older people in the population comes a projected increase in long term conditions associated with aging.
  - Dementia expected to affect 7.1% of the older people population in 2020 (2,157)
  - Stroke expected to lead to a long term disability for 704 people by 2020 a rise of 18.5%
  - Incontinence 4,961 are projected to have a bladder continence problem at least once a week by 2020, a rise of 16.4%
  - Falls -By 2020 628 people aged 75 plus are expected to be admitted to hospital following a fall
  - Depression by 2020 2,605 older people are predicted to suffer from depression with 818 suffering from severe depression, a rise of 15%
  - Heart attack in 2012 1,273 older people were thought to have a long-standing health condition caused by a heart attack, around 5%. This is expected to rise to 1,479 by 2020
  - Mobility impairment By 2020 5,565 people aged 65 plus will be unable to manage at least one mobility task on their own, an increase of 16%.
- 4.2.7 Increases are also forecast for Diabetes (18%, 3,780), Emphysema (17% 511) and obesity (16%, 7,850).
- 4.2.8 Alongside the demographic growth in older people there is also growth in the numbers of adults surviving with complex health conditions and disabilities. We anticipate that on average 35 young people will transition from childhood to adulthood each year with significant and complex conditions.
- 4.2.9 This places additional demands on services necessitating different and more efficient ways of managing demand and operating Adult Social Care Services
- 4.3 Adult Social Care Transformation
- 4.3.1 Our response to the drivers above is the creation of a service which supports the principles of personalisation:
  - Individuals provided with information and advice to take control of their lives.
  - Reablement and Transitional Services to improve or maintain skills in daily living to live independently
  - Support plans that identifies outcomes for individuals and personal budgets, preferably as direct payments provided to all eligible people.
  - Services which meet the needs of changing customer expectation offering choice, high quality and are flexible and personalised to individual needs.
- 4.3.2 A key aspect of this is our new personalisation model.



### 4.4 <u>Personalisation</u>

4.4.1 Our new Personalised social care model: A definition

#### 4.5 What are Universal Services?

4.5.1 Universal Services will be available to all people. They are designed to help reduce the need for specific care services. For example, this could be information and advice on where to join local over 60's AquaFit class to help keep fit to support an active and healthy lifestyle and engage with others within the local community. Obtaining information about aids available for people with mobility difficulties such as getting in and out of the bath or opening tins or jars are other common examples. This is commonly referred to as prevention.

### 4.6 What is Reablement and Transitional Support?

- 4.6.1 Reablement and Transitional Support is our new model of working and it will be available to people who need support to regain skills and confidence to manage the activities of daily living.
- 4.6.2 This area of support is designed to help a person build and restore confidence and to help them to do as much as they can for themselves rather than someone doing things for them.

4.6.3 This support enables individuals to either re-learn lost skills following a period of illness or to explore new opportunities to be more independent, especially in situations where they have lost confidence or opportunities to progress.

# 4.7 What is Longer Term and Complex Care?

- 4.7.1 Longer Term and Complex Care is for people who have been assessed as having Critical or Substantial needs in line with the Cabinet decision to change the Eligibility Criteria in February 2013 and in accordance with Department of Health guidance.
- 4.7.2 With Universal Services, Reablement and Transitional support in place the need for specialist, intensive support will be reduced. However, there will still be a need for people who have gone through Reablement and Transitional support who may require ongoing support. This support will also align with our vision for personalisation.

# 4.8 Wider Enablers of Transformation

Managing Resources

- 4.8.1 The Comprehensive Spending Review and ongoing restrictions in public finances means there is a compelling need to ensure best use of resources. The changes outlined in the report should reduce or divert demand for services and deliver efficiencies which will mean better use of resources. Adult Social Care will have challenging savings targets for 2014-15 and beyond and the Transformation and Personalisation programme will be a significant contributor to these targets, through more effective use of resources.
- 4.8.2 Peterborough City Council is finalising two key strategies, the Customer Strategy and the Digital Strategy, which will have a direct effect on the way all services are delivered in the future. These strategies will go to Cabinet for formal approval. Any additional investment required will be subject to a separate business case. These potential links for each strategy to Social Care Transformation and Personalisation, along with the development of the Commissioning Council, are set out below.

## 4.9 The Customer Strategy

- 4.9.1 Underpinning the Customer Strategy are some key elements that require a need for business change. These elements which in some cases are also inherent with strategies such as The Digital Strategy include:
  - Implementation of a CRM (Customer Relationship Management) solution to enable the 'tell us once' principle
  - Investment in a proper Voice of Customer system to provide Customer insight and realtime customer information to enable a higher level of customer service, issue resolution and ultimately drive customer satisfaction
  - Re-alignment of processes and staff to enable the key principles of the customer strategy to be deployed – namely the creation and clear distinction of front line and back-office functions
- 4.9.2 Without a customer strategy, the council will continue to operate in silos; fail to capitalise on the productivity and efficiency tools that underpin effective working practices; miss opportunities and cost savings due to poor information intelligence and continually erode the public purse and citizen confidence in local government services.

- 4.9.3 Adult Social Care plays a key and vital part in the council's Customer Strategy. Adult Social Care contact outside of the contact centre accounts for some 50,000 a year that is 10%, second only to Children's services which account for 11% (Source: Non Customer Centre Volumes Business Case).
- 4.9.4 As a result, the Customer Strategy draws on some improvement recommendations that the ASC service will inevitably need to align with:
  - The Contact Centre should become the primary first point of contact for all Customers and should manage the overall Customer contact experience;
  - All routine transactions should be resolved at the first point of contact, wherever possible;
  - More use should be made of other communication channels e.g. digital platforms, including Social media for contact with Customers where appropriate:
  - Professional Service delivery should be focused on quality of service delivery and should be 're-engineered' to work effectively with the Contact Centre as the first point of Customer contact:
  - The Customer's voice should be heard and responded to in an appropriate and timely manner
- 4.10 Commissioning Council: How Personalisation Affects our Commissioning Practice
- 4.10.1 Peterborough City Council is redefining how it commissions services to ensure positive outcomes for customers.
- 4.10.2 In order to ensure people's choice in deciding what they need and want in terms of support, we must expand our offer. We will be doing this by reviewing how we currently commission internal and external services and work in partnership with providers from the voluntary and commercial sectors to develop person-centred support options that will increase people's independence, skills and well-being.
- 4.10.3 The new commissioning arrangements will be outcome-based and people will be able to go direct to provider with their own personal budgets. Managed accounts by the Council will only be offered after all other options have been explored.
- 4.10.4 We are improving our approach to supporting people so it is consistent with the personalisation agenda and this will inform the development of all new personalised services.
- 4.10.5 The aim is to move away as much as possible from traditional and institutional models of residential care and day centres to ensure people receive reablement and transitional support and are given the opportunity to develop independent living skills and have the opportunity for employment related services.

### 4.11 The Digital Strategy

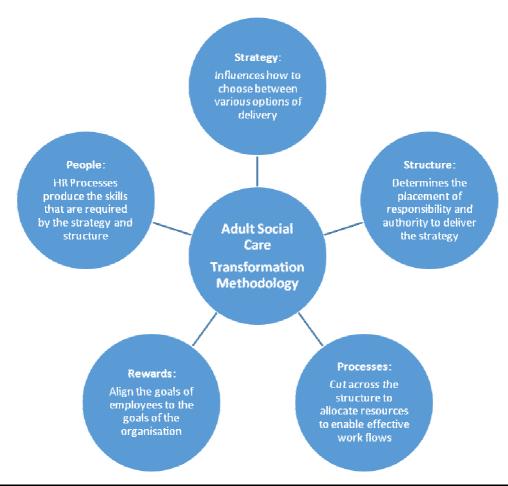
4.11.1 This year, the council started work on a digital vision for Peterborough, aligned with the wider ambition of Central Government's 'digital first' or a digital by default strategy.

- 4.11.2 It sets out a boldly ambitious vision for Peterborough that can only truly be realised through transformational change.
- 4.11.3 Aligned to the Council's strategic priorities, the Digital Strategy illustrates how an e-enabled organisation can deliver significant advantages for both the Council and residents, from tackling inequalities through to helping build strong sustainable communities
- 4.11.4 The plan for the ASC transformation programme is to spearhead where necessary and leverage when possible the capabilities outlined in the Digital Strategy to deliver better frontline services to those simply seeking information or advise and better facilitate inter-working relationships amongst ASC staff and external organisations involved in delivering care services.
- 4.12 <u>Scope of Transformation Programme and Next Steps</u>
- 4.12.1 The Council is moving towards a support system that:
  - Is dedicated to Personalisation, individual choice, greater independence and less reliance on ongoing statutory support wherever possible.
  - Supports individuals to maximize their potential to live as independently as possible through Reablement and transitional support
  - Enables individuals, families and carers to be able to use our new front facing customer service which will provide information and advice, low level support and our preventative offer.
  - Delivers Personalisation by enabling people to have personal budgets
  - Enables the council to become a commissioning organisation that builds capacity, quality, service choice and the ability to offer personal assistance with social enterprises, commercial, NHS and statutory providers and voluntary and community groups.
- 4.12.2 To be successful in embedding Personalisation in Peterborough it is critical that residents' voices are heard and incorporated into the modernisation process.
- 4.12.3 To this end we are actively working together with Peterborough people to gather their views on what how we can incorporate their voice into the transformation programme
- 4.12.4 In order to achieve this, the transformation programme is employing a method which favours the development of a service which is focused on the values of its customers as opposed to a 'cost cutting' exercise; which often creates unsustainable and sub-standard results. A number of key organisation design components are being analysed and re-shaped to deliver better services, which align to the changing current and future environment for Adult Social Care.
- 4.12.5 The Transformation Programme is underway, and is developing a full and Detailed Business Case that will be presented to the Transformation Board on 9 December 2013. This report will identify a number of future operating models, and their associated cost saving potential. Following acceptance of a preferred model, Adult Social Care will move into the final stages of planning and implementation; with a target date of 1<sup>st</sup> April 2014 for go-live.

## 4.13 Key Issues to be addressed in Detailed Business Case

- To enable the transformation programmes full cost saving potential the Council will be required to make an investment in IT enablement for the benefit of this and other future transformation programmes.
- Culture change within the support planning process.
- Managing expectations and change for users and carers.
- Developing community capital and capacity.
- Improved compliance and monitoring of existing contracts and alignment of personalisation.
- Potential impact on staff i.e. change of roles, working differently.

These components are illustrated below:



#### 5. CONSULTATION

5.1 Extensive public consultation surrounding changes to the Eligibility Criteria was undertaken between December 2012 and February 2013 which formed the evidence of need for adult social care in Peterborough. With over 1000 responses to the consultation, it was absolutely clear that citizens wanted substantial change in how social care was delivered.

- 5.2 There are many groups affected by the Transformation over the next 12 months, including:-
  - Public
  - Ward Councillor(s)
  - Parish Council(s)
  - Community Association(s)
  - Partner Organisation(s)
  - GPP or Partnerships
  - Staff
  - Trade Unions
- 5.3 When there are direct changes affecting staff or the public, separate consultations will take place with the affected groups to both understand their needs and preferences, and also to help them to recognise the opportunities and benefits that will made be made available for them through Transformation.
- 5.4 Where staff will be affected, to ensure their views have been heard and their skills and expertise included within the programme, a wide-ranging engagement process has been undertaken including:
  - Management workshops
  - Staff working groups
  - Staff face-to-face briefings
  - Staff handbooks
  - Viewing of Transformation film
  - Monthly updates in iCare e-newsletter
- 5.5 When formal proposals to change the service have been developed a formal period of consultation with staff will take place in accordance with legislation and policy. Views and comments on the proposals will be welcomed and considered. Responses to views and comments will be provided at the end of the consultation period. No decisions will be made or any action taken until the period of consultation is completed.

## 6. IMPLICATIONS

- 6.1 Change to services through alternative delivery models will impact all current and future users of Adult Care Services. As new models are developed, the following areas will be considered as part of the process:
  - Financial
  - Legal
  - Corporate Priorities: Environment Capital
  - Crime and Disorder / Community Safety
  - Discrimination and Equality
  - Human Resources
  - ICT
  - Property
  - Procurement
  - Cross-service implications
  - Risk assessments
  - Equality Impact Assessments

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