HEALTH AND ADULT SOCIAL CARE
OVERVIEW AND SCRUTINY COMMITTEE
10 JULY 2008
TRANSFORMATION OF ADULT SOCIAL CARE

Report from: Rose Collinson, Director of Children and Adult Services
Author: Amanda Rogers, Assistant Director Social Care

Summary
This report sets out the national policy direction for transforming social care. This means that it is expected that within 3 years Councils with Adult Social Services Responsibilities will have in place mechanisms to empower all service users to make choices, and take control, of their care in a way that suits them.

The principles that underpin this approach are:

I. The right to independent living
II. The right to a personalised budget
III. The right to self-determination
IV. The right to flexible funding
V. The principle of accountability and responsibility
VI. The principle of capacity (that people have the mental capacity to make their own decisions unless otherwise formally determined); and:
VII. Recognition that real change will only be achieved through the participation of users and carers at every stage

1. Budget and Policy Framework

1.1 This change to models of social care structure and practice is within Medway Council’s current budgetary and policy framework.

2. Background

2.1 Early in 2008 the Department of Health issued a Local Authority Circular (appendix 1) entitled “Transforming Social Care”. Transformation of the range of services available to people eligible for
the Council’s support, and the means of accessing them, had been signalled in the Department of Health’s social care Green Paper *Independence, Well-being and Choice* (2005) and reinforced in the White Paper, *Our health, our care, our say: a new direction for community services*, in 2006. The approach was confirmed in “Putting People First” (Appendix 2), a trans governmental concordat published in December 2007.

2.2. The Local Authority Circular included an announcement of the Social Care Reform Grant. A new ring fenced grant to help councils to redesign and reshape their systems over the next 3 years. The vision is that by then the social care system will allow individuals to make real choice and take control, with appropriate support, whatever their level of need. This system is referred to as “personalisation”, where the resources available to meet each person’s assessed need are transparent, and, as far as possible, the individual, perhaps supported by their family or carers, determines how that money is spent. As far as possible, and when it is the individual’s choice, they will take control of the expenditure.

3. **Options**

Medway Council’s approach to delivering social care reform is one of programme management, with a number of different projects, which together will change the shape of social care in Medway:

The governance structure for the programme of social care reform is as follows on the next page:
Stakeholder groups: ie: service users; carers; staff; voluntary and community groups.

National Policy
Local Policy
Performance and Quality Measures
The membership of the Social Care Transformation Programme Board is:

Director of Children and Adults, Learning and Caring
Assistant Director Social Care
Social Care Projects Manager (Programme Manager)
Social Care Service Managers
Appropriate Team/Unit Managers as Project Managers
Finance Manager
Project Officer (Notes)

Social Care Reform Projects

The Transformation Programme Board is overseeing a number of projects that together will change the shape of social care in Medway through modernisation or reprovision of facilities no longer fit for purpose, and through changing practice and models of delivery to ensure that choice of where, when, and how to access services is meaningful for all service user groups. In the lifetime of the Programme key projects will include:

1. Self Directed Services
2. Older People’s Day Care
3. Modernisation of Linked Service Centres
4. In House Homecare Service
5. Transfer Community Transport
6. Reprovision of the Enhanced Care Unit
7. Transforming Community Equipment
8. Development of Queens Court
9. Personalisation of learning disability day services
10. Broadening the remit and purpose of the Balfour Centre
11. Completion of Housing Needs Analysis
12. Integration of Rapid Response into Community Teams

Each of these will be underpinned by a communication and participation strategy.

Key change priorities for 2008/09, covered in this report, are:

- The implementation of Self Directed Support;
- Modernisation of Linked Service Centres; and
- Older People’s Day Services.

4. Self Directed Support

4.1. Self-Directed Support is the lynchpin of the principles of reform set out at the beginning of this report. It is a national initiative to enable people eligible for supported social care to manage their individual care provision and support. This is done through “shared assessment” where the potential user and their carers/family take a leading role in completing the assessment, and then managing a “personalised” budget. Self Directed Support puts people in the centre of the planning
process, and recognises that they are the expert on their own needs and how they would be best met.

4.2. The journey towards Self Directed Support represents a significant change to the existing provision of care and support and will impact upon both front line and back office functions across social care as well as external public and voluntary services.

4.3 Personalised budgets to support self-directed care will be flexible enough to allow people who are satisfied with existing services to keep these, and also give people a range of options for building up more individually tailored support, using Direct Payments and other routes. Medway currently has 235 individuals in receipt of a direct payment (average among comparator authorities is 218). Personalised budgets provide other mechanisms for managing money and payments for people who lack capacity, or for any other reason cannot or do not wish to manage a direct payment.

5. **Modernisation of Linked Service Centres** – supported by the principle of recognition that real change will only be achieved through the participation of users and carers at every stage.

6. **Robert Bean Lodge (RBL)**

6.1. Following the Cabinet decision on 29 January 2008, all permanent admissions to RBL ceased from April. Vacant beds are being used for respite care.

6.2. Cabinet has agreed to convert the older persons physical frailty beds to 36 dementia care beds, and to re-site the 4 bed Napier unit (residential respite facility for adults with a learning disability) into a separate unit accommodating up to 10 beds. This will be achieved gradually as and when vacancies occur, without unnecessary disruption to residents. It is anticipated that the new Napier Unit will open in January 2009, but this depends in part on the attrition rate.

6.3. The RBL project team are meeting with Design & Surveying colleagues on 2 July 2008 to firm up the best arrangements (design & revenue/staff costs) for the 36 Older Peoples’ dementia beds, and requirements for the Napier Unit. Once this task has been completed a schedule of works will be produced and costed.

7. **Platters Farm**

7.1. Cabinet have agreed to convert the home to 25 social care rehabilitation beds and 18 respite beds for older people with physical frailty.

7.2. The project team have decided to design a social care rehabilitation model (includes Integration of rapid response) for Platters Farm. A workshop to design this service is being held on 27 June 2008.
7.3. All permanent admissions were ceased from April. An additional respite bed has been made available.

8. **Outsourcing Older People’s Day Services**

8.1. Cabinet decided on 29 January 2008 that work should proceed towards the voluntary sector managing existing day care facilities at Robert Bean Lodge. Since then a review of independent sector activity has taken place, in order to gain a greater understanding of opportunities to reinvest into this service, irrespective of the eligibility status of the needs of service users. This work will be completed in September, when the outcomes of reassessments under the raised threshold of “Fair Access to Care Services”, will have been collated. In the meantime, the existing contracts of voluntary sector day service providers have been extended to October 2008.

9. **Consultation**

9.1. An intensive round of one to one and group consultations were undertaken in March and April with residents, relatives, day service users, and staff of both Robert Bean Lodge and Platters Farm.

9.2. There was some reluctance among residents and relatives of Robert Bean Lodge to moving to alternative units. However, only 3-4 people saw this as a big problem. Options are being explored with these individuals.

9.3. Most users of the Robert Bean Lodge Day Service were reassured with the idea that an independent sector organisation running the day centre would provide a service irrespective of eligibility for social care. However, some levels of concern about this remain.

9.4. A newsletter was issued to all residents, known relatives and staff in May. There will be regular updates to this, and an article will be in Medway Matters in the June/July edition.

9.5. One to one interviews with all staff have been undertaken to identify their individual training and development needs. Staff viewed this very positively and a training plan will now be developed.

10. **Financial and legal implications**

10.1. There are no legal implications arising from this report. Financial implications are set out in the following paragraphs.

10.2. The Council's contribution towards the consultancy costs can be contained within existing budgets.

10.3. Self Directed Support has major implications for job roles and ways of working in social care. An allocation has been made from the Social Care Reform Grant of £255,200 per annum to ensure that a staffing
structure is in place to support the development of tools and resources, and undertake staff training and promote new ways of working towards self directed support.

10.4. The post of “Transformation and Policy Manager” will be created and funded for three years from the Social Care Reform Grant to oversee system change. A budget allocation of £66,600 per year has been made to support this.

105. The Social Care Reform Grant from DH, which is ring fenced to give Councils with adult social services responsibilities the capacity to affect system change, totals £1,945,000 over three years for Medway:

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
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<tbody>
<tr>
<td>2008/09</td>
<td>£310,000</td>
</tr>
<tr>
<td>2009/10</td>
<td>£730,000</td>
</tr>
<tr>
<td>2010/11</td>
<td>£905,000</td>
</tr>
</tbody>
</table>

10.6. Local Authority Circular (DH) (2008) 1 sets out an expectation that through using the total resources provided through Comprehensive Spending Review 2007 including the Social Care Reform Grant, and through ensuring improved value for money, that Councils are in a position to make real and measurable progress to achieve the systems changes that will deliver the transformation of social care for their local population over the next three years. This will require investment in system change.

10.7. The determination of the Social Care Reform Grant is made by the Secretary of State for Health under Section 31 of the Local Government Act 2003. The Secretary of State may request the repayment of the whole or any part of the grant to the extent that they are not used for the purposes for which they are given.

10.7. £255,000 of the Social Care Reform Grant for 2008/09 has so far been allocated to build capacity to deliver the workstreams:

<table>
<thead>
<tr>
<th>New Post:</th>
<th>£'k</th>
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<tbody>
<tr>
<td>Service Manager Transformation</td>
<td>66.6</td>
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<tr>
<td>Self Directed Support Operations Manager</td>
<td>50</td>
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<tr>
<td>Self Directed Support Advisor</td>
<td>10.6</td>
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<tr>
<td>Disability Day Services Modernisation Co-ordinator</td>
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<tr>
<td>Community and Voluntary Sector Engagement and Participation Officer</td>
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<tr>
<td>ICT Training Assistant (part time)</td>
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<tr>
<td>Service Development Officer (change to existing post)</td>
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</tr>
<tr>
<td>Events and Training</td>
<td>15</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>255.2</td>
</tr>
</tbody>
</table>
11. **Recommendations**

11.1. That the Health and Adult Social Care Overview and Scrutiny Committee note and support Medway’s plans for transformation of adult social care.

11.2. That progress towards transformation be scrutinised at each key milestone of the project plan (to be advised by means of an executive summary prior to the next meeting of the Committee).

**Lead officer contact**

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**Background papers**

- Medway Council Cabinet Report 29 January 2008 – Woodlands and Shawswood Scheme / Modernising Existing Linked Service Centres

- Local Authority Circular (DH) (2008) 1 Transforming Social Care

- “Putting People First” A shared vision and commitment to the transformation of Adult Social Care