

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

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ADULT SOCIAL CARE STRATEGY 2016 - 2020 GETTING BETTER TOGETHER

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Summary

This report provides an update on Getting Better Together, the Council's Adult Social Care Strategy and Improvement Programme.

1. Budget and Policy Framework

1.1 Getting Better Together, the Council's Adult Social Care Strategy articulates our vision for adult social care, and sets out the key themes and priorities for action. The strategy and related improvement programme align with the overall objectives defined within the Council Plan, and the Health and Wellbeing Strategy for Medway.

2. Background

2.1 The Portfolio Holder for Adult Services has overseen the development of "Getting Better Together", the Adult Social Care Strategy for Medway. It articulates a vision for the development of adult social care in Medway over a four year period, based on six strategic priorities, which are:

- **Prevention:** Making sure the Medway care and support system works to actively promote wellbeing and independence, and does not just wait to respond when people reach a crisis point.
- **Participation and Partnerships:** Building strong partnerships to make sure that everything we do is with the participation of service users, carers and key organisations.
- **Personalisation:** Maximising every person's independence, choice and control over their lives.

- **Integration:** There is a clear requirement for care support to be well 'joined up' so that an individual has a clear plan supported by all the agencies working well together.
 - **Innovation:** Making the best of the opportunities that new technologies provide.
 - **Safeguarding:** Ensuring people are protected from abuse, neglect or exploitation, and that their views inform any action taken as much as possible.
- 2.2 The primary aim of the strategy is to prevent and reduce social need by providing effective support so that citizens maintain their independence. Wherever possible and appropriate we will support citizens with eligible social care needs to remain in or return to their own home, so that they can maintain important relationships with family, friends, and continue to actively be a part of their own community.
- 2.3 The Getting Better Together Strategy was approved by Cabinet on 12 July 2016 (Decision 91/2016)
- 2.4 Alongside the development of the Strategy a diagnostic assessment of the opportunities for change has been completed by Newton Europe, an organisation with an established track record of working with public and private sector organisations. This diagnostic highlighted a number of areas that are necessary to change to improve the efficiency, quality and best value of services, which will improve outcomes for people.
- 2.5 The Adults Social Care Programme Management Office (PMO) has been established to take forward the recommendations of the diagnostic assessment. The work of the PMO has been developed into an Improvement Programme and all of this work has been incorporated into the Getting Better Together strategic delivery plan to ensure that it forms part of a single co-ordinated set of activities.

3. Advice and analysis

- 3.1 The Getting Better Together Strategy includes a strategic delivery plan, which has been developed to include the activity being undertaken by the PMO.
- 3.2 To ensure effective leadership and governance an Adult Social Care Improvement Board (ASCIB), chaired, by the Leader, has been established. The Board is overseeing the delivery of the strategic delivery plan, which includes the work of the PMO.
- 3.3 One of the key objectives of the PMO is to deliver savings against the cost of Adult Social Care services by Medway Council, which have been programmed into the Medium Term Financial Plan.
- 3.4 The PMO was established in October 2016 with the size of the team growing between the beginning of October and the end of December. The majority of posts within the team have now been recruited to. All of the posts within the

team are fixed term contracts, with the length of contracts linked to the length of the projects.

- 3.5 The work of the PMO is being delivered in a number of phases based on the principles of MSP (Managing Successful Programmes). This started with the design phase between October and December 2016 during which clear project plans have been developed for each project, before moving into the Implementation Phase, which commenced in January 2017. A high level programme plan showing the timescales for delivery of each project has been included in Appendix 2.
- 3.6 An Operational Board and Financial Monitoring Board have been established to monitor progress and report into the Adults Social Care Improvement Board.
- 3.7 The PMO is responsible for a number of specific projects and workstreams, which have emerged from the diagnostic assessment, and which are shown on a plan on a page in Appendix 1. A summary of each of the workstreams is provided in the table below:

Workstream	Workstream description
Promoting independence reviews	This workstream will develop and enhance the review process, building on recent work to establish a standalone review team. This approach will promote independence and reduce the size and number of long term care packages, and will utilise reablement where appropriate.
Panel decision making, placement finding and payments	<p>This workstream will develop and enhance panel processes (pre & post meeting), making the care planning & panel process more efficient and effective, ensuring the adoption of a consistent approach to allocation of resources across all customer pathways and ensuring that all options have been thoroughly appraised as part of the process of referring a case to panel.</p> <p>A focus will be on ensuring that there is an increase in the use of Direct Payments for long term care solutions, and will link to the commissioning workstreams to ensure that there are appropriate alternative provisions within the community.</p>
One Front Door	This workstream will deliver a redesigned front door to Adult Social Care services with a multi-agency approach. This will strengthen the quality of information, advice and guidance provided and will ensure that enablement is the default first option for all people who require an Adult Social Care service. This will lead to a reduced reliance on longer term packages of care.
Accommodation Strategy and recommissioning	This workstream will produce and deliver a strategy in order to support more people in more appropriate care settings. The focus will be to continue to provide alternatives to residential care and develop the range of supported living accommodation designed to promote independence.

Reablement outcomes improvement	This workstream will seek to improve the quality and increase the amount of reablement provided to vulnerable adults. This will improve outcomes for service users through promoting independence and deliver efficiencies through a reduction in the need for long term care.
Outcomes based homecare commissioning	This workstream will develop and implement an outcome based approach within homecare arrangements to support more people at home and increase the likelihood of service users becoming independent. This will lead to a reduced reliance upon care packages.
Managing variation in commissioning results	This workstream will develop and embed streamlined decision making, placement finding, contracting and payment pathways to achieve tighter controls on spend. It will also develop a strong and efficient Access to Resources team whose remit will be to source all residential, nursing, support living, home care, reablement and preventative community based services. This is to ensure consistency in quality and practice; early negotiation of price; prioritisation of block beds and improved market management e.g. working with providers offering high standards of care at lower costs.
Tactical provider negotiations and policy change	This workstream will develop processes and systems to track savings through reducing block contract voids, cost reductions for absences in residential homes (e.g. hospital admissions) and better pricing as well as a reduction in level of top up payments being made as well as length of stay in high cost provision and step down arrangements. A range of policies will be developed to underpin the strategic direction and in support of making changes to the terms and conditions of contracts with providers

3.8 As the diagram in Appendix 1 also shows, there are a number of cross cutting themes underpinning all of these projects, which are:

- Cultural change and changing the workforce;
- ICT systems redesign;
- Fit for purpose policies and procedures;
- Service efficiency – less handoffs, right professional at the right time and demand management.

3.9 To support the delivery of these cross cutting themes we plan to launch a completely new strength based model of practice. This approach is called “3 conversations” and we will be supported by an organisation called Partners 4 Change (P4C) to make it happen.

3.10 Feedback from service users and from staff has highlighted that the way we deliver Social Care in Medway needs to change. Our current systems are often difficult to navigate and bureaucratic, which prevent us from having conversations with people about what really matters to them.

3.11 The “3 conversations” model supports frontline staff to have 3 precise, specific conversations with people as a way of discovering a person’s needs and

finding ways to enable them to be independent and safe. The three conversations are:

Conversation 1: Listen and Connect	Listen actively – don't assume anything. What really matters to this person? What are their interests and skills? What do they want to do? Consider and discuss all of the resources and supports that you can connect the person to within their community and networks in order to help them get on with their life independently.
Conversation 2: Work intensively with people in crisis	What needs to change urgently to help people regain resilience and stability? Compliment people's own networks by exploring what offers you have at your fingertips, and those of your colleagues – including all of your knowledge of the community to help make these things happen. Pull the most effective things together into an "emergency" plan (that includes the needs of family carers), and stick to people like glue to make sure that the plan in place works. If it doesn't, then change it.
Conversation 3: Build a good life	Listen hard. What does a good life look like for this person (and their family)? What resources, including a fair personal budget, are available? What support, both informal and formal will help people to live a life that is good, according to their definitions? How can we help someone get that support organised so they can live the best life possible.

3.12 The "3 conversations" model is based on the following golden rules:

- Always start conversations with the assets and strengths of people, families and communities;
- Always exhaust conversations one and two before having a conversation three;
- Never ever plan long term in a crisis;
- Listen hard to individuals and their carers – they are the experts on their lives;
- Know the neighbourhoods and communities within which people live;
- Flexibility to use professional judgement and co-design solutions on a case by case basis, treating individuals as individuals.

3.13 As this is a completely new way of working, the way in which we implement these changes will need to be carefully managed. The approach we plan to take is to start by establishing a small number of protected environments called "innovation sites". The new ways of working will be co-designed by the frontline staff working in these new teams, where we will test the 3 conversations model. This means that we can learn what does and doesn't work and adjust it before rolling it out across the service.

3.14 One of the principles of establishing an innovation site, is that we collect and review data every day. This also ensures that we are mitigating risks appropriately, because everything is scrutinised very closely. A Project Board, chaired by the Assistant Director, Adult Social Care, will meet fortnightly to review the work of the innovation sites and plan for the roll out of the new ways of working.

3.15 The 3 conversations model is evidence based, with a number of authorities who have used this model able to demonstrate positive outcomes. The main benefits of the model as evidenced by other authorities are:

- A significant reduction in the proportion of contacts that go on to receive long term packages of care, which has been shown to deliver savings to the local authority;
- High levels of satisfaction from people who have contacted teams using the 3 conversations model;
- High levels of staff engagement and satisfaction.

3.16 The 3 conversations model was also recently highlighted by Lyn Romeo, Chief Social Worker, who said “I have been heartened by the developments in practice that are focusing on strengths based approaches”; mentioning that on a recent visit to West Berkshire she heard about the 3 conversations model.

3.17 We are aiming for the first innovation sites to be up and running in February 2017. They will run for a period of 12 weeks initially, after which we will evaluate them, before expanding existing sites or creating new innovation sites. The model will then be rolled out across the service, taking into account all of the learning from the innovation sites.

4. Risk management

4.1 Our demographics show a growing ageing population but there are significant inequalities in life expectancy between the richest and poorest in Medway. There are a growing number of people who are carers for family, friends and neighbours. People with some of the most complex disabilities are living longer. In general, people expect greater choice and control over how their care needs are met. Admissions at Medway Foundation Trust are at record levels and increasing. At the same time resources for publically funded care services are scarce.

4.2 Medway Council is facing significant budget pressures and as a result, significant change is essential to modernise the way Adult Social Care services are delivered in Medway in order to be able to achieve the level of efficiency and savings required, whilst maintaining a strong offer to adults in need of advice and care and support in Medway.

4.3 The PMO has been established to lead this change programme, and to deliver the efficiencies and savings required. There is a risk that the immediate budget pressures could result in the reduction of resources in the PMO or the redirection of resources from the PMO to support operational issues. The success of the PMO also relies on there being sufficient capacity within the organisation to support the change.

Risk	Description	Action to avoid or mitigate risk	Risk rating
Financial pressures related to growth in demand for Adults Social Care	Risk that the continuing growth in demand for adult social care and support cannot be addressed through existing resources	Increased focus on forecasting of demand and associated expenditure	C2

Lack of capacity to deliver the changes required	Risk that the organisation will lack the capacity to deliver the actions required to deliver change and efficiencies	The PMO has been established as a standalone team to deliver the Adult Social Care Improvement Programme	C2
Failure to effectively engage key stakeholders	Risk that key stakeholders do not feel involved and engaged in the delivery of the strategy	Development of an effective communication and engagement strategy	C3
Failure to embed change	Risk that change does not improve ways or working, and/or that it is not sufficiently embedded	Development of innovation sites, co-designed with front line staff to test and measure the impact of new approaches	C2

5. Consultation

- 5.1 Consultation on our strategic delivery plan has been undertaken and included a successful consultation event, which was held on 9th September 2016 at the Brook Theatre. 20 service users and carers attended to help us to shape our delivery plan. One of the key messages from the consultation was that people want to be more involved in the planning of services. In response to this message, we now plan to develop a dedicated social care user and carer forum. A report detailing best practice and proposing options for the establishment of a Medway social care forum will be made to the Getting Better Together Operational Board on the 25th January.
- 5.2 A number of staff workshops were held during December 2016 as part of the Pathway Redesign Project. The outputs of these workshops are informing the implementation phase of the project and feedback sessions have been arranged with staff to advise them how the outputs of the workshops will be incorporated into our plans.
- 5.3 A Getting Better Together Medway Makers forum has been established with staff from across the Adult Social Care Division. There have been 5 meetings of the forum, which have all been well attended. A regular monthly staff bulletin has also been developed, which is providing staff with regular updates on the programme.
- 5.4 Consultation meetings with partners and providers are being planned for early in 2017.

6. Financial implications

- 6.1 It is anticipated that the work of the PMO will deliver a minimum of £3.9m of annual savings by 2019/20 and this level of savings has been built into the medium term financial plan.

7. Legal implications

- 7.1 The strategy needs to support the delivery of all key statutory functions related to adult social care, particularly those associated within the Care Act 2014.
- 7.2 Medway Council must also comply with its obligations to equalities under the Equality Act 2010, to eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by this Act. It must advance equality of opportunity and foster good relations between people. This involves removing or minimising disadvantages suffered by people, including taking steps to meet the needs of people from people who have a “protected characteristic” in the terms of this Act. It must encourage people from protected groups to participate in public life and other activities where their participation is disproportionately low. In order to comply with these equality duties, the Council is required to engage with service users and representative groups, and to use the information and views gathered to assess the equality impact of any proposals made by the Council in relation to service provision.

8. Recommendations

- 8.1 It is recommended that Overview and Scrutiny Members note the status of the Getting Better Together Improvement Programme.

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Appendices

- Appendix 1 - Getting Better Together Improvement Programme ‘plan on a page’
Appendix 2 - High level Programme Plan

Background papers

[Adult Social Care Strategy 2016 – 2020 – ‘Getting Better Together’](#)

<http://partners4change.co.uk/> - Website of Partners 4 Change, who will be supporting the Council to deliver the 3 conversations model