

**A NEW STRATEGIC APPROACH FOR SOCIAL WORK AND SOCIAL CARE FOR ADULTS IN CAMBRIDGESHIRE: TRANSFORMING LIVES**

*To:* **Adults Committee**

*Meeting Date:* **20 May 2014**

*From:* **Adrian Loades, Executive Director: Children, Families and Adults Services**

*Electoral division(s):* **All**

*Forward Plan ref:* **Not applicable**      *Key decision:* **No**

*Purpose:* **The Committee is asked to consider the proposed new strategic approach to social work and social care for adults in Cambridgeshire: Transforming Lives.**

**The Committee is asked to consider its ongoing engagement in this work over the coming months.**

*Recommendation:* **The Committee is asked to agree:**

- a) to champion the role of all members in engaging with their local communities to support this initiative**
- b) to receive regular updates on the progress of this work as well as important decision points.**

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## **1.0 BACKGROUND**

- 1.1 Adult Social Care in Cambridgeshire is experiencing increasing demand for services as the numbers of people eligible to receive our services rises. Demographic pressures mean that there are rising numbers of older people, and support packages are becoming increasingly complex. This increasing demand is experienced against a backdrop of decreasing budgets and the need to achieve significant savings alongside avoided costs.
- 1.2 Nationally, there are a number of key drivers for change in Adult Social Care including draft legislation in the form of the Care Bill which will impact upon the role and responsibilities of the Council, the Social Work Reform Board recommendations which state the need for a greater focus on outcomes and the modernisation of social work, and The College of Social Work who are advocating Social Work Reform. The Council will need to adapt and respond to these national pressures, as we seek to reduce demand and make the required savings.
- 1.3 In April, the Council's Cabinet agreed that a new strategic framework for adult social work and social care in Cambridgeshire is developed to 'transform the lives' of the individuals, families and communities within Cambridgeshire. This framework will ensure that we are meeting our legislative duties and are able to respond to future national agendas, and will help to reduce demand on our services, enabling us to work towards making the savings that are required.
- 1.4 The approach is integral to the achievement of the Council's business plan savings and demand management plans for Adult Social Care Directorate and Older People and Mental Health Directorate. It will also underpin the delivery of Mental Health Social Care and the Older People's Strategy and will deliver the statutory duties outlined in the Care and Support Bill. Moreover, this model is a key facet of the Council's joint proposals with the NHS for the Better Care Fund.
- 1.5 The Transforming Lives model is aspirational. It builds on work and practices that are already undertaken in Cambridgeshire and seeks to provide a clearer structure and approach for this work. However, it also represents some fundamental change to existing arrangements. The practical implementation of this model will be time consuming and will require compromises in respect of the proposed model and the realities and pressures of day to day work. However, the model will provide direction for the development of services.
- 1.6 On 15<sup>th</sup> April 2014 Cabinet agreed to support the direction of travel of the Transforming Lives approach and agreed to further engagement with service users, family carers and stakeholders. The project aim is to ensure that stakeholders have the opportunity to participate in the development of this approach. Whilst the direction of travel was approved by Cabinet, the fundamental importance of the Transforming Lives work means that it is considered appropriate for the Committee to have an early consideration of the proposed model, its implications and arrangements for implementation.

## **2.0 TRANSFORMING LIVES**

2.1 As outlined in detail within the supporting documentation, Transforming Lives presents an opportunity to develop a model of adult social work and social care which is markedly different from the current model in Cambridgeshire. We are seeking to develop an approach that is increasingly proactive, preventative and personalised and will enable the residents of Cambridgeshire to exert choice and control and ultimately continue to live, to the fullest extent possible, healthy, fulfilled, socially engaged and independent lives.

2.2 The vision for this new way of working is to:

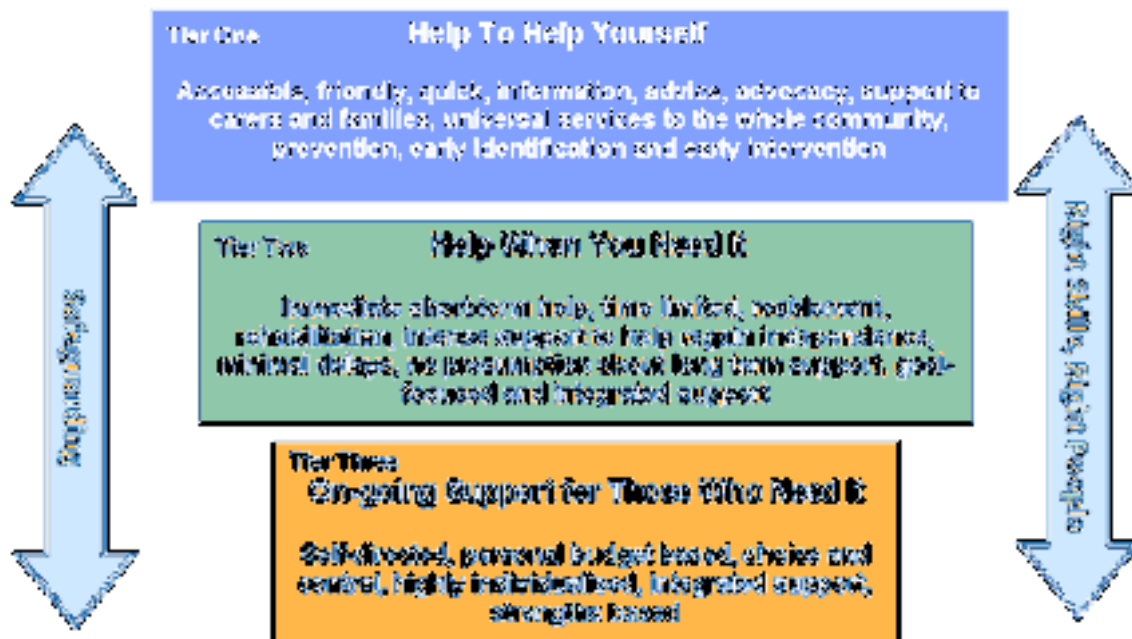
- Enable people to live independently
- Support people in a way that works for them
- Support the development of strong, connected communities
- Recognise the strengths of individuals, families and communities and build upon these
- Work in partnership to achieve this

2.3 The principles underpinning this model include:

- Personalisation, choice and control - when people need ongoing support basing this on a personal budget and allowing people to determine the best way to spend it.
- A skilled and confident workforce - in other areas where this way of working is being adopted workforce surveys demonstrate that this plays to peoples skills and liberates them, enabling them to be creative and effective.
- Multi-agency working - wherever appropriate, plans for support whether short term or long term need to be joined up with the NHS and other partners.
- Early intervention and prevention - this model builds on national evidence base that investing early reaps significant financial rewards as well as delivering more of what people want.
- Person-centred, focusing on the person's strengths and the outcomes they wish to achieve - this model seeks to reduce the assumption of formal care as a solution, and instead build first on the assets and strengths of people in families and neighbourhoods, supplementing this with formal support when necessary.
- Best use of technology where appropriate - we know that technology can in some instances significantly reduce the dependence on expensive recurring services and increase independence and 'normal living' and we will seek to use it wherever possible.
- Supporting carers, families and communities - the best way to support people to lead good lives, and stay healthy safe and well is not to create dependence on formal care, but first to strengthen the resilience of informal support systems, and in particular support families and other carers to remain healthy, willing and able.
- Fair allocation of resources - this model moves away from allocating resources based on what things happen to cost, and seeks to distribute the available financial resource more fairly and equitably based on comparative need and where we can get best return on our investment.

- Helping people when they need it most- this model seeks to respond in an optimally effective way; if people are in crisis we will not make long term arrangements but deal with and wherever possible reducing the crisis.
- Supporting people to be safe, independent and well - through connecting them to informal and formal support options that meet their individual needs and circumstances.

2.4 The Transforming Lives approach is based on a three tier model, as illustrated below:



## 2.5 Tier One: Information and advice and prevention, early identification and early intervention

- 2.5.1 The proposed model is predicated upon an effective, universal accessible and well-publicised information and advice offer which is quick and easy to access, is clear, friendly and has the ability to be personalised to meet the needs of the customer.
- 2.5.2 Strong, independent communities are fundamental to this model, in providing activities, support and friendship that will contribute to individuals' wellbeing and ability to live happy, healthy, fulfilled, independent lives within their local communities. Alongside communities, supportive families and carers are crucial to the success of this model. Families and carers are usually best placed to support individuals to achieve their aspirations.
- 2.5.3 Tier one will help us in the early identification of those at risk or vulnerable and enable us to intervene appropriately and at the right time to prevent any further escalation.

## 2.6 Tier Two: Crisis Resolution

- 2.6.1 Crisis resolution provides a local, rapid response immediately following a crisis, at which the individual is put at the centre of intensive work. It focuses

on the needs of the individual at that point in time, and very short term outcome-focused planning will take place with support needs designed around the needs and circumstances of the individual. The adult social care professional would then provide support to the individual for the duration of the crisis, checking with them regularly to ensure that they are coping and feel well supported. This approach aims to prevent the further escalation of crisis.

- 2.6.2 It is anticipated that assistive technology, reablement and rehabilitation might feature as part of the crisis resolution, but these could also feature at any point throughout the three tiers.
- 2.6.3 The aim of crisis resolution is to help the individual to overcome the crisis and continue to live as independently as possible. When a crisis has been resolved, the individual will be signposted by the professional to local appropriate information, advice and community activities, which will support them in the continuation of their recovery and encourage their independence.
- 2.6.4 Establishing a time-limited, local crisis response will often prevent the need for long-term support. By providing short-term goal focused support, it will prevent long-term costly care packages being allocated at the point of crisis which may not be required after the point of crisis.

## **2.7 Tier Three: Ongoing Support**

- 2.7.1 The model proposes that on-going support from core adult social care services for those who need it is based on multi-agency, integrated longer-term planning and support.
- 2.7.2 Longer term support for individuals would be planned through the use of comprehensive integrated assessments, and would be self-directed, based on personal budgets and the principle of choice and control. The nature of the strengths based conversations that professionals will have with the individual would change, and planning would take place with the individual to ensure that we are continually building upon their strengths, families, networks and resources to achieve their aims.
- 2.7.3 A case study illustrating the Transforming Lives approach can be found in Appendix One. Further case studies which consider the impact of this approach are being developed.

## **3.0 TRANSFORMING LIVES AND THE CARE BILL**

- 3.1 The Transforming Lives approach has been designed to support the implementation of the Care Bill, which seeks to reform legislation around adult social care services. The Care Bill has 72 clauses, some of which provide new key requirements for local authorities. The draft regulations to support the Bill are expected in May 2014, triggering a period of consultation through to the end of July 2014. The final regulations should be published in October 2014 to support the implementation of most of the new requirements in April 2015.
- 3.2 An example of how the model will support the delivery of the one of the requirements of the Bill is outlined below:

#### Wellbeing Principle: Clause 1

This clause creates a new statutory principle which applies to all the functions under Part 1 of the Bill (including care and support and safeguarding), and means that whenever a local authority makes a decision about an adult, they must promote that adults' wellbeing.

The Transforming Lives model will actively promote the health and wellbeing of all adults in Cambridgeshire. The promotion of health and wellbeing will take place with all adults at all tiers within the model. This will include people who are not eligible for social care support where it will take place as part of a tier one conversation, where individuals will be encouraged to undertake activities to enhance their wellbeing.

### **4.0 IMPLEMENTATION CHALLENGES**

- 4.1 The Transforming Lives model is aspirational. It provides a clear strategic framework for adult social work and social care within Cambridgeshire, and presents a unique opportunity for wholesale transformation. However, this model does have associated risks.
- 4.2 The model requires a significant shift in the way that services to adults are delivered and will better enable services to meet their statutory, financial and professional objectives. The current care management system is focused upon a cycle of assessment and review, where the primary role of social care professionals is to assess the needs of an individual with a view to providing services to meet those needs [a deficit model]. The new Transforming Lives approach will be focused upon the individual's strengths and assets and those of carers and families, and to consider creative solutions to support the individual.
- 4.3 The Transforming Lives model provides a clear framework for the conversations that we will have in future with adults and their carers and families. As such, it refocuses our relationships with adults, looking to create a system which is increasingly proactive, preventative and personalised. However, it must be acknowledged that there will continue to be a significant cohort of adults within Cambridgeshire who will need intensive support at tier three. Under Transforming Lives we might see the nature of this support vary as we seek to maximise the opportunities for personalisation and self-directed support as we adopt a strengths based approach to assessment.
- 4.4 In order to successfully implement and embed this model, it has been recognised that an extensive change management programme will need to be established to support our workforce to work in this new way. The scale of this change programme should not be underestimated. It will require a complete shift in the way in which adult social care is currently delivered, and will have significant implications for all of our workforce including the supporting systems that underpin all of the work within adult social care, areas such as IT and performance management. This change will take time; it is anticipated that the impact of this project could extend beyond the lifetime of the Project Board, as it may take up to five years for the change to be fully embedded.

- 4.5 There are a number of risks associated with the Transforming Lives Project which have been outlined below:
- The model has an emphasis upon prevention and delaying need for adult social care services, and these will be important in delivering the savings. These key elements will take time to be realised and we may not see the impact immediately.
  - The lack of capacity across the workforce to respond to all of the major changes taking place at the current time, including Transforming Lives, the Care Bill and the Better Care Fund.
  - The lack of capacity of communities to respond to this agenda.
  - The risk that our systems are unable to support the new way of working, for example our ICT systems.
- 4.6 The extensive and complex nature of this change programme will inevitably mean that problems and frustrations will be encountered as we seek to implement this approach across the county. Transforming Lives requires us to disentangle our current processes and systems and redesign new ways of working that will enable us to work more efficiently with individuals and achieve the outcomes listed within this paper.
- 4.7 A Transforming Lives Project Structure has been established, for which Claire Bruin, Service Director: Adult Social Care, is the Project Sponsor. The project board will manage the risks, interdependencies and complexities associated with this work.
- The Project Board, together with input from colleagues from across adult social care, are working to further develop and define the Transforming Lives model. This will include consideration of how it will work on a day-to-day basis with the residents of Cambridgeshire. It is planned that service users, carers and other stakeholders will become increasingly involved in the development of this work.

## **5.0 CURRENT POSITION**

- 5.1 Since the report was submitted to Cabinet, work has been undertaken to begin to define and develop the Transforming Lives model. Workstream groups have been established, which include the Heads of Service working across Adult Social Care and Older People and Mental Health Services. These groups have identified key components of the model, and have initially focused on developing options around geographical 'patch based' working and the first point of contact with adults and their families and carers.
- 5.2 Communications and engagement are key to the success of the Transforming Lives project. A communication strategy has been drafted which outlines the key channels of communication for our internal and external stakeholders, and maps the way in which we will seek their engagement in the ongoing development of this work.
- 5.3 The Transforming Lives Project Board have made the decision that a number of small 'innovation sites' will be set up to trial the Transforming Lives approach. Further work is currently being undertaken to define these sites and plan for this work. The innovation sites present a great opportunity to shape this work from a grassroots level and find out what works practically on the ground. It will enable us to test parts of the model and learn from this

before rolling it out on a wider basis. It will also provide a unique opportunity to develop close working relationships with key partners within the site, and work together to progress the Transforming Lives aspirations.

## **6.0 ENGAGEMENT WITH STAKEHOLDERS**

- 6.1 Engagement with service users, family carers and all stakeholders will be key to the success of this model, and a communications and engagement plan is being drafted to ensure that we have clear and open dialogue with them about this new way of working. Participation in the development of the model will be the primary focus of this work.
- 6.2 Engagement with staff has begun through three 'Staff Roadshows' at which staff have been supportive of the 'common sense approach' of the Transforming Lives vision and concepts. A number of internal communication channels have been established to ensure that staff are able to access up-to-date and relevant information about the project. In addition, there are a number of two-way channels available for staff to feed their thoughts, ideas and questions into, to directly influence the ongoing development of the model.
- 6.3 It is anticipated that initial engagement with stakeholders and early conversations will take place from June 2014. Thereafter, it is suggested that engagement with stakeholders is ongoing, ensuring that there are regular formal opportunities for them to participate in the development of this work. The emphasis of all engagement work will be upon opportunities for meaningful participation, as opposed to a one-off consultation exercise.

## **7.0 DEVELOPING OUR LOCAL LEADERSHIP ROLE**

- 7.1 Transforming Lives is a new strategic approach to adult social work and social care in Cambridgeshire. It will require extensive work with our partners and communities to achieve real change. Underpinning the model is an emphasis on personalisation, looking at people's strengths and self-directed support, and will therefore support and encourage others to take more responsibility and more control of their care and support in future. This new approach aims to provide a new strategic framework in which Adult Social Care can work with service users, family carers, partners, voluntary and community sector organisations and providers to provide support for adults in Cambridgeshire.
- 7.2 The Transforming Lives approach is underpinned by the need to work more locally. It recognises the need to devolve more decisions, more responsibility and more action to local communities, and to service users through personalisation and self-directed support. This approach aims to support local areas to become even greater places to live and work. It recognises and emphasises local preferences, and the fact that things might be done differently in different places according to the needs and wishes of local people. Strong, connected communities are a key priority within the Transforming Lives approach, and therefore the role of Elected Members in championing this approach is key to its success.



## **8.0 ALIGNMENT WITH CORPORATE PRIORITIES**

### **8.1 Developing the local economy for the benefit of all**

- 8.1.1 Transforming is based upon recognising the strengths and assets of individuals and of those within our communities. It is therefore also a model which has progression at its core. Adults will be encouraged to participate in their local community and where appropriate will be encouraged to maximise opportunities for development of their learning and skills. This will be highly individualised, to ensure that the individual is supported to achieve their aspirations.

### **8.2 Helping people live healthy and independent lives**

- 8.2.1 Transforming Lives aims to encourage people to live healthy, fulfilled, social engaged and independent lives. It is increasingly proactive, preventative and personalised and aims to enable the residents of Cambridgeshire to exert choice and control over their lives.
- 8.2.2 Transforming Lives proposes that universal 'tier one' support available within communities is a key facet of this model and a key priority for Transforming Lives is 'Strong, integrated community capacity'. Elected members could play a key role in the leadership of strong independent communities and the development of community capacity.
- 8.2.3 This approach believes in the power of strong, locally-led communities and will support local communities to come together to consider and further develop the support on offer.
- 8.2.4 A further key facet of this model is personalisation, choice and control at an individual level which is constant throughout the three tier offer.
- 8.2.5 The strengths based approach adopted as part of Transforming Lives will ensure that individuals to consider their strengths and assets and will encourage them to participate in their local community.
- 8.2.6 Transforming Lives recognises the huge contributions of family carers and that they are often best placed to support individuals to achieve their aspirations. This approach, together with the work taking place on the Carers' Review, will ensure that carers are well supported in line with the duties outlined in the Draft Care and Support Bill.

### **8.3 Supporting and protecting vulnerable people**

- 8.3.1 The Transforming Lives approach will ensure that we continue to use our resources to support the most vulnerable and those most in need of our support in our communities.
- 8.3.2 This approach is predicated on a three tier approach which places early identification and intervention at the very front, therefore working to prevent, where possible, people falling into crisis.
- 8.3.3 This new strategic approach provides us with an opportunity to work together with our partners and communities to ensure that together we are providing local, personalised and self-directed support that is based upon recognition of the strengths and assets within communities and of individuals.

- 8.3.4 Safeguarding will continue to be a key focus of the new approach to social work and social care for adults in Cambridgeshire.

## **9.0 SIGNIFICANT IMPLICATIONS**

- 9.01
- Work to further develop the detail of the Transforming Lives model is currently underway. This work will help to ascertain the implications listed below and will be documented in a comprehensive business case that will be brought for consideration by the relevant Committee at a later date.
  - There are significant implications in the implementation of this work for workforce development and the supporting systems that underpin all of the work within adult social care, including areas such as IT and performance management.

### **9.1 Resource Implications**

- 9.1.1 The following bullet points set out details of significant implications identified by officers:

- The costs and the impact that this work will have on our ability to achieve required savings is currently being developed. A full business case will outline the financial implications of this work.
- One of the overarching aims of this work is to ensure that the organisation is providing the best possible support to the residents of Cambridgeshire and value for money.
- There are likely to be implications for Information and Communications Technologies (ICT) and issues of data ownership that will need to be resolved. Staff will need ICT and systems that will support the new ways of working, that help us to reduce bureaucracy whilst capturing all of the necessary information.
- It is likely that there will be an impact upon human resources as staff will be required to work differently in future. The extent to which it will impact upon human resources is still to be determined, and will become clearer as work is undertaken to further develop this new approach.
- Research has been undertaken into the responses of other local authorities to the financial and demographic pressures facing Adult Social Care services. The Transforming Lives approach has been developed based upon best practice and a working knowledge and understanding of what might provide an effective approach for Cambridgeshire.

### **9.2 Statutory, Risk and Legal Implications**

- 9.2.1 The following bullet points set out details of significant implications identified by officers:

- The proposal will help us to meet our new statutory duties outlined in the Draft Care and Support Bill, and to fulfill our existing statutory duties.
- Further work will be required when the Bill and further guidance has been published to ensure that the approach enables us to meet our organisational and legislative duties.
- The business case, which is currently being developed, will outline any key risks.

### **9.3 Equality and Diversity Implications**

- 9.3.1
- The Transforming Lives approach aims to maintain access to support by the full range of communities in Cambridgeshire.

- The implications for fairness, equality and diversity within the workforce and for service users will be considered throughout the further development of this approach, as Adult Social Care strive for accessibility, fairness, equality and diversity.
- A full Community Impact Assessment (CIA) will be completed as part of the business case, which will be brought back to this Committee for consideration in future.

#### **9.4 Engagement and Consultation Implications**

- 9.4.1
- There has not yet been community engagement, public consultation or the opportunity for members of the public to participate in the development of the Transforming Lives approach.
  - On 15<sup>th</sup> April Cabinet agreed to further engagement with service users, family carers and stakeholders. Following this decision, plans are underway for a number of bespoke events at which we will begin conversations with our stakeholders.
  - There are many stakeholders who will hopefully be closely involved in the development of the Transforming Lives approach including service users and carers, voluntary and community sector organisations, District Councils and other public sector partners, communities and providers of services.
  - Plans are under development to ensure that all stakeholders have the opportunity to participate in the development of this approach.
  - The Transforming Lives approach has been shared with staff, who will be involved in the development of this work. At the three 'Staff Roadshows' held across the county, staff have been supportive of the 'common sense approach'. The Transforming Lives approach has also been shared with Members at a recent Member Seminar which provided an outline of the approach and the opportunity for Members to ask questions. Any feedback gathered at such events is captured and taken into consideration in the development of this work.

#### **9.5 Public Health Implications**

- 9.5.1
- The Transforming Lives approach will seek to have a positive impact upon the health and wellbeing of Cambridgeshire residents. Public Health colleagues will be involved in the development of the work. The emphasis upon prevention of ill-health and prevention of people requiring the notion of 'traditional' social care support is aligned with public health objectives.

Source Documents	Location
'Shaping our Future: Transforming Lives: A new Strategic Approach for Social Work and Social Care in Cambridgeshire'	3 <sup>rd</sup> Floor, C-Wing, Castle Court, Shire Hall, Cambridge
The Draft Care and Support Bill	<a href="https://www.gov.uk/government/publications/draft-care-and-support-bill-published">https://www.gov.uk/government/publications/draft-care-and-support-bill-published</a>
The Social Work Reform Board	<a href="http://www.education.gov.uk/swrb">www.education.gov.uk/swrb</a>
The College of Social Work	<a href="http://www.tcsw.org.uk">www.tcsw.org.uk</a>

## **Appendix One: Transforming Lives Case Study**

### **Background:**

Mr and Mrs Jones are an elderly couple in their eighties who live independently in their own home. Mrs Jones has dementia and is heavily reliant on Mr Jones who provides a high level of support to his wife, including her personal care. Mr Jones is fiercely independent and does not wish to be recognised as his wife's carer. Mr Jones has Chronic Obstructive Pulmonary Disease (COPD) which is deteriorating. Mr and Mrs Jones have a daughter who lives 10 miles away who is in full-time employment and has a young family; she is concerned about her parents. Mr and Mrs Jones are increasingly at risk of crisis of unplanned entry to social care services.

### **What would happen now:**

Mr and Mrs Jones' GP may not be aware of their deteriorating circumstances, and they would not be in any contact with social care services. Mr and Mrs Jones are unknown to social care services and Mr Jones is adamant that he does not want to be recognised as a carer. All would be unaware of these deteriorating circumstances until Mr Jones was admitted to hospital in an unplanned emergency with severe respiratory difficulties through Accident and Emergency. At this point social care services would attempt, without knowing either individual, to resolve as best they can the immediate crisis with services. Mrs Jones is becoming increasingly confused as her circumstances have changed and her main carer has been admitted to hospital. It may be that Mrs Jones is admitted as an emergency to a respite unit who do not know her, which is highly likely to greatly upset her, increase her agitation, confusion and anxiety. When Mr Jones is discharged Mrs Jones will be returned home, with both individuals vulnerable and at risk of further breakdown. It is likely that a package of recurring services would be put into the home which may well not take account of their individual wishes, and may include more unwanted overnight respite.

### **What would happen under the new Transforming Lives approach:**

Tier One: through our approach to strengthening communities and working together social care professionals may well have identified through the local GP practice that Mr and Mrs Jones though coping, are at risk, if anything changes. The social care professional would have offered Mr and Mrs Jones advice about sources of information, local support systems, maybe putting them in touch with other people in similar circumstances, for example other people where one or both of the couple have dementia. This support would have included encouraging them to think about how they would want things to be if a crisis would happen, and would include their daughter in this planning.

Tier Two: the crisis cannot be averted but it can be coped with better. Emergency overnight respite is expensive and disruptive, and a negotiated package of home based support, pre-planned with the whole family, and tailored to Mrs Jones' needs (exploring does she need more support at night or day, what can her daughter do without disrupting her own family life, what in particular increases or decreases Mrs Jones confusion and anxiety?) would be put in place, triggered by the GP alerting social care of Mr Jones hospital admission. This integrated plan aimed at averting further crisis and breakdown would focus on what the critical issues were in helping Mrs Jones stay in her own environment safely and well. An enhancement to this 'tier two' plan would be put in place to support Mr Jones on arrival back home, to help

them regain as much independence as possible, and to take some of the load of caring for Mrs Jones away so that he can recuperate and get better.

Tier Three: instead of being 'assessed for services' a multi-disciplinary team (MDT) would consider who was best placed to work with the couple, and a social care professional and health worker identified to work together. They would help Mr and Mrs Jones, through the identification of an affordable personal budget based on their level of need, to think through what help will be most effective for them.

This conversation will begin with considering what Mr Jones can and still wants to do, what their daughter could do, and also any other contributions from people who are happy to help – e.g. neighbours and friends. Mr Jones may choose to continue to offer his wife personal care, but get some help keeping the house tidy or getting his shopping done. It may involve having someone sit with his wife periodically so that he can get some unbroken rest. It could also include being introduced to The Carer's Trust who run short breaks schemes so that if Mr and Mrs Jones choose to use this at some point in the future Mrs Jones is known as an individual. It will include how the local MDT is going to support both individuals to remain as healthy and independent as they can.

The couple are also offered access to technology to make their lives easier e.g. moving around, and also to help Mr Jones sleep better through some home monitoring technology, because he will know that if his wife starts wandering at night he will be alerted.

The total plan is partly supported by a personal budget. Though Mr and Mrs Jones want to fully control how their budget is spent, they don't want to have a part in the day to day administration – their life is tough enough. The council have therefore arranged for their budget to be managed through a local third sector organisation that will manage all the transactions and make any day to day adjustments that the Jones' want as they live their life

An honest conversation between their daughter and the social care professional will take place about what she can and can't do whilst remaining at work and fully part of her own family life, and also to discuss plans for the future, including the possibility of her gaining power of attorney for her parents.

The social care professional will look for opportunities within the local community that Mr and Mrs Jones could take part in. Mr Jones is supported by the social care professional to join a local carers group, and he joins the local Timebank where he is able to get help with his garden which he has been struggling with. In return, Mr Jones who is a retired teacher is able to offer basic French lessons to local people as part of the Timebank arrangement.

Contingency arrangements are made so that if a further period of hospitalisation is needed for Mr Jones, a pre-planned set of support will be immediately offered to create stability and minimise disruption and which might involve reablement in the first instance.