

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

To: **Adults Committee**

Meeting Date: **1st March 2016**

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

Electoral division(s): **All**

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

Purpose: **The report is presented to provide Members with an
update on the progress made on key areas of the
implementation of the Transforming Lives Model.**

Recommendation: **Members of Committee are asked to:**

- a) Comment on the current progress and ongoing
plans in place for implementation across the
service areas;**
- b) Comment on current progress and ongoing plans
for areas of cross-cutting work that support
implementation of the model in service areas.**

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1.0 BACKGROUND

- 1.1 Transforming Lives is a new strategic approach to social work and social care for adults in Cambridgeshire. It improves outcomes for service users and their families and is closely linked to the move towards a more local and integrated response with key partners. It is expected to provide a significant contribution to delivering savings within the business plan. Transforming Lives will help the County Council to manage demand by building personal and community resilience and will help to develop or maintain skills and independence. Through this approach, expenditure on social care support will be reduced.
- 1.2 As explained in previous reports, the Transforming Lives model is predicated on three different 'tiers' of working, outlined in the diagram below:



- 1.3 Over the past 18 months, the new ways of working have been rolled out to the Learning Disability Partnership and Physical Disability Services. The focus for these services is to now ensure that it is embedded in practice and meets quality assurance standards. For Older People and Adult Mental Health services, a significant amount of ground-work has been completed to prepare the way for the new approach. The focus has been on putting in place changes that help manage the demand so that the teams have the capacity to change the way they work. There is also evidence of evolutionary change through case studies provided by the Older People's Locality Teams. Work is taking place to refocus Re-ablement and Occupational Therapy services on promoting independence and managing demand through interventions which are in line with Transforming Lives principles.

2.0 OLDER PEOPLE'S SERVICES

- 2.1 The work to develop an Adult Early Help service, community resilience and building links with the CPFT's Neighbourhood Teams are all pivotal to the implementation of Transforming Lives in Older People's Services and should not be considered as separate pieces of work, but pieces of the same jigsaw.
- 2.2 Work that targets prevention and manages demand is critical to the success of Transforming Lives for Older Peoples' services. Being able to identify people who may become vulnerable is key to facilitating support that will delay the requirement for the more intense, complex support provided by the County Council's services. Opportunities that allow Older Peoples' Services to work closely with the NHS, District Councils and other providers in the community will help to identify need earlier.
- 2.3 In order for staff in Older People's Services to fully adopt ways of working that reflect a Transforming Lives approach; a number of changes are needed to reduce the number of cases coming through to the Locality Teams. This will in turn create the time and opportunity to work in a more flexible and creative way with people. To facilitate this, the Transforming Lives Project Board approved an implementation plan that set out tasks that needed to be completed to allow staff more capacity to work in a Transforming Lives way from April 2016. Good progress has been made as follows:
 - i. New job descriptions and pay grades have been agreed and are now in place;
 - ii. Ways of mapping geographical patches and matching these to the NHS Neighbourhood Teams are being considered;
 - iii. A Community Navigator pilot in Fenland and South Cambridgeshire and Cambridge City Teams (where a community navigator is based in a team) has started and is in the process of being evaluated;
 - iv. Performance indicators have been revised and associated guidance related to completion of assessments and reviews.
 - v. A Leadership programme has been developed and delivered for Team Managers to use to help identify skill gaps and development needs in line with the new job descriptions.
 - vi. Voluntary sector contracts have been revised to reflect Transforming Lives requirements.
- 2.4 Other linked work has also been completed:
 - i. The Adult Integrated System (AIS) IT system has been rolled out across the Discharge Planning North and South Teams and the Older People's Locality Teams in Huntingdonshire, East Cambridgeshire and Fenland and will start for Cambridge City and South Cambridgeshire at the end of February 2016. AIS brings together the recording of assessments, reviews and case work onto one system making them more easily accessible. In addition, with mobile technology, it will allow staff to access and work with case files without having to be at

- a fixed PC, enabling staff to use their time more productively and reduce unnecessary travelling.
- ii. Additional capacity was commissioned to tackle back logs in assessments and reviews in the South Cambridgeshire and Cambridge City team;
 - iii. A consistent approach to the monitoring of risk/needs of people waiting for action and/or care has been put in place;
 - iv. Cambridgeshire Fire and Rescue Service has worked with the County Council and will be carrying out home safety checks for people who are vulnerable and those already supported by social care;
 - v. Libraries are offering information and advice and 'early help drop ins' are being piloted;
 - vi. Named leads identified in Locality Teams are acting as links to NHS Neighbourhood Teams;
 - vii. Training in proportionate assessment for front line staff has been delivered;
 - viii. Information and advice and guidance arrangements are well established and successfully diverting possible demand.
 - ix. Case studies are being collated that show ways in which front line managers and staff are adopting a Transforming Lives approach.

All of the above activity represents building blocks upon which Older People's services can move forward to implement Transforming Lives from April 2016.

2.5 The diagram at Appendix A has been developed to show how Transforming Lives can work in practice for older people. It shows:

- I. What we hope to achieve with the people we support through each of the three tiers (left hand side)
- II. Examples of how we will respond to people through each of the three tiers (right hand boxes)
- III. The interaction of the three tiers. The three circles represent how the tiers may be used together where responses from more than one tier would be beneficial for the person being supported.

Similar diagrams will be developed for the other service user groups with examples that would be recognised in those services.

3.0 ADULT EARLY HELP PROJECT

3.1 Currently the County Council operates a linear, process-driven approach, 'pulling' people towards social care. The person can often end up speaking to a number of professionals before they reach the solution they need. For those that cannot be resolved, regardless of the enquiry, all contacts are then passed onto the Locality Duty Teams and then potentially onto the Long Term Care Teams. This can mean a period of waiting for a social care assessment which they are entitled to but this may delay putting more immediate solutions in place. All this can be frustrating for the customer and wastes precious resources.

3.2 Current approach



- **Linear, process-driven approach ‘pulling’ people towards social care;**
- **Multiple hand-offs;**
- **Approximately 25 per cent of contacts are resolved by the Customer Services Advisers through the provision of information and advice;**
- **Same route for all types of contact**

3.3 The new Adult Early Help team will change the County Council’s first contact process to provide a clear early help offer. The aim of the team will be to reduce the number of referrals to social work teams and as a result, the number of people being assessed for more costly care packages. It will improve customer experience and older and vulnerable people’s health and wellbeing. The new team will play an important part in contributing to the significant savings required over the next five years and set out in the County Council’s Business Plan.

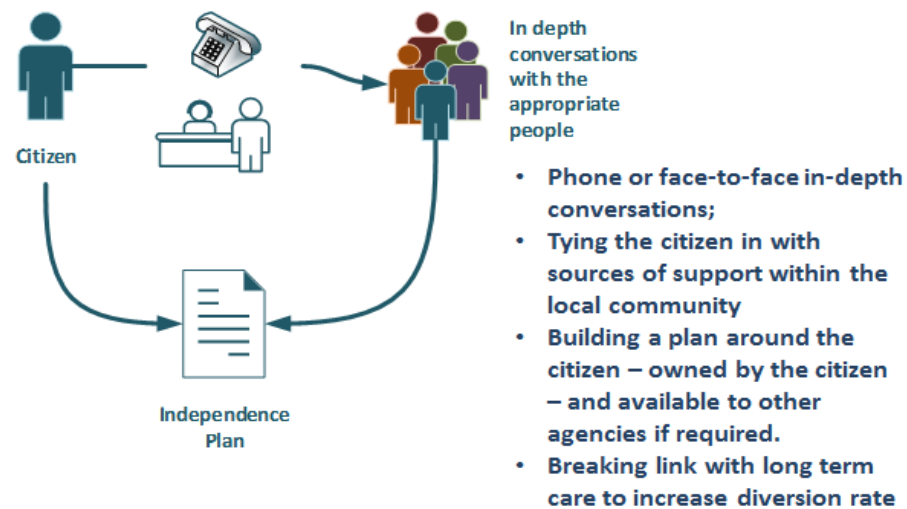
3.4 The early help pathway will begin with the Customer Service Advisers who will provide information, advice and signposting appropriate to their role, recognising that they will not be qualified advisers e.g. financial advisers. People who require deeper discussion and input to help them to maintain or regain their independence will be passed to the Adult Early Help team. This team will support and advise older people, people with a physical disability and/or sensory impairment, who are beginning to require support, but who do not yet have eligible needs for an ongoing care package. Where it is apparent that tier three statutory support is needed, the case will be dealt with by the Social Care teams.

3.5 The Adult Early Help team will provide expert advice over the phone, via home visits or booked appointments at community buildings. They will help people to access local universal and voluntary sector services, advise people on ways in which they and their carers can organise help for themselves, signpost them to other sources of information and seek to resolve issues without the need for a formal assessment or care plan. The output of this intervention could result in the development of a Community Action Plan which will set out what the individual will do, what statutory, community and voluntary services will help with, and how friends and families will be involved. As well as being held by the individual the Community Action Plan will sit within AIS¹, providing clear background to the Adult Social Care teams if the individual presents with a social care need at a later stage.

¹ AIS is the Adult Integrated System. This is the client recording database for Adult Social Care

3.6

New approach



3.7 Initially, a new Team Manager will be appointed to lead the new Early Help Team. Existing staff have volunteered to be seconded to the Team to test the concept and develop our understanding of the skills and knowledge needed to create solutions from the first contact and to determine the nature of the strengthened role for the Customer Service Advisers. It is expected that other colleagues such as Finance and Benefits Advisors, Welfare Benefits, Occupational Therapists and the Voluntary and Community Sector will also join the team. It is anticipated that some of the new team will be established and working in this way by April 2016. However, the implementation will be phased, the details of which are currently being finalised.

4.0 LINKS WITH COMMUNITY RESILIENCE WORK

4.1 Work has started to raise awareness of the challenge being faced by the County Council and to explore ways that the community can help as part of the Budget Challenge Campaign. A separate report will be presented to Adults Committee on the detailed work around building community resilience. However, it is important to recognise the links with this programme of work and how it is pivotal to the success of Transforming Lives.

4.2 Building community capacity will be integral to the implementation of Transforming Lives, as we work with individuals and their families to build on their strengths and make good use of community support and networks with a view to maintaining independence. Key to Transforming Lives is the learning from the three pilot learning sites (Godmanchester, Little Downham and Cherry Hinton in Cambridge) aimed at understanding how capacity can be used to support this approach. Having Councillors as Community Connectors is an extremely valuable approach to connecting with the community in order to build the community resilience required to support Transforming Lives.

5.0 PHYSICAL DISABILITY AND LEARNING DISABILITY PARTNERSHIP SERVICES

- 5.1 All teams across the Learning Disability Partnership (LDP) and Physical Disability Team (PD) are now working in a Transforming Lives way. They are having 'transforming lives' conversations with service users and carers. They are using reflective practice to discuss cases with colleagues and managers. This is influencing how they think about responding to service users and meeting needs in different ways. The Teams are getting to know their local communities better by working within a particular geographical area. This evolutionary approach is working well as the teams deepen their understanding and experience in this new way of working.
- 5.2 Teams are working to become part of the community. They are not as office-based as before and are using mobile technology to support them to work out of libraries or GP surgeries. Greater locality based working is providing a better understanding of resources available in the community and facilitating links to these resources and more flexible and creative solutions being considered. For example, one of the teams has set up a drop-in at Bar Hill Tesco's where people can get information and advice and help with their post amongst other things. A link has also been made with Tesco's staff who will support people to do their shopping. Previously a provider would have been commissioned to provide this type of support. The teams continue to develop and embed the model in day to day practice with staff sharing information and different and more creative ways of offering support.
- 5.3 The Team Manager of the East Cambridgeshire LDP Team, who has led the innovation site for the LDP, has recently reflected on the changes that they have introduced. Supporting staff to work differently, focusing on conversations that build on people's strengths and developing new relationships in the local community are all key. The article capturing these reflections is attached at Appendix B.
- 5.4 The East Cambridgeshire Learning Disability Partnership Team has been collecting service user feedback and the results for a four week period in November 2015 were as follows:
- Out of 21 people:
- I. 21 agreed that they were seen quickly;
 - II. 21 said that they were listened to;
 - III. 16 said that things were better for them now.
- 5.5 The focus for the LDP and PD services will now be to ensure that the new way of working is embedded effectively to a high standard and delivers positive outcomes for people. To support this, a new Quality Assurance Framework is in the process of being introduced as described in Section 8.3 below. An evaluation is also about to start to ascertain just what difference this new way of working has made and

is described in Section 7 below.

6.0 SAFEGUARDING ADULTS AND THE Multi-agency Safeguarding Hub (MASH)

- 6.1 The Safeguarding Adult project was set up to implement the safeguarding elements of the Care Act 2014, which sets out a clear legal framework for how local authorities and other parts of the system should collaborate to protect adults at risk of abuse or neglect. The Care Act guidance also requires a more person-centred approach to safeguarding, in line with the government initiative 'Making Safeguarding Personal'.
- 6.2 The project is also overseeing the increased involvement of adult social care in the MASH. The MASH brings together Cambridgeshire children's social care, the Police, Probation, the Fire Service, NHS organisations, key voluntary sector organisations, Peterborough City Council and currently one representative from the Council's adult social care services in a collaborative working arrangement, where information can be quickly and easily shared (subject to information sharing agreements) and decisions made on how best to approach specific safeguarding situations and which agency should take the lead. It enhances timely, effective and comprehensive communication between the partners through co-location or integration and greater partnership working.
- 6.3 In addition to the benefits of closer partnership working, the developments in the MASH will mean that inappropriate safeguarding referrals can be diverted away from the Adult Social Care Teams. Where there is a safeguarding issue, the staff in the MASH will gather information on a multi-agency basis to inform the response. This will ensure that different agencies work together to prevent abuse and neglect and stop it quickly when it happens.
- 6.4 The work also involves the redesign of the safeguarding process so that it is in line with Transforming Lives and 'Making Safeguarding Personal'. This will lead to a more person centred approach and a reduction in the demands on the Locality and Discharge Planning Teams.
- 6.5 Staff in the MASH are to be seconded from existing staff who are experienced in leading safeguarding investigations. They will be seconded initially for 12 months with the potential to extend this to 24 months. The use of time limited secondments will ensure that the staff in the MASH will have had recent operational experience and will support ongoing professional development.
- 6.6 The MASH Manager, the four MASH Safeguarding leads and the administrator have been appointed and will take up their posts by the middle of March. From the 1st April, all safeguarding concerns will be referred to the MASH team for triage and to initiate immediate action if required. Situations that require a safeguarding enquiry will be passed on to the Safeguarding Lead of the relevant service.

7.0 MENTAL HEALTH SERVICES WITHIN CPFT

- 7.1 The County Council's assessment and support planning and Mental Health Act duties for adults of working age and older people are delivered under a Section 75 partnership agreement with Cambridgeshire and Peterborough NHS Foundation Trust (CPFT). The Trust is a provider, with the exception of the IAPT services², of secondary care based services. This means that its service users are primarily people with severe and enduring mental health illness requiring joined up seamless medical intervention and social care support to maximise life chances and independence. The County Council also commissions support for people with mental health needs from the voluntary and community sector.
- 7.2 CPFT is represented on the Transforming Lives Project and Programme Boards and representatives of the County Council sit on CPFT's Care Act Programme Board which encompasses the Transforming Lives approach. The Transforming Lives approach is being delivered through CPFT's Building Recovery & Resilience, Supporting Self-Management and Wellbeing Strategy which was signed off by the Trust Board on 27th January 2016 and CPFT's Care Act Programme Board.
- 7.3 The Care Act Manual based on the County Council's Adult Social Care Policy is being finalised and will be launched at a Social Care Forum on 10th March 2016:

Further progress has been made as follows:

- i) Development of practice standards, using the County Council's 'T model' and Quality Assurance Framework;
- ii) Staff have attended Transforming Lives training over last year;
- iii) Development of Re-ablement/recovery pathways for Adults of working age in the Trust and a Mental Health Re-ablement pilot has started in Huntingdon and Fenland area;
- iv) The CCG have also commissioned a team of Recovery Coaches and an Enhanced Primary Care Service to improve pathways for people out of secondary services;
- v) Work to increase the use of Re-ablement for older people with mental health needs is underway to reduce or delay the use of care homes;
- vi) Extensive work to improve support to Carers is being tracked by the Trust Board in its key performance indicators. This is led by the two CPFT Governors who are carers' representatives;
- vii) Increased profile in CPFT of volunteering including the Volunteering Strategy due to be presented for approval at the CPFT Board in March 2016.

² Improving Access to Psychological Services, a primary care based service

7.4 Work over the next financial year (2016 to 2017) includes:

- i) Review of the assessment and support (care) planning which sits within the umbrella of the Care Programme Approach to demonstrate a “strengths-based” approach rather than a ‘deficit approach’;
- ii) Strengthening the provision of information and advice;
- iii) Development of mental health Re-ablement pathways within CPFT and aligned to the Recovery Coaches and Enhanced Primary Care Services;
- iv) Securing funding to put the Recovery College onto a sustainable financial footing. This is not a commissioned service and is working with Anglia Ruskin University's Third Sector Futures consultancy to secure funding from a wide base of sources;
- v) Continuing the work to support carers and to widen access to the Recovery College courses to carers;
- vi) To develop a more systematic approach to volunteering and employment pathways.

Progress on the above is tracked through the Mental Health Governance Board Action Plan.

8.0 MONITORING AND EVALUATION

8.1 Building on the learning from the innovation sites, an approach to evaluation and ongoing monitoring is being developed to capture the impact of Transforming Lives approach. Evaluation will seek to capture outcomes for people, what has changed due to the different ways of working and the savings attributable to these changes. A methodology for evaluation and monitoring will be put in place for Learning Disability Partnership and Physical Disability Services and will then be adapted for Older People's services.

8.2 The key components of the approach are:

- i) Overall monitoring of the differences in costs from one financial period to the next as a result of using the Transforming Lives method at a service level;
- ii) Monitoring of the activity surrounding services who are using the Transforming Lives approach so that we can understand how many conversations or reviews have been undertaken, as well as the financial change resulting from these;
- iii) Outcomes for Service users through user survey and reviewing case files.

The approach will be supplemented by the updated overall Quality Assurance processes as well as developments to modify the performance indicators used within Adult Social Care so that they better reflect the Transforming Lives approach. The development of Care and Support Plans will be subject to particular focus in order to

identify the extent to which Transforming Lives principles have been adopted.

- 8.3 To facilitate the monitoring of the roll-out of Transforming Lives, staff who are working in a Transforming Lives way are now recording the level and type of 'conversation' they are having with people as a contact. It is expected that the number of 'Transforming Lives contacts' will increase as the teams change the way they are working. Financial commitment is monitored regularly using data about the number of assessments and reviews that have taken place and the associated 'variance' of the commitment, which compares the commitment prior to the period or event to the commitment afterwards. This means it is possible to describe someone's support before and after a review, including costs, and describe why that package has been changed and how the new package meets needs and demonstrates Transforming Lives working.
- 8.4 The experience of the innovation site in East Cambridgeshire Learning Disability Partnership is being used to develop the methodology for evaluating the financial impact of Transforming Lives. The Team's spending trends over a two year period are in the process of being compared in detail to those of another team to seek to isolate the impact that Transforming Lives has had.
- 8.5 Service user feedback will also be analysed. Focus groups will be held with service users and their families who have been supported in a Transforming Lives way to provide a more accurate understanding of a service user's experience and the overall outcomes and impacts of Transforming Lives support.
- 8.6 By combining all of the elements outlined above, a richer picture of the impact of Transforming Lives will be developed at both a service level and at an individual level. As an illustration, we have represented the Case Studies from the December committee meeting (see Appendix C) to illustrate what additional information would be available as a result:
- i) Betty (78) Savings of £23,839.04 per annum as a result of the removal of the live in carer, and the 2 hour break cover.
 - ii) Miss S (Physical Disability) personal budget of £8,300 reduced by £5,300 per annum to £3,000.
 - iii) Miss D (Learning Disability) Avoided cost of £10,000 by using transitional support rather than respite.
- 8.7 The next steps for the project are to establish service wide monitoring arrangements and, ensure readiness of the system to capture all necessary data from April 2016 onwards and to agree reporting arrangements for evaluation information.
- 8.0 PLANNED CROSS CUTTING WORK TO SUPPORT THE IMPLEMENTATION OF THE TRANSFORMING LIVES MODEL**
- 8.1 Communication and information

8.1.1 New, more extensive, web content has been live since 1 April 2015 on the County Council's website. This replaces the former 'Your Life Your Choice' material and continues to be developed. Feedback on the content is currently being gathered from County Council staff and external partners. The Care and Support directory continues to evolve and includes more services for adults and older people. Hard copy materials and downloadable fact sheets are available. The Accessibility work-stream is looking at how the County Council meets its obligations to be compliant with NHS standards by July 2016 and making information generally more accessible. Information standards are being developed to ensure consistent practice.

8.1.2 There is joint working with Peterborough County Council, the Clinical Commissioning Group and the VCS on an 'information hub'. This is a portal that will search and bring together services from all parties in one place. There is also collaboration with library services to train staff as the 'public face' of care and support information as mentioned under the community resilience section.

8.2 Workforce Development

8.2.1 The programme of workforce development and training opportunities developed to support the new ways of working is being complemented by a leadership programme for managers. This programme has been designed to ensure that operational managers have the skills, knowledge and tools to support their teams through the implementation of Transforming Lives. It reinforces key areas of practice required to deliver the Transforming Lives model including strengths based conversations, reflective supervision and systemic practice and links this with leading and managing change.

8.3 Practice Standards and Quality Assurance

8.3.1 Work continues on the development of a new set of practice standards and implementation of a new quality assurance framework to shape and assure and practice in light of Transforming Lives. Frontline managers and staff have been fully engaged and have contributed to these developments, which will promote ownership and result in the new ways of working being more easily embedded. A series of workshops with managers and seniors has taken place to develop the standards and all teams have had an overview of the quality assurance framework and an opportunity to influence its development.

8.3.2 The direction/ agreed model for the standards is to be shaped by:

- I. The Transforming Lives strategy
- II. Requirements of the Care Act (2014) and other key legislation
- III. What frontline staff feel to be important
- IV. Ensuring we make best use of resources in the context of the five year business planning process and finally
- V. The need to take a more creative approach in terms of presentation and making the standards/model more "visual" and easily accessible.

- 8.3.3 The use of **T** and simple branding is to aide communication, marketing and promote the use of the standards which would become known over time as the **T** standards. The strap line “**T** for Transforming Lives, **T** for Thinking Differently” is intended to forge the clear link between strategy, practice and individual thought/ actions. The plan is to make this prominent on Cam web and AIS so that frontline staff are encouraged to access it more frequently and it can be used as a more interactive tool in supervision. Clustering standards into various blocks should make it easier to use; staff simply press on the topic area and the standards are revealed. The standards will be formally launched March 2016.
- 8.3.4 The case file audit review tool kit, a part of the Quality Assurance Framework, has been agreed and distributed to all adult’s teams and consists of:
- I. Case file review guidance and;
 - II. A set of grading prompt sheets covering recording, assessment, support planning, review and safeguarding.

All teams will be trialling the documentation and process through February and March, support will be offered to all teams throughout February and the reporting cycle will commence April 2016.

9.0 ALIGNMENT WITH CORPORATE PRIORITIES

9.1 Developing the local economy for the benefit of all

- 9.1.1 Transforming Lives is based on recognising the strengths and assets of individuals and of those within our communities. It is therefore a model which has progression at its core.
- 9.1.2 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 and person-centred, to ensure that the individual is supported to achieve their aspirations.

9.2 Helping people live healthy and independent lives

- 9.2.1 Transforming Lives aims to encourage people to live healthy, fulfilled, social engaged and independent lives. It is an increasingly proactive, preventative and personalised way of delivering services to adults and aims to enable the residents of Cambridgeshire to exert choice and control over their lives and to support family carers.
- 9.2.2 Transforming Lives proposes that a universal offer at ‘tier one’ is available within communities, which is a key facet of this model and a key priority for Transforming Lives is ‘strong, integrated community capacity’. Transforming Lives links closely with the strand of the new Council Operating Model work on Community Resilience. The community resilience work is focusing on strengthening communities and one element of this proposes that elected members could play a

key role in the leadership of strong independent communities and the development of community capacity.

- 9.2.3 The Transforming Lives approach recognises the power of strong, locally-led communities and will support local communities to come together to consider and further develop the support on offer.
- 9.2.4 The strengths based approach which lies at the heart of the Transforming Lives model will ensure that individuals to consider their strengths and assets and will encourage them to participate in their local community.
- 9.2.5 Transforming Lives recognises the huge contributions of family carers and that they are often best placed to support individuals to achieve their aspirations.

9.3 Supporting and protecting vulnerable people

- 9.3.1 The Transforming Lives approach will better ensure that we continue to use our resources to support the most vulnerable and those most in need of our support in our communities.
- 9.3.2 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. The three tier approach also aims to prevent, reduce or delay people from requiring statutory support from adult social care services.
- 9.3.3 This new strategic approach provides an opportunity to work together with partners and communities to ensure that together we are providing local, personalised and self-directed support that is based on the recognition of the strengths and assets within communities and of individuals.
- 9.3.4 Safeguarding will continue to be a key focus of the new approach to social work and social care for adults in Cambridgeshire.

10.0 SIGNIFICANT IMPLICATIONS

- 10.1 Work to further develop the detail of the Transforming Lives model is currently underway. There are significant implications in the implementation of this work for workforce development and the supporting systems that underpin all of the work of adult social care, including areas such as ICT and management information.

10.2 Resource Implications

- 10.2.1 The following bullet points set out details of significant implications identified by officers:
 - i. 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.
 - ii. Staff require ICT and systems that will support the new ways of

working, that help us to reduce bureaucracy whilst capturing and sharing all of the necessary information. This has informed the recent tender exercise.

- iii. 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 on best practice and a working knowledge and understanding of what might provide an effective approach for Cambridgeshire.

10.2.2 The implementation of the Transforming Lives approach will contribute to the delivery of the business planning savings proposals by helping to prevent, delay and reduce the need for care and support. Community based interventions focused on prevention and targeted short term activities to increase independence and reduce ongoing packages will be particularly important.

10.3 **Statutory, Risk and Legal Implication**

10.3.1 The Transforming Lives approach will help us to meet our statutory duties outlined in the Care Act 2014.

10.4 **Equality and Diversity**

10.4.1 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 are being considered throughout the development of this approach.

10.5 **Engagement and Consultation Arrangements**

10.5.1 Consultation has been on an ongoing basis with staff, partners and stakeholders, service users and carers, to provide the opportunity for them to contribute to the design and development of the Transforming Lives model.

10.5.2 In 2014, three events were held for stakeholders including voluntary and community sector organisations, District Councils, Health and other public sector partners. These were well attended and provided the opportunity to explore the model with stakeholders, and begin to develop a joint approach to taking this work forward. There has been ongoing dialogue with the voluntary and community sector and other partners.

10.5.3 Providers of services have also had the opportunity to hear about the Transforming Lives model, and conversations with providers will continue as we further develop and define this approach.

10.5.4 Consultation with service users and carers has taken place, primarily through the Adult Social Care partnership boards to inform stakeholders of the approach and to ensure that they have the opportunity at all future meetings to contribute to the development of key elements of the Transforming Lives model.

10.5.5 The Transforming Lives approach has been widely shared with staff

who have been involved in the development of this work. Mechanisms are in place across the service areas to regularly discuss the implementation of Transforming Lives and gather any feedback.

- 10.5.6 Further planning is underway to ensure that all stakeholders have sufficient opportunity to participate in the continual development of this approach.

10.6 Public Health Implications

- 10.6.1 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 on prevention of ill-health and preventing, reducing or delaying people's need for statutory social care support is aligned with public health objectives.

10.7 Localism and Local Member Involvement

- 10.7.1 Localism is a key feature of the Transforming Lives Model and the involvement of all Members is essential if community capacity is to be developed to support the health and wellbeing of local people. This work is being developed under the 'Community Resilience' cross-cutting project.

Source Documents	Location
Supporting and background documents to this report include:	
'Shaping our Future: Transforming Lives: A new Strategic Approach for Social Work and Social Care in Cambridgeshire'	<i>These documents are held with Mike Hay and are available from 2nd Floor, Octagon, Shire Hall, Cambridge.</i>
Transforming Lives: Approach to Tier One	
Transforming Lives: Approach to Tier Two	
The Care Act	http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted
The Social Work Reform Board	www.education.gov.uk/s wrb