

**PROPOSED CHANGES TO THE SUPPORT PLANNING SECTION OF THE CARE ACT POLICY FRAMEWORK**

*To:* **Adults Committee**

*Meeting Date:* **1 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:* **To provide feedback on the consultation on proposed changes to the Support Planning section of the Care Act Policy Framework for adults with eligible social care needs and to present the revised Support Planning section for approval by the Adults Committee.**

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

**a) Note the feedback received through the consultation on the proposed changes to the section on the Support Planning section of the Care Act Policy Framework.**

**b) Approve the revised Support Planning section of the Care Act Policy Framework (Appendix C), the changes to which are highlighted in the table at 4.1 in the report.**

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## **1.0 BACKGROUND**

- 1.1 The Care Act 2014 created one main legal framework governing Adult Social Care. It replaced most of the previous Adult Social Care legislation, and incorporates good practice into a single statute focused on individuals, families, their wellbeing and what they wish to achieve in their lives. In March 2015, the Adults Committee approved the Care Act Policy Framework for Adult Social Care that had been developed to ensure that the Council had set out clearly how it was responding to the requirements of the Care Act 2014.
- 1.2 Since then, work has continued on the implementation of Transforming Lives and on the business planning proposals for the next five years. It is acknowledged that changes to practice are required to implement the Transforming Lives approach and the business planning proposals, in particular the practice around support planning. In this context, it is important to provide staff with a clear, agreed policy within which they will work, knowing that the policy has been formally adopted by the Council through approval by the Adults Committee. The policy will continue to provide clarity on how the Council will respond to meeting assessed eligible needs for existing and potential service users and family carers.

## **2.0 CONSULTATION ON THE SUPPORT PLANNING POLICY**

- 2.1 In order to ensure the policy framework is clear, concise and fit for purpose for both staff and the public, the Council undertook a public consultation on changes to the support planning policy that will be used when planning how to meet assessed, eligible needs. This report covers the consultation activity that took place from December 2015 to February 2016.
- 2.2 There were four methods used in the consultation – a questionnaire, discussion at formal partnership boards, focus groups with service users, and focus groups with voluntary sector providers. The questionnaire was tightly focused on the specific changes that are proposed for the support planning policy, whereas the focus groups and other discussions gave opportunity for people to give more general views. The consultation was widely promoted through all relevant networks, and engagement began before the questionnaire officially opened.
- 2.3 The questionnaire was open between 15 January 2016 and 14 February 2016, a period of just over 30 days. During that time, people could respond to the questionnaire online or on paper. An Easy Read version was also available. All of the materials were available on the Council's website. Paper copies were printed and distributed where particular organisations requested it. The questionnaire was advertised on the Council's website and promoted through emails to voluntary organisations, encouraging them to share with people using their services. In total there were 78 responses, 33 responses on paper which were posted and 45 responses online. Views were received from service users and carers of all ages. A more detailed report on the feedback from the questionnaire is attached at Appendix A and the complete results of the consultation questionnaire are attached at Appendix B.
- 2.4 Many respondents expected to be personally affected by the decision about

the support planning policy because they are service users or carers. In total, 47% of respondents (37) were service users and/or carers. The result of the decision on the policy was expected to make a significant difference to the lives of 30 people (81%) who responded as service users or carers.

- 2.5 The questionnaire asked people whether they agreed or disagreed with seven key proposals. The overview information, the proposals and the examples provided in the questionnaire and the extent to which people agreed or disagreed with the proposals are set out in the table below.

### **Personal budgets**

**Overview:** The Council provides support by means of a personal budget, which is the amount available to fund services agreed in the support plan that meet eligible needs identified following a social care assessment. The personal budget is made up of contributions from the Council and from the person themselves, with the person's contribution being determined by a financial assessment. In the majority of cases there are contributions from both parties but in a few cases the Council contributes 100% and in some cases the person contributes 100%. Services can be arranged by the Council or by the person themselves, using money paid to them as a Direct Payment, subject to the agreement of the Council.

**Proposal 1:** The funding available for the personal budget will be based on the most cost-effective option for meeting eligible needs identified following assessment and delivering positive outcomes, even if the person wishes to use their personal budget in a different way.

**Example A:** Swimming and gym membership both meet an eligible need for physical exercise. Swimming is cheaper than private gym membership. The person would prefer gym membership, because they are only a novice swimmer. Adult swimming lessons are available from the swimming pool to build confidence and improve technique. The personal budget could be set to include a 10 week course of lessons and then be reduced to reflect that this additional level of support was no longer needed. Overall this would still be more cost-effective than gym membership and the person would have improved their swimming and would be more confident in the water. The personal budget would therefore be based on the option of swimming including an allocation for the 10 weeks swimming lessons, rather than gym membership.

**Example B:** Following assessment, it is agreed that a 24 hour, seven day a week service is required to meet a person's eligible needs. Two organisations that have experience and skills in meeting the needs identified in the assessment are able to offer a place to the person. The service offer from Organisation A focuses on meeting the specific eligible needs of the person in the most cost effective way possible. The service offer from Organisation B is more expensive due to the type of activities that they use to meet needs for example horse riding rather than walking for physical exercise. Although the person and their family would prefer Organisation B, the Council can confirm Organisation A as the way that they would meet the person's needs and confirm the personal budget as being the cost of this service.

Question	Strongly agree or agree	Strongly disagree or disagree	Don't know or unsure
Q1 To what extent do you agree that the personal budget should be based on the most cost effective option for meeting eligible needs identified following a social care assessment?	35 (45%)	36 (46%)	7 (9%)

### **Recognising the contribution of support offered by family, friends and the wider community**

**Overview:** The range of informal community support services being offered is enormous, immeasurable and often undervalued. It tends not to be centred on single issues, but responds to all needs. Support from family carers, for example help with getting up in the morning and going to bed at night is recognised in support plans. Where this support is meeting eligible needs, the funding from the Council is focused on meeting other eligible needs. However, the support from friends and neighbours is not always included in the same way, for example, shopping or sharing a meal with the person. Likewise, if the person regularly visits the local pub when they have cheap lunches for pensioners, this type of community support is not routinely reflected in the support plan, but could be meeting an eligible need.

**Proposal 2:** The Council proposes to be more explicit in including the contributions of the person's family, friends and the community around them in the support planning process. Where this support is meeting eligible needs, the personal budget allocation will be based on any eligible needs that are not being met.

**For example:** If someone has an eligible need for support with preparing a main meal each day of the week and their neighbour provides them with a main meal three times a week, the personal budget allocation would include support for meal preparation on four days of the week.

Question	Strongly agree or agree	Strongly disagree or disagree	Don't know or unsure
Q2 Do you agree that support from family, friends and the wider community should be fully recognised and taken into account when developing support plans to meet eligible needs?	36 (47%)	38 (49%)	3 (4%)

### **Managing risk and keeping safe**

**Overview:** Part of an ordinary life is managing risk independently to help inform your own choices. Support plans are designed to set out what help someone needs to live an ordinary life, including any help to manage risks.

Avoiding all risks tends to restrict people's freedom and choice, so ordinarily people will balance the risks they take with what they want to do and how they want to live their lives.

**Proposal 3:** Currently support plans work to minimise risks as much as possible. As well as including interventions to reduce the possibility of the risk, they often include funding that would be needed if a risk arose. This is particularly a feature of support plans where people may present behaviours that are challenging, but most of the time these behaviours are not present. We propose to take a different approach that focuses on interventions to reduce the risk, with a clear contingency plan that can be activated if the risk emerges. In this approach, the Council would be promoting greater independence for people and tailoring responses more specifically around situations where the person needs additional support.

**Example A:** A person's package was increased by 5 hours to provide a support worker to accompany them on shopping trips each week because there had been an incident in a supermarket to which the police were called. The increased package was put in to manage the risks associated with shopping. The person always shops in the same shop and is recognised by the staff, so instead of continuing with the increase in staffing the shop manager will be approached, with the agreement of the person, to see if the shop staff could offer some assistance, if the person is struggling to cope whilst in the shop.

**Example B:** A person who has a support worker visiting three times a week to help manage money and to shop cannot read and becomes very anxious if official looking letters arrive through the post. If this happens on the days when the support worker is not expected, this can lead to angry outbursts with the person breaking items in their home and walking down the street threatening people. Instead of providing more staff or the person moving into accommodation with staff available every day, the local social care team work with the person to agree that he can take any letter either to their office or to the local library for someone to read the letter with him.

Question	Strongly agree or agree	Strongly disagree or disagree	Don't know or unsure
Q3 Do you agree that the Council should look for different ways to manage risk by focusing on reducing risk and using contingency plans to respond to risks whilst promoting independence?	40 (54%)	26 (35%)	8 (11%)

### Life skills

**Overview:** Life skills development provides specific activities that enhance the ability of a person to live as independently as possible. Skill development activities can include training in budgeting and financial management, use of public transport and general mobility, daily living skills like washing and dressing, self-esteem and assertiveness, home and community safety, and use of assistive technologies.

**Proposal 4:** The Council proposes to increase the focus on the development of skills using short-term interventions to achieve progress towards further independence. Expectations of progress and the timeframe will be clear in support plans and linked to a reduction in personal budget if goals are achieved. If it is not possible for a person to develop the skills with the time limited intervention, an ongoing level of support may be agreed but this would be expected to be a lower level of support than the intensive short term support because it will be about maintaining a level of skill rather than developing a new skill.

**Example:** Someone has an identified need that will be met by attending an activity in the nearest town. The village where they live has a bus service that the person is not confident with using. Their care package currently contains support to travel to the activity. Instead, a short-term package of travel training would be put in to support the person to be more confident and able to use the bus independently. After an agreed period of training, the support for travel would be removed as the person is now more independent and able to travel on their own.

Question	Strongly agree or agree	Strongly disagree or disagree	Don't know or unsure
Q4 To what extent do you agree that the Council should focus short-term interventions on developing skill, with the funding allocated for this skills development being removed at the end of the agreed timeframe?	41 (56%)	23 (32%)	9 (12%)

**Group and 1:1 Support**

**Overview:** Sometimes it is necessary to provide 1:1 support for a person to meet an eligible need. However, there will be people with eligible needs where this level of support is not required to meet those needs. In these circumstances, it is important for the Council to make best use of group situations, including group activities and group living arrangements, to meet people's needs in a cost-effective way.

**Proposal 5:** The Council will only fund 1:1 support where there is a specific requirement for this to meet an eligible need or where it is necessary to develop specific skills through an agreed short-term intervention or where it provides a cost-effective way of preventing the need for more intensive long term services. At all other times, where group or shared support can meet the eligible need, this option will be reflected when drawing up the support plan. This approach will apply to people using Direct Payments and people where the Council arranges the services.

**For example:** A person with disabilities has a Direct Payment and wants to attend art activities. There is a regular group that they can attend at a local college. The person does not need 1:1 support to attend and take part in this group and so the cost of the group activity would be reflected in their

personal budget.

Question	Strongly agree or agree	Strongly disagree or disagree	Don't know or unsure
Q5 To what extent do you agree that the Council will only provide 1:1 support in the circumstances described in the proposal <sup>1</sup> , and will use group activities or shared support to meet other eligible needs?	54 (74%)	9 (12%)	10 (14%)

**Making the most out of 24/7 services**

**Overview:** Some people require services that are 24 hours a day, seven days a week (24/7). Where the Council funds these services, they are expected to meet all the eligible needs identified following the social care assessment.

**Proposal 6:** Where someone has a 24/7 service, the Council will reinforce the requirement that the eligible needs of the person are fully met through this arrangement and will not agree to services in addition to the 24/7 service, unless there is an agreement to reduce the funding required for the 24/7 service.

**For example:** A person lives in 24/7 supported living and the support workers provide a range of meaningful activities for them and the other tenants both within the house and in the community.

Question	Strongly agree or agree	Strongly disagree or disagree	Don't know or unsure
Q6 A person lives in 24/7 supported living and the support workers provide a range of meaningful activities for them and the other tenants both within the house and in the community. To what extent do you agree with this proposal?	30 (41%)	24 (33%)	19 (26%)

**People using their own money to purchase enhanced services**

**Overview:** When the Council agrees the support plan to meet the person's eligible needs following assessment and confirms the personal budget

allocation, it can take resources into account when considering the options available to meet the person's eligible needs. Some options may be more expensive than others and some options may include additional services that are not required to meet the eligible needs. The Council will also undertake a financial assessment to determine the contribution from the person towards the personal budget i.e.the cost of implementing the support plan agreed by the Council. If the person and/or their family want a more expensive option that the Council agrees meets the person's eligible needs or an option that offers additional services, they could agree with the Council to make an additional regular contribution in addition to the overall funding agreed by the Council for the support plan.

**Proposal 7:** People receiving social care and their families might choose to use their own resources to commission additional or more expensive services over and above those that have been agreed in the support plan and are part of the personal budget.

**Example A:** A person who has an eligible need to increase their level of physical exercise would prefer to have private gym membership rather than go swimming. The swimming option is in their support plan and funding is included in their personal budget. They decide to use some of their own money to add to the personal budget so they can purchase gym membership and get their exercise that way.

**Example B:** A person moving into a residential home to meet their eligible needs would prefer to have a room with direct access to the gardens of the home. This is not required to meet their eligible needs and there is a higher charge for rooms with this access. The person or their family chooses to pay the additional cost for this, and secures a room with the access to the garden.

Question	Strongly agree or agree	Strongly disagree or disagree	Don't know or unsure
Q7 To what extent do you agree that people who choose to use their money in this way, can agree with the Council to add to their personal budget allocation to receive a more expensive service that meets their eligible needs or to receive additional services that are not required to meet the eligible needs?	51 (72%)	9 (13%)	11 (15%)

2.6 Comments were also invited about each proposal and provided more insight into the views of respondents. The comments for most questions had similar themes from both the people who agreed and the people who had disagreed with the proposal. These themes focused on two important issues:

1. The need to maintain choice and personalisation, with concerns raised that the blanket application of a policy (for example, if 'short-term' always means 'for 6 weeks') would have a negative effect on people

because it does not take their particular situation into account.

2. The need for good contingency planning and an immediate emergency/crisis response, linked to the need for good monitoring of informal or community support/interactions to make sure that risk is being consciously managed rather than being ignored.

2.7 The survey was enhanced by face to face meetings including five focus group sessions with service users and carers (60 people in total), discussions with some of the local partnership boards and meetings with voluntary sector organisations. These conversations included specific comments on the consultation and broader issues that were being consulted on, and the key points raised were:

- The paper version of the survey was long and laborious to complete
- The wording and the examples were felt to be 'leading' people to give supportive answers
- The consultation period should have been longer
- There was support particularly for more efficient co-ordination of providers so that several were not turning up at once – but people were concerned about managing the risks associated with this and other proposals. Key risks are whether the proposals work against personalisation and choice; and whether the increased use of informal care presents safeguarding risks.
- People felt that the Council should have been more upfront and clearer earlier on about the potential effect of the budget cuts on their care and support packages. Many service users said that they had not been fully aware of the cuts and what will happen – it would have been better if the Council had been more blunt about this. The consultation created a lot of worry that people's favourite services will close, that they will not have access to staff and that there will be less personal choice. It was felt that the Council had been trying (with the best of intentions) to shield frontline services and individuals/families from the effects of the budget cuts until now but the downside of this was that the proposals were now more of a shock to people.
- Service users relied heavily on their families, friends and support networks for support in communicating with professionals. Sometimes this worked well, sometimes not. A strong concern about the lack of continuity of care and knowledge of individuals' needs and preferences, particularly in relation to social care professionals.
- Strong sense that service users wanted to be given more time in order to communicate with professionals directly.
- Strong sense of frustration at the lack of easy read information that was provided, generally, to enable people with learning disabilities, in particular, to be able to understand information and take more control.
- Some organisations discussed the idea that equal focus or importance should be given to changing the culture in mainstream society to allow for people with disabilities to take part. This could include information about what wellbeing, resilience and mental health problems are, how to spot the signs of poor wellbeing or early indications of mental ill health, the practical steps that can be taken to build resilience and help to prevent mental health problems, and the availability of services and support in each local area.
- In recent years the voluntary sector has built up considerable

experience of communicating with a diverse audience, often across widely dispersed communities. Its expertise may point to practical approaches and communication styles that could enhance effective dialogue.

- Keep language simple and use words that people are familiar with in their everyday work e.g. active citizenship and social inclusion, and this will help people to understand. Produce a regular newsletter that includes details of current learning and training opportunities, consultation issues and progress on planning. This promotes a feeling of involvement, even if people are unable to attend meetings. It also helps ensure that interested organisations have easy access to current information.
- Organisations need to be more creative in arranging meeting places and times, and ensuring that there are a variety of ways for organisations to input into the planning process. Look at the timing of meetings to allow volunteers to get involved. Local groups are often managed by local people and are likely to be the best way into a community. Establish a virtual network for isolated areas – this can be particularly useful in engaging younger people. Add an active website with facilities for feedback and comment, but make sure it is kept up-to-date.

2.10 Overall, the response to the consultation has been neutral to positive. Generally, respondents were cautious but open to the proposals, often highlighting the need for appropriate contingency or monitoring and/or careful and personalised decision-making about support plans, but perhaps recognising the financial situation. Some key themes emerged from the questionnaire and engagement through focus groups with service users and carers:

- A worry about a blanket application of policy, that could harm people if it does not take into account their personal circumstances and needs, and limit their choices unacceptably.
- An openness to take more risk and involve informal care more, as long as good monitoring and contingency arrangements exist.
- A need to be fair in assessing needs, in supporting service users, and to the contribution made by carers.
- A need for well-prepared professionals to spend a good quantity of time discussing support plans with individuals, and to make information about their plan available to them in a way they can understand it.

### **3.0 RESPONSE TO KEY MESSAGES**

3.1 The wide range of feedback received through the consultation process is acknowledged and valued. The Service Director, Adult Social Care has committed to share the feedback that was not specific to the consultation proposals with relevant colleagues and agree how we can integrate changes into our working practices. Ways to strengthen the ongoing dialogue with service users, carers and the voluntary sector will also be explored with relevant groups.

3.1 The responses to the four key themes that were specific to the consultation, (see 2.10 above) are set below.

- 3.1.1 It is confirmed that the Support Planning policy reflects the commitment to personalised support plans that take into account people's individual needs, preferences and support network. The proposed changes to the policy will be an integral part of the support planning process and the application of any of the proposals will be based on the person's individual needs and circumstances. The proposals will not be applied through a blanket approach. Where people have a specific eligible need, their support plan will always set out how that need will be addressed and the personal budget allocated to meet the needs. Consideration of cost will only take place in deciding between options that could meet needs, and cost will never be a basis for not meeting an eligible need.
- 3.1.2 Good contingency plans and monitoring of risk are recognised as being key to managing an approach where more risk is accepted and where there is more reliance on informal care. Contingency plans will be developed as part of the support planning process and will need to be agreed with the people and/or organisations that will respond if required. Staff will ensure that informal carers are offered a carers assessment and are directed to Carers Trust who manage "What If Plans" that can be activated if informal carers have some sort of crisis and cannot provide the care that they usually provide. Guidance will be provided to staff working with service users and carers about good risk management and contingency planning.
- 3.3 The Adult Social Care Services (covering all adult service user groups) are committed to treating people equitably and fairly, and applying the same standards in assessment and support planning to everyone, whilst ensuring that support is personalised for each person. The Support Planning section of the Care Act Policy Framework and the section on assessment sets out the expectations for staff and these are reinforced through staff training and development. The Services recognise the enormous contribution of informal carers in Cambridgeshire and the need to support carers in this role, offering carers assessments and working with Carers Trust to provide a range of information, advice and support.
- 3.4 The Services recognise that if people are to be genuinely involved in the support planning process, they will need sufficient time, relevant to their communication needs, to discuss and develop the plan with the staff supporting them. This is covered in the policy through the expectation that people will be given every opportunity to be involved and jointly develop the plan with staff. The need for more accessible information, including easy read information is accepted and the Service Director, Adult Social Care will discuss this with communications colleagues and agree how to improve the range of accessible information.
- 3.5 The Services are rolling out a new process of quality assurance around social work and social care practice that will provide the framework within which to ensure that staff are applying the Care Act Policy Framework, including the section on support Planning appropriately. Areas for improvement identified through this process will be shared with individuals and across teams and will inform the training and development needs of individual staff and the Services as a whole.

#### **4.0 REVISIONS TO THE SUPPORT PLANNING POLICY**

- 4.1 A revised version of the policy on support planning, which takes account of consultation responses, is included at Appendix C. Amendments to the support planning policy have been made throughout for reasons of clarity. A list of amendments is included below. The numbering in brackets within the text of the table below refers to the questions asked in the consultation questionnaire.

Section in Support Planning Policy	Detail of change
1.1	Clarification of the meaning of 'support plan'. Clarification of the Council's responsibility to demonstrate how eligible needs can be met and the cost of meeting these needs.
1.3	Clarification of the development of different options in support planning. Statement that a financial assessment is carried out as part of the assessment and care and support planning process.
1.4	Statement of the Council's statutory duty to meet eligible needs. Addition to list of ways of meeting needs, to include family, friends, meeting needs independently or from own financial resources and support from the wider community or other organisations. Statement that a person's network of support will be taken into account in support planning and this will reduce personal budget (2). Deletion of paragraph stating that carer and community support will not be included in plan. Statement that Council will take into account cost as one relevant factor when choosing between two options, both of which will deliver the desired outcomes (1).
1.5	Clarification that a person may self-plan with support of Council if they wish. Statement that Council will draw up a care and support plan to inform work with person on how to meet eligible needs. Addition to list of elements of care and support plan to include outcomes, plan to access information and advice if relevant. Statement that Council's strategy is to support independence that support plans will set out how someone will increase their independence, and this will reduce personal budget if achieved (4).
1.6	Statements reinforcing that the person can develop the plan jointly with the Council and that Council will rely on original care and support plan if disagreement about how eligible needs should be met occurs.
1.7	Statement that a person's network of support will be taken into account in support planning (2). Deletion of paragraph and list on benefits of personal budget. Clarification that Council will use 'Care Cost Calculator' to estimate personal budget in initial support planning work. Clarification of 'arrangement fees' as

	opposed to 'administration charges'.
1.8	Clarification that personal budgets for carers are to meet eligible needs identified through a carer's assessment.
1.9	Clarification of statement about why reviews are necessary. Multiple revisions to list of broad elements of review of care and support plan to ensure clarity. Addition of clarifying statements about changes to need, circumstances or available services potentially impacting personal budget. Deletion of statement of 'light touch' review. Clarification that changing circumstances could result in more frequent reviews.
1.10	<p>Clarification that Council staff will be required to consider and take into account any of the "policy lines" set out in the support planning policy that may be relevant in meeting a person's assessed eligible needs when they are working with them to develop the care and support plan.</p> <p>Inclusion of new "policy lines" that have been the subject of the consultation, set out below:</p> <ul style="list-style-type: none"> <li>• <b>Personal budgets will be based on the most cost effective option for meeting eligible needs identified following assessment.</b> When developing care and support plans, if there are different options that could meet eligible needs, Council staff will consider which option is the most cost effective. This will include consideration of whether an option would support greater independence and lead to a reduced package of social care and support in the future.</li> <li>• <b>The role of, and support from, family, friends, the wider community and other organisations will be recognised and taken into account when developing support plans to meet eligible needs.</b> The role of, and support from, family, friends, the wider community and other organisations will be considered and included in the care and support plans reflecting their contribution to meeting eligible needs. If circumstances change and the level of support set out in the plan changes, the plan would need to be revised. Contingency plans will also need to be developed to respond if the informal care and support is not available for any reason.</li> <li>• <b>Managing risk using an alternative arrangement and a contingency plan.</b> Sometimes, especially where a person presents behaviours that are challenging, funding and interventions are part of their support plan even though most of the time they do not present such behaviours. A different approach would be to manage the risk with a clear contingency plan in case the risk emerges rather than including additional care and support in the plan that is not required.</li> </ul>

	<ul style="list-style-type: none"> <li>• <b>Focus on short term interventions to develop or regain skills and reduce dependence on social care funded support.</b> Where there is the potential for the person to develop or regain skills, the use of short term interventions should be included in the plan with clear outcomes and timeframes. The successful development of or regaining of skills will lead to greater independence and reduce the eligible need. The care and support plan will need to reflect that the level of need will reduce, and the personal budget, after the intervention. In some cases, the timeframe of the intervention may be extended to achieve the desired outcome. In other cases, the person may not be able to develop the desired skill and the specific intervention will end and the care and support plan amended to reflect the ongoing eligible needs.</li> <li>• <b>Group and 1:1 support.</b> Some people with eligible needs do not need 1:1 support to meet those needs. In these circumstances, the Council will make the best use of group situations, including group activities and group living arrangements, to meet people’s needs in a cost-effective way.</li> <li>• <b>Making the most of 24/7 services.</b> Some people require services 24 hours a day, 7 days a week (24/7). Providers of such services will be expected to fulfil all of a person’s eligible needs, and provide a full range of meaningful activities for people in 24/7 supported living both within the house and in the community. No additional services will be commissioned unless there is an agreement to reduce the funding to the 24/7 provider.</li> <li>• <b>People using their own money to purchase enhanced services.</b> When the Council agrees the support plan to meet the person’s eligible needs following assessment and confirms the personal budget allocation, it can take resources into account when considering the options available to meet the person’s eligible needs. Some services may provide enhanced support that is not required to meet the eligible need, but the person would prefer to use. People who wish to use a more expensive but enhanced service that goes beyond meeting their eligible need may agree to pay an additional contribution (which will be over and above any contributions they may have to pay depending on the result of their financial assessment).</li> </ul>
1.11	Re-ordered section for clarity. Deleted unnecessary repetition of description of review process. Clarified that revision process will take the same approach and be subject to the same principles as the development of an initial care and support plan.
1.13	Statement that policy has been reviewed in February 2016.

1.14	Removed paragraphs on Transition to New Legal Framework as these focus on the introduction of the Care Act in April 2015.
1.15	Statement that Council will draw up an initial plan following assessment.

## **5.0 ALIGNMENT WITH CORPORATE PRIORITIES**

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

Changes to the way or type of support that is delivered will involve negotiation and discussion with providers, many of whom are small and locally-based. Successful negotiations will support the long-term sustainability of those providers.

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

The work that we are undertaking to deliver support in accordance with this policy, including Transforming Lives and support for carers, focuses on people living healthy and independent lives.

### **5.3 Supporting and protecting vulnerable people**

This policy helps the Council to support and protect vulnerable people by ensuring that people, including people who are caring for a relative or friend, have a good support plan with an associated personal budget if they have eligible needs. The proposed changes include an acceptance of greater risk when developing care and support plans that will be mitigated by contingency plans. This applies to the provision of care and support by paid providers and support provided by family, friends and unpaid community networks.

## **6.0 SIGNIFICANT IMPLICATIONS**

### **6.1 Resource Implications**

As set out in the introduction, part of the reason for amending the support planning policy is to ensure that the savings set out in the Business Plan 2016-21 are delivered.

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

The support planning policy shows how the Council will comply with its legal obligations under the Care Act when working with people to prepare support plans to meet their eligible needs.

### **6.3 Equality and Diversity Implications**

The delivery of adult social care requires us to take account of each person's individual needs including issues relating to equality and diversity. The Council will continue to actively promote best practice in this respect through staff training, supervision and the programme set up to deliver the requirements of the Act. The Community Impact Assessment has been completed, approved, and is available in the Business Plan.

## 6.4 Engagement and Consultation Implications

This report describes an extensive consultation with service users, carers, staff, the public and voluntary sector providers about changes to the support planning policy and practice.

## 15.0 Localism and Local Member Involvement

15.1 The Council's approach to support planning, through the Transforming Lives model, has a strong focus on local communities and Members have a key role to play in supporting the development of resilient communities.

## 16.0 Public Health Implications

16.1 Some aspects of the Transforming Lives model, and therefore the revised support plan policy, particularly around managing risk differently, have implications for how the public and community spaces respond to people with health and / or social care needs.

<b>Source Documents</b>	<b>Location</b>
<b>The Care Act 2014 legislation</b>	<a href="http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted">http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted</a>
<b>The Care Act 2014 statutory guidance</b>	<a href="https://www.gov.uk/government/publications/care-act-2014-statutory-guidance-for-implementation">https://www.gov.uk/government/publications/care-act-2014-statutory-guidance-for-implementation</a>
<b>The Adult Social Care Policy Framework</b>	<a href="http://www.cambridgeshire.gov.uk/info/2016/6/working_together/579/delivering_the_care_act/2">http://www.cambridgeshire.gov.uk/info/2016/6/working_together/579/delivering_the_care_act/2</a>