

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

To: **Cabinet**

Date: **15th April 2014**

From: **Executive Director: Children, Families and Adults**

Electoral division(s): **All**

Forward Plan ref: **2014/032** *Key decision:* **Yes**

Purpose: **This paper outlines the proposed new strategic approach to adult social work and social care in Cambridgeshire, ‘Transforming Lives’, for consideration by Cabinet.**

Recommendation: **Cabinet is asked to:**

- a) Support the direction of travel of the ‘Transforming Lives’ approach**
- b) Agree to further engagement with service users, family carers and stakeholders to ensure that they have the opportunity to participate in the development of this approach.**

<i>Officer contact:</i>		<i>Member contact:</i>	
Name:	Claire Bruin	Name:	Councillor Fred Yeulett
Post:	Service Director: Adult Social Care	Portfolio:	Cabinet Member for Adult Services
Email:	Claire.Bruin@cambridgeshire.gov.uk	Email:	Fred.Yeulett@cambridgeshire.gov.uk
Tel:	01223 715665	Tel:	01223 699173

1. 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 and Support 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 It is therefore proposed that a new strategic framework for adult social work and social care in Cambridgeshire is created which will 'transform the lives' of the individuals, families and communities within Cambridgeshire, will ensure that we are meeting our legislative duties and are able to respond to future national agendas and will reduce demand on services, enabling us to work towards making the savings that are required.
- 1.4 The model proposed 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.

2. 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 people's 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 proposed model for social work and social care for adults in Cambridgeshire is illustrated overleaf:



2.5 Tier One: Information, 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.

- 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 ongoing 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 1. Further case studies which consider the impact of this approach are being developed.

3. CURRENT POSITION

- 3.1 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 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.
- 3.2 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.
- 3.3 A 'Transforming Lives' Project Structure has been established, for which Claire Bruin, Service Director: Adult Social Care, is the Project Sponsor.

The Project Board are further developing and defining the model, including 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.

- 3.4 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. It is therefore 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.
- 3.5 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. 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.
- 3.6 Work to further develop and define the proposed model will help to ascertain the implications listed in this report and these will be documented in a comprehensive business case which will be brought for consideration by the relevant Committee at a later date.

4. ALIGNMENT WITH PRIORITIES AND WAYS OF WORKING

4.1 Developing the local economy for the benefit of all

- 4.1.1 The Transforming Lives approach 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.

4.2 Helping people live healthy and independent lives

- 4.2.1 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.
- 4.2.2 Transforming Lives proposes that universal 'tier one' support from 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.

- 4.2.3 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.
- 4.2.4 A further key facet of this model is personalisation, choice and control at an individual level which is constant throughout the three tier offer.
- 4.2.5 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.
- 4.2.6 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.

4.3 Supporting and protecting vulnerable people

- 4.3.1 The Transforming Lives approach will ensure that we continue using our resources to support the most vulnerable and those most in need of our support in our communities.
- 4.3.2 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.
- 4.3.3 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.
- 4.3.4 Safeguarding will continue to be a key focus of the new approach to social work and social care for adults in Cambridgeshire.

4.4 Ways of working

- 4.4.1 The following points set out implications identified by officers for the three characteristics of our new approach to tackling our priorities [within the new Integrated Plan].

4.4.2 Developing our leadership role

- 4.4.2.1 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.

4.4.3 Working at the local level

- 4.4.3.1 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.

4.4.4 Investing in growth

- 4.4.4.1 The Transforming Lives approach is based on strengths and progression and supporting the development of our local communities, all which may have a positive effect on our communities in the future.

5. SIGNIFICANT IMPLICATIONS

- 5.1 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.
- 5.2 There are likely to be 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.

5.3 Resource and Performance Implications

- 5.3.1 The following bullet points set out details of significant implications identified by officers:
- The costs and the impact that this work will have upon 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.

5.4 Statutory, Risk and Legal Implications

5.4.1 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 duties.
- The business base, which is currently being developed, will outline any key risks.

5.5 Equality and Diversity Implications

- 5.5.1
- 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 the relevant Committee for consideration.

5.6 Engagement and Consultation

- 5.6.1
- There has not yet been community engagement or public consultation on the Transforming Lives approach, because Cabinet is asked today to endorse the direction of travel of the Transforming Lives project and agree to further engagement with service users, family carers and stakeholders to ensure that they have the opportunity to participate in the development of this approach.
 - 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.
 - 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' [see paragraph 2.8]. 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.

- Information gathered through previous consultations, including those on *Ageing Well* and more recently on *Making it Real*, has informed us that the key elements of this model are what the residents of Cambridgeshire would like to see in future.

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 Charlotte Taylor and are available from 3rd Floor, C-Wing in Castle Court, Cambridge.</i>
The Draft Care and Support Bill	https://www.gov.uk/government/publications/draft-care-and-support-bill-published
The Social Work Reform Board	www.education.gov.uk/swrb
The College of Social Work	www.tcsw.org.uk

Appendix 1: 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.