## Agenda Item No: 7

## ADULTS POSITIVE CHALLENGE PROGRAMME: FAST FORWARD UPDATE

To: Adults Committee

Meeting Date: 6<sup>th</sup> September 2018

From: Charlotte Black, Service Director: Adults and

**Safeguarding People and Community Services** 

Electoral division(s): Countywide

Forward Plan ref: Key decision:

No

Purpose: To update Committee on the Adult Social Care Fast

Forward work.

Recommendation: Adults Committee is asked to note and comment on the

update contained within the report.

|        | Officer contact:                      |        | Member contacts: |
|--------|---------------------------------------|--------|------------------|
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#### 1. BACKGROUND

- 1.1 This report provides an update on the Fast Forward work that has been delivered with iMPOWER to accelerate several of the demand management opportunities identified through the Outline Business Case (OBC) produced by the consortia of CapGemini and iMPOWER which was presented to Adults Committee in March 2018.
- 1.2 The scope of this report is to provide an update on the four Fast Forward workstreams for the period from May to August 2018.
- 1.3 The report will also set out how the content of the Fast Forward work will subsequently be taken forward as part of the Adult Positive Challenge Programme (APCP).

#### 2. MAIN ISSUES

- 2.1 Following the conclusion of the OBC work a number of demand management opportunities were identified to be taken forward with immediate effect, whilst the wider APCP was refined.
- 2.2 The purpose of this work was to maintain momentum, engage staff in coproducing behavioural science influenced solutions, make tangible demand management interventions, and demonstrate impact.
- 2.3 Multiple opportunities were identified, and following extensive discussions with senior stakeholders in the service, four workstreams were taken forward;
  - Promoting independence
  - Technology Enabled Care (TEC) innovation hubs
  - Neighbourhood cares pilot support
  - Web page redesign

# 2.4 Promoting Independence

- 2.4.1 Promoting independence (PI) has been the principal fast forward workstream. This work is focused on working with front line staff, building on the Transforming Lives approach.
- 2.4.2 Through a series of workshops staff are supported to apply behavioural science tools to promote an independence and outcomes focused conversation with clients. The workshops are scenario based, tailored to each team, and facilitated to encourage peer challenge, supporting staff in holding asset based conversations.
- 2.4.3 On-going learning is supported by weekly peer discussion on active cases. Staff bring their cases to what is called the 'Huddle' to share insights and discuss challenges.

- 2.4.4 To date workshops have been delivered to five teams involving over 80 staff:
  - Huntingdonshire and Fenland older adults teams
  - The Maximising independence Team ( the pilot review team covering Cambridge , South Cambs and East Cambs
  - · Adults with, physical disabilities in Cambs and
  - The Peterborough Review Team
- 2.4.5 A series of measures are in place, and being established, to monitor the impact of this work. Analysis of the work to date has found;
  - 50 staff feedback forms have been received following the workshops these have been overwhelmingly positive about the workshop approach, with staff more confident in applying this approach in client conversations
  - Staff in Huntingdon and Fenland have been recording how they've been applying the promoting independence approach in conversations. 179 conversations have been recorded with several findings emerging;
    - 25% of conversations resulted in further opportunities to maximise independence or prevent/reduce/delay demand
    - Opportunities to maximise independence have been identified throughout the customer journey – but particularly at assessment, however staff found that in 17% of cases when a client just called to update or provide information that it was possible to explore independence opportunities
    - The financial impact is still being established, but of the contacts recorded, 146 have led to no change in care package provided, 1 has led to a reduction in the package, and 26 have led to an increase in package (although of these almost all were the result of a crisis or sudden change in circumstances)
- 2.4.6 The next steps for this work are to continue to apply and embed the approach throughout Cambridgeshire. This will include running sessions with the learning disabilities team and the area teams not included in this phase of work, alongside consolidating the huddle approach with all teams.
- 2.4.7 The trajectory management work that will form part of the APCP governance arrangement is commencing with a detailed cost and demand analysis of the period up to August 2018. This will enable a clear understanding of the cost and demand shifts delivered as part of the promoting independence work.

# 2.5 TEC Innovation Hubs

- 2.5.1 The OBC work identified TEC as a key opportunity for delivering sustainable financial benefit. The TEC team led by Lucy Forrest is already doing an excellent job in raising the awareness of the TEC opportunity in Cambridgeshire, and the TEC innovation hubs were designed to complement and add to the work already underway.
- 2.5.2 A series of five innovation hub sessions were held during June and July. These were attended by managers and frontline staff from teams across the service, with the purpose of discussing how they currently engage with TEC, and then to identify opportunities that they own, to further embed TEC first thinking in their work.

- 2.5.3 The innovation hub sessions provoked a lot of rich discussion, but also highlighted the importance of supporting staff to maintain innovative TEC first thinking as the APCP evolves over the coming months.
- 2.5.4 The TEC innovation hubs identified two opportunities to take forward for trial, both of which were focused on helping practitioners to embed TEC considerations in client conversations.
- 2.5.5 An evaluation of web-based tools to support greater consideration of technology and equipment has identified a preferred option, which will be subject to a further trial to test its universal applicability for members of the public as well as staff.
- 2.5.6 A practitioner checklist for evaluating technology and equipment options was also trialled. Staff in Cambridgeshire found this to be helpful, but also suggested a series of refinements to ensure that it is as easy to use and doesn't duplicate question sets from other forms.
- 2.5.7 Year on year analysis of referrals to the TEC team has seen a significant increase for the July 2018 period, with a particularly positive rise (300%) from Reablement Teams, and a 47% increase from older adults teams. It is not possible or appropriate to allocate this increase to the TEC innovation hub work, particularly given the ongoing work from the TEC team.
- 2.5.8 However, the reflection of the TEC team is that the visibility of TEC through the innovation hubs, promoting independence work, and the broader development of TEC as an integral part of the APCP has had a tangible, positive impact in TEC being embedded as part of client conversations.

# 2.6 Neighbourhood Cares Pilots (NCP)

- 2.6.1 Fast forward support to the neighbourhood cares pilots was a late addition to the scope of work, commencing from July 2018.
- 2.6.2 The aim was for iMPOWER to take a fresh look at the pilot to see if there were any areas that required 'barrier busting' to enable the pilot to fully explore the Buurtzorg Model and gain as much benefit and information from the pilot period as possible.
- 2.6.3 The pilot has well established systems for continual improvement and self-challenge, including keeping a record of any barriers they have encountered. Throughout the pilot period the teams have reviewed their approach against the Buurtzorg model and the pilot outcomes and questioned if they could do anything better or try something different.
- 2.6.4 The pilot has been underway for a year and many issues have been addressed through this process, however, there are some additional areas that have been identified. While some of these are not unique to the pilot, there is an opportunity to work differently which can minimise the impact or offer a previously unavailable solution. These opportunities broadly fit into three categories:

- Challenges in navigating the health and social care system e.g. access to, and feedback from the JET and Health@home teams
- External provider market increasing provider quality and availability, and the challenge of doing this through a localised neighbourhood model
- Process issues countywide financial and decision making processes do not consistently support the flexibility and outcomes desired from a neighbourhoods approach
- 2.6.5 During the meetings with the pilot teams, a number of opportunities were identified to be taken forward. Following discussion, five opportunities have been prioritised;

| Or | otion   | Status  |
|----|---|---|
| _  | Create a card that people can use to alert other professionals, like the hospital or paramedics, to NCP involvement, improving communication and outcomes for people.   | Card has been designed and is with the NCP team to put their ribbon logo on this and arrange printing.                    |
| 2. | Exploring an alternative approach to approving changes to, or new, care and support plans, which provides adequate assurance and is auditable.  | Agreement is being sought from departmental leads. Following this the alternative approach will be designed and trialled. |
| 3. | Working with the Commissioning Team to gain a better understanding of the Dynamic Purchasing System and how to make best use of this to improve outcomes for people requiring a homecare service.                                       | A meeting between commissioning and the pilot teams will be arranged.   |
| 4. | Working with the Commissioning Team to take a joined-up approach to contract management, to ensure there is feedback both ways, and that there is a consistent agreed approach that enables the council to get the best from providers. | A meeting between commissioning and the pilot teams will be arranged.   |

2.6.6 The next steps are to move forward with the development, implementation, monitoring and evaluation of these opportunities, whilst ensuring that the ongoing learning from the neighbourhood cares pilots is embedded in the APCP.

# 2.7 Web page redesign

2.7.1 This work was focused on working with CCC staff to identify and redesign key adult social care webpages on the CCC website, using behavioural science techniques to influence web behaviours. The aim of this work is to increase the level of self service from the public through the website, preventing, reducing and delaying contacts to the council. Concurrent to the web page work focus, was a series of workshops with key

stakeholders to introduce the MINDSPACE behavioural science framework (a series of affects that can influence behaviours – e.g. using the most impactful messenger), and to discuss how this could be applied on the CCC website.

- 2.7.2 At the time of this report four redesigned web pages have gone live;
  - Adult social care home page
  - Community support
  - Help in a crisis
  - Worried about a friend or relative
- 2.7.3 These pages were identified by stakeholders as being important pages to be prioritised as part of this work. Two additional pages assessments, and end of life care are about to be launched.
- 2.7.4 To date only two weeks of analytic data has been available to understand the impact of the new pages, and it is anticipated that further data will be available to form a verbal update to the committee.
- 2.7.5 From the available data the key findings are;
  - Of the 94 adult social care web pages, during the evaluation period, the home page was the most visited, worried about a relative 17<sup>th</sup>, community support 19<sup>th</sup> and help in a crisis 29<sup>th</sup> this suggests that the content that staff perceive to be a priority does not necessarily align to the pages most valued by the public. This is leading to a focus in future work on the pages that are the most visited. this isn't clear
  - In the period reviewed there was a 20% increase in visits to the adult social care home page, with the average time spent on the page increasing from 26-40 seconds
  - The other three pages are new pages, but all have average visit times in excess of 45 seconds, suggesting that visitors are reading some, if not all, of the page content
  - Heatmap analysis of page behaviours is currently inconclusive due to the 'cookie' notification that obscures some of the options – a work around is being explored.
- 2.7.6 The next steps are:;
  - To revise the website structure to better support people to help themselves
  - To prioritise the redevelopment of the most visited pages
  - To continue to evaluate the impact of this work through web behaviours, and impact on the number of calls made to the Contact Centre entre and the Adult Early Help Team

#### 3. ALIGNMENT WITH CORPORATE PRIORITIES

## 3.1 Developing the local economy for the benefit of all

There are no significant implications for this priority.

## 3.2 Helping people live healthy and independent lives

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

- Promoting independence has been a key principal Fast Forward work. The Fast Forward PI workstream is using behavioural science tools to embed an independence and outcomes focus in conversations between practitioners and clients.
- The work of the Fast Forward will continue through the Adults Positive Challenge Programme. The Programme supports the need to shift social care practice away from long-term support towards more preventative support and advice, which will support people to live healthier and more independent lives.

## 3.3 Supporting and protecting vulnerable people

The following bullet point sets out details of implications identified by officers:

• The changes implemented through the webpage redesign workstream will better support people to help themselves.

#### 4. SIGNIFICANT IMPLICATIONS

#### 4.1 Resource Implications

There are no significant implications within this category.

# 4.2 Procurement/Contractual/Council Contract Procedure Rules Implications

There are no significant implications within this category.

## 4.3 Statutory, Legal and Risk Implications

There are no significant implications within this category.

## 4.4 Equality and Diversity Implications

There are no significant implications within this category.

## 4.5 Engagement and Communications Implications

There are no significant implications within this category.

#### 4.6 Localism and Local Member Involvement

There are no significant implications within this category.

## 4.7 **Public Health Implications**

There are no significant implications within this category.

| Implications  | Officer Clearance |
|---|-------------------|
|   |                   |
| Have the resource implications been cleared by Finance?   | N/A               |
| Have the procurement/contractual/ Council<br>Contract Procedure Rules implications been<br>cleared by the LGSS Head of Procurement? | N/A               |
| Has the impact on statutory, legal and risk implications been cleared by LGSS Law?  | N/A               |
| Have the equality and diversity implications been cleared by your Service Contact?  | N/A               |
| Have any engagement and communication implications been cleared by Communications?  | N/A               |
|   |                   |
| Have any localism and Local Member involvement issues been cleared by your Service Contact?   | N/A               |
| Have any Public Health implications been cleared by Public Health   | N/A               |

| Source Documents | Location |
|------------------|----------|
| None             |          |
| 110110           |          |