

**ADULTS POSITIVE CHALLENGE PROGRESS REPORT**

*To:* **Adults Committee**

*Meeting Date:* **7 November 2019**

*From:* **Service Director - Adults and Safeguarding**

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

*Forward Plan ref:* **N/A**                      *Key decision:* **No**

*Purpose:* **The Committee is asked to review progress to date on the delivery of the Adult Positive Challenge Programme**

*Recommendation:* **The Committee is asked to review progress to date on the 19/20 Adult Positive Challenge Programme and use this report to inform consideration of the business case for the 20/21 programme when it is presented to December Committee.**

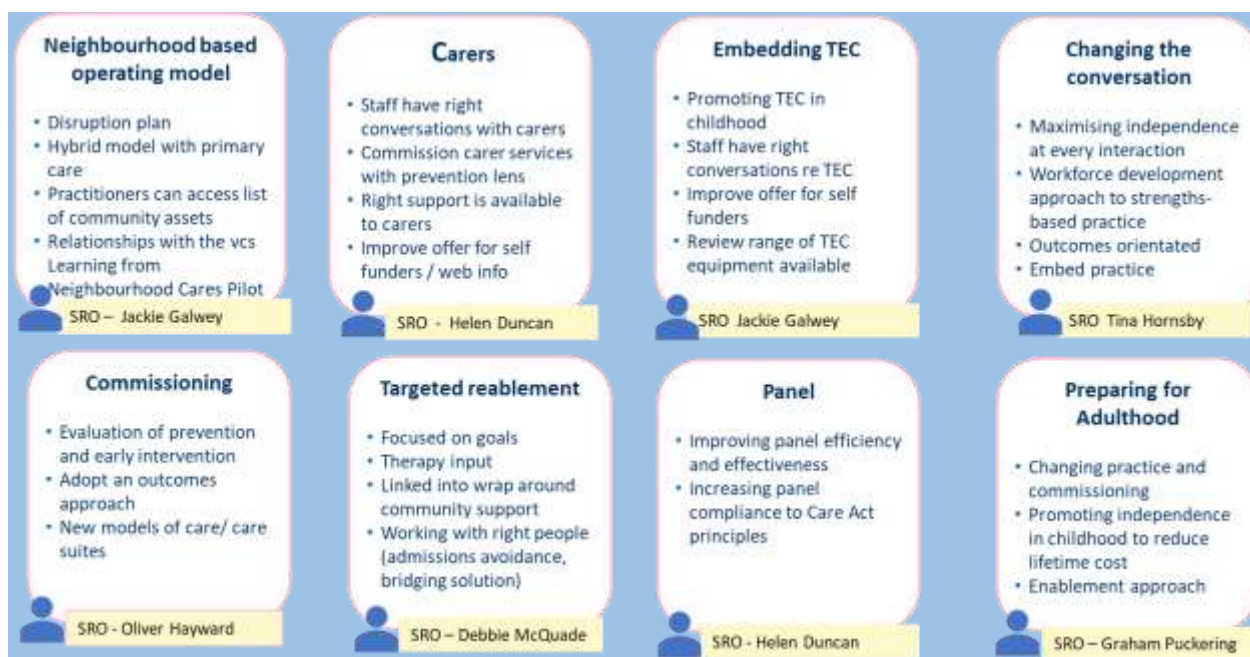
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## 1. BACKGROUND

- 1.1 The Adult's Positive Challenge (APC) Programme vision outlines that by 2023, local people will drive the delivery of care, health and wellbeing in their neighbourhoods, whilst delivering a financially sustainable service. This will enable a neighbourhood approach which supports more people to live independent and fulfilling lives for longer.

The programme has an overall target of delivering £3.8 million of cumulative financial impact per year which is a mix of savings and cost avoidance each year.

- 1.2 The Adults Positive Challenge (APC) Programme initially had eight workstreams in order to deliver the overall change, outcomes and financial benefits;



Not all of the workstreams were intended to deliver direct financial benefits, as some workstreams are enablers and over the last few months the areas most likely to generate cost avoidance have emerged. The following report highlights key achievements of the programme during 2019/20 and outlines the high level thinking on potential areas of focus for 2021/21.

## 2. MAIN ISSUES

- 2.1 The Delivery Confidence Assessment for the Programme in CCC is assessed as Amber, which means good progress has been made but the programme is slightly off track to deliver the full £3.8m financial benefits as planned. However, there are a number of risks and issues that the team are managing to ensure the Programme is put back on track and details are provided in this paper.

Overall the programme has evidenced a total of £786,000 in Cost Avoidance between April and August 2019 from the key workstreams that have been reported to the Adults Committee, e.g. Embedding TEC, Reablement and Carers. Cost avoidance through 'Changing The Conversation' is also being tracked through and is expected to evidence a further financial

impact. Programme impact is monitored via trajectory approach which includes 'top down' care costs combined with 'bottom up' activity and flow trajectories and workstream level benefit tracking.

## 2.2 Top Down Impact tracking.

The graph below illustrates the current overall report budget position for Adult Social Care

### CCC - Financial Trajectory

Forecast spend for the year, as reported each month – to be on target, APCP should meet the APCP Baseline amount. This is higher than the budget due to opening pressures not in control of the programme. We adjust out changes due to price increases.

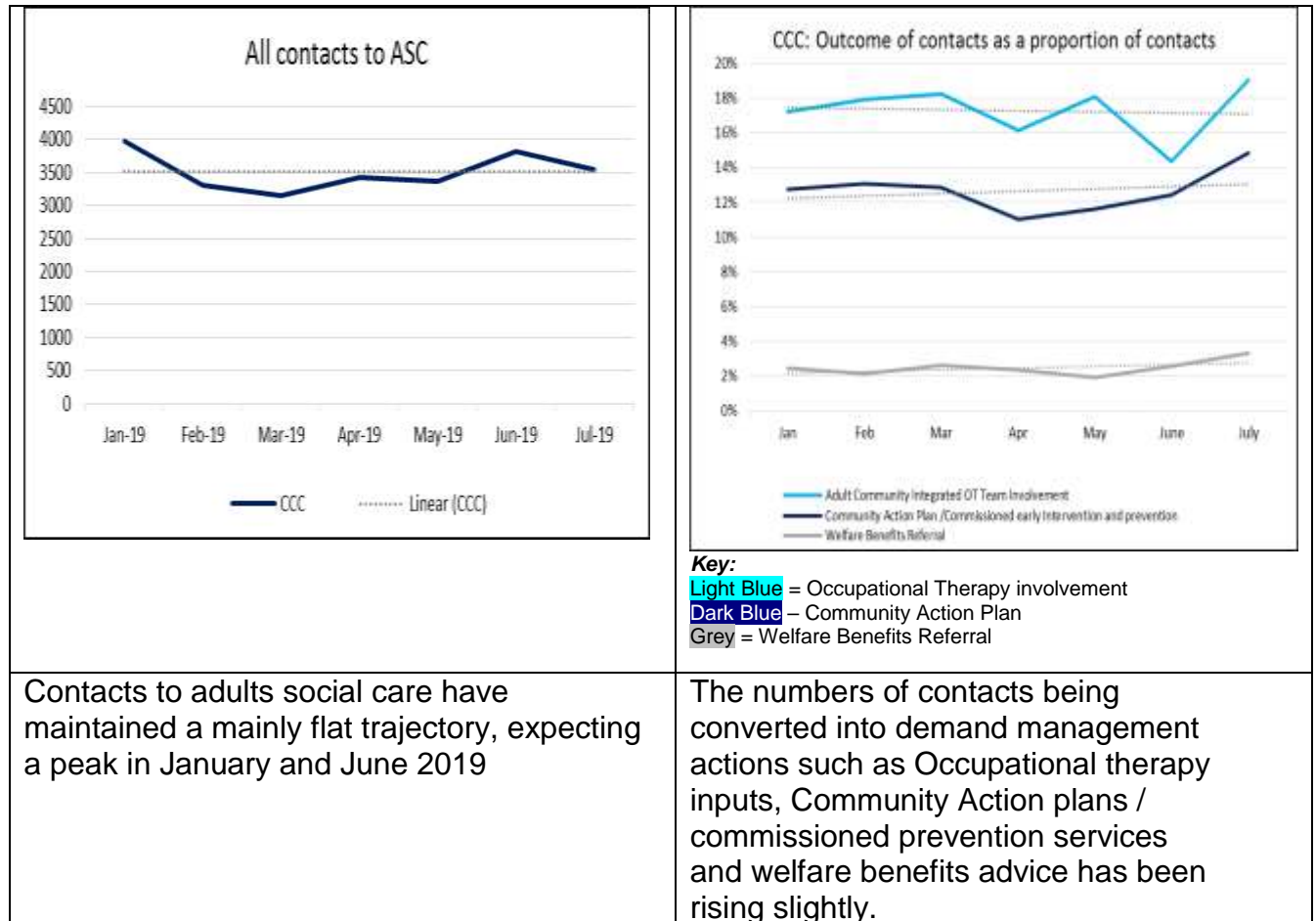


The red line is the overall projected spend including pricing pressures outside of the control of the programme. The blue line shows where spend which can be impacted by the Adult Positive Challenge Programme sits against the target expected to be achieved, the blue dotted line. So we can see that spend is around £560K over the target position for the Programme as a whole.

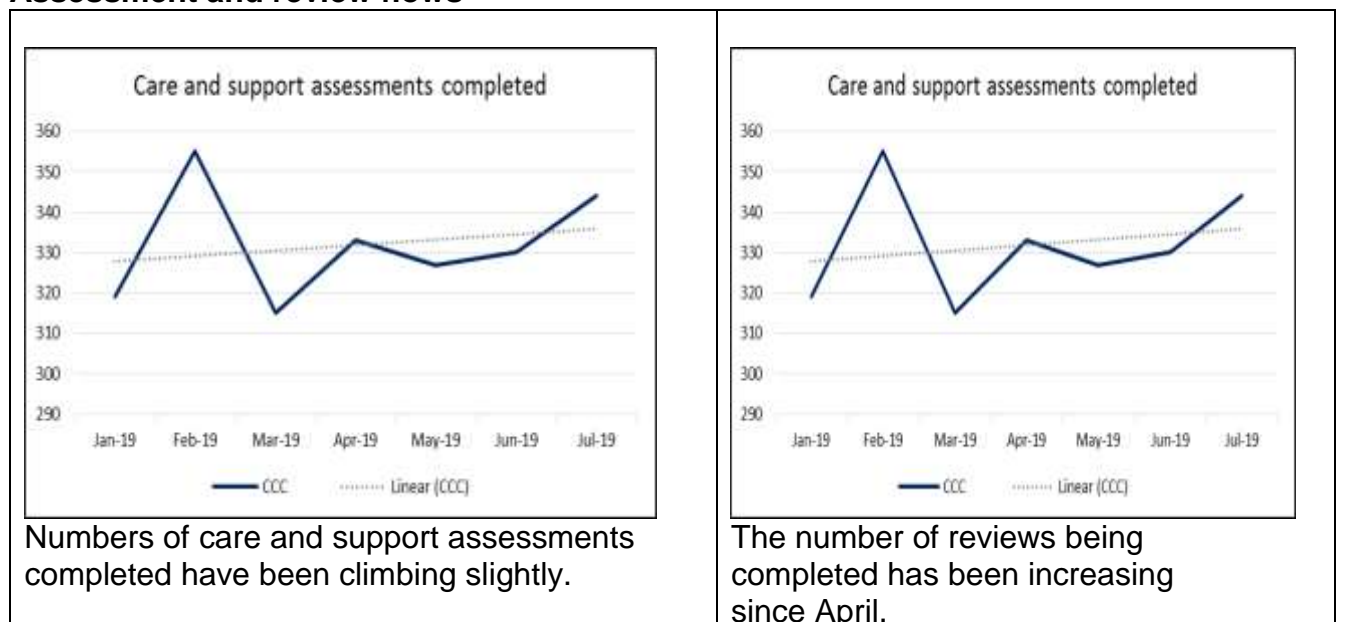
## 2.3 Tracking of activity flows

Alongside tracking of spend there are a range of key activity flows which are tracked to check for demand management impact.

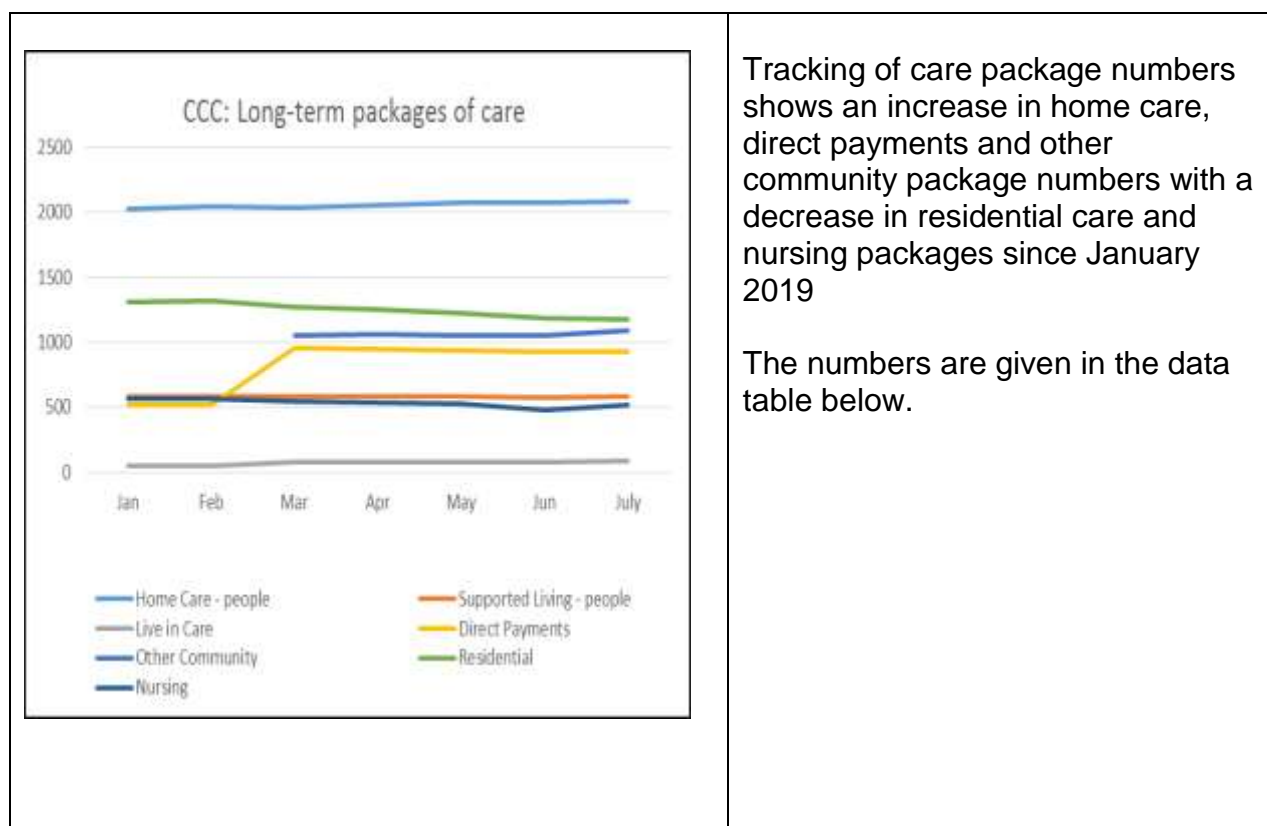
### Tier One and Contact flows



### Assessment and review flows



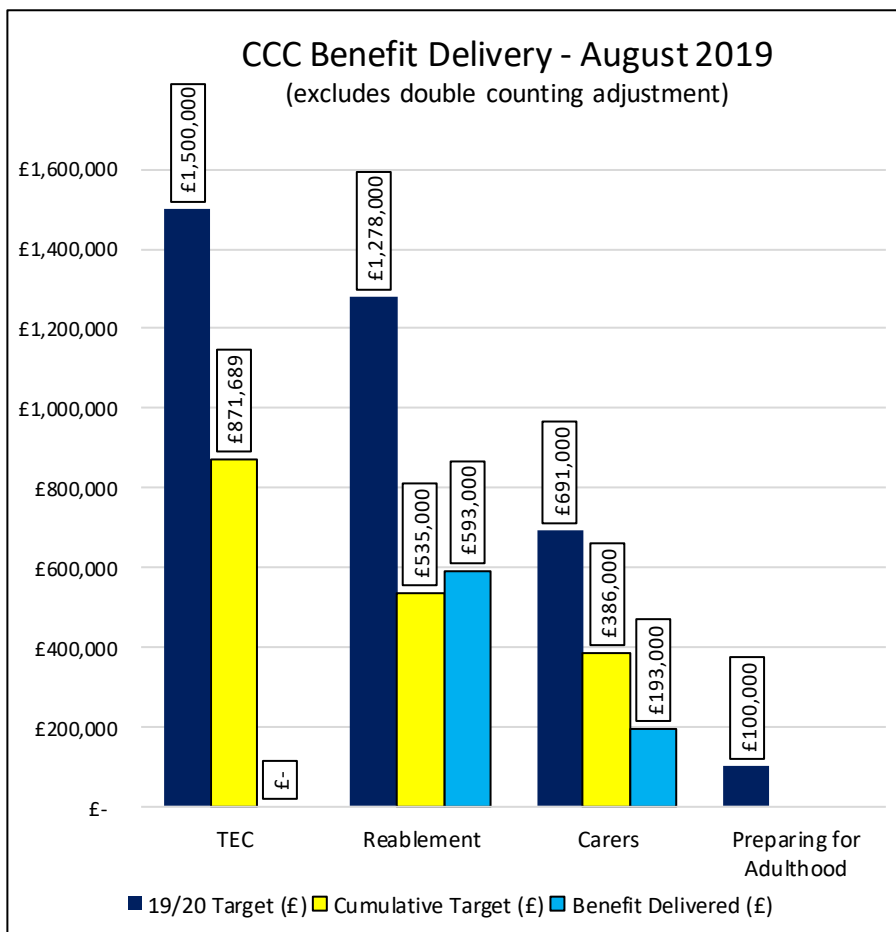
## Long Term Package activity flows



CCC	Outcome /	Jan	Feb	Mar	Apr	May	Jun	July
	Home Care - people	2029	2048	2038	2053	2074	2074	2080
	Supported Living - people	582	580	584	586	584	579	582
	Live in Care	52	54	80	80	79	80	85
	Direct Payments	518	517	954	947	940	930	926
	Other Community			1051	1061	1051	1054	1089
	Residential	1314	1315	1272	1248	1220	1188	1176
	Nursing	563	565	542	535	522	475	516

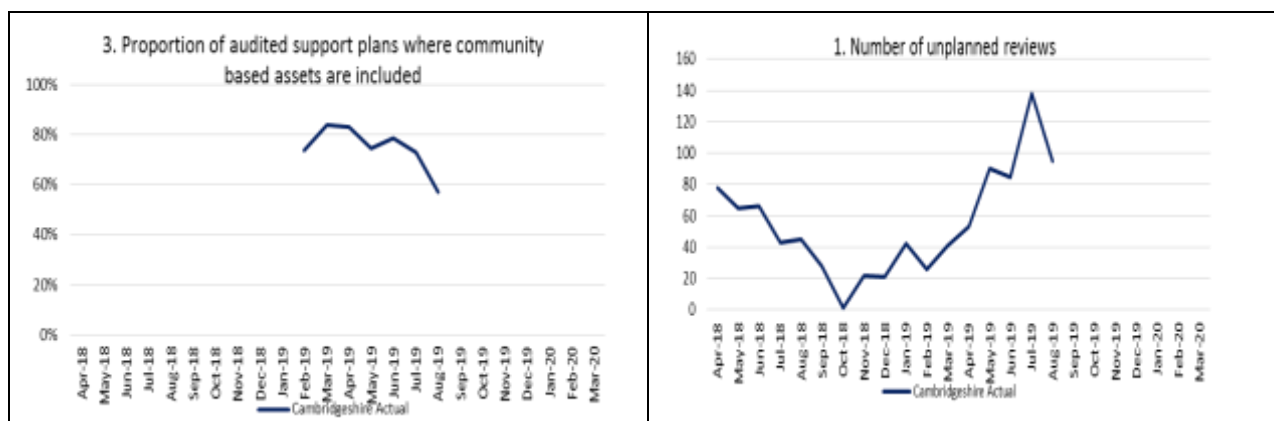
## 2.4 Workstream level impact tracking

The graph below illustrates how we are tracking progress against financial targets year to date:



Progress is also tracked at workstream level against other desired using Key Performance Indicators (KPIs) and delivery milestones. This shows that TEC and Carers are currently under target and Reablement slightly over. The following tables summarise the progress achieved on the key delivery work streams as at end September 2019 and explain progress in more detail and factors impacting on each workstream.

## 2.2 Changing the Conversation

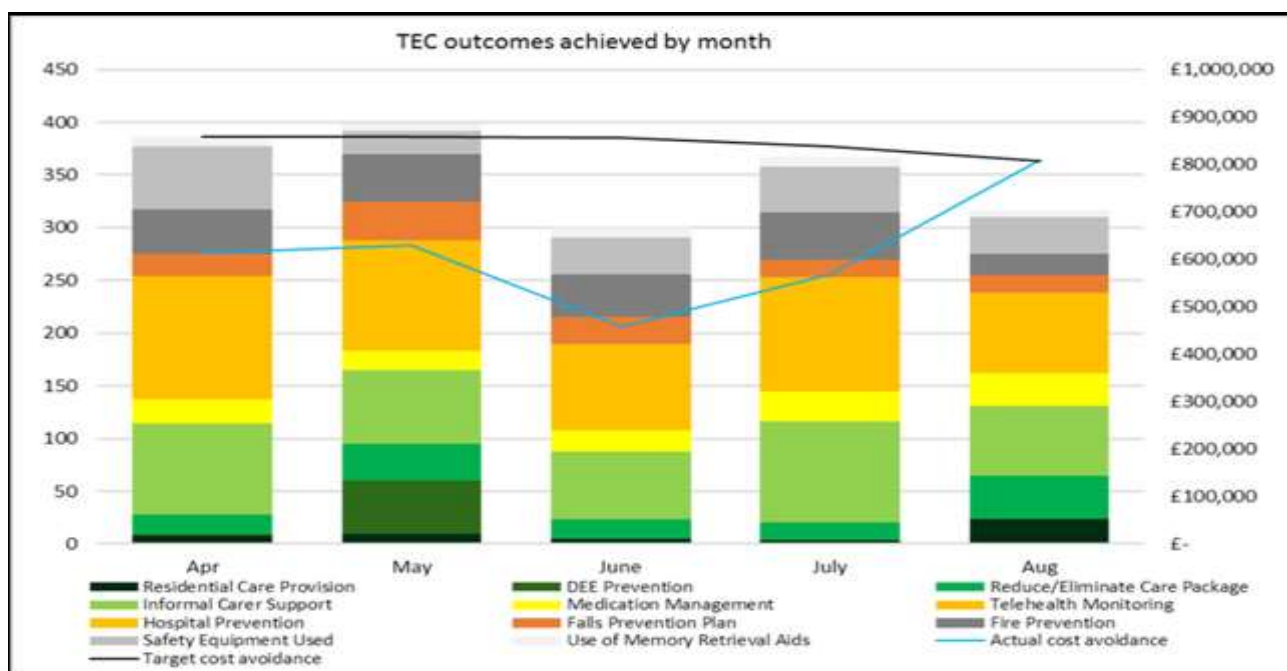
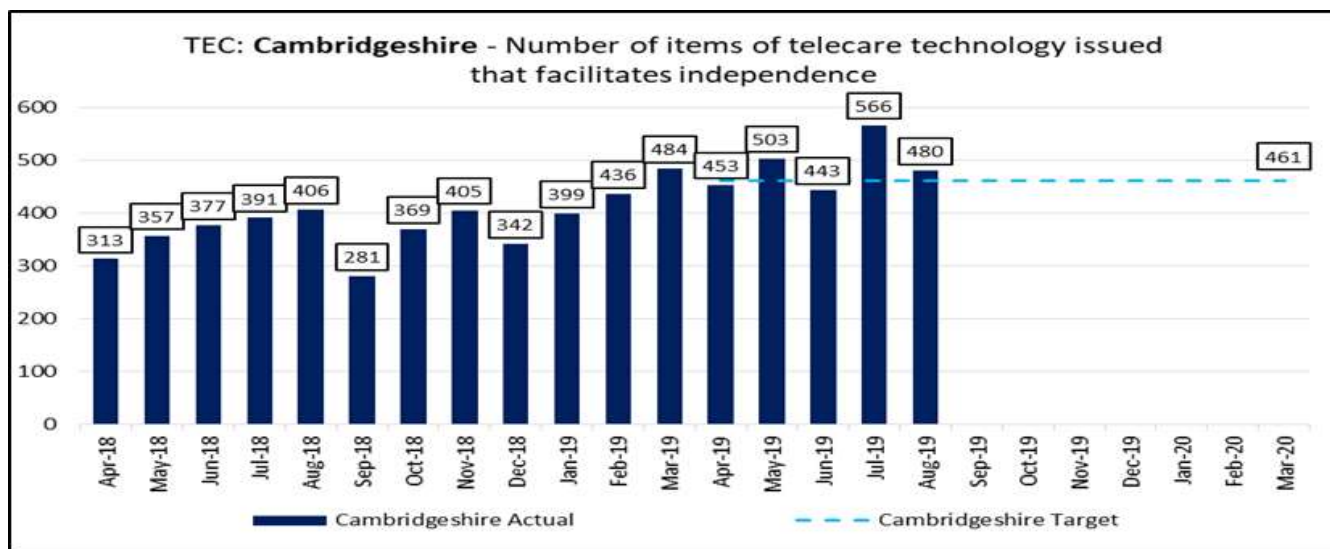


The above graphs track the percentage team manager audits carried out monthly which evidence the inclusion of a community asset within the care and support plan. Although there is good evidence of strengths and asset based conversations happening in the case records, the audits show that this is not always translated into noting community assets in care and support plans. The second graph tracks the number of reviews recorded as being unplanned. The growth from October relates to the fact that MOSAIC captures this data better than the previous system and we expect to see the figure stabilise after 12 months when the full year review cycle is completed, at which time we will have a more stable baseline to track against. This work stream doesn't have a specific cost avoidance target in 19/20 but we will have learnt throughout the year and will have a specific target for 20/21.

KPI and Financial Update	Deliverables
<p>The overall number of reviews completed down in August due to annual leave. Peak in unplanned reviews in July caused by Provider Notice of Termination. The increase from October reflects data migration to Mosaic</p> <p>Some exploration is being done in CCC to apply a proxy savings/cost avoidance figure to cases reporting that CtC made a difference.</p> <p>Managers log tracking impact every other month – if pattern emerges this can be fed in to overall cost avoidance</p> <p>More emphasis on identifying community networks and assets would improve outcomes – this is a focus area for 20/21.</p>	<p>Workshops and huddle support provided to all key teams, with Learning Disability Partnership underway now. Change Champions in post to concentrate of leading to business as usual.</p> <p>Further promotion is required to improve outcomes using community based assets and messages to be reinforced at Reviews workshop 23/9 via Change Champion in huddles; using visual prompts; identifying case studies for newsletters</p> <p>Practice guidance on proportionate reviews is being finalised.</p> <p>Website content and key publications reproduced using MINDSPACE behavioural science</p>
Issues	Risks
<p>Mosaic migration impacting reporting capability for both activity and finance metrics.</p> <p>Limited capacity to carry out reviews in Cambridgeshire business case being developed.</p> <p>CCC had a provider hand back over 100 cases which lead to an increase in unplanned reviews and a loss of capacity for planned reviews.</p>	<p>Finance data migrations issues impact ability to track financial impact of case activity if there is a lag for recording financial data.</p>



## 2.3 Technology Enabled Care

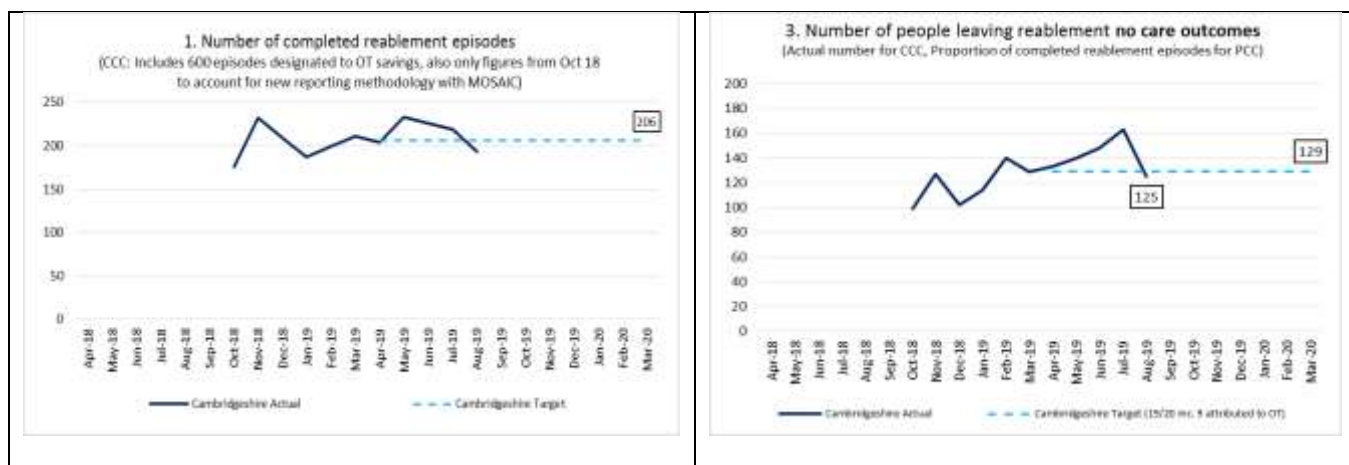


The graph above shows the full cost avoidance breakdown for TEC. The blue line represents the value achieved in 19/20 and the black line represents the target. The colours in the columns represent the type of cost avoided. In August the target was hit due to the difference in blend of avoidance. Previous months are being reviewed to ensure not undercount of cost avoidance categories.



KPI and Financial Update	Deliverables
<p>Referrals and TEC installations are up The cost avoidance tracked through 19/20 had not been as high as 18/19, even though significantly up on 17/18</p> <p>The savings modelling was reviewed by the team and the original savings target was based on the incorrect baseline, so the target has been updated resulting in a lower savings target.</p> <p>The data shows lower than expected savings from Apr-Aug, which the team are investigating and have initially found that there may have been an issue recording interventions that resulted in savings. The team are continuing this investigation but meanwhile, savings hit the target in Aug and appears to be on an upward trajectory.</p>	<p>TEC First and Falls training delivered widely in CCC Additional capacity was established in the TEC Team and is driving forward the changes.</p> <p>Data analysis is continuing to focus current activity and support priority setting and planning for the next phase. Clearer understanding emerging as to what TEC interventions are most effective, which will help the team prioritise their work to focus on activities that have the greatest impact on savings and outcomes.</p> <p>New milestone plan approved Financial validation is currently underway to pull out best practice case studies and areas of high cost avoidance to share with operational teams.</p> <p>TEC Team Level Dashboards have been designed to measure and monitor team performance and will be trialled in CCC to help improve accountability, engagement and further improve performance.</p>
Issues	Risks
<p>Importance of full buy in to the TEC First approach by front line staff and managers- this is increasing as time goes on and examples of successful change being shared.</p> <p>The team have designed the Team Level Dashboards to increase buy in and case reviews will be undertaken to highlight teams that are under and over performing on TEC, which can then be targeted. Plus teams and managers are encouraged to attend 'huddles' to share good practice.</p>	<p>Increased pressure on Community Equipment and TEC budgets, being mitigated through business cases for sustainable funding</p> <p>Pace and extent of culture change may not be sufficient given engagement of practitioners. Particular work is needed on the role of managers in promoting TEC.</p>

## 2.4 Reablement

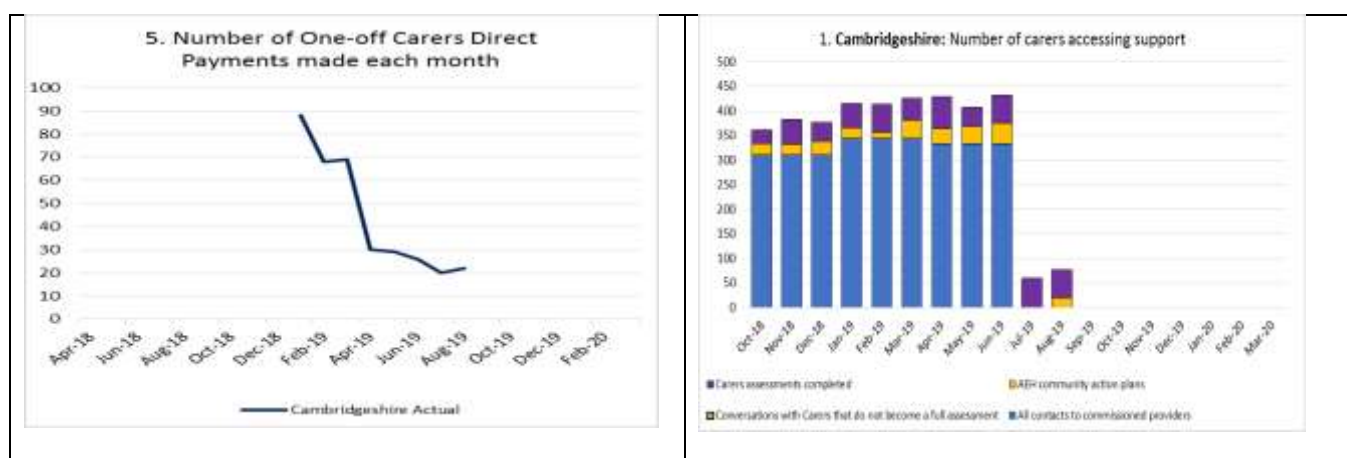


The number of reablement episodes has been above target in all months other than August as has the number leaving reablement with no long term care needs. The reason for this is pressures on home care in the school holiday period due to less staff being available and

increased requirement for Reablement to cover gaps in home care called 'bridging'.

KPI and Financial Update	Deliverables
<p>Financially on target</p> <p>Decrease in the number of Reablement episodes due to leave and higher mainstream packages-</p> <p>A decrease in episodes has resulted in below target number of people leaving with no care outcomes (although this is proportionally above target), which the team are investigating.</p>	<p>Revised specification for Reablement developed and additional management capacity introduced.</p> <p>Workshop to map pathway through Reablement completed</p> <p>Initial findings from pathway workshop have highlighted key areas / opportunities to explore.</p> <p>Implementing a mobile working solution for reablement support workers.</p>
Issues	Risks
<p>Reduced capacity in the Reablement team</p> <p>Reablement continuing to cover gaps in main stream home care (bridging)</p> <p>The Reablement service recognises the opportunities to target services where there deliver the best overall outcomes.</p> <p>Market failure (particularly in rural areas), which is increasing bridging and reducing community assets that take some of the pressure off Reablement.</p>	<p>Costs will continue to rise and savings reduced</p> <p>The market will rely on Reablement to pick up hard to place packages more and more and the Reablement team will do more bridging to fill the gap.</p> <p>Bridging is unsustainable and puts Reablement service under even more pressure, leading to core work suffering and worse outcomes for individuals</p>

## 2.5 Carers



Graph one illustrated the reduction in the use of default direct payments. Graph two illustrates the number of assessments and community action plans undertaken, carers commissioned support (the blue section of the column) is updated quarterly when data is received from commissioned providers. Shortly data captured around conversation with carers outside of assessment and community action plans will be added to the tracking.

KPI and Financial Update	Deliverables
Savings against the overall Carers Direct Payment in CCC budget are on track to deliver target. These are weighted to the start of the financial year to reflect	Carers Statutory Assessment function and resource returned to the Council in April 2019.

<p>underspend on direct payments in the last financial year.</p> <p>Cost avoidance is harder to track but a review has provided some evidence that the interventions are making a difference. The financial impact modelling is still being undertaken and is expected to yield an agreed figure. Once this figure is understood the programme will consider the options to addressing any shortfall</p>	<p>Carers triage step is now live on Mosaic which will enable conversations with carers that do not go on to assessment to be captured and reported- these messages are being reinforced at individual team meetings.</p> <p>Carers workshops rolled out and ongoing training via LGSS refined to ensure the focus is on the conversation with the carer.</p> <p>Carers commissioned contract going out to tender at the end of September with projected go live date of August 2020</p>
Issues	Risks
<p>We have just put in place the method of recording conversations with carers where a solution was found without the need for an assessment. As we will be counting this for the first time it might take a few months before we can see any pattern around increase and impact.</p> <p>It has been difficult to unpick the relationship between the interventions and benefits and provide the evidence that the targets are on track- the team continue to work on demonstrating the financial impact and cost avoidance achieved.</p>	<p>Carers commissioned tender is delayed due to the complexities of integrated working with health partners.</p> <p>There is a risk this could delay delivery of some benefits.</p> <p>Risk that there is a shortfall in provision in the support commissioned in light of CCG funding withdrawal</p>

## 2.6 Preparing For Adulthood

KPI and Financial Update	Deliverables
<p>Workstream is less developed than others in terms of scope- completed case audit to confirm where the opportunities are for cost avoidance and confirm KPIs</p> <p>In process of mapping out possible financial and non-financial benefits.</p>	<p>CCC Case Reviews in progress</p> <p>Shared Care data analysed to look for opportunities to reduce cost and how this could be applied to adults</p> <p>Producing action plan and rough estimate of financial / non-financial benefits in 2019/20 and what is possible in 2020/21.</p> <p>Where we are confident in the potential to deliver £100k in savings or cost avoidance, some of this benefit might be aligned to children's budgets.</p>
Issues	Risks
<p>Operational capacity</p> <p>Connectivity / dependencies need clarification</p> <p>Communication and engagement (internal and external)</p> <p>Work cuts across directorates and other agencies (health and education) and third parties.</p> <p>Difficult to quantify benefits as complex service</p>	<p>Double-counting of financial benefits with children's services</p> <p>Savings or activities within other projects could have a detrimental impact on adults or other projects</p> <p>Some current services reinforce reliance on services rather than encouraging better outcomes for the individual and their carer</p>

## **2.7 Other Workstreams**

### **Neighbourhoods**

The main focus for this workstream has been the delivery and evaluation of the Neighbourhood Cares pilots and managing the transition and transfer of learning, principles and approach into the Think Communities Programme and the STP work on Integrated Neighbourhoods. There were no specific savings attached to this as the move towards a neighbourhood based approach is a key enabler for the programme. The two Neighbourhood Cares pilot areas have been used as test beds for much of the innovation in APC and provided an opportunity to fast track progress followed by wide roll out across the county.

### **Panels**

This workstream is an enabler to ensure that panels support the approach and are compliant with the Care Act in respect of being a forum for complex case discussion and review. A report containing interim findings has been produced and development of a recommended approach is currently underway. Whilst still in progress, the recommendations will propose a phased approach which. In the short term the focus will be on developing a more consistent and efficient panel process, empowering practitioners to continue to expand the use strengths based conversation and collect meaningful data to inform the APC trajectory and data. It is envisaged this will ultimately lead to a more targeted approach to quality assurance in the longer term.

### **Commissioning**

Training in outcome based commissioning was undertaken by commissioners. Mapping of early intervention and prevention commissioning was carried out which can inform further work on the community offer / tier one offer. There has been a significant amount of commissioning activity embedded in the workstreams it supports. Going forward it is anticipated there will not be a separate workstream reflecting the joint nature of the whole programme.

## **2.8 Investment Plan as at September 2019**

APC are currently forecasting a pressure on the investment spend because of the complexity of the work and originally underestimating the level of support needed from IMPOWER to get the programme up and running. In addition the estimated costs of the Reablement mobile working solution are higher than originally expected, which has created a financial pressure on the Programme.

The programme is scrutinising the current spend with a view to managing the pressure as far as possible and also analysing the spend needed for future years as a part of the business planning process for 20/21 which is due to come back to Committee in December.

## Investment plan and benefit delivered

	Investment Description	Budget (£k)	Benefit delivered.
<b>Programme expenditure</b>			
	Subject Matter Expertise (Joint CCC/PCC Contract is 1 year plus option for 1 more year) £888k is CCC share (74%) of the contract cost for 1 year	888	IMPOWER have supported services to transfer to a more effective approach to demand management. Helping with the design and implementation of the model; they have used Edgework and behavioural insights to identify opportunities to further improve performance, implemented changes and supported the adoption of those changes, via workshops and huddle support resulting in costs reducing and outcomes for individuals improving
	Programme Manager £188k over 2 years	188	The PM established governance arrangements and proportionately applied tools and techniques to effectively manage the Programme. Confidence in the Programme has grown and the post holder actively manages key stakeholder relationships across CCC and PCC and across directorates.
	Enabler Support	44	Business Intelligence resource to track impact of the programme via service flows, work stream KPIs and benefits capture – whilst internal resource is found this support has been led by Impower.
<b>TEC Workstream</b>			
	Double Up OTs (2) 1 year	90	Two OTs focussing on double up or potential double up packages, strength based conversations and assessment for TEC and equipment – the number of double-up packages have reduced
	4 posts (P1x1 and SO1x3) 1 year	147	Additional capacity in the TEC team supporting the 30% increase in both TEC referrals and TEC issued each month
	Increase Equipment Budget	180	There has been a 30% increase in the average monthly amount of TEC issued.
	Lifeline Project	39	Use expertise from Telecare Services Association to undertake exploratory work, to identify opportunities for shared contracts across District Council boundaries and a report is due the end of Oct to share the exploratory work and recommendations for next steps.
<b>Changing the Conversation</b>			
	Review Team extension	300	The promoting wellbeing team has completed 240 reviews applying the changing the conversation approach in the first six months of 2019/20.
	Change Champion x2 1 year	100	One change champion started in August the 2 <sup>nd</sup> is due to start in November. The change champion that has started is already making an impact and identifying opportunities to further improve performance, which is likely to increase once the second change champion starts. Support the transition into business as usual
<b>Reablement</b>			
	OT Manager 1 year	40	Individual appointed to ensure the effective coordination of Occupational Therapists in the delivery of Reablement will support delivery of financial savings
	Total Mobile Working	577	Total Mobile will provide 230 support workers access to their schedules of work remotely without them having to call into the office every morning. This will improve effectiveness, efficiency and communication resulting in reduced operational costs and improved productivity. The 1 <sup>st</sup> phase starts 21 Nov with mobile phones loaded with the software being rolled out starting with Ely. 2 <sup>nd</sup> phase Feb when systems are integrated.
<b>Carers Support</b>			
	Review Assessors x3	70	Due to difficulties recruiting there are only two assessors in post, undertaking reviews of carers from the back log of reviews due when the service transferred back to the council.
	<b>TOTAL</b>	<b>2,663</b>	

## 2.9 How will we increase the impact of the programme for 20/21

The opportunities to increase the impact of the programme in 2020/21 consist of three elements,

1. Embedding what we have done in 19/20 to receive a full year maximised benefit in 21/20
2. Enhancing the existing work streams scope to have a wider impact
3. Delivery of new initiatives and approaches.

### Overview of 2020/21 opportunities



Based on experience so far there are a number of common themes and activities that cut across workstreams, which have an impact on how we embed and enhance Adult Positive Challenge's impact.

In addition the programme team have explored the scope of the programme, which has resulted in new work activities, so the table below summarises the current thinking a potential work streams.

A more detailed report on the business case for the 2020/21 delivery is scheduled to be shared with Committee in December 2019.



Workstream	Outcomes / Deliverables
Preparing for Adulthood	<ul style="list-style-type: none"> <li>TBC following diagnostic stage</li> </ul>
TEC	<p>A tailored and focussed TEC offer for different client groups that supports innovation with TEC.</p> <ul style="list-style-type: none"> <li>TEC with providers</li> <li>Focussed use of TEC in LD, MH, Supported living and at transition</li> <li>Digital and TEC strategy</li> <li>Process for identifying, trialling and launching new TEC</li> <li>LD safe places TEC trial – potential for wider rollout</li> </ul>
Short Term Support	<ul style="list-style-type: none"> <li>Reablement offer in MH</li> <li>Role of and pathways to MH</li> <li>Maximising the impact of OTs</li> <li>Review of adaptations pathways and approach</li> <li>Review of Tier 2 offer &amp; outcomes achieved</li> <li>Falls Prevention</li> </ul>
Community Offer	<p>A mapped out Tier 1 offer with partners and providers who are positive messengers in promoting independence.</p> <ul style="list-style-type: none"> <li>Revisit findings and recommendations in SER</li> <li>Tier 1 communication and engagement strategy inc. marketing of Tier 1 offer (inc build your circles)</li> <li>Review of Tier 1 contracts</li> <li>Tier 1 messaging about ASC e.g. websites</li> <li>Supporting providers to signpost to Tier 1 rather than into ASC</li> <li>Strengthen links with VCS</li> <li>Tier 1 provider contracts and outcomes – setting expectations in new contacts and contract revisions for existing contracts</li> <li>Role of care homes in supporting the community</li> <li>Parish and neighbourhood community schemes e.g. North Peterborough good neighbour scheme</li> <li>Optimising role of community navigator</li> <li>Messaging about expectations through children's &amp; families channels</li> </ul>
Changing the Conversation	<p>A whole ASC system that is confident in having strengths based conversations.</p> <ul style="list-style-type: none"> <li>CtC for Tier 1 partners and providers</li> <li>CtC at Hospital Discharge</li> <li>CtC with Housing</li> <li>CtC focus on LD reviews</li> <li>CtC with MH teams</li> <li>CtC with Business Support, Contact Centre, Contracts &amp; Commissioning and Brokerage</li> <li>CTC around transport.</li> <li>CTC with brokerage.</li> </ul>
Carers	<ul style="list-style-type: none"> <li>Focus on MH carers</li> <li>Defining and communicating carers offer</li> <li>Training for carers</li> <li>Recommissioning of carers contract</li> <li>PH health trainers for carers</li> <li>Linking to other partners carers groups.</li> </ul>

### 3. ALIGNMENT WITH CORPORATE PRIORITIES

#### 3.1 A good quality of life for everyone

There are no significant implications for this priority.

#### 3.2 Thriving places for people to live

See wording under 3.1 above

#### 3.3 The best start for Cambridgeshire's Children

See wording under 3.1 above



#### **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

<b>Implications</b>	<b>Officer Clearance</b>
<b>Have the resource implications been cleared by Finance?</b>	N/A
<b>Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?</b>	N/A
<b>Has the impact on statutory, legal and risk implications been cleared by LGSS Law?</b>	N/A

<b>Have the equality and diversity implications been cleared by your Service Contact?</b>	N/A
<b>Have any engagement and communication implications been cleared by Communications?</b>	N/A
<b>Have any localism and Local Member involvement issues been cleared by your Service Contact?</b>	N/A
<b>Have any Public Health implications been cleared by Public Health</b>	N/A

<b>Source Documents</b>	<b>Location</b>
None	