ADULT AND COMMUNITY SERVICES SCRUTINY FORUM AGENDA



Wednesday 26th August 2009

at 4.30pm

in the Council Chamber, Civic Centre, Hartlepool

MEMBERS: ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

Councillors Atkinson, Coward, Cranney, A Marshall, Preece, Richardson, Simmons, Worthy and Young

Resident Representatives: Mary Green, Evelyn Leck and Mary Power

- 1. APOLOGIES FOR ABSENCE
- 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS
- 3. MINUTES
 - 3.1 To confirm the minutes of the meeting held on 13th July 2009
- 4. RESPONSES FROM THE COUNCIL, THE EXECUTIVE OR COMMITTEES OF THE COUNCIL TO FINAL REPORTS OF THIS FORUM
 - 4.1 Portfolio Holder's Response Access to Recreation Facilities for Vulnerable / Older People Joint Report of the Director for Adult and Community Services and Portfolio Holder for Culture, Leisure and Tourism
- 5. CONSIDERATION OF REQUEST FOR SCRUTINY REVIEWS REFERRED VIA SCRUTINY CO-ORDINATING COMMITTEE

No items.

6. CONSIDERATION OF PROGRESS REPORTS / BUDGET AND POLICY FRAMEWORK DOCUMENTS

No items.

7. ITEMS FOR DISCUSSION

- 7.1 Six Monthly Monitoring of Agreed Adult and Community Services Scrutiny Forum's Recommendations *Scrutiny Manager*
- 7.2 'Putting People First The Delivery of Personalised Adult Social Care Services' Scoping Report *Scrutiny Manager*
- 8. ISSUES IDENTIFIED FROM FORWARD PLAN
- 9. ANY OTHER ITEMS WHICH THE CHAIRMAN CONSIDERS ARE URGENT

ITEMS FOR INFORMATION

Date of next meeting -

Wednesday 30th September 2009, commencing at 4.30pm in the Council Chamber, Civic Centre, Hartlepool

ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

MINUTES

13 July 2009

The meeting commenced at 4.30 p.m. in the Civic Centre, Hartlepool

Present:

Councillor: Chris Simmons (In the Chair)

Councillors: Rueben Atkinson, Kevin Cranney, Ann Marshall, Carl Richardson,

David Young and Gladys Worthy.

Also Present: Councillor Jonathan Brash.

Officers: John Mennear, Assistant Director (Community Services)

John Lovat, Acting Assistant Director - Operations Phil Homsby, Strategic Commissioner - Older People

Joan Wilkins, Scrutiny Manager

James Walsh, Scrutiny Support Officer David Cosgrove, Democratic Services Team

1. Apologies for Absence

Councillor Preece and Resident Representatives M Green and E Leck.

2. Declarations of interest by Members

None.

3. Minutes of the meeting held on 8th April 2009

Confirmed

4. Responses from the Council, the Executive or Committees of the Council to Final Reports of this Forum

No items.

5. Consideration of request for scrutiny reviews referred via Scrutiny Co-ordinating Committee

No items.

6. Consideration of progress reports/budget and policy framework documents

No items.

7. Quality of Care Homes and Access to Recreational facilities for Elderly / Vulnerable People – Progress Monitoring Report (Director of Adult and Community Services and Portfolio Holder for Adult and Public Health)

The monitoring report set details of the investigations recommendations, the executive response to them and the action undertaken by the department to date. The forum was updated on progress and discussed a number of the actions being undertaken by the department. Members commented that many of the actions being undertaken were suggested a number of years ago by Members. Members restated their support for the reintroduction of the Hartlepool Care Managers Forum. It was highlighted that the recommendation to locate residents with dementia on the ground floor of care homes was one that was unlikely to be carried forward following discussions with Planning Officers. In relation to the recommendation (g) in Appendix A to the report in connection with lobbying government for a review of the personal expenses allowance, it was indicated that further updates would be forwarded directly to the Members of the Forum. Further monitoring of the investigations recommendations would be undertaken through the six monthly monitoring reports on all investigation recommendations.

The Chair took the opportunity to make a statement of the Forum on the recent issues surrounding Pangbourne and the recently announced closure of Throston Grange Care Home. The Chair thanked all the officers who had been involved in these two matters.

Recommended

That the progress report against the actions detailed within the Action Plan be noted.

8. The Role of the Adult and Community Services Scrutiny Forum (Scrutiny Support Officer)

The Scrutiny Support Officer submitted a report for Members' information which set out the role and remit of Scrutiny in general and specifically the Adult and Community Services Scrutiny Forum. Details of the scheduled

meetings for 2009/10 were also set out.

Recommended

That the report be noted.

9. Determining the Scrutiny Forum's Work Programme for 2009/10 (Scrutiny Support Officer)

The Scrutiny Support Officer reported that the Scrutiny Forum needed to develop a Work Programme for the 2009/10 Municipal Year, together with a timeframe for each review, for consideration by the Scrutiny Co-ordinating Committee on 31 July 2009. To this end, the Chair had met with the Director of Adult and Community Services and various officers to identify issues that may warrant scrutiny investigation. Members had also been consulted to suggest topics for investigation.

Following these consultations, the following issues had been put forward for consideration as part of the forum's work programme for 2009/10: -

- Reform of Adult Care and Support Green Paper
- Putting People First Personalisation
- Allotment Strategy.

The Scrutiny Support Officer also highlighted that the Municipal Year had commenced late due to the delayed Mayoral elections and the forum would also be involved in considering various other issues through the year, including the Budget 2010/11, the Corporate Plan 2010/11, any potential referrals and the new Councillors Calls for Action. It was therefore suggested that the forum may wish to consider limiting its investigations to one issue for 2009/10.

The Chair indicated that from his meeting with the Director, the Green paper was seen as being of significant importance for local people. There would be formal consultation events as part of the development of the Green paper and as many members as could attend were encouraged to do so. The Chair also recommended the Allotment Strategy for investigation as officers were in the process of developing the new Allotment Strategy and the investigation could input into that.

Members commented that if there was to be structured consultation on the Green Paper it would be wise to input into that but to defer and investigation until the government proposals were more concrete. Members suggested that a briefing via a Members Seminar and a 'one meeting investigation' may be more appropriate at the time of the government consultation exercise.

Members considered that 'Putting People First – Personalisation' had both local and national significance and could be investigated in terms of Connected Care and the effects of this in the town.

Recommended

- 1. That 'Putting People First Personalisation' be approved as the main investigation topic for 2009/10.
- 2. That the Allotments Strategy be approved as a 'light touch' investigation alongside the development of the Council's new strategy. The duration of this investigation being limited to one meeting only.
- 3. That the Government Green Paper 'Reform of Adult Care and Support' be approved as a 'single meeting' investigation to be scheduled at the time of the government led consultation exercise.

The meeting concluded at 5.10 p.m.

C SIMMONS

CHAIRMAN

ADULT AND COMMUNITY SERVICES SCRUTINY FORUM



26 August 2009

Report of: Joint Report of Director for Adult and Community

Services and Portfolio Holder for Culture, Leisure and

Tourism

Subject: PORTFOLIO HOLDERS RESPONSE – ACCESS TO

RECREATION FACILITIES FOR VULNERABLE /

OLDER PEOPLE

1. PURPOSE OF THE REPORT

1.1 The purpose of this report is to provide Members of the Adult and Community Services Scrutiny Forum with feedback on the recommendations from the investigation into 'Access to Recreation Facilities for Vulnerable / Older People', which was reported to Cabinet on 13 July 2009.

2. BACKGROUND INFORMATION

- 2.1 The investigation into 'Access to Recreation Facilities for Vulnerable / Older People' conducted by this Forum falls under the remit of the Adult and Community Services Department and is, under the Executive Delegation Scheme, within the service area covered by the Culture, Leisure and Tourism Portfolio Holder.
- 2.2 On 13 July 2009, Cabinet considered the Final Report of the Adult and Community Services Scrutiny Forum into 'Access to Recreation Facilities for Vulnerable / Older People'. This report provides feedback from the Portfolio Holder following Cabinet's consideration of, and decisions in relation to this Forum's recommendations.
- 2.3 Following on from this report, progress towards completion of the actions contained within the Action Plan will be monitored through the Scrutiny Monitoring Database, with standardised six monthly monitoring reports to be presented to the Forum. In addition to this, the Scrutiny Co-ordinating Committee with also receive a breakdown of progress against all Scrutiny Forums' recommendations on an Annual basis.

4.1 ACSSF 26.08.09 Portfolio Holders response access to recreation facilities for vulnerable older people

3. SCRUTINY RECOMMENDATIONS AND EXECUTIVE DECISION

3.1 Following consideration of the Final Report, Cabinet approved the recommendations in their entirety. Details of each recommendation and proposed actions to be taken following approval by Cabinet are provided in the Action Plan attached at **Appendix A**.

4. RECOMMENDATIONS

4.1 That Members note the proposed actions detailed within the Action Plan, appended to this report (Appendix A) and seek darification on its content where felt appropriate.

Contact Officer:- John Mennear – Assistant Director (Community Services)

Adult and Community Services Department

Hartlepool Borough Council

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BACKGROUND PAPERS

The following background papers were used in the preparation of this report:-

- (i) Adult and Community Services Scrutiny Forum's Final Report 'Access to Recreation Facilities for Vulnerable / Older People' considered by Cabinet on 13 July 2009; and
- (ii) Decision Record of Cabinet held on 13 July 2009.

NAME OF FORUM: Adult and Community Services Scrutiny Forum

NAME OF SCRUTINY ENQUIRY: Access to Recreation Facilities for Vulnerable / Older People

	RECOMMENDATION EXECUTIVE RESPONSE / PROPOSED ACTION		FINANCIAL IMPLICATIONS	LEAD OFFICER	DELIVERY TIMESCALE
(a)	That the Council continues to improve the way in which it raises public awareness of the available recreational activities through the increased promotion of activities on the Council's website and in 'Hartbeat', with emphasis on the provision of information in an easily accessible way;	Key Officers identified within each area with the responsibility to submit articles for each edition of Hartbeat. This will allow for a targeted campaign at key groups. Work ongoing within the Department to make greater use of 'Hartlepool Now' website producing information in a more accessible format.	Within existing revenue resources	Pat Usher	April 2009
	cashy accessible way,			Pat Usher	July 2009
(b)	That in continuing to improve the way in which available recreational activities are publicised, the Council ensures that arrangements are formalised for increased	New marketing strategy to be developed for the Sport & Recreation service — key responsibility of a new post developed with the management structure, yet to be appointed.	Within existing revenue resources	Pat Usher	August 2009
	promotion of activities in the local press and radio (including Radio Hartlepcol);	Greater links are being made with local media as well as Radio Hartlepool and information is sent on a regular basis.	revenue budgets	Zoe Rayson lan Gray Susan Rybak	April 2009
(c)	That the Council develops	As part of the new marketing	Within existing	Zoe Rayson	Dec 2009

NAME OF FORUM: Adult and Community Services Scrutiny Forum

NAME OF SCRUTINY ENQUIRY: Access to Recreation Facilities for Vulnerable / Older People

	RECOMMENDATION	EXECUTIVE RESPONSE / PROPOSED ACTION	FINANCIAL IMPLICATIONS	LEAD OFFICER	DELIVERY TIMESCALE
	easy to read notices detailing forthcoming recreational activities to display in all leisure facilities, community and voluntary group buildings, libraries, doctors surgeries	strategy, this will be developed as a gradual process as and when targeted promotional campaigns are utilised. There are shelf-life implications to consider and the expense of developing these.		lan Gray Susan Rybak	
	and schools;	'Flyers' and promotional literature is already distributed to the venues described but its availability is dependant on those individual venues putting these out on display. Where possible, staff will distribute these to sites but this is not always possible due to resource implications.	_	Zoe Rayson lan Gray Susan Rybak	Dec 2009
(d)	That the Council produce an easy to read information booklet detailing all the leisure facilities and activities available and it be displayed in all leisure facilities, community and voluntary group buildings, libraries,	Main leaflets and website information for facilities and generic activities already exist and have recently been revised. As commented previously, these are distributed to a variety of outlets but may not alw ays be displayed. We would advise against producing	Within existing revenue budgets	Zoe Rayson lan Gray Susan Rybak	May 2009

NAME OF FORUM: Adult and Community Services Scrutiny Forum

NAME OF SCRUTINY ENQUIRY: Access to Recreation Facilities for Vulnerable / Older People

		EXECUTIVE RESPONSE / PROPOSED ACTION	FINANCIAL IMPLICATIONS	LEAD OFFICER	DELIVERY TIMESCALE
	schools and on the Council's website;	one booklet containing information on everything – there are some real 'shelf-life' implications with this, particular where activities can be of a short-term nature. As a consequence, we would propose continuing with the use of targeted promotions and flyers when new activities are developed.			
(e)	That the Council continues to work in partnership with key organisations to develop new recreational activities / initiatives which will improve the health and well being of the people in Hartlepool;	This is a main area of work for the Section and new partnerships for the development of new activities and initiatives are constantly sought. This is very much linked to our service plan for 2009/10 and wewill continue to deliver on this to a high level.	financial resources	Pat Usher	March 2010
(f)	That the Council supports the interim improvement measures and future investment in the town's leisure facilities to maintain and improve access, participation and satisfaction	Capital funding of approx. £700k has now been secured by the Section to improve access at MHLC. This will involve the creation of a new 'changing village' as well as a new foyer and reception area. This will build on	Funding secured	Pat Usher	Due to commence Sept. 2009. Anticpated completion April/May 2010

NAME OF FORUM: Adult and Community Services Scrutiny Forum

NAME OF SCRUTINY ENQUIRY: Access to Recreation Facilities for Vulnerable / Older People

	RECOMMENDATION	EXECUTIVE RESPONSE / PROPOSED ACTION	FINANCIAL IMPLICATIONS	LEAD OFFICER	DELIVERY TIMESCALE
(g)	That the Council considers the value of partnership working in any future plans for the building of a new leisure facility within Hartlepool.	the recent improvements already made at the site. The recent MORI Household survey already indicates a 4% increase in satisfaction levels with sport and recreation facilities. This is expected to take hartlepool into the top quartile. (tbc) Discussions have already been held with potential key partners regarding the redevelopment of the physical infræstructure of the MHLC site. As detailed in recent Cabinet reports, It is intended to engage with consultants with the necessary expertise to take the plan to the next level, primarily around the procurement and management of such a development.	external investment.	John Men near	Consultancy – complete by Sept. 2009

ADULT AND COMMUNITY SERVICES SCRUTINY FORUM

26 August 2009



Report of: Scrutiny Manager

Subject: SIX MONTHLY MONITORING OF AGREED ADULT

AND COMMUNITY SERVICES SCRUTINY FORUM'S

RECOMMENDATIONS

1. PURPOSE OF REPORT

1.1 To provide Members with the six monthly progress made on the delivery of the agreed scrutiny recommendations of this Forum.

2. BACKGROUND INFORMATION

- 2.1 As Members will be aware, Scrutiny Co-ordinating Committee on the 21 November 2007 approved the introduction of an electronic database to monitor the delivery of agreed scrutiny recommendations since the 2005/06 Municipal Year. Approval was also given for the introduction of a standardised six monthly cycle for the submission of progress reports to each Scrutiny Forum.
- 2.2 The newly created electronic database, to be known as the Scrutiny Monitoring Database, will run along the same principles as the Authority's former Corporate Performance Management Database and in addition to provision of standardised six monthly monitoring reports, as detailed above, will provide the Scrutiny Co-ordinating Committee with a breakdown of progress against all Scrutiny Forums' recommendations on an Annual basis. The introduction of the new database will also provide the ability to produce 'real time' information of the progression of recommendations upon request.
- 2.3 In accordance with the agreed procedure, this report provides for Members information details of progress made against each of the investigations undertaken by the Forum. Attached as **Appendix A** is a Summary Report that breaks down progress made by investigation and **Appendix B**, provides a detailed explanation of progress made against each recommendation.

3. RECOMMENDATIONS

3.1 That progress against the Adult and Community Services Scrutiny Forum's agreed recommendations, since the 2005/06 Municipal Year, be noted and explored further where appropriate.

Contact Officer:- Joan Wilkins - Scrutiny Manager

Chief Executive's Department - Corporate Strategy

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BACKGROUND PAPERS

No background papers were used in the preparation of this report.

Appendix B

Scrutiny Recommendations (Not Completed) Monitoring Report

August 2009

Department: * Scrutiny: Adult and Community Services Scrutiny Forum

Division: * Scrutiny Enquiry: *

N	No longer deliverable	1	7.7%
	Adult and Community Services Scrutiny Forum	1	
?	No update provided	6	46.2%
	Adult and Community Services Scrutiny Forum	6	
A	Expect to achieve target	4	30.8%
	Adult and Community Services Scrutiny Forum	4	
G	Target achieved	2	15.4%
	Adult and Community Services Scrutiny Forum	2	
T	otal No. of Actions		13

other LAs approaches to inform Hartlepool's final model.

August 2009

Scrutiny Recommendations (Not Completed) Monitoring Report

for care homes for older people

Progress Rec. No. Recommendation By When / Milestone Update on progress Lead Officer **SCRUTINY INVESTIGATION INTO:** THE QUALITY OF CARE HOMES PROVISION IN HARTLEPOOL ACS/08-9/5 Recommendation: ACS/08-9/5c That the Council regularly publicises its gradings for individual Care Homes along with the Commission for Social Care Inspection quality ratings on the Council's website, in 'Hartbeat', in the local press and public libraries in order to raise public awareness of ratings and to encourage care homes to raise their standards. CSCI reports with gradings are available now, via October 2009 The Council intends to publicise it's quality gradings Phil Hornsby ACS/08-9/5c a link, on the Council's website. once work completed in developing the new gradings http://www.hartlepool.gov.uk/site/scripts/document system s info.php?categoryID=4120&documentID=925 Further work on aligning the Council's grading of care homes and CSCI ratings will lead to the publicising of the combined gradings Recommendation: ACS/08-9/5d That the Council aligns its care home gradings with the Commission for Social Care Inspection quality ratings to provide an overall grading. Work has started with providers to October 2009 Proposal to introduce a single quality grading system Phil Hornsby ACS/08-9/5d develop the quality gradings approach has been put to providers. Officers are researching

Scrutiny Recommendations (Not Completed) Monitoring Report

Progress Rec. No.	. Recommendation	By When / Milestone	Update on progress	Lead Office
SCRUTINY INVE	STIGATION INTO:			
ACS/08-9/5	THE QUALITY OF CARE HOME	S PROVISION IN HARTLEP	OOL	
Recommendation:				
ACS/08-9/5e	That the Council considers in legally enforceable through to		e specifications the minimum standards which a 2001.	are not
ACS/08-9/5e	Revision of the current service specifications will include specific reference to the National Minimum Standards	October	2009 The current specification and contract documents are being reviewed and will include specific reference to National Minimum Standards. The Care Quality Commission are consulting on changes to the Regulations and Standards.	Phil Hornsby
Recommendation:				
ACS/08-9/5f	That, where possible, the Co the ground floor of any new		ential care developments to locate dementia un	its on
N ACS/08-9/5f	The Council in consultation with Planning and CSCI to consider whet this recommendation can be implemented.		2009 Informal discussions have concluded that frail older people, who may be immobile, are just as vulnerable as those with dementia. Therefore, it is felt it would not be beneficial to insist that dementia units be located on the	

ground floor of any development.

Scrutiny Recommendations (Not Completed) Monitoring Report

Progress Rec. No. Recommendation By When / Milestone Update on progress Lead Officer

SCRUTINY INVESTIGATION INTO:

ACS/08-9/5 THE QUALITY OF CARE HOMES PROVISION IN HARTLEPOOL

Recommendation:

ACS/08-9/5g That the Portfolio Holder for Adult and Public Health lobby the Government to review the personal expenses

allowance so that it is reflective of a person's needs and abilities.

ACS/08-9/5g

The Portfolio Holder for Adult and Public Health to approach the MP for Hartlepool to seek his support and write to the Department of Health requesting a review of the personal expenses allowance to reflect the person's needs and abilities.

July 2009 A review of Hartlepool's policy for disability related expenditure relating to personal allowances for individuals in Care Homes is under way. This will inform any approach made to the Department of Health

Jeanette Willis

Scrutiny Recommendations (Not Completed) Monitoring Report

Progress Rec. No.	Recommendation	By When / Milestone	Update on progress	Lead Officer
SCRUTINY INVES	STIGATION INTO: ACCESS TO RECREATION FACILITIES	FOR VULNERABLE	: / OLDER PEOPLE	
Recommendation:				
ACS/08-9/6c	•		forthcoming recreational activities to display i gs, libraries, doctors surgeries and schools.	n all
? ACS/08-9/6c(i)	As part of the new marketing strategy, this will developed as a gradual process as and when targeted promotional campaigns are utilised. There are shelf-life implications to consider an the expense of developing these.		2009 Awaiting Action Plan to be Presented to Forum on 26 August 2009.	Zoe Rayson
? ACS/08-9/6c(ii)	'Flyers' and promotional literature is already distributed to the venues described but its availability is dependant on those individual venues putting these out on display. Where possible, staff will distribute these to sites but t is not always possible due to resource implications.		2009 Awaiting Action Plan to be Presented to Forum on 26 August 2009.	Zoe Rayson

Progress Rec. No. Recommendation By When / Milestone Update on progress Lead Officer **SCRUTINY INVESTIGATION INTO:** ACCESS TO RECREATION FACILITIES FOR VULNERABLE / OLDER PEOPLE ACS/08-9/6 Recommendation: ACS/08-9/6d That the Council produce an easy to read information booklet detailing all the leisure facilities and activities available and it be displayed in all leisure facilities, community and voluntary group buildings, libraries, schools and on the Council's website. Main leaflets and website information for facilities May 2009 Awaiting Action Plan to be Presented to Forum on 26 Zoe Rayson ACS/08-9/6d and generic activities already exist and have August 2009. recently been revised. As commented previously, these are distributed to a variety of outlets but may not always be displayed. We would advise against producing one booklet containing information on everything - there are some real 'shelf-life' implications with this, particular where activities can be of a short-term nature. As a consequence, we would propose continuing with the use of targeted promotions and flyers when new activities are developed. Recommendation: That the Council continues to work in partnership with key organisations to develop new recreational ACS/08-9/6e activities / initiatives which will improve the health and well being of the people in Hartlepool. Pat Usher ACS/08-9/6e This is a main area of work for the Section and March 2010 Awaiting Action Plan to be Presented to Forum on 26 new partnerships for the development of new August 2009. activities and initiatives are constantly sought. This is very much linked to our service plan for 2009/10 and we will continue to deliver on this to a high level.

Progress Rec. No. Recommendation By When / Milestone Update on progress Lead Officer

SCRUTINY INVESTIGATION INTO:

ACS/08-9/6 ACCESS TO RECREATION FACILITIES FOR VULNERABLE / OLDER PEOPLE

Recommendation:

ACS/08-9/6f

That the Council supports the interim improvement measures and future investment in the town's leisure facilities to maintain and improve access, participation and satisfaction levels.

ACS/08-9/6f

Capital funding of approx. £700k has now been secured by the Section to improve access at MHLC. This will involve the creation of a new 'changing village' as well as a new foyer and reception area. This will build on the recent improvements already made at the site.

The recent MORI Household survey already indicates a 4% increase in satisfaction levels with sport and recreation facilities. This is expected to take hartlepool into the top quartile. (tbc)

May 2010 Awaiting Action Plan to be Presented to Forum on 26 August 2009.

Pat Usher

Recommendation:

ACS/08-9/6q

That the Council considers the value of partnership working in any future plans for the building of a new leisure facility within Hartlepool.



ACS/08-9/6g

Discussions have already been held with potential key partners regarding the redevelopment of the physical infrastructure of the MHLC site. As detailed in recent Cabinet reports, It is intended to engage with consultants with the necessary expertise to take the plan to the next level, primarily around the procurement and management of such a development.

September 2009 Awaiting Action Plan to be Presented to Forum on 26 August 2009.

John Mennear

ADULT AND COMMUNITY SERVICES **SCRUTINY FORUM**

26 August 2009



Scrutiny Manager Report of:

'PUTTING PEOPLE FIRST - THE DELIVERY OF Subject:

PERSONALISED ADULT SOCIAL CARE SERVICES'

SCOPING REPORT

1. **PURPOSE OF REPORT**

1.1 To make proposals to Members of the Adult and Community Services Scrutiny Forum for their forthcoming investigation into 'Putting People First -The Delivery of Personalised Adult Social Care Services'.

2. BACKGROUND INFORMATION

- 2.1 At the meeting of this Forum on 13 July 2009, Members determined their work programme for the 2009/10 Municipal Year. The issue of 'Putting People First - The Delivery of Personalised Adult Social Care Services' was selected as the first Scrutiny topic for consideration during the current Municipal Year. Furthermore, Members suggested that this investigation should form the major in-depth Scrutiny Inquiry for the Forum's 2009/10 work programme.
- 2.2 In 2006, the Health White Paper, 'Our Health, Our Care, Our Say: a New Direction for Community Services' outlined the key elements for the reform of the adult social care system in England. The aim of the reformed system being to 'respond to demographic changes presented by an aging population and the rising expectations of those who depend on social care for their quality of life and capacity to have full and purposeful lives'.
- 2.3 In delivering this major programme under the auspices of the 'Putting People First' Concordat, a clear shared vision and commitment has been established between the Local Government Association (LGA), the Association of Directors of Adult Social Services (ADASS), the NHS and others for the transformation of adult social care services. This shared commitment is illustrated in the document entitled 'Putting People First: A Shared Vision and

Commitment to the Transformation of Adult Social Care', the contents of which will be particularly useful to the Forum in terms of background information for the investigation. A copy of the executive summary of the document is attached at **Appendix A** for Members information. As addition background reading, a selection of extracts from the 2008/09 Self Assessment Survey, completed by the Adult and Community Services Department in May 2009, are also attached at **Appendix B** for Members information.

2.4 In selecting this investigation, Members had been keen to gain a clearer understanding of how personalised adult social care services are provided in Hartlepool and in particular self directed support and personal budgets. In doing this Members were keen to hear first hand the views and experiences of users of the service with a view to identifying ways of improving service provision for the benefit of all. In order to facilitate this, suggestions for the terms of reference, potential areas of enquiry / sources of evidence and timetable for the investigation are outlined in Sections 4, 5 and 8 of the report. Members views on these suggestions and the way forward for the conduct of the investigation are now being sought.

3. OVERALL AIM OF THE SCRUTINY INVESTIGATION

3.1 To investigate the implementation and impact of the 'Putting People First' agenda and the personalised delivery of adult social care services, including self directed support and personal budgets.

4. PROPOSED TERMS OF REFERENCE FOR THE SCRUTINY INVESTIGATION

- 4.1 The following Terms of Reference for the investigation/review are proposed:-
 - (a) To gain an understanding of the 'Putting People First' agenda and the delivery of personalised adult social care services in Hartlepool;
 - (b) To gain an understanding of the legislative framework governing adult social care services in Hartlepool;
 - (c) To examine how personalised adult social care services are being delivered in Hartlepool:
 - (d) To seek the views of people who use services on the process and delivery of adult social care services in Hartlepool;
 - (e) To seek and compare good practice from a comparable local authority in relation to the implementation of the 'Putting People First' agenda; and
 - (f) To identify suggestions for improvements to the implementation of the 'Putting People First' agenda in Hartlepool.

5. POTENTIAL AREAS OF ENQUIRY / SOURCES OF EVIDENCE

- 5.1 Members of the Forum can request a range of evidential and comparative information throughout the Scrutiny review.
- 5.2 The Forum can invite a variety of people to attend to assist in the forming of a balanced and focused range of recommendations as follows:-
 - (a) Member of Parliament for Hartlepool;
 - (b) Elected Mayor;
 - (c) Cabinet Member with Portfolio Holder for Adult and Public Health Services;
 - (d) Director and / or appropriate officers from the Adult and Community Services Department;
 - (e) Local residents and people who use services;
 - (f) Interested Groups (i.e. Older Persons Local Implementation Team, Mental Health Local Implementation Team, Carers' Strategy Group, 50+ Forum, Life Chances Partnership Board, Learning Disabilities Partnership Board, Hartlepool Carers, Community Consultation Group (MIND), Community Network.);
 - (g) National Expert from 'In Control';
 - (h) Representatives of community groups and minority communities of interest or heritage; and
 - (i) Ward Councillors.
- 5.3 The Forum may also wish to refer to a variety of documentary / internet sources, key suggestions are as highlighted below:-
 - (a) Our Health, Our Say White Paper 2007; and
 - (b) Putting People First: A Shared Vision and Commitment to the Transformation of Adult Social Care.

6. COMMUNITY ENGAGEMENT / DIVERSITY AND EQUALITY

6.1 Community engagement plays a crucial role in the Scrutiny process and paragraph 5.2 details who the Forum could involve. However, thought will need to be given to the structure in the way that the Forum wishes to encourage those views.

6.2 In addition, diversity issues have been considered in the background research for this enquiry under the Equality Standards for Local Government. As such the views of local diversity groups will be sought throughout the inquiry where felt appropriate and time allows. Consequently, consideration has been given as to how the views of people from minority communities of interest or heritage (for example, people with disabilities, people with learning disabilities, people with mental health problems, black and minority ethnic people, and Lesbian, Gay, Bisexual and Transgender people), which may not be gathered through the usual community engagement routes, can be included over the course of the inquiry.

7. REQUEST FOR FUNDING FROM THE DEDICATED OVERVIEW AND SCRUTINY BUDGET

- 7.1 Consideration has been given, through the background research for this scoping report, to the need to request funding from the dedicated Overview and Scrutiny budget to aid Members in their enquiry.
- 7.2 During the course of this 'scoping' meeting, consideration will need to be given to the undertaking of a possible site visit, to observe good practice in another comparable local authority. Should such a visit be deemed appropriate by the Forum, consideration will need to be given to a request for additional funding from the dedicated overview and scrutiny budget.
- 7.3 Over and above the undertaking of a possible site visit, no further areas have been identified at this time for funding from the dedicated overview and scrutiny budget to support Members in their investigation. It is, however, recognised that Members may wish to seek additional funding over the course of the investigation and the pro forma attached at **Appendix C** outlines the criteria on which a request to Scrutiny Co-ordinating Committee will be judged.

8. PROPOSED TIMETABLE OF THE SCRUTINY INVESTIGATION

8.1 Detailed below is the proposed timetable for the review to be undertaken, which may be changed at any stage:-

? October 2009 (additional meeting)

- 'Setting the Scene' (Report / presentation to cover *Tems of Reference* (a) and (b));
- Evidence from the Portfolio Holder for Adult and Public Health Services*; and
- Evidence from the Member of Parliament for Hartlepool, Iain Wright*.

^{*}Subject to availability

? December 2009 / January 2010 - Site Visit (to explore examples of good practice).

13 January 2010 - Reports / presentations:

- Report / presentation covering Tems of Reference (c) and (e);
- Evidence from a national expert on local progress and how service provision in Hartlepool compares nationally (Julie Stansfield from 'In Control');
- Feedback from the 'good practice' Site Visit; and
- Identification by the Forum of suggestions for improvements to the implementation of the 'Putting People First' agenda in Hartlepool. (covering Term of Reference (f))

23 February 2010 - Specific session to:

- Hear the views of residents, users of the service and interested groups* (covering Term of Reference (d); and
 - * Covering report to include case studies for Members consideration.
- Identify suggestions for improvements to the implementation of the 'Putting People First' agenda in Hartlepool. (covering Term of Reference (f))
- 31 March 2010 Consideration of Draft Final Report.
- **23 April 2010** Consideration of Final Report by the Scrutiny Co-ordinating Committee.
- **10 or 24 May 2010** Consideration of Final Report by the Cabinet (tentative date).

9. RECOMMENDATION

9.1 Members are recommended to agree the Adult and Community Services Scrutiny Forum's remit of the Scrutiny investigation as outlined in paragraph 4.1.

Contact Officer:- Joan Wilkins – Scrutiny Manager

Chief Executive's Department - Corporate Strategy Hartlepool Borough Council Tel: 01429 284142 Email: joan.wilkins@hartlepool.gov.uk

BACKGROUND PAPERS

The following background paper(s) was/were used in the preparation of this report:-

(i) Putting People First: A Shared Vision and Commitment to the Transformation of Adult Social Care.



Putting People First

A shared vision and commitment to the transformation of Adult Social Care







Putting People First

A shared vision and commitment to the transformation of Adult Social Care

Introduction

The Our health, our care, our say White Paper and statements in the 2007 budget report and Comprehensive Spending Review announcement outlined the key elements of a reformed adult social care system in England; a system able to respond to the demographic challenges presented by an ageing society and the rising expectations of those who depend on social care for their quality of life and capacity to have full and purposeful lives.

Demography means an increasing number of people are living longer, but with more complex conditions such as dementia and chronic illnesses. By 2022, 20% of the English population will be over 65. By 2027, the number of over 85 year-olds will have increased by 60 %. People want, and have a right to expect, services with dignity and respect at their heart. Older people, disabled people and people with mental health problems demand equality of citizenship in every aspect of their lives, from housing to employment to leisure. The vast majority of people want to live in their own homes for as long as possible.

In the context of changing family structures, caring responsibilities will impact on an increasing number of citizens. Examples include an eighty-year-old woman having to cope with her husband's dementia, a young mum pursuing a career and bringing up a family while looking after her elderly parent, a business executive working overseas whose widowed mother is hospitalised overnight following a stroke and older parents seeking for the right support to ensure their adult son with a learning disability can live independently.

We agree that there is a need to explore options for the long term funding of the care and support system, to ensure that it is fair, sustainable and unambiguous about the respective responsibilities of the state, family and individual. As stated in the Comprehensive Spending Review (CSR) announcement 2007, the Government will produce a Green Paper following extensive public consultation setting out the key issues and options for reform. Notwithstanding the Green Paper on longer-term reform of the funding system and following the recent CSR settlement, there is now an urgent need to begin the development of a new adult care system. A personalised system which can meet the challenges described earlier and is on the side of the people needing services and their carers. While acknowledging the Community Care legislation of the 1990s was well intentioned, it has led to a system which can be over complex and too often fails to respond to people's needs and expectations.

This landmark protocol seeks to set out and support the Government's commitment to independent living for all adults. It also outlines the shared aims and values, which will guide the transformation of adult social care. It is unique in establishing a collaborative approach between central and local Government, the sector's professional leadership, providers and the regulator. It seeks to be the first public service reform programme which is co-produced, co-developed, co-evaluated and recognises that real change will only be achieved through the participation of users and carers at every stage. It recognises that sustainable and meaningful change depends significantly on our capacity to empower people who use services and to win the hearts and minds of all stakeholders', especially front line staff. Local government will need to spend some existing resources differently and the Government will provide specific funding to support system-wide transformation through the Social Care Reform Grant, in line with agreements on new burdens.

We do not seek to prescribe uniform systems and structures in every part of the country. However, access to high quality support should be universal and available in every community. Some of these reforms can be made within the parameters of the local adult social care policies. Others require adult social care to take a leadership role within local authorities, across public services and in local communities.

Ultimately, every locality should seek to have a single community based support system focussed on the health and wellbeing of the local population. Binding together local Government, primary care, community based health provision, public health, social care and the wider issues of housing, employment, benefits advice and education/training.

This will not require structural changes, but organisations coming together to re-design local systems around the needs of citizens. The new local performance framework, which covers the delivery of all services by local government working alone or in partnership, will help to create an improved approach to local partnership, enabling local authorities and partners to work together to lead their area and better meet the public's needs. The transformation of adult social care will be delivered through the new performance framework, and will draw on new mechanisms within the framework, such as the new statutory requirement on local authorities and PCTs to undertake a Joint Strategic Needs Assessment, to ensure that the transformation process really delivers on the challenges for each local area.

In future organisations will be expected to put citizens at the heart of a reformed system. Incentives will include the new focus of the local performance framework, guidance on commissioning for health and wellbeing, Human Rights legislation, and any international obligations such as the new UN Convention on the Rights of Persons with Disabilities.

2 Values

Ensuring older people, people with chronic conditions, disabled people and people with mental health problems have the best possible quality of life and the equality of independent living is fundamental to a socially just society.

For many, social care is the support which helps to make this a reality and may either be the only non-family intervention or one element of a wider support package.

The time has now come to build on best practice and replace paternalistic, reactive care of variable quality with a mainstream system focussed on prevention, early intervention, enablement, and high quality personally tailored services. In the future, we want people to have maximum choice, control and power over the support services they receive.

We will always fulfil our responsibility to provide care and protection for those who through their illness or disability are genuinely unable to express needs and wants or exercise control. However, the right to self-determination will be at the heart of a reformed system only constrained by the realities of finite resources and levels of protection, which should be responsible but not risk averse.

Over time, people who use social care services and their families will increasingly shape and commission their own services. Personal Budgets will ensure people receiving public funding use available resources to choose their own support services — a right previously available only to self-funders. The state and statutory agencies will have a different not lesser role — more active and enabling, less controlling.

3 A personalised Adult Social Care System

The key elements will be:

3.1 Local authority leadership accompanied by authentic partnership working with the local NHS, other statutory agencies, third and private sector providers, users and carers and the wider local community to create a new, high quality care system which is fair, accessible and responsive to the individual needs of those who use services and their carers.

The current Darzi review of the NHS has recognised the relationship between health, social care and wider community services will be integral to the creation of a truly personalised care system.

- 3.2 Agreed and shared outcomes which should ensure people, irrespective of illness or disability, are supported to:
 - · live independently;
 - · stay healthy and recover quickly from illness;
 - exercise maximum control over their own life and where appropriate the lives of their family members;
 - sustain a family unit which avoids children being required to take on inappropriate caring roles;
 - participate as active and equal citizens, both economically and socially;

- have the best possible quality of life, irrespective of illness or disability;
- · retain maximum dignity and respect.

3.3 System-wide transformation, developed and owned by local partners covering the following objectives:

- A joint strategic needs assessment undertaken by local authorities, relevant PCT and NHS providers. This should be undertaken in conjunction with other local needs assessments and plans (for example, local housing strategies). The joint strategic needs assessment and these other plans will inform the Sustainable Community Strategy. It will also be accompanied by an integrated approach with local NHS commissioners and providers to achieve specific outcomes on issues including:
 - relevant preventative public health policies, e.g. infection control and fall reduction strategies;
 - hospital discharge arrangements;
 - the provision of adequate intermediate care;
 - the management of long term conditions;
 - packages of support with a health and/or nursing care element;
 - co-located services, bringing together social care; primary care and other relevant professionals;
 - community equipment services;
 - universal information, advice and advocacy;
 - carer support and public/patient involvement;
 - complaints systems.

The full range of relevant local statutory, voluntary and private sector organisations need to be fully engaged. Where appropriate, Local Area Agreements will be the vehicle to bring together national policy with local priorities, informed by the vision developed by local partners. This will mean organisations being willing to allocate funding to others, if this will have greater impact on shared outcomes. The NHS Operating Framework will reflect a new shared responsibility for the health and wellbeing of citizens, families and communities.

 Commissioning which incentivises and stimulates quality provision offering high standards of care, dignity and maximum choice and control for service users.

- Supports third/private sector innovation, including social enterprise and where appropriate is undertaken jointly with the NHS and other statutory agencies eg Learning and Skills Council, employment services, and Housing Authorities. This must be shaped by the Joint Strategic Needs Assessment.
- A locally agreed approach, which informs the Sustainable Community Strategy, utilising all relevant community resources especially the voluntary sector so that prevention, early intervention and enablement become the norm. Supporting people to remain in their own homes for as long as possible. The alleviation of loneliness and isolation to be a major priority. Citizens live independently but are not independent; they are interdependent on family members, work colleagues, friends and social networks.
- A universal information, advice and advocacy service for people needing services and their carers irrespective of their eligibility for public funding. A 'first shop stop', which could be accessed by phone, letter, e-mail, internet or at accessible community locations. Key strategic partners to be the Pensions Agency and relevant voluntary organisations. The LinkAge Plus pilots are providing strong evidence of the benefits for older people of this approach. Personal advocates to be available in the absence of a carer or in circumstances where people require support to articulate their needs and/or utilise the personal budget.
- A common assessment process of individual social care needs with a greater emphasis on self-assessment. Social workers spending less time on assessment and more on support, brokerage and advocacy.
- Person centred planning and self directed support to become mainstream and define individually tailored support packages. Telecare to be viewed as integral not marginal.
- Personal budgets for everyone eligible for publicly funded adult social care support other than in circumstances where people require emergency access to provision. Lord Darzi's recent NHS next stage review interim report suggested that in the future personal budgets for people with long-term conditions could include NHS resources.

- Direct payments utilised by increasing numbers of people, as defined by locally set targets in LAAs.
- Family members and carers to be treated as experts and care partners other than in circumstances where their views and aspirations are at odds with the person using the service or they are seeking to deny a family member the chance to experience maximum choice and control over their own life. Programmes to be supported which enable carers to develop their skills and confidence.
- A transformed community equipment service, consistent with the retail market model.
- Systems which support integrated working with children's services, including transition planning and parent carers, and identifying and addressing concerns about children's welfare.
- Support for at least one local user led organisation and mainstream mechanisms to develop networks which ensure people using services and their families have a collective voice, influencing policy and provision.
- Systems which act on and minimise the risk of abuse and neglect of vulnerable adults, supported by a network of "champions", including volunteers and professionals, promoting dignity in local care services.
- Local workforce development strategies focussed on raising skill levels and providing career development opportunities across all sectors.
 Strategies to be co-produced, co-developed and co-evaluated with the private and voluntary sectors.

Adult social care will also take responsibility for championing the rights and needs of older people, disabled people, people with mental health needs and carers within the local authority, across public services and in the wider community. Early priorities will be intergenerational programmes involving older people as active citizens, integrated policy development which supports independent living (housing, access to work, education/training and leisure) including transition planning for young disabled people and local action to tackle the stigma faced by people with mental health problems.

4 Support for Reform

The Department of Health will provide funding over the next three years to support system-wide transformation in every local authority. Local authorities and their partners will agree together how this funding will be spent to develop the personalised system described in Section 3.

A detailed prospectus consistent with our core principles will be published in December.

In line with the soon to be published National Improvement and Efficiency Strategy (NIES), Department of Health (DH), will refocus the relevant activities of Care Services Efficiency Delivery Programme (CSED) and Care Services Improvement Partnership (CSIP) and seek partnerships with Regional Improvement and Efficiency Partnerships, local consortia, In Control and other 'change agents' to ensure every local authority has access to high quality support for the necessary change programme.

DH, and where appropriate, other Government Departments, will ensure new capital investment supports a more integrated approach to health and wellbeing in every community.

DH will lead a new cross-ministerial group including the Treasury, Department for Communities and Local Government (CLG), Department for Work and Pensions (DWP), Department for Innovation, Universities and Skills (DIUS) and Department for Children, Schools and Families to ensure a joined-up approach to adult social care transformation and the review of long-term funding. The need for legislative and regulatory changes will be considered in consultation with local Government, providers and other stakeholders.

A new skills academy is being developed with partners to support world class commissioning and leadership in social care. Skills for Care and the General Social Care Council (GSCC) will provide leadership to ensure entry level training, continued professional development and workforce registration to reflect the new skills required in a personalised system. In taking this forward, we will ensure that opportunities for co-ordination and joint capacity building are exploited with the World Class Commissioning programme for PCTs and those programmes in Children's services and the rest of local government. DH will also work with CLG and the Local Government Association (LGA) to consider how best to take this forward in the context of the NIES.

Social Care Institute for Excellence (SCIE) will be expected to promote, identify, and disseminate best practice and innovation, acting as a catalyst for system-wide transformation. Commission for Social Care Inspection (CSCI) and their successor regulator will align their approach to inspection and regulation with the reform agenda, in the context of the Comprehensive Area Assessment (CAA).

5 Timescale

Every local transformation process will include clear benchmarks, timescales and designated delivery responsibilities.

By the end of the CSR period in March 2011, we expect people who use services and their carers as well as front line staff and providers to experience significant progress in all local authority areas. Incremental progress should be evident over a shorter period of time.

6 Engagement/ Consultation

If we are to win the hearts and minds of all stakeholders, especially frontline staff, it is essential that they are participants in the change programme from the design stage onwards.

It is hoped that every local authority will create forums, networks and task groups which involve staff across all sectors, people who use services and carers as active participants in the change process.

7 Conclusion

We recognise that organisations such as In Control, other voluntary organisations and some local authorities have been at the cutting edge of innovation in adult social care for some time. The Individual Budget, Partnerships for Older People and LinkAge Plus pilots have begun to demonstrate what works as well as identifying barriers to progress.

However, national and local leadership is now essential if we are to achieve system-wide transformation. This is necessary because of demographic realities, but driven by a shared commitment to social justice.

This protocol seeks to be a catalyst – not a straightjacket – for innovation and is the first stage in a unique attempt to co-produce, co-develop and co-evaluate a major public service reform.

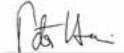
We will judge our success through the views and experiences of those who use the social care system, progress in supporting adults to live independently, objective measures of performance, and the job satisfaction of those working at all levels of the system.

In the future, adult social care will touch the lives of an increasing number of families.

By signing this historic protocol, we accept our shared responsibility to create a high quality, personalised system which offers people the highest standards of professional expertise, care, dignity, maximum control and self determination.



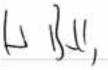
Secretary of State for Health



Secretary of State for Work and Pensions



Secretary of State for Communities and Local Government



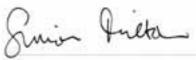
Secretary of State for Children, Schools and Families



Chief Secretary to the Treasury



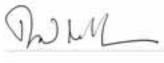
Secretary of State for Innovation, Universities and Skills



Chair, Local Government Association



President, Association of Directors of Adult Social Services



Chief Executive, NHS



Chief Executive, NHS Confederation



Chair, Society of Local Authority Chief Executives



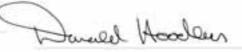
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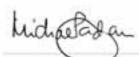
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National Care Association



UK Home Care Association

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Executive Director, National Care Forum





















Extracts from Self Assessment Survey 2008/09

The Vision

Choice and control is at the heart of an ambitious vision for Hartlepool in transforming adult social care. The vision addresses the challenges for social care of a changing and ageing population, higher expectations and individuals desire to retain control over as many aspects of their own lives as possible for as long as possible.

The vision aims to help people maintain their independence by giving them greater choice and control over the way in which their needs are met. An ambitious plan to ensure that all individuals are offered a personal budget by 2011 is well advanced.

The Process

Hartlepool is an In-Control Total Transformation site. Other than people in crisis, everyone now undertakes a self assessment with appropriate support and this informs their annual allocation.

The Single Assessment Process (SAP) is used in conjunction with our revised Self Assessment Questionnaire (SAQ). People are assisted to develop a support plan that meets their needs. Entitlement to resources is established early in the process using the SAQ and Resource Allocation System.

As of 31 March 2009 there have been 1,235 supported Self Assessment Questionnaires completed of which 961 have an active support plan. During 2008/09 there have been several amendments to the self assessment questionnaire as a result of feedback from people involved in the process. The new Self Assessment Questionnaire (V5.5) aligns self assessment and overview of the Single Assessment Process (SAP) whilst remaining transparent and easy to use. There is a real sense of ownership of the process within the social care workforce.

Individuals are provided with an information pack following an initial visit by an appropriate care coordinator. The pack includes a Self Assessment Questionnaire and supplementary reference material to support the individual through the seven step process. Individuals are offered appropriate support which can include support from a carer, care manager, broker or family member.

The weekly risk enablement panel acts as a conduit to ensure support plans meet assessed needs and consistency in approach ands offers support and advice to individuals and care co-ordinators on self directed support.

The panel also measures quality and provides opportunities for learning and sharing best practice, ensuring that risks are addressed appropriately and that this is supporting the cultural change with staff. This change is further measured through the implementation of service user sampling whereby an average of ten people per month who have or are using services are reviewed

by senior mangers. This is undertaken through a 1-1 meeting with a service user enabling individuals to report on their experiences of using services and the self directed support system. The information is reported back to commissioners to influence change and measure the impact of self directed support.

Self Directed Support

The Self Directed Support Team (now the Social Care Transformation Team) has developed a programme of work supporting providers to come to terms with and develop the potential to change services to meet the expectations of self directed support. The approach has moved towards developing more flexibility to support the changing needs of individuals. The team provides a link with other funding streams for example Independent Living Fund (ILF), Access to Work (A2W) and Supporting People. The team also embark on work at a national level and have influenced policy change and best practice for complex issues in respect of personalisation.

During 2008/09 the Self Directed Support Team assisted the cultural change necessary for transformation. Examples of good practice include the development of a helpline for Self Directed Support, training and awareness sessions for internal staff, voluntary sector organisations and user groups and management of the transition of direct payment support to three new providers.

The success of our transformation to date in Hartlepool has enabled individuals to tell their story at local regional and national events.

As a Total Transformation site Hartlepool are involved in 3 of the 10 Total Transformation Innovation Groups. The workforce development group is identifying the impact of self directed support on the workforce, including non regulated services for example Personal Assistants.

Extracts from Outcome 4 – Choice and Control

Impact on Commissioning

There have been fundamental changes to Hartlepool's view of commissioning over the past year, in response to the Putting People First agenda.

The Department's total transformation approach to personal budgets means that almost 1,000 people now have personal budgets and all people referred for services (other than those in crisis) go through the process of supported self assessment, receiving an indicative resource allocation and support planning, enabling them to commission their own care and support. Moving to a system where an increasing number of individuals are the commissioners of their own support, either through use of a Direct Payment or through having meaningful input into planning how their support is delivered by contracted services, has resulted in fundamental changes to the role of care managers (whose role now encompasses supporting people to assess themselves as

well as supporting people to commission services that enable them to live their lives).

These changes will increasingly impact on the role of Strategic Commissioners and how commissioning priorities are determined. In addition to formal assessment of needs through the Joint Strategic Needs Assessment, informal mechanisms such as the Risk Enablement Panel exist to identify where there are gaps in current services and opportunities to shape the market. The information that is provided through these routes, as well as intelligence about usage of more traditional services (including quarterly monitoring of occupancy levels within care homes) builds a picture of how services need to shift to meet changing needs and demands.

There are numerous examples of how this has already begun to have an impact locally. People are choosing to use their personal budgets to access a wide range of services and this is reflected in, for example, reduced numbers of people with a learning disability accessing buildings based respite services. Alternative ways of meeting peoples needs for short breaks have included use of a specially adapted caravan provided by HUDSA (Hartlepool United Disabled Supporters Association), paying for holidays with friends or family or in one case, purchase of a caravan that will meet the identified needs of two people for many years to come.

Reduced dependence on more traditional services by some people has created opportunities for new services to develop. Extra care provision continues to grow as an alternative to residential care and user led organisations such as PROP (Peoples Relief of Pressure) have developed as an alternative to more traditional day services for people with mental health needs.

Regular Provider Forums that engage providers of residential and nursing care are also used to raise awareness of the Putting People First agenda and personal budgets. There are already examples of providers showing real commitment to this agenda and explaining how they can shape their services to meet future needs. A number of providers are actively considering diversification into supported or independent living or the possibility of changing their registration to meet areas where demand is higher (such as provision of nursing care for older people who have mental health needs).

People who choose to use Direct Payments now have a choice of three Direct Payment support providers who offer a range of services including payroll support, nominee accounts and training for personal assistants.

It is not just through Direct Payments that people who use services have been able to commission their own support. A recent piece of work led by the Self Directed Support Team enabled eight people with learning disabilities who lived in a supported living scheme to understand their resource allocations and to commission individual packages of support from a trusted provider, remaining in an environment that met their needs and which they had actively chosen to make their home.

The number of carers accessing Direct Payments has also increased significantly and this is seen as a key element of the Departments strategy to support carers to continue in their caring role for as long as they wish to do so.

Understanding Local Needs and Priorities

Through the deployment of Personal Budgets and Direct Payments, people who use services are increasingly becoming commissioners of their own support, and are best placed to understand their own individual needs and commission services that enable them to live their own lives. The impact of this on the local market is already being seen through changes to traditional services and the development of alternative options. People are making informed choices about their own needs and how they can best be met which are manifested in people using caravans for short breaks or choosing to access snooker clubs, luncheon clubs and tea dances rather than building based day services. While the resource that is used may be the same, the outcomes for people and how they value the services they choose to use in living in their lives is greatly improved. There are also examples of people using their resource allocations innovatively and reporting improved outcomes while using less resource. In some cases, people are choosing to use their Direct Payment to pay for something which will be of benefit for years to come. Examples of this include someone buying a dog with the aim of reducing social isolation and loneliness and increasing opportunities to exercise or a family who have purchased a caravan to meet the needs of two young men with learning disabilities who do not wish to access buildings based respite services but want the flexibility of being able to access breaks as and when they choose with family members, friends or paid carers. In these cases, a one off purchase at the beginning of the process will create longer term efficiencies as well as far better outcomes for the people involved.

The department has made a commitment to undertake a longitudinal study of the first 850 people who accessed personal budgets to track their journeys through the system. This will produce valuable data that evidences all of the stages of the process from indicative resource allocation through the application of a deflator to the level of resource taken for the year, how it is deployed and how this feeds in to an annual review process.

The implementation of the Resource Allocation System (RAS) in Hartlepool, together with a review of the contributions policy, has reduced inequality for people and ensured that everyone who is assessed as able to make a contribution does so on an equitable basis. This is achieved by taking a contribution based on the allocation that a person takes for the year rather than on an individual service basis. This created inequities in the past as people contributed to the cost of home care services but not for day services.

Extracts from Outcome 9 – Commissioning and Use of Resources

APPENDIX C

PRO-FORMA TO REQUEST FUNDING TO SUPPORT CURRENT SCRUTINY INVESTIGATION

Title of the Overview and Scrutiny Committee:
Title of the current scrutiny investigation for which funding is requested:
To clearly identify the purpose for which additional support is required:
To outline indicative costs to be incurred as a result of the additional support:
To outline any associated timescale implications:
To outline the 'added value' that may be achieved by utilising the additional support as part of the undertaking of the Scrutiny Investigation:

To outline any requirements / processes to be adhered to in accordance with the Council's Financial Procedure Rules / Standing Orders:
To outline the possible disadvantages of not utilising the additional support during the undertaking of the Scrutiny Investigation:
To outline any possible alternative means of additional support outside of this proposal: