



<u>Committee and Date</u> Council 23 July 2015 10.00 am	Item 8 Public
--	------------------------------------

PORTFOLIO HOLDER FOR ADULT SERVICES AND LOCAL COMMISSIONING (SOUTH)

Lead Member: Councillor Lee Chapman
Email: Lee.Chapman@shropshire.gov.uk

1. Introduction

1.1 This has been another extremely challenging but rewarding year as the Portfolio Holder for Adult Services. This period has had a focus on consolidation, transformation, managing our finances and strengthening partnerships. It has also seen significant work to ensure key preparation was carried out with robust planning and then from 1st April 2015 the implementation of the Care Act. This brought with it new and additional responsibilities. The implementation of the Better Care Fund (BCF), at a local level provided further opportunity to develop and formalise our partnership arrangement with the local NHS.

1.2 In addition we continued the work in the following key areas:

- New Operating Model
- Day Services Transformation
- Housing Services
- Responding to and supporting 'Urgent Care System pressures
- Integrated Community Services Development (ICS)

2. New Operating Model

2.1 Members will be aware of the transformational activities that have been taking place within Adult Social Care over the previous 18 months ago which saw a redefining of the approach that the council takes when responding to and supporting vulnerable people. This saw a move to greater focussing on working much earlier with families and individuals, exploring alternatives to what had often been very traditional models of support, greater utilisation of the strengths and capacity of individuals, their families and that communities offer as part of the support arrangement. This provides an earlier intervention or person focussed support and contributed to reducing the cost pressures on the service.

- 2.2 The last 12 months has seen the new operating model, as it is described, growing from strength to strength with the initial focus being on ensuring families and individuals receive the right type support when they contact us the first time and I am pleased to report that over 75% of individuals who contact us through First Point of Contact (FPoC) have their query or need met during the initial telephone conversation without any ongoing funded support requirement from the council. This has seen, as a result of the follow up, us making with families, an increase in the satisfaction of individuals and their families.
- 2.2 The service has developed the model further by introducing 'Let's Talk Local' whereby in 14 different locations across the county on a weekly basis individuals can meet on a formal and increasingly informal basis with our staff or our partners as part of this early intervention and support arrangement.
- 2.3 The 'Let's Talk Local' model is uniquely different than any other arrangement that exists nationally and is getting increased interest as does our focus on the asset based model utilising community capacity even more so.

3. Resilient Communities

- 3.1 The service has been working with design team in IP&E to explore how we can utilise across communities an asset based approach and we've had some significant success as we have prototyped this in Craven Arms. The prototype focussed on utilising the professional skills of staff within adults and housing alongside community resources and has shown how much more innovation is possible.
- 3.2 The culture within the service and communities is developing away from a primary reliance on council funding to one that sees the assets in communities and localities as being the first to utilise. There have been cross directorate exploration with Children's and commissioning to see how this model can work in those areas and findings of the prototype are promising. This work fully complements and adds to the new operating model.

4. Day Services

- 4.1 Council will be well aware of the programme of transformation set out over 2 years ago for our day services in Shropshire. I am pleased to advise that the Transformation Programme has progressed well with a number of innovative service delivery taking place and the overall transformation is near completion.
- 4.2 In the last year we have seen the transformation of Day Services in Oswestry with consolidation of services on the Avalon site following a significant refurbishment of facilities there. We have supported a change in provider at the Bradbury Centre in Whitchurch, increased the range of partnership involvement in a number of centres such as, Ellesmere

Day Centre and Helena Lane and successfully worked with alternative providers to support individuals such as the Mayfair Centre in Church Stretton and the Community Land Trust in Oak Farm.

- 4.3 Our approach to seek to find the most positive delivery vehicle for our day services, I believe, has resulted in a broader range of support options now being available and improved outcomes including better value for money being achieved. There remains further work to be done to complete the transformation of Day Services which will be carried out in the next 12 months.

5 Responding to and Supporting Urgent Care Pressures

- 5.1 Members will be aware of the increasing pressures faced by the NHS nationally and locally and adult services also experienced increasing numbers of people having entered the local acute hospital then requiring significant ongoing social care support to return home. As part of the 'Urgent Care System' we have worked closely with NHS and voluntary sector colleagues to improve the discharge processes for individuals.
- 5.2 The services have also in partnership with the Shropshire CCG and Shropshire Community Trust implemented the integrated community services (ICS) team which now supports in a truly integrated single team manner both admission avoidance and better hospital discharge. Unfortunately, the increased pressure within the urgent care system has contributed to an increased number of delays, both attribute to health and social care

6 ICS (Integrated Community Services)

- 6.1 The specification for this service was developed jointly between Shropshire Council and Shropshire CCG. The implementation and operation of the services is currently carried out jointly between Shropshire Council and Shropshire Community Health Trust with staff working together in truly integrated teams, north, central and south, providing support to people primarily who are in hospital requiring support upon discharge but ultimately also working with individuals to avoid the need for hospital admission in the first instance. This team is developing its own unique culture sometimes defined as 'Purple' reflecting the approach of looking for real imaginative outcome focussed alternatives in supporting people, building upon the individual professional skill set as well as the organisational support.

7. Housing Services

- 7.1 There were organisational changes with part of Housing services moving into Adult Services in September 2014. This has allowed us to really explore at a practical level the benefits of aligning social and housing together. Some initial 'early wins' have seen individuals being able to access housing and housing changes quicker enabling them to leave hospital sooner.

7.2 It has also allowed for a much more proactive and targeted support for individuals utilising housing stock in a different way. This is still early days in that relationship but I am pleased with the work to date. Significant activity is also underway working with housing partners to deliver differently services commissioned through the sustained contact.

8. Care Act 2014

8.1 Members will be aware of the significant preparation and change that has resulted from the implementation of phase 1 of the Care Act in April 2015. This required significant changes to the way the council works, system and process it has in place it has in place and the focus on individuals. Through robust project management I am pleased to report that the council went live with all of the new responsibility (changed eligibility, new responsibilities for carers, statutory changes to safeguarding etc.) We are monitoring closely the impact of these changes to identify any further activities that maybe required as well as continuing the work to prepare for phase 2 of the Care Act which is due commence from April 2016.

8.2 The significant challenges we face with the implementation of the Care Act are only starting to emerge and we are revisiting both the financial assumptions and the system readiness as part of that work. It was a positive recognition on both the councils approach to supporting its vulnerable citizens and its readiness for the Care Act that saw it sited in a Guardian supplement as one of those councils is a "Trail Blazer".

8.3 Safeguarding has always been one of the highest priorities for council and officers and with the new responsibilities surrounding Safeguarding contained within the act, the council with the statutory partners with the police and health have set up a Shropshire Adult Safeguarding Board. This is a significant move away from the historical arrangement whereby the Safeguarding Board was held jointly with Telford and Wrekin and allows us to ensure the safeguarding activities are Shropshire focussed and Shropshire prioritised. The board is now in operation with a newly appointed independent chair and is working to ensure the new responsibilities and requirement of the act are firstly fully understood by everyone and secondly implemented accordingly.

9. Managing our Money

9.1 There have been and continue to be significant pressures in managing adult social care resources. Despite the positive work and new operating models that have been implemented, (managing increasing levels of demand without any need for ongoing support) the demand on ASC resources continues to increase. Increasing numbers of people are presenting following hospital admission requiring high levels of funding who have not been in contact with council services previously. In addition, there have been a significant increase in the number of people who have previously arranged and funded their own care now asking the council for financial support (self-funders). These demands are very difficult and at times impossible to avoid.

- 9.2 The service is working to ensure every possible opportunity to help people make better choices and to continue to recover with a subsequent reduction in funding requirement are carried out. The service has made significant progress in delivering against savings and continues to work to deliver savings 15/16 and beyond. Work is underway with Cabinet and Directors to ensure the expenditure on ASC is absolutely appropriate and that the budget required to support both current and future required has been identified accordingly.

Conclusion

I am pleased to present this report to Council, it is important that we recognise both the challenges and the journey that the council and services supporting ASC have made during this last 12 months and to continue to support the transformational activities and journey moving forward.