

“Knowing what’s right for me”

The Transformation of Adult Social Care

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The Jargon

- Self Directed Support
- Personalisation
- Individual Budgets
- Person Centred Planning
- Putting People First
- Direct Payments
- Co-production
- Transformation (TASC)

All terms which refer to a Government led initiative to give LA adult social care service users more choice and control of the support they receive, to be introduced during the period 2009-2011.

“Knowing what’s right for me”

..is LBC’s programme for the Transformation of Adult Social Care with the emphasis being on increased choice and control for self-funders, service users and carers.

Everyone should now have received a copy of the staff guide

Clear central government agenda



- Putting People First (December 2007) set out a “shared vision and commitment to the transformation of Adult Social Care”.
- “People who use social care services and their families will increasingly shape and commission their own services”
- “The state and statutory agencies will have a different not lesser role – more active and enabling, less controlling”.

Personalisation means:

- finding new collaborative ways of working and developing local partnerships, which produce a range of services for people to choose from and opportunities for social inclusion
- tailoring support to people's individual needs
- recognising and supporting carers in their role, while enabling them to maintain a life beyond their caring responsibilities
- a total system response so that universal and community services and resources are accessible to everyone
- early intervention and prevention so that people are supported early on and in a way that's right for them.

What is Self-Directed Support?

The term 'Self-Directed Support' describes a set of practices by which people can move from the role of passive consumer to that of active citizen. These practices have been developed largely around the needs of people for 'social care' but they can equally apply to needs for health care, housing, income-support or anything else which is needed for active citizenship. The defining characteristics of Self-Directed Support are that:

The support is controlled by the individual.

The level of support is agreed in a way which is fair, open and flexible.

Any additional help needed to plan specify and find support is provided by people who are as close to the individual as possible.

The individual controls the financial resources for their support. It is their money.

All of the above practices are carried out in a manner which conforms with an agreed set of ethical principles.

What is an individual budget?

Although they are just one way of approaching personalisation, much of the conversation about personalising services has focused on individual budgets (IBs). IBs have been piloted in 13 local authorities (Challis and others, 2007). Unlike direct payments, an IB sets an overall budget for a range of services, not just from social care, from which the individual may choose to receive as cash or services or a mixture of both.

IBs combine resources from the different funding streams to which an assessed individual is entitled. Currently, these are:

- local authority adult social care
- integrated community equipment services
- Disabled Facilities Grants
- Supporting People for housing-related support
- Access to Work
- Independent Living Fund.

What is a personal budget?

Originally, the term personal budget only applied to social care funding but now it is often used interchangeably with individual budget. It is the funding given to someone after they have been assessed which should meet their needs. They can have the money as a direct payment or can choose to manage it in different ways. What is important is that these budgets give people a transparent allocation of money and the right to choose how this is managed and spent.

**We will be sticking
with this term**

What is a direct payment?

A direct payment is a means-tested cash payment made in the place of regular social service provision to an individual who has been assessed as needing support. Following a financial assessment, those eligible can choose to take a direct payment and arrange for their own support instead. The money included in a direct payment only applies to social services.

The 7 steps to being

1. My money – finding out how much



So it looks like I can get £15,000.

2. Making my plan



Who else can we get to help us do this plan?

3. Getting my plan agreed



Yes - it looks like a good plan.

4. Organising my money



I'm opening a bank account for my support money.

in control of my support

5. Organising my support



I can choose how I get my support.

6. Living life



My life's changed – I'm in control.

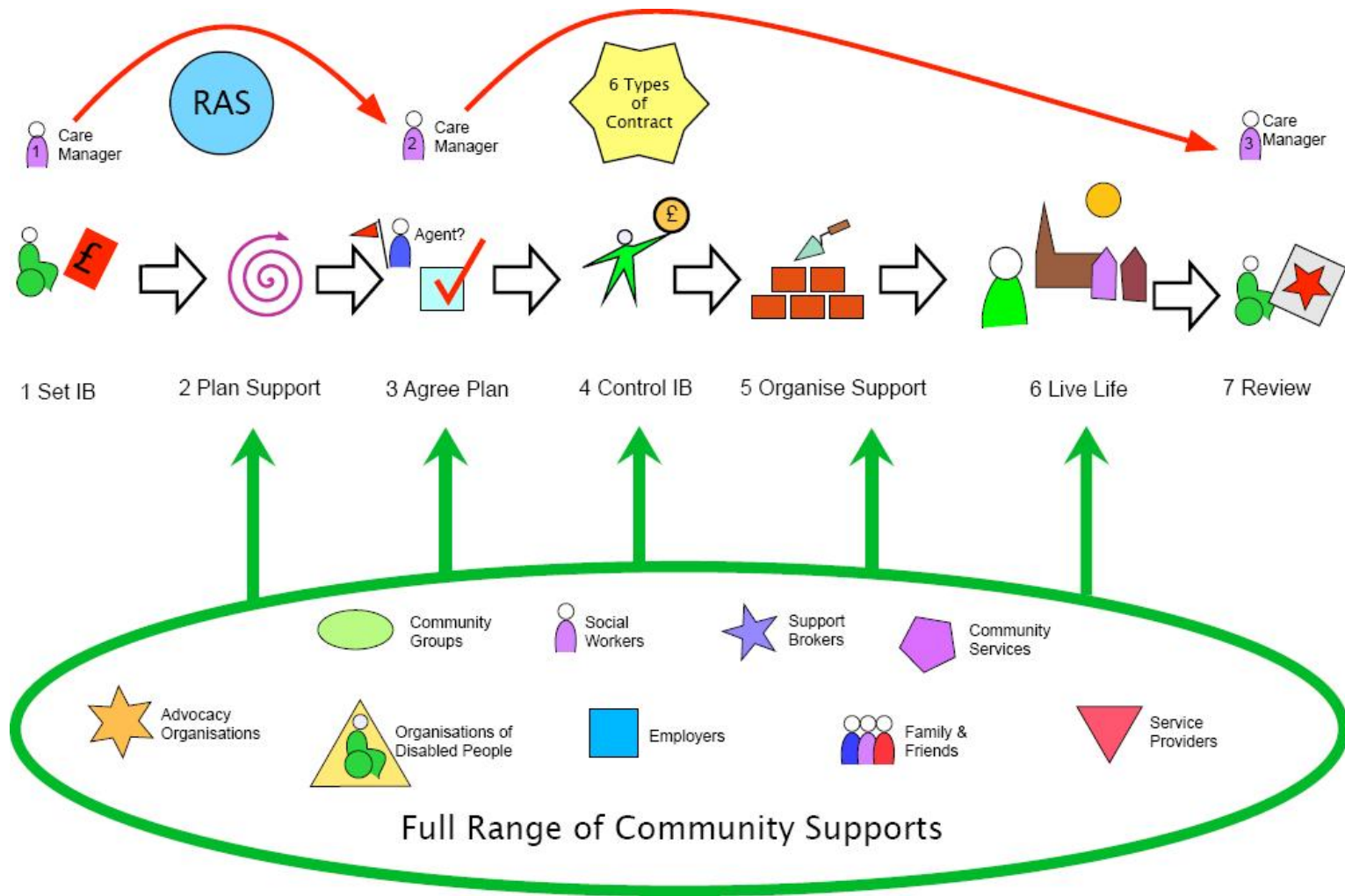
7. Seeing how it worked



It's gone well. Let's talk about what's next.

The 7 steps to being in control

- 1. My money – finding out how much** – Can I get money for support? How much?
- 2. Making my plan** – I do my own plan. I can get help to do it – as much as I need.
- 3. Getting my plan agreed** – A care manager has to say my plan is OK.
- 4. Organising my money** – The money is for my support – I can get it paid to me, or to someone who can look after it for me (a person, a Trust, an organisation or the care manager).
- 5. Organising my support** – I can get help to find and organise my support.
- 6. Living life** – I can use services. But I can spend my money on support from people in the community, too.
- 7. Seeing how it worked** – I have to show that I use the money properly.



Why do we need to change?

The present system

- Based on matching a limited range of services to people's assessed needs
- Costs are rising and services are under increasing demographic pressures
- Many people assess the current situation as being 'in crisis'.

Local authorities' response

- Looked to make efficiency savings (including shifting large volumes of in-house services to the private and voluntary sectors
- Changing eligibility criteria to restrict access.

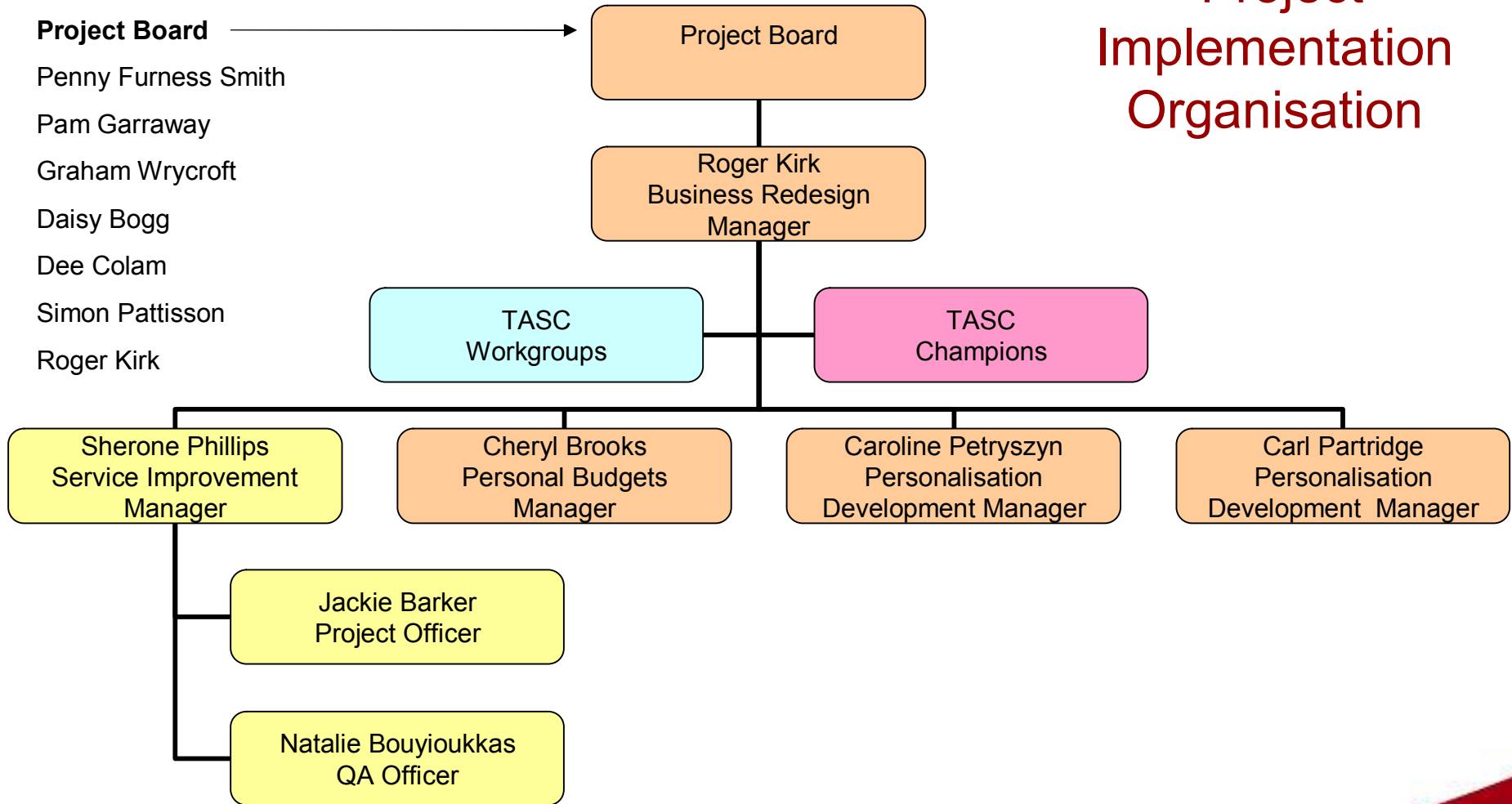
The current system of social care is not sustainable.

Ten Cross-Functional Workgroups

- Self Assessment & Resource Allocation
- Support Planning & Care Management
- Advocacy & Brokerage
- Direct Payments & Personal Budgets
- Information & Communications
- Intervention & Prevention
- Commissioning & Capacity Development
- Risk Management
- Transport
- Champions

Contain members from ASC, allied LBC
Departments, Partner Organisations and
Service Users & Carers

Project Implementation Organisation



Transforming Adult Social Care (TASC)

- This is not a small policy change – it requires fundamental transformation of adult social care
- This transformation will be a staged process – we will be ensuring that members, management, staff & the public are kept informed throughout
- We will need to make some strategic decisions about self-directed support – some of which will be made by Council
- We will also be gaining experience by running trials and pilots

TASC

Success would mean people in wheelchairs are able to live independently. Not only managing in their own homes but also at work and participating in their communities' activities because the physical barriers both inside and outside their homes have been removed. Another indication would be that the local public transport system is set up to enable older and disabled people to attend hospital appointments and social/education activities easily and with confidence.

Success would mean people were supported to get the right exercise and equipment following a fall so they would not have to go into hospital, and could stay at home without significant risk of falling again. Alternatively, through effective use of telecare people with dementia are routinely able to stay at home with their families, who are able to continue their everyday lives.



Success would mean people in the community who need support and their families and carers feeling empowered to come up with flexible solutions to meet their needs, individually or collectively. They would understand what is available and be confident the services available to buy were suitable, safe and reliable. People feel they have a life rather than a set of services.

Evidence of success would be community groups working with the council to put good ideas into practice to make the area a better place for older and disabled people.

- Facilitating access to universal services
- Building social capital within local communities
- Making a strategic shift to prevention and early intervention
- Ensuring people have greater choice and control over meeting their needs.

Where We Need To Get To

- A universal information, advice and advocacy service for people needing support and their carers, including self-funders.
- Person centred planning and self directed support as mainstream.
- A fair and transparent system for allocating resources to people with different levels of need.
- Personal budgets as an option for all those eligible.
- A significant increase in the take up of Direct Payments.
- Family members, friends and carers being treated as experts and supported both in their role and their personal life.

Where We Need To Get To

- Commissioning processes that encourage services offering high standards of care, dignity and maximum choice and control.
- A common assessment process with greater emphasis on self-assessment.
- Giving people, their carers and their families more say in influencing policy and strategy.
- ASC championing the rights and needs of people across the authority, public services and the wider community.
- The promotion of dignity in local care services as part of systems aiming to minimise the risk of abuse and neglect of vulnerable adults.

Where We Need To Get To

- Prevention, early intervention and re-ablement as more standard practice.
- Supporting people to remain in their own homes as long as possible while combating potential isolation.
- Telecare viewed as integral rather than marginal.

Queries, ideas or suggestions to
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Questions?