

**Manchester Health and Wellbeing Board
Report for Resolution**

Report to: Manchester Health and Wellbeing Board – 8 July 2015

Subject: Implementation of the Care Act

Report of: Interim Strategic Director, Families, Health and Wellbeing

Summary

At the meeting of the Health and Wellbeing Board on the 28 January 2015, the Board received a presentation by the Strategic Director of Families, Health and Wellbeing, on the Council's readiness for Care Act (2014) which was due to be implemented on 1 April 2015.

The Health and Wellbeing Board agreed that a further report should be brought to a future meeting, after the planned peer review of Adult Social Care.

This report therefore provides a summary on the progress that has been made on the implementation of the Care Act in Manchester.

Recommendations

The Board is asked to note the report:

Board Priority(s) Addressed:

Health and Wellbeing Strategy priority	Summary of contribution to the strategy
Getting the youngest people in our communities off to the best start	
Educating, informing and involving the community in improving their own health and wellbeing	The Act has a strong emphasis on prevention and early intervention with the central emphasis on the care and support delivery being focused on wellbeing
Moving more health provision into the community	
Providing the best treatment we can to people in the right place at the right time	
Turning round the lives of troubled families	
Improving people's mental health and wellbeing	The Act has a strong emphasis on prevention and early intervention with the central emphasis on the care and support

	delivery being focused on wellbeing
Bringing people into employment and leading productive lives	
Enabling older people to keep well and live independently in their community	Central to the Act is the requirement to develop prevention strategies to support people to remain in their local communities

Lead board member:

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Background documents (available for public inspection):

None

1 Introduction

- 1.1 The Care Act provides for a new capped costs system for funding care and support, based on the recommendations of the Dilnot Commission, and delivers many of the commitments in the *Caring for our Future* White Paper. The Act also responds to a report following a three-year review by the Law Commission of adult social care law, and simplifies, clarifies and replaces over 60 years of legislation. The Act has a strong emphasis on prevention and early intervention with the central emphasis on the care and support delivery being focused on wellbeing.
- 1.2 The Care Act introduces a new general duty for local authorities to “promote individual well-being“. The duty applies to all actions taken under the Act in relation to individual care and support. The degree to which a local authority’s actions promote well-being or undermine it is the acid test of the legitimacy of those actions. As a result the promotion of individual well-being is the guiding principle of the Care Act and applied in equal measure to the cared for and those who are carers.

2 Background

2.1 Peer Review of Adult Social Care and Setting up the Adult Social Care Improvement Programme

The Peer Review was commissioned to provide an independent assessment of how well the council is delivering Adult Social Care (ASC).

The Peer Review occurred between Wednesday 25th to 27th March 2015, prior to the site visit there was a requirement to undertake a self- assessment which we used as part of a process of establishing the current baseline of ASC delivery.

- 2.2 This model of Adults Peer Challenge intends to help local government to help itself to respond to the changing agenda in ASC. The peer challenge process is a constructive and supportive process with the central aims of helping a council and its partners to assess its current achievements; and identifying those areas where it could improve. It is delivered from the position of a ‘critical friend’ to promote sector-led improvement.

The focus of the Peer Review was on ASC end to end delivery, Adult Safeguarding and Social Work practice. The outcome was that the council was on the “right track” but that a more consistent approach in the delivery of ASC needs to be developed and embedded within the organisation.

- 2.3 In response to the Peer Review and what was already known about the delivery of ASC, an Improvement / Development programme has been set up designed to build sustainable improvement in relation to ASC delivery It will use as a blueprint the work being led by the local government association (LGA) in respect to the national improvement initiative to reform the delivery of adult social care. The Towards Excellence in Adult Care (TEASC) is designed

to support councils to improve their performance in adult social care and improve outcomes for citizens.

Strategic Context and Alignment with the LLLB programme

- 2.4 The Care Act is set in the context of whole scale reform of out of hospital services provided by the acute hospitals and adult social care under the Living Longer Living Better Programme and will be a key component of the Manchester City Council's Improvement / Development Programme for ASC.
- 2.5 One of the key themes of the programme is to successfully reform adult social care. Also the Improvement / Development Programme is focusing on and has an intrinsic and central link to the Living Longer Living Better (LLL) reform programme.
Further detail on the ASC improvement / development programme can be found in appendix one of this report.

The LLLB strategy seeks to “radically transform Manchester’s community care system by 2020 - supporting people to live longer, healthier lives”¹. The key strategic aims are:

- Empowering people
 - Improving service standards
 - Improving health and wellbeing outcomes
 - Financial sustainability
- 2.6 The Care Act work will be part of the a Leadership for Change programme and will include staff and partners in both developing the vision, standards and in the determination of what good looks like in a new integrated health and social care delivery model. It will also ensure that as well as compliance with the Act that there will be a focus on the systemic outcomes developed by Commissioners through the One Team specification. It will build on the Age Friendly Manchester Programme to support the development of community assets and to begin a new conversation with Manchester citizens. This approach will future proof the new arrangements to ensure that the Council can meet its statutory accountabilities for ASC.

3 Care Act Implementation Progress and Key Milestones

- 3.1 The Care Act is being implemented in two stages, stage 1 which had to be implemented on 1 April 2015 included:

New *duties* of prevention, safeguarding, information; advice & advocacy, integration, partnerships, transitions and diversity of provision & market oversight, and a new requirement to assess prisoners who have eligible social care needs, which will inevitably require a partnership approach and accordingly the support of the Health and Wellbeing Board to facilitate delivery.

¹ LLLB Strategic Plan

3.2 The purpose of the Care Act is to transform the social care system and its funding by, placing new and extended duties and responsibilities on local authorities, introducing new regulations in relation to eligibility for care, changing existing charging regimes and introducing changes in the ways in which adult social care and health services are arranged.

3.3 In addition there is a requirement that the Council stimulate and influence the market to provide choice, value for money, competition and sustainable service provision to the community, through:

- a) Market Monitoring and Market Failure Arrangements - Development of performance monitoring tools to ensure close monitoring of providers sustainability.
- b) Market Shifting Arrangements – To ensure a flexible, dynamic market place which is able to respond to local needs.
- c) Market Shaping Arrangements – development of market position statements which will be a statutory requirement.

Appropriate arrangements have been put in place by the council to meet all of the phase 1 requirements.

3.4 In April 2016 further measures will be introduced, The Government has recently consulted on the draft regulations and guidance to implement the cap on care costs and policy proposals for a new appeals system for care and support. The consultation which closed in March 2015 included proposals from April 2016 to implement:

1. A cap on the amount a person has to contribute to meet their eligible care needs
2. A requirement to maintain a 'Care Account' for people with eligible care needs and provide an annual statement of their progress towards the cap on care of £72,000
3. An extended means test which extends entitlement to financial support, with upward revisions to capital thresholds
4. Free lifetime care for people assessed with eligible care needs up to the age of 25

3.5 The new duty to design care and support services to prevent, reduce and delay the need for on-going care and support is not specific to ASC but to the broader Council services. This closely links with the Health and Wellbeing Strategy and reflects the requirement, to develop co-ordinated approaches across the Council and with Health partners which help communities build their own resilience to address isolation, loneliness, lack of exercise poor or inappropriate housing.

4 The Care Act 2014 and Health and Well-being agenda

4.1 The Care Act (2014) requirements in respect to the Wellbeing of individuals and the requirement to develop a prevention strategy directly interlinks with

the strategic themes of Manchester's Health and Well-being strategy. Of particular resonance is the strategic vision for Manchester Health and Social care set out within the Living Longer Living Better programme of:²

- Improving health outcomes – Contribute to an improvement in key quality of life and life expectancy outcomes in Manchester by driving improvements in the community based care system, ensuring a range of new, innovative place-based services are centred on the individual
- Supporting self reliance – increase the volume, range and effectiveness of prevention and early intervention services available, including a wider choice of resident self care options, to enable people to maintain their independence within a strong community support network

4.2 The instigation of a prevention strategy based partly on statutory services and through the development of community asset models built by local communities will both meet our statutory care requirements and the above strategic themes of the LLLB programme.

5. Conclusion

The principles of both the Health and Well-being Board strategy and the LLLB programme mirror the statutory requirements now placed on councils in respect to the Care Act themes of Well-being and prevention.

² Living Longer Living Better Programme – LLLIB progress update report to Health and Well-being Board – 28 January 2015

Appendix 1

The Vision ,Workstreams, Deliverables and Scope of the Adult Social Care – Improvement / Development Programme

The Vision for the Improvement/ Development Programme is:

To focus on practice development and standard setting, getting the basics rights and ensuring that our statutory responsibilities are delivered in a consistent and timely way. The programme will be designed to ensure that our Adult Social Care is fit for purpose and appropriately resourced as part of our preparation for the transfer of services into an integrated model.

The ASC Improvement / Development programme has the following workstreams:

Work stream	Deliverable
Engagement and Communication	Will develop a strategy to ensure effective engagement / communication with the workforce, trade unions, Health partners, other key stakeholders including citizens
Learning Disability Innovation and Reform	Will take forward the work of the Ernst and Young project and ensuring the E&Y recommendations are successfully delivered
Adult Safeguarding	Will build consistent approach to how we deliver adult safeguarding
Organisational structure	Will include a review of the staffing structure of ASC to identify required capacity, skill mix and effective positioning of qualified workers (SW and OT) to ensure Care Act compliance. In undertaking this review we will involve our health partners taking into account the LLLB integration
Quality and Social Work Standards	Will build consistent practice and embed outcomes based model of practice
Systems and Processes (including ICT)	Will streamline the delivery of ASC, including reducing the number of handoffs
Workforce Development	Will include a leadership development programme to support our programme of improvement and development

The scope of this programme is:

- The assessment function – end to end delivery focusing on the existing new citizen journey –and includes: first contact, Primary Assessment Team, Social Work, Care Management, Support Planning, Brokerage, Specialist teams (Drug and Alcohol, Carer’s Care Managers)
- Out of hours social care provision and the Emergency Duty Service (EDS)
- Review and Redesign the Funding Panel and Resource Allocation System (RAS) and follow successes based on the current learning disability project
- Adult Safeguarding function
- Adult Social Care Statutory Performance – in order to better understand where

there is currently poor/lower than desired performance and taking active steps through the redesign to address this

- Adults Commissioning and Contracting – in order to better understand how care packages are commissioned and how services are put in place following assessment. This should improve the end-to-end delivery of citizen services or the administration of a Personal Budget

This will include work to better understand how people access services and then move through the system.

Whilst the scope is clearly defined, it will be closely considered within the context of the integration with health agenda, allowing for sufficient flexibility to be built in as the pace of integration across health and social care quickens.

Anticipated Benefits

Cohort	Anticipated Benefits
Citizens and service users	<ul style="list-style-type: none"> • Eligible Manchester residents will receive an appropriate, proportionate and timely adult social care statutory assessment that is high quality with a focus on promoting outcomes and wellbeing • Citizens will have a positive social care experience • Citizens will continue to be pro-actively supported in cases of abuse and neglect • Citizens with ineligible needs will be able to access high quality, fit for purpose information, advice and guidance that both promotes their health and wellbeing and supports a self-care approach
ASC Care Assessors	<ul style="list-style-type: none"> • Staff will feel involved and contribute to the Improvement & Development Programme • Staff will be able to influence the development of the programme • Staff will report higher levels of motivation and job satisfaction at the end of the Programme • The organisation will benefit from a shift in culture and behaviour and move social work to a more outcomes-focused model of care assessment •
Partners	<ul style="list-style-type: none"> • Will strongly influence the Programme in terms of co-production and co-design • Partners will provide a degree of challenge and support which should raise overall standards and success of the Programme