

WIRRAL COUNCIL

HEALTH AND WELL-BEING OVERVIEW AND SCRUTINY COMMITTEE:
19TH JANUARY 2010

REPORT OF THE DIRECTOR OF ADULT SOCIAL SERVICES

TRANSFORMATION OF ADULT SOCIAL SERVICES PERSONAL BUDGETS

Executive Summary

This report provides information on the progress being made on personal budgets in Wirral. It provides information on the lessons learnt from phase 1 of implementing personal budgets in Wirral and details of phase 2 of implementation. Overview and Scrutiny Committee Members are asked to note the contents of the report and the progress being made on the implementation of personal budgets in Wirral.

This item falls within the Social Care and Inclusion portfolio.

1 Introduction

1.1 This report provides information on the progress being made on personal budgets in Wirral. Personal budgets are just one way of approaching the bigger personalisation agenda and form part of a different offer adult social services will deliver to residents in Wirral. This includes the use of assistive technology, rehabilitation and integrated locality working practices. In addition a consultation process about those care services which are provided directly by the Department has recently been completed, which has considered their sustainability in their current form to meet the personalisation agenda.

2 Elected member seminar

2.1 A seminar for all elected members was held on 29th October 2009 which provided information on personalisation in particular details of self directed support, personal budgets and their impact on future demand for support services.

3 Social care reform grant

3.1 It is important to clarify that the money made available by the Department of Health, through the social care reform grant, is to support councils in the transformation of adult social services and not just for the transition to personal budgets. The grant is in addition to the monies provided through the personal social services funding and is specifically for the range of process reengineering, capability and capacity building activities required to design the entire system. In practice, what this means is that by 2011 councils will be expected to have made significant steps towards redesign

and reshaping their adult social care services (in light of their Joint Strategic Needs Assessment), and have core components in place such as:-

- Integrated working with the NHS
- Commissioning Strategies, which maximise choice and control whilst balancing investment in prevention and early intervention.
- Universal information and advice services for all citizens
- Proportionate social care assessments processes
- Person centred planning and self-directed support to become mainstream activities with personal budgets which maximise choice and control
- Mechanisms to involve family members and other carers
- A framework which ensures people can exercise choice and control with advocacy and brokerage linked to the building of user-led organisations
- Appropriate safeguarding arrangements
- Effective quality assurance and benchmarking arrangements

3.2 These need to be supported with local market development, a workforce strategy and an approach, which demonstrates effective use of resources, including the delivery of 3% efficiencies year-on-year.

3.3 The grant is paid as follows:

2008-9	2009-10	2010-2011
651,000	1,520,000	1,870,000

3.4 Attached at appendix 1 is the recently jointly published (ADASS, LGA, DH¹) milestones that are to assist directors, their staff and local stakeholders in moving the transformation agenda forward over the next 18 months. The five areas of change identified are felt to be core to the progress needed through to the end of social care reform grant period in March 2011. The milestones have been built into the department's business plan and transformation programme.

4 Progress on personal budgets

Background

4.1 The Governments commitment to date has been to pilot individual budgets² in 13 local areas. This was set out in the Health White Paper

¹ Association of Directors of Adult Social Services, Local Government Association, Department of Health

² Individual budgets bring together a variety of income streams from different agencies including Independent Living Fund, Continuing/Joint Health Care, Community Care, Access to Work or Supporting People funding to provide a sum for an individual, who has control over the way it is spent to meet his or her support needs. A personal budget is an allocation of money that is purely from social care funding sources and used to purchase support from the public, private or voluntary sector. In Wirral's pilot phase one has been testing out the use of personal budgets.

'Our health, Our Care, Our Say'. In addition, local authorities were being encouraged during 2006/2007 to give people greater choice and control of the services they use.

- 4.2 The central idea behind the individual budgets concept is to place the person who is supported, or provided with services, at the centre of the process. They should have the power to decide the nature of their own support. The concept builds on the successful features of direct payments and other initiatives to develop self directed care.
- 4.3 The Government's commitment was made in a number of policy documents the most recent being the commitment to the transformation of adult social care through initiatives such as individual budgets and self directed support was reinforced within the social care concordat "Putting People First". This landmark protocol seeks to set out and support the Government's commitment to independent living for all adults.

National individual budgets pilots

- 4.4 13 pilot sites across the country have been testing out individual budgets and new ways of ensuring people who use social care services are enabled to self assess, have a better understanding of how resources are allocated to meet people's outcomes and have greater flexibility in using resources to meet individuals outcomes, needs and priorities.
- 4.5 The evaluation found that individual budgets were generally welcomed by individuals because they gave people more choice and control over their lives, but there were variations in outcomes between groups.
- 4.6 To simplify implementation, most pilot sites started by offering individual budgets to only one group – typically people with learning disabilities or physical / sensory disabilities. By the end of the pilot period all sites were offering individual budgets to a wider range of groups.
- 4.7 Across the 13 pilot sites individual budgets were piloted with older people, working age adults with physical, sensory and or learning disabilities, people with mental health problems and young people in transition to adult services. 959 people were included in the 13 pilot sites. The evaluation report can be accessed at http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_089505

Wirral personal budgets project – phase 1

- 4.8 Wirral's Personal Budgets project (phase 1) commenced on 26th January 2009. 17 people from mental health, learning disabilities, physical disabilities and older people from across 11 wards in Wirral were chosen to be part of phase 1. These people had approached the department and expressed a wish to be considered and were from the outset prepared to share the learning as part of the project.
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4.9 The project was developed based on the knowledge from the 13 national pilot sites. The objectives of the project in Wirral were set out as follows:-

- To test out and learn from systems developed and to reflect, monitor and evaluate the process before further implementation
- Identify and work on cases piloting personal budgets
- To work in partnership within localities, researching and developing local services and opportunities for individuals in Wirral
- To promote Wirral's personal budgets system and processes within the Council and members of the community
- To share the findings of the evaluation process with professionals and members of the community and remain open and transparent about what has been learned during the process

4.10 The project was to run for 6 months and was extended by a further 3 months due to refining arrangements for the design of a suitable resource allocation system, the means by which money would be allocated to individuals against their presenting needs. All local authorities are having similar challenges with the development of an appropriate resource allocation system. Phase 1 of Wirral's project is due to reach completion at the end of October 2009 and a final evaluation report is available. (Appendix 2)

4.11 The evaluation report of phase 1 is attached at appendix 2 and some lessons learnt to date are as follows:-

- The support planning process puts people in control of their lives and has generated creative ideas and solutions for meeting support needs
- Close working relationships with people who use services and carers is essential to ensure appropriate, proportionate assessment takes place. The evaluation shows that all participants have been willing to work together to develop processes and systems that can be understood by all involved
- Significant investment is needed to help guide staff through new processes and mindset changes
- Testing the resource allocation system is challenging as the only costs to test against are existing cost of care packages and the resource allocation system and new processes are different which makes comparison challenging
- Valuable feedback was given from people who use services and carers and therefore several amendments have been made such as separating the individuals assessment from the carers assessment for resource allocation and use of plain English language

Wirral's personal budget project – phase 2

4.12 The evaluation and options for phase 2 of the personal budgets project have been discussed at the department's Personal Budgets Steering Group and the department's Transformation Programme Board. These

groups agreed the recommendations in the report. In addition the group recommended to the Strategic Leadership Team on its preferred option for Wirral's personal budgets phase 2 project. The Strategic Leadership Team considered the report and presented findings from phase 1 to Cabinet.

- 4.13 On 15th October 2009 Cabinet agreed that phase 2 of Wirral's personal budget project be tested on a minimum of 10% of people receiving community based services. This would give a more realistic and statistically valid assessment of the impact of the resource allocation system on the budget and test if processes and systems are workable on a wider cohort of individuals. A statistically valid sample could therefore be in the region of 200 people.
- 4.14 In additional on 9th December 2009 Cabinet agreed that phase 2 of the project is extended to include:-
- 4.15 **All adults with learning disabilities**, across Wirral. This fits in with the progress needing to be made in transforming learning disability services, in accordance with Valuing People Now and will include transition. People with learning disability and families are eager to move to receiving personal budgets. Members will be aware that personal budgets originally started in learning disability service areas.
- 4.16 **All adults recovering from a Stroke across** Wirral, this proposal builds on the exciting work being taken forward across Wirral, in Partnership with the Stroke Association, and builds on the development of the Stroke pathway. Cabinet will also be aware that NHS-Wirral have made a significant additional investment in Stroke services to include a 24 hour a day hospital service.
- 4.17 **One locality area (Birkenhead)**. The merits of focussing phase 2 of the project on one locality area were assessed. The main advantages of this would ensure that:-
- consistent approaches are undertaken by all staff in one locality. A lesson learnt from phase 1 was that staff faced challenges working with two systems; new processes and existing
 - new ways of working are applied to the entire customer journey not parts of it
 - new ways of working and processes will be a model which will then be applied across other localities
 - the department can work with Public Health and take forward an evaluation of the impact of personal budgets on the health and wellbeing of people
- 4.18 The merits of which locality should be included in phase 2 were discussed. Agreement reached that Birkenhead locality would benefit most from being the chosen locality to be included in phase 2. The main reasons being:-
- Wallasey locality is already piloting integrated working through the Wirral Integrated Services Programme (WISP)

- Bebington and West Wirral locality have newly appointed senior staff, who are together addressing a range of important matters and are not yet in a position to take forward the extra demands
 - Birkenhead locality has significant issues of deprivation and health inequalities and it was considered that work on implementing personal budgets earlier may have a greater impact for people in this locality
 - Birkenhead locality and adults with learning disability teams are located in the same building which assists in taking forward the design of new processes
 - Birkenhead locality and adults with learning disability teams are managed by the same principal manager which will assist with the cultural change process
- 4.19 It is important to recognise that by focussing on adults with learning disability, stroke and Birkenhead locality would not preclude others across the Borough accessing personal budgets if they wish to do so.
- 4.20 Phase 2 of Wirral's personal budget project will run until July 2010. The intention for phase 3 would be to roll out the new system and processes from August 2010.

5 Financial Implications

- 5.1 Indications from the pilot sites across the country evidenced that people who use services were making more efficient and effective use of their budget than may have been the case under current arrangements but no significant increase or decrease of expenditure has been reported to date.
- 5.2 The development of a robust resource allocation system (RAS) needs to ensure that individual / personal budgets and self directed support will be delivered within the current funding envelope. There is a risk to the budget if the RAS allocates more resources than people currently use, or would have used if they are previously unknown to Adult Social Services. The latter will be difficult to measure as the new self directed assessment process is not geared to work out what people might have received as 'commissioned services' under the old arrangements and therefore it is difficult to compare 'like with like'. It is perfectly feasible that some people who currently receive complex support packages at significant cost to the Council will, in the future, opt for a Personal Budget which may result in being of a much lower value. The extent of this will depend on the development of the marketplace and peoples' confidence in it to meet their support needs. This transition needs to be considered alongside that of the emerging strategy for in-house care services and the new shape of contracted support being developed in 2010. Equally there will be people at the other extreme who might qualify for a Personal Budget greater than the value of their existing or potential support package. Both scenarios are expected as a result of this transformation and members are advised that the compensating variances may take some time to reach equilibrium. Phase 2 of the project will test this and transitional arrangements will be put in place.

6 Staffing Implications

- 6.1 There will be an impact on the role and function for the social care workforce. Indications from Wirral's phase 1 project show that heavy investment in staff is required to support them with adapting to this radical change.
- 6.2 During the project process there has been a focus on workforce development to enable those providing services to have access to resources to develop the skills, knowledge and ability to provide universal information, advice and advocacy services across sectors. The workforce will need to be re-modelled so that less time is spent on traditional assessment and more time on support planning, brokerage and advocacy. Skills and roles will need to be developed so the workforce are comfortable to advise on decision making and managing risk and enabled to meet person centred-needs through co-production and, where appropriate, integrated working arrangements.
- 6.3 A workforce strategy is being developed to support staff through this major transformational change in both health and social care and bring with this an awareness of the benefits and likely impact that personal budgets and self directed support will have on services and more specifically their role.
- 6.4 The Department has developed an appropriate learning and development programme to support staff in these new ways of working. A training needs analysis will assist us in identifying training and support on the following areas: resource allocation system, support planning, support brokerage, training for providers, developing referral routes, process and pathways, guidance on practice, self directed assessment, positive risk taking, health and safety, links to safeguarding, consent, mental capacity act, risk enablement, on going monitoring of support plans, guidance on restrictions and parameters within support planning.
- 6.5 The Department in partnership with Open University has successfully bid for Employer Learning, Development and Accreditation Solutions (ELDAS) funding to co-create a distance learning course around the personalisation agenda. The programme of learning and assessment (both academic and vocational) provides a unique opportunity for the department to make an active contribution to the development and delivery of a qualification that leads to the continuing professional development of health and social care staff, provides one component of a post-graduate or post-qualifying award and credit rating/accreditation that sits on the Qualifications and Credit Framework.

7 Equal Opportunities Implications/Health Impact Assessment

- 7.1 Phase 1 was subject to equality impact assessments to ensure that vulnerable people and those from minority groups are not adversely affected by the implementation of personal budgets and self directed support. Phase 2 will also be subject to equality impact assessments.

8 Community Safety Implications

- 8.1 Personal budgets and self directed support provides a more holistic approach to addressing an individual's need. By empowering individuals to take control of their support package it is likely that they will be able to identify more clearly issues which concern them about their own safety within the community. A process of managing risk is currently being developed.

9 Local Agenda 21 Implications

- 9.1 There are no local Agenda 21 implications.

10 Planning Implications

- 10.1 There are no planning issues from this report

11 Anti Poverty Implications

- 11.1 There are no direct anti poverty implications from this report.

12 Social Inclusion Implications

- 12.1 Personal budgets and self directed support enables people to be eligible for a range of funding streams, greater control and choice over their personal budget. In general people benefiting from these developments are likely to be amongst the most socially excluded in society. As a result, they will have more active participation in their support arrangements and enhance their status with providers.

13 Local Member Support Implications

- 13.1 Personal budgets and self directed support has Wirral wide implications.

14 Background Papers

Department of Adult Social Services Personal Budget Steering Group report 'Personal Budgets Implementation Proposal'. 16th December 2008.

Department of Health (2008), *Evaluation of the Individual Budgets pilot programme: final report*,

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_089505

Department of Health (2008), *Transforming Social Care*,

http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/LocalAuthorityCirculars/DH_081934

Cabinet report 15 October

[http://wir06metrognome.admin.ad.wirral.gov.uk/Published/C00000121/M00000730/\\$\\$ADocPackPublic.pdf](http://wir06metrognome.admin.ad.wirral.gov.uk/Published/C00000121/M00000730/$$ADocPackPublic.pdf)

Cabinet report 9 December

<http://wir06metrognome.admin.ad.wirral.gov.uk/Published/C00000121/M0000733/ADocPackPublic.pdf>

15 Recommendations

That:-

Overview and Scrutiny Committee Members note the contents of this report and the current progress of implementing personal budgets in Wirral.

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