

WIRRAL COUNCIL

CABINET: 22 JULY 2010

REPORT OF THE DIRECTOR OF ADULT SOCIAL SERVICES

## **An Early Intervention Strategy for Wirral**

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### ***Executive Summary***

*The Early Intervention and Prevention Strategy is one of the key transformational projects of the Department of Adult Social Services. It offers a way forward for the local authority to concentrate efforts on enabling older people and people with disabilities to build their capacity to deal with their own wellbeing. This involves a key decision which was first identified in the Forward Plan dated May 2010.*

### **1 Introduction**

- 1.1 The transformation of social care demands a move away from crisis driven intervention which is professionally led, towards one which sees the person as a citizen in their own right, as a member of a wider community and where people who use services are full partners in the arrangement of their own support.
- 1.2 There is a statutory duty on the part of the Director of Adult Social Services to take responsibility for the wellbeing of all older people; this is a crucial element in developing this strategy, as no more than twenty percent of older people will traditionally use social services. The rest of the population either do not have care needs or have low level support needs that do not meet formal eligibility criteria or, if they have care or support needs, they make their own arrangements. The same is also true for other groups of people for whom the Local Authority has a duty of wellbeing.
- 1.3 The national context for the strategy has been determined by “Putting People First” which outlines the move towards a whole system approach which takes account of the need to make sure that:
  - Universal services are suitable for use by the whole population
  - Social capital within communities is built so that every person can take part in community life
  - Preventing and reducing the risk of dependence is uppermost in planning services
  - Choice and control over service delivery is available for people who need support or care.

- 1.4 The White Paper 'Equality and Excellence; Liberating the NHS' published on 12 July 2010 notes that 'Local Authorities will provide the joining up of local NHS services, social care and health improvement' which gives a clear incentive to the Local Authority to take the level for services which will intervene at early stages of any care need. There is also an emphasis on health inequalities within the White Paper with '... a new health premium to promote action to reduce health inequalities'. The Marmot Review, published in January 2010 emphasised the role of Local Authorities in reducing health inequalities, and this will be maintained and strengthened by the implementation of the strategy.
- 1.5 The Disability Discrimination Act 2005, which is outlined in the Departmental Valuing Diversity Policy, states that "the Department must ensure that all people have equal access to its information and services according to their need. Achieving this requires a flexible approach to service provision and constant improvement of services and facilities". Even without the national context for the development of the strategy, there is a commitment via the policy of the Department to move towards early intervention and prevention, including the provision of advice and information.

## **2 Background**

- 2.1 Demographic changes in the population mean that there is a generally ageing population; the proportion of older people to those of working age is growing and the number of older people over the age of 85 years will increase by 2025.
- 2.2 There are 13,000 current claimants of Attendance Allowance in Wirral: this is a non means tested benefit for which the person must be over 65 years old and in need of "frequent care and attention" throughout the day or night, or need "continual supervision". However, in 2009-10, there were 7035 people over the age of 65 in receipt of formal community care services arranged via the Department of Adult Social Services. Therefore, many people who receive Attendance Allowance and people who have low level or occasional support needs do not receive formal community care services.
- 2.3 There is a similar extrapolation of the population under the age of 65 and living with long term conditions, in that there are many more people claiming Disability Living Allowance or Incapacity Benefit than approach the Department of Adult Social Services for support. Many people will not be eligible as their condition will not meet the specific criteria which are applied in determining whether a person is eligible, while others use their disability related benefits to arrange their own support to meet their needs.

- 2.4 The recent Audit Commission report “Under Pressure: tackling the financial challenges for councils of an ageing population” outlines the need for local authorities to take account of the cost of delivering services to a growing number of older people and the need for local authorities to ensure that older people can continue to be included in universal services in order to delay or prevent the onset of dependency.
- 2.5 A report to Cabinet on 24 June 2010 on “Fair Access to Care Services” outlines the national eligibility criteria for adult social care and makes the recommendation that the Council support universal services which promote reablement and prevention.
- 2.6 There is, therefore, a national and local context for the introduction and implementation of a Wirral wide strategy for early intervention. The vision of the council, as outlined in the Sustainable Community Strategy (April 2009) as:  
“Our vision is of a more prosperous and equal Wirral, enabling communities and people to thrive and achieve their full potential” is exemplified through the Early Intervention Strategy.

### **3 The Strategy**

- 3.1 The draft strategy outlines the national, corporate and Departmental context for the strategy. It also outlines the work already in place which will contribute to the strategy.
- 3.2 Five levels of intervention and prevention are identified, which cover:
- universal accessibility
  - working in partnership
  - reducing the risk of entering formal care services
  - enabling recovery and independence
  - maintaining care needs and personal dignity.
- 3.3 Four approaches are identified which will highlight:
- particular communities of identity or need within existing strategies
  - focus existing work towards early intervention
  - put action plans in place
  - identify gaps, and ensure that the people most affected are central to all developments.

- 3.4 There are seven thematic areas and include:
- Building Communities
  - Citizenship
  - Healthy Lives
  - Information, Advice and Advocacy
  - Practical Support
  - Re-enablement
  - Maintaining Independence
- 3.5 Although Early Intervention and Prevention demands a whole system approach, there is a national expectation that it will be given a shape and sense of direction by Adult Social Services.
- 3.6 A key part of the Strategy is ensuring Council wide and partnership approaches to universal services. For example, leisure, adult education, transport, employment, healthy living and health improvement, along with housing, information and advice services and community safety.
- 3.7 There are many examples of strategies, services and initiatives which already meet, or have the potential to meet, the objectives of early intervention and prevention. However, in order to be truly successful:
- Existing strategies will need to specifically target or recognise particular communities of need or identity
  - The focus of some existing work may need to shift towards early intervention by setting targets for people seen at an earlier stage than is currently the case. Some social marketing may be needed to do this, and will be some reconfiguration of resources may be necessary.
  - Action plans will need to be developed in some areas, where the need for early intervention is recognised, but where there is no explicit intention or statement at present.
  - Gaps in existing services will be identified by working with communities and partners.
- 3.8 People in different communities of need, of locality or of identity will be central to all developments which will demand a robust approach to involvement and participation.

## **4 Conclusion**

- 4.1 Making sure that there are opportunities to build the capacity of individuals or communities to deal with their own wellbeing or life changing conditions can only succeed if social care and health work within the context of the wider local authority, third sector, independent sector and with people who use services, carers and other members of local communities.

- 4.2 Wirral must be committed to ensure that social care and health services deliver personalised, flexible and seamless services to those who are in need and that people are given choice and control over the services they receive.
- 4.3 To achieve the vision set out in this strategy, there must be investment in preventative and community based services that meet the needs of local people. This will require disinvestment in some services in order to reinvest in those which have positive outcomes. It will be necessary to develop a commissioning agenda which recognises the need for early intervention and for community capacity building, i.e. the ability of individuals and communities of need to identify a place to meet their need with the minimum of official involvement. It will be necessary, therefore, to build alternatives to existing services to which people can be signposted or about which they can be given information and within this, there is a clear link to the “Total Commissioning” project.
- 4.4 Early intervention and prevention will be increasingly central to the work of DASS. It will require an approach to existing service delivery that encourages people to take control of their own life, offers choice and enables creative solutions to situations. This may mean enabling risk and it will mean the removal of a ‘professional gift’ model, whereby the professional always knows best, to one in which the professional and the person using services work in partnership. It will also require services to be proactive in encouraging people to seek advice, information and assessment (if necessary) at an early stage, so that skills and knowledge can be acquired in time to deal with a long term condition or situation. It will require a culture within social care services that encourages a move out of formal services where possible; encourages people to find their own solutions, and which gives confidence that services are targeted to where they are most needed.
- 4.5 Wirral has already laid the foundations for this approach, evidenced by personal budgets, user involvement, one stop shops and a central call centre and many other services. The foundations now need to be built upon with the implementation of this strategy, in order to improve outcomes for Wirral people.

## **5 Financial and Staffing Implications**

Financial and staffing implications will emerge in the implementation of the strategy: however, the authority, together with NHS Wirral needs to demonstrate a shift of investment into early intervention. There is growing evidence that investment ‘upstream’ delivers both better outcomes for people and more efficient use of funding.

**6 Equal Opportunities Implications/Health Impact Assessment**

Older People and people with disability are positively affected by this strategy. An initial Equality Impact Assessment has been completed.

**7 Community Safety Implications**

Community safety is a key component of this strategy.

**8 Local Agenda 21 Implications**

None.

**9 Planning Implications**

None.

**10 Anti Poverty Implications**

Financial inclusion is a key component of this strategy.

**11 Social Inclusion Implications**

Older people and people with a disability or long term condition are more likely than the rest the population to be inadvertently excluded from universal services. This Strategy will reduce the risk of exclusion.

**12 Local Member Support Implications**

None

**13 Background Papers**

Our Health, Our Care, Our Say 2006, Department of Health  
Putting People First 2009  
Under Pressure: tackling the financial challenges for councils of an ageing population, Audit Commission 2010.

**14 Recommendations**

That Cabinet approves the Early Intervention Strategy, and that Council Departments and partners work together to ensure its successful implementation, and that the White Paper is fully reflected within in.

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