

Healthy Communities Scrutiny Sub-Committee

Tuesday 7 July 2015

7.00 pm

Ground Floor Meeting Room G01B - 160 Tooley Street, London SE1
2QH

Supplemental Agenda

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7.	Personalisation - good practice from London Borough of Richmond upon Thames.	1

The vice chair, Cllr David Noakes, tabled a list of draft recommendations, these are attached.

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Date: 8 July 2015

Personalisation Suggested Recommendations

- 1) That service standards and timescales are adopted in regards to carrying out an eligibility assessment, completing a support plan and the provision of services.
- 2) That there will be a commitment to have the same case worker throughout the process, except in exceptional circumstances.
- 3) That assessments are carried out in person at an individual's home, and if appropriate with any family or other carers present, to allow for an assessment of the carer/s to be carried out at the same time.
- 4) That consideration is given to commissioning a personalisation support service to support adults who have a direct payment and/or have services arranged by the Council. This could include help around
 - support planning
 - brokerage
 - direct payment management support
 - managed account service
 - personal assistant and employment support service
 - payroll service
 - training workshops
- 5) That consideration is given to establishing an Adult Health and Social Care E-Marketplace to provide a directory of services, to support service users and providers, and the personalisation in Southwark.
- 6) That the E-Marketplace should also consider including CQC ratings where they apply and reviews from service users, to provide qualitative feedback, about providers.
- 7) That consideration is given to maintaining a reduced grant for service providers, particularly building based services, to support the move from block grants to personal budgets, and ensure that established local providers in the voluntary and charity sector are able to compete and continue to provide a diverse marketplace.
- 8) That a preventative strategy is developed that includes financial support for the maintenance of open door services for vulnerable and elderly residents, who do not qualify under the FACs criteria, to support them remain healthy and active, and ensure they are not isolated.