

A Vision for Adult Social Care: Capable Communities and Active Citizens

Health and Social Care Board

2 December 2010

The Department of Health Vision for Adult Social Care

The DH Vision *Capable Communities and Active Citizens* was published on 16 November, it focuses on the Government commitments to:

- Breakdown barriers between health and social care funding to incentivise preventative action
- Extend the rollout of personal budgets to give people and their carers more control and purchasing power; and
- Use direct payments to carers and better community-based provision to improve access to respite care

The national Vision is built on 7 principles

- Prevention:** empowered people and strong communities will work together to maintain independence. Where the state is needed, it supports communities and helps people to retain and regain independence.
- Personalisation:** individuals not institutions take control of their care. Personal budgets, preferably as direct payments, are provided to all eligible people. Information about care and support is available for all local people, regardless of whether or not they fund their own care.
- Partnership:** care and support delivered in a partnership between individuals, communities, the voluntary and private sectors, the NHS and councils - including wider support services, such as housing.
- Plurality:** the variety of people's needs is matched by diverse service provision, with a broad market of high quality service providers.
- Protection:** there are sensible safeguards against the risk of abuse or neglect. Risk is no longer an excuse to limit people's freedom.
- Productivity:** greater local accountability will drive improvements and innovation to deliver higher productivity and high quality care and support services. A focus on publishing information about agreed quality outcomes will support transparency and accountability.
- People:** we can draw on a workforce who can provide care and support with skill, compassion and imagination, and who are given the freedom and support to do so.

Prevention

- Councils can play a vital role in leading change and stimulating action within their communities. Their broader role in promoting health and well-being will be enhanced by the new public health functions outlined in the White Paper *Liberating the NHS*,⁷ and by joint working with GP consortia on planning and commissioning services
- Developing community capacity and active citizenship: Southwark Circle is highlighted as a flagship example
- Carers are the first line of prevention, there will be a new national carer's strategy
- Re-ablement (short term interventions to help people recover their skills and confidence after an episode of poor health) to be expanded, and partly funded by the NHS
- Use of telecare to promote independence and housing-related support such as 'Supporting People'

Personalisation

- People, not service providers or systems, should hold the choice and control about their care
- Councils should provide personal budgets for everyone eligible for ongoing social care, preferably as a direct payment, by April 2013
- This requires a wholesale change – in staff attitudes, reform of financial and management and information systems, and reduction of inflexible block contracts
- Emphasis on outcome-based tools and outcome-based assessment and review processes
- Local voluntary and/or community organisations (including user and carer-led organisations) to provide support, advocacy and brokerage services
- Provision of information and advice is a universal service, with Councils to improve the range, quality and accessibility of information and advice

Plurality

- The increased use of personal budgets, alongside people funding their own care, will be a catalyst for change
- People will demand the services they want to meet their needs, creating truly person-centred services
- These will be delivered by organisations that can respond to the demands of their communities
- Councils have a role in stimulating, managing and shaping this market, supporting voluntary organisations, social enterprises and mutuals to flourish and develop innovative and creative ways of addressing care needs
- Councils need to move away from traditional block contracts and support the growth of a market in services that people want
- Councils will need robust evidence about what local markets offer and how they operate
- There should be a fair playing field for providers, particularly for small providers who often struggle to engage with formal tendering processes

Partnership

- Local councils should:
 - exploit the opportunities of the NHS White Paper to play a lead role in their communities, ensuring local services are more coherent, responsive and integrated. Together with the NHS and other partners, councils should agree a shared view of local priorities and outcomes to be achieved, and deliver commissioning strategies to meet the needs of their local populations – including the most vulnerable;
 - work with the NHS and other partners to pool and align funding streams at the local level and alert the government if there are any barriers to this local flexibility
 - ensure a joined up approach is taken within Councils, including for young disabled people, making the transition from children's to adult services
- People with learning disabilities can use their personal budgets, drawn together with other appropriate funding, to buy the support they need to get and keep a job or self-employment
- It is likely that expenditure on adults with significant disabilities could be reduced if funding were used for supported employment rather than leisure-focused day services

Protection

- All staff need to see safeguarding and providing a high quality service as central to their role. Providers and commissioners of services should ensure their staff provide safe, high quality care, inc. rigorous pre-employment checks and monitoring of their work
- A modern social care system needs to balance freedom and choice with risk and protection
- Local councils should:
 - ensure that everyone involved in local safeguarding is clear about their roles and responsibilities;
 - ensure that people who need care and support to maintain their independence have their right to personal autonomy respected, underpinned by a proportionate approach to the management of risk; and
 - champion and support safeguarding within communities. Citizens and communities have a part to play in preventing, detecting and reporting abuse and neglect.

Productivity, quality and innovation

- The Spending Review allocated £1b through the NHS to be spent on measures that support social care but also benefit health
- It is vital that Councils deliver lasting reforms and redesign their services to deliver efficiencies and transform how social care is delivered
- Prevention and re-ablement services to reduce the cost of intensive care packages
- Integrated crisis response services that respond within a 4 hour period could save money for PCTs and Councils
- Savings can be made by introducing integrated telecare support to people
- Use of supported and extra care housing rather than long term residential care can provide better outcomes at lower cost
- Councils must ensure they minimise spend on back office administration and replace poor value services
- Councils should show they have reduced unnecessary management costs in their assessment and care management processes and redirected it to funding more care and support

Transparency in Outcomes: a Framework for Adult Social Care

The DH is consulting on a new outcomes framework, with five core elements:

1. **Build the evidence base** – being clear about what high quality looks like in adult social care, and building the supports for evidence-based best practice.
2. **Demonstrate progress** – a consistent data set which supports councils and communities to understand progress and to hold organisations to account.
3. **Support transparency** – reporting to local citizens on the quality of social care and outcomes achieved to support public accountability.
4. **Reward and incentivise** – promoting sector-led quality improvement and the role for stronger incentives for providers and commissioners.
5. **Secure the foundations** – ensuring that essential standards of quality and safety underpin service provision to protect the most vulnerable.