

# **Project Business Case**

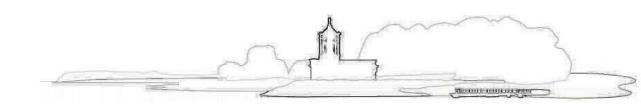
**Care Act Enablers** 

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#### **DOCUMENT CONTROL**

Version	Change Summary	Change author	Date
0.1	Initial document production	Katy Lynch	22.10.2014
0.2	Changes following comments from Integration Executive	Katy Lynch	20.11.2014

#### How would this scheme be described to the service user?

This scheme ensures that there are sufficient plans in place to meet the governments Care Act 2014 requirements.

The Care Act represents the biggest change to Adult Social Care in over 60 years and reforms the law relating to the care and support of adults and their carers.

The Care Act is built around people's needs and what they want to achieve in their lives. It seeks to rebalance the focus of care and support towards promoting wellbeing and preventing or delaying needs, putting people at the heart of the system.

The Act aims to ensure that care and support:

- is **clearer** and **fairer**
- promotes people's wellbeing
- enables people to prevent and delay the need for care and support, and carers to maintain their caring role
- puts people in control of their lives so they can pursue opportunities to realise their potential

### 1 Description of Project

Indicate business need including strategic/national local contexts and current organisational approach

### 1.1 Project Objectives

- a. To ensure that the requirements of the Care Act are effectively planned, developed and implemented and Rutland County Council meets its statutory requirements.
- b. To develop an effective access and information system providing people with a range of information in suitable formats so that they can make informed choices. This will include access to independent financial advice and advocacy.
- c. To develop our advocacy services locally so that they are fit for purpose and people are able to be actively involved in the assessment and care management process.
- d. To develop our payment and charging systems so that they are transparent, can support the introduction of the care cap and the care account.
- e. To ensure that people's needs are proactively identified and they can access a quality assessment of their needs. (This will require the development and resourcing of a Training and Organisational Development Plan)
- f. To ensure that carers can access a range of support & services locally which enable them to continue to care (without having a detrimental effect on their independence, health and wellbeing)
- g. To develop our commissioning capacity and skills to meet the requirement of the Care Act so that people can access a range of good quality support (universal, preventative and targeted in Rutland).
- h. To continue to develop our safeguarding arrangements so that people's welfare is promoted and they are protected.
- i. To ensure our ICT systems are fit for purpose and improve functionality both finance and ICT systems.

### 1.2 Key Deliverables

Include key deliverables for the Project lifecycle (objects produced as a result of the project)

Project Deliverable	Delivery targets
Relevant Policies meet the requirements of the Care Act 2014	April 2015
Service user and carer pathway reviewed	April 2015
Assessment and support planning tools in place	April 2015
A range of assessment options are in place	April 2015
Staff are upskilled to undertake the new requirements	April 2015

The revised Carers offer is in place	April 2015
Changes as a result of the Care Act are communicated	March 2015
Our ICT systems are fit for purpose and improve functionality - both finance and case management systems.	Sep 2015
Advice and information services are accessible in one integrated offer.	April 2015-April 2016

# 1.3 Project Milestones

Identify the significant milestones (phases, stages, Attach the work stream Plan. This should outline the main stages of the work stream, milestones and any interdependencies

Activity	Milestone	Dependency	Responsible	Start Date	End Date
1. An integrated advice and information	a. All policies are reviewed/updated		Head of Care Act	Oct 2014	Dec 2015
service is in place.	b. All leaflets regarding services available are updated in light of the Care Act	1a.	Information Development officer	Jan 2015	June 2015
	c. Services in the area are mapped and a full directory of services is in place		Information Development officer	Jan 2015	June 2015
	d. Independent financial advice is clearly signposted		Information Development officer	Jan 2015	April 2015
	e. Self Service options in place		Information Development officer	Jan 2015	April 2015
2. Social care case management system is compliant with	a. New system procured	IT and data sharing BCF scheme activity	Jason Haynes	Ongoing	Sep 2015
the Care Act /supports integration	b. Information is migrated across to the new system	IT and data sharing BCF scheme activity	Jason Haynes	Sep 2015	Dec 2015
	c. Relevant staff are trained to use the system		Head of Care Act	Sep 2015	Dec 2015
3. Capacity to deliver additional	a. Additional assessment staff in place		Head of Care Act	April 2015	ongoing
assessments and support	b. Additional carers support worker recruited		Head of Care Act	April 2015	ongoing

Activity	Milestone	Dependency	Responsible	Start Date	End Date
carers					
4. Financial management solution in	a. software upgrade (Abacus)		Andrea Grinney	Dec 2014	April 2015
place	b. Additional staffing for finance and charging in place		Andrea Grinney	April 2015	April 2016
5. Communication	The Rutland Community is aware of the changes outlined in the Care Act and understand the impact this will have on individuals		Head of Care Act	Decemb er 2014	April 2015

#### 1.4 Exclusions

Clearly state any areas that are out of scope and whether these are to be delivered by another area/at a later date/not at all, etc.

- Overhaul of the main RCC website Corporate Project Completion date unknown
- Remote working solution for frontline workers Aiming for April 2015
- Fully integrated information service for the whole of Rutland Corporate Project Completion date unknown
- Carers Network Bid to the Cabinet Office

### 2 Approach

Indicate what impact the proposed work will have on business as usual. E.g. will it fit naturally with an existing service? Will an existing service need to change in order to accommodate the maintenance or on-going delivery of the products or services? Does this work stream fall within the Better Care Together work stream?

### 2.1 Operational Readiness

How far has work progressed? What is to be done? Milestones

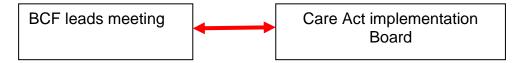
- 1. Data inputter being recruited to will provide the capacity to data cleanse the case management system RAISE
- 2. Information Development Officer post recruited to and in place
- 3. (The above resources will provide operational capacity to deliver IT and data sharing related activity to support integration with health)

- 4. Demonstrations of various case management systems have been taking place procurement exercise will commence shortly
- 5. Information and advice strategy developed
- 6. Detailed Care Act implementation plans in place

#### 2.2 Work stream structure

Consider key Business areas such as procurement, IT, workforce and delivery into Service.

Provide a diagram of the proposed Project structure and brief details of the governance approach



### 2.3 Work stream metrics

BCF Metric	Description of Impact as set out in BCF Significant/moderate/other
	Oigimicant/moderate/other
Patient experience - do care services/support improve quality of life?	Significant
Other metrics	
Adult Social Care Outcomes Framework (ASCOF)	
Annual Satisfaction Surveys	

### 2.4 Work stream metrics recording

Information being collected	At what stage in the patient pathway is the information being collected?	Information collected by whom	Database on which information is collected / captured/ stored
Numbers of assessments completed			
Numbers of personal budgets established			
Numbers of assessments which move to support plans and personal budgets			

Numbers of carers who		
feel able to continue in		
their caring role as a		
result of the involvement.		

# 2.5 Work stream performance reporting against metrics

Type of report being prepared (e.g. SITREPS/ RAISE)	By whom	Reporting dates	Reporting timeframes

# 3 Communication and Engagement

# 3.1 Stakeholder Analysis

Stakeholder Name	How they will impact on the project	How they will be impacted by the project	Communication requirements/methods
Partners	Prisons Health		
Staff	Resource required to deliver the requirements of the Care Act	Capacity/ focus will have to shift to ensure that RCC is ready for the changes to be implemented	Monthly newsletter Team briefings
Carers			
The general public			

# 3.2 Project Reporting and Communication

Type of communication	Communication Schedule	Communication Mechanism	Initiator	Recipient
e.g. Status report	Every other Tuesday	Transformation Board meeting	Work stream Lead	Transformation Team
Status report	Every other Tuesday	BCF leads meeting	Karen DMC	BCF leads meeting

# 4 Risks

# 3.1 Key Risks

Risk No.	Date Opened	Risk Owner	Risk Description	Probability (High, Med, Low)	Impact (High, Med, Low)
1	23.10	Karen DMC	Inadequate funding to meet the Council's additional costs arising from implementation of, and compliance with, the Care Act impacting on the MTFP.	Lowy	Lowy
2	23.10	Karen DMC	Increased service workload particularly processing cases to determine eligibility during the window for self funders to register with the LA in 2015/16 impacting on processing costs, the timeliness of assessments and the quality of service.		
3	23.10	Karen DMC	Existing IT systems and software are not fit for purpose to meet the requirements of the Act with the high level of risk that there is insufficient time to procure a replacement or develop existing software/ processes prior to the Act coming into effect in 2015/16 the impact of which could be a failure to comply with statutory requirements, increased manual systems and workloads and service quality may be compromised.		
4	23.10	Karen DMC	Market sustainability given the number of self funders in Rutland, strengthened Care Quality Commission powers and the right for individuals to ask the Council to organise services on their behalf (which will be at a lower cost) impacting on the availability of services and increased costs to help support providers.		
5	23.10	Karen DMC	Additional responsibilities in relation to prisoners at HMP Stocken and "hidden" demand given the unreliability of data used to agree financial allocations from Central Government impacting on the financial viability of the service and the MTFP.		
6	23.10	Karen DMC	The workforce challenges in terms of working in a person centred way, focusing on prevention and early intervention and the need to develop the right culture and "mind-set" the impact of which		

			could be that quality of care and customer satisfaction are compromised.	
7	23.10	Karen DMC	Our current carers offer given the number of additional cares that may approach the Council to undertake an assessment which creates an additional pressure of £228,000 in 2014/15 having an impact on the MTFP.	

### 5 Costs

#### **5.1 Project Costs**

Include all direct and indirect costs

The costs set out in the table below will support implementation of the Care Act, there are multiple sources for the funding to deliver the scheme and therefore the costs incurred will be higher than the proportion of BCF funding allocated to Care Act enablers. See Appendix 1 attached outlining the level of funding required to support Care Act implementation.

Description	2014/5(£)	2015/6(£)	Total (£)
Staffing costs	-	34, 000	34, 000
System Replacement (Capital):	-	76, 000	76, 000
			£110, 000

### 5.2 Funding

Include detail of any potential, or definite, sources of funding. Indicate whether this is likely to come from inside or outside of the BCF approved allocation for this work stream. If external, identify the proposed source.

Funding Source (External - name/Internal)	Confidence rating of funding being provided (H/M/L)	2014/15 (£)	2015/16 (£)	2016/17+ (£)	Totals (£)
BCF IT and Data Sharing	M	63,000.00	-	-	63,000.00
BCF Care Act Enabling Scheme	М	-	110,000.00		110,000.00
Care Act Implementation Grant		125, 000			125, 000.00

Prisoners		68, 000	68, 000.00
Deferred Payments		69, 000	69, 000.00
Total Funding (currently known)	188, 000	247, 00	435, 000

### 6 Exit Strategy

Describe how this work stream will be sustained e.g. post 3st 1 March 2016<sup>1</sup>

Things to consider:

Will this work stream be transferred to business as usual activity? If so, how? Who will be responsible for this area of work in the long term?

Will some existing services be replaced by the introduction of this service?

What will be the impact (both to the council, health service and to residents) if this service was to cease?

The work associated with this scheme is an enabler and therefore the funding required under the £110k allocation is one off costs to support implementation of the Care Act. Any long term costs required as a result of additional assessments etc will be built in to the MTFP for the People Directorate.

<sup>&</sup>lt;sup>1</sup> As at September 2014 the government has only indicated funding for 2014/15 and 2015/16

Appendix 1 - Full projected costs for the Care Act (As at 3 November 2014)

Care Act Costs:	14/15 (£)	15/16 (£)
Programme Lead & Previous – to August 2015	104,700	53,700
Business Analyst	5,000	0
System's Analyst - Raise	6,700	0
Data Inputter (12 months)	8,400	16,700
Information & Advice Portal	0	5,000
IT Project Lead – all IT demands	30,000	30,000
Additional ACM Staffing – Backfill 14/15	21,600	10,800
Additional Assessment Staffing 15/16	0	53,000
Additional Carers Support Worker		30,800
Non-Staff Costs (Associated with Above)	0	7,000
Prison Assessments & Support Planning	0	68,000
Service Pressures (Carers)	0	228,000
Abacus Software Upgrade	4,822.50	1,393
Abacus Managed Service	4125	5775
Additional Staffing (Finance & Charging)	0	40,000
Recovery of Bad Debts (arising from increase in Deferred Payments	15,000	15,000
Advocacy	8,000	8,000
Publications/Print/Consultation	7,000	7,000
Training – Corporate Budget	0	0
Information Development Officer	12,000	26,000

TOTAL:	227,347.50	601,168.00
*plus costs associated with RAISE systems replacement.		