**REPORT NO: 167/2015** 

# PEOPLE (ADULTS & HEALTH) SCRUTINY PANEL

# 1 October 2015

# **RUTLAND ADULT SOCIAL CARE STRATEGY 2015-2020**

# **Report of the Director for People**

Strategic Aim:	Meeting the hea	eeting the health and well being needs of the community		
Exempt Information		No.		
Cabinet Member(s) Responsible:		Councillor Richard Clifton, Portfolio Holder for Adult Social Care and Health		
Contact Officer(s):	Mark Andre	ws, Deputy Director for	Tel: 01572 75 8339 MAndrews@rutland.gov.uk	
		or, Health and Social ation Manager	Tel: 01572 75 8202 STaylor@rutland.gov.uk	
Ward Councillors	s Affects all w	Affects all wards.		

# **DECISION RECOMMENDATIONS**

It is recommended that the Panel:

- 1. Notes the content and approach of the proposed Adult Social Care Strategy.
- 2. Recommends the strategy for approval by Cabinet.

# 1. PURPOSE OF THE REPORT

1.1. The purpose is to introduce the proposed new Adult Social Care Strategy for discussion and comment, prior to its presentation at Cabinet.

## 2. BACKGROUND AND MAIN CONSIDERATIONS

- 2.1. The Council is a primary stakeholder in a number of partnership based strategies and programmes which are supporting better outcomes and value for money from the increased integration of health and social care provision, notably the Rutland Health and Wellbeing Strategy that runs until 2016, the five-year LLR Better Care Together programme and the local Better Care Fund plan.
- 2.2. In parallel with these strategies, the Council is undertaking its own transformation programme of adult social care to deliver relevant recommendations of the 2014 People First Review. A key objective here is to change service commissioning and delivery in some strategic ways to ensure

the sustainability of adult social care services into the future, against a backdrop of increasing service demand and static or reducing public sector funding.

- 2.3. The proposed adult social care strategy 2015-2020 captures this programme of change to give it structure, visibility and momentum within a challenging wider strategic context. The proposals in the draft strategy are not new commitments for the Council, rather a re-organisation and re-articulation of actions previously consulted upon and agreed via People First. The strategy also includes actions required for the Council to meet its evolving obligations under the Care Act 2014.
- 2.4. The strategy, which is summarised in Appendix A, would ensure that everyone working in social care, both in the Council and in partner organisations, had a clear picture of the Council's priorities and timescale for change.

#### 3. THE PROPOSED STRATEGY

- 3.1. The proposed Adult Social Care Strategy sets out how the Council will sustainably support Healthy and Independent Lives in Rutland, 2015-2019. It is organised into three main objectives:
  - (a) Healthy Rutland promoting healthy lifestyles to prevent or delay the onset of long term limiting illness, including through information and advice and services supporting healthy lifestyle choices. A key aspect of this objective is to secure Public Health provision that is more closely tailored to Rutland's specific issues and priorities.
  - (b) Independent Rutland providing support promoting personal responsibility for health and helping people to sustain independent lives for as long as possible, including through prevention, early intervention and reablement services and the tailoring of those services to the specific needs of individuals and their circumstances. Key elements here include continuing to build the capacity of community based organisations to deliver personalised services and supporting the use of technology for independence, capitalising on the increasing maturity of assistive technologies, growing technical confidence in the community and the County's excellent broadband infrastructure. Further adaptation of the workforce to new ways of working is also vital.
  - (c) **Sustainable Social Care** working more collaboratively with health and other partners to deliver a coherent system of social care and health that is seamless and fit for purpose and supporting a diverse, sustainable and competitive supplier base. Local changes to the commissioning model aiming to broaden out the supplier base are particularly important here, as are changes supporting more integrated working, including proposals for an integrated health and social care hub.

#### 4. CONSULTATION

- 4.1. The new Adult Social Care Strategy has been shaped to respond to a prior consultation undertaken with stakeholders including the public as part of the 2014 People First Review. The strategy explains how the messages from that consultation have been reflected in the proposed programme of work.
- 4.2. It is therefore proposed that a limited consultation be undertaken on the strategy itself, seeking the views of key stakeholders to include Healthwatch as a service user advocate.

# 5. ALTERNATIVE OPTIONS

- 5.1. The main alternative option is to not put in place an Adult Social Care strategy at this time. While this would reduce the number of strategies the Council is managing, there are significant disadvantages to this approach which outweigh this benefit.
- 5.2. First, this would reduce the ability to give momentum and visibility to important parts of the local social care transformation agenda, and to track progress against this. This in turn could slow down the delivery of changes contributing to the wellbeing of local residents, to the financial sustainability of the Council's local social care offer and to its ability to comply with evolving statutory obligations.
- 5.3. Second, the primary strategies in place would continue to be partnership based ones, notably the Rutland Health and Wellbeing Strategy, Better Care Together and the Better Care Fund programme. While these are all important related programmes of work, they do not address the whole County Council agenda for change to meet future challenges and evolving statutory obligations.
- 5.4. Establishing a Council specific strategy ensures that there is a clear articulation of local priorities, which both ensures that all necessary work is covered and strengthens the Council's ability to play its strategic part in the wider cross-sectoral and regional partnership context. It establishes a strong sense of shared ownership and common purpose around some of the most challenging parts of Rutland's programme of social care change.

#### 6. FINANCIAL IMPLICATIONS

- 6.1. The planned changes proposed in this strategy are essential to the ongoing financial sustainability of adult social care services in Rutland.
- 6.2. The overall spend on adult social care in Rutland is now £9.2m which is 28% of an overall council budget of £32m. As detailed in the strategy, while adult services were supplied within budget in 2014-15, anticipated demographic change means that this will be increasingly difficult to achieve without changing models of delivery and taking action to manage demand. A 'do nothing' approach would mean that spend on adult social care would become two thirds of all Council spend by 2030.

6.3. In terms of delivery, the strategy does not entail additional financial commitments. Rather, it will deploy available Adult Social Care budgets to deliver more sustainable service models, including by prolonging independent living to manage demand and changing commissioning and delivery models. Transformational change is supported in parallel by the Better Care Fund and Better Care Together programmes of work.

#### 7. LEGAL AND GOVERNANCE CONSIDERATIONS

- 7.1. The plan is part of Rutland County Council's commitment to changing the model for delivery of social care to meet the requirements of the Care Act 2014, including by 'market shaping' to support a sustainable future fit between the demand and supply of social care services.
- 7.2. To ensure continuing compliance with the Data Protection Act 1998 as delivery models evolve, it will be important to ensure that more integrated working with partners is supported by appropriate information sharing agreements. This work needs to be completed in partnership with other stakeholders, in some cases at the LLR level.
- 7.3. There is also a need for continuing workforce development around managing Data Protection compliance (including ensuring fair processing, securing clear patient consent for information sharing where this is required and respecting the wishes of patients who withhold consent to share their information) in a dynamic, increasingly integrated environment.
- 7.4. Work with suppliers likewise needs to continue to be routinely supported by appropriate data processing agreements.

#### 8. EQUALITY IMPACT ASSESSMENT

- 8.1. A dedicated Equality *Impact* Assessment (EqIA) has not been completed because the actions contained in the strategy are not new in and of themselves and are therefore part of a wider evaluation framework. In particular, a detailed EqIA was undertaken for the People First review in July 2014.
- 8.2. It is anticipated that, where specific projects have potential implications, dedicated assessments would be done at this level. This is the current practice, evidenced for example by the December 2014 EqIA into Assistive Technology, and follows through on the following commitment in the People First EqIA:
- 8.3. "When individual services are reviewed and before firm proposals are brought forward it will be necessary to complete an EIA on each individual service area, as well as further engagement with anyone adversely affected."

# 9. COMMUNITY SAFETY IMPLICATIONS

9.1. It is not anticipated that the strategy has direct community safety implications.

# 10. HEALTH AND WELLBEING IMPLICATIONS

- 10.1. The primary aim of the strategy is to have a positive impact on health and wellbeing in Rutland.
- 10.2. The strategy should help to keep more people healthier for longer, supporting their continuing independence, so helping to manage demand for health and social care services. Relevant interventions include supporting healthy lifestyle choices, such as reducing levels of obesity, smoking and drinking and increasing activity, and encouraging active engagement in communities which increases activity levels while reducing isolation.
- 10.3. Where people are in need of more intensive support, notably vulnerable older people, carers and adults with disabilities, the strategy aims to ensure that there will be a suitable supply of high quality services available to both self and public funded users, that can be provided sustainably in a context of growing demand and limited public spending. These services should also better match the aspirations of individuals, eg. to be able to stay in their own homes as long as possible rather than moving to a care home.

# 11. ORGANISATIONAL IMPLICATIONS

- 11.1. **Environmental implications:** these are anticipated to be negligible.
- 11.2. **Human Resource implications:** the proposals involve the Council progressing further with Adult Social Care transformational change, which may have further implications for human resources, including:
  - (a) Further changes to workforce skills required.
  - (b) Potentially more significant changes arising from exploring more integrated working between health and social care in Rutland, including co-located services, shared posts, multi-disciplinary teams and shared pathways. An example proposal is the potential Rutland Memorial Hospital health and social care hub.
  - (c) The need to ensure that workplace policies keep pace with changes in how employees are working (eg. IT and information security, Data Protection, health and safety).

# 11.3. **Procurement Implications**

(a) The commissioning model for adult social care is changing in some significant ways. There is a strong focus on developing the market not only for sustainable private sector provision but also growing the role that the voluntary, community and faith sectors play in providing a range of services.

# 12. CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

12.1. The support of the People (Adults & Health) Scrutiny Panel for this strategy is sought for two key reasons.

- 12.2. First, the proposed Rutland adult social care strategy sets out a structured programme of work that is essential to helping the Council to follow through on the People First review and to deliver a set of changes that will help it both to meet its evolving statutory obligations and to sustainably meet the growing social care needs of individuals, families and our communities.
- 12.3. Second, having a dedicated Rutland Adult Social Care Strategy articulates and consolidates the priorities of the Council, enabling it to better manage its own programme of change and to play its full part in the increasingly integrated wider health and social care economy.

#### 13. BACKGROUND PAPERS

- 13.1. People First Equality Impact Assessment, 2014
- 13.2. Rutland Joint Health and Wellbeing Strategy 2012-16
  <a href="http://www.rutland.gov.uk/pdf/HWS">http://www.rutland.gov.uk/pdf/HWS</a> Final%20version August%202013.pdf

#### 14. APPENDICES

- 14.1. Appendix A Rutland Adult Social Care Strategy Summary
- 14.2. **Appendix B Rutland Adult Social Care Strategy**: Healthy and Independent Lives A Sustainable Future 2015-2020
- 14.3. Appendix C Rutland Adult Social Care Strategy: Action Plan

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.