

Report to: Health Overview & Scrutiny Panel
Date: 26 July 2012
Report by: Robert Watt, Head of Adult Social Care
Presented by: Robert Watt, Head of Adult Social Care
Subject: Adult Social Care update on key areas

1. Purpose of the Report

1.1 To brief the Health Overview and Scrutiny Panel on recent developments in Adult Social Care since the previous report in March 2012.

2. Recommendations

2.1 That the Health Overview and Scrutiny Panel note the content of this report.

3. Update on Key Areas

3.1 Review of Adult Social Care:

The customer management work stream of the corporate transformation programme has led to a review of how we assess for need and how we deliver Adult Social Care services. As a result we have implemented a number of process changes including:

- Moving to a model of 'retained caseloads' – all clients will have an allocated named worker, offering more consistency when contacting the service.
- Clients informed about any financial contributions they are required to pay towards care costs at the earliest opportunity.

It is anticipated that these changes will:

- Reduce waiting times for assessment
- Reduce debt owed to the authority
- Reduce complaints
- Reduce duplication of assessment
- All of the above will lead to a release of resources

3.2 Local Accounts:

The local account replaces annual assessments of social care services by the Care Quality Commission. The aim is to enable staff and service users to assess performance and whether outcomes are being achieved.

Most significant to the development of a Local Account is the active pursuit of 'personalisation'. A number of recommendations centering on a more personalised approach have recently been agreed by the Senior Management Team. The first phase is the development and publication of Adult Social Care's core principles and the services on offer to the public, which are categorised as follows:-

- Early intervention and prevention
- Short term care and re-ablement
- Long term care and support

Progress will be monitored against a number of objectives and outcomes to be published later in 2012.

3.3 Health & Social Care Partnership (HASP):

Work is progressing with the integration of city wide rehabilitation services. However, the HASP steering group has agreed to delay finalising the S75 agreement, which forms the framework for integrated services, until all changes, including the review of working practice leading to 7 day working, has been implemented. Until a S75 agreement has been signed, provision under a S.113 will allow our staff to be managed by Health.

Progress towards integrating community health and social care services has also progressed. A pilot project will commence in September 2012 which will bring together health and social care services based around GP clusters.

3.4 Extra Care and Affordable Housing Redevelopment Project:

A contract was signed with Housing 21 (H21) in April to commence development of more extra care facilities in the city. Work has now started at the Caroline Lodge site to build 43 Extra Care apartments, which will open in the summer of 2013.

A further survey is required at the Alexandra Lodge site to confirm any additional construction costs, prior to PCC and Housing 21 negotiating a funding solution. A report will be presented to Cabinet in July to seek approval should a further contribution be required from PCC. If agreement can be reached, works will start in January 2013 for 80 Extra Care apartments and a 20-bed re-ablement facility, with plans to open in the summer of 2014.

3.5 New Models of Care Project:

A project to replace Edinburgh House and Hilsea Lodge with one new care home designed to modern standards, also to re-provide the Vanguard day service and review the Corben Lodge residential service was included in the Capital programme in March.

An options appraisal for suitable sites is nearing completion and consultations are underway with all residents, carers and relatives, service users and staff.

A report will be presented to the Cabinet Member for Health and Social Care in July to seek approval for the temporary relocation of the Vanguard service to Beaton Ward, St James' Hospital. This will allow early vacation of the site for relocation of Cosham Health centre, once confirmed by Health. A further update report is planned for October and our aim is for the new accommodation to be open in the spring of 2015.

3.6 Continuing Health Care – Section 75 Agreement:

Work has continued to develop an integrated Continuing Health Care service in Portsmouth from September 2012. Accommodation has been identified for the new staff team

3.7 Independence and Wellbeing Team (IWT) - (formerly Health Improvement and Development Service (HIDS)):

The Portsmouth four year Carers Strategy was launched in June 2011. Much of the strategy's success relies on the development of an effective and widely understood carer's assessment process. A dedicated Higher Grade Social Worker has been recruited to enable this.

Benefits include:

- Clearer processes for professionals to follow, with all carers assessments undertaken by one team.
- Create and encourage a seamless process for assessments and access to carers services and support and remove any disconnect between Adult Social Care (ASC), Adult Mental Health (AMH) and the Independence and Wellbeing Team.
- To enable carers to be assessed and provided with personalised support and services.
- Provide equity in access to carer's assessments and services across client groups (ASC & AMH).
- Create seamless journey for carers between low level need (CSA) and high level need (full carers assessments) as their requirements change.
- Promote and enable the opportunity for carers' needs to be assessed separately and privately, without removing the option for joint assessment if requested.
- Better monitor, manage and report on spend on carers assessments and breaks

3.8 Learning Disability – Section 75 Agreement:

It is anticipated that a formal Section 75 pooled fund arrangement will be in place before the end of this financial year, bringing about a long awaited integrated service, which will provide more streamlined and person centred care.

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July 2012