Report to:	Health Overview and Scrutiny Panel
Date:	18 September 2015
Report by:	Robert Watt, Director of Adult Services
Presented by:	Justin Wallace-Cook, Assistant Head of Adult Social Care
Subject:	Adult Social Care update on key areas

1. <u>Purpose of the Report</u>

To brief the Health Overview and Scrutiny Panel on recent developments in Adult Social Care 2015.

2. <u>Recommendations</u>

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

3. Update on Key Areas

3.1 ASC Budget

Adult Social Care continues to face significant financial challenges, with \pounds 6m savings to find in 2015/16 and a further \pounds 7m across the following two years 16/17 and 17/18.

Whilst we continue to look at staffing and efficiencies, significant savings will be required from direct provision and commissioning of services.

Budget proposals for savings will be put to the council during September and following this, consultation will then take place with any service users that may be affected by these proposals

3.2 ASC Development Projects

As part of our ongoing strategy to improve residential and independent living facilities for vulnerable people across the City, the following projects are underway or completed.

Maritime House Extra Care Sheltered Housing (ECSH)

Eighty flats have been delivered on the Alexandra Lodge site with the first people moving in during April. Sixty seven are now filled. One major achievement was that three people with severe physical disabilities moved to their own flats in July having lived in a care home for more than twenty five years. Our Extra Care developments have attracted great interest from other Local Authorities and we have received national recognition from the Association for Public Service Excellence (APSE).

Victory Unit

Delivery of a purpose-built 20-bed re-ablement facility, that underpins the strategy of Extra Care by keeping people independent. The Victory Unit has transferred successfully from Longdean Lodge to its new premises, part of the Maritime House building.

An official opening by the Lord Mayor is taking place on 15 September.

Modernising Residential Dementia Care

The replacement of existing inefficient in-house run residential care buildings, which are reaching the end of their useful lives and do not meet modern standards An appropriate site that meets service requirements has been identified and approved by Cabinet & planning permission achieved.

A procurement process has not resulted in an acceptable tender received. Re-calculated estimates identify a significantly increased capital cost so additional sources of capital are being investigated. This includes a reduction in scope from 72 beds to 60 beds & replacing them with supported living units.

Other options are being considered and an appraisal of these is being undertaken, including support from the corporate development team.

3.3 Care Act

The Act came into force on 1 April 2015, bringing together over 60 years of care and support law into a single clear statute.

A presentation was given to HOSP on 16 December 2014

The Act was split into 2 elements:

Part 1 Care and support to be implemented in 2015

Part 2 Funding reform (cap on costs) to be implemented in 2016. On 20 July 2015 ministers announced a delay in the implementation of part 2 until 2020.

Progress to date.

- New assessment & care plans introduced
- Payroll Service established for Direct Payment users

- Resource Allocation System (RAS) developed for carers (pilot to commence October 2015)
- Re-structured Portsmouth Adult Safeguarding Board (PASB) to reflect Care Act requirements
- Establishment of the Designated Adult Safeguarding Manager (DASM) role
- Pan Hampshire Safeguarding Policy re-written
- Community Connector Pilot prevention project to work with people not eligible for social care services, to prevent, reduce or delay need for statutory services
- LD day service transformation concentrating on work, health, independence and social inclusion
- Work with Think Local Act Personal (TLAP) on Information and Advice Strategy
- Work with Towards Excellence in Adult Social Care (TEASC DH / LGA) on Risk Awareness Pilot
- Sector Led Improvement peer to peer between LA's

Latest from National Implementation Board

The Board discussed the £146m payment currently being made to local government in 2015/16 to implement the cap and other measures. The decision whether to continue making this payment rests with Ministers.

The Board considered whether the status of the programme should be reduced to Amber. The introduction of the Living Wage also posed a risk to the future implementation of the Act. It agreed actions to start the re-planning of milestones to implement the cap in 2020 and considered options on the future of the programme. The Board also agreed to engage with the insurance industry to develop insurance products.

3.4 The Better Care Fund (BCF)

See Highlight Report attached - Appendix 1

Integrated Localities

There is an intention to have an integrated localities offer within health & social care for adults in Portsmouth. This move will join up Solent and PCC provided services for people over 18 years of age who access community nursing, ASC and OPMH services. The service will work together to determine the most appropriate assessments for a person's needs and reduce duplication in the number of people that the service user needs to see to access the service they need. The integrated team will develop a trusted assessor model whereby resources can be accessed based on an assessment from any professional. The team will work together to form a "team around the person" to ensure timely discharge where an admission to

QA has occurred and work in partnership with GPs in Portsmouth to ensure access to the right service at the right time.

The first step is to establish co-location and then to work toward integration. Thus far, buildings have been identified and the work is ongoing to establish agreement over rental and facilities and a partnership agreement.

- Confirmed that the plan is to move to 3 co-located teams, based on the scoping work coming out of the North locality work, the core team will be community nurses, ASC social workers and related staff, OTs, physios, OPMH community team, community geriatrician and related admin staff.
- Development of a locality leadership model to enable the changes to working practices required. It was felt that this would be 3 senior managers but more work required
- Recognised that for the majority of staff there will be no change to what they do / how they work in the first instance. Changes to working practices / new model of care to be developed once the teams are in place.
- Recognise that in the first instance there may not be any additional management savings, over and above those being proposed already for ASC / Solent but in joining teams it will ensure we retain the management capability / capacity to deliver across health and social care in light of the proposed cuts required.
- Recognised that there are a number of unknowns, some that are fairly short term that need to be resolved and others that we will not know the answers to until we start some of the changes. Acknowledged that there is a balance to be struck between achieving scale and pace of change required, with not rushing into something that has potential consequences for worsening the position.

3.5 Safeguarding

Development towards a Multi-Agency Safeguarding Hub (MASH) has seen the co-location of the Adult Safeguarding Manager with the Children's Joint Action Team and Hampshire Police. The full MASH will include Health and progress is being made towards this.

This has resulted in greater joint working and sharing of information with colleagues across all agencies.

3.6 Carers update

Carers Strategy 2015 to 2020

This refreshed strategy was endorsed by PCC Cabinet on the 11 June 2015 and the Clinical Strategy Committee of the CCG with very positive feedback from both. This strategy is Portsmouth's second Carers Strategy and builds on the significant progress and achievements of the previous Carers Strategy 2011 to 2015. This time the strategy has been produced jointly by Portsmouth City Council, NHS Portsmouth Clinical Commissioning Group, Solent NHS Trust and Portsmouth Hospitals NHS Trust and in consultation with Carers. The strategy covers carers of all ages who provide unpaid support for a family member or friend, who due to illness, disability, a mental health condition or an addiction cannot cope on their own.

The strategy has been written to build on the previous document and in response to the publication of the National Carers Strategy Second Action Plan 2014-2016. The local plan reflects the four priorities laid out in the national strategy:

- 1. Identification and recognition
- 2. Realising and releasing potential
- 3. A life alongside caring
- 4. Supporting carers to stay healthy

A local action plan has been developed based on these four areas with input from local carers.

This strategy and its' two year action plan sets out how we will improve carer identification and support across the health and social care system in Portsmouth, including a work programme that will meet the National Carers Strategy, the Care Act, and Better Care Fund and locally identified requirements and will continue to be monitored by the Carers Executive Board.

The strategy was launched during Carers Week, w/c 8th June 2015. A copy of the strategy can be found here -

https://www.portsmouth.gov.uk/ext/health-and-care/carers/carersstrategy.aspx

3.7 Day Service Transformation (Learning Disability)

There is currently a limited, relatively inflexible Day Service offer. We are undertaking a 'Day Service Transformation' across in-house and independent sector providers designing services focussing on the 4 areas of Work, Health, Independence and Social Inclusion.

Working collaboratively with Public Health, Adult Social Care, Housing, Carers and Service Users, we are designing solutions that are cost effective, of benefit to the wider population and reflect a culture of aspiration, focussing on individual and Community assets. Currently there is a relatively high proportion of service users receiving intensive packages of support while others receive much less. The aim is to reduce high care costs and develop low cost, socially inclusive, solutions which represent the only long term sustainable approach.

Widening the market will necessarily involve a significant reduction in the scale of Portsmouth Day Service who currently support 170 service users and this will involve redundancies.

Robert Watt Director of Adult Services September 2015