From: Graham Gibbens, Cabinet Member for Adult Social Care and

Public Health

Andrew Ireland, Corporate Director for Social Care, Health and

Wellbeing.

To: Adult Social Care and Health Cabinet Committee – 11 July 14

Subject: Adult Social Care Transformation - Building Community

Capacity Programme

Classification: Unrestricted

Past Pathway: DMT May 2014

Electoral Division: Whole Kent Programme

Summary:

This report explains the approach being taken in Adult Social Care to engage with the voluntary sector and ensure it is strategically aligned to the council's aims and objectives in the Adult Social Care Transformation Programme.

Recommendation:

The Cabinet Committee is asked to:

- i) CONSIDER the proposed approach, and
- ii) ENDORSE the planning and delivery of the Community Capacity Building Programme.

1. Introduction

- 1.1 In May 2012 Kent County Council set a blueprint for the Transformation of Adult Social Care, and in doing so established the key foundations for transformation:
 - A determined focus on prevention and targeted intervention, ensure that services respond rapidly and are more effective.
 - To encourage and empower individuals to do more for themselves and ensure greater support is available to carers
 - And importantly to this programme that we would develop a new deal with both voluntary and independent providers; one that is based upon trust and incentivisation
- 1.2 Adult Social Care faces fundamental choices to ensure that there is a sustainable model of social care fit for the future and we are able to continue to meet the needs of the most vulnerable in our communities. A different approach is needed if we are to succeed in a context of increasing demand,

rising public expectations and less funding. Along with other measures this means adopting an asset based approach which empowers individuals, families/carers and communities to meet their own needs outside of a social care model of support.

- 1.3 This report introduces the planned Community Capacity Building Programme, the objective of which is to support the transformation of adult social care and ensure the council is able to respond fully to the requirement of the Care Act.
- 1.4 The Community Capacity Building Programme will require the decommissioning and recommissioning of current voluntary sector services to deliver a consistent menu or 'core offers' of services. All services need to support independence, resilience, self-care and wellbeing, diverting people away from formal social care systems and providing an alternative to, or supplementing, traditional care packages.
- 1.5 Services will be generic where possible and specialist where proven necessary. We are looking initially to deliver a new approach to information, advice and advocacy, an older person's core offer and a mental health core offer. As the programme develops it will also encompass sensory services, services for adults with learning or physical disabilities.
- 1.6 The programme will be built on the principles of self-care and self-management, which are intrinsic to the council's Integration Pioneer Programme and we are working to secure joint investment from Public Health and Kent Clinical Commissioning Groups.

2. Financial Implications

- 2.1 Adult Social Care spends £18m on voluntary/community based services to support vulnerable adults, £14m via grants and £4m via contracts. This includes services for older people, people with mental health issues, learning disabilities and physical disabilities.
- 2.2 The programme will be funded via decommissioning historic grants and moving to outcome focussed contracts. This will require reprofiling the current investment to ensure it is equitably allocated and strategically focused to meet the directorate's aims and objectives. We will also look to secure through robust business cases joint investment with Public Health and Clinical Commissioning Groups.

3. Bold Steps for Kent and Policy Framework

- 3.1 KCC's commitment to supporting the voluntary sector is outlined in the following documents:
 - Bold Steps
 - Kent Compact
 - KCC Volunteer Charter
 - Facing the Challenge

3.2 All services need to be strategically aligned to KCC vision for adult social care which is that by 2018, we will have a sustainable model of integrated health and social care which offers integrated access, provision and commissioning. We will have improved outcomes for people across Kent by maximising people's independence and promoting personalisation. We will have maximised value for money by optimising our business, managing demand and shaping the market through strategic engagement with key suppliers.

4. Relevant History

- 4.1 Current voluntary sector services have developed over years without a consistently agreed strategic framework, support services were commissioned locally not strategically. There are examples of great practice and innovation but services are not consistent leading to a postcode lottery of access and availability. It is difficult to justify current patterns of resource allocation for example, why do we spend £18m in voluntary/community support and £160m in care home provision? Going forward we must reengineer our existing system to better reflect the needs, wishes and aspirations of vulnerable adults.
- 4.2 Mapping by Strategic Commissioning has shown that the type of support available, the quality and the level of investment in these services vary across the county. Furthermore many of the services, especially those for older people, are delivered via traditional models, which do not reflect the changing needs of our population. This programme offers unique opportunities to commission and procure services that are fit for the future and which provide equity of investment, access and excellent return on investment.
- 4.3 In some instances the nature of our funding has contributed to a dependency on KCC and a lack of sustainability within the voluntary provider market. Inevitably this programme will involve moving some services from annual grants into longer term funding arrangements. The outcome focussed contracts will be used to promote stability and sustainability in the market and enable us to create a culture of performance management all of which will require a transformation in the way we work with the voluntary sector.
- 4.4 There has been some frustration about the rolling nature of grant funding but this is a complex and important piece of work that requires carefully planning, co-production and must be properly aligned to the overall adult transformation programme. We need to plan consult, reflect and take the sector with us as we transform community services.

5. Supporting transformation in meeting need/managing demand

5.1 In repeated consultations with people who use our services and those who choose not to, we been told that people want a life not a service. However, our current case management model has developed over years to be primarily about supporting people to access care package services. This programme of community capacity development is central and crucial to transformation in two key ways:

- By providing a range of community based services that support independence and wellbeing, diverting people away from formal social care systems (cost avoidance)
- By providing a range of quality, value for money services that provide an alternative to, or supplement traditional care packages (cost savings)
- 5.2 The commissioning of these services supports both the pathway and optimisation work streams of adult social care transformation by ensuring that individuals who are supported post enablement to maintain their levels of independence and that the right services are in place to support people in their communities.
- 5.3 Newton Europe our efficiency partner completed a mini diagnostic assessment focused on current provision with the voluntary sector. The diagnostic showed that there was scope for greater use of the voluntary sector as our care pathways are redesigned to direct people to find different solutions in the community. The Community Capacity Building Programme is a key feature of programme two of our transformation programme and we will be working with our efficiency partner to developed robust analysis to underpin out approach.
- 5.4 The future strategy will be designed to promote community connectivity and resilience. We will look to support localism and bottom up sustainable change which recognises the assets within communities and encourages community development.

6. Care Act Compliance

- 6.1 Adopting a Community Capacity Building approach will ensure that we are able to meet the requirement of the Care Act, where there is a renewed focus on wellbeing and prevention. The Act requires local authorities to ensure the provision or arrangement of services, facilities or resources to help prevent, delay or reduce the development of needs for care and support. This prevention duty extends to all people in a local authority's area, including carers, regardless of whether they have needs for care and support, or whether someone has had a needs or carer's assessment.
- 6.2 Information and advice is fundamental to enabling people, carers and families to take control of and make well-informed choices about their care and support. Not only does information and advice help to promote people's wellbeing by increasing their ability to exercise choice and control, it is also a vital component of preventing or delaying people's need for care and support. The Act requires local authorities to establish and maintain an information and advice service in their area. The information and advice service must cover the needs of all its population, not just those who are in receipt of care or support which is arranged or funded by the local authority.
- 6.3 The Act introduces a new duty for local authorities to create a diverse market of high quality providers, be aware of changes in demand and ensure that

services are sustainable. In doing so local authorities must give particular attention to ensure sufficient services that enable participation in *work*, *education and training*. In line with the Care Act, services will also deliver our statutory responsibility to provide early intervention and prevention services that will reduce, delay or prevent support needs of both adults and carers.

6.4 The Community Capacity Building Programme will seek put people at the centre of their care, is designed to support independence and resilience, creating a network of relationships around them, supported by community services with statutory services being the last option.

7. Social Value Act

7.1 The Social Value Act and other related national guidance place an onus on public sector organisations to give full consideration to the added social value that the voluntary sector bring to service provision. Further, there is a responsibility placed on the public sector to make procurement processes proportionate and accessible to the voluntary sector.

8. Market Development

8.1 Recent findings indicate that the voluntary sector in Kent is ill-prepared for wide scale procurement activity and this a risk to KCC. The need for county wide coverage along CCG boundaries will necessitate the formation of consortia or partnership arrangements and both the scale and value of a contract to provide a core offer is likely to attract larger organisations to bid. In order to prepare and support the voluntary sector in Kent through these processes a market and development service has been commissioned. This will help up skill the sector, encourage the development of networks and provide support through the commissioning process.

9. Options considered – including maintaining the status quo

| Option | Options Appraisal |
|--------------|---|
| 1 Do Nothing | Risks: |
| | Services are not strategically realigned, they do not support adult social care transformation and we do not achieve best value from our significant investment. Inability to comply with the Care Act Voluntary sector market will remain unstable due to annual funding. Access to support and investment in services will remain inequitable. Reputational risk to KCC when status quo to voluntary sector is maintained during a time of radical transformation. This option conveys a mixed message to the whole social care market where one part is protected and the rest is not. |

| Opportunities: |
|---|
| People without services that support them to be independent Inability to comply with the Care Act Increased demand to social care and health due to lack of investment in preventative community services Opportunities: Historic investment contributes to savings Risks: |
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| • Impact on commissioning resources to deliver |
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| Kent approach complex programme of change |
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| Opportunities: |
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| Entire associated budget can be realigned to equalise funding associated budget can be realigned to equalise. |
| funding according to levels of need and deprivation. |
| Funding can be realigned based on true cost of |
| delivering specific elements of the core offer. For |
| example, levels of investment in Information, Advices |
| and Advocacy can be increased to deliver the 'right' |
| model |
| Ensures Care Act compliance |
| · |
| Supports Adult Social Care Transformation |
| |
| 4 Commission via Risks: |
| Investment will have to stay within existing boundaries |
| approach one and cannot be equalised across the county |
| CCG cluster at a • Some services are commissioned across district, CCG |
| and county boundaries and money for specific areas |
| cannot be easily extracted from those arrangements in |
| |
| a phased manner. |
| Some projects (for example, IAG) will be delayed in |
| order for sufficient funding to be released to |
| commission the service |
| Barrier to county wide solutions that may give KCC |
| |
| better return on investment |
| |
| Opportunities: |
| Opportunities: • Enables learning from initial area to inform remainder |
| Opportunities: Enables learning from initial area to inform remainder of programme |
| Opportunities: Enables learning from initial area to inform remainder of programme Commission alongside CCG's that are ready and |
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| Opportunities: Enables learning from initial area to inform remainder of programme Commission alongside CCG's that are ready and avoids waiting for CCG's that are not |

10. Legal implications

10.1 The design of new outcome focused contracts may require specialist legal advice.

11. Equalities implications

- 11.1 An Equality Impact Assessment (EqIA) has been completely for the overarching programme. A specific EqIA will be completed as part of developing the business case for the older person's core offer; the mental health core offer has an EqIA which has been approved by the Diversity team.
- 11.2 In addition some specific grants may require Equalities Impact Assessments, specifically those that will be ended and where equitable services will not be re-commissioned.

12. Property implications

12.1 Some voluntary sector providers operate out of KCC properties as the programme develops all property implications will be assessed and evaluated with full involvement of appropriate colleagues.

13. Formal decision making

13.1 If there is a move to commission services then there will need to be formal decisions to the award the necessary contracts. These will be taken by the Cabinet Member for Adult Social Care and Public Health.

14. Conclusion

- 14.1 The Community Capacity Building Programme will support the transformation of adult social care and ensure the council is able to respond fully to the new requirements of the Care Act. We need a more robust and strategically commissioned range of community based services designed to promote independence and wellbeing and control, which keep people healthy, well, support recovery and reablement and delay of negate the need for more expensive care managed support.
- 14.2 The planning and delivery of this approach is complex and will be central to programme two of our Adult Social Care Transformation and our Integration Pioneer Programme. Services which prevent or delay entry into social formal care systems are essential to support the transformation of adult social care. As our Community Capacity Building Programme we will devise mechanisms, methods and measures to evidence impact of investment and explore means of understanding and assessing the wider social return on investment (SROI).

15. Recommendation:

The Cabinet Committee is asked to:

- i) CONSIDER the proposed approach, and
- ii) ENDORSE the planning and delivery of the Community Capacity Building Programme.

16. Background Documents - None

17. Contact details

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