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Subject: Adult Transformation Programme for Older People and Physical Disabilities Division, Families and Social Care - Update

Classification: Unrestricted

Summary

This report contains an update on one aspect of the Transformation of Adult Social Care Programme, from the Older People and Physical Disability (OPPD) Division and outlines further planned changes for the Division. The Boundaries Realignment and Transformation change management programme in OPPD has been in place for nearly a year and significant changes and financial savings have been achieved. Further changes are planned during 2014, to achieve closer working and integration with Health services, additional financial savings and improvement in the way services are delivered to the public.

1. Introduction

Following implementation of the Health and Social Care Act 2012, a programme of change management known as 'Boundaries Realignment' has been in place in OPPD since February 2013, in preparation for Health and Social Care integration. The Boundaries Realignment work is in three phases, with phases one and two resulting in restructuring at Assistant Director and Service Manager Level by September 2013, aligning structures with Clinical Commissioning Group Boundaries. Following the announcement of the Care Bill in 2013, this legislation will also impact on future service design, pending the final stages of implementation and royal assent.

In May 2013 work commenced with our Efficiency Partner Newton Europe. Since October 2013, the third phase of the Boundaries Realignment work has taken place in conjunction with the Newton Europe Transformation Programme Optimisation work stream, to ensure maximum financial savings are achieved and efficient streamlining of the OPPD service, in the final phase of change and preparation for integration with Health. As Kent was selected as a Pioneer for health and social care integration, this final phase of change also needs to comply with Kent's Pioneer Action Plan, which will be in place by 4.4.14. The incremental steps that will result in the delivery of the Pioneer Action Plan within a two to five year timescale are being taken forward via the Kent Integration Pioneer Steering Group and work plan.

2. Policy Context

The Boundaries Realignment and Transformation Programme supports Bold Steps for Kent, specifically:

- Transformation of health and social care in Kent
- Improved access to public services

- Improved services for the most vulnerable people in Kent County Council

This change programme is also in line with Facing the Future Whole Council Transformation:

- Putting the customer at the heart of service delivery
- Shaping services around people and place
- Looking at our services and the difference they make
- Putting a greater focus on outcomes

It is known that from April 2015, the policy context and legislative requirements of the Care Bill will not only shape how OPPD services are delivered but the change carries the potential to increase operational activity and additional associated transactional costs connected to the implementation of the reform of care and support. Currently, work is in hand to quantify with a greater degree of confidence the true cost impact of the Care Bill and this will be reported to Cabinet in due course.

3. Benefits of Change to the Public and Better Service Outcomes

A detailed review by Newton Europe of the processes and systems supporting the delivery of the OPPD service has revealed elements of duplication, complexity in handover transactions and scope to improve the overall efficiency of the service. By changing some of the processes and systems the service has become more responsive to the needs of service users. Working with a design team of over 20 OPPD practitioners, managers and support staff, the new process was devised and has been trialled, adapted and improved over a two month period as a 'Model Office' in Dover and Thanet. This has resulted in the following service improvements:

- Work in the contact assessment team to increase the effectiveness and ensure that the best response for the services user is made in an appropriate timescale. This work has seen a 40% reduction in the number of onwards assessments generated by selecting more appropriate direct interventions -
 - An increase in the use of the Enablement service and subsequent independence of service users, leading to a decrease in long term dependence on domiciliary care services.
 - An increase in the level of information, advice and guidance provided signposting people who are in need but do not meet the eligibility criteria for OPPD services, to alternative provision in the private and voluntary sector and encouraging people to be independent and self-managing when this is appropriate.
- A scheduling process has been developed to book community visits (when required) at the point of contact. This results in a 70% reduction in waiting time for service users, more clarity of the next steps and a reduction in duplication of effort for practitioners. This process has also seen a 60% reduction in the number of overdue reviews, meaning more frequent reviews with service users
- A 20% reduction in the time practitioners spend on paperwork by elimination of unnecessary effort and duplication, supported by a bespoke IT package, which enhances the functionality of the current client IT system. This means practitioners can spend more time on visits and other associated work and less time sat at a desk and on data inputting.
- A streamlining of the team structures meaning a reduction in the number of handovers and a more consistent service.

The next stage of implementation of the Model Office is roll-out to the other OPPD Areas in Kent from January to June 2014, accompanied by an in-depth training programme delivered by OPPD staff, supported and guided by Newton Europe. This approach is designed to take future sustainability into account and empower OPPD staff to deliver a more consistent, effective and efficient service.

The set of slides attached as Appendix 1 provides further background detail on the new processes, demonstrating higher levels of efficiency, streamlining and overall improvement in service delivery to the public. The slides include real case examples of improved outcomes for service users, from the Care Pathways Programme, as a result of applying the new processes.

It should also be noted that access to the OPPD service was extended to include weekends, public and bank holidays from 9am to 5pm on 1 November 2013. This extended service mainly operates on hospital sites to support avoidance of hospital admission where this is appropriate and support timely discharge from hospital. The service will be extended further during 2014 to 8am to 8pm seven days per week, including community settings, so that social care and health services are working together at the point of need. This will improve the overall service to the public and save money through avoiding unnecessary delays in making the appropriate care pathway available. The changes to extended access hours to social care services are one of the conditions of the national Better Care Fund, which can be accessed to support Integrated Pioneer working.

4. Financial Implications

The proposed changes support the savings target for the Adult Social Care Transformation Programme. The savings already achieved in OPPD during 2013/14 are **£766.6k**. The projected savings for 2014/15 from applying phase three of Boundaries Realignment and the Optimisation Programme are **£3.69 million**.

5. Future Workforce Resourcing and Development

In partnership with Newton Europe, OPPD care pathways and business processes are being re-engineered to be more streamlined, efficient and cost effective, in order to achieve savings targets and at the same time deliver a more efficient service to the public. OPPD staff are being retrained accordingly during the first half of 2014. As plans for social care integration with health progress, a workforce review will take place to ensure that resourcing levels, qualifications and skills mix are in line with the new model of service delivery and requirements of integrated working. Staff will be consulted on this during 2014 once further details and exact proposals are known. Every effort is and will continue to be made to ensure timely communication and meaningful engagement with staff to help them understand the pace and complexity of change.

6. Conclusions

It is in the interests of all stakeholders that the next phase of change management is implemented in OPPD at the earliest opportunity:

- In order to realise a proportion of the projected savings targets for the Adult Social Care Transformation Programme.
- To implement the new streamlined OPPD service across all Areas in Kent resulting in improved service delivery to members of the public who are eligible to receive OPPD services and suitable alternatives for those who are in need but do not meet the eligibility criteria.

- To support health and social care integration as the pace of change increases due to achievement of Integration Pioneer status and Clinical Commissioning Groups publish their plans and priorities.
- To progress with OPPD workforce review and development informing future deployment of staff in line with the new streamlined model of service delivery and closer working and integration with Health.

7. Recommendations

Cabinet are asked to:

- i) Note the progress to date in support of the Adult Social Care Transformation Programme.
- ii) Note the better service outcomes for the public as a result of implementing the Boundaries Realignment and Transformation Programme through implementation of the Model Office.
- iii) Note the financial savings from 2013 to 2015 as a result of changes to date and further proposed changes.
- iv) Endorse the intention through the Integration Pioneer Action Plan and Steering Group to accelerate health and social care closer working and integration.
- iv) Endorse the plan to review and develop the OPPD workforce in line with roll-out of the Model Office and integration of social care and health services.
- v) To agree that a detailed Care Bill implementation plan is presented to Cabinet in due course, detailing how the key tasks of the plan will be aligned to the Care pathways, Optimisation or Commissioning work streams of the Transformation Programme.

8. Background Documents

None

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