New Operating Model for Adult Social Care

1.0 Purpose of Report

To update Scrutiny on the new operating model for adult social care and invite discussion on what this means both for staff and for local residents.

2.0 Issues for Scrutiny

- To have an update on how adult social care is changing.
- To understand the drivers for change.
- To influence how changes are implemented.

3.0 Background

3.1 The operating model sets out the overarching vision and the mechanics for how we will commission and provide safe and sustainable care and support to the adult population of Cumbria.

3.2 Social care in its simplistic terms comprises of personal care and practical support for adults with physical disabilities, learning disabilities, physical or mental illness, older people as well as support for their carers’. It also includes joint working with children’s services for young people transitioning into adulthood.

3.3 Much has changed over the last decade that requires us to look at how we deliver social care going forward. Firstly the most significant piece of legislation, The Care Act 2014, was introduced in 2015. Secondly a clear driver from Government towards integrating health and social care with an intention for this to be underway now and integrated by 2020. Thirdly the money from central government to the Council has greatly reduced and continues to do so over the life of this parliament. Fourthly people’s own expectations from public services have changed alongside their expectations from living in a digital world.
3.4 Core to the model is a number of principles:

- Help people to achieve the outcomes that matter to them in their life;
- Safeguard people from harm and strengthen our local arrangements;
- Assess people’s needs and coproduce support plans that enable people’s lives to improve;
- Support people at home where ever possible;
- Prevent unnecessary admissions to hospital and discharge from hospital in a timely manner;
- Better user engagement and feedback in service;
- Personalisation core to the model including the use of direct payments;
- Proportionality to intervention to be enhanced in line with the Care Act;
- Direct access into care and support where possible;
- Intervention to be timely, outcome focused and time limited – connecting with wider prevention and well-being services and creating community resilience;
- Consistency for residents on standards of service.

3.5 The model:

[Diagram: Health and Care Services: New Customer Journey]
3.6 What does the money look like?

- We currently spend £157m Gross, £82m Net and £44m Service User contribution
- We receive £20m form the Better Care Fund (NHS)
- We have total £3.95m Savings 2016 – 2018

3.7 What else needs to be considered?

Adult Social Care cannot be seen in isolation of wider health and wellbeing. Core to the new operating model are the improvements through public health on prevention and Divert (Cabinet 2015), improved access to reablement, developments in commissioning through the agreed Commissioning Strategy and developments in the health arena around Success Regime in the North and South Vanguard (Better Care Together) also the new operating model is inclusive of the developments for the functions within Adult Social Care to operate more efficiently and effectively through digital means aligned to the Corporate Digital Strategy for Cumbria.

3.8 What have we achieved so far?

- Implemented Care Act 2014 (refreshed in March 2016)
- Introduced Single Point of Access and improved information and advice
- Improved social work presence in acute hospital and alignment to community hospitals
- Taken back management of mental health social work
- Strengthened personnel and arrangements for safeguarding
- New social work academy for adults (on the back of the success of Children’s Academy)
- Improved awareness and take up of assistive technology
- Improved relations with health in readiness for integration
- Improved digital offering through STRATA (electronic referral pathway) and QWELL (On-line support and counselling for carers)
- Development of performance and workload management system
- Greater engagement with staff – changing behaviours and culture

3.9 What are key next steps?

Whilst the big ticket items are around integration with health and the development of Integrated Care Communities (ICC’s) there are still a plethora of internal ongoing changes to make including:
• Implementation of the service reviews;
• Working with public health and the health and wellbeing system and Health and Wellbeing Coaches (HAWC’s);
• Working with Cumbria Care in particular reablement;
• Aligning with commissioning to ensure outcomes of assessments are met through market place
• Systems are reviewed and simplified including assessments
• Digital offer enhanced including web site (Information and Advice and Self-Assessment)
• Improved autonomy to carers support organisations
• Review of out of hours and 7 day working
• Implementation and embedding into operations Making Safeguarding Personal
• Improving Transition from Children’s Services to Adulthood
• Continue implementation of the ‘Future of Social Work in Mental Health’ DH programme

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Appendices

* Appendix A: Coproducing the model with staff

Previous Relevant Council or Executive Decisions  
[including Local Committees]

No previous relevant decisions

Background Papers

No background papers

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Appendix A: Coproducing the model with staff