

Panel Session Two: The Transformation of Social Care

Briefing note

Background

The LGA has welcomed the shift from Government to an increased focus on well-being, independence and choice for service users. This will lead to significant changes in adult social care and local services over the next few years as a result of the transformation of social care programme, announced in January 2008.

It has been recognised that radical changes in how services are delivered is needed to meet the challenges of demographic change, more diverse communities and the higher expectations of service users. Local authorities will be expected to move to a more personalised approach to the delivery of adult social care, including a strategic shift towards early intervention and prevention to promote people's independence and well-being.

The sector-led programme will focus on building the strengths and capacity of individual councils to make local decisions on priorities. The Department of Health will be making over half a billion pounds available locally, regionally and nationally as a ring-fenced grant over the next three years to help councils to redesign and reshape their systems. In addition, local and regional partners will be expected to use existing resources differently.

The DH and key stakeholders, including the LGA, will develop a programme nationally to support councils. There will also be an increased role for regional improvement bodies, such as the JIPs and the RIEPs. This commitment to joint working to guide the transformation of adult social care was first outlined in the *Putting People First: A shared vision and commitment to the transformation of Adult Social Care* concordat between central and local government signed in December 2007.

The role of local authorities

Reforming social care will require a huge cultural, transformational and transactional change across local government and the wider public sector. The programme will require both a transfer of control to service users and, paradoxically, a stronger leadership role for the local authority. A safe and well-informed environment to exercise choice must be created for there to be a safe transfer of control and risk to service users. Local authorities have a key role in ensuring people have access to information, advice and resources to take action for themselves. They also can help to build up community capacity so that people choosing their personalised care can access timely, good quality and appropriate information, assisted by independent advocates where needed.

Local authorities will also have to ensure that the transformation programme does not just focus on the provision of personalised budgets for just those within their eligibility criteria but also seeks to promote the well-being of all local people. In order to ensure that the programme truly does increase local well-being, local authorities will need to go beyond social services departments and budgets and ensure access to universal services. Authorities will need to develop a full understanding of the needs of everyone in the community, including the wishes and preferences of self funders. Carers' needs and rights also need to be placed at the centre of any local delivery arrangements.

Key challenges to local delivery

Local authorities will also have to make certain that key local stakeholders, including the workforce, are fully engaged with the process. There will need to be a focus on ensuring there are sufficient skills and buy-in within the local workforce. The shift from a service to an outcome-focus and the confidence to transfer risk to the individual may take a while to embed itself.

Local authorities will also have to develop the market – and decommission existing contracts – to ensure that local providers are able to provide more diverse services that deliver to outcomes, rather than traditional cost/volume contracts. Further thought may also be needed as to how commissioning on a range of levels will interface to ensure “fit”, including practice-based commissioning from GPs, joint commissioning at a strategic level and the new personalised budgets.

The boundaries between health and social care may need to be re-examined to bring in a range of funding streams and to ensure control is retained throughout the user pathway across social care and health and other services.

Authorities may have some concerns over the issues and costs of scaling up the still mainly untested personalised budgets, especially in a period of tight funding levels. There are concerns from some that these budgets have simply been developed to reduce pressure on overstretched social care budgets. The forthcoming Green Paper will hopefully provide a vital opportunity to relieve some of these fears.

There has been much concern ‘on the ground’ of how to develop suitable IT, assessment and resource allocation systems to meet to the new personalisation agenda. Findings from the Individual Budget pilots that should outline best practice in these areas are eagerly anticipated and further delays in issuing them could lead to every authority ‘re-inventing the wheel’ when developing their support systems.

As well as ‘choice’, there also needs to be consideration of how to increase ‘voice’. Local partnerships will need to develop a strong local vision rooted in priorities agreed through consultation and engagement with local communities and a range of partners – and will have to then have the confidence to allow local people and representative groups to be involved in the design and delivery of services to ensure they really reflect their needs.

In an interview with Community Care magazine at the end of a parliamentary year, the health minister Ivan Lewis has warned that councils could lose their adult care commissioning role if they did not deliver on the Putting People First agenda to personalise services from 2008–11. He has suggested that the Councils would lose their responsibility for care unless they step up improvements in their performance over the next three years

Proposed questions for discussion are as follows:

- Personalisation, prevention and access to information, advice and advocacy are all key areas of social care transformation – what do the Panel think are the most crucial for LGA to push as priorities locally and nationally?
- What evidence do the Panel think there is on the impact of preventative work locally?
- What does the social care transformation agenda mean for carers/the NHS (as appropriate)?
- Do the panel feel that the transformation agenda could have any negative impacts on vulnerable adults, in terms of risk etc?
- How can the development of services to meet the needs of individuals also take account of the needs of their family and other informal contributions (and how will the NHS cope with this?)
- How can local authorities ensure that their workforce are fully skilled and fully engaged?

Further information:

The DH Local Authority Circular which outlines the vision for the transformation of social care:

http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/LocalAuthorityCirculars/DH_081934

CSIP have pulled together information and reports on personalisation, including a toolkit aimed at those delivering change: <http://networks.csip.org.uk/Personalisation/>