

<b>12 March 2018</b>		<b>ITEM: 7</b>
<b>Health and Wellbeing Overview and Scrutiny Committee</b>		
<b>Living Well in Thurrock: Adult Social Care Transformation Programme Update</b>		
<b>Wards and communities affected:</b> All	<b>Key Decision:</b> Non-key	
<b>Report of:</b> Roger Harris, Corporate Director of Adults, Housing and Health		
<b>Accountable Assistant Director:</b> Les Billingham, Assistant Director for Adult Social Care and Community Development		
<b>Accountable Director:</b> Roger Harris, Corporate Director of Adults, Housing and Health		
<b>This report is public</b>		

## **Executive Summary**

Adult Social Care faces a number of significant and sustained challenges. Transformation of the existing health and care system is a must in order to ensure sustainability by using available resource to greatest effect.

The Adult Social Care transformation journey began in 2012 with a programme called Building Positive Futures. The programme recognised the vital role of the built environment and of community resilience. Instigating the Programme resulted in the development of the Stronger Together Thurrock Partnership and also attracted a significant amount of grant money with which to develop a greater choice of accommodation for both older people and adults of working age. The Programme achieved a great many things including Local Area Coordination, HAPPI housing schemes, growth in supported accommodation, and community hubs.

Living Well in Thurrock was launched as phase 2 of Thurrock's transformation programme and was a collaboration with local Health partners and the voluntary and community sector. Living Well in Thurrock built on the work developed by Building Positive Futures – for example expanding Local Area Coordination, introducing Social Prescribing, developing independent living accommodation, and scoping the development of a 21<sup>st</sup> century residential care facility.

Phase 3 of the Adult Social Care transformation programme consolidates and expands the approach further still – with a focus on place and on system redesign.

This report reflects on what has been achieved through the delivery of the Living Well in Thurrock Programme and set out next steps and future plans.

## **1. Recommendation(s)**

### **1.1 For the Committee to note and comment on the Adult Social Care Transformation Programme: Living Well in Thurrock**

## **2. Introduction and Background**

2.1 Thurrock Council's Adult Social Care transformation journey started back in 2012 following a Commission of Enquiry in to Housing, Health and Social Care across South Essex in 2011. The three key areas of interest identified by the Commission remain the focus of our transformation today:

- The significance of place and housing in terms of improved health and wellbeing;
- The crucial roles that communities play in providing nurture and support for all, and therefore the need to build resilient communities; and
- The importance of professional services providing a safety net for people – so long as they are delivered in a whole system way and only when a 'service' is the right option.

2.2 Thurrock's initial Adult Social Care transformation programme was called Building Positive Futures and had a number of key successes under each of the three strands identified in 2.1. Much of the success achieved was as a result of collaboration with key partners – with the voluntary and community sector having a significant role. The successes included:

- The introduction of Local Area Coordination;
- Asset-Based Community Development – leading to the instigation of the Stronger Together Partnership and Programme;
- Successful bids totalling £2.6 million of capital funding used to develop HAPPI housing schemes – 28 specialist flats in South Ockendon (Bruyn's Court), supported-living flats for working age adults (Medina Road), and funding to transform 8 sheltered housing flats in Aveley (Chichester Close);
- A Rapid Response and Assessment Service (RRAS) – operating in partnership with community health provider (NELFT);
- A Joint Reablement Team (JRT); and
- The establishment of a joint post across Adult Social Care and Community Health (NELFT) – Director of Integrated Care.

2.3 In January 2017 a report was presented to the Committee which outlined the next phase of the Department's transformation programme - Living Well in Thurrock. Living Well in Thurrock is designed to respond to the key challenges facing adult social care and to build on the success of Building Positive Futures. Recognising that a collaborative approach was vital to success, Living Well in Thurrock became a joint programme with Thurrock Clinical Commissioning Group and incorporated the Stronger Together Thurrock Programme as part of its approach.

2.4 The purpose of this report is to detail the achievements of the Living Well in Thurrock programme to date and to outline future transformation plans.

### 3. Issues, Options and Analysis of Options

#### Why do we need to transform?

3.1 There are a number of factors driving the need for transformation across the health and care system. These include:

- An ageing population – with people living for more years but with a greater number of years in poorer health;
- Increased complexity of cases for both older people and working age adults;
- Insufficient capacity across the system;
- An extremely fragile provider market – particularly domiciliary care;
- A health and care system designed to react to rather than prevent ill-health; and
- Difficulty retaining and recruiting social care staff – carers in particular.

3.2 The factors driving the need for health and social care transformation require a very different approach to be taken – one that focuses on prevention and early intervention and more generally on promoting wellbeing. The current system has predominantly focused on responding to need and waiting until individuals reach crisis point. To successfully overcome current challenges, transformation must redesign the foundations upon which the health and care system is based – for example:

- A focus on strengths not on need – reducing dependency;
- Empowering individuals to take control of their own lives;
- Targeting interventions so that they prevent crisis;
- The importance of outcomes as opposed to process;
- The need to reduce duplication, bureaucracy and process to ensure the majority of resource is focused on providing support;
- The importance of technology to enable improved outcomes; and
- The importance of a solution and outcome focus not of a service and prescription model.

3.3 Whilst the transformation of the health and care system is extremely complex and constantly evolving, there is already evidence that the approach being taken in Thurrock is having an impact. In addition to a number of case studies captured to demonstrate impact, the 2016 Annual Director of Public Health report stated that data *'suggests prevention and early intervention programmes such as Local Area Coordination, Stronger Together and Living Well in Thurrock are having a positive impact on reducing demand for statutory care packages....'* Whilst this is positive and evidence that the Transformation Programme is shifting the system towards prevention and early intervention, there is a need to acknowledge that when individuals do enter the system, they often have a greater degree of complexity and therefore cost.

## What's been achieved?

3.4 Living Well in Thurrock has continued to build and expand on the successes achieved during the first phase of transformation – against the programme's three key strands: stronger communities, built environment, and health and social care system infrastructure. As already stated, a significant amount has been achieved in collaboration with partners – namely local NHS partners and the voluntary and community sector (through the Stronger Together Programme). Much of the expansion has been made possible by Better Care Fund investment – a pooled fund between the Council and CCG. Some of these were reported in the January 2017 report, so the examples mentioned below are in addition to those already reported:

- **Local Area Coordination** – starting with 3 Local Area Coordinators (LACs) and a manager, the success of the approach has resulted in a Borough-wide service consisting of 14 LACs and a manager. The service is funded by the Better Care Fund.
- **Social Prescribing** – starting with 2 Social Prescribers funded by the Better Care Fund, social prescribing has been expanded to provide greater coverage across the Borough. Social Prescribing's purpose is to reduce service demand (particularly primary care) and to enable individuals to find solutions to non-clinical issues – e.g. via effective signposting and through improved resilience. This might include referral to a Local Area Coordinator.
- **Thurrock First** – Thurrock's integrated single point of access across Adult Social Care, Mental Health and Community Health was launched in July 2017. The service aims to reduce duplication and bureaucracy and improve the customer's experience. There are case studies that demonstrate the impact of the service to date and further work will be carried out that will consider how the service can expand and improve.
- **Micro-Enterprises** – Thurrock's micro-enterprise programme has resulted in over 80 micro enterprises now being in place. The approach has enabled greater market choice and focuses on helping people to live independently at home, live a full life and keep well, maintain or make new relationships, and to get around in their community. The approach also enables a greater proportion of investment to be retained within the local economy.
- **Chichester Close** – 8 refurbished ex-sheltered housing flats were made available for people with a learning disability as a result of a successful bid to the Housing and Technology for People with Learning Disabilities Local Authority Capital Fund. The aim of the flats is that individuals are able to live as independently as possible within the community and that where possible, residential placements are avoided or reduced. All 8 flats have now been let.
- **21<sup>st</sup> Century Care Home** – in November, the Committee noted and supported the strategy for the development of a new residential facility for the 21<sup>st</sup> century on the Whiteacre and Dilkes Wood sites in conjunction with Health partners. The purpose of the strategy is to be able to support people who are very frail and who would usually be

supported in residential care to be supported in a new way – one that maintains privacy, independence and dignity.

- 3.5 Thurrock is seen as being at the forefront of innovation in transformation and as such the Council's approach is attracting significant interest and recognition. For example, the Chief Social Worker for England (Lyn Romeo) visited Thurrock during 2017 and then wrote about Thurrock's strength-based approach to social work in her annual report; a report following a facilitated workshop hosted by health and social care think tank the King's Fund entitled 'six innovations in social care' mentioned Thurrock as one of a small number of authorities to adopt five of the six innovations; and in January a number of national organisations at the forefront of innovation in social care made Thurrock the focus of a workshop hosted by Birmingham University. The workshop reviewed Thurrock's use of innovation (particularly through strength-based approaches) in its transformation journey to date and discussed how the approach might need to evolve to move system redesign further forward – including how best to evaluate the impact of the changes being made.
- 3.6 The recognition received by the Council for its work to date has enabled Thurrock to be in a position to inform national policy. This has included the forthcoming Green Paper for Older People's Social Care.
- 3.7 Due to the interest in Thurrock's approach and regular contact received from local authority colleagues requesting information, in February the Council hosted a successful Adult Social Care 'showcase' event. The event was attended by over 100 people and showcased the Council's approach and future plans. Whilst the Council does not profess to have all of the answers, it does appear that Thurrock is at the forefront in terms of its thinking and progress to date.

### **What's next?**

- 3.8 Whilst the Council, in conjunction with partners, has successfully implemented a number of new and innovative approaches aimed at transforming adult social care, it is important that these initiatives do not operate in isolation and it is also important that Adult Social Care continues to consolidate and build on what is already in place.
- 3.9 During 2017, the Director of Public Health developed a 'case for change' that helped to define the next phase of Thurrock's transformation journey. The work focused on shifting resource away from the most expensive part of the system (acute) and to the community where it would have the greatest impact – in terms of prevention, early intervention, and management of long-term conditions. To be successful, the existing health and care system would have to be redesigned to focus on the principles underpinning prevention and early intervention.

- 3.10 As a result of the work carried out by the Director of Public Health, work has commenced through a New Models of Care programme to deliver the recommended action identified by the Case for Change. The work has attracted recognition from Public Health England. A report was presented to the Committee in November. In short, the work provides Thurrock with an opportunity to redesign the health and care system around a place (Tilbury and Chadwell) to the benefit of people within that 'place'. The programme is consistent with the direction of travel set by Adult Social Care – including recognising the importance of strengths, prevention, early intervention, and outcomes over process. The approach is one based on collaboration and includes a range of partners.
- 3.11 As part of the New Models of Care work and the next phase of transformation, Adult Social Care is to pilot two alternative delivery models – based in the Tilbury and Chadwell locality. This followed an options appraisal that explored and evaluated alternative options for the delivery of current in-house Adult Social Care provision. As well as piloting the individual approaches, the new pilot teams will explore the advantages of working alongside other innovations. The pilot approaches are:

**Wellbeing Teams** – two staff-led teams will be piloted. The teams will provide an alternative delivery model for domiciliary care. The aim is to enable staff to spend a greater amount of time with individuals being supported; work closer with individuals to identify and meet personal outcomes; and to help professionalise the carer role. With the domiciliary care market so stretched, developing a new approach is vital. Whilst being tested, there are also opportunities to have greater connectivity with community activities and to identify how teams could work alongside Health – e.g. community health. The aim is to have the pilot teams in place by the end of the summer.

**Care and Assessment Team** – one team will be piloted. The team will carry out social work functions in the Tilbury and Chadwell locality and will be based in that community. The benefit of the approach is that staff themselves lead the team's approach and are able to change how the team and function operates to achieve the best method of working. The approach was first piloted in Shropshire and has numerous benefits – for example a streamlined assessment process, increasing the amount of time spent within individuals by reducing bureaucracy and unnecessary process, and changing the location of assessments – e.g. not always carried out in the home but in a community setting.

The pilot approaches will be evaluated to identify impact and will be governed by through the New Models of Care programme.

#### **4. Reasons for Recommendation**

- 4.1 To update the Committee and ensure its input on progress made to date and on future Adult Social Care transformation plans.

## **5. Consultation (including Overview and Scrutiny, if applicable)**

- 5.1 Thurrock residents were consulted on and informed a set of principles that underpin any health and care transformation activity. Additionally, Thurrock residents – including users of services, carers, and representative organisations – are involved in shaping many of the pieces of work incorporated within the transformation programme. As part of this, the Council works with user-led organisation Thurrock Coalition to ensure plans are developed in conjunction with users of services and their representatives.

## **6. Impact on corporate policies, priorities, performance and community impact**

- 6.1 The Adult Social Care transformation programme will contribute to the delivery of the Council's vision and priorities in particular:

**People** – a borough where people of all ages are proud to work and play, live and stay

- High quality, consistent and accessible public services which are right first time
- Build on our partnerships with statutory, community, voluntary and faith groups to work together to improve health and wellbeing
- Communities are empowered to make choices and be safer and stronger together

## **7. Implications**

### **7.1 Financial**

Implications verified by: **Jo Freeman**  
**Management Accountant Social Care & Commissioning**

The Adult Social Care Transformation Programme is delivered within existing budgets and through the successful bidding of government funding grants. The Programme is designed to help to meet the challenges faced by Adult Social Care and to therefore ensure as best as possible that the Department is able to meet demand and operate within its budget.

## 7.2 Legal

Implications verified by: **Sarah Okafor**  
**Barrister (Consultant)**

On behalf of the Assistant Director of Law I have read in full the contents of this report, and there appears to be no external legal implications arising from it. The aims and objectives of the Transformation will operate within the range of legislative statutory frameworks that govern Adult Social Care and Local Government functions.

## 7.3 Diversity and Equality

Implications verified by: **Becky Price**  
**Community Development Officer**

Service users and residents across all protected groups may be impacted by the Living Well at Home programme. Positive implications include increased choice and control over the type of solution individuals receive along with how and where they access them leading to an increase in the scale of independent living within service users' and residents' own homes and communities across the Borough. Positive implications also relate to preventing and delaying service need and a focus on delivering outcomes. Failure to fully implement the programme could have negative impacts – for example a reduction in services offered or how they are offered and restrictions about the type and accessibility of services available. This could lead to higher levels of dependency and complexity of cases. Implementation of the Living Well in Thurrock Programme aims to address inequality in service provision and increase the scale and the scope of the positive benefits outlined.

## 7.4 Other implications (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None

## 8. Background papers used in preparing the report (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- Living Well in Thurrock: Adult Social Care Transformation Programme, Health and Wellbeing Overview and Scrutiny Committee, 17 January 2017
- New Model of Care for Tilbury and Chadwell, Health and Wellbeing Overview and Scrutiny Committee, 16 November 2017

## 9. Appendices to the report

- None



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