DECISION-MAKER:	HEALTH AND WELLBEING BOARD			
SUBJECT:	VULNERABLE PEOPLE BOARD - MAKING IT REAL			
DATE OF DECISION:	29TH JANUARY 2014			
REPORT OF:	DIRECTOR OF QUALITY AND INTEGRATION INTEGRATED COMMISSIONING SOUTHAMPTON CITY CCG/SOUTHAMPTON CITY COUNCIL			
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STATEMENT OF CONFIDENTIALITY				
None.				

BRIEF SUMMARY

Southampton City Council and Southampton Clinical Commissioning Group have made a commitment to the Integrated Person Centred Care Programme. This also formed the basis for a submission to the Department of Health Pioneer Bids. Although unsuccessful in the first wave of Pioneer Bids, all agencies including the council and the CCG have expressed their commitment to pursuing the core components including signing up to the Making It Real initiative. This report asks the Health and Wellbeing Board to declare its commitment to Making It Real.

RECOMMENDATIONS:

(i)   That Health and Wellbeing board to declare their commitment to the Making it Real initiative.

(ii)   That stakeholder mapping to be undertaken against the Markers of Progress for both Making it Real and NHS England roll out of personal health budgets.

REASONS FOR REPORT RECOMMENDATIONS

1.   To provide leadership for the further development of Make It Real in order to take forward the Integrated Person-Centred Care Programme, which aims to provide a better experience for patients and their carers and families.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2.   None. It is considered a priority to take this programme forward.

DETAIL (Including consultation carried out)

3.   Making it Real is an initiative from Think Local Act Personal (TLAP), a national, cross sector leadership partnership focused on driving forward work with personalisation, and community-based social and more recently health care. Southampton City CCG and Southampton City Council fully support the work of TLAP and currently working with them to implement the TLAP Draft Framework for HWB Developing the power of strong, inclusive communities.

4.   Making it Real sets out what people who use services and carers expect to see and experience if support services are truly personalised. They offer a set of "progress markers" - written by real people and families - that can help an organisation to check how well they are progressing towards transforming adult social care and more recently health services. The aim of Making it Real is for people to have more choice and control so they can live full and independent lives.

5.   The Making it Real initiative has invited all agencies, including local authorities and clinical commissioning groups to sign up to the Making It Real initiative. Currently there are 599 agencies signed up to the initiative, including over 60 local authorities and 2 clinical commissioning groups.

6.   The increasing political emphasis on personalisation, including personal health budgets, coupled with the government's commitment to the Making It Real initiative suggests sign up is seen as a key element of the both pioneer bids, integration and developing personalisation through both social and health care environments.

MAKING IT REAL REQUIREMENTS

7.   Making It Real is asking Health and Wellbeing Boards to make a declaration, which commits the them to the following

- Registering the organisation
- Identify a named lead
- **Making a Board level declaration**
- Mapping the organisation against a series of 'I' statements. See Appendix A. This involves a self assessment and views gathered through discussion with service users and the public
- Develop (coproduce) a 'Make it Real' action plan. This should be shared publicly and the top 3 priority areas posted on the TLAP website. The 3 priority areas will reflect and draw from the priorities set out in the Southampton Personalisation Strategic Intent. They are Integration, coproduction, providing good advice & information,

developing the workforce, developing the support systems, developing a suitable finance system, offering personal health budgets, increasing take up of direct payments, developing the market place and ensuring risk and safeguarding are paramount and proportionate.

Agencies would then continue to
- produce reports and summaries of successful initiatives for local audience
- update against the 3 priority areas and
- update the action plan every 6 months.

8. Health and Wellbeing Board are being asked to declare a commitment to the Making it Real initiative. In doing so there is a recognition and acknowledgement by Southampton City Council and Southampton Clinical Commissioning group, supported by other members of the HWB, of the work needed to map each agency, through stakeholder engagement against the relevant markers of progress and 'I' statements.

9. Alongside the mapping and stakeholder engagement for Making It Real, there is also an opportunity to undertake stakeholder feedback about the NHS England Markers of Progress (for roll out of personal health budgets) at the same time. We would recommend both stakeholder engagement and consultations are undertaken at the same time.

10. An initial internal self-assessment against both markers of progress (TLAP and NHS England) has already been undertaken. Self assessments have been completed for each organisation, and then merged into one combined integrated document. This has provided early insight into the likely position of each organisation and reflects the areas of work covered in the priorities set out above (although it may vary once full internal and external stakeholder engagement completed). A copy of the documents (SCC, SCCCG and integrated) are available on request.

RESOURCE IMPLICATIONS

Capital/Revenue

11. A significant element of the work will be taken forward by the Integrated Commissioning Unit (ICU) to meet the city wide agenda for personalisation. Costs will be incorporated into this workstream, with requests for specific capital or revenue funding raised appropriately e.g. developing a support planning service, interim workforce development requirements.

There is currently no committed budget or the development of personalisation, although developments have been met and supported by the ICU

Property/Other

12.   None.

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

13.   Section 195 of the Health and Social Care Act 2013 places a duty on Health and Wellbeing Boards to encourage better service integration. Improved service integration will contribute towards better integrated person centre care.

Other Legal Implications:

14.   None.

POLICY FRAMEWORK IMPLICATIONS

15   None.

KEY DECISION?   /No

WARDS/COMMUNITIES AFFECTED:	All

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SUPPORTING DOCUMENTATION

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Appendices

1.	Think Local Act personal – I Statements

Documents In Members' Rooms

1.	None

Equality Impact Assessment

Do the implications/subject of the report require an Equality Impact Assessment (EIA) to be carried out.	No

Other Background Documents

Equality Impact Assessment and Other Background documents available for inspection at:

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)

1.	None.	

Appendix A

Information and Advice. Having the information I need, when I need it.
- I have the information and support I need in order to remain as independent as possible.
- I have access too easy to understand information about care and support which is consistent, accurate, accessible and up to date.
- I can speak to people who know something about care and support and can make things happen.
- I have help to make informed choices if I need and want it.
- I know where to get information about what is going on in my community.

Active and supportive communities. Keeping friends, family and place
- I have access to a range of support that helps me to live the life I want and remain a contributing member of my community.
- I have a network of people who support me - carers, family, friends, community and if needed paid support staff.
- I have opportunities to train, study, work or engage in activities that match my interests, skills, abilities.
- I feel welcomed and included in my local community.
- I feel valued for the contribution that I can make to my community.

Flexible integrated care and support. My support my own way
- I am in control of planning my care and support.
- I have care and support that is directed by me and responsive to my needs.
- My support is coordinated, co-operative and works well together and I know who to contact to get things changed.

Workforce. My support staff
- I have good information and advice on the range of options for choosing my support staff.
- I have considerate support delivered by competent people.
- I have access to a pool of people, advice on how to employ them and the opportunity to get advice from my peers.
- I am supported by people who help me to make links in my local community.

Risk enablement. Feeling in control and safe
- I can plan ahead and keep control in a crisis.
- I feel safe, I can live the life I want and I am supported to manage any risks.
- I feel that my community is a safe place to live and local people look out for me and each other.
- I have systems in place so that I can get help at an early stage to avoid a crisis.

Personal budgets and self-funding. My money
- I can decide the kind of support I need and when, where and how to receive it.
- I know the amount of money available to me for care and support needs, and I can determine how this is used (whether its my own money, direct payment, or a council managed personal budget).
- I can get access to the money quickly without having to go through over-complicated procedures
- I am able to get skilled advice to plan my care and support, and also be given help to understand costs and make best use of the money involved where I want and need this.