

<b>DECISION-MAKER:</b>	PANEL B		
<b>SUBJECT:</b>	A VISION FOR SOCIAL CARE: CAPABLE COMMUNITIES AND ACTIVE CITIZENS		
<b>DATE OF DECISION:</b>	13 JANUARY 2011		
<b>REPORT OF:</b>	EXECUTIVE DIRECTOR OF HEALTH AND ADULT SOCIAL CARE		
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<b>STATEMENT OF CONFIDENTIALITY</b>
None

## **SUMMARY**

To update the panel on the Government's Vision for Adult Social Care and Southampton's progress towards achieving the vision.

## **RECOMMENDATIONS:**

- (i) To note the key issues outlined in the Vision for Social Care,
- (ii) To note and comment on progress in Southampton towards achieving the actions outlined in the Vision.

## **REASONS FOR REPORT RECOMMENDATIONS**

1. To ensure members are aware of the Government's direction in relation to Social Care proposals and have the opportunity to consider how Southampton City Council are responding.

## **CONSULTATION**

2. None.

## **ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

3. None.

## **DETAIL**

4. The Department of Health Published a document entitled "A Vision for Adult Social: Capable Communities and Active Citizens" on 16<sup>th</sup> November. It sets out principles for adult social care services and will be followed by a White Paper late next year. The White Paper will also be informed by the review of adult social care (ASC) legislation and the Commission on ASC Funding reporting in spring and summer 2011 respectively.
5. The Vision aligns social care reform to 7 principles. The key messages for each of these principles are outlined below.

6. **Prevention**

- Big Society approach a fundamental for effective prevention.
- Councils have a vital role in leading change within their communities.
- CSR gave resources for councils to deliver prevention initiatives.
- Restricting support to those with the highest need is not fair and false economy. prevention will help reduce the cost of care packages.
- Technology, relationships between councils and re-ablement services are key
- A partnership approach with wider contributors to prevention including housing and employment.

7. **Personalisation**

- Personal budgets to be the norm – ideally as a direct payment.
- Some groups may need more help to manage a direct payment.
- Focus on the outcomes of greater choice, control and independence.
- Information and advice are essential and councils have a role to ensure that the right advice and information are readily available.

8. **Plurality and Partnership**

- Personal budgets and self funding will create responsive person-centred services.
- Niche/specialist providers have a role alongside mainstream providers in meeting people's needs - not exclusively in the social care sector (e.g. leisure, transport, education support).
- Councils have a role in stimulating and shaping the market and supporting providers to develop innovative ways to address care needs.
- Move away from block contracts to support the growth of smaller providers.
- Need to achieve efficiencies across the sector and improve outcomes through a joined-up approach between social care, housing, employment and others.

9. **Protection**

- Protection of vulnerable people should not be at the cost of rights to make decisions but there is a need to manage risks.
- Tiered approach - government providing direction and leadership and the CQC focusing on safety and quality and inspecting services where there are concerns.
- Local communities encouraged to be the eyes and ears of safeguarding.

10. **Productivity, quality and innovation**

- Councils must redesign their services to deliver efficiencies and transform how social care is delivered.
- Reduce unnecessary management costs and redirect to funding care and support.
- Integrated crisis response services, intermediate care services, integrated telecare and telehealth support cited as proven ways to deliver efficiencies.
- Councils with substantial in-house provision to look to the market, including social enterprises, mutual and vol orgs, to replace them.

- CQC will no longer undertake an annual performance assessment. However, where concerns are raised CQC will be able to inspect councils.

11. **People**

- Support will be provided to staff and leaders to deliver the new agenda.
- Councils to work with the independent sector and partners to commission the workforce of the future and lead changes for existing staff.
- Government and the social care sector to co-produce an occupational health strategy to reduce the rates of sickness absence.
- A College of Social Work to be created.
- Councils invited to develop the Social Work Practice model trialled for children's services (partnerships of social workers, vol sec organisations, and private sector organisations that operate as social enterprises).

12. **Actions**

The vision document set out a number of actions that councils will need to pursue over the coming months, and a number of issues that will need to be considered in detail. These are outlined in annexe 1.

13. **Outcomes framework for adult social care**

A consultation document has also been published on an outcomes framework for adult social care. The key points are

- The abolition of a national performance management framework, league table and national targets.
- Publication of local accounts on quality and outcomes.
- Suggests agreeing a small subset of local information shared between areas to provide a basis for benchmarking and sharing best practice.
- Quality outcomes data set (QODS) to bring together data in one place.
- QODS = 4 overarching measures, underpinned by specific outcome measures These are summarised in Appendix 2.
- The first QODS would be implemented from April 2011 based on data sets already agreed.
- ADASS and NHS Information Centre working on a "zero-based" review of data to build a more robust QODS introduced in stages from in April 2012.

14. **Conclusion**

These two documents set out a direction for adult social care. Work is already underway on many of the issues proposed. However, further work is required achieve the vision and this challenge extends beyond the Health and Adult Social Care Directorate.

**FINANCIAL/RESOURCE IMPLICATIONS**

**Capital**

6. None.

**Revenue**

7. None.

**Property**

8. None.

**LEGAL IMPLICATIONS**

**Statutory power to undertake proposals in the report:**

9. The duty to undertake overview and scrutiny is set out in Section 21 of the Local Government Act 2000 and the Local Government and Public Involvement in Health Act 2007.

**Other Legal Implications:**

10. None.

**POLICY FRAMEWORK IMPLICATIONS**

11. None

**SUPPORTING DOCUMENTATION**

**Appendices**

1.	The Vision for Quality In Social Care A Summary of Proposals
2.	Transparency in outcome: a framework for adult social care. Proposed outcome and quality measures

**Documents In Members' Rooms**

1.	None
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**Background Documents**

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	
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**Background documents available for inspection at:**

**KEY DECISION?                      N/A**

<b>WARDS/COMMUNITIES AFFECTED:</b>	All
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