

4 Year Financial Strategy - Adult Social Care

Introduction

1. Adult social care and health are facing significant challenges to make care and support sustainable for the future. A growing, ageing population with increasingly complex conditions are putting pressure on services.
2. The current model of delivery isn't sustainable. The first contact a customer usually has is when something has gone wrong leading to greater dependency on long term support such as home or residential care.
3. The department is developing a model which shifts the support from the end of the customer journey when a crisis point is reached to intervening earlier and, where possible, preventing it being reached in the first place.
4. The department will "invert the triangle" of the care and support model currently adopted by firstly looking at the capacity of the individual and their community to maintain their independence. Social Care services will be there once all other solutions have been tried. The model in broad terms is:
 - Stage 1 – Provide information and advice to customers to help them before they need Social Care. Develop communities to support the individuals living there. Provide advice to customers on changing their lifestyle to support them in retaining their independence
 - Stage 2 – Assist customers to maintain their independence. Encourage and expand use of technology and equipment (eg alarm response service)
 - Stage 3 – Provide short term intensive support (reablement) to customers to secure their independence. Work with Health to ensure both health and social care needs are addressed
 - Stage 4 – Encourage take up of personal budgets to allow customers to assess for themselves what they need to achieve their outcomes
 - Stage 5 – Provide support for those needing complex and long term packages of care

5. The new model places greater emphasis on preventative services and intervening early. The department will work with partners, communities and individuals to address issues about:
 - Social Isolation and loneliness
 - Preventing Falls
 - Older and vulnerable people's nutrition
 - Accessibility to their community with accessible and affordable transport options
 - Low level, practical support to maintain their households and independence
 - Supporting carers to maintain their caring role
6. A successful model will have responsive and supportive communities helping people remain independent, fulfilling their lives and reducing the need for social care intervention
7. The Government also announced in the settlement its intention to continue and expand health and social care integration using the Better Care Fund as its vehicle. The fund nationally will increase from £3.9bn in 2016/17 to £5.4bn by 2019/20.
8. The Better Care Fund in York is a £12.1m pooled budget between the Vale of York Clinical Commissioning Group (VoYCCG) and the Council which must have a plan to meet the following national conditions:
 - maintained social care provision
 - seven-day services provision to prevent unnecessary non-elective admissions
 - better data sharing
 - a joint approach to assessment and care planning
 - agreement on impact of changes to some providers
 - agreement to invest in out-of-hospital services
 - agreement on a local action plan to reduce delayed transfers of care.
9. The integration with health over the coming years will be a key driver in improving the support offered to residents currently and the council will have to work with key partners, such as the NHS and Public Health to make it successful. However, this ambition needs

to be set against the significant and mounting financial pressures in the VoY CCG, which may hamper progress.

Approach to Protecting Priority Areas

10. The Directorate has reviewed all service areas and some areas have been protected in 2016/17. Services will continue to be reviewed and any improvement to the benefit of the customers or users of the service will be considered. Protected services in 1617 include:
 - The supported employment workshops and offering customers work experience in other settings
 - Several commissioned contracted services offering a range of support as they are considered critical in delivering the early interventions and prevention approach
 - Early intervention and prevention contracts

Medium Term Efficiencies and Savings

11. Budget reductions over the next four years will rely on the successful implementation of the new operating model. The majority of the savings in 1617 will generate more savings over the following three years but there are other areas which will be reviewed and expected to deliver future savings.
12. Assessment and Care Management – The new operating model intends to reduce the volume of customers accessing social care and this will impact on the size of the assessment and care management function needed to support customers. Review in this area will also:
 - Simplify and standardise practice and process, sharing best practice where appropriate
 - Use technology to improve the productivity with which staff work
 - Encourage self assessment so customers can determine for themselves whether they are likely to be eligible for services
 - Explore opportunities for joint working with Health Colleagues where appropriate

13. The support to carers will be further developed. A project starting in May 2016 will improve the support the council offers carers. £150k will be invested from budget set aside for implementing the Care Act 2014. It is widely acknowledged that carers are a vital component in the health and social care economy and investing in support to carers has been shown nationally to generate savings in other care budgets
14. Savings will be generated from the approved Older Person's Accommodation Programme (OPAP) by re-providing the care and support currently given in our homes. Phase 1 is nearing completion in March 2016; although investment is needed in the early years to facilitate the programme, the annual budget saving should be in excess of £400k by 2019/20. Members will continue to receive reports at crucial decision points.
15. In house small day services will be reviewed and remodelled where appropriate to provide better outcomes for individuals attending these services.
16. Existing contracts will be reviewed to determine if there are any efficiencies to be achieved by retendering, commissioning with Health or exploring any other opportunities which may present themselves.

Decisions Required

17. The decisions that are set out in the 16/17 savings provide the basis for moving forward over the next four years. The key decision needed in the coming year will be on adopting a new operating model.
18. This will describe in more detail how the principles and intentions above will be turned into a practical way of delivering social care in the city. Investment will be needed in terms of capacity and resources to develop and implement the fundamental change in the way services are currently delivered.

Risks and Impact Assessment

19. Current customers will be impacted by changes to the services. Customers will be fully informed and where changes make a difference to services received, the transition will be a managed process. The benefits to all current and future customers of moving to a sustainable model which promotes independence are based on the likelihood of better outcomes as well as financial sustainability. It is considered that the mitigated impacts on customers are necessary to move to a sustainable model.
20. The level of change needed will require significant resource in the transition to the new model of working. If this is not available, there is risk around the deliverability of these proposals, which could impact on services to customers.