

Health and Wellbeing Board

22 October 2014

Report of Guy Van Dichele, Director of Adult Social Care, City of York Council

Overview of the Care Act - status and requirements for implementation

1. Summary

This paper aims to provide a briefing and information provision to the Board to outline the latest developments of the Care Act as it makes its final stages through Parliament heading for regulations and guidance to be signed off by mid October 2014. The Care Act is the biggest reform across social care in 60 years and has been subjected to large scale consultation which closed on 15 August 2014. The reforms are wide reaching across all of the sectors working with adults and carers and we have a joint responsibility to deliver with a whole systems approach.

The emphasis moving forward is on person centred, asset based care. In future people's care and support needs will be met by harnessing existing capacity within neighbourhoods and families to provide support to address people's needs at an earlier stage and before the need for formal services.

The provision of high quality state support is based on clear national entitlements envisaging that care and support will be more effectively joined up across all local services (particularly across health and housing) and will work more collaboratively across local authorities, providers and other statutory organisations.

2. Purpose of the Report

To inform the Health and Wellbeing Board of the key elements of the Care Act and to highlight the new and extended duties and responsibilities on local authorities in relation to care and support for adults including people who fund their own care alongside scoping

the implications for the Council arising from the new duties and responsibilities, including financial and wider resource implications.

This paper discusses the key elements of the Care Act 2014 and the implications for City of York Council as we currently understand them and how the activity is taken forward.

Background

3. The Care Act is a very significant piece of legislation relating to social care and wider support for adults and carers. It aims to transform the social care system and its funding. As a result of this, there is a considerable amount of work to be done to prepare for its implementation, and to understand the impact it will have on the Council. The Act introduces wide ranging changes in the ways in which adult social care and health support and services are arranged. The Department of Health has worked together with the Local Government Association (LGA), the Association of Directors of Adult Social Services (ADASS) and a wide range of partners to develop and shape the regulations and guidance. There are a number of information sources that provide more information about the Act and can be accessed at:

<u>https://www.gov.uk/government/publications/care-act-2014-part-1-factsheets</u>

The legislation will have a major impact on local authorities and key partners in relation to their adult social care responsibilities. The Care Act places new duties and responsibilities on local authorities as well as extending existing responsibilities where the Act also seeks to introduce new regulations in relation to people's eligibility for care and support services, and in changing the existing charging regimes. Additionally, seeking to introduce funding reforms based on the recommendations of an independent commission led by Sir Andrew Dilnot in 2011.

The transformation of adult social care programme in York including the integration of health and social care supported by the Better Care Fund is also complemented by the care and support reforms in the forthcoming Care Act also dovetailing with the work underway to meet the Children's Reforms. Within the National Transformation Programme for Adult Social Care is a work stream specifically to address the Care Act and implementing the care and support reforms. This paper is to get us started by familiarising a range of stakeholders in the preparations required, key priorities and to ensure the synergies are made across the whole of the organisations required and aligns to the Rewiring transformation programme within City of York Council and respective health colleagues transformation programmes wherever possible as the underpinning legislation to which we will work to together.

The overview does not seek to cover all the changes in policy and practice emanating from the Act. It should be read alongside the supporting documents all of which and more can be found on the .gov.uk website.

Main/Key Issues to be Considered

4. The Care Act became law on 21 May 2014. For the first time the Act brings together into one piece of legislation all of the previous legislation and guidance for the provision of support to adults and carers.

It brings additional responsibilities to local government and introduces a fundamental shift, by setting out the responsibilities to ensure the wellbeing of all residents underpinned by culture and behavioural changes across respective organisations enabled to work better together and advocate a whole systems approach encompassing ICT, systems, information management, financial management, work force and communications.

The Act will be implemented in two phases the first being from April 2015 and will introduce a number of the requirements set out, including:

- a duty to provide universal information and advice
- · requirements for assessments of need
- a national eligibility criteria
- requirements for support planning
- the right to direct payments
- Carers will be on the same footing as those whom they care for
- responsibility to provide support to prisoners with eligible needs

 Market Shaping - preparation to sustain a robust provider market which promotes choice, control and manages market failure

The second stage, in April 2016, will require the development and implementation of:

- The Care Cap
- Care Account

Anyone currently paying for their own care can request an assessment of their needs and finances from October 2015 to establish whether they will be eligible for state support as a result of the 'cap' from April 2016.

Statutory Regulations and Guidance on the new Act were published for consultation on 6 June 2014 and closed on 15 August 2014. The final Regulations and Guidance will be available from mid October 2014, which ultimately provides a short development window between October 2014 and April 2015 for Phase One implementation.

The Government has provided an implementation grant of £125k for each local authority for 2014-15 specifically to develop and implement the Care Act requirements. As with the majority of local authorities across England a Programme Manager is now in place to support the Director of Adult Social Care from within this fund and there is an assumption of further funding for implementation in 2015-16 also aligning with the Better Care Fund. The Better Care Fund for capital investment also has requirements for ICT and Workforce Development which will see substantial re-modelling and investment in readiness of the Care Act.

The City of York Council are working to understand the nature of change and increase in demand to make sure that we understanding the impact on the market and how that impact can be sustained into the future.

Work is also underway to understand the impact on the (wider) workforce, planning requirements to meet the change ahead and how we account for the cost of the requirements against the potential demand. To do this we need a workforce of the future that can implement the Care Act and react to change on this scale in a positive way whilst communicating and engaging with the right people at the right time which will be crucial, also aligning to the

National Communications Framework that is currently being developed for January 2015.

The City of York Council working groups reporting to the Care Act project reports to the Care Act Project Board and has 5 working groups developing a plan against all of the enabling functions aligned to the Rewiring Programme and looking to integrate with partner transformation programmes wherever possible to ensure a joint whole systems approach is a key driver to success.

Two National stocktakes have now taken place to assess readiness to implement the Care Act – the first National stocktake was completed in June 2014, the second recently completed in September 2014 and the third is expected in January 2015 which we welcome as a continued benchmark to assess our current positioning. We are also now starting to gain momentum with National Guidance which has been developed and is starting to be released to us – the City of York Council's position at Stocktake Two feels in a position that is in line other regional authorities and the pace for development and implementation is now moving in line with other local authorities and National direction having played catch up over the last three months.

Consultation

5. The Government and Department of Health have consulted on Phase One as detailed above and Phase Two consultation will be released during autumn 2014 to gain views on the draft legislation for development and implementation 1st April 2016.

A number of regional events are in situ and City of York is represented at both a regional and national level to maximise the learning, share good practice and to ensure we are accessing information and guidance in a timely manner.

Local engagement and information awareness relating to the implementation of the Act will be ongoing through a robust communications plan.

Options

6. This paper is for information and provides an update at this stage in the programme. There will be some key policy decisions to be made pre implementation in April 2015 and will come through the decision making process in due course and the Board will be kept fully informed and be part of the discussions going forward.

Analysis

7. In line with all other local authorities the City of York Council have used the Lincolnshire financial modelling tool complemented by local JSNA and data to analyse future costs and demands as a result of the Care Act 2015 and beyond.

8. Strategic/Operational Plans

The Care Act is closely aligned with City of York's Health and Wellbeing Strategy and the Council's priorities of Building Stronger Communities and Protecting Vulnerable People.

- There is a robust governance structure now wrapped around the programme with work-streams in place and reporting to the Project Board
- City of York Council have a good understanding of the nature of the changes and early projections relating to volume of demand is continuously being worked on
- Changes to the legislation will be fully communicated across the Borough and with all key partners as a joint approach
- Requirements to manage the market and future proof it to sustain service choice
- To develop joint commissioning and ensure the market is fit for purpose
- Train our workforces to support the needs of the future through a robust training offer
- Work even closer with all key strategic partners in an open and transparent manner
- Prevention & Early Intervention is integral to the success of implementation and dovetails with the Better Care Fund programmes
- Workforce Development review is underway through work force profiling internally to CYC and externally to its partners
- Financial impact of the changes will be constantly assessed and risk escalated where identified
- Joint intelligence and data will continue to be required alongside data quality and assurance that the integrity of the data is in place
- Information sharing will be agreed by all parties alongside the work programme to share data and records further

- Large scale approach to IT and systems adaptations/developments to align and drive an integrated approach
- Robust Communications plan underway to raise awareness and alignment to the National programme across organisations

All of the above are shared themes across all of the strategies in place and now is the time to be bold and start to really drive the requirements of the Care Act and challenge some of the more traditional service delivery models to evolve into new ways of working and deliver strong outcomes to people across York - Promoting independence alongside choice and control and managing the risk when it arises.

Implications

9. Financial

The financial implications are starting to emerge but are still not yet fully understood on a National and Regional basis. We have completed a number of National templates to assess the future costs of the Care Act but there remains a number of uncertainties with the data around self-funders and wealth. We continue to work locally, as a region and with the national team on solutions to enable the data availability and provide the projections that we need to formulate in order to calculate future impact on the Council and a number of tools have been used and findings submitted nationally back to the Department of Health. We have received notification that the national team no longer have capacity to drive this forward and will come back to us in January 2015 – in the meantime York will continue to access data from other sources and endeavor to get intelligence in view.

Care Act implementation in 2015/16 is estimated to cost in the region of £3.4m. A proportion of this is within the Better Care Fund (BCF) submission and some within specific grants i.e. IT/Workforce Development. All costs are yet to be finalised.

Human Resources (HR) and Workforce Development

The Care Act has implications for workforce capacity and workforce skills across a number of organisations and additional capacity will be required to undertake the assessment of self-funders by 2016 including financial assessments.

The National Minimum Data Set workforce returnhas been submitted in October 2014. Once published we will use the Care Act Workforce Development Group to populate the matrix tool which has been provided by the Skills for Care Council to provide information and data highlighting where the gaps are in skills and people across the workforce.

A Training Plan will be overlaid to cover general information and awareness raising of the Care Act and its requirements alongside a robust training offer covering the legal framework and changes to practice arrangements.

Implications include costing out this area of the implementation as a whole systems approach with partners and time to deliver in the window between the regulation sign off mid to end of October and legislation coming into force 1st April 2015.

Equalities

There are a number of impact assessments for the Care Act which have been undertaken by the government and are available which we are reading through and learning from. Should changes to local policy and procedures emerge a local impact assessment will be undertaken.

Legal

The Care Act changes the legal basis for the provision of support for vulnerable people and sets out a variety of new duties for the Council alongside changes to existing duties and a summary of these can be found at:

http://www.local.gov.uk/care-support-reform

Locally Legal are involved in our preparations and regionally a bid is being co-ordinated for a share of £350K allocation to share the cost of the Legal Framework training that is required.

 Crime and Disorder – the Care Act has implications for local authorities in that a new duty is placed on supporting prisoners to prepare for release and beyond where there are health and social care requirements.

Information Technology (IT)

There remains a number of areas that will require a substantial amount of development work to be completed across ICT and Information Management within York and with our partners to meet the requirements of the Care Act especially in Phase Two in readiness for implementation April 2016.

The workload is now in view with more detail and the group is meeting regularly to establish a clear development plan and is integrating with wider ICT programmes currently underway such as the procurement of a new CRM and Children and Young People's case management system – we will be reviewing the ASC case management system to establish if it remains fit for purpose and also looking at the Connect to Support to see if it meets the requirements of a new 'Information and Advice' tool from which we can launch our new ways of working to encompass a more transactional approach, self-management from both a member of the public and the provider market.

We are also working with colleagues across Health to develop the electronic shared care record, use of the NHS number as the unique identifier and better integrated systems to align the pathways of joint working – enabling better integration leading to better experiences for people accessing support or wanting to find information that will satisfy their needs at point of contact electronically and working to the principles of the Rewiring programme which is driving a channel shift across York working together with citizens.

• **Property** – whilst there are no specific property issues relating to the Care Act in Phase One there will be future opportunities linked to property when we address a more integrated approach to health and social care.

There are financial implications around property in Phase Two linked to deferred payments.

• Other - there are no implications

Risk Management

- 10. In compliance with the Council's Risk Management Strategy, the Care Act is still presenting significant risks to the Council which include:
 - Financial risk that the funding provided will not be sufficient to meet new responsibilities
 - Uncertainty around the number of self-funders across the Borough
 - Risk that our systems and technology will not be in place in time
 - That the market supply will not meet demand in line with well-being duties and;
 - Information and Advice is not accessible through a robust market place

These risks will be monitored and managed in line with the Council's risk strategy and the Care Act is included within the Council's risk register.

Recommendations

That the Health and Wellbeing Board:

- Advocate and strengthen the joint working arrangements across York.
- 2. Promote and engage fully in the development and implementation of the legislative requirements.
- 3. Support the protection of social care and the implications of the Care Act through the Better Care Fund programme.

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For further information please contact the author of the report