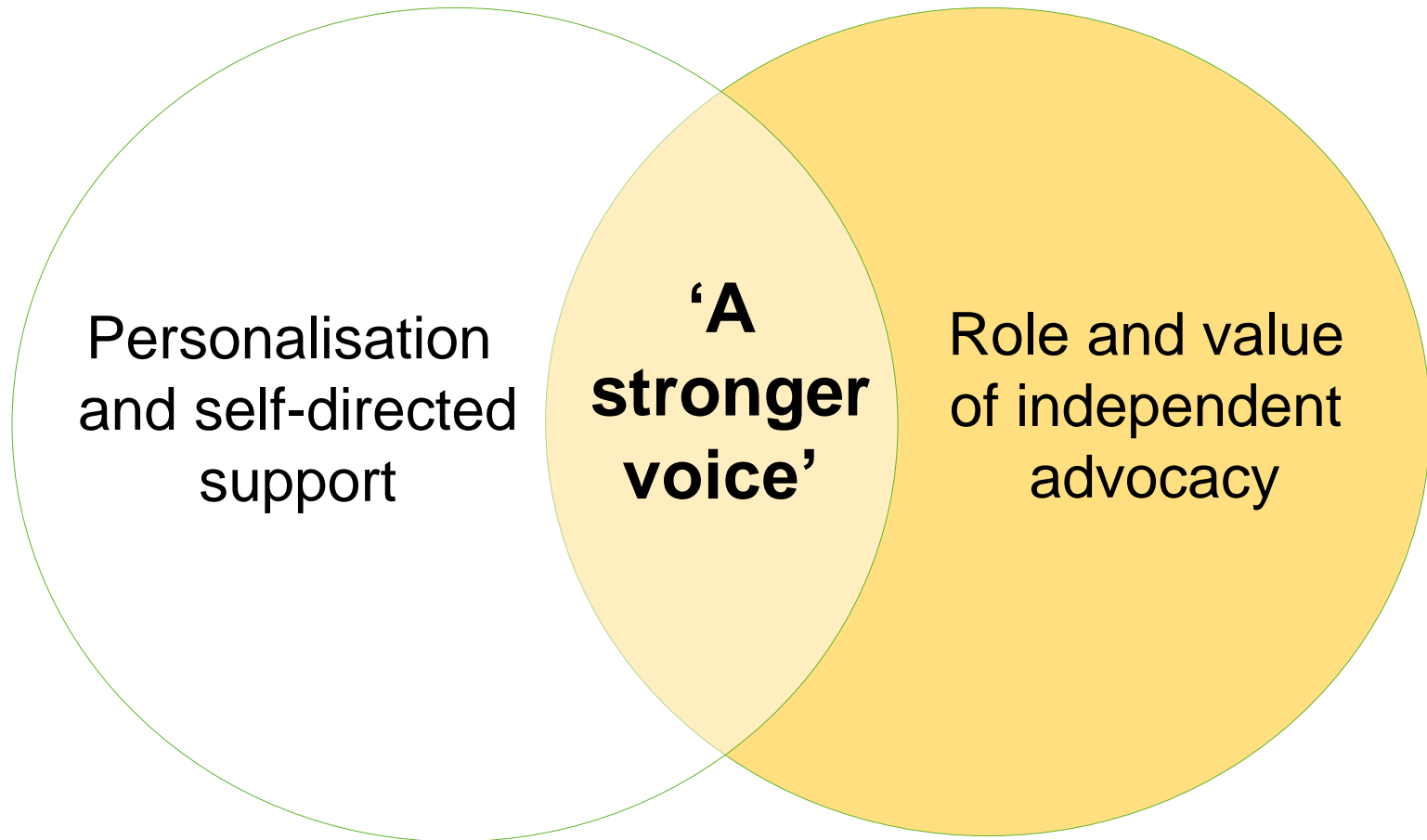


A Stronger Voice



Setting the scene

- The context
- The process of self-directed support
- What's happening nationally?
- What's happening locally?
- Where does advocacy fit? The view of GAIN
- What are the challenges advocacy services / advocates / service users face?

Putting People First (PPF)

A shared vision and commitment to the transformation of Adult Social Care (2007)

- PPF sets out the demographic background and argues that there is an urgent need to develop a new adult care system
- PPF, following on from 'Our Health, Our Care, Our Say' (2006), outlines the Government's intention to transform the way adult social care is organised by putting people at the centre of a care system 'which is fair, accessible and responsive to the individual needs of service users and carers'

Putting People First

A shared vision and commitment to the transformation of Adult Social Care (2007)

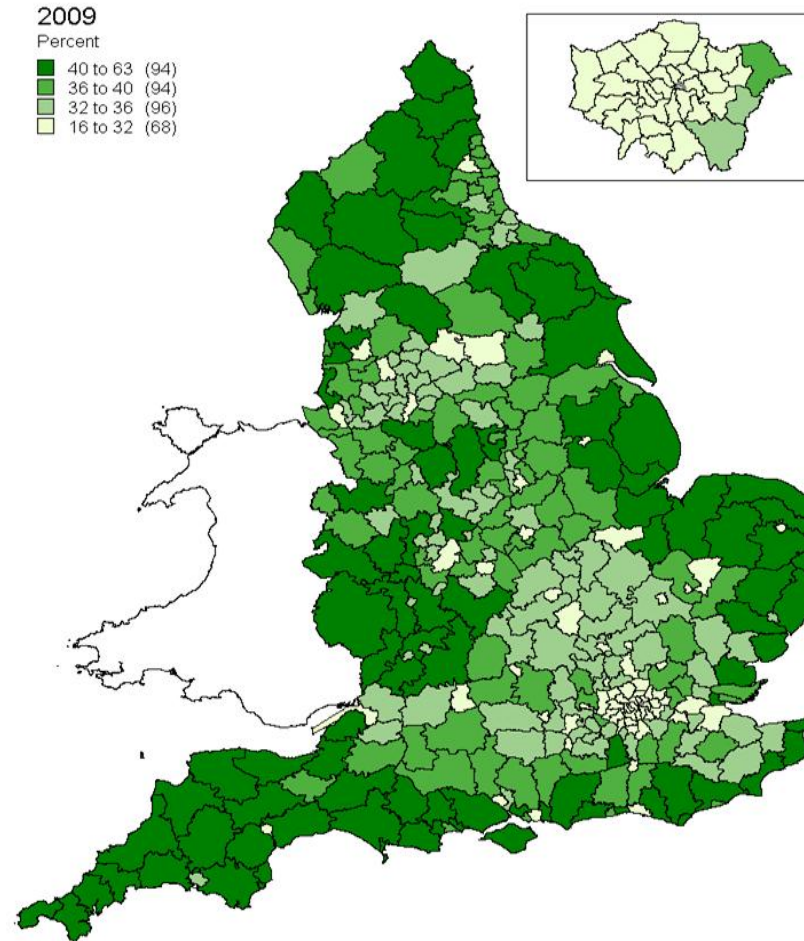
- Every locality to have a single community-based support system focussed on local health and wellbeing
- No structural changes required, local organisations work together to redesign systems around citizen's needs
- Common assessment process, personal budgets for all eligible adults, person-centred planning and self-directed support to become mainstream
- Is the driver for change the growing cost of providing adult social care, or the desire to give more choice and control to service users?

What we do know is...

- 20% of the population will be over 65 by 2022
- The number of over 85 year olds will grow by 60% between now and 2027
- A baby born today into an affluent background will have a 50% chance of living to 100 years of age
- A baby born today into a less affluent background will have a 1 in 4 chance of living to 100

An ageing population, 2009

People aged 50+ as a proportion of the population

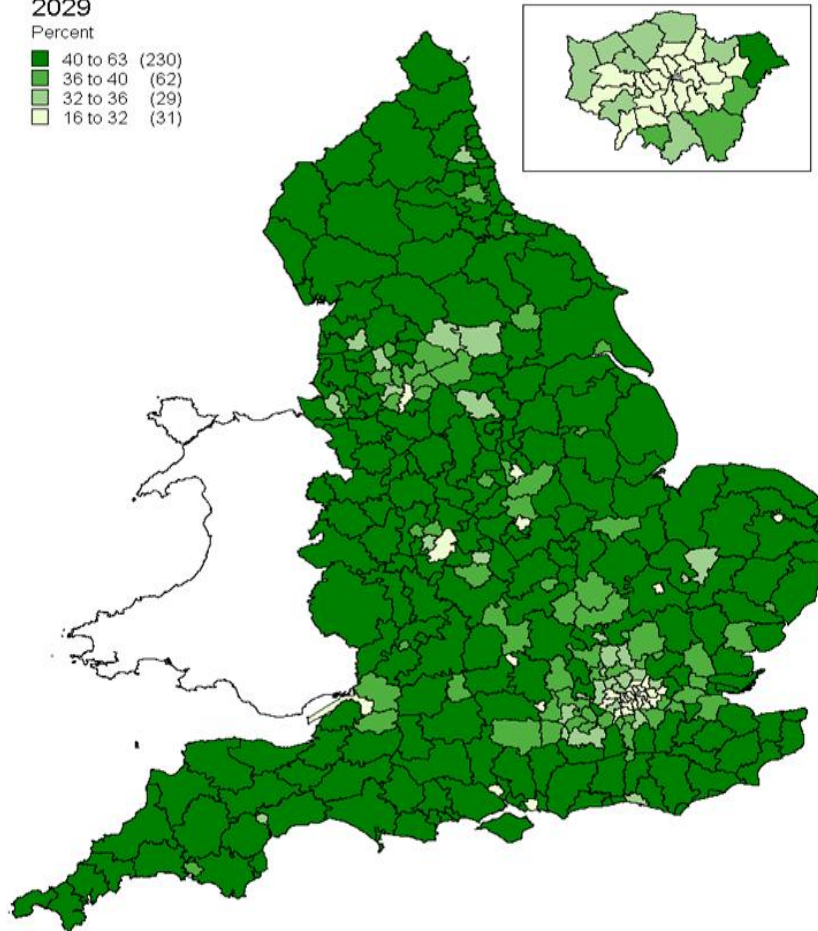
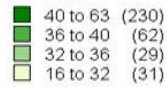


An ageing population, 2029

People aged 50+ as a proportion of the population

2029

Percent

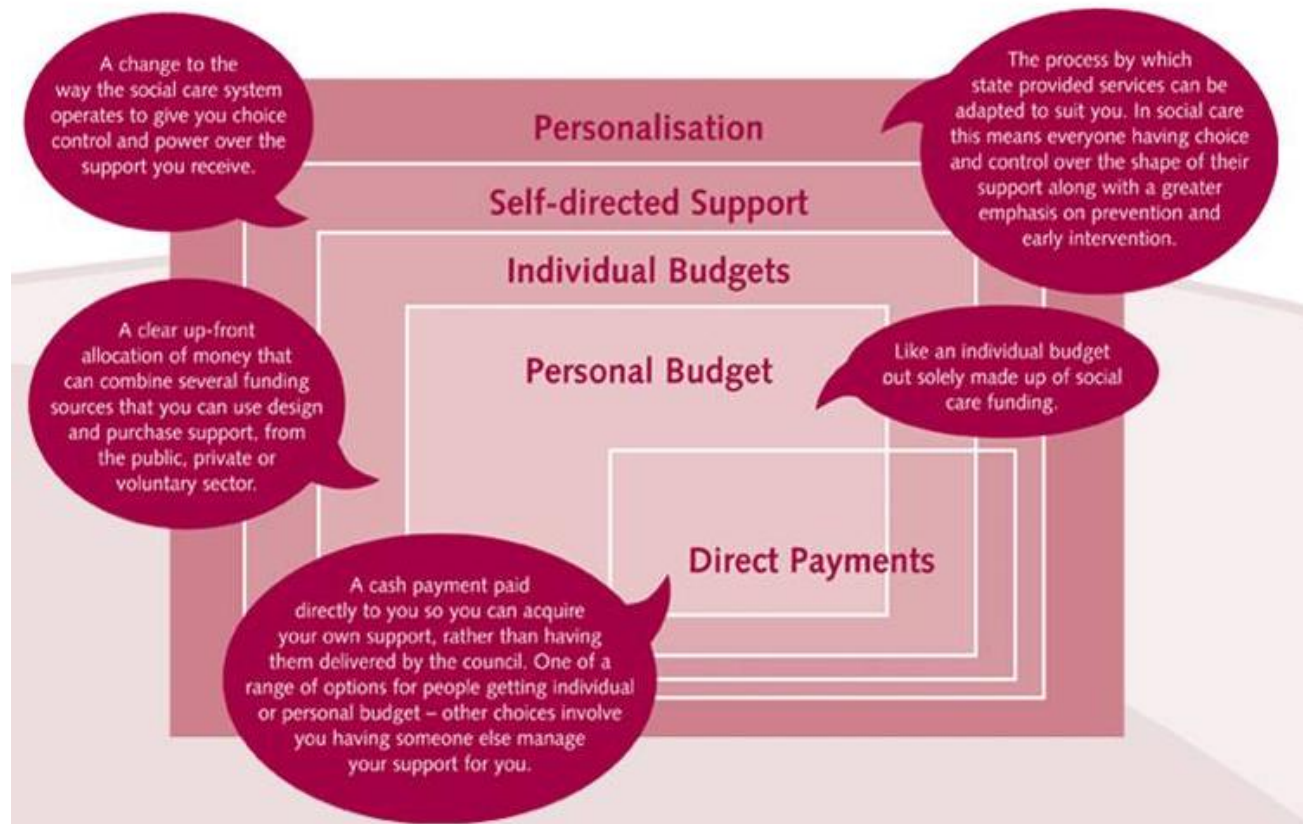


Local Authority Circular (2008)

Transforming adult social care

- Person-centred planning and support to become mainstream
- An effective and established mechanism to enable people to make supported decisions
- FACS framework
- Workforce development
- A simple straightforward personal budget system

The components of personalisation



Self directed support (SDS)

In control / DH / SCIE model

- SDS involves finding out what is important to people with social care needs and their families
- SDS is about people knowing how much money they have been allocated and supporting people to use the money available to meet their assessed needs
- SDS is about keeping the focus on a person's outcomes and ensuring that person has choice and control

Self-directed support (SDS)

Implementing SDS in social care means councils have to ensure the following elements are in place:

- Self-directed assessment and financial assessment
- Resource allocation system (RAS) and upfront (indicative) allocation (£)
- Support planning (to achieve individual's desired outcomes)
- Choice and control (individual decides how funding should be managed and spent to meet his/her outcomes)
- Review

Self-directed assessment

- A simplified assessment that is led as far as possible by the person and which focuses on the outcomes they and their family want to achieve in meeting eligible needs
- The Local Authority has a duty to check that the assessment reflects the individual's needs

Resource allocation system (RAS)

- Gateshead using slightly modified version of the national RAS
- Assessed need is given a points value where points translate into £s
- The indicative allocation is checked against current spend. Currently if + or – 5% it goes to panel

Up-front (indicative) allocation

- The person has a strong indication at an early stage of the amount of money that is likely to be available **before** support planning takes place
- The amount may be adjusted following the development of the support plan
- Amount: reasonable cost of providing an adequate service

Support planning

- Advice and support should be available to help people develop support plans focussed on desired outcomes
- Support plans can be produced in a variety of formats, e.g. DVD, audio recording, pictures (see Leics. CC)
- Support plans can refer to informal (unpaid) support
- Support plans should not be expressed in terms of hours of support: this could reduce flexibility and result in service led solutions
- Support plans need to be signed off by the Council

Choice and control

- The person should (as far as capacity allows) decide how any council funding should be managed and decide how best to spend it to meet their needs and achieve their outcomes
- The degree of choice and control will depend on how a person wants to manage his or her budget. There are a range of methods available and it is possible to choose a combination of them

Methods of managing a personal budget

- Direct payment – the personal budget is paid directly into a bank account which has been set up for this purpose
- Representative payment – the payment goes to a ‘suitable person’ who manages the money on behalf of the individual
- Council arranged – the Council manages the money on the individual’s behalf. Service user chooses which services or agencies are purchased
- Council managed – the Council manages the personal budget and the service user chooses from services which the Council has commissioned
- Others – Independent Service Fund, trust fund, indirect payment, one-off payment ,e.g. equipment

Safeguarding / risk

- ‘as a general principle, Local Authorities should avoid laying down health & safety policies for individual direct payment recipients. Individuals should accept that **they have a responsibility for their own health and safety, including the assessment and management of risk**’ (Social Care FAQs, Health and Safety Executive, 2009)
- ‘However the LA remains accountable for proper use of its public funds and whilst the individual is entitled to live with a degree of risk, **the LA is not obliged to fund it**’ (Independence, choice and risk, DH, 2007)

Safeguarding / risk

- ‘The emphasis must be on sensible risk appraisal, not striving to avoid all risk, whatever the price, but instead seeking a proper balance and being willing to tolerate manageable or acceptable risks as the price to be paid in order to achieve some other good – in particular to achieve the vital good of the elderly or vulnerable person’s happiness.

What good is it making someone safer if it merely makes them miserable?’

(Justice Munby MM (An Adult) (2008) 3 FLR 788; (2009) 1 FLR 443)

Mental capacity and direct payments

- From November 2009 a person assessed as not having capacity can receive a direct payment (DP) via a suitable person
- LA must be satisfied that the suitable person consents
- Will act in 'best interests'
- Can manage the DP
- Must be a review within the first year or if concerns arise

Direct payments and mental capacity

A suitable person must:

- Act in best interests
- Provide info required by LA
- Tell LA if person no longer lacks capacity
- Use payment as agreed for services needed
(If suitable person is not spouse, partner, close relative or friend already providing care a CRB check must be carried out)

What's happening nationally?

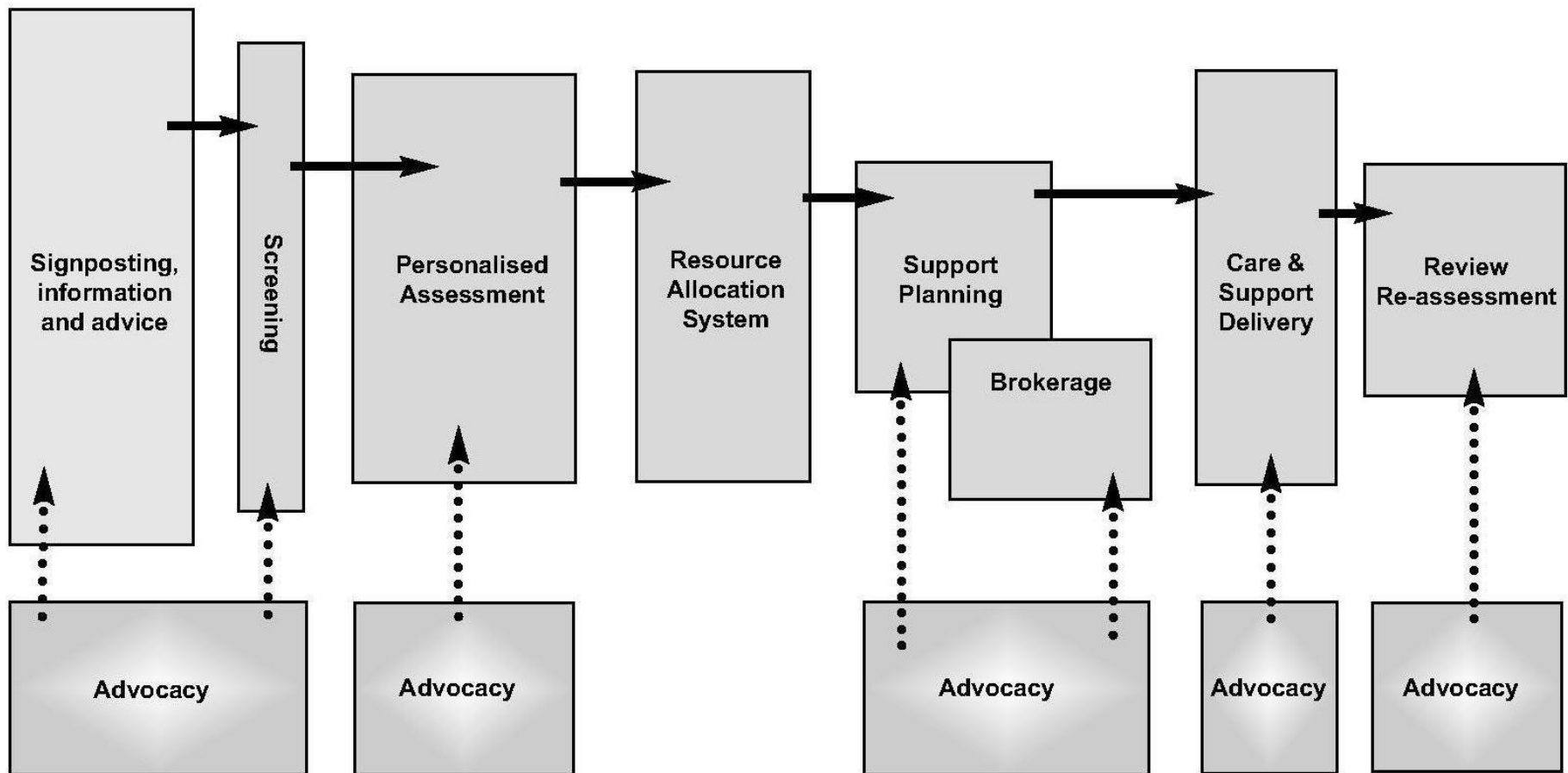
- 30% of service users will have taken up SDS and have a personal budget by April 2011
(National Indicator 130)
- **There is varied response nationally**
A minority of councils have made rapid progress
A small number have no plans in place
Many councils have made progress with planning but SDS is not in place as the main operating system
(Association of Adult Social Services Directors 2009)

Gateshead (and Newcastle)

- Aims to achieve 30% target by April 2011
- Gateshead target is 2,190 SDS service users
(Nov 2008 Gateshead had 80 SDS service users)
- Currently working on RAS and assessment process
- The Newcastle target is 3,305 by April 2011
(Nov 2008 Newcastle had 190 SDS users)

(North East Improvement and Efficiency Partnership,
Dec 2008)

The Place of Advocacy within the Transformation of Social Care



Issues facing advocacy services

- Service users commission independent advocacy individually and pay for it out of personal budget?



Issues facing advocacy services

- Social worker role moves away from assessing need to advocacy, support planning and brokerage?



Issues facing advocacy services

- Advocacy services face funding cuts
- Government target of 3% efficiency savings but could be much more
- Increase in demand for services



Issues facing advocacy services

Advocacy services need to be better at demonstrating value through outcomes focussed monitoring and evaluation



Issues facing advocacy services

- Advocacy services need to be 'contract ready'
- Quality assurance
- Full cost recovery model



Issues facing advocacy services

- Council, PCT and other funders move towards contracting with one provider for all forms of advocacy?
- Advocacy projects form partnership / consortium with one lead body and bid jointly for funds?

Issues facing advocacy services

- Pressure to dilute the advocacy role and take on support planning and brokerage?
(see SCIE briefing 12)
- The need to develop local, regional and national advocacy strategies
- The need to develop relationships with **and** work with commissioners

Issues facing advocates

Capacity of service user to make decisions:

1. Capacity must be assumed
2. An individual must be given all the support to help them make decisions
3. Targets could lead to pressure from social care services to put people through SDS

Issues facing advocates

Safeguarding / risk

Is this being used by social care staff, family, carers, etc. as a reason for not allowing choice and control?

‘By deciding she wants this she’s putting herself at risk. I can’t agree this support plan.’

Issues facing advocates

'Outcomes' not 'services'

Are social care staff, service users, carers still thinking...

- Traditional services?
- Professional gift model?

Issues facing advocates

- Where is the choice and control?
- Is the individual being assessed or are they fully involved in assessing his or her own needs?
- Who is doing the support planning?

Issues facing advocates

You are working with someone who has said she...

- Wants to feel safe in her home
- Needs more exercise to stay fit and well
- Wants to meet people and be part of the community

The social care worker suggests her needs can be met through her personal budget by fitting extra door locks and attending a day centre three times per week where they offer chair aerobics

Issues facing advocates

Your advocacy partner says:

‘No... I want to use part of my personal budget to get a dog’



Issues for service users / carers

- Understanding the new system
- Thinking differently – outcomes not services
- Understanding the impact of identifying informal support on the personalised assessment form
- Understanding the pros and cons of each method of using a personal budget
- Knowing what support there is if selecting a direct payment
- Knowing how to appeal against a decision

Questions / comments

GAIN



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