

REPORT TO: Executive Board
DATE: 15 March 2018
REPORTING OFFICER: Strategic Director, People
PORTFOLIO: Health & Wellbeing
SUBJECT: Transformation of Adult Social Care
WARD(S) Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To present Executive Board with a proposal to Transform Adult Social Care.

2.0 RECOMMENDATION: That Executive Board

- 1) Note the contents of the report; and**
- 2) Agree the recommendations as outlined in section 4.0**

3.0 SUPPORTING INFORMATION

3.1 There has been no shortage of National and Local debate on the uncertainties experienced in the adult social care market over the last 10 years.

3.2 A lack of clear national direction and appropriate funding has led to levels of risk within the market in relation to increasing demands, demographic and inflationary pressures.

3.3 In the context of this challenge North west ADASS have commissioned Alder Advice to undertake a detailed piece of work; to explore available data on commissioned services, and the views of both providers and commissioners, and provide advice on the future approach to commissioning, practice and market oversight.

3.4 The final report provides an overview of the current position, and concludes that the region is at “tipping point” where incremental improvements to the provision of Adult Social Care is no longer enough.

3.5 The report clearly demonstrates the region cannot continue to support the same number of people, for the same amount of their lives using the same models of support as now. The only way that

the demographic and cost challenges being faced can be met affordably will be through a “system wide transformation” in how care and support needs are:

- Minimised through early intervention approaches, and
- Met when long term support is unavoidable

3.6 The report highlights a number of key risks and challenges for the sector which include:

- Care fees and quality ratings in the North West are below the England average
- By 2022 we will see a 14% growth in expenditure from demography alone, 43% if cost pressures are added
- 69% of Authorities have experienced provider failures in the last 6 months
- There is an over reliance on traditional models of residential care
- A small number of the National providers are responsible for over 40% of the market
- Recruitment and retention of key workers is a challenge

In conclusion the region cannot continue to support people in the same way, LA's need to; move to:

- Support a lower proportion of the population for less of their life
- Alter the balance of support away from expensive residential care to community provision,
- Innovate to lower the cost of LT care e.g. use of technology,
- Fee reductions in the sector are not seen as a viable solution, in fact the report recognises the need to increase the fees paid to providers.

4.0 **IMPLICATIONS FOR HALTON**

4.1 The report has highlighted some key financial challenges for Halton (alongside all other NW LAs), over the next 5 years we will see an incremental increase in the funding required to continue to provide services to all those who are eligible for support. By 2022 Halton will need an additional £4.836 million to fund services; if we take into account increased pressures in relation to demography and other cost pressures this increases to £12.8 million.

4.2 Many of the issues highlighted within the report are as relevant to Halton as they are to the region as a whole:

- Over reliance on some of the larger providers; HC1 operate 3 care homes in Halton and CIC provide a large proportion of

services to Adults with a Learning disability, Premier Care are now the lead provider for domiciliary Care

- Halton care fees are one of the lowest in the North West.
- Increasing demand with limited capacity
- Providers exiting the market
- Quality concerns
- Risks in relation to overall sustainability of the market

4.3 If Halton are to continue to deliver the quality and availability of services to vulnerable adults, we will need to transform the model of care, taking into account the recommendations in the report, we will need to:

- Manage demand, with an increased focus on prevention and independence
- Reduce reliance on more costly types of services such as residential care
- Consider alternative commissioning and provision of care homes
- Consider alternative models of community provision including domiciliary, voluntary sector and supported living.
- Consider a wider regional/sub-regional approach to market management and oversight of the national providers
- Consider a regional/sub regional approach to commissioning of more specialist placement options (usually Out Of Borough)

4.4 The transformation of Adult Social Care is well developed in Halton, and in line with a number of the recommendations in the ADASS report. However, despite this approach we continue to experience rising demands, in particular from the Acute sector and hospital discharges. Quality of provision remains a challenge, with the sector continuing to raise concerns in relation to financial viability and cost of care.

4.5 The delivery of a new model of care will be required within the next 12 months, this new model will consist of a move from the traditional model of care to one of working with individuals to make the most of their own strengths and skills, to continue to live as independently as possible for as long as possible. The focus of assessment will be on the individual living a life rather than having a service. Appendix 1 case study, demonstrates how this will work for an individual.

4.6 Service delivery to those individuals who require one will be based on individual need, with a continued focus on independence and quality of life. New models of delivery will ensure we deliver improved quality which demonstrates best value.

Appendix 2 describes the various work streams, which will deliver

the overall transformation of Adult Social Care.

5.0 **POLICY IMPLICATIONS**

5.1 A Government paper on the future of Adult Social Care is due to be published in July 2018, a future report will consider the implications going forward.

6.0 **FINANCIAL IMPLICATIONS**

6.1 As detailed in the report the current model of Adult Social Care is not financially viable.

7.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

7.1 **Children & Young People in Halton**

None Identified

7.2 **Employment, Learning & Skills in Halton**

Employment, Learning and Skills is a key consideration when developing the workforce to deliver Adult Social Care in the Borough

7.3 **A Healthy Halton**

The proposal supports the Council's delivery of the Health and Wellbeing for all adults in the Borough.

7.4 **A Safer Halton**

None Identified

7.5 **Halton's Urban Renewal**

None Identified

8.0 **RISK ANALYSIS**

8.1 Failure to recognise and implement the outcomes of this report will place the future delivery of Adult Social Care at risk of delivering its statutory duties in line with the Care Act 2014.

8.2 Implementation and impact will be monitored to ensure progress is made.

9.0 **EQUALITY AND DIVERSITY ISSUES**

9.1 None Identified.

**10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE
LOCAL GOVERNMENT ACT 1972**

None.