

# ADULT SOCIAL CARE & HEALTH CABINET MEETING

**Agenda Item 29**  
Brighton & Hove City Council

**Subject:** Self Directed Support Strategy  
**Date of Meeting:** 11 September 2008  
**Report of:** Joy Hollister, Director of Adult Social Care & Health  
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**Key Decision:** Yes Forward Plan No. ASC 2191  
**Wards Affected:** All

## FOR GENERAL RELEASE

### 1. SUMMARY AND POLICY CONTEXT:

- 1.1 Self Directed Support is a new way of delivering social care which forms a major part of the three year Adult Social Care personalisation programme
- 1.2 It is based on a new national policy initiative that is being piloted nationally and was introduced the Department of Health white paper 'Our health, Our Care, Our Say' (2006) and a subsequent concordat between local government associations, NHS, regulatory bodies, Association of Directors of Social Services, and care providers 'Putting people First' (2007)

### 2. RECOMMENDATIONS:

- 2.1 That the strategy is agreed
- 2.2 that work in developing an implementation plan is taken forward to deliver the strategy in stages over a three year period, with evaluation and review of each stage as it proceeds. A draft project outline is attached as an appendix

### 3. RELEVANT BACKGROUND INFORMATION/

- 3.1 Self Directed Support is a way of redesigning the social care system so that the people eligible to receive services take control over them.

The underlying principle is social care users having the same ability as other citizens to exercise choice and control over their lives and the social care they receive, enabling them to determine their own outcomes, make their own decisions and manage their own risks. Self Directed Support puts the 'customer' at the centre of assessing their needs, deciding how those needs might be best met and tailoring their care accordingly. Its aim is that people are clear about their entitlements to social care and other public funding and be appropriately supported to take as much control of their lives and services as possible

- 3.2 A substantial body of research shows that people identified as needing social care would prefer to have access to the funding for that care and contribute to how it is used rather than letting staff decide for them. They also wish to remain in their own homes for as long as possible.
- 3.3 Direct Payments are a key vehicle for making self directed support a reality. Brighton and Hove City Council already operates a Direct Payments service for social care users. If someone is assessed as eligible for adult social care and decides that they want to receive that in the form of a Direct Payment they are supported to do so by social care staff and via a support contract with the Federation of Disabled people. There is a clear audit trail and review within social care systems and they are also required to open a separate bank account. The Council achieved a challenging CSCI performance improvement target of 200+ users 2007/8. Targets are in place to further increase the number of Direct Payments in 2008-9 through systems change, staff training and performance management.
- 3.4 Self Directed Support builds on this existing system and takes it further through a personal budget with the purchasing power to enable recipients of services to become more active consumers. It widens the budgets available for use to include Supporting People, disabled facilities grants and benefits such as independent Living fund and Access to Work
- 3.5 People are told the level of their entitlement (i.e. budget) then plan how they will use their budget to get the support that best suits them. Robust new systems are required to ensure that the personal budget sum is fair and transparent, is enough to cover the support needed and is sustainable within the available budget. The national proposed model is a 'Resource Allocation System' (RAS) which ascribes monetary value to specific types of need and support and then consolidated into one overall budget figure. The RAS needs to be developed and tested locally to align with local costs and budgets. There is no national template for this, but the council is commissioning a prototype with a number of other authorities to test out locally on a 'dry run' early next year
- 3.6 The local authority ensures that the person has the necessary assistance to create their support plan and can take a direct role in providing this either directly or through advocates or 'brokers'. The local authority also ensures that the risks and responsibilities are understood and the person or their carer/ family are able to manage.
- The person is accountable to the local authority for how they spend the money, and the local authority has a duty to check that the support plan is meeting the needs and outcomes agreed and that the plan operates within the allocated budget.
  - People control their budgets to the extent they want – there will be a range of control options/levels – from direct payment to having services commissioned by the local authority

- People can use their money flexibly to achieve the outcomes identified and agreed as most important to them. They can use statutory services and other forms of support in the independent and private sectors. If they change their minds, they can re-direct their budget to alternative support
  - The aim is for people to use their money to achieve the outcomes that are important to them in the context of their whole life plus their role and contribution within the wider community
- 3.7 The Dept of Health has just concluded a pilot of Individual (personal) Budgets in 13 local authorities, the full report of which is expected in spring 2009. Up to 50 local authorities have already started to develop this area and a national organisation 'In Control' provides models and guidance. The council is a member of this.
- 3.8 A current local pilot of individual budgets in the Learning Disability service is underway using the community care budget (and utilising the In Control model) . It is testing out Personal Budgets with a small group of service users. A project group oversees the development of a bespoke Resource Allocation System and to work through the issues which inevitably arise as new practice is developed in action. This important first step is already providing vital learning and experience on which the broader, corporate self directed support strategy can be built. It will be vital to bring this experience into the overall Adult Social Care programme.
- 3.9 Self Directed Support is a priority and high profile theme within the new Local Area Agreement for Brighton and Hove. The specific National Indicator – NI 130, is included as one of the 35 for enhanced performance and close scrutiny by central government.
- 3.10 The Implementation Plan will set out plans for user and carer involvement and participation in the strategic governance and scrutiny structures for the Self Directed Support programme, as well as be partners in the inter-agency work groups taking forward elements of the work. The Council should ensure that users and carers have any support they may need to be a full part of these processes.

#### **4. CONSULTATION**

- 4.1 The draft strategy has been launched at a stakeholder event in April attended by a wide cross section of users, carers, health and third sector organisations including voluntary sector and independent providers and opened by the cabinet member for adult social care
- 4.2 The strategy has been approved by TMT and directorate management groups
- 4.3 The implementation plan will set out a programme to consult with and involve service users and carers at all stages in the development, practical delivery and monitoring/evaluation of the Self Directed Support strategy for the city

- 4.4 Longer term, the Council will work with its partners to build structures and systems which maximize sustainability of user involvement in the continuing development and improvement of self directed support and which deliver user led and directed support solutions – this includes the development of an Independent Living Centre for Brighton and Hove.

## **5. FINANCIAL & OTHER IMPLICATIONS:**

### Financial Implications

- 5.1 A measured approach is needed to planning for the financial impacts of a system shift to self directed support – integrating infrastructure and development costs into the annual budget setting process and making sure financial reporting and trend analysis is able to evaluate and forward forecast actual costs and savings
- 5.2 Self Directed Support is an evolving concept and some of the financial impacts are as yet unclear. However by taking a measured and gradual approach to its introduction the progress can be closely monitored at each stage and highlight any unforeseen cost pressures.

*Finance Officer Consulted: Mike Bentley*

*Date: 29<sup>th</sup> August 2008*

### Legal Implications:

- 5.3 *The strategy proposed is in line with national guidance and will be implemented incrementally and reviewed at each stage in consultation with relevant stakeholders. The aim is to enable service users to have more personal choice, regarding how their services are provided, where they are able to exercise such choice. This principle is enshrined in the right to family life within the Human Rights Act.*

*Lawyer Consulted: Hilary Priestley*

*Date: 29<sup>th</sup> August 2008*

### Equalities Implications:

- 5.4 An equalities impact assessment is scheduled for the autumn
- 5.5 The community care budget funds care to some of the most disadvantaged groups in the city and self directed support will enable its use to be more flexible in meeting needs of hard to reach groups and different communities

### Sustainability Implications:

- 5.6 None

### Crime & Disorder Implications:

- 5.7 None

### Risk & Opportunity Management Implications:

- 5.8 the strategy will necessitate a re-examination and clarify the Council's changing role in terms of commissioning and social care market place development & management – which should include appraising creative options with partners and the encouragement of new and user led services to enable self directed support
- 5.9 the implementation of SDS will require a robust system of risk enablement and management as an explicit process, possibly through a specific panel to sign off personal budget plans

### Corporate / Citywide Implications:

- 5.10 This strategy will impact on all social care users and social care providers across the city

## **6. EVALUATION OF ANY ALTERNATIVE OPTION(S):**

- 6.1 None

## **7. REASONS FOR REPORT RECOMMENDATIONS**

- 7.1 A draft implementation plan has not yet been formulated due to the tragic and sudden death of the strategy's author, Dave Nicholls in July. However it was felt to be important to recognise his work thus far and present this outline strategy as originally agreed with him.

## **SUPPORTING DOCUMENTATION**

### **Appendices:**

- 1. SDS Strategy
- 2. Proposed governance structure and workgroups

### **Documents in Members' Rooms**

- 1. None

### **Background Documents**

- 1. *Our Health Our Care Our Say (Dept of Health 2006)*
- 2. *'Putting people First' (2007)*

