

PREVENTING THE NEED FOR ADULT SOCIAL CARE

A Prevention and Early Intervention

a Joint Strategy for Dudley

2010 - 2013



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1. Early Intervention, Prevention and Reablement

Are people [in Dudley] able to access a range of evidence based preventative and enabling services suitable for their needs, are there measures in place to ensure quality?¹

The Concordat “Putting People First” and the Local Authority Circular [LAC DH (2008)1]² on Transforming Social Care set out information to support the transformation of social care a vision vision for development of a personalised approach to the delivery of services

Prevention and cost-effective services is one of five milestones to be achieved in the transformation of adult social care services. This milestone reflects a whole system approach to prevention, intervention and cost effective services.

A key part of this is ensuring council-wide and partnership approaches to universal services e.g. leisure, adult education, transport, employment, healthy living and health improvement

Why prevention and early intervention?

Adult social care and health face a double challenge of rising demand and expectations as a result of demographic pressures and the financial downturn. The result is to render present service models and resource levels unsustainable in both health and social care.

Prevention and early intervention also supports a whole systems approach to quality, innovation, productivity and prevention (QIPP) and underpins Department of Health guidance on better use of resources for social care³ and the Marmot review of health inequalities⁴.

Dudley Council and the NHS Dudley are jointly investing in prevention and early intervention and monitoring the effectiveness of services together.

The need for a shift towards prevention, early intervention and wellbeing is central to many key national policy strands: -

- Equality and Excellence: liberating the NHS, 2010
- Revised NHS Operating Framework. 2010
- Valuing People Now, 2009
- Building a society for all ages, 2009
- National Dementia Strategy, 2009
- Carers Strategy, 2008
- Audit Commission, “Don’t Stop Me Now – preparing for an ageing population”, 2008

¹ “Scrutinising the Transformation of Adult Social Care: Practice guide”, The Centre for Public Scrutiny, February 2010

² Transforming Social Care Services. Dept. of Health, 2008

³ Use of Resources in Adult Social Care, Dept. of Health, 2009

⁴ “Fair Society, Healthy Lives”, Dept. of Health, 2010

- Lifetime Homes, Lifetime Neighbourhoods: a national strategy for housing in an ageing society, 2008
- Putting People First, 2007
- Transforming Adult Social Care, 2007
- National Stroke Strategy, 2007
- Our Health, Our Care, Our Say, 2006

The vision for adult social care for the next decade and beyond is laid out in Putting People First. At its heart are four main themes:

- Facilitating access to **universal services**
- Building **social capital** within local communities
- Making a strategic shift to **prevention and early intervention**
- Ensuring people have greater **choice and control** over meeting their needs

Two key aspects of prevention and early intervention are seen as: -

- Services which prevent or delay the need for more costly intensive services
- Approaches which promote quality and engagement with the community to promote community cohesion

It is to be noted that many areas of Prevention and Early Intervention lie outside of the CASSR sphere of responsibility but within the scope of the wider Council and strategic partner functions, such as: -

- Transport
- Libraries
- Health Promotion
- Education & Lifelong Learning
- Housing
- Supporting People Partnership

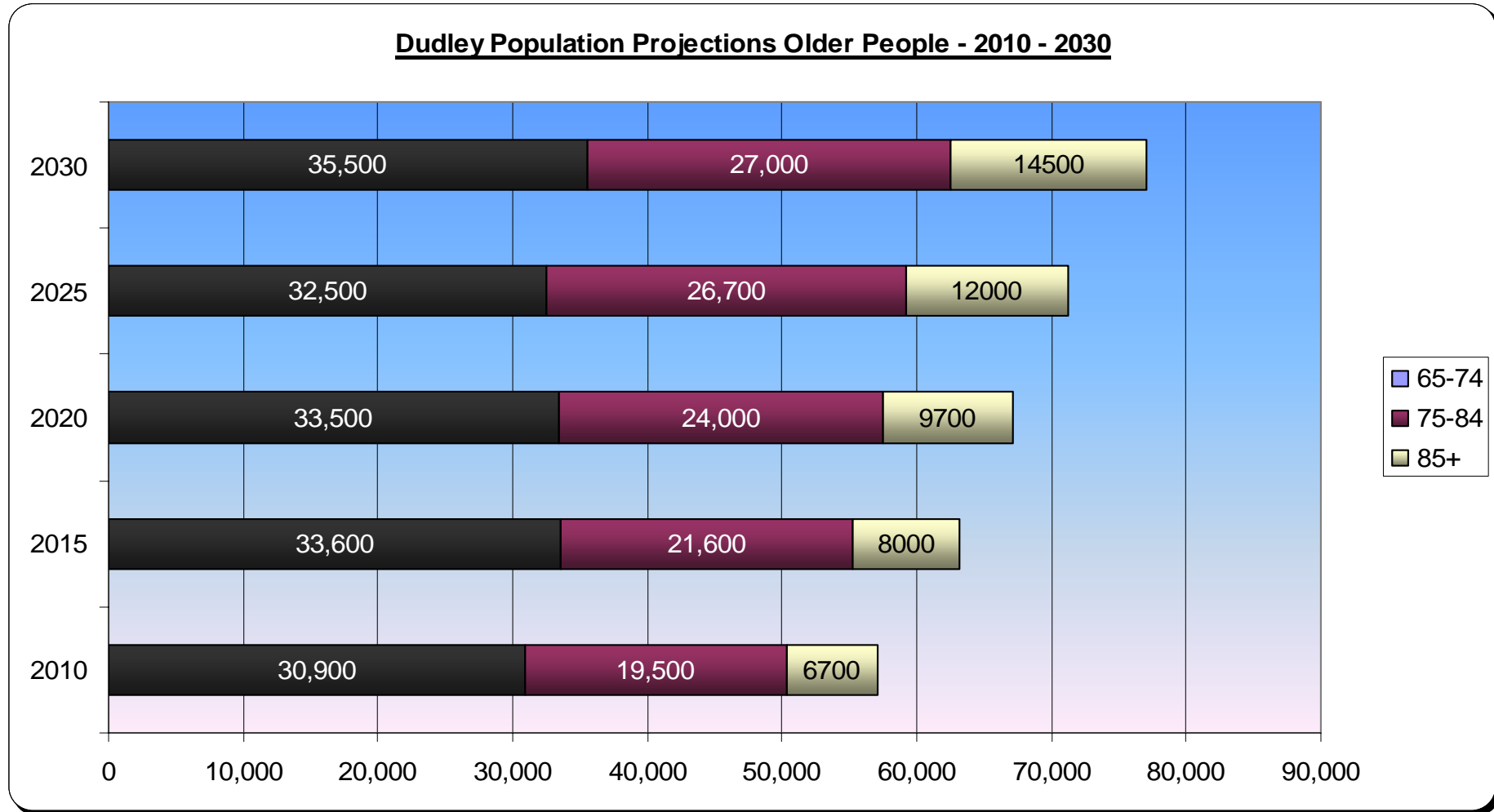
Each of which would serve to support the health and well being of the Borough's population

The positive shift to independent living and care at home, away from institutionalisation, will continue to require a greater contribution from carers. The longer-term vision for carers is that they will be respected as expert care partners and will have access to the integrated and personalised services they need to support them in their caring role. This includes support for the carer to stay mentally and physically well.

2. Demographic context

Population information on Dudley's demographics is well documented in other strategic documents identifying the growing nature of the older population; indeed the county has the forth-highest level of older people in England.

Figure 1



Whilst this strategy is not confined to older people, their position in society will significantly influence the direction of travel for prevention and early intervention in the Borough.

3. Policy Context

Prevention

There are several aspects to prevention: -

Primary prevention/promoting wellbeing:

This is aimed at people who have no particular social care needs or symptoms of illness. The focus is therefore on maintaining, independence, good health and promoting wellbeing. Interventions include combating ageism, providing universal access to good quality information, supporting safer neighbourhoods, promoting health and active lifestyles, delivering practical services

Secondary prevention/early intervention:

this aims to identify people at risk and to halt or slow down any deterioration, and actively seek to improve their situation. Interventions include screening and case finding to identify individuals at risk of specific health conditions or events (such as strokes, or falls) or those who have existing low level social care needs

Tertiary prevention:

This is aimed at minimising disability or deterioration from established health conditions or complex social care needs. The focus here is on maximising people's independence through interventions such as rehabilitation / reablement services and joint case management of people with complex needs.

Putting People First and Transforming Social Care are clear that the strategic shift required to deliver transformation must be wide ranging and cannot just be limited to those who are "FACS eligible". The experience of Partnerships for Older Peoples Projects⁵ supports this and has shown that there is a need for interventions that address the whole population of older people – not just the 15% who come into contact with adult social services.

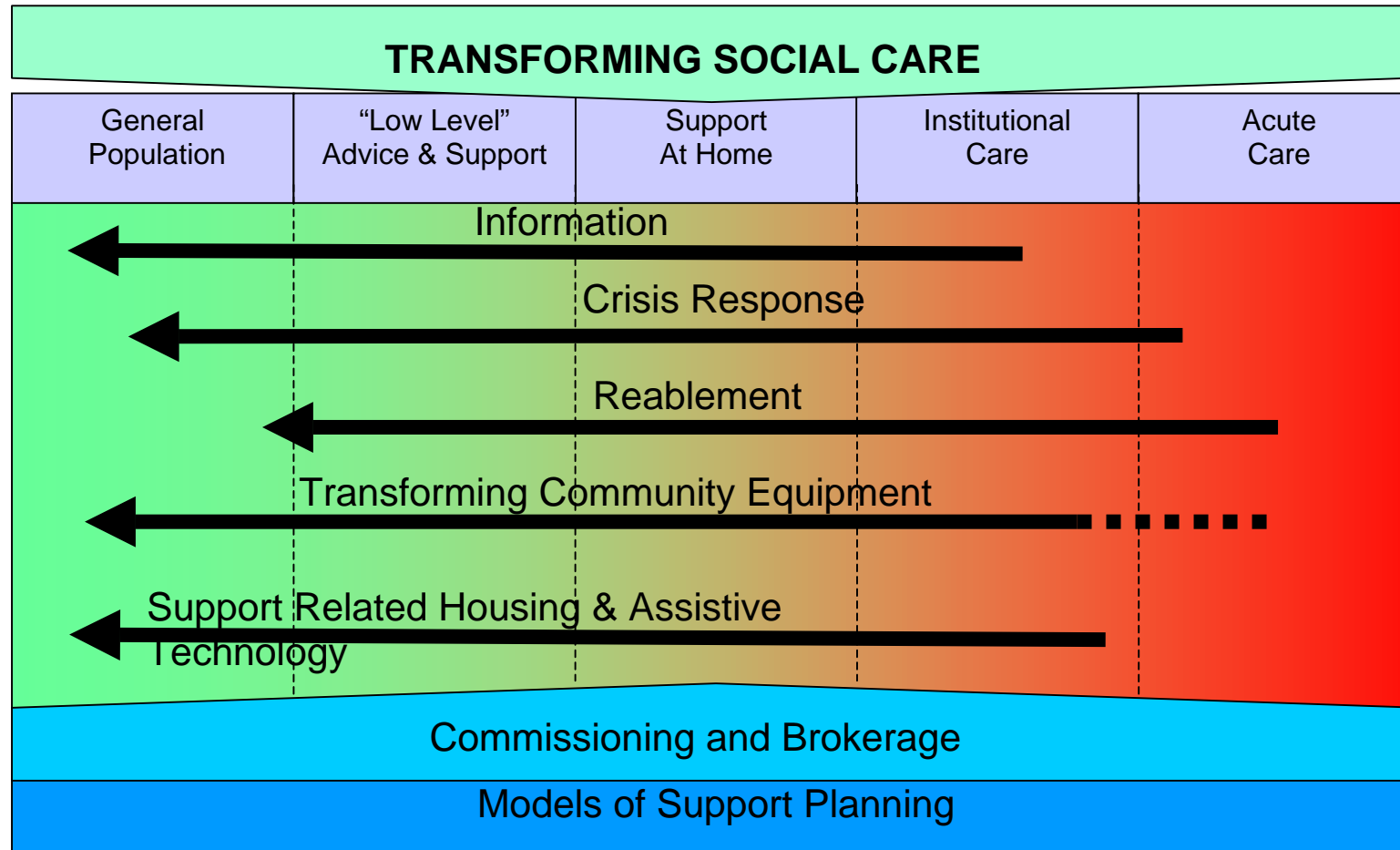
⁵ National Evaluation of Partnerships for Older Projects: final report, 2010, Dept. of Health

4. The purpose of a Dudley Joint Strategy for Prevention and Early Intervention

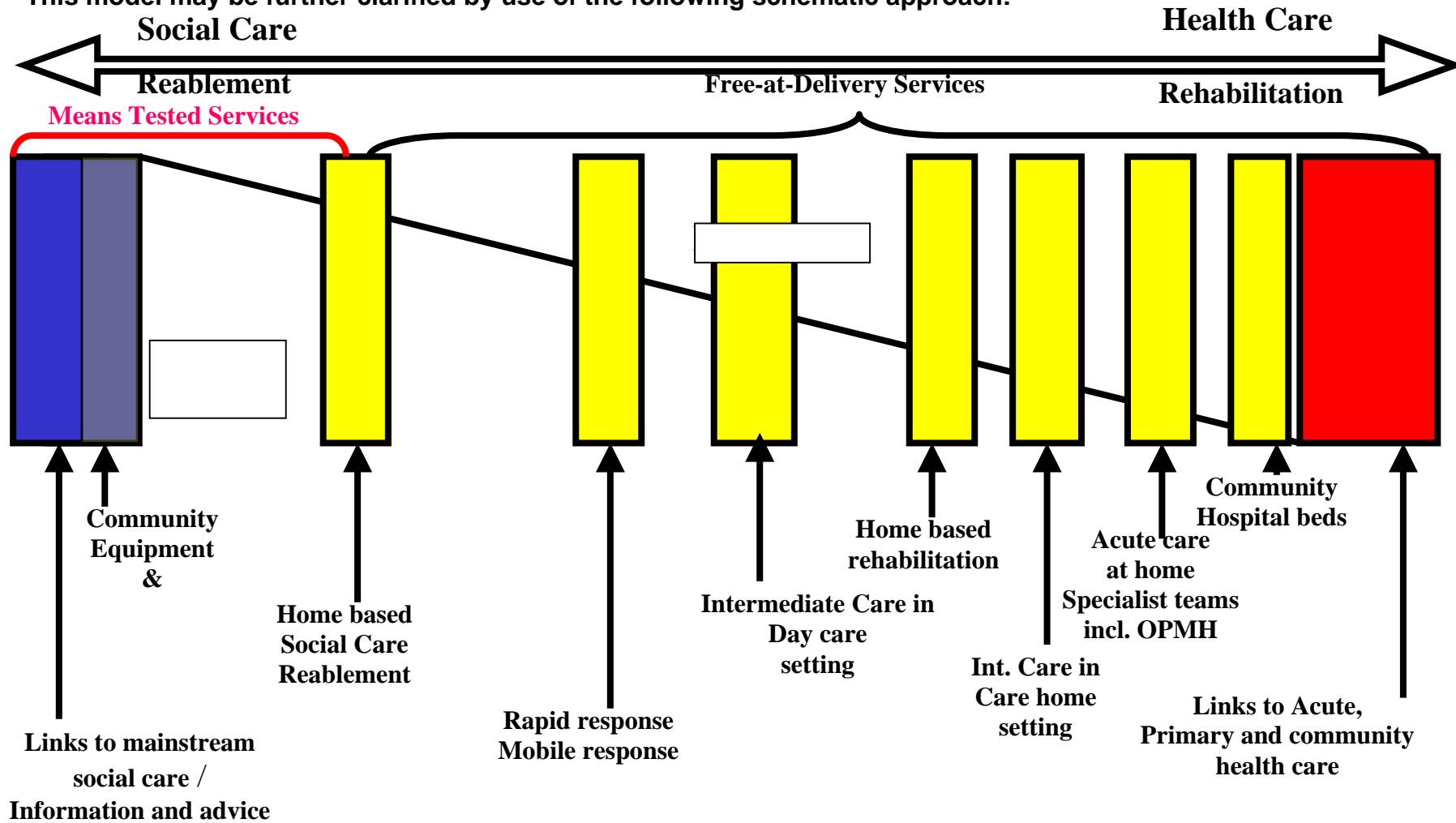
- Identify population groups where need for social care services increases in intensity and target these for early intervention of low intensity services
- Identify individuals who are vulnerable to crisis or accelerating needs and direct preventative services to them
- Develop services that actively promote individuals' independence, confidence and self-esteem
- Develop services that minimise risks to health and safety and peace of mind in people's lives
- Maximise the availability, quality and diversity of low intensity community services that promote independence, social contact and quality of life
- Promote availability of high intensity services that seek to reduce dependency levels through continual review, joint working and consultation. Prevention is an approach which is relevant across the full spectrum of need – not just about “low level services”
- Enable people involved in all health and social care sectors to undertake effective prevention so that vulnerability is identified and independence is maximised
- Ensure that priority groups, carers and key stakeholders are consulted in developing new and existing preventative services and evaluating the long-term strategy
- Establish systems and practices for recording and evaluating preventative needs and services
- Ensure that all preventative services promote equality of access regardless of gender, race, culture, sexuality or religion

The model below serves to demonstrate that in order to achieve long-term efficiency gains the avoidance of “acute care” is essential. Gaps or inefficiencies in the right hand sections of the model will result in greater costs. The interventions identified serve as examples. It is suggested that people choose less dependent options: this is typically more cost effective.

A model for transformation of adult social care (Source: Care Services Efficiency Delivery)



This model may be further clarified by use of the following schematic approach: -

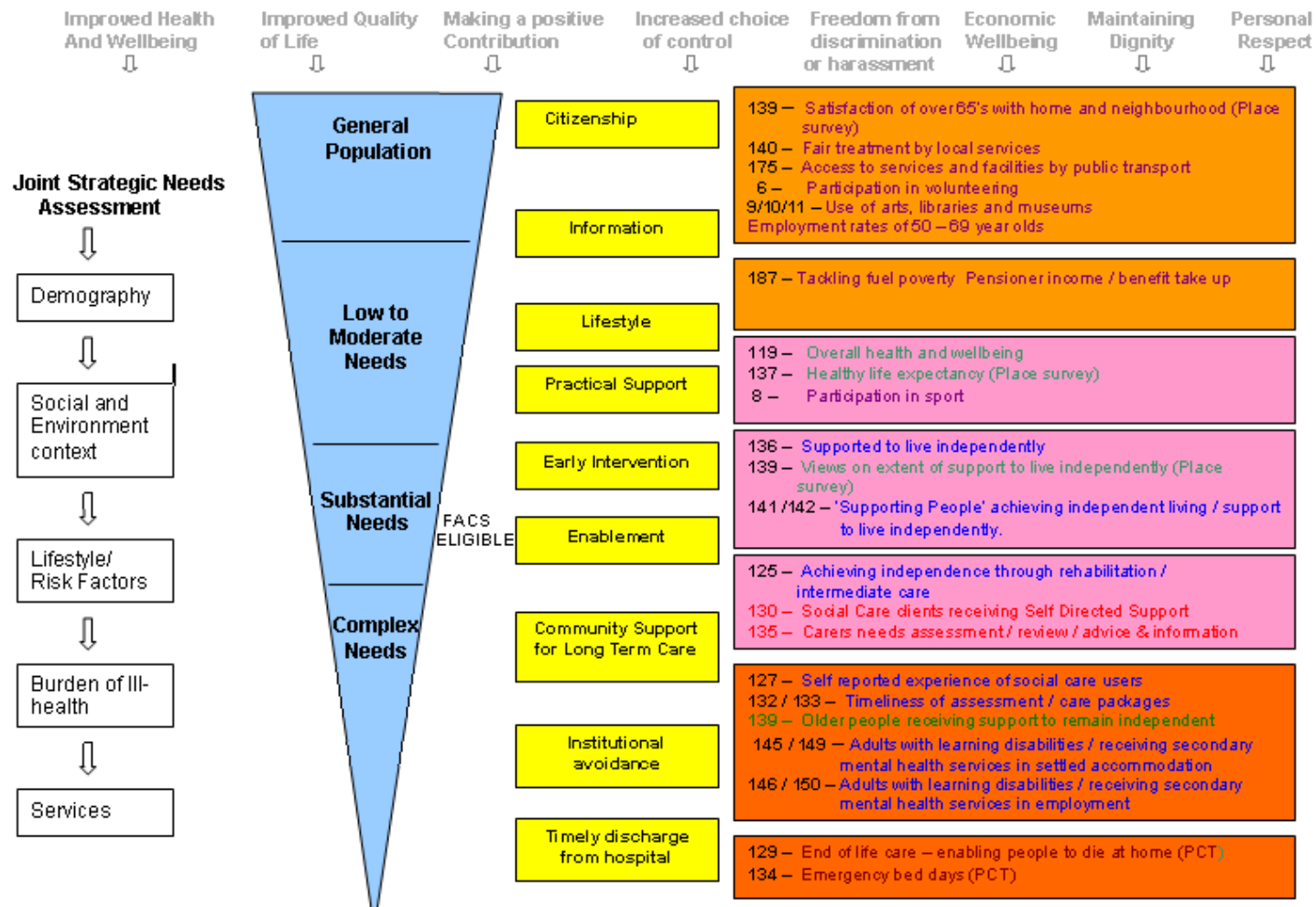


The model serves to demonstrate the style of interventions along a spectrum on increasing acuity. The aim is to ensure that resources are available to ensure “low level”, and therefore cost-efficient. Interventions are in place to avoid “upward substitution”⁶ of intervention. Upward substitution refers to the use of a higher and more expensive intervention in the absence of a “low level” (e.g. rehabilitation) and less dependent in nature, such as that provided within residential care.

Model linking National Indicators, Fair Access to Care Services, Outcomes in Adult Social Care and Joint Strategic Needs analysis is presented below: -

⁶ The Coming of Age, Audit Commission, 1997

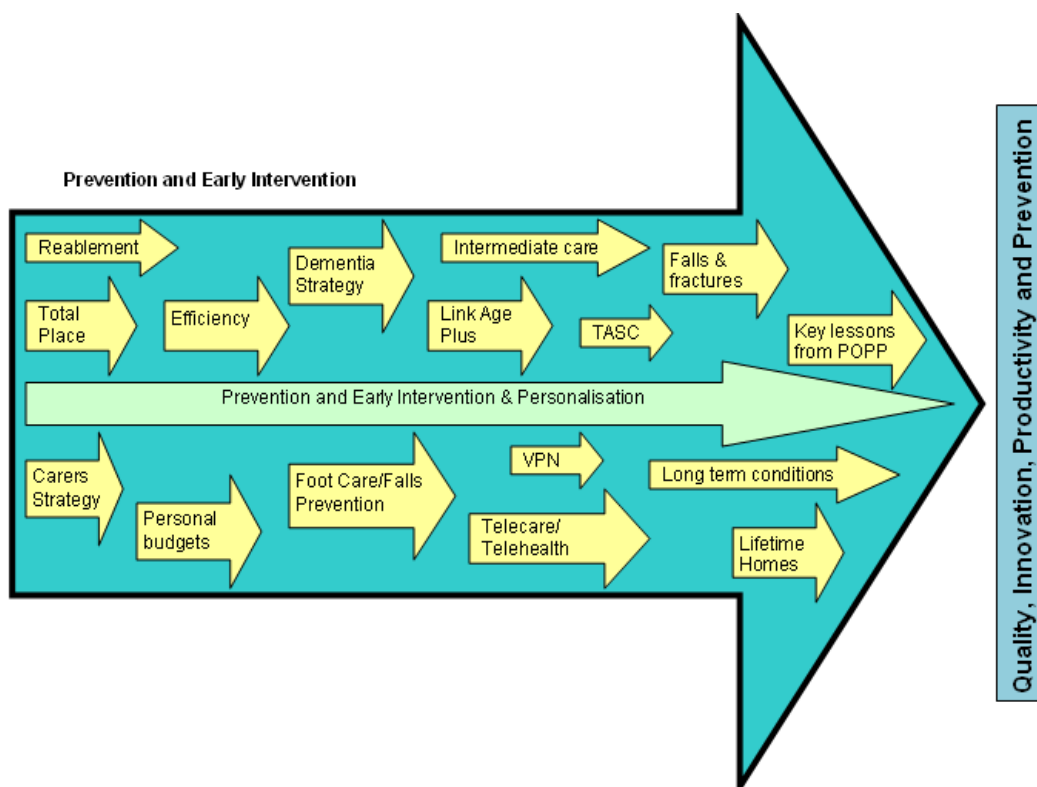
Figure 3: A model linking National Indicators to Fair Access to Care Services



This model further he need for collaborative work across the Dudley's health and social care community in determining the health and wellbeing of the whole population particularly through the Joint Strategic Needs Assessment⁷.

5. Pulling in the strands

As a Council with social services responsibilities, and in partnership with NHS Dudley (the PCT) with the wider community, a number of strategies and plans are in place that are component parts of a joint Prevention & Early Intervention Strategy: -



An analysis of recent policies including Total Place⁸ and Partnership for Older People Projects (POPP)⁹ showed that there are a number of underpinning requirements and enablers that are essential to support the strategic shift to prevention and early intervention:

- Joint vision and strategy including agreement on how to share the benefits and risk
- Better integration of services
- More collaborative working
- Greater efficiency
- Clearer lines of accountability and governance that involve local people
- Transparency of roles through rationalising functions;

⁷ Local Government & Public Involvement Act, 2007

⁸ Total place: a whole area approach to public services, HM Treasury, March 2010

⁹ Improving care and saving money, Department of Health, Jan 2010, page 8

- Strategic asset management
- Smarter and more collaborative procurement
- Understanding need and patterns of spend, activity and outcomes across the whole system
- Tracking productivity and delivery against agreed targets
- Workforce development approaches that promote reablement, personalisation and joint working.

Learning from activities in Dudley will assist in providing more information about these requirements

The following strategies and initiatives underpin the Prevention and Early Intervention strategy.

Housing Strategy¹⁰ – The Dudley Housing Strategy sets out Dudley’s Housing needs and what we intend to do to address them during the period 2007 – 2010. This strategy gives consideration to the needs of all tenure types within the Borough. Our overall strategic priorities include: -

- Planning for population change
- Promoting environmental sustainability and the development of low/zero carbon homes
- Making homes decent - meeting Decent Homes standards (local authority and private sector)
- Increasing the number of affordable homes and establishing pathways of choice to promote sustainable communities and balancing the local housing market
- Connecting the housing strategy to economic and area regeneration
- Meeting specific housing needs

Older Peoples Housing Strategy: Fit the future - homes for life¹¹ - in part to ‘future proof’ housing in Dudley by building homes to last a lifetime in safe and inclusive communities. The key ambitions are to provide older people with a better deal by: -

- Improving advice and information services
- Increased disabled facilities grant funding and increased investment in new housing
- Future proofing new housing by designing and building homes that can be easily adapted as people grow older and more frail
- Housing, health and care providers working together better by providing joined up assessments, service provision and commissioning
- More people to have personal budgets so that they can arrange and purchase services that suit them as an individual.

¹⁰ Dudley Housing Strategy 2007-2010

¹¹ Older Peoples Housing Strategy: Fit the future - homes for life, 2009

Joint Health & Social Care Commissioning Strategy¹² - this document sets out how the Primary Care Trust (PCT) and Dudley MBC will work in partnership and shows our vision and key priorities to provide even better quality of services by providing the right care, at the right time, and right place. This locally agreed overarching framework would guide how future services will be commissioned. The strategy serves to address the four main goals of the White Paper “Our Health, Our Care, Our Say

Extra Care Housing Strategic Vision¹³ - Extra care housing is a key plank in addressing the challenges of providing housing and services for ‘an ageing population’ in Dudley. The ‘vision’ encompasses more than mere ‘bricks and mortar’ and requires a total ethos change in the Borough. In essence the key benefits are: -

- Providing choice for older people irrespective of the tenure of their accommodation
- Creating market stimulus – so freeing up family accommodation /smaller accommodation for single younger people including those with special needs, e.g. Learning Disabilities
- Minimising moves to higher forms of care through: -
 - Provision of barrier free accommodation with 24 hour care and support
 - The ability to intervene at point of crisis through the provision of intermediate provision reserving costly provision for people who need it, e.g. those with complex needs
 - Assisting with ‘delayed transfer of care’ from Community Hospitals
 - Resource and efficiency savings
 - Through the delivery of combined ‘care and support’ services into the community from the hubs
 - Utilising the ‘Active Ageing Centres’ in Extra Care schemes to address the preventative / well being agenda
 - Reducing the requirement for residential care

Putting People First in Dudley¹⁴ - a plan for Adult Social Care in Dudley for people to have easy access to services, real choice in the help they receive and maximum control over the way they live their lives. They will be treated with dignity and respect”.

Priority goals have been agreed and identify the need to: -

- Be accessible and responsive
- Offer choice and manage risk

¹² Joint Health & Social Care Commissioning Strategy 2008-2013

¹³ A Strategic Vision for Extra Care Housing in Dudley, 2010

¹⁴ Putting People First in Dudley, 2010

Dudley Community Information Directory¹⁵ - has strategic fit with Putting People First particularly in respect of being 'accessible and responsive'. A web based 'one-stop-shop Directory where people may look for care and support services in the Borough. For those people who are unable to access information online help is available from staff at Dudley Libraries. Information and advice are available on:

- Help to live at home – organisations and services supporting people to stay independent
- Health – organisations and services promoting health
- Getting out and about – travel and transport information
- Advice and support – organisations providing general information and support including self help groups
- Sports and leisure activities – sports and leisure activities and clubs in and around Dudley
- Learning and volunteering opportunities – local and national organisations that can support people back to work or education
- Housing options – organisations providing advice and details of the different types of housing and housing support available

Homelessness Strategy¹⁶ - the vision in the 2006 strategy was: -

- To improve homelessness advice and prevention services and to increase the number of homelessness preventions

In maintaining the spirit of the original vision the refreshed vision (2009) is to: -

- Prevent homelessness in Dudley and provide a wide range of housing options for all

Supporting People Strategy¹⁷ - Supporting People services provide housing related support to a range of vulnerable people enabling them to live independently and acts as a preventative measure to help them avoid, for example homelessness, entry into institutional care or clinical services and reduces the risk of re-offending. Central to the vision is the preventative programme that Supporting People promotes locally, offering "person centered" services that help clients achieve and sustain independence regardless of tenure or length of stay.

Outcomes to be achieved through the Supporting People Programme are identified as: -

- Economic wellbeing
- Enjoy and achieve
- Be healthy
- Stay safe
- Making a positive contribution

¹⁵ Dudley Community Information Directory, DMBC, 2010

¹⁶ Homelessness Strategy Refresh, 2009

¹⁷ Supporting People Strategy 2010-2015

Carers Strategy¹⁸ - this strategy contains principles of good practice relating to carers and the way in which organisations will work with carers.

The strategy aims to: -

- Provide practical support and information to support carers
- Improve carer well-being
- Promote choice to enable carers and service users to have more power and control over their lives
- Recognise the carer and cared for as valued people within the community
- Help people to identify themselves as carers

The Borough's 13 libraries now offer a carers' information service.

Physical Disability and Sensory Impairment Strategy¹⁹ - this Strategy aims to reflect the views of disabled people captured during consultation, and also sets out the improvements that the agencies are intending to make to their services that will benefit disabled people.

The Strategy focuses on key determinants of independence and well being (which go beyond health and social care): -

- Housing Advice and Support in the home
- Getting out and About
- Involvement and Influence
- Benefits, Employment and Learning
- Health and Well Being

Mental Health Strategy²⁰ - sets out a local vision for moving forward in the development of an alternative, patient focused model of mental health service planning, commissioning and delivery.

Mental health services should link with other agencies and programmes to promote mental health of the general population of Dudley and the full citizenship and social inclusion of people with mental ill health by: -

- Combating stigma and discrimination and addressing inequalities
- Promoting life chances in education and employment
- Improving levels of support in the community in relation to:
- Housing (particularly in relation to those with complex needs)
- Transport and access
- Financial and legal matters
- Supporting family and friends
- Creating safe communities

¹⁸ Dudley Carers Strategy 2010-2013

¹⁹ Physical Disability and Sensory Impairment Strategy 2010-2013

²⁰ Mental Health Strategy 2004-2010

- Improving the physical and cultural environment
- Promoting active citizenship and community participation
- Supporting self-help and user-led initiatives

Dementia Strategy²¹ - the Strategy objectives are linked to “Living Well with Dementia: A National Dementia Strategy”²² which establishes direction for the coming years at national, regional and local level. Strategic revised outcomes identify the need to improve the quality of life for people with dementia and their carers. Four priority objectives are: -

- Good quality early diagnosis and intervention for all
- Improved quality of care in general hospitals
- Living well with dementia in care homes
- Reduced use of antipsychotic medication

Learning Disability Strategy²³ - sets out the commissioning intentions of the Council and the PCT in respect of specialist services for people with learning disabilities. The Strategy addresses the White Paper ‘Valuing People Now’²⁴ which aims to make things better for work, housing, day activities, and health and to give more choice in people’s lives. Key priorities for action are: -

- To have strong leadership and an effective Learning Disability Partnership Board operating in every local authority area
- To increase the range of housing options for people with learning disabilities and their families
- To ensure that the Personalisation agenda is embedded within all local authority services and is underpinned by person centred planning
- To increase the number of people with learning disabilities in real paid jobs
- To increase the number of people with learning disabilities in real paid jobs
- To improve joint strategic planning, commissioning and service development across children’s and adult services

²¹ Joint Commissioning Strategy for Mental Health Services for Older People & Dementia including Younger Onset

²² Living Well with Dementia: A National Dementia Strategy, 2009

²³ Learning Disability Strategy

²⁴ Valuing People Now, Dept. of Health, 2009

Ageing Well: A Strategy for Older People²⁵ – a cross cutting strategy that makes the links between social care, housing and lifelong learning, to ensure that the experience and quality of life for older people in Dudley is a positive one. Services to address a number of outcomes identified by older people in Dudley: -

- Improved health and well being
- Improved quality of life
- Making a positive contribution
- Increased choice and control
- Freedom from discrimination and harassment
- Economic well being
- Maintaining personal dignity and respect

– a cross cutting strategy that makes the links between social care, housing and lifelong learning, to ensure that the experience and quality of life for older people in Dudley is a positive one.

Dudley at Home: Strategy for Vulnerable People²⁶ - for a wide range of vulnerable people, housing, care and support are inextricably linked, and as a housing authority [Dudley Council] will want to address how their policies on offering choice to applicants interact with other programmes of care and support²⁷. It is recognised that there is still work to be done to ensure that all people are able to access good quality suitable accommodation, particularly those who are vulnerable and less able to help themselves. Dudley at Home is a recent development offering applicants on Dudley Council's Register the opportunity to view available properties and apply for any that meet their needs

Health Inequalities Strategy 2010-2015²⁸ - the strategy to close the 'health gap' has been up-dated in November 2010. Tackling inequalities in health requires focus on improving the health of those people who fair worst. This approach does not exclude a whole population approach to improving health, but the intention is to improve the health of the poorest and less healthy fastest. This is not about reducing the health of the more affluent, but is about 'leveling-up' the health status across the borough.

Traffic & Transportation Service Plan²⁹ – It has been noted that many areas of Prevention and Early Intervention lie outside of the CASSR sphere of responsibility but within the scope of the wider Council and strategic partner functions. One such area is that of transport particularly within a Borough such as Dudley with its' urban geography.

²⁵ Ageing Well: A Strategy for Older People 2010-2013

²⁶ Dudley at Home: Strategy for Vulnerable People, 2009

²⁷ Allocation of Accommodation: Choice Based Lettings Code of Guidance for Local Housing Authorities, August 2008

²⁸ Draft Health Inequalities Strategy 2010-2015

²⁹ Traffic and Transportation Service Plan, DUE, 2010-2011

The shared priorities agreed with the Department for Transport aim to: -

- Improve social inclusion, the access to opportunities and to enable individuals and communities to realise their potential.
- Promote good health for everyone identifies minimising harm to vulnerable individuals
- Provide specific provision to benefit pedestrians and other vulnerable users of the highway; assist social inclusion and the mobility of the less able

Dudley Planned Care Strategic Plan Framework³⁰ - this serves to commission the provision of high quality, clinically appropriate care and delivered efficiently. Priorities associated with the Framework include: -

- Reduction in unnecessary demand on health services
- Enhanced Recovery – supporting partnership working across the health economy to support integrated patient pathways irrespective of setting
- The ability of providers to change and adapt to service re-design initiatives

NHS Dudley Long-term Conditions Framework³¹ - to improve the health and well being of people with long term conditions. Objectives of this Framework are to: -

- Implement integrated generic management strategies for people with multiple conditions
- Ensure consistent high quality condition / disease management
- Support self care and manage health inequalities
- Ensure everyone with a long term condition is supported through Care Planning
- To develop seamless pathways for long term conditions

NHS Dudley Urgent Care Strategic Plan Framework³² - to ensure that the 'whole system' is able to meet demand and that patients receive appropriate care on the right setting. Objectives of this Framework are to: -

- Manage long term conditions better in the community
- Ensure that patients flow better through the 'whole system'
- Shift appropriate patient care into the community setting

Intermediate Care Strategy³³ - Intermediate care is a range of integrated services to promote faster recovery from illness, prevent unnecessary acute hospital admission, support timely discharge and maximise independent

³⁰ Dudley Planned Care Strategic Plan Framework, NHS Dudley, 2010-2011

³¹ NHS Dudley Long-term Conditions Framework

³² NHS Dudley Urgent Care Strategic Plan Framework, 2010-11

³³ Dudley Intermediate Care Strategy, 2002

living. It is a vital component of the programme to improve the health and well being of older people and raise the quality of services they receive. Intermediate care describes services that meet all the following criteria: -

- Are targeted at people who would otherwise face unnecessarily prolonged hospital stays or inappropriate admission to acute in-patient care, long term residential care, or continuing NHS in –patient care
- Are provided on the basis of a comprehensive assessment resulting in a structured individual care plan that involves active therapy, treatment or opportunity for recovery
- Are time limited, normally no longer than six weeks and frequently as little as 1-2 weeks or less and
- Involve cross professional working with a single assessment framework, single professionals records and shared protocols'

Safeguard & Protect³⁴ - policies and procedures for safeguarding and protecting vulnerable adults at risk of abuse and being compliant with “No Secrets”.³⁵ Development has required statutory agencies to work together in partnership to ensure that the appropriate policies, procedures and practices are in place and are implemented locally.

Telecare Strategy³⁶ - a Strategy that is under development to utilise technology to enable older people, people with disabilities and other vulnerable people to live with dignity and as independently as possible in their own homes. The strategy will aim to deliver objectives adopted from the Department of Health guidance paper ‘Building telecare in England’³⁷. Objectives of the strategy include: -

Falls Protocol: Accident Prevention Strategy³⁸ – this document provides guidance and pathways for the assessment, management and prevention of falls within the community, primary care, secondary care and residential care. Falls prevention is primarily being aware that falls are a problem, acknowledging that many falls can be prevented and understanding the risk factors. It is through team effort and shared responsibility of staff, residents and their families that early identification of risks can occur. This can happen through history taking, early orientation of residents, early assessment of care needs and providing a safe environment. With on-going review of falls risk

³⁴ Safeguard & Protect: Dudley Multi-agency policies & procedures for the protection of vulnerable adults Safeguard & Protect

³⁵ No secrets: guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse, Dept. of Health & Home Office, 2000

³⁶ Telecare Strategy, DMBC, 2010

³⁷ Building Telecare in England, Dept. of Health, 2005

³⁸ “Assessing, Managing and Preventing Falls”, DMBC & NHS Dudley, 2009

and using incident reports as descriptive tools, problem solving for recurrent fallers can happen.

Joint Accident Prevention Strategy for Dudley³⁹ - accidents are a major cause of injury and death in the UK and in many cases are predictable and therefore preventable. Accidents are a major health problem both nationally and locally and they cause a considerable amount of absence from work, suffering, permanent disability, deaths and are a major financial burden. The overall aim of the Strategy is to continue to reduce the disability, injury, ill health and death caused by accidents to Dudley's residents and to people who visit and work in Dudley.

6. Making it happen

In identifying the strands associated with a Prevention and Early Intervention Strategy there is a need to design and co-ordinate a variety of programmes of work that will be essential, such as workforce development, guidelines and protocols, improved information systems, performance management, inspection and audit.

Implementation of a co-ordinated approach to Prevention and Early Intervention will require Commissioners across the health and social care community to develop "joined up" work, including the pooling of resources. In seeking to achieve financial economies a collaborative approach to Quality, Innovation, Productivity and Prevention (QIPP) is required.

QIPP serves to provide a frame of reference in time of recession given that the economic world has changed. The vision for placing people at the centre of care has not changed, however there is a need for: -

- Improvements in efficiency
- More effective partnerships
- Pursuit of evidence based practice

Putting People First was developed in order to create a strategic shift in resources and culture from intervention at the point of crisis towards prevention and early intervention, focusing on promoting independence and improved wellbeing in line with the needs of the local population, reaching out to those at risk of poor outcomes. The objective is to invert the traditional "triangle of care" (see page 11) in which resources are concentrated on those with the greatest acute needs. Standing the triangle on its head should mean that more people are reached through prevention and early intervention,

³⁹ Joint Accident Prevention Strategy for Dudley, 2009-2012

reducing the numbers who reach the acute stage and lose independence⁴⁰.

The implementation of this strategic approach should demonstrate how resources are being shifted into prevention services based on information about the health and social care needs identified in the Joint Strategic Needs Assessment.

Good practice dictates that Dudley Council and strategic partners should be providing comprehensive early intervention, enablement and reablement that can be easily accessed by all user groups.

7. Commissioning Prevention and Early Intervention

Commissioning Plans need to be reshaped in line with Putting People First and integrated with the PCT where appropriate.

Commissioning to transform adult social care under Putting People First requires the establishment of ways of aggregating individual commissioning decisions taken by people who control their own care plans, so that the sum of these individual decisions can influence macro-commissioning.

A Commissioning Strategy should demonstrate increased investment in prevention, early intervention and reablement. The capacity to commission services that provide intensive care and support should be retained by the Council for those with high-level complex needs. Workforce planning should be embedded in the commissioning process.

A market development and stimulation strategy, with actions identified to deliver the necessary changes, should be in place. This may include, for example, a transformed community equipment service⁴¹, consistent with the retail model, which uses accredited retailers to give users a choice of equipment.

⁴⁰ Scrutinising the Transformation of Adult Social Care: Practice Guide, 2010, Centre for Public Scrutiny

⁴¹ Care Services Efficiency Delivery, 2009

APPENDIX I – Action Plan
Joint Strategic Needs Assessment

No.	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
1.1	Identify if people who use services, including self-funders and carers are involved in developing the Joint Strategic Needs Analysis (JSNA) and whether specific examples of their influence are evident	Shobha Asar - Paul	June 2011		Service user and carer involvement in JSNA process Those people who are actively involved in care are best positioned to determine how the services should change.
1.2	Identify examples of the JSNA influencing commissioning plans e.g. identifying gaps in services	Mike Marshall Shobha Asar - Paul	June 2011		Improved range of service interventions available
1.3	Have any services been developed or reshaped in light of user demand	Mike Marshall	December 2011		User demand leads commissioning process Quality is seen as being achieved through the combination of sector led improvement with a strong local voice and accountability

Joint Strategic Needs Assessment

No.	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
1.4	Look at the strategy for moving resources into prevention and early intervention. e.g. extending User Led Organisations in Dudley; engaging more older people through community centres; promoting housing independence for vulnerable people including Extra Care Housing and new homes for people with learning disabilities.	Brendan Clifford Mike Marshall	June 2011		Prevention and early intervention prevents or delays loss of independence and well being
1.5	Review how successful the strategy is in relation to specific groups	Brendan Clifford Mike Marshall	December 2011 December 2012 December 2013		Marginalisation of specific groups does not occur

Commissioning and Care Management

No.	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
2.1	Consider to what extent the Council and partners have systems in place, such as case finding, to identify people who might benefit from preventative services	Maggie Venables AD – MH / LD Mike Marshall Neill Bucktin	June 2011		The demand of people to meet their diverse needs will lead to creation of a truly person-centred service
2.2	Review the balance in the commissioning strategy between commissioning for people with high levels of need and commissioning for prevention and early intervention, including noting the direction of travel in commissioning over previous years and plans for future years	Maggie Venables AD – MH / LD Brendan Clifford Mike Marshall	June 2011		Strengthening of reablement for service users and carers
2.3	Consider the extent to which Intermediate Care and reablement services are part of the standard operational process for adult social care / local PCT and targeted at those most likely to benefit	Maggie Venables Brendan Clifford AD – MH / LD Mike Marshall Neill Bucktin	March 2011		Strengthening of reablement for service users and carers High quality assessment and care management is central to personalisation

Commissioning and Care Management

No.	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
2.4	Council to collect evidence of effective early intervention and prevention services and reallocate resources accordingly. e.g. extending User Led Organisations; older people through community centres; promoting housing independence for vulnerable people disabilities.	Maggie Venables Brendan Clifford AD – MH / LD Mike Marshall	October 2011		Support to service users and carers, with personalised support to prevent escalation of need, as the first line of prevention
2.5	Review how the Council supports independent care providers to develop services to meet its commissioning strategy and the personalisation agenda	Mike Marshall	April 2011		Diversity of peoples' needs being matched by diverse service provision, with a broad market of high-quality providers
2.6	The to involve the Voluntary and Community Sector and User Led Organisations in monitoring the quality of services	Mike Marshall Sue Reynolds Steve Jones	April 2011		Diversity of peoples' needs being matched by diverse service provision, with a broad market of high-quality providers. Care and support delivered in partnership

Commissioning and Care Management

No.	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
2.8	Review joint work on prevention with Dudley MBC and NHS Dudley on prevention of falls	Trevor Priest Liz Long	April 2011		Improved outcomes in prevention and early intervention. Reduction in falls
2.9	Review joint work with housing on adaptations and community equipment, assistive technology and "care and repair"	Ron Sims Ann Askew Sue Reynolds	June 2011		Telecare continues to have a high profile in achieving appropriate and cost effective support.
2.10	Review joint work with the Dudley MBC and NHS Dudley on Intermediate care, assistive technology and community health services	Maggie Venables Brendan Clifford Mike Marshall	June 2011		Telecare continues to have a high profile in achieving appropriate and cost effective support.
2.12	Identify the extent to which people feel their lives have been improved from having a service	Reviewing Social Workers	September 2011		People identify transformed lives

Carers Services

No.	KEY ACTIONS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT	Outcomes for users of services and their carers
3.1	Carers' advice – continued development of the carers information service as part of the Transforming Social Care programme.	S Rice C Rowley Kate Millin /Lesley Robson Libraries.	June 2011		Improved outcomes for carers SDS supporting carers to continue in caring role, for example, reducing residential care admissions.
3.2	Carer Aware training – Further roll out of the on-line training programme.	S Rice C Rowley Andrew Holland	June 2011		Carers as expert care partners, gaining awareness of carer Services.
3.4	Emergency Support Scheme and other innovative approaches to support provision in an emergency	A Askew S Rice C Rowley Richard Eaton Jilly Beale	June 2011		Carers as expert care partners remaining physically and mentally well, not financially disadvantaged. 'Peace of Mind'
3.5	Support to carers immediately after bereavement to provide essential life skills.	S Rice/ C Rowley Omega [End of Life Charity]	December 2012		Improving Carers' Services