Adult Services Transformation: Passport to Independence Design Phase Update

Scrutiny Committee

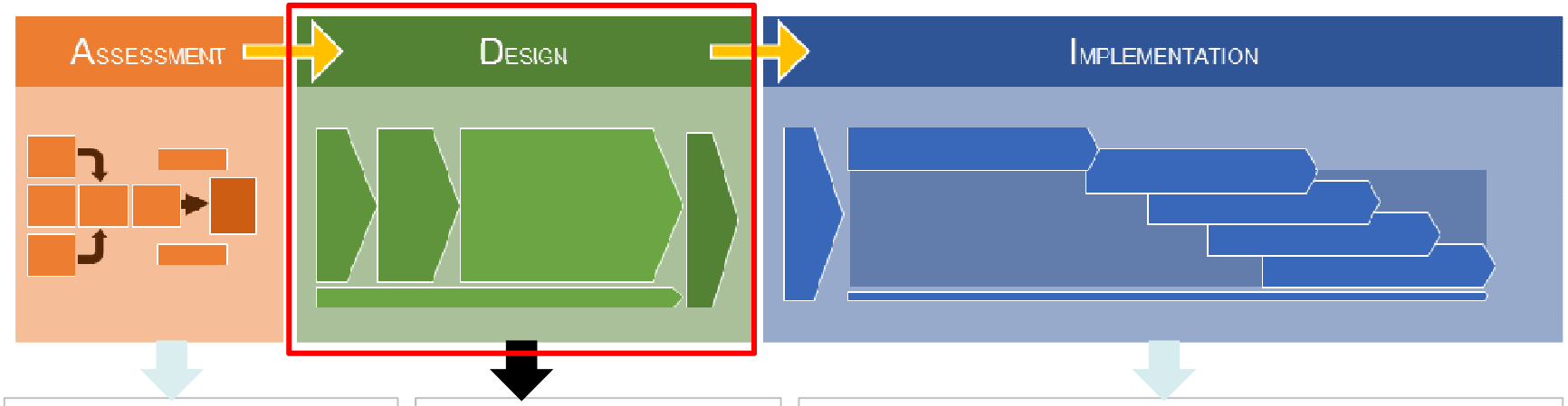
17th June 2016

Lancashire County Council

Agenda

- Overall approach – Assessment, Design, Implementation
- The opportunities to improve – Service user outcomes and financial
- Co-designing the service with LCC practitioners
- Appendices
  - Contingent model

Overall approach – A/D/I



Where are the biggest opportunities for improvement?

- *£24-£36M p.a. financial opportunity*
- *Practitioners spend 14% of their time with service users. 33% of time spent on Liquid logic IT system (LAS)*
- *Opportunities to improve outcomes, ways of working and reduce cost*

January 15

What are the solutions and how do we know they work?

- *Practitioner 'design' teams*
- *Processes that support good practice*
- *Live pilot office*
- *Evidence of improvement*
- *Greater confidence in financial opportunity*

Feb - August 16

Rolling out solutions that support practice transformation across the county, locality by locality

- *Sustained long-term change*
- *Managers and teams constructively challenging performance to deliver practice change*
- *Setting up cascade of improvement meetings*
- *Ensuring simple, visible data that drives bottom-up problem-solving*
- *Clear measurement of progress*
- *Making best practice standard cross-Lancashire*

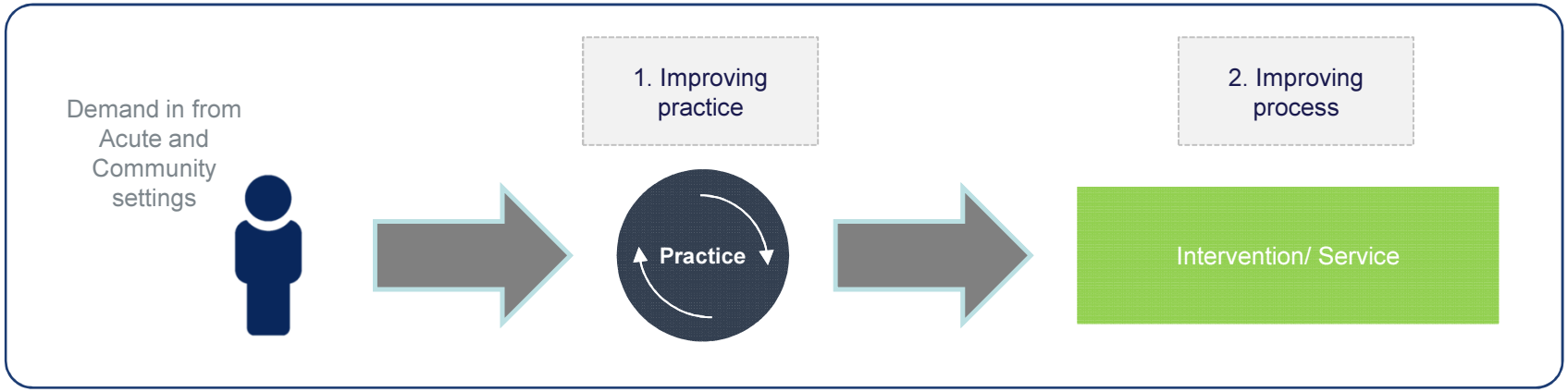
~12-14 months post Design

High level improvement approach

The programme applies to the following services:

- Older People (OP), Physical Disabilities (PD), Learning Disabilities (LD), Mental Health (MH)

Approach in Design is based around improving practice and process. This will divert and/or delay demand and reduce overall size of care packages leading to better outcomes for service users and overall financial savings



Improving practice

- Consistent and accurate decisions
- Strength based assessments
- Ensuring menu of options clear, appropriate and systematically used
- Correct volume of Service Users throughout the pathway

Improving process

- Efficient delivery through improved scheduling, reduced paperwork, reduced travel time
- Process improvement so that services/ interventions deliver better outcomes
- Making the correct practice decisions “the easy option”

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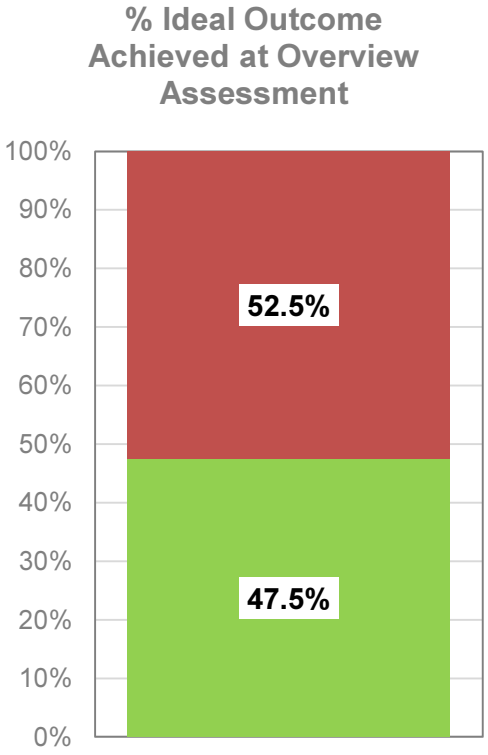
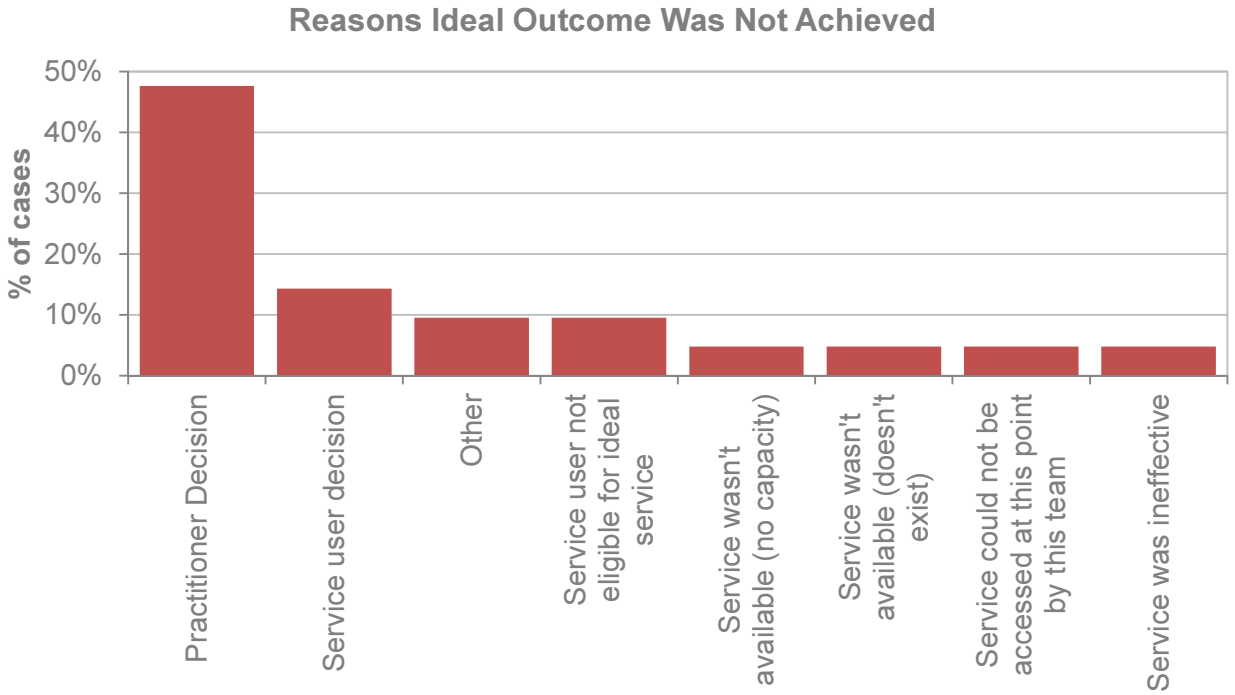
Example workshop output

- Design workshops were held with people from across the county and from all backgrounds associated with adult social care practice
- The output below is a typical example of output from the workshops from Overview Assessment decision making





Only 48% of cases reviewed achieved the ideal outcome. Not only does this improve service user outcomes and staff ways of working, it also results in a significant financial opportunity

Case study – Mrs B

Quote from Practitioners in the Workshop

"She really just wants to be at home"

Situation for Mrs B, 78

- Entered short term residential care following a short stay in hospital
- Fractured a foot following a fall in short term residential
- Admitted to long term residential following second hospital stay

Suggested outcome

- Reablement with therapy
- Domiciliary package post reablement

Actual outcome

- Discharged into Long term residential care
- Care other than residential not considered
- Lost council home and her dog
- Requesting reviews as doesn't like residential setting

Working with LCC practitioners to Re-Design the service

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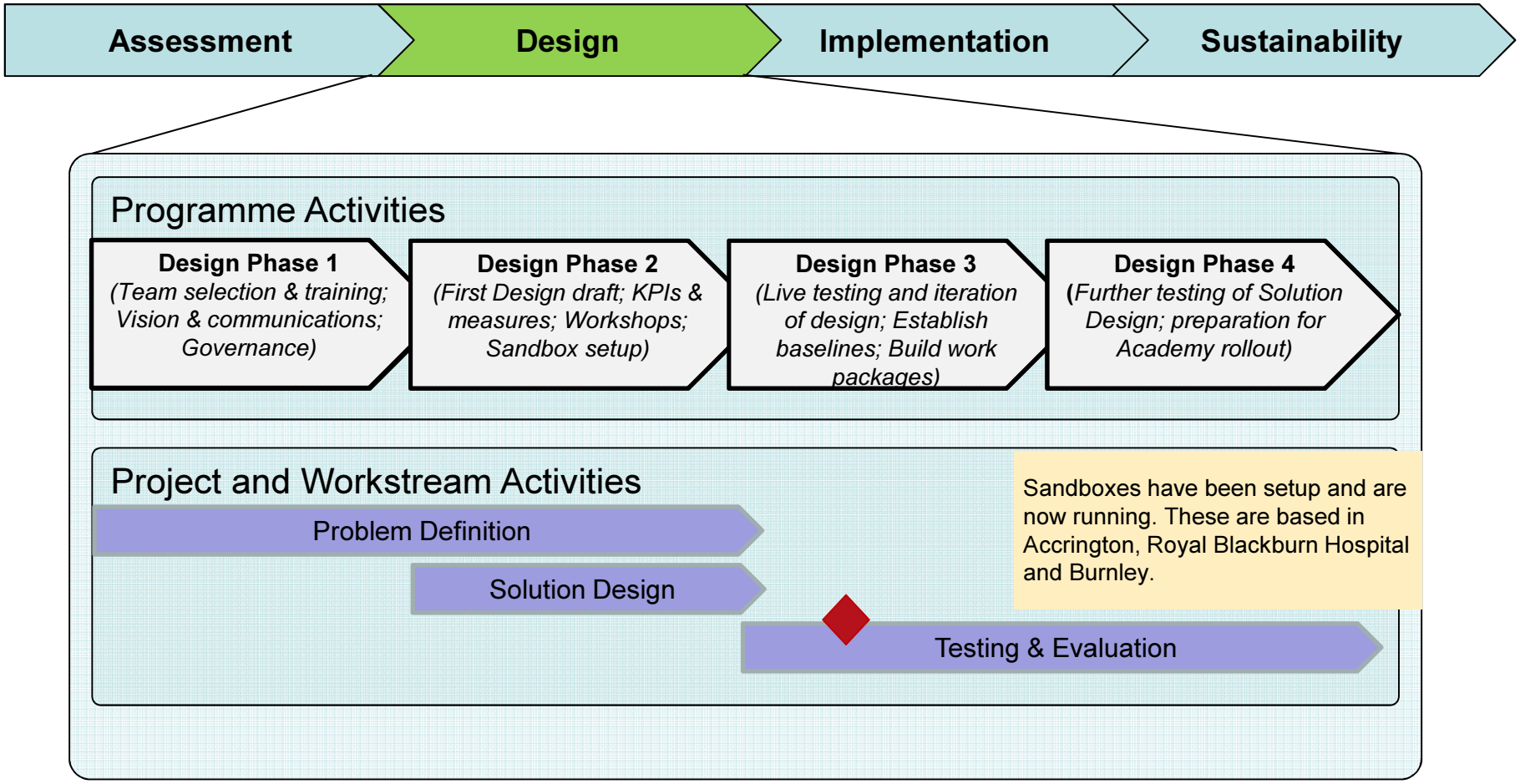
The phases of Design



'In over thirty years of working for Lancashire County Council, I feel we have a real opportunity to shape the service and make real lasting improvements for citizens and ourselves. I hope everyone embraces the programme, and we go on the journey together.' ***Design Lead***

Programme vision and name– by Design Leads

By ensuring citizens and their families are at the centre of social care services in Lancashire, we will empower and equip staff and citizens with the information and tools so they are able to work together to achieve desired outcomes, whilst promoting independence and wellbeing.

Passport to Independence

Promoting Wellbeing

Maintain a citizen's wellbeing and independence in the community.

Ordinary Life

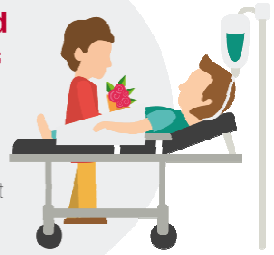
Build on the abilities of people with learning disabilities to achieve an ordinary life.

Promoting and Supporting Independence

Promote independence through community assessments and reviews.

Informed Choices

Work with partners and providers to deliver the right service at the right time.



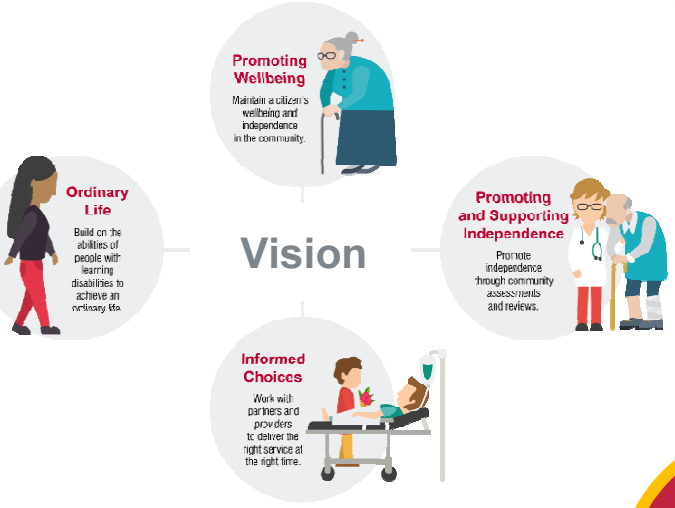
These are the four projects covering the entire pathway and OP/PD and LD clients

Solution design principles

Design solution all based around these 4 principles

Establishing what good practice looks like

- *Strength based approach*
- *Assessing capability correctly*
- *Matching support to need correctly*



Co-design and communication of compelling vision for change

- *Visible data*
- *Governance/ improvement cycle meetings in place to aid decision making*
- *Leadership support in place*

Establishing correct culture and performance management

Designing new systems and processes

- *Alignment of systems and processes*
- *Structural changes to ensure correct roles are in place*
- *System blockers understood and removed*

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Promoting Wellbeing

At the access point to Adult Social Care

Top 10 Menu of Service

Regular Review of Cases

Definition of Ideal Outcomes

Weekly Problem Solving

Specialist Input

Promoting Wellbeing

Maintain a citizen's wellbeing and independence in the community.

- *Good Practice*
- *Culture and Performance*
- *Systems and Process*

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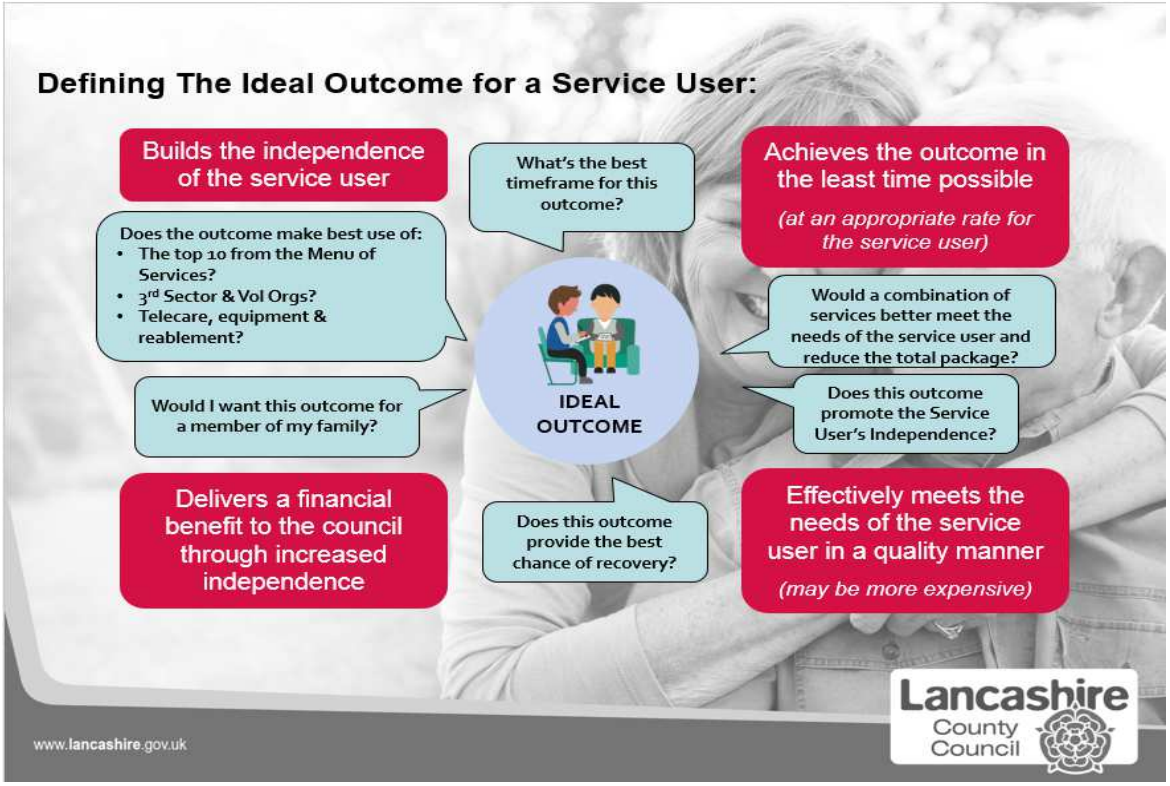
Definition of Ideal Outcomes

- The principles and key questions to consider when defining ideal outcomes have been developed to ensure a consistent ideal across teams.
- This promotes the project vision of SUs receiving the same, quality care regardless of their pathway into the service



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Example initial Sandbox results (Community)

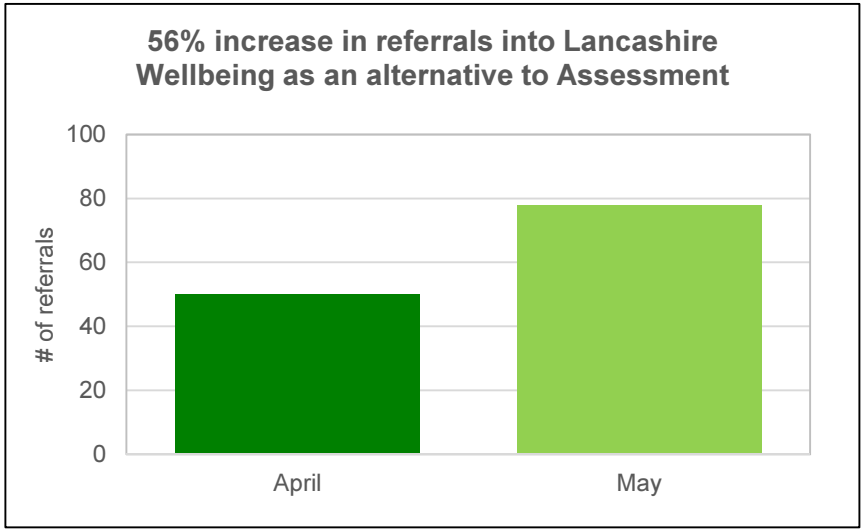
Promoting Wellbeing: Maintain a citizen's wellbeing and independence in the community

Objective:

When a Service User arrives at the "access point" of Adult Social Care we wish to increase the usage of effective voluntary and 3rd sector organisations to prevent/delay referral through to statutory services.

Being tested:

A Top 10 Menu of Service Tool; the involvement of alternative services in sandbox; team briefings and presence in the meetings has resulted in better awareness and use of services like Lancashire Wellbeing.

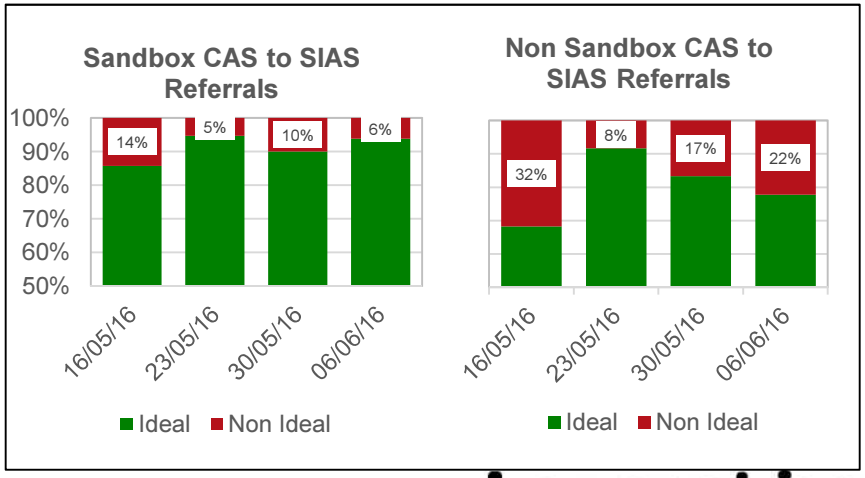


Objective:

To reduce the number of inappropriate referrals from "access point" teams through to Social work assessment teams. This provides speedy resolution for service users and reduces the backlog and amount of work to be undertaken by LCC practitioners

Being tested:

Co-locating CAS (contact centre) with SIAS (initial assessment team) and promoting the live support of colleagues to improve decision making and SU outcomes.



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Example initial Sandbox results (Hospital)

Promoting Wellbeing: Maintain a citizen's wellbeing and independence in the community

Mrs G lives at home and is mainly independent (assistance with personal care and 1 meal per day)

She has an accident and is admitted to hospital

On becoming medically fit, due to the fact that she needs 2 carers and a hoist, 24hr nursing care is recommended by health

Previously, we are likely to have taken this recommendation and put Mrs G into 24hr Nursing Care

Now, the case is reviewed in the daily case progression meeting and measured against the principles of Sandbox

What needs did she have before coming to hospital?

Does this outcome promote the independence and recovery of the Service User?

Have we made best use of the 3rd Sector and voluntary organisations?

Is there a combination of services & equipment that could achieve the desired outcomes?

Since Mrs G and her family wanted her to return home, the social worker went about making this sure this was possible:

Integrated Therapy Services used to help regain mobility and confidence

Age UK aftercare put in

British Heart Foundation cleared downstairs room for bed

District nurses involved for support with catheter and skin management

Roving nights and telecare added to support plan

Made arrangements with Mrs G's daughter to have online shopping delivered on a regular basis

All of this allowed Mrs G to be discharged on the 2nd of June to her own home instead of going into a 24 hour nursing facility – an outcome that she and the family were very happy with and a pathway that the social worker felt proud to have helped create.

Promoting & supporting independence

Pathway Principles

Case Progression

Practitioner Toolkit

Team Structures

Team Wellbeing Meeting

Practice Questions

Promoting and Supporting Independence

Promote independence through community assessments and reviews.

- What good looks like
- Performance management
- Systems and Process

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Practice Questions

Non Problem	Coping	Platform	Preferred Future	Small Steps
What's most important to you in your life?	What's working well and what are you able to do for yourself? What helps you feel safe?	What would most improve your wellbeing or quality of life?	What would be happening if things were working better for you?	Is there anyone or anything in your life that can help to improve your situation?

Independent Desired Outcomes

Independent & Preventative Services

- Info & Advice, Universal, Telecare, Equipment & Adaptations, Reablement, Health

Unmet Desired Outcomes

RAS

Budget

Example initial Sandbox results

Promoting and Supporting Independence: Promoting Independence through Community Assessments and Reviews

Objective:

Increasing the capacity and productivity of Community Teams. Currently practitioners spend ~14% of their time with Service Users.

Being tested:

Team Wellbeing Meetings, Caseload and Throughput discussion, use of Admin and OT resource, scheduling and booking visits, automated sending of letters

Practitioner's experience

Mandy is fully utilising the support through admin and CareNav to increase her availability for the citizens of Lancashire.

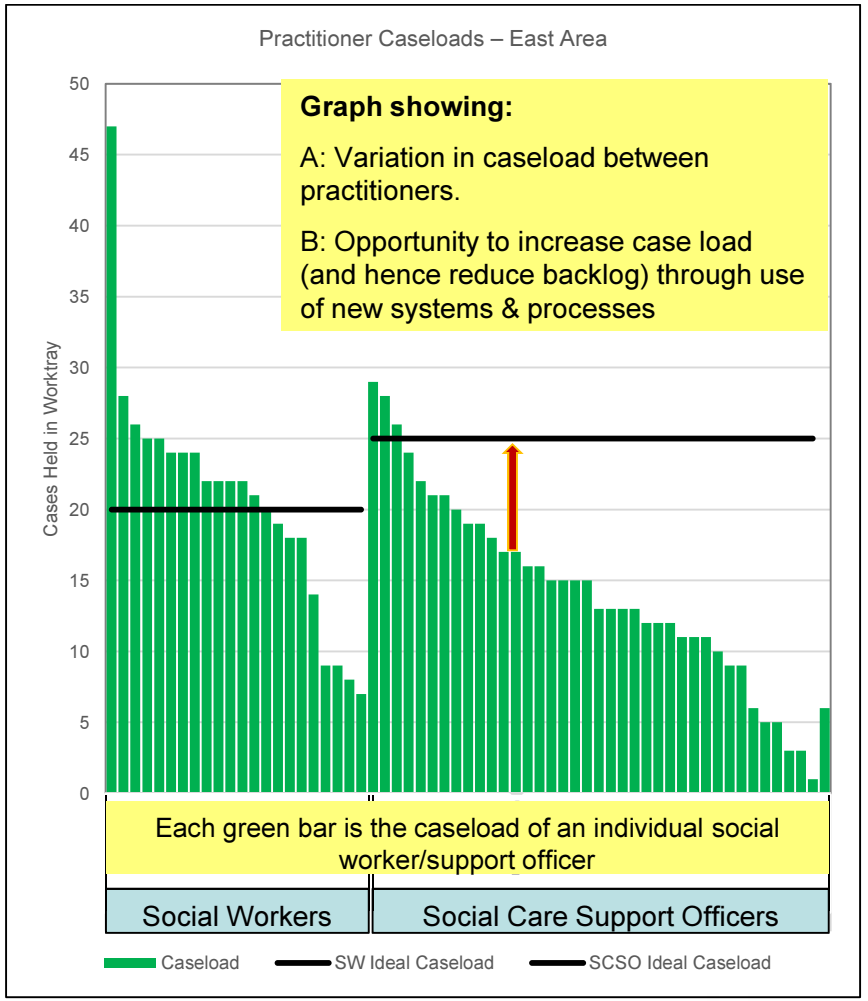
She finds the support so far "brilliant" because she doesn't have to spend time on admin or CareNav tasks anymore

Caseload

Because of the support provided, she was able to progress cases faster than other practitioners

By looking at the caseload report the Team Manager was able to identify the quick turnaround of her caseload

After discussion with Mandy, the Team Manager agreed to allocate 8 additional cases to the practitioner in contrast to the current allocation process of 3-4 cases per practitioner per week



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Example initial Sandbox results

Informed Choices: Work with partners and providers to deliver the right service at the right time

Mrs L lives at home with her husband as was assessed as requiring support for Personal Care and Mobilisation

Previously:
Reablement set out as a 6 week plan to undertake visits to address the showering, dressing and improving confidence in mobilisation
Typically this would last for 70hrs of visits before review and feedback from Provider

Allocation: Reablement case was **allocated on the day** that it was sent over from SIAS

Planning: The **SMART action plan** was sent over to the Provider **within 72hrs**

Feedback: After 1 week of Reablement visits the progress **against the plan was scaled** against a framework with descriptive **feedback from the Provided**

Now: Mrs L's Reablement visit in the morning have **reduced by 30mins and other calls cancelled**
She is on track to achieve an independent outcome in 2 weeks

This change in the Reablement process has already meant that 4 Service Users are on track to achieve better outcomes in shorter timescales through Sandbox

For one Service User this was made more possible in the first weeks feedback just by establishing that the right type of shoes could have prevented achieving an outcome in 6 weeks of the old process

Any Questions?

Further case examples
Ordinary Lives – Learning Disability

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Ordinary Lives – Enablement Case Studies

- Currently no dedicated enablement service exists within the Learning Disability service. The examples below are two cases being reviewed and supported through the Making Progress Team in the Burnley Sandbox. The sandbox process will verify cost avoidance and package reduction due to enablement

Mr K

Mr K is a young man living with a learning disability. He currently lives with mum and attends college during the week. Mr K has the potential to live very independently and is looking forward to working with the Making Progress Team.

To achieve a more independent life, Mr K is currently receiving enablement to develop his independence in three areas:

- Travel training to the local Asda and then to College in September
- Food shopping
- Cooking meals

Benefits to Mr K include significant increase in wellbeing as well as avoidance of much larger package of care once he moves out of the family home to live more independently.

Miss J

Miss J lives in a supported living group house and receives a considerable package of care to help meet her needs. Miss J has always voiced a want to learn how to prepare her own meals to support her in improving her independence.

To help Miss J achieve more independence and to reduce the amount of support she receives to prepare meals she will be working with the Making progress team to learn more about cooking. Starting with lasagne, Miss J is looking forward to learning new skills and is excited about the opportunity to prepare her own meals.

Along with a increase in wellbeing, and learning a new skill, this piece of enablement is aiming to reduce the amount of 1:1 support that Miss J receives in her house.

Appendices
Contingent fee model

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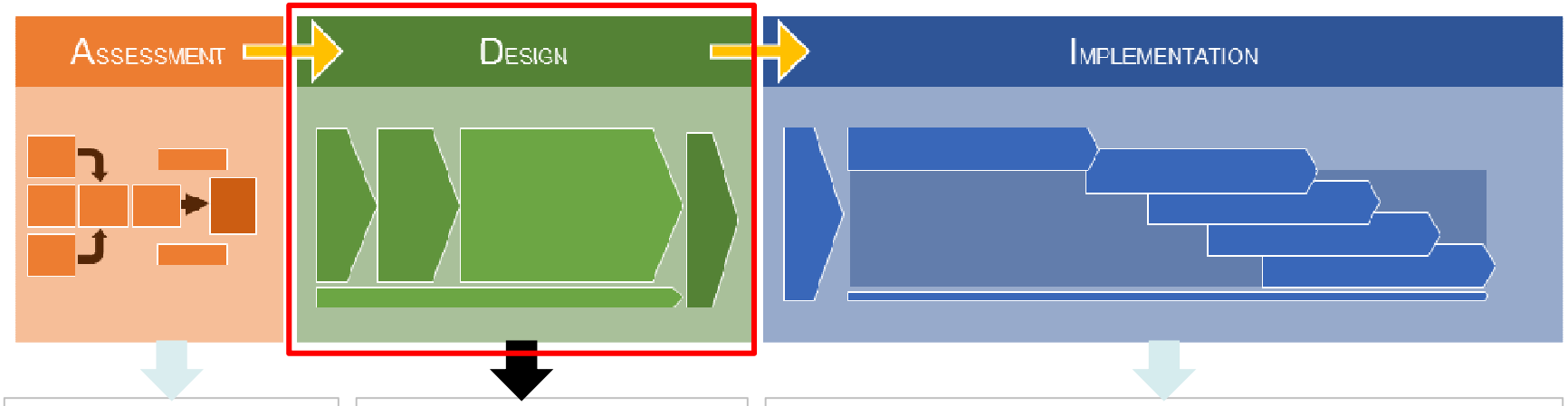
Financial opportunity (annualised)



Target : Stretch

£24M: £36M p.a.

Will deliver opportunity matrix of >£36M p.a. by looking at further areas

Seeking to maximise this which will require LCC and Newton collectively driving as hard as possible

Implementing opportunity matrix on contingent basis

During implementation work packages may be one of:

a. Newton led (triggers contingent model)
b. LCC led
c. LCC led with light touch Newton support

Contingent fee model – triggered upon entering implementation

The contingency is triggered at implementation but will apply to the entirety of the implementation work package fees, and retrospectively the associated design fees, when Newton leads the relevant implementation