
DARLINGTON COMMUNITY SUPPORT NETWORK

**Responsible Cabinet Member - Councillor Veronica Copeland,
Adult Social Care and Housing Portfolio**

Responsible Director - Murray Rose, Director of People

SUMMARY REPORT

Purpose of the Report

1. To seek Members approval for the establishment of a Darlington Community Support Network through a phased approach, initially establishing a stakeholder group of key partner organisations to co-ordinate the development of the DCSN and initiating social capital mapping.
2. Subject to agreement of 1, above, to carry out the first phase of the work by approving the mapping of social capital.

Summary

3. There is significant and well-respected research that shows that local authority spending on social care, if current trends continue, will significantly impact on their capacity to provide other services. The two key trends are the growth in the ageing population, confirmed by recent census results, and the reduction in public finances. The former is fixed and the latter is unlikely to change significantly over the medium term.
4. Darlington Borough Council (DBC) has taken a series of measures to mitigate the effects of this likely scenario. The council has been audited as providing good value for money over a number of years and has consistently sought to reduce waste and inefficiency in systems and services. More recently, the council has taken some key decisions to prioritise areas of spend and to decommission a number of services and facilities in order to protect the budgets of key preventative and statutory services.
5. A new model is being proposed aimed at encouraging individuals and communities to play a greater role in 'owning' their own needs with support to find positive solutions. To improve the quality of their life allowing them to stay active and independent of statutory services for longer. It is envisaged that the majority of people who need extra help and support would be older people, disabled people and others identified (by themselves or others) with a life limiting condition and their

families or carers, however a DCSN is not exclusive and has potential for giving and receiving support across generations.

6. A feasibility study in 2011 (**Appendix 1**) assessed the potential need and demand for a self-financing Darlington Community Support Network (DCSN). The study confirmed the need to develop a new sustainable model of prevention and early intervention for adults to deliver the national policy drivers for Adult Social Care, NHS and local partnership strategies. It also highlighted the need to take a co-ordinated approach to developing a DCSN and recommended a lead organisation acting as a “Hub” with providers (some could be very small and local) commissioned by the lead organisation.
7. Further to last year’s feasibility study the recommended approach includes a focus on taking a positive view of community and individuals’ assets rather than deficits. A major element of the council strategy has been the development, with partners, of the Darlington Together approach; a broad set of linked activities and campaigns which are designed to mitigate the impact of austerity measures on vulnerable individuals and communities and which complement the budget strategy adopted by the council from 2011. Leading a Borough wide co-ordinated approach to community support is identified as a mechanism for contributing to achieving and sustaining identified savings and to reduce future growth in adult social care spend. It will:
 - (a) support people to support themselves, thereby enhancing local networks and decreasing demand on social care provision;
 - (b) improve the range and reach of the local Third Sector in Darlington;
 - (c) enable self-sustaining networks that have the potential to grow and increase, outside of formal Council support.
8. The proposal which builds on community strengths underpins the Services for People Programme “Commissioning for Resilience” as the vehicle for changing the culture in Darlington, both from the perspective of the Council in how we commission “services” and locally for people as citizens. “This new approach genuinely empowers citizens and thereby strengthens civil society as the assets of communities are identified, connected and mobilised, and the abilities and insights of local residents become resources for solving a neighbourhood’s own problems.” (*Communities in Control – Developing Assets by Cormac Russell, ABCD Institute and Nurture Development- 2009.*)
9. The overarching approach known as the Darlington Community Support Network is based on the principle of improving locally based support for individuals and as a way of reducing the need for some publicly funded provision is supported by early evidence from elsewhere. As a relatively new concept nationally and in Darlington each area which implements such a scheme does so to meet local circumstances and needs. It is recommended to Cabinet that the introduction of the DCSN be phased in over 12 months to give the opportunity to assess evidence and impacts in stages.

10. The proposal is initially to test out the model through co-ordinating the above activities and co-designing the DCSN with key partners. It is therefore proposed to form a stakeholder steering group which will develop the DCSN. This form allows the council to work as lead partners in the start up and development of the network for two years with the option of then transferring the operational element to the Third Sector in Darlington. It is further proposed that a launch day is held in January 2013, attended by national experts in this area, to promote and gain wider engagement for the first phase set out below.
11. It is recommended that the first phase of work to inform the development of the DCSN will be about gaining greater insight into the existing social capital operating in Darlington by producing a 'living' map in the Borough. This will focus on altruistic and/or well connected individuals and groups whom we may not already know much about and whose individual or group interests and strengths and connections will be a key asset in establishing the foundations for the establishment of a sustainable DCSN. Ward Councillors can play a pivotal role in this. Because of the innovative and complex nature of this social capital mapping, it is proposed that this work be procured from a specialist provider, within the budget limits set through the DCSN budget allocation in paragraph 34. The social capital mapping is likely to be delivered in stages, with pilot areas identified through data drawn from the Single Needs Assessment.
12. A second early product will be a system for the community to access consistent information and web based support to purchase care and services through their own funds or through personal budgets (known as an e-marketplace). This will be developed as a second phase of the DCSN.
13. A third 'product' or outcome will be the growth and development of Darlington's Third Sector and the support that they can provide to residents.
14. The current financial modeling suggests that, for the investment identified over five years, a DCSN will return a cost efficiency thus reducing the predicted gap in future funding. The current Medium Term Financial Plan (MTFP) has set aside £381,000 to establish the DCSN and is predicted to support cost avoidance in Adult Social Care of approximately £2.2 million net over five years. Without the DCSN, the predicted growth will impact even more on the Council's ability to fund vulnerable individuals.
15. A report will be brought to a future Cabinet to seek approval for the next phase of the development of the DCSN.

Recommendation

16. It is recommended that :-
 - (a) Cabinet approve the establishment of a Darlington Community Support Network stakeholder group of key partner organisations to co-ordinate the development of the DCSN for an initial period of two years.

- (b) Cabinet approve the first phase of the DCSN implementation; the Social Capital Mapping.

Reasons

17. The recommendations are supported by the following reasons:-

- (a) The DCSN will support the Council's budget strategy.
- (b) A stakeholder group will help to determine the preferred model and organisational form for the DCSN which will provide a sustainable approach in the future.
- (c) The first phase of work will provide information and evidence on which to develop social capital mapping will

**Murray Rose,
Director of Services for People**

Background Papers

Caring For Our Future: Reforming Care and Support (DH July 2012)

Elaine O'Brien : Extension 2844

S17 Crime and Disorder	Greater community cohesion can help in reduction in crime and disorder.
Health and Well Being	Yes – narrowing the gap between individuals, groups and neighbourhoods. Mitigate the impacts of poverty, economic downturn, public expenditure cuts and welfare reform.
Carbon Impact	No.
Diversity	Yes- supports people as citizens and narrowing the gap.
Wards Affected	ALL
Groups Affected	All adults and possibly children and young people
Budget and Policy Framework	Adult Social Care-Additional Social Care funds, Darlington Together Commissioning Budget, Performance Reward Grant
Key Decision	No.
Urgent Decision	No.
One Darlington: Perfectly Placed	Yes – support meeting outcomes for “One Darlington”.
Efficiency	Invest to Save for future cost avoidance

MAIN REPORT

Information and Analysis

18. There is a rise in life expectancy which should be celebrated as many of our older people will have assets that support communities and provide a greater volunteer base. However, the quality of a longer life and attaining a level of wellbeing is also an important factor in reducing need for services. With a predicted rise in the numbers of people with long term illnesses, it is recognised that some people will require social care services as they cannot manage without support and care.
19. The predicted growth in the older adult population is reflected in the Darlington Single Needs Assessment 2011 as follows:
 - (a) By 2020 over 40% of the population will be over 50 yrs; 10% will be aged over 75.
 - (b) The number of people aged 65 and over is projected to increase from 17,400 in 2008 to 23,800 in 2023 and 29,100 in 2033.
 - (c) The number of people aged 85 and over is projected to increase from 2,400 in 2008 to 3,800 in 2023 and 6,000 in 2033.
20. Nationally it is recognised that a third of over 85 year olds will suffer from dementia; therefore the predicted growth of this age group of 1,400 by 2023 equates to 466 additional people with a risk of suffering from dementia. Other long term illnesses are also predicted to increase; in 2011 8,750 people aged 65 or over in Darlington were predicted to have a limiting long term illness. By 2030 this is projected to increase by over 50% to 13,490. Additionally, in Darlington rates of COPD, CHD and epilepsy are at least 20% higher than the England average and rates of diabetes are also significantly worse than the England average.
21. There are high numbers of people presenting to Adult Social Care who are signposted to support elsewhere or who are only provided with advice (55%) and, of those who are assessed, 32% do not progress to care provision. This would indicate a number of unnecessary referrals and assessments being made which could be reduced if there was a greater level of support and information available within the community. Intermediate Care and Care Management time could be targeted more efficiently if more people could access earlier support as an alternative to presenting at Adult Social Care for lower level needs; thereby benefiting the people and reducing demand for unnecessary assessments.
22. The majority of Councils and health systems are struggling with growing expenditure committed to fund those people with greatest need. Barnet Council's research has recently sparked national interest as it very simply illustrates what will happen if finance is maintained at current levels with rising care and support needs eligible for social care funding; council budgets will be overwhelmingly social care budgets with insufficient resources to provide a full range of other essential services.

23. In anticipation of the rising demand and future cost pressures, Darlington Borough Council has a programme of Commissioning for Resilience which is using the Single Needs Assessment and other information to predict future needs and financial costs. A series of projects are in development which will support the Council to manage a predicted gap between Council resources and probable rise in the need for social care.
24. The DCSN is a major contributor to the new programme focusing on avoiding future cost increases through greater support being available in the community and neighbourhoods. The current financial modeling suggests that for the investment identified over five years a successful DCSN will return an estimated net cost efficiency of £2,214,513 (**Appendix 2**) over five years. This is based on an assumption of a 10% reduction in people receiving funded non- residential adult social care.
25. The Commissioning for Resilience programme has far wider reaching consequences than just avoiding future costs in Adult Social Care. A major element of the council strategy has been the development, with partners, of the Darlington Together approach; a broad set of linked activities and campaigns which are designed to mitigate the impact of austerity measures on vulnerable individuals and communities and which complement the budget strategy adopted by the council from 2011.

A Darlington Community Support Network

26. It is envisaged that the majority of people receiving the support would be older people, disabled people and others identified (by themselves or others) with a life limiting condition and their families or carers, however the DCSN is not exclusive. The network will develop for a relatively low cost two elements of support:
 - (a) universal support, accessible to all - building on connectors and small community groups; and
 - (b) early intervention which is targeted at people where it is possible to prevent the need for some people to require social care assessment and care services which are much more expensive. This could be provided through some community groups and Third Sector organisations.
27. The basic premise of a Community Support Network builds on community strengths and underpins the Commissioning for Resilience programme as the vehicle for changing the culture in Darlington, both from the perspective of the Council in how we commission services and locally for people through empowering people as citizens. The underlying strategic aim of the development of the DCSN is to contribute to the changing 'picture' of voluntary and community sector working in Darlington. This is not a criticism of anything that the sector does now but it is noting that as the Council has less money to provide as grants and demand for services is growing, that the current Third Sector capacity will also be impacted upon.

28. Darlington already has a high number of voluntary and community organisations and they make a significant contribution to the vibrancy of the Borough and to the well being of individuals. Currently, they may be limited in the offer they can make because of their capacity. There is also anecdotal evidence collected through the feasibility study and other feedback that willing volunteers are not called upon if they do not fit exactly into one organisation's remit. There needs to be far greater flexibility where individual organisations only focus on particular groups when they have skills which would benefit a larger group in the community. Each of the organisations is an independent body and this gives them strength in sovereignty and decision making but poses risks in terms sustainability and potential market development. EVOLution provides the key strategic support to the sector. What is required is an approach which also increases the capacity of the Third Sector, supports market development and ensures co-ordination so that public finances achieved the greatest possible outcomes.
29. To harness innovation in developing community support and stimulate the development of further the voluntary sector leadership, the recommendation is to instigate a stakeholder partnership which will have as its aim the development of the DCSN as a Borough wide activity which is over and above the current offer from the Third Sector. The stakeholder partnership will be formed by extending invitations to all key Third sector organisations in Darlington and to key public sector partners linked to health and social care provision.
30. A key tool to support this changing picture, to gain greater knowledge of the wide range of, as yet, untapped social capital that exists in a community. It is proposed that the first phase of work for the DCSN is to launch a major initiative to identify a significant number of individuals, groups and organisations who are not linked in any coordinated way but who can contribute to supporting people to remain safe and thriving in their own homes and communities. The predicted outcome of this piece of work is that it will support the process of every voluntary and community sector organisation getting access to a greater range of key individuals and groups who will then provide support to individuals in their homes and inform the partnership and individual Councillors where there are gaps and where energy may be targeted.
31. The strength of the DCSN will be greatly enhanced by the role of Ward Councillors as the existing community champions. Ward Councillors have already demonstrated their ability to make contacts, to make connections and to signal up gaps in provision and in the future this will enable the DCSN to make a sustained impact on people's lives and on the demand for council resources.
32. The Council does not have the resources or specialist expertise to conduct the social mapping required in the first phase of activity. There are specialist organisations who routinely and competently carry out this type of work and it is recommended that organisations be invited to tender for the initial, time limited, piece of work.
33. In the future, as a second phase of the DCSN, the future delivery arrangements will also develop a quality assured system for ensuring that people have access to consistent, reliable information and to trade services which can enable people to

remain independent for longer. This will include an intranet option which would allow people to access information (or have it accessed for them) with the ability to access support, equipment and to purchase services with their own funds or through a personal budget without recourse to Council services.

Baseline Funding

34. Funding has been allocated for set up costs of a Darlington Community Support Network as follows:-

- (a) Two year initial funding has been approved within the additional social care monies from the Department of Health, intended to increase preventative support and reduce admission to long term (social or health) care.
- (b) The funds have been transferred into the Adult Social Care budget via section 256 under agreement with the Primary Care Trust for years 2011-12 and 2012-13. Subsequently a carry forward plan has been agreed with the Clinical Commissioning Group (CCG) for 2012-13:

The total initial funding is:

Carry forward from 2011-12	£181,000
2012-13	£200,000

- (c) A breakdown of the funding model and assumptions is attached as **Appendix 2**. The funding model shows an ongoing commitment and there is the possibility of further funding (circa £200,000 per year for two years) allocated from the additional social care monies in future years with agreement of the CCG through a Section 256 agreement or making a case for investing public health resources. However funded, the aim of the DCSN is to become sustainable and future payments would be tied to results demonstrated in cost avoidance.

35. It is possible that the DCSN can never be wholly free from needing some form of guaranteed income but any future payments made by the local authority should be based on the DCSN meeting a series of metrics which, collectively, deliver savings to the council at a far greater level than any payments made. A draft performance framework is to be found in **Appendix 3**.

36. The key issue is to be able to provide assurance that the initial investment of £381,000 over two years and the potential for further specific payments, will result in reduced expenditure for the local authority and for other partners, such as the Clinical Commissioning Group. The Council is faced with growth not savings in Adult Social Care if all current factors remain in place. The target net saving circa £2.2 million efficiency for the DCSN over five years is based on there being some increased capacity within the Third Sector and the community at large to mitigate any policy changes; the further growth can only be prevented by increasing the

capacity of the Third Sector, by changing the culture of community support and by creating a market place for traded support services.

37. Following the completion of the social network mapping and the review of the outcomes by the stakeholder group, phase three will be agreeing the appropriate type of organisation to lead the DCSN into the future. All early discussions have included the same elements, such as a central co-ordinating body (the Hub recommended in the feasibility study) and a partnership between Darlington Borough Council, Clinical Commissioners, the Third Sector and other partner organisations.
38. The role of the delivery vehicle in the future will be to utilise the social capital mapping, to keep it 'live', to develop the links to local areas or wards to ensure that any gaps in support that are identified are filled, to develop the e-market place for support services and to manage whatever resources are made available to the DCSN.
39. The procurement of the social network mapping is a non-strategic procurement and subject to officer delegation.

Equality Impact Assessment

40. The Equality duty has been considered and a draft assessment is at **Appendix 4**. An Equality Impact Assessment has been undertaken and it has been agreed that this will need to be revisited at the various stages of developing detailed delivery options.
41. Currently the impact assessment has highlighted that positive impacts may be identified for older people and disabled people with improved access to prevention services. There are no anticipated negative impacts identified at this stage but this may depend upon the resourcing and delivery profile for future activity. There may be an impact on young people and families' longer term but this will depend upon the client group agreed for the Network.
42. Impacts on individuals and communities cannot be identified as there is insufficient detail available at present but this will be revisited following the completion of the social mapping phase.

Consultation

43. The feasibility study (**Appendix 1**) provides information on the broad initial engagement of the public, Third Sector and practitioners to find out what may be required from a DCSN. A further workshop was held to provide the outcomes of the study. An Equality Impact Assessment is also in development. The next phases of the implementation will be subject to consultation following Cabinet approval.