
THE CARE ACT: AN UPDATE ON PROGRESS

SUMMARY REPORT

Purpose of the Report

1. This report follows on from a previous report presented to Scrutiny Committee in March 2015 which outlined the early implications of the Care Act for Darlington. This report sets to outline the work done to date on the implementation of the Act within Darlington since this last meeting.
2. The report sets out progress to date on the following:
 - (a) The local and regional progress of The Act.
 - (b) Specific updates on the work streams that Scrutiny Committee expressed an interest in to help champion.

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Background Papers

S17 Crime and Disorder	None
Health and Well Being	The Care Act is a significant change in social care policy which will involve representatives on the HWB. The board will be presented with updates as necessary
Carbon Impact	None
Diversity	National EIA has been undertaken
Wards Affected	All wards
Groups Affected	Adult Social Care Service Users – Current and Future.
Budget and Policy Framework	None
Key Decision	None
Urgent Decision	None
One Darlington: Perfectly Placed	The Care Act will particularly impact on outcomes in One Darlington: 'People are healthy and supported'

Efficiency	None
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MAIN REPORT

The Care Act 2014 – Phase One (April 2015) Implementation. Progress to date

Assessment

3. There is currently an ongoing project within Adult Social Care to develop the Assessment documentation. This is to ensure that elements of the Care Act are embedded in practice and the Assessment facilitates a cultural change within the community. The Assessment development is in conjunction with the IT change program which will see the Carefirst case management system replaced with 'Liquid Logic'.

Advocacy

4. There has been a significant focus within Adult Social Care on developing the use of Care Act Advocacy as required by the Act. This has included methods such as:
 - (a) Regular scrutiny at Validation Forum.
 - (b) Reflective Practice sessions with practitioners emphasising the use of Advocacy.
 - (c) Case supervision and discussion.
 - (d) Formal Training and the Advocacy service attending team meetings.
5. Through this process the use of Advocacy has increased. During the period 1/4/15 – 31/5/15 two referrals for Care Act Advocacy had been received. During the period 1/6/15 – 31/7/15, Forty Care Act Advocacy referral's had been received. Darlington is currently using Advocacy appropriately and the use of Advocacy is above the expected numbers at this time.

Workforce

6. The Act significantly reforms the way social care needs are assessed, met and paid for, and how social care services are provided. The Care Act focuses on preventative services to reduce needs and therefore delay the need for an assessment. It is this message that vital within the staff training that has been delivered to date. Darlington has been leading on the regional workforce group.

Progress to Date

7. Local briefing sessions have been carried out with over 500 people having accessed the information (including; staff, members, the voluntary and community sector and care home providers and staff).
8. Using regional money; we have purchased some very specific training on Assessment and Eligibility, this is being delivered to all assessing staff throughout March and April 2015. Further training has been delivered to Adult Social Care staff

during July 2015 and September 2015.

9. To date all departments in Darlington Adult Social Care have accessed additional e: learning modules. The training program has been rolled out to a wider audience within the Local Authority, Housing, Contracts and Commissioning. Briefing sessions about the E-Learning has also been given to all domiciliary and Care Home providers.
10. Adult Social Care staff have also participated in facilitated development days in relation to Making Safeguarding Personal (MSP) in line with the Care Act recommendations on safeguarding practice. Themes that emerged from the development days included a focus on the individual, Local Authority SAB and multi-agency practice. The development of community involvement was also explored. In addition to the areas above, staff completed individual lists of possible areas for development to take back to teams for further discussion and development.
11. The aim of this work strand is to ensure that all staff are fully briefed and trained to understand the requirements of the Care Act, ensuring the ongoing development of the staff group and that those who are not directly impacted in their day to day role understand the potential impacts.

Regional Groups

12. In preparation for implementation, the 12 North East Local Authorities were working closely to assist one another in relation to the changes and a number of work streams were set up to facilitate this. The frequency and number of regional groups has been reviewed following implementation but the Care Act Lead Regional Meeting, chaired by Durham County Council is continuing.

The 2016 Changes – Suspension until 2020

13. The Department of Health has confirmed that the second significant phase of the Care Act Implementation will now be delayed until 2020. The funding reforms were due to come into force in April 2016 but the Government has decided to delay implementation until April 2020. The Government has said that the delay will allow time to be taken to ensure that everyone is ready to introduce the new system and to look at what more can be done to support people with the costs of care.
14. The extension to the means test has been delayed as has the Appeals System, this element is subject to the Comprehensive Spending Review in November 2015 at which point it is expected the Chancellor will set out the timescale for implementation. The immediate impact is that the local authority can stop planning or undertaking early assessments of self-funders. In the interim communications messages will be shared with key stakeholders about the changes and the associated implications.
15. It is expected that further statutory guidance will be issued in the autumn, the details of which are not known at this time. The stocktakes are expected to continue but will be confirmed in due course.

16. It is not yet known whether monies set aside to implement the 2016 part of the care act will be released to local authorities to help with the 2015 implementation costs.
17. The first Care Act stocktake is expected in September 2015 and it is hoped that this will give a more accurate understanding of both the national and regional position of care act implementation.

Summary and Next Steps

18. The Care Act presents all local authorities with a complex and demanding project plan that is currently working with a significant number of unknowns. This report is an attempt to detail the major challenges faced by Darlington Borough Council and to outline where demands on capacity might be as the journey towards April 2015 and beyond begins.
19. There are key links to both local and key national programmes the Better Care Fund and wider health and social care integration at a national level and the Care First replacement and Managing Cost of Care Project at a local level. These projects are aligned where deliverables are shared.

Recommendation

20. It is recommended that Scrutiny Committee take note of the report.