

People and Communities Overview and Scrutiny Committee

Dorset County Council



Date of Meeting	20 March 2017
Officer	Helen Coombes - Interim Director for Adult and Community Services
Subject of Report	Quality and Cost of Care – Inquiry Day
Executive Summary	<p>On 13 February 2017, The People and Communities Overview Committee held an Inquiry Day into the Cost and Quality of Care in Dorset.</p> <p>Local Authorities have the primary responsibility to make sure that the care needs of older people and those with complex needs are met now and in the future. However the current system faces significant financial pressures and there is a significant funding gap. Whilst there is an acknowledgement that more money needs to be put into the system costs cannot be met by the taxpayer alone. The majority of people already fund their own care and this will continue into the future. What local authorities can and must do is to help people plan for their future care needs and ensure that, where people are asked to contribute, the system is fair and transparent.</p> <p>The future of social care is and should be shaped by local circumstances and aspirations. Communities, Service providers, service users, carers, councillors and practitioners should all have a role and should have a say in the future of social care. The Inquiry day was designed to provide an insight into what needs to be done locally and how this important issue affects people at a local level. We learned about the important role of local government in the commissioning and managing of care services and received evidence from those who use, provide and regulate</p>

	<p>services as well as a range of practitioners. The day generated conversations and provided practical inspiration to help form recommendations and actions that will help build a social care system that delivers quality of care to the people of Dorset</p>
Impact Assessment:	<p>Equalities Impact Assessment: N/A</p>
	<p>Use of Evidence:</p> <ul style="list-style-type: none"> • Local performance data and demographics. • Dorset Population figures • https://www.parliament.uk/business/...a-z/.../adult-social-care-launch-16-17 • Local Government Association Adult Social Care Funding: 2016 State Of The Nation Report - November 2016
	<p>Budget: N/A</p>
	<p>Risk Assessment:</p> <p>Having considered the risks associated with this decision using the County Council’s approved risk management methodology, the level of risk has been identified as: Current Risk: MEDIUM Residual Risk: MEDIUM</p>
	<p>Other Implications: N/A</p>
Recommendation	<ol style="list-style-type: none"> 1. To reflect upon and agreed the priority issues and messages from the Inquiry Day. 2. To identify a set of recommendations and actions, for consideration by the Cabinet, that assist in re-orientating the health and social care system towards prevention, re-ablement and independence
Reason for Recommendation	<p>To promote independence and build on good practice to meet the predictable and growing challenges around the costs and quality of care in Dorset in years to come</p>
Appendix 1 Appendix 2	<ul style="list-style-type: none"> • Programme of Events • List of Contributors/ Attendees
Background Papers	<p>www.lgiu.org.uk/care-now-and-for-the-future-an-inquiry-into-adult-social-care/</p>

	Local Government Association Adult Social Care Funding: 2016 State Of The Nation Report November 2016
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1. Approach

The committee adopted the Inquiry day model, with question and answer sessions divided into four areas with a final session on future plans and priorities:

- Practice
- Direct experience of services
- Regulation, quality and best practice
- How we work with others
- Future plans and priorities

A list of those people and organisations who attended can be found in Appendix 2.

2. Evidence Session 1

The first evidence session included the Independent chair of the Dorset Safeguarding Adults Board and a range of practitioners from within Dorset Adult Social Care teams and the Quality Improvement Team. Questions were asked by members about: sourcing good quality care, costs of care, the challenges involved in sourcing care in rural communities, recruitment and retention of staff for providers, demands on front line social care staff, complexity of long term conditions, standards and personalisation of care provision.

2.1 Key Areas in Evidence Session 1:

- Difficult to meet the Increasing complexity of need (such as dementia), in a rapidly growing, aging population.
- Self-funders and some of the challenges in buying care and lack of clear advice
- Viability of the packages of care sourced which were not always tailored as well as they could be to individual needs
- A gap between what is needed to keep people at home and what is available; for example night care can be difficult to source
- A failure to Integrate funding for care and support at home packages may leave gaps in health and social care
- Low standards of care or care that is considered 'good enough'
- Limited pre-bookable respite for carers and respite generally or resource to prevent carer break down
- Increased costs associated with more complex needs has been met with a reduction in resources, heavily impacted on by cuts in government funding
- Having sufficient numbers of skilled and qualified adult care staff on the front line to manage complex case loads

2.2 Future Areas of Focus

- Continue the programme of work that has been put in place by Dorset County Council Adult Social Care to deliver better results through preventative work and the management of demand.
- Commissioners and Quality improvement teams act as market shapers for care providers addressing the gaps that currently exist within packages and provision
- Receive updates on staffing resource within Adult social care teams to ensure sufficient front line delivery is in place
- Continue to build a model of care that promotes independence and resilience across communities

3. Evidence Session 2

This session included providers from across the Adult Social Care setting, Nursing and residential beds, support at home, care for individuals with complex needs and learning disability. Universally they described large gaps in the labour market and the inability to recruit experienced staff, particularly when competing with large other organisations. Members asked if providers were able to deliver high quality care consistently and what were the barriers to this, how they recruited staff safely and whether Dorset was a good place to 'start a care home'? Providers gave an insight into how difficult it is to deliver good quality care in the publicly-funded market, as a result many are leaving the business. One of the biggest challenges for providers is how they can compete fairly in a limited market

3.1 Key Areas in Evidence Session 2:

- Recruitment and retention of a well-trained carer staff group within individual care settings particularly across rural Dorset,
- Insufficient registered nurses available in the sector
- The need for a properly co-ordinated approach to recruiting and retaining staff in the care market
- Increased costs associated with more complex needs has been met with a reduction in resources and a decline in local government funding.
- Poorly trained carers and no access to accredited training
- Sleep in costs for LD providers of particular concern
- National Living wage requirements having an impact on the cost of care
- Self-funders who cannot sustain payments in the long term and become reliant on social care
- Lack of investment in Care and support at home
- A more supportive culture is needed to develop the social care sector to enable carers and organisations to develop the right personal and professional skills

3.2 Future Areas of Focus

- Recruitment fairs and joint work with national and local organisations to stimulate interest in working in the care market
- Alongside partners promote learning and development opportunities where the care profession will be highly valued
- Continue to develop commissioning models that match costs with demand
- Correct and fair funding for packages of care

- Integrated budgets between health and social care to enable a seamless approach to delivering care needs
- Engage with self-funders and communities generally to identify and manage how social care can be funded in the future

4. Evidence Session 3

This session heard from those who receive publicly and self-funded services as well as carers and Health watch. Overwhelmingly it was felt that there was a lack of information and advice generally around services and the support available. Members asked about, and carers described not being properly communicated with by professionals and the complexities of navigating the Continuing Healthcare system. They described to members the difficulties in accessing services from a rural location, the cost of taxi's to and from appointments and the rapid change in social care staff who might be able to advise and support them. The absence of travel time for workers who provided care and support at home was seen as adding additional pressures and although support at home is described as a key priority for local authorities and the health care system the lack of funding was failing to achieve the desired outcomes

4.1 Key Areas in Evidence Session 3:

- A better system is needed to identify and support carers better
- Personal budgets have to be met to meet people's needs and remain at sustainable levels
- Carer's need to be consulted with and included when attempting to integrate and co-ordinate services
- There needs to be a better understanding of what care and caring means
- There needs to be a stronger rights base for carers running alongside paid work and a wider range of responses from employers
- Need to make the most of technology but coupled with face to face contact when necessary
- Follow the spirit of the Care Act in introducing choice and control
- Better public awareness of the importance of social care and why it matters

4.2 Future Areas of Focus:

- Local initiatives that support individuals in their communities (Think Local Act Personal)
- Generate community hubs via Care homes and G.P services
- Awareness raising around social care to generate better support and stimulate services
- Better access to care to promote independence and creative use of care and support services at home
- Support the caring workforce to feel better valued
- More co-production and co-designing of services where service users are able to run aspects of their own care

5. Evidence Session 4:

During the final session of the day members heard from Dorset County Council Commissioners and those from the Clinical Commissioning Group; managers from the Quality Improvement Teams within those organisations and the Care Quality Commission. Questions were asked about the criteria for assessing packages of care and the difficulty in accessing emergency packages of care when urgent placements were needed. Frustration

was expressed by members at the slow pace of Integration between health and social care and the lack of shared process and interface on some of the joint projects. Members asked local authority commissioners about the proposed Dynamic Purchasing Framework and the currently low uptake by providers. It was felt that the CQC should assist providers by outlining what 'good' looks like when assessing a service and for all commissioners and regulators it was important that all providers were treated equally and that any system in place for monitoring and commissioning was transparent

5.1 Key Areas in Evidence Session 4:

- Better Care fund was not evidencing clear outcomes of integration in delivery
- There needs to be a less onerous assessment for packages of care generally
- Partnership working across all service areas should be a priority in order to plan for the future and raise quality
- There needs to be a understanding across social care and health teams about what constitutes good quality care
- Integration needs to be prioritised
- Indicative budgets for packages need to be much more accurate and shared with service users
- Recruitment and pay rates are a big issue for the workforce and need to focus on increased status for roles in social care
- Flexibility across providers e.g. sharing packages in hard to recruit areas
- Care homes as hubs for services a more flexible approach to care
- Alignment of budgets in health and social care
- Education and respect for staff in social care
- Better emergency funding pathways

5.2 Areas of Future Focus

- The local authority and the NHS should consider integrate services and budgets to change the focus on adult social care spending towards prevention
- The local authority and its health partners should evidence how they are emulating good practice to help people to stay independent for longer
- Commissioners should evidence how they are stimulating market provision
- Timely and appropriate advice should be given on the funding of care options and managing finances so enable individuals to meet the costs of care long term

6. Conclusion

The challenges in creating a high quality, sustainable Adult Social Care system with a skilled and knowledgeable workforce cannot be under-estimated. This is one of the most difficult times in Adult social care history and we heard from everyone at the Inquiry day that the efforts of well-trained, well supported staff are key to its longevity. Another key element is making sure that commissioners have the skills, knowledge and data they need to make the best decisions for communities, and that employers are supported to invest in a workforce so that those who are in need of social care can access their services.

Adult social care is one of our most vital public services. It supports adults of all ages across a wide spectrum of need to live as independently as possible, its paid work force is larger than the NHS and in Dorset the County Council's spending accounts for the largest part of the councils total budget. As people grow older and live longer, budgets are shrinking making it harder for councils to manage the tension between prioritising statutory duties and investing in preventative services and communities. No amount of reforms will enable

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councils alone to manage the costs, the key is to work alongside people and communities to build capacity and resilience and to provide best advice about use of assets so that this can be taken up and extended.

Members are requested to consider and reflect upon the priority issues and messages that were identified through the Inquiry Day process and identify a set of recommendations and actions for the Cabinet to consider.

Helen Coombes
Interim Director for Adult and Community Services
March 2017