

People and Health Overview Committee

4 May 2021

Developing the Prevention Strategy supporting the Older People Carers Strategy

For Review and Consultation

Portfolio Holder: Cllr L Miller, Adult Social Care and Health

Local Councillor(s):

Executive Director: V Broadhurst, Interim Executive Director of People - Adults

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Report Status: Public

Recommendation:

That Members support the development of a preventative strategy supporting the development of the older people's carers strategy.

Reason for Recommendation:

Whilst preventative work is already underway, the development of a Prevention Strategy will allow greater focus on the resource and capacity required to pull current strands together to:

- introduce interventions that have a proven track record elsewhere
- enable a cost benefit analysis of interventions in Dorset
- provide an evidence base for future opportunities
- demonstrate improvement in wellbeing at individual and community level
- Supports the development of the older people's carers strategy which is critical for the reduction of high cost social care services

1. Executive Summary

Prevention and preventative services can cover a range of approaches. Dorset is committed to create the right range of preventative services for the people of Dorset.

This presentation explores:

- How we can prevent or delay the need for Adult Social Care services by a range of earlier support & information tools,
- How we could reduce and delay further deterioration of existing conditions
- And starts an early conversation regarding the potential for a developed prevention and carers strategy.

2. Financial Implications

As a developmental approach, we are yet to understand the cost implications or savings from the introduction wider preventative services

3. Well-being and Health Implications

Health and Wellbeing is at the heart of preventative and carers approaches, ensuring people and communities are supported to maintain good health for as long as possible, avoiding the need to enter more formal care and support.

4. Climate implications

The development of community assets is being developed to allow more localised support, avoiding prolific yet necessary care use by care agencies. Preventative and carers approaches within an individual's home can identify issues with damp or unsuitable heating, which whilst supporting the person, also leads to better fuel efficiency.

5. Other Implications

Development work with community organisations ensures that a whole community and whole family approach is taken – rather than just 'siloed' groups of people with needs.

Investing in our local community and voluntary sector supports greater social value, enabling a healthy voluntary sector, and ensuring, wherever possible that the social care £ is invested locally.

Current development of micro providers (very small service providers) supports local enterprise, and impacts positively on social care workforce, allowing a different entrant into the current challenging market.

6. Risk Assessment

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: High -without dedicated support to support prevention, the financial impacts on the care budget will be substantial and potentially unsustainable

Residual Risk: Medium- some interventions will produce cosy avoidance, and other preventative approaches do not yet have a fully tested cost benefit evidence base

7. Equalities Impact Assessment

An EQIA screening exercise will be completed dependent upon the recommendations being adopted. Should DDAG decide that a full assessment is required, we will develop a multi-disciplinary team (statutory and community stakeholders) to undertake the work.

This approach will allow us to identify issues early and incorporate them into the approach.

8. Appendices

N/A

9. Background Papers

None.

Footnote:

Issues relating to financial, legal, environmental, economic and equalities implications have been considered and any information relevant to the decision is included within the report.