

Midlothian Integration Joint Board



Thursday 5 October 2017, 2.00 pm

Update on the Implementation of Self Directed Support in Midlothian

Item number: 5.5

Executive summary

Midlothian has been making good progress in the implement of Self Directed Support that is resulting in a change in practice and culture related to the provision of social care support. Work is now focussing on ensuring that Self Directed Support is embedded within the normal working practices of Midlothian Council.

Board members are asked to:

- 1 Note the progress with regards to the implementation of SDS across both Adult and Children's Services.
- 2 Note the progress against Audit Scotland's report on SDS

Update on the Implementation of Self Directed Support in Midlothian

1 Purpose

- 1.1 To provide an update on the progress made with implementation of Self Directed Support (SDS) in Midlothian.

2 Recommendations

- 2.1 Note the progress with regards to the implementation of SDS across both Adult and Children's Services.
- 2.2 Note the progress against Audit Scotland's report on SDS

3 Background and main report

- 3.1 The Self Directed Support (Scotland) Act 2013 introduced more choice and flexibility in how individuals receive social care support reflecting a goal of delivering better outcomes for individuals and communities. The SDS act required local authorities to use an outcomes focused approach to assessment and to offer 4 options to individuals who are eligible to receive social care:

- Option 1 – A direct payment to allow an individual to arrange their own support. An individual can use their direct payment to employ personal assistants, or purchase equipment and services.
- Option 2 – The individual chooses the support organisation and the council arranges support
- Option 3 – The individual asks the local authority to arrange the support
- Option 4 – A mixture of the first three options

Whichever SDS option is selected individuals must be eligible to receive support and funds can only be used to meet the outcomes agreed in the care plan.

- 3.2 In addition to introducing choice about how support is provided the Act required the Local Authority must make sure it adheres to the following values; Respect, Fairness, Freedom, Safety and Independence. It must also ensure it has due regard to the statutory principles of Collaboration, Informed Choice, Participation & Dignity and practice should be informed by the principles of Innovation, Risk Enablement and Responsibility.
- 3.3 In order to support the implementation of Self Directed Support a project team was set up to co-ordinate the work necessary to ensure that Midlothian Council

meets its obligations under the Act. This work is being overseen by a Project Board, whose membership includes Heads of Service, service user / carer representatives and representatives from voluntary organisations. The work completed to date has focused on ensuring the necessary policies, procedures and working practices are in place to meet Midlothian Council's obligations.

3.4 It is recognised by Scottish Government that the implementation of SDS will take a number of years to fully embed the changes the Act introduces. Consequently despite the progress made to date the work to fully implement SDS is ongoing. Currently the local picture is positive with regards to progress. The following points relate to Midlothian Council across Adults and Social Care and Children and Families Divisions:

- Nationally based on 2015/16 figures Midlothian is ranked in the top 3 Local Authorities where service users have made a choice over how they receive their support (Scottish Government, Self Directed Support Scotland 2015/16 report published June 2016).
- The local 2016/17 figures show an increase in the number of individuals choosing direct payments for their support (135 in the final quarter compared to 122 in the first). By client group the largest uptake has been by people with a physical disability, followed by people with a learning disability. Older people with dementia and children not affected by a learning disability have the lowest uptake.
- There has been a significant uptake of SDS option 2 in Midlothian and in particular by older individuals choosing care at home providers. There was however a slight decrease in numbers over the year (109 in the first quarter to 106 in the final quarter). More recently and thus not reflected in the figures is the extensive choice of option 2 for alternative summer support for families with children affected by a disability.
- Option 3 has by in large remained the most used option with 2092 people having their support provided through option 3 in the final quarter. It should be noted that in some cases individuals having support provided by option 3 will be actively involved in choosing the support provider.
- Regardless of the option chosen there is evidence of increased creativity and flexibility in the provision of support and individuals outcomes being met by non – traditional support.

More detail on the key objectives and progress to date in implementing Self Directed Support can be found in appendix 1.

3.5 A recently published Audit Scotland Report published in August 2017 has highlighted both the successes and challenges around the implementation of SDS across Scotland. A full copy of their report can be found at <http://www.audit-scotland.gov.uk/report/self-directed-support-2017-progress-report> As part of that report they included a checklist for Councillors to ensure that elected members were aware of the challenges experienced within their own area. Appendix 2 contains the information required from a Midlothian perspective.

4 Policy Implications

- 4.1 The proposed policy identifies the need for and supports the application of preventative approaches in the provision of Social Care Support.

5 Equalities Implications

- 5.1 SDS ensures that people who require support from social work have more choice and control. There are no equalities issues as a result of this report.

6 Resource Implications

- 6.1 There are no resource implications as a result of this report. While SDS aims to increase the choice and control that individuals have over their support this needs to be done within existing budgets. In some cases this has led to a perception that local authorities are not offering support in line with SDS principles whereas in many cases support is not being offered as the individual was not eligible for social care funding.
- 6.2 Nationally there remains a view that SDS is something 'extra'. This impacts on the public's expectation of SDS and what support individuals feel they should be entitled to from Social Work. Within Midlothian SDS is being promoted as business as usual and is embedded in our assessment process and eligibility criteria.

7 Risk

- 7.1 There are some aspects of the implementation of SDS that continue to be challenging both in Midlothian and nationally. One of the challenges that has been recognised nationally is need to develop a shared understanding of SDS and how it fits within the wider Health and Social Care system. Within Midlothian this is being addressed through the involvement of health professionals in the SDS development work.
- 7.2 The definition and application of Option 2 has also posed challenges both locally and nationally. Ability to provide choice under this option has been problematic particularly for care at home in Adults and Social Care as a result of capacity issues and also location. A review of Care at Home services is currently underway. In addition to this different Local Authorities have interpreted this option differently and a Midlothian Specific definition has been established.
- 7.3 The new Carers Act (due to come into effect in April 2018) changes the criteria under which a carer can request an Adult Carer Support Plan. The need to be providing regular and substantial care has been removed. This may lead to an increased demand for Adult Carer Support Plans and ways to best manage this are being considered through the pilot project including how best to use the local Carers support centre.

8 Involving people

- 8.1 The premise of SDS legislation is to ensure that individuals have more choice and control with regards to how they are supported.
- 8.2 A project board which oversees the local development and practice has both user and carer representation.
- 8.3 Questions about SDS are included in our annual user/carers survey.

9 Background Papers

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