

# Audit Scotland Report on Self Directed Support Implementation Report by Head of Adult Community Care

## 1 Purpose of Report

The purpose of this report is to:

- inform members of the findings of the Audit Scotland report on the implementation of Self Direct Support (SDS)
- to present the findings of the Self Assessment Checklist contained in the Audit Scotland Report

## 2 Background

- 2.1 In January 2013, the Scottish Parliament passed the Social Care (Self-directed Support) (Scotland) Act 2013 (the Act). The Act places a duty on councils, from April 2014, to offer people newly assessed as needing social care a wider range of options for choosing and controlling their support.
- 2.2 The Act allows individuals who have been assessed for a social service to be given one of 4 options to access the service
  - 1. *Direct Payment* A payment paid directly to an individual to purchase a service or employ a personal assistant.
  - 2. *Individual Budget* Where support is chosen by the individual, but the local authority manages the budget.
  - 3. Direct Service traditional service provision provided by the council
  - 4. Combination of the above 3 options
- 2.3 The Act also places a number of new duties on councils including the 'Duty to have regard to the principles of collaboration, informed choice and involvement as part of the assessment and provision of support'.
- 2.4 Between December 2013 and February 2014 Audit Scotland conducted an audit to examine councils' progress in implementing SDS. This audit was purposefully carried out at an early stage of implementation in order to allow Audit Scotland to identify risks and examples of good practice to help councils with implementation.

This paper examines the findings of the report and the associated self assessment checklist. It notes key issues that will require to be addressed as part of the ongoing SDS implementation plans.

## 3 Report Implications

a) SDS Implementation – Progress to Date

Work has been ongoing to implement Self Directed Support in Midlothian. The main activities that have been completed to date include:

- Initial SDS working practices developed, rolled out and tested using a 'test of change' methodology
- Ongoing refinement of working practices based on lessons learned from 'test of change' and through sharing practice with other local authorities
- Training delivered to staff on legislative changes, outcomes focussed assessment and risk enablement
- Procedures for allocating individual budgets put in place
- Joint work completed with suppliers and service user groups to promote SDS and pilot more creative service provision
- Established Service User / Carer reference group to provide input to the project

#### b) Audit Scotland Report - Key Recommendations

The Audit Scotland Report made a number of key recommendations for councils:

- ensure that they have a clear plan and effective arrangements for managing the risks to successfully implementing SDS
- plan how they will allocate money to pay for support for everyone who is eligible as demand for services increases
- assess and report on the short and long-term risks and benefits of the way they have chosen to allocate money to support individuals
- work more closely with people who need support, their carers and families, providers and communities, to involve them in planning, agreeing and implementing SDS strategies
- work more closely with people who need support, their carers and families, third and private sector providers, local businesses and communities, to develop a strategy for what social care services and support will be available to people in the future

These recommendations have been incorporated into the implementation plan for SDS

#### c) Self Assessment Checklist

The Audit Scotland report contained a self assessment checklist to help councils review progress in implementing self-directed support. This check list has been completed in Midlothian Council. The majority of the issues identified in the report were being addressed however due to

the implementation being at an early stage some issues require to be reflected in the implementation plan. These issues are:

- We have a clear vision for the way we want to deliver social care in future – There are clear goals related to SDS implementation, but more could be done to communicate practical ways in which they will be achieved. Ongoing work is required to continue to communicate this vision. There is also a requirement to develop SDS policy and procedures documents.
- We know at what point each in-house service will no longer be viable – It is recognised that in the longer term SDS may result in rebalancing of care away from in house service provision. Work is ongoing to identify the costs associated with internal service provision and the issue of service viability will be examined as part of the Supplier & Service SDS Development Strategy that will be prepared.
- We have assessed the benefits and risks of our chosen approach to allocating individual budgets and reported them to councillors and senior managers – Work is ongoing to review and further test the budget calculator and a paper will be prepared for Council in due course.

#### c) SDS Implementation Plan

The SDS implementation plan has been updated to take into consideration the actions identified in the checklist. A copy of this plan is contained in appendix 2 of this report.

#### 3.1 Resource

Self Directed Support changes the way that social care service is planned and delivered using existing resources. While this may over time result in changes to how support is provided SDS should not in itself expected to result in an overall increase or decrease in the social care budget.

Transition funding has been provided by Scottish Government which is being used to fund the additional activities associated with implementation of SDS.

#### 3.2 Risk

Risks associated with the implementation of SDS are being managed by the SDS Project Lead and have been incorporated in the relevant risk registers.

#### 3.3 Single Midlothian Plan and Business Transformation

Themes addressed in this report:

	Community safety
$\boxtimes$	Adult health, care and housing
$\boxtimes$	Getting it right for every Midlothian child
	Improving opportunities in Midlothian
	Sustainable growth
	Business transformation and Best Value
	None of the above

#### 3.4 Impact on Performance and Outcomes

Implementing Self Directed Support will ensure social care service provision meets both legislative requirements and current best practice.

#### 3.5 Adopting a Preventative Approach

The outcomes focussed approach embedded in SDS implementation supports preventative approaches to service provision.

### 3.6 Involving Communities and Other Stakeholders

The SDS implementation is involving stakeholders and service user representatives through, Project Board membership, participation in working groups, service user input to training and the establishment of a Service User Reference Group.

## 3.7 Ensuring Equalities

This report makes no change to existing equality issues in Adult and Children's social care and nothing impacts on work already done to ensure equality.

#### 3.8 Supporting Sustainable Development

This report does not present any sustainability issues, although SDS in itself helps facilitate sustainability in service provision.

#### 3.9 IT Issues

There are no IT issues with regard to this report.

#### 4 Summary

In June 2014 Audit Scotland report on progress that councils had made in relation to the implementation of Self Direct Support.

A review of the report and completion of an internal self assessment checklist has identified that work is in progress in relation to the majority of the main issues identified in the report. The Midlothian SDS implementation plan has been updated to address a small number of other issues identified in the report that were not fully addressed in the implementation plan.`

#### 5 Recommendations

The Audit Committee is invited to note:

- **5.1** the key recommendations contained in the Audit Scotland Report
- **5.2** the work that has been completed to date to implement SDS in Midlothian
- **5.3** the implementation plan that is in place and that will address key point identified in Audit Scotland Report.

## Date 13<sup>th</sup> October 2013

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## **Background Papers:**

## **Appendix 1: SDS Audit Scotland Checklist**

This document outlines the internal assessment of our progress in implementing self directed support against the Audit Scotland self assessment checklist for council officers.

Issue	Current Position <sup>1</sup>	Comments			
Planning					
We now offer Self-directed support (SDS) to all eligible people when we assess or review their social care needs.	Yes – in place but needs improving	Need to change processes in community care and Children with Disabilities to ensure SDS record of decisions related to SDS is offered in all circumstances.			
<ul> <li>We have a clear vision for the way we want to deliver social care in future:</li> <li>This vision is widely shared and understood by councillors, senior managers and staff.</li> <li>Managers and front line staff are given opportunities to examine their procedures and contribute to changes.</li> </ul>	No – but action in hand	Clear goals, but more could be done to communicate practical ways in which this can be achieved.  Requirement to develop SDS policy and procedures documents.			
We have clear strategies and detailed, up-to-date plans to continue implementing and reviewing SDS.	Yes – in place but needs improving	Requirement to update project plan			
We have developed ways of assessing the impact of SDS by monitoring how successfully social care services improve people's lives.	Yes – in place but needs improving	There are feedback procedures in place for social care services. Some refinement may be required to ensure they pick up information on SDS changes			
Our plans address:  • how we assess people's needs and identify the impact they want services to have on their lives  • how we allocate individual	Yes – in place but needs improving	Outcomes focussed assessments and reviews are in place. There is a need to review the detail of the roll out of personal budgets			

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<sup>&</sup>lt;sup>1</sup> Current Position Options are: No – Action Needed; No – but action in hand; Yes – in place but needs improving; Yes – in place and working well; Not applicable

Issue	Current Position <sup>1</sup>	Comments
<ul> <li>budgets</li> <li>how we monitor and review the impact of individuals' support on their lives.</li> </ul>		
<ul> <li>Our plans address:         <ul> <li>how we work with providers in the third and private sectors, and local businesses and communities, to develop the services available to people</li> <li>how we work with the NHS so that people receive joined-up health and social care support</li> <li>how we involve service users, carers and families in planning, agreeing and implementing SDS.</li> </ul> </li> </ul>	Yes – in place but needs improving	Require to consider in more detail how we work with NHS
Our plans address:  • policies, procedures, training and guidance for front-line staff  • information, advice and advocacy for people to help them make choices under SDS	Yes – in place and working well	Training plans are being progressed and policies, procedures and guidance are being developed.
Leadership	l	
<ul> <li>We regularly (at least quarterly):</li> <li>report progress against our implementation plans to senior managers and councillors</li> <li>assess the risks and actions we are taking to lessen them</li> <li>monitor and report on the options chosen by people under SDS</li> <li>monitor use of in-house services to inform reviews of sustainability.</li> </ul>	Yes – in place but needs improving	Further meeting with elected members to be progressed Improved monitoring required
Our staff have the time, information, training and support they need to work with	Yes – in place but needs improving	General time constraints mean that SDS is not always prioritised.

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Issue	Current Position <sup>1</sup>	Comments
people to design their individual package of support.		
Our councillors and senior managers are actively involved in engaging with people who use social care services, their carers and providers.	Yes – in place but needs improving	Need to ensure existing feedback forums collect information on SDS.
Working in Partnership		
We fully involve users, carers, families, communities and service providers:  • in planning, agreeing and implementing our SDS strategy (ie, not just informing and consulting them)  • in discussions about SDS that encourage thinking creatively about what services would have the most positive impact.	Yes – in place and working well	
We work in partnership with service providers, giving them information, consulting them about our plans and fully involving them in our strategy for developing SDS services in our area.	Yes – in place but needs improving	
Managing Budgets		
We know at what point each inhouse service will no longer be viable and what action we will take if that happens.	<b>No</b> – Action Needed	Initial work to prepare costings for internal services needs to be reviewed.
We monitor our spending against our financial plans and we are ready to take action to avoid a potential overspend.	Yes – in place but needs improving	
We have assessed the benefits and risks of our chosen approach to allocating individual budgets and reported them to councillors and senior managers.	<b>No</b> – Action Needed	Required to conduct further testing then report on the results.

Issue	Current Position <sup>1</sup>	Comments
We are planning to develop a RAS. To inform this, we have looked at how similar approaches work for other councils and allowed sufficient time and cost to develop it fully.	Not Applicable	
We have decided to introduce a framework agreement with external providers. In the contracts, the standards we require providers to meet and the information we ask them for is not so demanding or restrictive that some new or innovative services would have difficulty meeting them.	Not Applicable	

## **Appendix 2: SDS Implementation Plan**



#### **Declaration Box**

Instructions: This box must be completed by the author of the report. The box will be copied and saved by the Council Secretariat who will delete it from the report prior to photocopying the agenda.

#### Title of Report:

#### Meeting Presented to:

#### Author of Report:

I confirm that I have undertaken the following actions before submitting this report to the Council Secretariat (Check boxes to confirm):-

- All resource implications have been addressed. Any financial and HR implications have been approved by the Head of Finance and Human Resources.
- All risk implications have been addressed.
- All other report implications have been addressed.
- My Director has endorsed the report for submission to the Council Secretariat.

For <u>Cabinet</u> reports, please advise the Council Secretariat if the report has an education interest. This will allow the report to be located on the Cabinet agenda among the items in which the Religious Representatives are entitled to participate.

Likewise, please advise the Council Secretariat if any report for <u>Midlothian Council</u> has an education interest. The Religious Representatives are currently entitled to attend meetings of the Council in a non-voting observer capacity, but with the right to speak (but not vote) on any education matter under consideration, subject always to observing the authority of the Chair.