

# UKHCA Conference 2014

## The Future of Health and Care – Aspiration to Reality

David Pearson

President of the Association of the Directors of Adult Social Services

Corporate Director, Adult Social Care, Health and Public Protection

Nottinghamshire County Council

# ADASS priorities for 2014-15

- Care Act
  - Integration
  - Financial sustainability
  - Commissioning for better outcomes
  - Safeguarding
  - Winterbourne View
  - Sector led improvement
- 
- Deprivation of Liberty Safeguards
  - Integrated personal commissioning
  - Workforce

# Where we are now?

## Challenges

- Concern about quality of care in some settings
- Concerns about commissioning by local authorities
- Fragmentation - service too much about treatment, time and task and not enough about outcomes
- Low paid and inadequately trained workforce
- Role of regulators in mandating quality

# Where are we now?

## Challenges

Current funding position for adult social care – 26% savings over 4 year period

- 12% cash reduction
- 14% demographic changes – increasing need
- adult social care has moved from 30% to 35% of local authority expenditure
- LGA/ADASS paper – further £4.3bn gap by 2020

Directors worried about:

- people who need it not being able to access social care services
- quality of life for service users may deteriorate
- quality of care may deteriorate
- providers under increasing financial difficulty
- increasing legal challenge
- inability to help deal with pressures in NHS

# Where are we now?

## Opportunities

- Care Act
- Integration pioneers
- Better Care Fund
- Integrated Personal Commissioning – ambition to join up personal health and care budgets
- Rising public interest in care system - recent Care and Support Alliance/YouGov polling into public attitudes to social care:
  - 1 in 3 people in England rely on, or have a close family member that relies on, the care system
  - After the NHS, social care support for older and disabled people is the biggest priority for where the electorate would want to see the Government increase expenditure

## The Care Act – Changes in 2015/16

- Prevention and early intervention
- Advice and information
- Assessment and eligibility
- Carers services
- Deferred payments
- Personal budgets
- Social care in prisons
- Responsible for a sustainable, improving market in which terms and conditions of staff are consistent with high quality care

## The Care Act – Changes in 2016/17

- Change the financial threshold for means tested care from £23,250 to £118,000
- Cap on care costs of £72,000, although there will be some costs - accommodation will remain

# Care Act: Market shaping and commissioning



Guidance covers:

- ✓ principles which should underpin market-shaping and commissioning activity, including:
  - focusing on outcomes and wellbeing;
  - promoting quality services, including through workforce development and remuneration and ensuring appropriately resourced care and support;
  - supporting sustainability;
  - ensuring choice;
  - co-production with partners.
- ✓ steps which LAs should take to develop and implement local approaches to market-shaping and commissioning:
  - designing strategies that meet local needs;
  - engaging with providers and local communities;
  - understanding the market;
  - facilitating the development of the market;
  - integrating their approach with local partners;
  - securing supply in the market and assuring its quality through contracting.



# Care Act: managing provider failure

Guidance on managing provider failure and other service interruptions relates to local authorities' responsibilities for dealing with cases of business failure and other service interruptions, in parallel with the CQC's regime.

It covers:

- local authorities' roles and responsibilities in the event of business failure
- business failure involving a provider not in the CQC market oversight regime
- administration and other insolvency procedures
- service interruptions other than business failure
- the link with local authorities' duties in respect of market shaping
- contingency planning to prepare for managing business failure and other service interruptions

# Commissioning for better outcomes

Good commissioning is:

- ✓ Person-centred and outcomes-focused
- ✓ Inclusive
- ✓ Well led
- ✓ Promotes a diverse and sustainable market

[www.local.gov.uk/](http://www.local.gov.uk/) commissioning for better outcomes

## What can we do together?

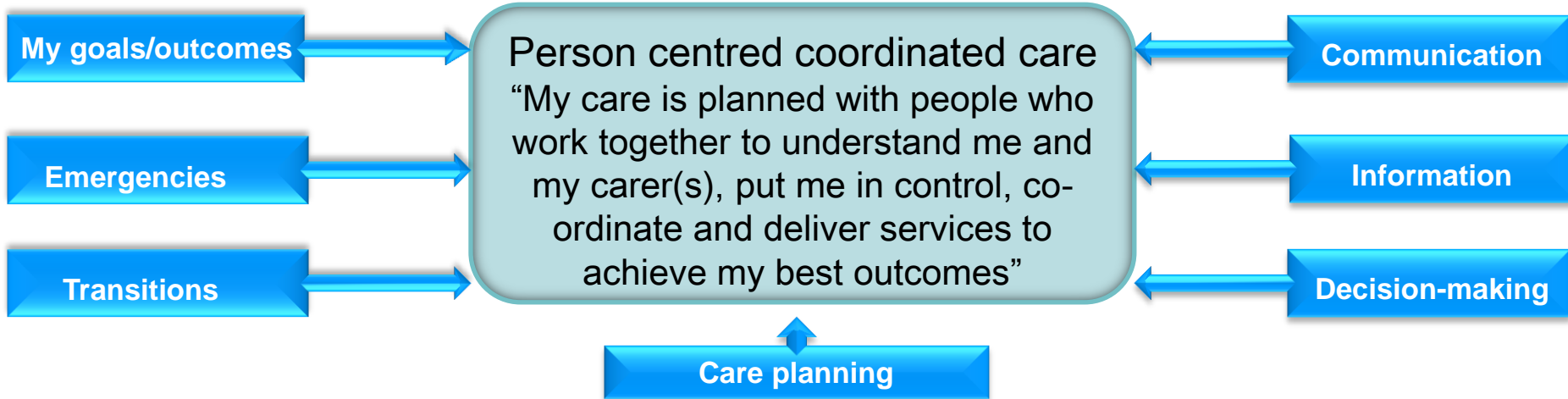
- Relationships and leadership are critical
- Consider things in an outcomes focused way – learn from each other
- Work together on ways to make the most of the public purse
- Understand what users are saying and what outcomes they need (personal budgets/direct payments)
- Embrace reablement and enablement
- Work with Health to establish trust and confidence
- Value and pay staff appropriately
- Be ambassadors for the care sector

# What are we trying to achieve?



**National Voices**

People shaping health and social care



# Where are we going?

Key principles underpinning care system of the future

- Health and Wellbeing
- Integration
- Personalisation



# What could a good health and social care system look like in 2020?

1. Best information and advice – focus on what we can do as well as our needs
2. Help to manage crises and for recuperation, reablement or rehabilitation. Health service promotes physical health of adults with disabilities – reducing inequality
3. Joint assessments of needs – simple electronic health and care records and at least 3 million people have personal health and care budgets
4. Public services, neighbourhoods and communities are more sensitive to needs of disabled people of all ages – doubling of dementia friends, more businesses employing disabled people and flexible schemes to assist carers

# What could a good health and social care system look like in 2020? (cont'd)

5. Care workforce with greater parity of esteem with health workforce – genuine career choice for many people
6. Social Workers and care professionals recognised for skills in supporting people in crisis, identifying and reducing risk in safeguarding and helping to plan for meeting people's best outcomes through personal budgets.
7. Local health and care funding and commissioning arrangements are overseen and co-ordinated by Health and Wellbeing Boards, supported by clear policy and performance priorities from government

**You cannot mandate greatness, you have to unleash it - Joel Klein**

directors of  
**adass**  
adult social services





**ADASS Business Unit**  
**Local Government House**  
**Smith Square**  
**London SW1P 3HZ**

**Tel: 020 7072 7433**  
**Fax: 020 7863 9133**