Prevention through Partnership Activity with Borough and District Councils

Purpose of the report: Scrutiny of Services/Policy Development and Review

This report provides the Adult Social Care Select Committee with an update on ‘Prevention through Partnership’ activity with Borough and District Councils. The report covers the following work areas:

Personalisation and Partnership Fund
Telecare and Telehealth
Wellbeing Centres
Meals and Wheels
Volunteering

Introduction:

1. Adult Social Care’s vision for the future is:

   “Working with all our partners to make a difference to the lives of people, through trusted, personalised and universal social care support, so people have choice and control, and can maximise their wellbeing and independence in their local community”.

2. This vision recognises the role of developing a robust partnership agenda with Boroughs and Districts that is of mutual benefit.

3. Partnership is key to delivering on Adult Social Care’s vision enabling people across the 11 Borough and District Council’s in Surrey to:
   - Live independently and safely
   - Have as much choice and control over their lives as possible
   - Live in their own home if they wish, or other accommodation of their choice
• Find out about information services and support available and how to access them
• Get the support they need in local and community settings
• Remain safe from abuse

4. In 2011 the Assistant Director for Borough and District Council Partnerships secondment post was introduced to develop the following:
   • Personalisation through Prevention – Launch of the Personalisation and Prevention Partnership Fund.
   • Mainstreaming Telecare and Telehealth.
   • 11 Wellbeing Centres across Surrey linking to existing Dementia and Older People’s services.
   • Meals on Wheels service provision across Surrey.
   • Volunteering Project to support partnership developments.
   • Co-location opportunities.
   • Joint database.

5. This report sets out progress to date in each of these areas. In addition further areas are now being developed including:
   • A coordinated joint training programme that will support Adult Social Care, Boroughs and Districts and the voluntary sector in the delivery of preventative services.

| Prevention Through Partnership – launch of the Personalisation and Prevention Partnership Fund |

6. A key area of activity has been the development of a delivery plan for the Personalisation and Preventative Partnership Fund. This fund, launched by the Leader of Surrey County Council, will provide 10 million over five years for Boroughs and Districts.

7. Annex 1 details the offer that will enable 11 local preventative partnership plans to be developed. This supports Dilnot and White Paper principles of broadening eligibility criteria for the Surrey wide preventative offer. Plans are emerging at a local level that support and maintain preventative services provided by Borough and District Councils, as well as acting as a lever for new innovative services working in partnership with community and voluntary organisations as well as small-scale business opportunities.

8. The following development areas have been highlighted by Borough and District Councils for further consideration:
   a) Consideration of a post to take forward preventative services and enhance partner engagement/access to services.
b) Council promotional activity to ensure all departments are aware of each other’s activity- particularly those services supporting vulnerable residents.

c) Consider single telephone access or reception access following co-location.

d) Links to the Wellbeing Centre core offer.

e) Review of Centres for the community/retired people to ensure they meet community needs both now and in the future.

f) Access to Community Transport provision outside core times to meet local needs.

g) Community based physical activity programmes linking to parks, swimming pools, walks programmes, indoor and outdoor gyms and centres.

h) Advice on housing options for older people to help them consider downsizing to accommodation that meet their needs.

i) Occupational Therapy assessments for moderate need residents linking to the disabled facility grant process.

j) A project to take forward the recommendations from the Community Connections report produced by the Guildford Diocese.

k) Local co-design events to more widely engage with the community in the development of local plans.

**Mainstreaming of Telecare and Telehealth**

9. An enhanced telecare offer became operational on 1st October 2012. Any resident across Surrey can have a community alarm installed for a locally determined cost. In addition a range of telecare equipment can also be provided for no additional charge. There is also an opportunity to trial the community alarm and telecare equipment for the first 12 weeks free of charge. This will simplify the system and enable increased usage of telecare.

10. The key deliverables for mainstreaming telecare are:

   - The development of a delivery model of telecare that will enable increased usage
   - Delivering telecare training to all front line staff
   - Nomination of telecare champions
   - Development of 24/7 consistent, co-ordinated and easy to access visiting response services.
   - Development of a telecare demonstrator site, re-launched website and Surrey-wide awareness raising programme

11. In order to maximise the demand for telecare, Surrey is now providing an enhanced telecare offer of free sensor equipment. This offer involves:
• Retaining existing arrangements for the free 12 week introduction to community alarm and telecare services following hospital discharge or distraction burglary;

• A Simplified Surrey wide care pathway and referral process to enhance take up;

• A new two-year Service Level Agreement with Boroughs and Districts which formally start on 1 January 2013;

• A single monthly reporting form completed by Boroughs and Districts that both provides detailed information on take-up rates, enabling better benefit estimation and a vehicle for reimbursing Boroughs and Districts for the cost of sensors and for the 12 week free periods.

12. To encourage users to request Telecare, Surrey is rolling out a major awareness raising campaign. These activities include attendance at all significant events involving potential users and advertising in local papers, on local radio, on buses, on appointment cards and on the plasma screens in hospitals and GP surgeries. To help with awareness raising, a short video that will be available on the telecare website and as a DVD.

13. To promote greater telecare referrals by professionals, Surrey has now appointed 12 telecare champions and begun a training campaign across the county. This training is aimed at professionals in all organisations (including those covered by the Surrey Care Association) to help them understand the benefits of telecare to give them greater confidence in making referrals. 17 visits to locality and acute hospital teams have been undertaken by Surrey Senior Managers and Borough and District Council telecare leads/telecare installers to promote the new offer. This ensures understanding and enables further referrals to be easily made.

14. To support the Boroughs and Districts, Procurement are working with all interested parties to see if there is a case for central procurement of telecare equipment both for the county (for sensors) and for the Boroughs and Districts (for dispersed alarms).

15. Four specialist installers have been recruited to increase capacity to deliver telecare. All have appropriately liveried vans and are working across the county to install telecare and to support the awareness campaigns.

16. Community alarms and telecare directly link to a 24-hour telecare response service who despatch an ambulance or contact relatives. A number of potential customers do not have an immediate contact who can respond to an alarm call. A 24-hour response service would deal with this situation to enhance the service. A detailed specification for this enhanced service has been developed and negotiations are currently underway with potential providers.
17. Throughout 2012, Surrey has been building a substantial telehealth programme. Beginning with awareness raising at local Transformation Boards and CCG events, moving through agreeing requirements with key potential users and influencers before beginning the competitive tender process in July. Responses from the two-stage procurement were received in early September and a successful bidder was identified in early November, with whom final negotiations are now underway.

18. There are a range of Telehealth options emerging at the current time for consideration and development in the future. These include consideration of Telecare apps to be downloadable onto patients’ own phones and tablets. The MHRA (Medicines and Healthcare products Regulatory Agency) are currently considering this for wider roll out in the future. These could significantly reduce costs and support service discharge and medicines management.

| Wellbeing Centres Surrey wide |

19. To support Surrey County Council’s (SCC) Dementia Strategy Surrey is working to establish 11 Wellbeing Centres – one in every borough and district. Wellbeing Centres will be specifically aimed at people in the early stages of dementia, providing information, support and a pathway into appropriate assessment and support services, with the aim of slowing the impact of the disease, enhancing quality of life and supporting carers. The centres will link up existing dementia services and give carers and sufferers a local hub for help and information.

20. Surrey is making available capital funding to support the development of the 11 Wellbeing Centres on the basis of £55k per centre for capital developments, which will include a telecare demonstration facility, funded by a further £7k per district or borough by money allocated by the Leader of Surrey County Council. SCC are asking Borough and District councils to support the revenue costs of wellbeing centres although the service level agreement is enabling a contribution towards monitoring links for the telecare demonstrator suites and IT costs.

21. The Wellbeing Centres will form key partnerships with the District or Borough Council. Alzheimer’s Society and SABP in each location, and will include other local partners as appropriate. In nearly all locations, ADL (electronic OT assessment service) Smartcare are partnering with the Wellbeing Centre.

22. The Wellbeing Centres are all co-located with existing community centres so that service users can also benefit from the wider range of services on offer in the community centre, such as hot lunches, podiatry, exercise classes and social activities.

23. Although wellbeing centres were initially focussed solely to support early diagnosis of dementia their offer has now been broadened to include telecare demonstrator sites, a local training facility, OT assessment clinic, opportunity to have independent living centre aids
on sale and for each Wellbeing Centre to have its own individual offer based on identified local needs.

24. Runnymede Wellbeing Centre was launched in May 2012. Plans have been agreed for a further four Wellbeing Centres, with hope for completion by April 2013 (Tandridge, Spelthorne, Elmbridge, Epsom and Ewell). In addition Surrey Heath is also at a confirmed planning stage but due to the requirement to resolve tenancy arrangements within existing garages this centre will now not be completed until 2014. Four Boroughs and Districts are in initial planning stages having identified or in the process of identifying suitable locations (Mole Valley, Woking, Waverley, Reigate and Banstead).

25. Annex 2 is a review of Wellbeing Centres Surrey-wide identifying the location, partner engagement and estimated completion dates at this stage.

Meals on Wheels

26. A major plank of preventative services for Providing People is the provision of a daily hot meals service. Surrey County Council is working in partnership with Borough and District Councils to develop Meals on Wheels Services with the expansion of a teatime service where someone on Meals on Wheels could also receive a sandwich, fruit and drink. The introduction of a breakfast service is currently being considered in addition to seeking to ensure there is a Surrey wide Meals on Wheels service.

Volunteering

27. As preventative services expand, volunteers will be key to supporting the development of telecare and telehealth, Wellbeing Centres, Meals on Wheels, voluntary care schemes, befriending and new emerging services to support informal as well as formal volunteering/community engagement opportunities.

28. A project to take forward volunteering to support local communities and Borough and District Council Preventative Services is now under way. This will either involve developing existing services or initiating new support. This concept was developed through discussions and co-design meetings to mainstream telecare and technology opportunities where there was some concern about technology taking away from the human face of support and that some customers would benefit from a volunteer to support them with technology solutions.

29. Existing volunteering activity is being mapped against identified need. The importance of ensuring sustainability of any activity in the longer term needs to be considered.

Co-location
30. Discussions are taking place regarding how opportunities can be developed in partnership. All personal care and support teams are now located within borough and district councils, which enable discussions through the development of local plans to take place as to how best joint working, can be developed.

**Joint Database**

31. A review exercise has been undertaken with Boroughs and Districts to look at the opportunity of developing a joint database. This includes basic personal information records that can be used for Meals on Wheels, Centre referrals, Community Transport and Community Alarm and Telecare Services. Early next year consideration will be given to working together on a joint database.

**Resources**

32. In order to take forward the mainstreaming of telecare and telehealth in Surrey and the volunteering project, whole systems funding has been identified initially over a two-year period.

33. The amount of £150,000 capital per year has been identified in the current MTFP to support the set-up costs for Wellbeing Centres.

34. The amount of £10m has been made available over a five-year period to support the development of 11 local partnership plans, with £150k committed to each Borough and District Council in this financial year and also £0.5m to enable the roll out of Meals on Wheels provision and other preventative services that would benefit from a county-wide approach.

**Conclusions:**

35. The work streams identified in this report will be undertaken in partnership to maximise residents’ wellbeing and independence in their local communities to ensure community based support avoiding inappropriate and more costly alternatives.

**Financial and value for money implications**

36. The cost of the telecare equipment for all those who would benefit will be met from the Whole Systems Funding received from the DoH via the PCT. This approach is seen as a vitally important component in order to deliver telecare to all residents across Surrey. Direct costs are hard to assess as it depends on the take up. Initially to mainstream telecare £950,000 for a two year period was identified as funding required within the whole systems budget.

37. In the long term support should reduce cost pressure on Adult Social Care by reducing the cost of care required. That will apply not only to people who do not have the wealth to fund their own care, but also to those who do, as it will help maintain the savings of ‘self-funders’ in line
with the aims of the Dilnot Report, as endorsed by the Government’s recent White Paper. That in turn will slow the speed at which self-funders whose savings run down become a cost to the Council as ‘capital depleters’.

38. In the shorter term this universal focus does have a negative financial impact. The Directorate’s current MTFP plans put a significant emphasis on the plans to reduce future demand on the Council’s services through the use of telecare and other preventative strategies such as reablement and telehealth: savings of £3.6m per year were envisaged. That was predicated on the investment being made solely in the 20% of people in social care need who cannot afford to pay for themselves. Extending the offer to the 80% of people who self-fund will reduce the County Council’s savings stream significantly – possibly by as much as 80% (because the savings will be to the individuals concerned). The next iteration of the MTFP (covering 2013-18) is in preparation now ahead of the Council’s budget-setting process for 2013-14, and will need to take account of this factor.

39. A robust single monthly reporting tool will enable activity to be captured of those supported in maintaining their independence. This will also evidence financial savings through delivering services differently.

40. The expanding telehealth agenda will be a vital component in reducing and avoiding hospital admission.

41. The development of local plans is already demonstrating that funding is in principal being matched by the Boroughs and Districts to enhance discretionary services together.

Equalities Implications

42. An EIA has been completed with respect to the development of the telecare project and an EIA will be completed the 11 locality plans are developed.

Risk Management Implications

43. Risks arise out of insufficient referrals being achieved through the scaling up of telecare. Following procurement negotiations it needs to be ensured that telehealth is rolled out across Surrey as quickly as possible working in partnership with the Primary Care Trust, Surrey CCG’s, acute hospitals and the Surrey and Border Partnership Trust.

44. Negotiations with Boroughs and Districts in terms of the 11 local plans and their active engagement are at the development stage. Commitment will be key to the impact at a local level.

45. There are still three locations to be identified for Wellbeing Centres in Surrey.

Implications for the Council’s Priorities or Community Strategy
46. Promoting independence in order to allow residents to live in their community for as long as possible is a key aspect of the vision for Adult Social Care in Surrey.

**Recommendations:**

47. That the high level activity to mainstream telecare and telehealth is supported; and

48. That the key work areas and deliverables across the partnership agenda are supported; and

49. That the principle to develop 11 Personalisation and Prevention Partnership Plans is endorsed recognising the important role they play in promoting independence and taking forward personalisation across Surrey.

**Next steps:**

The sign off of the Service Level Agreements with the 10 Borough and District Councils (with one Borough council providing telecare across two Boroughs – i.e., coverage of all 11) for the delivery of telecare by the 31 December 2012.

Delivering on the telecare communication engagement plan meeting all the agreed actions within recognised timescales.

Piloting a 24/7 telecare visiting response service to inform a future surrey-wide roll out.

Completion of CCG and other Trust, business telehealth business cases and implementation plans.

Completion of the telehealth procurement, and the start of rollout of the service.

The launch a further four wellbeing centres by end of April 2013 and to have confirmed all remaining plans for wellbeing centres within this time period.

To have signed off 11 local personalisation partnership preventative plans for 12/13 by the 31 December 2012.

To have developed Surrey wide Meals on Wheels services and further expanded the Teatime Service to Meals on Wheels customers by 31 March 2013.

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Sources/background papers: Held by officers supporting the Partnership through Prevention agenda