



PERSONALISATION OF A LOCAL SOCIAL CAR



This Hot Topic gives an overview of the personalisation agenda, in relation to adult social care, and provides links to resources which can be used by workforce colleagues who are involved in this agenda.

WHAT IS PERSONALISATION?

Personalisation is about putting individuals firmly in the driving seat of building a system of care and support that is designed with their full involvement and tailored to meet their own unique needs.

The personalisation agenda aims to move away from the historic approach of "one size fits all", where individuals have to access and fit into care and support services that already exist, which have been designed and commissioned on their behalf by Local Authorities.

Instead individuals will now receive their own budget and can decide how, who with, and where they wish to spend that budget in order to meet their needs and achieve their desired outcomes. Whilst there is initial focus on social care and support services, the principles of personalisation are being embedded into a range of other public service areas such as health and education.

(Personalisation Agenda, Date Unknown)

BACKGROUND

The Coalition government's 'Vision for Adult Social Care: Capable Communities and Active Citizens' (November 2010), builds upon work of the previous government, and outlines a continuation of the strategy to make services more personalised, more preventative and more focused on delivering the best outcomes for those who use them.

Following this the Department of Health Workforce Development Strategy – "Capable, Confident, Skilled" was published in May 2011. This strategy builds on the Vision by outlining the workforce priorities in the adult social care sector. The document can be found here

The government White Paper – 'Equity and excellence: Liberating the NHS' puts patients and the public at the heart of service delivery, through an information revolution and greater choice and control.

Key ambitions of the White Paper include:

- a) Shared decision-making as the norm: 'no decision about me without me'.
- b) Patients with access to the information they want, to make choices about their care. They will have increased control over their own care records.
- Patients having choice (provider; consultant-led team; GP practice; treatment; in maternity through new maternity networks).

- d) Patients rating hospitals and clinical departments according to the quality of care they receive. Hospitals being open about mistakes, always tell patients if something has gone wrong.
- e) Personalised care that reflects individuals' health and care needs, supports carers and encourages strong joint arrangements and local partnerships.
- f) Strong, collective voice of patients and the public through arrangements led by local authorities, and at national level, through a powerful Commission.







CONTEXT

Central to the Government's outlined strategies is the increasing use of personal budgets and direct payments, which, alongside rising number of people funding their own care, is serving as a catalyst for fundamental change in the way that social care services are delivered.

People are increasingly seeking new types of provision that can respond to their individual requirements and the demands of their communities. They are looking for innovative, personalised solutions to their social care needs.

The social care sector involves a very large number and diverse range of providers across the statutory, private and independent sectors, and there are hugely varying levels of readiness to provide personalised services.

HOW IS ADULT SOCIAL CARE BEING PERSONALISED?

Local authorities have a pivotal role in stimulating, managing, and shaping the market to deliver personalised services and they have had to approach the challenge in the following ways, both of which have had significant implications for the social care workforce:

- Transformation of commissioning
 - putting in place new commissioning arrangements which involve a move away from traditional block contracting, and at the same time increase personal budgets, including direct payments.
- Market Shaping supporting the growth of a market in services that people are likely to choose for themselves and their relatives.

TRANSFORMATION OF COMMISSIONING

Integrated Local Area Workforce Strategy (InLAWS)

Integrated local area workforce strategies - InLAWS is a Skills for Care and ADASS (Association of Directors of Adult Social Services) project established in 2009 with support from the Department of Health (DH) and other delivery partners. It continues to be supported by the coalition government.

The InLAWS project aims to develop effective ways to support Directors (DASS) and their teams with their workforce commissioning role across the local area, and to understand changing priorities in adult social care including the government's agenda on the 'Big Society' and neighbourhood working. It provides a common methodology and practical tools designed to help DASS and their teams develop a skilled, capable and competent workforce.

Pilot Study

December 2010 / June 2011 – Skills for Care and the North West Joint Improvement Partnership supported a pilot study in Salford in order to apply the Inlaws methodology to joint and integrated working with Health.

This project was to ensure the sustainability of progress towards a dementia friendly community, and maximise resources by:

- Updating the dementia workforce profile across all health and social care sectors in the project area, including the input of generic services such as primary care.
- Mapping existing staff development opportunities across both sectors
- Identifying gaps in development provision and opportunities for joint and integrated workforce development.
- Establishing an integrated data base at a local resource centre which can be used on an ongoing basis to inform joint commissioning

The project was completed in April 2011. Further information can be obtained by contacting: Hilary.kenny@skillsforcare.org.uk

For more information and practical InLAWS tools follow this **link**

MARKET SHAPING

Provider Development Workshops

These workshops are set up for social care organisations in the private, voluntary and independent (PVI) sector.

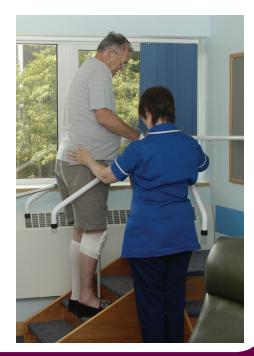
Working in conjunction with Skills for Care and the North West Joint Improvement Partnership, Local Authorities across the region have facilitated workshops for their local PVI providers.

The objective of the sessions has been to increase the capacity of managers to lead workforce redesign processes within their organisations with a view to them being better equipped to provide a responsive and personally tailored service to people using the service and their carers.

The sessions have been focussed around two sets of core material

- 1. "Progress for Providers". A simple self assessment tool developed by a partnership of Lancashire County Council, The Alternative futures group, United Response and Helen Sanderson Associates, to help providers plot their progress in responding to the personalisation agenda. There are eight sections in the self assessment tool covering:
- Leadership and strategy
- Creating a person centred culture
- Community focus
- Support planning and review
- Finance
- Human resources
- Marketing
- Reviewing and improving our service

Progress for Providers can be downloaded **here**







- 2. Skills for Care Workforce redesign principles: Seven principles to consider when introducing staff and organisational changes to meet the challenges of personalisation. The principles recognise the significant role played by staff in any transformation; that the quality of any service delivered by an organisation is directly linked to the skills, knowledge, expertise, values and attitudes of the people who make up the workforce. They are:
- Take a whole systems view of organisational changes
- Recognise how people, organisations and partnerships respond differently to change
- Nurture champions, innovators and leaders
- Engage people in the process acknowledge and value their experience
- Be aware of the way adults learn
- Change minds and change systems
- Develop workforce strategies that support transformation and recognise the shape of resources available in the local community

More information can be found on the Skills for Care website at this **link**

Personal Health Budgets

A personal health budget allows people to have more choice, flexibility and control over the health services and care they receive.

A pilot programme involving around half the primary care trusts in England is currently underway to test out personal health budgets in the NHS. The programme and its evaluation will explore who will benefit most from personal health budgets, and how the NHS can make them work.

This is a very different way of commissioning and managing health care services, and there are many details and complexities to work through. That is why the Department of Health are piloting personal health budgets, and evaluating the work that the pilot sites will do. The pilot programme will run for three years, until 2012

(Wording by Carey Bamber – Personalisation Programme Manager for the NW Joint Improvement Partnership)

An eWIN case study, based upon one of these Personal Health budget pilots at **Mersey Care** will be available on the site very soon.

EXAMPLES OF SERVICES TRANFORMATION

Success Stories

Skills for Care has put together a compilation of success stories, which demonstrate how some services have successfully transformed themselves, based upon the personalisation agenda. Click **here** to access this document.

FURTHER SUPPORT

Self Care Training Manual

Skills for Care and Skills for Health, in partnership with Lancashire County Council, have developed a Self Care Training Manual - a comprehensive and effective training programme that clearly lays out how organisations and individual care workers can provide support that places the user at the centre of the process. The training manual and supporting material is available to download <a href="https://doi.org/10.1001/journal.org/10.1001/journ

REFERENCES

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