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## Foreword

**As Director of Community Services, I am proud to be leading Hounslow to deliver Putting People First.**

The aim is to put residents at the centre of their care and support. First of all, we want people to be able to stay independent and living healthy lives – so we need to make sure that there is plenty available in Hounslow to improve health and prevent support needs developing. Where people do need help to get their needs met, we want them to be at the centre of saying what their needs are, deciding how best they can be met and in making sure they get the best possible deal for their money. We will continue to work with our partners to make sure that a broad and accessible range of support available to live healthy and happy lives. This is exciting times for adult services and a real opportunity to change the way we work with residents and what we are able to offer.



**Mimi Konigsberg**  
**Director**

## Introduction

The purpose of this paper is to present the strategic direction for Putting People First in Hounslow and agree the next steps to progress.

The prime objective of the Putting People First Programme is to give Residents of Hounslow and their carers more choice and control in the way in which their social care is delivered, ensuring that the service is both cost effective and person centred, with clear and appropriate outcomes for the Resident and their carers.

The Putting People First concordat (2007) outlined the expected outcomes from delivering the Transforming Social Care agenda, as follows:

- A joint strategic needs assessment looking at specific outcomes in preventative public health policies, hospital discharge arrangements, intermediate care, management of long term conditions
- Commissioning which ensures high standards of care and choice and control for Residents
- Support for community resources including the voluntary sector so that prevention, early intervention and enablement become the norm.
- A universal information, advice and advocacy service for people needing services and their carers irrespective of their eligibility for public funding.
- A common assessment process of individual social care needs with greater emphasis on self assessment.
- Person centred planning and self directed support to become mainstream and define individually tailored support packages. Telecare to be viewed as integral rather than marginal.
- Personal Budgets for everyone eligible for publicly funded adult social care.
- Direct Payments utilised by increasing numbers of people
- Family members and carers treated as experts and partners in the provision of care
- A transformed community equipment service with a retail market model
- More integrated working with children's services including transition planning
- Support for user led organisations to develop mechanisms to ensure service users, carers and families have a collective voice to influence policy and provision
- Systems to act on and minimise the risk of abuse or neglect of vulnerable adults
- Local workforce strategy that raises the skill and provides career opportunities

## National Context

The Government agenda for transforming the delivery of adult social care was set out in LAC (DH) 2008 Transforming Social Care. This followed the 2005 Green Paper, “Independence, Well being and choice”; and the 2006 White Paper, “Our Health, Our Care, Our Say”.

Putting People First is a shared vision and commitment to the transformation of Adult Social Care. The concordat published on the 10<sup>th</sup> December 2007 was signed by government ministers from many Departments, ADASS, the LGA, the NHS and the professional and regulatory adult social care institutions. It has committed the signatories to a radical transformation of adult care services over a period of three years, 2008 – 2011.

The Government has afforded all Social Care Departments ring fenced grant monies over the three years, by the end of which time, the expectation is that everyone eligible for social care provision will be given the opportunity to purchase their care via a Personal Budget with a transparent Resource Allocation System.

## Milestones for all Local Authorities

ADASS recently outlined the key milestones for all Local Authorities in order to benchmark their progress in achieving the transformation required to deliver the Putting People First agenda

Milestones	April 2010	October 2010	April 2011
<p><b>Effective partnerships with people using services, carers and other local citizens</b></p>	<p>That a communication has been made to the public including all current service users and to all local stakeholders about the transformation agenda and its benefits for them</p> <p>That the move to Personal Budgets is well understood and that local service users are contributing to the development of local practice <b>[By Dec 2009]</b></p> <p>That users and carers are involved with and regularly consulted about the councils plans for transformation of adult social care</p>	<p>That local service users understand the changes to Personal Budgets and that many are contributing to the development of local practice.</p>	<p>That every Council area has at least one user-led organisation who are directly contributing to the transformation to Personal Budgets <b>[by Dec 2010]</b></p>
<p><b>Self directed support and Personal Budgets</b></p>	<p>That every council has introduced Personal Budgets, which are being used by existing or new service users/carers</p>	<p>That all <b>new</b> service users/carers (with assessed need for ongoing support) are offered a Personal Budget.</p> <p>That all service users whose care plans are subject to review are offered a Personal Budget</p>	<p>That at least 30% of eligible service users/carers have a Personal Budget.</p>

<p><b>Prevention and cost effective services</b></p>	<p>That every council has a clear strategy, jointly with health, for how it will shift some investment from reactive provision towards preventative and enabling/rehabilitative interventions for 2010/11. Agreements should be in place with health to share the risks and benefits to the “whole system”</p>	<p>That processes are in place to monitor across the whole system the impact of this shift in investment towards preventative and enabling services. This will enable efficiency gains to be captured and factored into joint investment planning, especially with health.</p>	<p>That there is evidence that cashable savings have been released as a result of the preventative strategies and that overall social care has delivered a minimum of 3% cashable savings.</p> <p>There should also be evidence that joint planning has been able to apportion costs and benefits across the “whole system”</p>
<p><b>Information and advice</b></p>	<p>That every council has a strategy in place to create universal information and advice services</p>	<p>That the council has put in place arrangements for universal access to information and advice</p>	<p>That the public are informed about where they can go to get the best information and advice about their care and support needs.</p>
<p><b>Local commissioning</b></p>	<p>That Councils and PCTs have commissioning strategies that address the future needs of their local population and have been subject to development with all stakeholders especially service users and carers; providers and third sector organisations in their area.</p> <p>That commissioning strategies take account of the high priorities identified through their JSNAs.</p>	<p>That providers and third sector organisations are clear on how they can respond to the needs of people using personal budgets.</p> <p>An increase in the range of service choice is evident</p> <p>That councils have clear plans regarding the required balance of investment to deliver the transformation agenda.</p>	<p>That providers and third sector organisations are clear on how they can respond to the needs of people using personal budgets.</p> <p>An increase in the range of service choice is evident</p> <p>That councils have clear plans regarding the required balance of investment to deliver the transformation agenda.</p>

Hounslow and will use these milestones to help self-assess their progress, inform their business planning and inform investment decisions. These milestones will enable all stakeholders to judge progress on the delivery of PPF Transformation

The Department of Health (through the National TASC Programme and the Deputy Regional Directors) intend to use these milestones to support progress on delivery and to assist ensuring that national/regional resources are invested to offer the best support to local areas.

The Care Quality Commission will consider (subject to their usual consultation process) use of and further development of these milestones for the 2010/2011 and 2011/12 years to assist them in making consistent judgements in order to contribute to the Comprehensive Area Assessment. Both CQC and the DH will consult with stakeholders on how future progress will be measured and what may be required from councils.

## Local Context

Hounslow has agreed a vision and strategic objectives which aim to support the transformation and modernisation of Adult Social Care provision in order to deliver increased choice and control for the residents of Hounslow and their carers.

### Hounslow's vision.

- **A whole system response including universal and mainstream services**
- **Early intervention and prevention so that people are supported early on and in a way that is right for them**
- **Tailored support to meet individual needs (identified through “Resident - led assessment” in Hounslow)**
- **Recognising and supporting carers in their role while enabling them to have a life beyond their caring responsibilities**
- **Finding new and collaborative ways of working and developing local partnerships to create a range of services for people with low to moderate need or self-funders**
- **To do this the London Borough of Hounslow has to make a shift in the way it, assesses need, commissions for services and provides its adult social care functions.**

We recognise that Residents who use adult social care services are adults and that they, provided they have the capacity to do so, will take risks in their lives. We aim to have a positive attitude to risk, while supporting people to minimise any potential risk while living life as they wish to. We will continue to work to keep people safe from any form of abuse.

We will change commissioning arrangements to encourage the overall market to deliver outcomes, with payments for delivery linked to outcomes not outputs.

We know that to truly transform social care requires much more than just developing a Resource Allocation System, based on a level of need (points) equalling a level of resource (Personal Budget). We are developing an approach which supports residents who want to use Personal Budgets and Direct Payments but also understand that improving choice and control of Residents means much more than managing financial arrangements.

We want to encourage and stimulate a strong, vibrant and mixed range of providers that deliver choice, control and quality. We want those providers to embrace an outcomes based approach and think about the differences the services will make.

## Hounslow's Key Objectives

The Putting People First Programme gives all Service Commissioners and providers a huge and challenging agenda for change. Although it focuses on people requiring support to live independently (and therefore those who often seek or use Adult Social Care Services), the agenda requires the development of a shared vision and commitment across the council, NHS Hounslow, the voluntary sector, local communities and the Mental Health Trust, working with external partners to deliver successful outcomes for residents.

The future needs to focus on a borough wide engagement in parallel with introducing fundamental changes in Adult Social care. This will include enabling access to mainstream services through changing working practices and access arrangements and developing preventative services to which there is universal access.

To ensure the Putting People First programme develops and delivers its objectives in partnership with statutory services, partner organisations and local providers its strategic objectives are overseen and supported by a Corporate Transformation Board. The Board has agreed a number of strategic objectives for the implementation of Putting People First. Work streams have been agreed to support, underpin and drive the delivery of these key objectives.

## **Objectives are as follows:-**

- 1. to ensure effective partnerships with people using services, carers and other local residents.**
- 2. to deliver self directed support and personal budgets.**
- 3. to ensure vulnerable adults are safeguarded and enabled to positively manage risks**
- 4. to develop and enhance preventative and cost effective services.**
- 5. to provide greater access to good quality advice and information**
- 6. to ensure local commissioning supports and underpins the future needs of the population**
- 7. To provide a suitable skilled and placed workforce**

Each Key objective is delivered through a number of workstreams. Members of each focus on different areas of delivery, pulling together key personnel with the expertise to contribute to the overall success of the strategy.

Workstreams are as follows:

- Communication
- Assessment and Resident Pathway
- Finance
- Carers
- Prevention and reablement.
- ICT
- Safeguarding and Risk
- Commissioning
- Performance

## **Objective 1**

### **To ensure effective partnerships with people using services, carers and other local citizens.**

It is recognised that the Transformation of Adult Social Care cannot take place without the full engagement of and communication with all Residents, their carers, staff and volunteers, including people working in the provider services and third sector organisations, Primary Care Trusts and the wider health community. It requires the leadership of local politicians, engagement of all parts of local councils and of other key strategic partners, and the support of regional and national programmes.

Information, advice and guidance needs to be delivered to all Stake holders in a clear, consistent and accessible format that is readily available across a variety of different communication channels.

#### What we will do:

- Develop a communications strategy to support the delivery and engagement of all stakeholders.
- Deliver in a variety of ways to communicate the change, in order to meet the needs of a diverse community by providing access to interpreting and translation, using large text, Braille and taped versions.
- Communicate with particular user groups e.g through articles in Hounslow Matters, targeted events, displays and information leaflets and posters in places relevant to the particular user group.
- Seek active communication through the Older People's Volunteer Group, Partnership Boards and Integrated Management Boards.

- Engage with the Voluntary Sector, ensuring that we learn together and have a joint understanding of specific needs. We will ensure that we work with the voluntary sector to deliver the same messages to our residents.
- Consult with Carers groups and forums across the borough and provide information on a regular basis in Hounslow Matters and in places where carers will have easy access such as GP surgeries, libraries, leisure centres and other public places such as community halls and shopping centres.
- Ensure that carers are fully aware of the impact of personalisation on the Residents of Hounslow
- Promote personalisation across the full range of carers groups
- Provide web-based information will be provided through the development of a 'My Hounslow' Portal.
- Develop a service directory to support Residents to choose and commission their own services
- Promote community Safety messages and facilities that support people to live independently.

## Objective 2

### To deliver Self Directed Support and Personal Budgets.

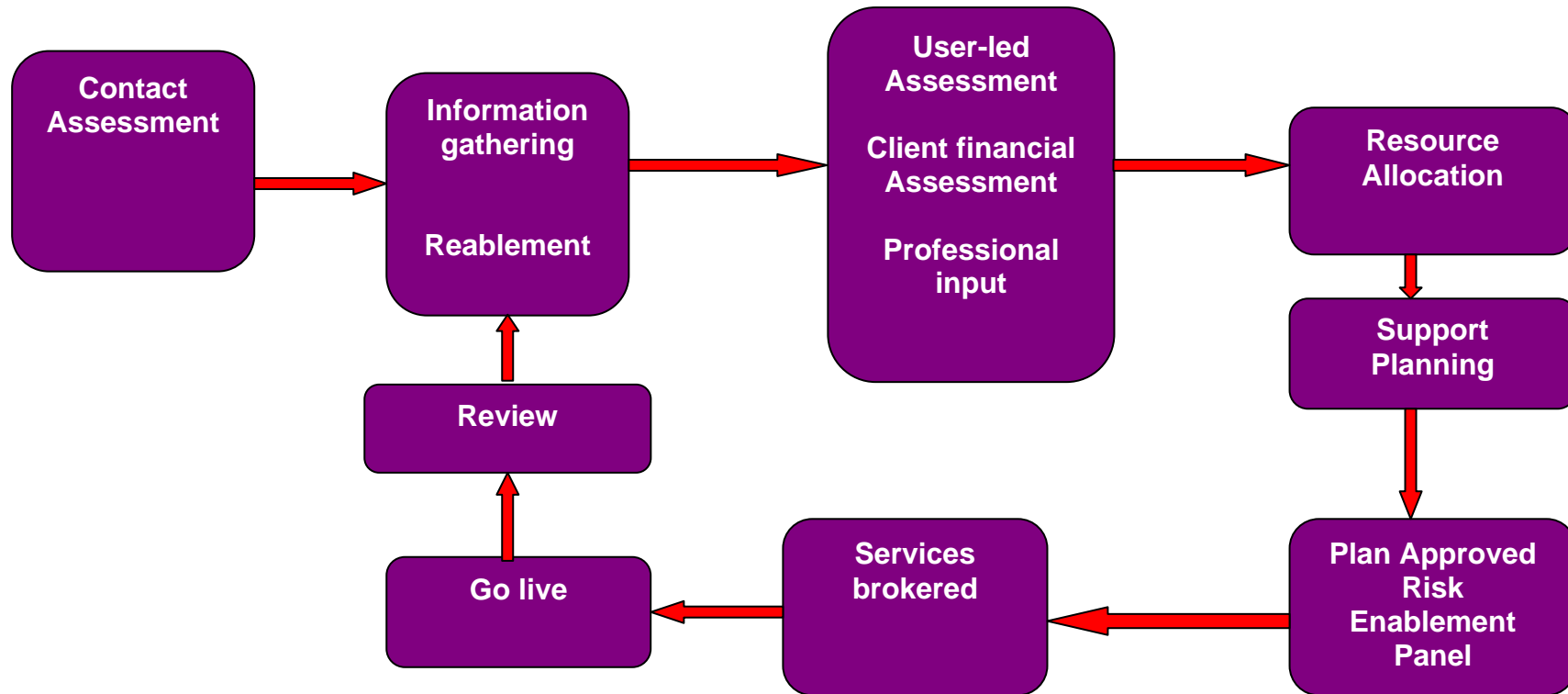
A new system of assessing for and planning for Social care provision requires a shift away from traditionally assessed for and provided services, towards a culture that is client-centred, transparently resourced and encourages flexibility, choice and control.

The key concepts driving the new self-directed support processes are as follows:

- Easy access to advice, information, support and services for all residents requiring social care services, regardless of Resident financial contribution.
- Residents who choose to seek advice or funding will complete (alone or with support) a Resident - Led Assessment
- Most Residents who are likely to be assessed as having critical and substantial needs under FACS will be routed directly to short-term reablement services. Support will be provided immediately, usually with 24 hours, to address presenting needs and then to reduce holistic needs through building independence skills, overcoming barriers and raising aspirations. When short term gains in independence are achieved those that require on-going support will receive a Personal Budget.
- Those residents seeking on-going support via a personal budget, will have their identified needs applied to a Resource Allocation System. This will calculate an indicative budget amount to meet the individual's support needs.
- Support for completing support plans will be offered by Care Management staff, however Residents have the option to call upon others, including family and friends and independent brokers, to help with support planning.

- Lower need groups will be able to secure more automated, less intensive advice (eg directly over the internet, face to face, or by telephone) from a wide range of people and organisations regarding products and preventative services they can self fund or access without charge.
- To encourage self-directed and self-funded prevention, people will be able to “shop” for products and services on Hounslow’s website, such as AskSARA for daily living equipment.
- Residents, whether self funded or with a Personal Budget, will be able to procure/commission services directly or with support from the Self-Directed Support Brokerage Service. They will choose the services that they believe will best meet their needs/outcomes and represent value for money.
- People who receive funding from the Council will need to seek approval for their planned use of funds prior to cash being released or a virtual budget being allocated.
- Use of funds will be audited and outcomes and value for money regularly reviewed.

## Residents Pathway to Self Directed support



Residents already receiving statutory social care will be re-assessed at review using the RLA tool and resource allocation process from April 2010. Senior Management steer will be required as to the rigor of applying the RAS to known residents where the outcome of the RAS significantly reduces the budget allocation in comparison to the cost of currently provided services.

The Adult Access Team will continue to refer eligible Residents to the most appropriate team for allocation to a Care Manager. The Care Manager will be responsible for :

- Supporting the completion of the Resident-Led Assessment
- Responding to emergency situations
- Referral to preventative services
- Referral to specialist services
- Information gathering and further assessment
- Completion of the Overview Assessment
- Management of risk
- Safeguarding

Independent Brokerage will be made available.

Web based information will be made available to support Residents to access and purchase services.

All reviews will be conducted on the basis of whether the support plans continue to meet the desired outcomes identified by the Resident. Outcomes will be based on the seven CQC Outcomes as listed (where?). Reviews will be conducted by the relevant Care Management Team. All Residents will have a minimum of one annual review and more often where identified by the Care Manager, Safeguarding Officer, or the Risk Enablement Panel.

What we will do:

- Build and implement a Resident-Led Assessment tool
- Implement a robust Resource Allocation System
- Develop support planning processes and guidance for Residents and staff
- Develop brokerage services to support the procurement of services identified in the support planning process
- Re-design “beginning to end” pathway for Residents seeking assessment and support planning
- Pilot a cohort of 30 residents with a Personal Budget
- Review and transform financial processes to support the Self-directed support process.
- Scope and pilot personal budget payment and monitoring methods.
- Review and propose financial assessment processes
- Develop assessment processes, resource allocation and processes for Carers and Carers services
- Provide carers with the opportunity to comment on the effectiveness of Personal Budgets for the people being cared for
- Deliver Personal budget opportunities to all residents requiring Social Care support.
- Develop outcome focused reviews.

## **Objective 3**

### **To ensure vulnerable adults are safeguarded and enabled to positively manage risk**

The Putting People First Programme delivers significant changes in disability, social care and health policy which mean that disabled adults and older people are being actively encouraged to increase their independence, for example by managing their own support, travelling independently and being fully involved in mainstream society through education, work and leisure. For some services, approaches to risk have been concerned with avoiding potentially harmful situations to adults who use services, staff, family members and the community. To support people to have greater choice and control of their lives, to travel independently or take part in everyday activities, means accepting there are risks that cannot be avoided but can be minimised and prepared for. The issues of safeguarding and positive risk-taking within Hounslow's Putting People First agenda must be considered and planned for when delivering increased choice and control. Staff in Community Services are required to adopt a positive approach to risk taking when they work with disabled adults and older people.

#### What we will do

- Ensure that there are systems for safeguarding and management of risk for individuals requesting and/or receiving a Personal Budget
- Develop approval systems and appeal systems throughout the process of assessment, resource allocation and support planning, incorporating safeguarding
- Train staff to ensure an awareness of safeguarding and risk management issues through out the process of assessment, resource allocation and support planning.
- Develop and monitor systems to ensure triggers are in place to highlight safeguarding and risk issues
- Ensure that processes for re-evaluation of Personal Budgets, appeals and complaint procedures are in place
- Develop a Positive Risk Taking Framework to support Residents. Carers and staff to recognise and positively manage risks.
- Develop a Positive Risk Taking Panel to provide a forum where staff at different levels within Community Services can seek senior management approval, decision making and support when there are concerns about a person seeking or receiving a Personal Budget regarding acceptable levels of risk, mental capacity or safeguarding issues.

## **Objective 4**

### **Develop and enhance Prevention and cost effective services**

With eligibility for statutory Adult Social Care services many residents who have needs and come to social services or to their doctor for help are not offered what they want. Many more would not even consider coming forward as they believe that their needs may not be met. This means we have to work with providers on preventative and early intervention services, so that people can retain their independence for as long as possible.

The transformation and modernisation of Adult Social Care provision requires a greater focus and delivery of reablement services to improve opportunities for residents to maintain, regain or develop greater independence. Prevention services need to shift to ensure services are flexible and able to be tailored to an individual's support plan.

Many Residents will be routed directly to short-term reablement services if it appears they will gain benefits from the service, regardless of whether they meet Eligibility Criteria. Support will be provided immediately, usually with 24 hours, to address presenting needs and then to reduce holistic needs through building independence skills, overcoming barriers and raising aspirations. When short term gains in independence are achieved those that appear to still require on-going support will be supported to complete a Resident Led Assessment through which process eligibility criteria will be applied

What we will do:

- Ensure closer working with Public Health Services on developing prevention services and choosing the Health Agenda
- Enable faster access to Home Care reablement, increasingly as a universal right, with the aim of eliminating or reducing future need for costly social care in some instances
- Ensure Home Care Reablement is flexible and able to provide personalised support in order to achieve the outcomes determined by each resident
- Ensure application of Fair Access to Care Eligibility Criteria occurs at exit rather than entry to the service, allowing direct entry to reablement services via the Access Team
- Deliver fast and effective access to equipment and telecare solutions within the resident's home
- Provide options for private purchase as well as access to free equipment for those unable to afford to pay themselves
- Roll-out of Trusted Assessor Training to ensure a wide range of Social Care staff have knowledge, expertise and ability to assess for some equipment and minor adaptations
- Development a modern model of access to equipment providing maximum choice and control to residents
- Increase use of equipment and technology to support independence in the home

## Objective 5

### Provider greater access to good quality advice and Information

The Putting People First Programme aims to make universal services accessible to all residents including those who are vulnerable or those who care for vulnerable people. Key to achieving this objective will be to ensure that vulnerable people and their carers have access to timely and accurate information on local services and to using community resources.

To ensure that everyone has choice and control over the support they receive, they need to be able to make choices about the support they receive and how this is managed. An individual may decide to self manage their support, but they might choose to have somebody else help manage it for them – this may include their natural support network, an external Broker or Hounslow Council. What will be essential is the range and quality of information available, and how it is delivered.

#### What we will do:

- develop advice, information and access to services through the development of a 'My Hounslow Portal' (currently at 'Proof of Concept' stage) giving residents the opportunity to explore universal and specialist services in the community, opportunities to self assess and self refer to services and support new processes on-line.

London Borough of Hounslow **Putting People First**

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**Putting People First**

Getting support to help you live independently

If you need help with day to day living, this portal will provide you with all the tools and information that will enable you and inform you about:

- how to assess your own needs;
- money you may get to help pay for what you need;
- planning and managing your support; and
- where to get more information

The council wants everyone to have access to universal services such as transport, leisure and learning, housing, health and opportunities for employment


Everyone should be able to get the right information, advice and advocacy to make decisions about the support they need.

Putting People First means starting with you and understanding:

- What you can do;
- what you are good at;
- what sort of things you like doing most; how you like things to be done; and
- what you want to achieve in life.

You are at the centre of identifying your own needs and deciding how you are supported, who provides the support, and when.

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- Commission an advice and advocacy service for self funders
- Ensure access criteria for all services are clear and that the Council commissions an appropriate range of services on behalf of those whose choose to manage their Personal budget and those who do not wish to do so.
- Work with local (Council and LSP) services to ensure awareness of their central role in ensuring vulnerable people have access to local services such as libraries, transport and leisure facilities.
- Develop the adult Access Team to ensure advice and sign posting is integral to the whole process
- Develop in-house brokerage services
- Pilot external brokerage services

## Objective 6

### Ensure local commissioning supports and underpins the future needs of the population

Commissioning of services is key to supporting the local market to deliver both universal and specialist services.

What we will do:

- Commission outcome-focused Preventative Services. Commissioning will be responsible for scoping and understanding the market to inform future commissioning decisions, review current preventative and day services provided and commissioned by the Council, review of current resources, both council and NHS, and identify opportunities that can be taken as part of the commissioning and contracting process to ensure there is a focus on prevention. (can that last sentence be split?) A review of public health data and the Joint Strategic Needs Assessment will identify key areas to focus on and the most appropriate timing of focused and of generic preventative work.
- ensure that transition planning for individuals gives children and their families an awareness of the opportunities available to them through the increased choice and control agenda, including Personal budgets
- support the development of a range of meaningful day opportunities that will support independence and maintain health and well being.
- enable vulnerable people and their carers to have access to timely and accurate information on local services and to using community resources.
- ensure services for vulnerable people are planned and delivered by a number of partner organisations in a coordinated way.
- ensure that empowering local citizens is an integral part of all aspects of the Putting People First Programme by identifying and working with key players in

the local involvement structures (including the Local Involvement Network [LINks]) to support the contribution local people and communities have in decision making,

- assess the knowledge and understanding of the groups above and work with them to build capacity, ensure commissioners and practitioners know about the most effective ways to work with local people as part of the commissioning process.
- Work with the local voluntary sector to develop and refine its approach to support brokerage. There will be a one year pilot with selected organisations. Organisations may be specialist in working with particular client groups and are likely to have a current contractual relationship with the council. The pilot will focus on those residents who are eligible under Fair Access and Care Services for adult social care services and who will be allocated a Personal Budget but it is expected that brokers would be able to offer advice, support and appropriate signposting to those who are self-funders or who have low to moderate care needs.
- Promote intergenerational working to support service users and local residents, of all ages, to make a positive contribution towards community living, independence and quality of life.
- Further develop a personalised approach in in-house services, which is user-led and extend this to services commissioned from external providers.

## Objective 7

### To provide a suitably skilled and modelled workforce

The Putting People First agenda must ensure that the workforce is able to deliver the process of Personal Budgets, including Resident- Led Assessments, Resource Allocation and support planning. Re-modelling of the workforce will be needed to meet these requirements. Engagement of the workforce, independent sector, PCT and Voluntary Agencies will be needed in order to deliver a sustainable change.

What we will do:

- Devise and deliver a training plan to ensure the workforce is adequately trained in management of risk, person-centred planning, assessment skills, support planning and brokerage.
- Remodel in-house services, together with an intensive programme of skills development to ensure staff are equipped to support Residents through the Putting People First in Hounslow agenda
- Provide leadership training for Managers to support the programme of change, a significant factor in shifting the local authority culture.
- identify learning and development needs of frontline staff and carers workers to support the implementation of Putting People First.
- Remodel Care Management to ensure suitably skilled workforce in place for delivering Putting People First

## Policy and Performance

Policy and Procedure documents are being developed for all aspects of the PPF agenda.

There is a need to link with Systems and IT Development Workstreams to ensure systems deliver PAF information as required.

It is essential to monitor and highlight impact on existing Performance Indicators.

A Quality Assurance programme will be developed to ensure systematic and comprehensive monitoring of the effectiveness and continuous improvement of Putting People First in Hounslow. This will include

- Clear structures & processes for establishing standards
- Systems for monitoring quality & ensuring services develop to meet the diverse social care needs of the local community.

The programme engages with residents and their carers' in monitoring the quality of service delivery and in contributing towards the planning and development of future services.

Councils have been set a target of 30% of their Residents receiving adult social care having a Personal Budget by the end of 2011.

In March 2009, an ADASS/LGA survey showed 8% was already the national average (although it also suggested that the majority of authorities were below this average). It is believed that Councils should have reached a 10% minimum target by March 2010 if they are going to guarantee the 30% target for 2011; the survey itself indicated that only around 20 authorities were not expecting to have reached a 10% level by March 2010.

Given the expectation that service users receive reviews at least annually, this milestone may in itself drive an allocation of PBs in excess of the 30% target for April 2011.

The following current key performance indicators may afford a wider context in which to judge progress.

The data from these indicators will not be available until after the end of the year.

**NI 125 – achieving independence through rehab/intermediate care**  
**NI 130 – the proportion of eligible service users with a Direct Payment and/or a Personal Budget**  
**NI 134 – number of emergency bed days**  
**NI 139 – people over 65 who say they receive information, assistance and support to live independently at home**  
**NI 145 – settled accommodation for adults with learning disabilities**  
**NI 146 – employment for adults with learning disabilities**  
**NI 149 – settled accommodation for adults with mental health problems**  
**NI 150 – employment for adults with mental health problems**

## Conclusion

In order to achieve the transformation the following issues will need to be addressed:

- A system is in place, which manages the risks associated with the transformation that includes the risks for individuals, financial and other risks.
- Clarity of the business models that will need to be adapted to support the transformation
- Financial systems will need to be reviewed and simplified in order to support the delivery of Personal Budgets, including Charging policies and Resident contributions
- A local project plan for the delivery of the transformation with clear projections and targets to reach locally identified milestones must be agreed and matched to key success criteria as identified by the agreed ADASS Milestones