

## **Agenda Item 13**

### **Self-Directed Support Update Report**



## Falkirk Integration Joint Board

4 September 2020

### Self-Directed Support Update Report

For Noting

## 1. Executive Summary

- 1.1 The report provides an update on Self-Directed Support across the Falkirk area. The Self-Directed Support (SDS) team works across Adult Services and Children's Services to support assessment and care management, finance and contracts and commissioning teams to continue implementation of Self-Directed Support. Legal services staff support contractual, financial and General Data Protection Regulations (GDPR) compliance. The Workforce Development Manager supports all efforts through identification and delivery of training and support required to improve implementation.
- 1.2 Strategic objectives are aligned to national and local outcomes within the National Work Plan (2019-21), Falkirk HSCP Strategic Plan and Falkirk Children's Services Closer to Home Strategy. All actions have been mapped against these and the recommendations in the Audit Scotland progress report (2017) and the Care Inspectorate SDS Thematic Review (2019).

## 2. Recommendations

The Integration Joint Board is asked to:

- 2.1 note the content of the report.

## 3. Background

- 3.1 The Social Care (Self Directed Support) (Scotland) Act 2013 ensures that individuals with eligible support needs and their carers can exercise choice and control over the support they receive, in line with their agreed personal outcomes. This applies to support funded by local authorities (and health where there are jointly funded support arrangements). There are 4 Options set out in the 2013 Act:
  - Option 1 Direct Payment – the agreed budget is paid directly to the individual/carers to enable them to purchase the support they need to meet their agreed outcomes.
  - Option 2 Individual Service Fund – the individual/carers is advised what the available budget is and chooses the support they need to meet their agreed outcomes. The local authority makes the payments for the

support directly to the support provider.

- Option 3 local authority arranged support – after discussing the support needed to meet agreed outcomes the individual/carer asks the local authority to arrange and pay for the support.
- Option 4 mix of support options – this is when a mixture of the first 3 options is used to arrange different part of the support needed to meet agreed outcomes. Individuals/carers may want to take varying levels of control of their different support needs.

- 3.2 In 2017 Audit Scotland published a report (Self-Directed Support 2017 progress report) which outlined a number of recommendations for local authorities and Health and Social Care Partnerships.
- 3.3 In 2019 the Care Inspectorate carried out a Self-Directed Support thematic inspection across six authorities in Scotland. This report also contains a number of recommendations. The recommendations from both reports are being fully considered as part of ongoing implementation plans.

#### **4. Progress Towards Change Map Priorities**

- 4.1 In 2017 the Scottish Government commissioned an implementation study [Self Directed Support Implementation Study 2018. Report 1: The SDS Change Map](#) to contribute to the ongoing monitoring and evaluation of Self-Directed Support implementation. One outcome of the study was the production of a Change Map that outlined priorities for People, Workforce and Leaders and Systems.
- 4.2 **People**  
Falkirk has a local user-led support service – SDS Forth Valley. They are strategic partners for SDS implementation and assist with development of local SDS policy and procedures– particularly in relation to Options 1 and 2. The local Carers Centre is also a strategic partner and is fully involved on policy development for carers. These partnerships are collaborative and ensure consistency and clarity of approach; a good understanding of the local and national guidance, with positive working relationships.
- 4.3 As noted in the Performance Monitoring report (June 2020) there are 4,299 people recorded as having chosen one of the four SDS options. Figures for 2019-20 are not yet confirmed and will be reported in a future IJB Performance Monitoring Report. While the overall figures for Option 1 have not increased, the variance for Option 1 payments across the last 4 years is as set out in Table 1:

Year	New Direct Payments	Direct Payments Ended
2016-17	5	6
2017-18	4	10
2018-19	11	10
2019-20	13	6

Table 1

- 4.4 Staff from both Children's and Adult Services continue to discuss and promote the options during assessment and support planning. Staff are encouraged to carry out joint visits with SDS Forth Valley to ensure a full explanation of the nature and impact of each of the Options is given to enable individuals and carers to make an informed choice. Online/telephone support is being provided during Covid-19. Regular staff briefings are offered to ensure staff can keep up to date with developments and raise any issues/questions they have in relation to SDS.
- 4.5 Table 2 below provides the options recorded on the current SWIS system over the 3 years of available data. There has been improvement in recording of SDS Options on SWIS. Individuals can, and do, switch between options as their circumstances change. There has been significant effort in the last 2 years, in particular, to improve the quality of options recording, including the quality of the conversations that take place during the assessment and support planning process.

Self-Directed Support (SDS) options selected: People choosing	31/03/17 Snapshot	2017/18	2018/19
SDS Option 1: Direct payments (data only)	32 (1.7%)	30 (0.7%)	35 (0.8%)
SDS Option 2: Directing the available resource (data only)	83 (4.3%)	192 (4.8%)	192 (4.5%)
SDS Option 3: Local Authority arranged (data only)	1505 (93.4%)	3,522 (87.3%)	3,875 (90.1%)
SDS Option 4: Mix of options (data only)	30 (1.9%)	292 (7.2%)	197 (4.6%)

Table 2

- 4.6 During the Covid-19 pandemic the Scottish Government published additional [Self-directed Support Guidance](#). The SDS team has been working closely with SDS Forth Valley to implement the new Guidance. This includes more flexibility in the use of funding during the restrictions of Covid-19 and less bureaucracy for setting up support arrangements, where possible. This joint working is also ensuring that individuals can continue to meet their responsibilities in managing their support. This particularly applies to those employing staff and has included online, email and telephone contact to check that:

- they are able to continue paying staff
- that PPE is distributed to those requiring it
- training issues are addressed
- replacement care is available if required
- that all employer insurances are in place.

4.7 A review of the SDS communication strategy is underway and will result in increased emphasis on accessible communication for all citizens. This will include provision of Self Directed Support information when people attend the local Living Well Falkirk Talking Points (local drop-in centres), in their local communities when seeking information about local support. The Living Well Falkirk Talking Points are being considered as part of the Community Led Support initiative. This is a national programme to provide information and support to people close to where they live. The information provided will include what is available by communities, for communities, as well as information about more formal support structures and options. The SDS communication strategy will be part of overall communication including:

- ensuring Living Well Falkirk Talking Points have relevant information on SDS and be able to appropriately sign post people to formal or universal services/supports.
- providing opportunities for 'good conversations' in all contacts with social work whether through the contact centre, Living Well Talking Points or during assessment and review
- ensuring we work closely with Third Sector partners so that SDS is understood across the sector and is understood across all funded and non-funded support for citizens.

#### 4.8 **Workforce**

- To compliment more formal and structured training, the SDS Team offers regular staff briefing sessions for SDS and the Carers (Scotland) Act 2016. These are in partnership with the local SDS Support Organisation (SDS Forth Valley) and Falkirk Carers Centre. The briefings are regularly reviewed and updated. An in depth review of assessment and outcome recording has taken place within Community Care Teams over the last 2 years to inform training and improvement requirements.
- SSSC risk resources have been introduced to our training resources.

#### 4.9 **Impact**

- Briefing sessions address gaps in learning and practice, enabling the review of progress and identification of training needs within teams.

During Covid-19 we are exploring ways of delivering learning and support using alternative formats.

- Options for online and, when appropriate, face to face training opportunities are being explored to improve skills and confidence.
- The SDS Team is supporting the development of practical tools and examples for recording of 'Good Conversations' with clear links to strategic outcomes and the Health and Care Standards.
- The importance of signposting staff to sources of information and support is identified as an integral part of workforce development.
- There has been an increase in the uptake of Open Badges (SSSC)
- Targeted information for health staff is being developed to ensure good practice in joint working
- Ensuring the new Liquidlogic social work system (SWIS replacement) triggers SDS discussion as part of outcomes focussed support planning including the recording of the option chosen and the reason for this.

#### 4.10 **Leaders and Systems**

- Falkirk is implementing new Social Work (SW) information and finance systems. SDS staff are actively involved in these developments to ensure that assessment, identification of individual outcomes, support planning and financial allocation processes facilitate SDS at every stage
- In 2019, following the production of the SDS Change Map, the Scottish, Government published the [Self-Directed Support Implementation Plan 2019-21](#) which outlines the work plan for the next 3 years to address the priorities in the Change Map. A review of the local implementation strategy has been undertaken to do the same and has been mapped against the recommendations in the Audit Scotland 2017 report, the Care Inspectorate 2019 report and the Scottish Government Implementation Plan 2019-21. This is being discussed with Senior Managers and an Action Plan is being developed. The Health and Social Care Standards underpin this work.
- Update/briefing sessions are being prepared for the Senior Management Team to agree the updated Action Plan - these have been impacted by the Covid-19 pandemic and timing will be dependent on recovery. Performance information will be provided. Updates are also provided to Falkirk Integration Joint Board (IJB) and elected members through the Falkirk Council Committee structure.
- Strategic leads attended a workshop in January and February 2020 on

'Good Conversations' in support of shared language and approach.  
This is reflected in policy, procedures, supervision and meetings

- The Action Plan takes account of community led support options and preventative approaches, including the promotion of anticipatory care planning.

#### 4.11 **Impact**

- The new SW and Finance systems (SWIS replacement) are being designed around SDS to enable the workforce to deliver outcomes within a meaningful and collaborative structure for service users, carers and families
- As part of the outcomes focussed support planning process the recording in the new systems will include the SDS option chosen and the reason why. This will produce performance information that is difficult to gather in the current system.

#### 4.12 **Learning**

- There has been significant scrutiny of existing systems leading to a greater understanding of local barriers and risks to SDS implementation. Actions for improvement have been identified
- There is good evidence of outcomes focused conversations taking place but these are not always reflected in the assessment information
- Improved recording of identified outcomes within assessment, choice of SDS option and evidence of full involvement in support planning is needed
- There is still a lack of confidence among some front line staff around flexible support planning, use of budgets and contractual arrangements for SDS Options
- Better identification and recording of individual risks and agreed risk management plan is required.

## 5. **Conclusions**

5.1 Progress towards full implementation of Self-Directed Support continues. Significant effort is being made to keep abreast of evidence based learning and resulting developments. Continuous improvement is a central aim within the implementation process while, at the same time, trying to ensure communication, engagement and participation of individuals, carers and staff across all partners, including Third Sector partners and care and support providers, remains current and accessible.

5.2 While the Covid-19 pandemic has, to some extent, disrupted the work flow it

has also presented some opportunities for working in different ways. Analysis and evaluation of the learning from this is being gathered and will be used to continually improve the approach to SDS implementation.

### **Resource Implications**

There are no resource implications arising from this report. Falkirk HSCP SDS funding has been used to continue designated posts and associated expenditure. These cover finance and development support to the Project Development Manager for Self-Directed Support (SDS).

### **Impact on IJB Outcomes and Priorities**

The SDS work is in line with the outcomes and priorities set out in the Strategic Plan.

### **Legal & Risk Implications**

There are no legal issues and risk arising from the report.

### **Consultation**

This is not required for the report. As noted in the report, a review of the SDS communication strategy is underway and will result in increased emphasis on accessible communication for all citizens.

### **Equalities Assessment**

This is not required for the report.

## **6. Report Author**

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