

ANGUS COUNCIL

SOCIAL WORK AND HEALTH COMMITTEE – 23 FEBRUARY 2016

SELF- DIRECTED SUPPORT PROGRESS REPORT

REPORT BY MARGO WILLIAMSON, STRATEGIC DIRECTOR - PEOPLE

ABSTRACT

This report provides elected members with an update on the progress made in implementing the Social Care (Self-Directed Support) (Scotland) Act 2013 within Adult Services.

Social Work and Health Committee previously considered reports in respect of Self - Directed Support (SDS): report numbers 205/13, 4/14 and 364/15.

1. RECOMMENDATIONS

It is recommended that the Social Work and Health Committee:

- (i) Notes the progress made in implementing this legislation within Adult Services.
- (ii) Notes the continued challenges in service delivery arising from SDS implementation and the steps taken to address these challenges.

2. ALIGNMENT TO THE ANGUS COMMUNITY PLAN/SINGLE OUTCOME AGREEMENT/COPORATE PLAN

This report contributes to the following local outcomes contained within the Angus Community Plan and Single Outcome Agreement 2013-2016:

- The health of the Angus population is improved;
- People using health and community care services are enabled to remain active and independent within their communities;
- The housing needs of Angus residents are met;
- People play an active role in how health and community care services are designed and delivered;
- Carers are supported to undertaking their caring role
- A good quality of life is enjoyed by all in Angus

3. BACKGROUND

The Social Care (Self-Directed Support) (Scotland) Act 2013 was introduced on 1 April 2014. This legislation is part of a 10 year strategy by Scottish Government to drive forward the change in the way individuals and families are given choice and control over the way their care and support is provided to achieve their identified outcomes.

Under the legislation the local authority has a number of duties and powers. These are:

- A duty to have regard for the general principles of collaboration, informed choice and involvement as part of the assessment and the provision of support
- A duty to take reasonable steps to facilitate the person’s dignity and participation in the life of the community
- A duty to offer choice and explain the “nature and effect” of the choices
- A duty to act on choice, provide support and provide information
- A power to offer support to carers but a duty to offer SDS options for that support

Self-Directed Support (SDS) is a way of providing support that means that people are given choice and control over what kind of support they receive. It means that people can choose and arrange some or all of their own support instead of it being solely determined by professionals.

The Act introduced four options that, following the completion of an assessment for outcomes, require the identification of financial resources to deliver these outcomes for the individual concerned. This is referred to as an “individual budget”. In Angus the method for allocating resources is the Resource Allocation System (RAS). When a person has been assessed as eligible for support that cannot be met through natural supports, personal strengths or through community resources, the local authority has a specific duty to offer the four options on how that support will be arranged and delivered. They are:

- Option 1. A direct payment
- Option 2. The individual directs the available support
- Option 3. Services are arranged or provided by the authority
- Option 4. A mix of the three options above

In each case the individual, along with the case worker will develop a support plan which details their agreed personal outcomes, and how their support will be delivered to meet these outcomes, using the available resources identified in their individual budgets.

4. CURRENT POSITION

Committee report 364/15 advised that all new and existing service users would have an SDS assessment by 31 March 2016.

As at 15 January 2016 67.5% of existing services users have been successfully assessed under SDS. The remaining population is being worked through. The cases remaining tend to be more complex cases, in particular those within Learning Disabilities, or service users in Mental Health and Alcohol and Substance misuse services, where the service user’s participation in the process is more challenging. Work with Service Managers in these areas is currently ongoing to support staff to undertake these assessments, and it is anticipated that completion should be achievable by the 31 March 2016 timescale.

A snap shot as of 21 January 2016 of the SDS options that current service users have chosen finds the following:

SDS Options	No. of Service Users
Option 1	72
Option 2	102
Option 3	540
Option 4	27

To date the vast majority of service users are choosing Option 3 whereby the Council arranges their care.

5. FINANCIAL IMPLICATIONS

At the time of writing, it is not possible to identify all of the financial implications of SDS for Angus Council, and it remains arguable whether SDS will increase or reduce costs in the longer term; this is very much the picture across Scotland.

By adopting a Programme Governance approach to SDS in Angus a benefits realisation plan will be completed, which will assist in identifying the financial implications of SDS in Angus. A “before and after” case sample will also be used to identify changed costs in 100 cases.

6. OTHER IMPLICATIONS

Human Rights

There are no human rights implications arising directly from this report

Equalities

The issues considered within the report have been subject of consideration from an equalities perspective and an equality impact assessment is not required.

NOTE: No background papers, as detailed by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information) were relied on to a material extent in preparing the above report.

REPORT AUTHOR: George Bowie, Head of Adult Services
EMAIL DETAILS: PEOPLE@angus.gov.uk