

Somerset Council
Scrutiny Committee
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My Life, My Future: Adult Social Care Transformation Programme Update Report

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Division / Local Member: All

1. Summary

- 1.1.** This report provides an update on the transformation work underway across the Adult Social Care service in Somerset, called the 'My Life, My Future' Programme. We are now seven months into the Programme and are continuing to progress across all five workstreams. Some workstreams are now moving towards the 'implementation' phase, where the new ways of working trialled in certain teams or areas will be rolled out across the county.
- 1.2.** We continue to see positive results across all areas of the work. We have seen a 30% increase in the number of individuals accessing reablement (6-week moving average figure as at early March), meaning 15 more individuals every week can now benefit from a chance to improve their level of independence in their own home. Exploring more creative ways to meet people's care and support needs via our peer forums and enhanced peer forums is resulting in a reduction in the volume of new homecare and direct payment packages started across the county.
- 1.3.** Overall, the programme is on track to deliver financial benefits between the low and the high scenarios set out at the start of the programme. We are working within our Finance and Performance Monitoring group to secure more timely operational data sources to inform spend analysis, and continue to track and mitigate programme risks to ensure the sustainability of our transformation ambitions.
- 1.4.** Adult Social Care's transformation activity, including the 'My Life, My Future' Programme directly supports the vision and priorities of Somerset Council, as outlined in the 2023-2027 Council Plan, especially those aligned to ensuring we are a 'healthy and caring Somerset'.

2. **Issues for consideration / Recommendations**

2.1. Scrutiny Committee members to consider if there are any general comments or observations that they would wish to make in relation to this programme of work.

3. **Progress to date:**

3.1. **Reablement:** In this workstream, we want to ensure that more people have access to reablement support, both when they are discharged from an acute hospital stay, and when they enter our services via the community, and that this support is as impactful as possible. The workstream is aiming to drive two key KPIs (Key Performance Indicators):

- The number of people who finish a period of reablement per week.
- The effectiveness of their reablement period (i.e., how much impact the reablement support had on their level of independence).

We have rolled out a new 'Cluster Call' structure and accompanying tool across all geographies, giving staff from the Council, SFT and our providers and shared visibility of individuals on the caseload, to support more timely progression of cases and reduce delays. This has worked alongside a change in team roles and responsibilities to ensure focus on social care assessments at the end of the reablement journey. The **percentage of individuals delayed at the end of their reablement journey in early March 2024 is now 14%, down from 46%** at the end of the previous 6-week period. This reduction in delays, has reduced the overall length of stay in the service, and freed up capacity to allow for **15 additional starts into the service each week** (as of early March). These individuals are now able to benefit from a chance to improve their independence at home on discharge from hospital.

We are continuing to develop a digital tool, which will support a new method for setting and tracking reablement goals for clients. This aims to increase the effectiveness of the support we offer and ensure people can leave the service closer to independence, as well as ensuring that we step people down from the service in a timely way as they achieve their goals.

Work is also ongoing to ensure an accurate demand and capacity model for each area of the county. This will support ongoing sustainability plans, and any future required recommissioning activity to ensure we have sufficient capacity to meet demand across those individuals returning home from acute hospital, as well as those who could step down from a short-term bed, and those who have potential for greater independence in the community.

3.2. **Outcomes from Decision Making:** In this workstream, we want to support more

ideal outcomes for adults receiving long-term care and support from our services. The workstream is aiming to drive two key KPIs:

- The number of people starting a long-term residential placement
- The number of new hours of support commissioned for people at home (in homecare packages or in direct payments).

New Peer Forum practices have been established across the county, in alignment with work on Enhanced Peer Forum as part of the financial emergency. We have also developed a Neighbourhood Teams Dashboard, to give managers better visibility of their teams' activity, and the outcomes generated for individuals from this work. This is supporting a renewed focus on productivity, aiming to reduce the delays in assessments and reviews.

The 'run rate' is tracked across both the Reablement and Outcomes from Decision Making workstreams to understand the combined impact on the number of new hours of support commissioned for people at home (in homecare packages or in direct payments) – as both areas of work aim to support people to greater independence in this area. The current 'run rate' for this workstream (i.e., the financial value realised if this operational performance were to sustain indefinitely) is **over £6m p.a.** (from Finance & Performing Monitoring Group meeting on 15th March 2024). Further work is required to ensure we have an accurate & timely tracking method for the residential starts element of the workstream.

3.3. Data, Visibility & Control: In this workstream, we want to establish a data-driven decision-making culture through use of clear, accurate and accessible management information at each level of the service. This workstream has also established operational tracking against each of the workstreams, and full financial tracking across the Older Adults workstreams.

3.4. Progression & Enablement: In this workstream, we want to enable individuals living with learning disabilities (LD) to live more independently.

Aligning with the Outcomes from Decision Making work, Peer Forums have been established in the new Learning Disability teams, and initial tracking suggests that these are resulting in an increased level of independence for people compared to a pre-November 2023 baseline.

Since the start of any additional design in this workstream was delayed to support ongoing financial emergency work, we have completed further deep dives to understand the key areas driving spend growth in this area. These are now forming the trials of new ways of working to be undertaken in the LD teams.

3.5. Preparing for Adulthood: In this workstream, we want to achieve more ideal

outcomes for our young people transitioning to adulthood.

In this area, we have undertaken two design workshops with colleagues from across the Adults and Childrens' Service to align on the key principles and areas of focus for improving the journey into adulthood. We have also designed and launched a new 'Transition Form' on Eclipse, which will improve visibility, early planning and support for young people and additionally improve incoming demand insight for commissioning teams.

We have also focused on giving senior team members and managers greater visibility of the cohort of young people, and team activity through an ongoing improvement cycle. We have seen an over **100% improvement in team productivity**, and hence the average age at which we complete a Care Act Assessment for our young people fall from over 20 years old, to reach 18.2 years (in early March). We are on a trajectory for this to fall below 18 years imminently, against a target of 17.5 years.

- 3.6. Key risks & issues impacting Programme delivery:** Risks and issues are managed via the monthly Contract Monitoring forum, with mitigating actions agreed and monitored. The Programme also reports progress to the Executive Transformation Board. Current key issues impacting current programme delivery are focused on resourcing and staff capacity, with a further risk around system working.
- 3.7. Operational and Financial Tracking:** The four core workstreams (excluding Data Visibility & Control) have an operational and financial value attached to them. For each associated area of opportunity, we have a financial equation, consisting of fixed variables (e.g., the duration of a long-term care package) and tracked variables, that we are trying to impact through the operational changes in place (e.g., the number of adults starting a long-term residential placement per month). For each of the tracked variables, we have taken a baseline to use as representative of historical performance, against which are measuring changes.

As many of the targeted changes focus on demand management (i.e., reducing the number or scale of long-term package starts), cash benefits associated with these accrue over time and it typically takes longer than one financial year to see the full benefit realised. We have generated a projected cash profile, with a low and high scenario, to set out the period over which we can expect to see the Programme savings, if the operational activity progresses against plan.

In Year Value Version	FY23/24	FY24/25	FY25/26	FY26/27	FY27/28	FY28/29
Updated Low Scenario	£0.5M	£7.3M	£13.3M	£13.9M	£14.1M	£14.2M
Updated High Scenario	£0.8M	£9.5M	£16.0M	£16.3M	£16.5M	£16.5M

Table 1 - My Life My Future Target Cash Profile

A fortnightly ‘Finance & Performance Monitoring Group’ meets to review current operational and financial performance. This group is attended by key operational, finance and performance & Business Intelligence (BI) representatives within the service and is responsible for developing a rigorous approach to our operational and financial tracking and understanding performance against the projected cash profile. All workstreams now have agreed financial equations, and we are able to clearly monitor progress against the opportunities associated with the Older Adults cohort. There is further work remaining to ensure we can sustainably track the impact of new ways of working in our Learning Disability teams.

A monthly Contract Monitoring forum is in place, for formal reporting of progress against the operational and financial targets and will sign off the benefits associated with the Programme.

The support from Newton Europe is also provided on a contingent fee basis. The fees for both the My Life, My Future Programme and the preceding diagnostic are fixed and fully contingent on financial benefits being delivered and signed off by Somerset Council. As such, Newton guarantee that the recurrent, annualised benefits delivered in the Programme will at least exceed 1.3 times the combined fee from the diagnostic and Programme. As such the guaranteed benefit is £10.0m. These benefits will be measured by comparing historic baselines to the end of programme operational performance in each of the relevant areas, then using the agreed set of equations to translate this to an annualised “run rate” for the programme. This “run rate” is therefore agreed to be the value delivered to Somerset Council if the operational performance sustains at this level. If at the end of the programme, the benefits have not achieved the required scale, either Newton will continue to work at no extra charge until this is the case, or the fee will be reduced, pro rata until this is the case.

3.8. Programme Background – as per December 2023 Scrutiny Paper: An evidence-based review of Adult Social Care was undertaken across the Winter of 2022/23, which identified priority areas for change and a proposed plan for an

Adults Transformation Programme. In the Summer of 2023, Somerset Council engaged Newton Europe as a delivery partner to deliver this Adults Transformation Programme, now titled the ‘My Life, My Future’ programme. As well as collectively improving the lives of 1,000+ Somerset residents, the programme is targeting making sustainable operational changes, valued in the range of £14.2m - £17.2m p.a.

Given the nature of opportunities is based on improving outcomes and sustainably reducing demand for services, there is a multi-year ramp up towards these values. The Programme is intended to design and implement most operational changes within 15 months, which will lead to significant benefits being realised from Year 2 onwards.

Area	Summary	Target	Stretch
Decision Making	Supporting more independent outcomes through strengths-based practice, improved care capacity and more creative alternatives to formal support where appropriate.	£2.3m	£2.7m
Reablement	More people accessing short-term services that support them to improve their independence – when being discharged from an acute hospital stay, and from the community.	£9.5m	£11.4m
Preparing for Adulthood	Increased independence for young people as they transition to adulthood by earlier intervention & support from the Adults team and taking a strengths-based approach.	£0.4m	£0.6m
Progression and Enablement	Supporting more adults with learning disabilities to lead a more independent life in their community.	£2.0m	£2.4m
TOTAL		£14.2m	£17.2m

Table 2 - My Life My Future Opportunity Matrix

3.9. My Life, My Future workstreams - as per December 2023 Scrutiny Paper:

The Programme is aligned to the 2023-26 Somerset Adult Social Care Strategy, which aims to support Somerset people to live in the place they call home, with the people and things that they love, in communities where they look out for one another, doing what matters to them. Across all cohorts of service users, the Programme aims to support more Somerset residents to live independent lives.



Figure 1 My Life My Future Programme Summary

There are five workstreams within the My Life, My Future programme, impacting different teams and with different operational and financial targets associated:

1. **Reablement**, which aims to design & implement an improved reablement model for Somerset. Reablement is a short-term service that aims to support people to recover skills and confidence and live more independently in the long term. The work here aims to:
 - Establish more efficient processes and improved service capacity to support more people with reablement potential through the service, whilst opening access to the service for people in the community.
 - Support individuals with more complex needs to become more independent through enhanced therapy oversight, improved goal setting and tracking and multidisciplinary input.
2. **Outcomes from Decision Making**, which aims to achieve more ideal outcomes for adults receiving long-term care and support from Adult Social Care. The work here aims to:
 - Build on the Adult Social Care operations restructure to establish new processes and create an environment which supports and enables practitioners with strengths-based decisions.
 - Shape the direction of what services are required now and, in the future, to keep our population as independent as possible.
3. **Progression & Enablement**, which aims to enable individuals living with learning disabilities (LD) to live more independently. The work here aims to:
 - Establish the right progression planning process and support for this cohort, both for those who could be supported to progress within their current accommodation setting and for those who could

progress to a more independent setting.

- Ensure sustainable, sufficient capacity in appropriate settings for promoting independence.

4. **Preparing for Adulthood**, which aims to achieve more ideal outcomes for young people transitioning to adulthood. The work here aims to:

- Establish efficient processes and information sharing between Children's & Adults Services to enable early identification and planning of support.
- Shape the availability of suitable and cost-effective services to promote independence.

5. **Data Visibility & Control**, which, in collaboration with the Adults Business Intelligence team, will establish ongoing visibility of the Adults service. The work here aims to:

- Enable proactive performance management and establish clear links between operations teams, their decisions and finance data.
- Foster a culture of performance and improvement through data-driven behaviours and evidence-based decision-making.

3.10. Approach to change - as per December 2023 Scrutiny Paper: A joint team has been established between Newton Europe, Somerset Council & NHS Somerset ICB to deliver the Programme. Each workstream has two sponsors from the Adult Social Care team – one from the Operations team and one from the Commissioning team – as well as delivery support from Somerset Council's Project & Change team. This joint approach allows a blend of Newton's experience and understanding of best practice delivery models, with the understanding of the specific Somerset team context and existing strengths. This approach also aims to embed Newton's change methodology and approach, to equip the Somerset team to continue to improve performance beyond the core programme timescales, and to lead future identification and delivery of change. As we look towards the 'sustainability' phase of the programme, we have developed a training plan that will engage individuals across the Adults service, the Somerset Project & Change team and colleagues across the health and care system.

Each workstream is moving through a broadly similar approach to change, which will have a design and an adoption phase to create well-evidenced solutions and ensure sustainable change across the county. The design phase involves a short period of 'desktop design' with support from subject-matter experts within the service, before establishing 'trials' where, within a defined subset of a team/locality, we can put the designed solution into practice. These trials ensure that any changes have evidence of success behind them, before in the adoption phase, rolling out changes across remaining teams or localities.

The five programme workstreams are at different points in this journey currently. Those predominantly focused on Older Adults had started earliest, and the work in Reablement & Outcomes from Decision Making is now beginning to focus on ensuring changes can be adopted across all teams and building sustainable digital tools to support roll out. The workstreams focused on our cohort of Adults with Learning Disabilities had started later, to align activity with the establishment of the new operational team structures. In these workstreams, trials are now underway in both the Preparing for Adulthood team, and the Learning Disability teams.

4. Implications

- 4.1.** Several changes to the Programme Plan were set out in the Scrutiny report in December 2023, in recognition of and response to the financial emergency Somerset Council and its Adult Social Care service face. No further changes to the Programme Plan have been made in the intervening period.
- 4.2.** In March 2024, Somerset Council hosted a Local Government Association Assurance Peer Challenge of its Adult Social Care service to support ongoing improvement activity and readiness for future Care Quality Commission assessment. The external peer challenge team were able to meet with key 'My Life, My Future, representatives and review latest progress evidence. Whilst we await the official report from the review, expected in mid-April 2024, initial feedback was positive. One strength noted was as follows: *'The transformation programme is currently on track to deliver, and there will be learnings that can be applied to other parts of adult social care'*. The initial feedback also warned that *'progress on Adult Social Care change activities also depends on access to corporate support services and capability, which could be destabilised by the current Voluntary Redundancy process'*. Ensuring the sustainability of this programme and its progress remains of key importance over the coming months.

5. Background papers

- 5.1.** Appendix A - My Life, My Future Programme – Scrutiny April 2024 update

Note For sight of individual background papers please contact the report author.