

Putting People First Milestone Self-Improvement Framework

Purpose of this document

This has been co-designed by the Putting People First Social Care Consortium to accompany the milestones. It provides you with some brief descriptors for each of milestones and also with some questions to help you with your planning for each of the milestones. These are not intended to be prescriptive.

How might you use this?

We have designed this as a self assessment tool. We hope that councils will find it a useful means to:-

- Stimulate strategic discussions, internal challenge and a review of existing plans in the light of the milestones
- Map and measure your own progress in implementing the Milestones and to enable reports to key Local Programme Management and Management teams
- To identify areas where you need to do more work
- To form the basis for a discussion with regional Transformation Leads, and to identify where the assistance of regional support staff from regional JIPs and partner bodies will be helpful
- To identify opportunities for sharing learning with other local authorities
- To identify areas for regional work/projects, to assist with particular common challenges

How often will you want to use this?

We think it will be sensible to update this self assessment at least quarterly, or at a time appropriate to the Authority taking into account the timescales for the milestones. The results should feed into normal reporting processes in your council.

How will Information be used regionally?

How this information is used will be a decision for each region.

It could provide regional Putting People First/TASC steering groups/JIP boards etc with progress and planning reports to assist with the ongoing development of regional programmes of support. Transformation Leads could use this information to better focus support to their regions and to highlight areas of innovative practise.

Progress with Putting People First milestones

Council: Oxfordshire
Dec 2009 (3rd Quarter Review)

Underpinning Requirements

Are all stakeholders fully engaged and supportive of local planning for “Putting People First”	Red	Amber/Red	Amber / Green	Green
The full engagement of all service users.			X	
The full engagement of all staff working to support the delivery of care, which includes people working in the provider services and third sector organisations.			X	
The full engagement of Primary Care Trusts and the wider health community.			X	
The full engagement of local politicians			X	
The full engagement of all parts of local councils and of other key strategic partners.		X		
The support of regional and national programmes.			X	
Are the following Key Arrangements resolved and in place	Red	Amber/Red	Amber/ Green	Green
A system is in place, which manages the risks associated with the transformation that includes both the risks for individuals and financial and other risks			X	
Clarity of the business models that will need to be adapted to support the transformation			X	
Financial systems, which support the delivery of personal budgets.		X		
A local project plan for the delivery of the transformation with clear projections and targets to reach locally identified milestones			X	
Business cases, which track the new investments, and disinvestments that will be required to support the change.			X	
A workforce strategy that supports the transformation			X	

Milestone 1:	Effective partnerships with People using services, carers and other local citizens					
Description:	<p>Successful delivery of Putting People First will depend on citizens, people accessing care and support and carers working in a co-productive relationship with Local Authorities and their partners at all levels in the design, planning and delivery of new personalised systems and services.</p> <p>Formal and informal structures should be in place to allow citizens and the full spectrum of user and carer representatives to contribute to the local design and delivery of social care transformation. This should go well beyond traditional “consultation”</p> <p>User-led organisations can provide expertise (such as service user experience) that is not always available within local authorities and this expertise should be harnessed to co-produce the transformation of social</p>					
Key Dates and Deliverables:	April 2010		October 2010		April 2011	
	<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. [By Dec 2009]</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. (By December 2010)</p>	
How likely are we to achieve this milestone by this date?	Very likely		Very likely		Very likely	
	Fairly likely	X	Fairly likely	X	Fairly likely	X
	Fairly unlikely		Fairly unlikely		Fairly unlikely	
	Very unlikely		Very unlikely		Very unlikely	

Milestone 1:	Effective partnerships with People using services, carers and other local citizens	
Key Questions:	<ul style="list-style-type: none"> Does our Authority have plans in place to meet the DH target of a ULO in place by the end of 2010? 	<p>Yes – and we are one of the a demonstrator sites for SE region</p>
	<ul style="list-style-type: none"> Is there a programme board for the delivery of PPF that has direct representation of users/carers? 	<p>No – there is a Programme Board but no user/carer reps are on this board. The new Programme Assurance Group has user and carer reps.</p>
	<ul style="list-style-type: none"> Does our Authority have a range of means at all levels to effectively co-produce transformation with people who use care and support? 	<p>Yes – via the service user and carer reference group and key workshops on critical specific and strategic issues – eg RAS workshop, ULO Workshop</p>
	<ul style="list-style-type: none"> What are we planning to do next? 	<ul style="list-style-type: none"> Spec for ULO Spring 10 Improve the involvement and range of users and carers in the reference group Development of Programme Assurance Group to include user and carer representatives
	<ul style="list-style-type: none"> What could prevent us from achieving this milestone? 	<p>Lack of involvement and agreement by local groups/people about ULO direction and model</p>
	<ul style="list-style-type: none"> What external support would help? 	<p>Support in working on the role of Councils in leading/developing a ULO</p>
Key Risks and Mitigating Actions:	<ol style="list-style-type: none"> Timescale for ULO development is tight No consensus among user/carer representatives or representative groups about the forming of a ULO Disengagement of people from user and carer reference group 	<ol style="list-style-type: none"> Monitor progress and report back to TASC programme board of issues/concerns Monitor progress and report back to TASC programme board of issues/concerns. Support from SE team Regular feedback at each meeting on appropriateness and focus of meetings – are we getting it right?
Useful Information:	<p>The DoH document “User-led organisations project policy” sets specific criteria for ULOs:</p> <p>http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_078804</p>	

Milestone 2:	Self-directed support and personal budgets					
Description:	<p>Success on this milestone would mean systems are in place to allow citizens who require social care support to easily find and choose quality support, and control when and where services are provided, and by whom.</p> <p>For those citizens eligible for council funding, the amount available to those individuals should be known prior to starting person centred support planning.</p> <p>People should have the ability to spend part or all of their money in a way that they choose; including being able to mix directly purchased and council provided services.</p> <p>Extra help should be available to any citizen that needs help with information and advice or to negotiate their support.</p>					
Key Dates and Deliverables:	April 2010		October 2010		April 2011	
	That every council has introduced personal budgets, which are being used by existing or new service users/ carers.	<p>That all new 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>	That at least 30% of eligible service users/carers have a personal budget.			
How likely are we to achieve this milestone by this date?	Very likely	X	Very likely		Very likely	
	Fairly likely		Fairly likely	X	Fairly likely	X
	Fairly unlikely		Fairly unlikely		Fairly unlikely	
	Very unlikely		Very unlikely		Very unlikely	
Key Questions:	<ul style="list-style-type: none"> Have we started to issue personal budgets? 		<p style="text-align: center;">Yes (250 PB allocated by 11 Jan 10) Currently 9.3% of people have a PB or DP. Target for next quarter is 12.5%</p>			
	<p>If No to the above</p> <ul style="list-style-type: none"> On what date are we planning to start issuing personal budgets? 					

Milestone 2:	Self-directed support and personal budgets	
	<ul style="list-style-type: none"> Is this a pilot or mainstream activity for all new customers? 	<p>Currently a pilot but plans to mainstream from May 10 and accelerated review programme for existing older people has extended the pilot.</p>
	<ul style="list-style-type: none"> What are we planning to do next? 	<p>Business Model Agreed Organisational Structure and Systems/Processes being developed Dec-March 10 RAS policy by June 10 Formal consultation March-May 10 Systems/Processes to be rolled out by July 10 Brokerage block contracts to be tendered February 10</p>
	<ul style="list-style-type: none"> What could prevent us from achieving this milestone? 	<p>Tight Timescales Setting of RAS and budget position not aligned Delays in restructuring and retraining operational division High level of RAS appeals Delays in ICT implementation Insufficient Brokerage if demand higher than expected</p>
	<ul style="list-style-type: none"> What external support would help? 	<p>Sufficient support available</p>
Key Risks and Mitigating Actions:	<p>a) Legal challenge to RAS b) Insufficient funding of RAS due to efficiency savings c) Problems with restructuring d) Market response insufficient</p>	<p>a) Use of FACE RAS, senior management seminar on RAS to agree policy b) Final RAS allocation formula approved at senior level c) Joint team established to develop and implement new model to deliver SDS d) Providers briefed and consulted on developments</p>
Useful Information:	Upcoming SDS restatement / Legal advice / Operating Model document	

Milestone 3:	Prevention and cost effective services					
Description:	<p>This milestone looks at a whole system approach to prevention, intervention and cost effective services.</p> <p>This includes the support available that will help any citizen requiring help to stay independent for as long as possible. A key part of this is ensuring council-wide and partnership approaches to universal services e.g. leisure, adult education, transport, employment, healthy living and health improvement (backed by targeted intervention), along with housing and supported living options.</p> <p>Examples of intervention include reablement type services that help people regain independence to live in their own home. It also helps people to avoid becoming dependent on council provided services with national studies demonstrating many people finish reablement services with either a reduced need for care, or no ongoing requirement at all.</p> <p>It is important that the council and the NHS are jointly investing in early intervention and prevention and monitoring the effectiveness of services together eg. Joint interventions at best include telecare, case finding/case co-ordination and joint teams for complex and end of life care.</p> <p>Being able to evidence these types of savings is crucial, and reablement type services should form an intrinsic part of any Putting People First operating model.</p>					
Key Dates and Deliverables:	April 2010		October 2010		April 2011	
	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'.		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.		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. There should also be evidence that joint planning has been able to apportion costs and benefits across the 'whole system'.	
How likely are we to achieve this milestone by this date?	Very likely		Very likely		Very likely	
	Fairly likely	X	Fairly likely	X	Fairly likely	X
	Fairly unlikely		Fairly unlikely		Fairly unlikely	
	Very unlikely		Very unlikely		Very unlikely	

Milestone 3:	Prevention and cost effective services	
Key Questions:	<ul style="list-style-type: none"> Do we have a strategy and/or an investment programme for Prevention and Early Intervention? 	<p>Yes – we have a draft strategy that is currently being re-written and agreed as part of Ageing Successfully, our strategy for joint commissioning for older people. We are also doing detailed work to identify areas for investment and potential savings alongside this, with input from the PCT, which will feed into the budget planning process</p>
	<ul style="list-style-type: none"> Are health partners involved in this strategy? 	<p>Yes – from PCT Commissioning and Public Health. Jointly appointed Director of Public Health and Head of Joint Commissioning for Older People, in place</p>
	<ul style="list-style-type: none"> What are we planning to do next? 	<p>Complete the development of our joint strategy with the PCT</p>
	<ul style="list-style-type: none"> What could prevent us from achieving this milestone? 	<p>Delays to agreement about what the content of the strategy should be</p>
	<ul style="list-style-type: none"> What external support would help? 	<p>More evidence regarding the effectiveness of preventative services on reducing demand for intensive social and health care services, particularly residential care.</p>
Key Risks and Mitigating Actions:	<p>Financial climate makes investment in anything a challenge. Services have to make efficiency savings and at the same time identify investment in prevention, Financial return on investment difficult to demonstrate for some interventions, especially those with a long lead in time – these challenges make real agreement on a strategy difficult.</p>	<p>Appointment of joint commissioner and creation of new joint commissioning team between OCC and the PCT should mean decision making is clearer and joined up.</p> <p>Research on what preventive approaches are most effective.</p>
Useful Information:		

Milestone 4:	Information and advice					
Description:	All citizens should be able to easily find locally relevant quality information and advice about their care and support needs in order to enable control and inform choice. Information should be available in a range of formats and through channels to make it accessible to all groups. Provision of information, advice and guidance should move from being largely developed from separate initiatives to a single coherent service strategy.					
Key Dates and Deliverables:	April 2010		October 2010		April 2011	
	That every council has a strategy in place to create universal information and advice services.		That the council has put in place arrangements for universal access to information and advice.		That the public are informed about where they can go to get the best information and advice about their care and support needs.	
How likely are we to achieve this milestone by this date?	Very likely		Very likely		Very likely	
	Fairly likely	X	Fairly likely	X	Fairly likely	X
	Fairly unlikely		Fairly unlikely		Fairly unlikely	
	Very unlikely		Very unlikely		Very unlikely	
Key Questions:	<ul style="list-style-type: none"> Do we have a strategy for universal access to information, support and guidance for adult social care? 		No but will be in place for April 2010			
	<ul style="list-style-type: none"> Are self-funders (i.e. all citizens) included in this strategy so they can make use of both universal and paid for services to stay independent? 		Yes they will be			
	<ul style="list-style-type: none"> On what date is it expected this strategy will be delivered? 		April 10			
	<ul style="list-style-type: none"> Is the council helping voluntary organisations and other partners provide universal information and advice to a wide range of the population 		Yes			
	<ul style="list-style-type: none"> What are we planning to do next? 		Complete information strategy by end of Jan 10 for consultation and approval by TASC board by April 10			

Milestone 4:	Information and advice	
	<ul style="list-style-type: none"> What could prevent us from achieving this milestone? 	Entrenched views of current info and advice service providers.
	<ul style="list-style-type: none"> What external support would help? 	Highlighting of good practice where milestones have been achieved by other Councils.
Key Risks and Mitigating Actions:	<ol style="list-style-type: none"> Resources required for the project are not forthcoming, thus delaying the project. Information Owners of information unable or unwilling to commit time to the project to ensure that the information changes required are delivered as per the project's findings. This will delay/threaten the project's success. Buy in from various stakeholders. Overlap of project activity with other projects and work being carried out. Identification of Information Owners delays the project. 	<ol style="list-style-type: none"> Project Manager and Strategic Lead work with Information Owners to bring them onboard; escalation to Programme Director should there still be an issue. As above – escalate to Programme Director Strong project management approach in place, benefits of the project are material, agreed and communicated Communications audit, defined scope for the project. Liaise with Service Managers within the directorate and investigate what Corporate Core are involved in. Project resource to work with Service Managers to identify Information Owners.
Useful Information:		

Milestone 5:	Local commissioning					
Description:	<p>Councils need to ensure the development of a diverse and high quality market in care and support services to offer real choice and control to service users and their carers.</p> <p>Commissioning strategies based on the local JSNA, and in partnership with other local commissioners, providers and consumers of services should incentivise development of diverse and high quality services, and balance investment in prevention, early intervention/reablement with provision of care and support for those with high-level complex needs.</p> <p>User-led initiatives and a much wider range and scale of services to address local need should emerge, in a market that is increasingly populated by individual purchasers.</p>					
Key Dates and Deliverables:	April 2010		October 2010		April 2011	
	<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 areas.</p> <p>These commissioning strategies take account of the 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 stakeholders are clear on the impact that purchasing by individuals, both publicly (personal budgets) and privately funded, will have on the procurement of councils and PCTs in such a way that will guarantee the right kind of supply of services to meet local care and support needs.</p>	
How likely are we to achieve this milestone by this date?	Very likely		Very likely		Very likely	
	Fairly likely	X	Fairly likely	X	Fairly likely	X
	Fairly unlikely		Fairly unlikely		Fairly unlikely	
	Very unlikely		Very unlikely		Very unlikely	

Milestone 5:	Local commissioning	
Key Questions:	<ul style="list-style-type: none"> Are we working with providers so they understand how we want them to develop and how they can develop flexible support arrangements? 	Yes
	<ul style="list-style-type: none"> Have we clear links between adults social care transformation and the NHS local services commissioning? 	Yes
	<ul style="list-style-type: none"> How have commissioning and contracting arrangements been changed to enable providers to offer choice and flexibility 	<p>This has been limited so far for older people and people with physical disabilities. Change of contracts for LD with new framework contracts. And for Mental Health major review of contracted services underway</p>
	<ul style="list-style-type: none"> How are we shaping the market in order to develop a supply of services that will meet the needs of all citizens that require social care? 	<p>Briefing and consultation programme for key provider sectors. Reduction of block contracts. Development of new services including Personal Assistants and Brokers. Individual Service Fund project in Care Homes for Older People. Major review of provision and contracts in LD services, framework contract programme</p>
	<ul style="list-style-type: none"> To what extent are users, carers, providers and third sectors been involved in developing the commissioning strategy? 	<p>Regular meetings with Providers and annual Commissioning Conference. Good involvement of LiNK. Carers involved with development of strategies. Involvement of service users is more developed in LD and MH – beginning to happen for older people and people with physical disability</p>
	<ul style="list-style-type: none"> What are we planning to do next? 	<p>Ageing Successfully strategy developed by April 2010. MH strategy implemented. Implementation of LD Framework Contracts. Review of contracts and contract</p>

Milestone 5:	Local commissioning	
		arrangements. Development of day services strategy
	<ul style="list-style-type: none"> • What could prevent us from achieving this milestone? 	Non engagement of key partners/stakeholders. Financial situation and scale of efficiency savings. Size and timescale of the changes
	<ul style="list-style-type: none"> • What external support would help? 	Highlighting of good practice where milestones have been achieved by other Councils
Key Risks and Mitigating Actions:	<ol style="list-style-type: none"> 1. Non-engagement of key stakeholders/partners 2. Financial situation 3. Scale of change and timescales 4. Limited local, regional and national evidence of impact of changes 	<ol style="list-style-type: none"> 1. Communication and Engagement Strategy and plan. Regular meetings with stakeholder groups. 2. Medium Term Financial Plan. Risk Registers. Regular monitoring and review 3. Robust programme and project management. Communication and Engagement strategy. Risk re 4. Evaluation criteria developed – providing the evidence of where to invest/dis-invest locally and nationally.
Useful Information:		