

The Turnaround Project

Report by the Interim Deputy Director for Adult Social Care to Scrutiny Committee, 26th April 2011

1 Introduction

- 1.1 This report provides an update on the development of the Turnaround Project – a key initiative in Adult Social Care (ASC) which aims to identify people who may be at risk of admission to residential care, and turn them back. It explains what has been learnt through the delivery of the project and how the learning from the project will now feed into the development of ASC's approach to prevention and early intervention.

2 Background

- 2.1 The Turnaround Project was one of several important initiatives to emerge from work undertaken by the Council on prevention as part of the Transforming Adult Social Care (TASC) Programme. Other initiatives have included the redesign of Continence Services in the county, the development of the Re-ablement Service, and the development of a new model for prevention in Adult Social Care.
- 2.2 The Turnaround concept emerged from the Council's work with the Institute of Public Care (IPC) in 2009/10 to learn more about older people's pathways into intensive social care services, and what could be done to prevent or delay their need for residential care in particular. The research indicated that it may be possible to identify people who are at risk of admission to residential or nursing care, and turn them back.
- 2.3 The Turnaround Project was established to see whether this vision could be made real and whether the new approach would prove to be effective. Key questions posed by the project were:
 - Can we identify people who are at risk of high dependency of ASC services and admission to residential care?
 - Can we identify people who would benefit from this new type of service and who also have the capacity and motivation to change and "turnaround"?
 - Can we make preventative services for older people more targeted, more proactive and more effective?
- 2.4 The project approach involved:
 - An initial development phase to develop the concept, test assumptions and develop the tools that would be need to turn the Turnaround concept from theory into practice.
 - A "Mini Trial" – work with practitioners in Banbury to identify candidates and test out the Turnaround approach

- Wider locality trials – to increase the number of clients involved
- Evaluation and business case preparation

2.5 However, difficulty in finding service users with whom to trial the Turnaround approach proved to be a major barrier for the project. There were a number of reasons for this, including:

- **Finding suitable candidates** - Currently the ASC system does what it was designed to do by identifying and providing support to people with critical and substantial needs, but also by ‘screening out’ everyone else. People with low or moderate needs are deflected and currently ASC retains no information about them following their contact us. This makes it hard, if not impossible, to find people who might benefit from targeted early intervention, including future Self-Funders - people who fund their own social care but who may ultimately rely on our highest cost services. Currently, a significant proportion of recipients of ASC funding for residential and nursing care are people who originally funded their own care but only ‘appear on our radar’ when their funding has run out.
- **Risks of targeting ‘too soon’ or ‘too late’** – The project has exposed the high financial risks involved in targeting service users either ‘too soon’ or ‘too late’ on their journey into and through ASC services. ‘Too soon’ and there is a risk that money will be wasted on people who are not in fact at risk of admission to residential care. ‘Too late’ and the person may lack the capacity for recovery and restoration.
- **Managing scarce resources** – the majority of candidates deemed potentially suitable for the Turnaround approach had recently received the Re-ablement Service but were still in need of ongoing support. This raised the question as to whether it was appropriate – given the relatively high cost of Re-ablement - to invest even more resources in pursuit of an outcome that had not been achieved by the Re-ablement Service, which is designed specifically to ‘turn people around’

3 Learning from the project

3.1 The Turnaround project has informed our understanding of what is needed for ASC to be able to deliver effective preventative services and evidence their effectiveness, particularly around:

- When and who to target with preventative initiatives
- Current challenges in identifying and targeting people with ‘low and moderate’ social care needs
- The need for services that can address clients’ emotional as well as functional needs
- The potential for the Re-ablement Service to deliver much of the Turnaround approach

- The focus of our existing services and support - are we already working proactively to 'turn people around' or just holding them steady?
- The need for better data and information about client needs, their use of our services and the factors that trigger progression into and through ASC services

3.2 It has shown that if ASC is to improve its ability to identify and target individuals who are likely to need or progress toward our most costly services, then we will need to improve our understanding of the interaction between clients' needs and social care spending. Although a significant proportion of the ASC budget is spent on preventive services and interventions, the project has shown that we need to:

- Improve our understanding of the conditions and circumstances that give rise to higher spending and which will be most receptive to intervention – so that we can be clear that our resources are being targeted to greatest effect
- Optimise the effectiveness of our combined resources and “menu” of preventative services – so that we can help more people to maintain their health, wellbeing and independence and protect remaining resources for the minority who will need them, when and only when this need is unavoidable

4 Conclusions and next steps

4.1 Following a formal review of the project in February 2011 it was decided that the issues arising from the Turnaround Project need to be considered within the context of ASC's overall approach to prevention and early intervention. The following issues and 'lines of enquiry' will now be taken forward in this context:

- **What data and tools does ASC need to improve its targeting and management of its resources?** – the work undertaken by the Turnaround Project has helped us to see how ASC could improve its use of data to better target resources and prevent or delay progression through the social care system. We will now take this forward and seeking to develop tools and guidance that will help our staff to identify people who may be at risk and better target our efforts and resources.
- **Re-ablement** – We consider, and specify as required, how this key service can play a greater role in identifying people who may be at risk of high dependency on our services and also how it might be made more effective with a stronger focus on client's emotional as well as functional needs.
- **Identification of people with low and moderate needs** – We will consider and evaluate the case for changing our procedures to

capture information about these clients to enable us to better target services. No data is currently retained for these clients and this will be a major barrier to improving targeted early intervention unless it is addressed.

- **Bereavement and loneliness** – We will consider the impact of these circumstances on service users' capacity to remain independent and how we can best address the current gap in the system / community's response to these needs.
 - **Permission to personalise and go the extra mile** – We will consider what would help practitioners to deliver more creative and effective care plans that might turn people around rather than merely hold people steady / prevent further decline.
- 4.2 Alongside the Turnaround Project, and as part of the TASC programme, we have developed a "New Model for Prevention in Adult Social Care". This new approach shifts the thinking around prevention firmly towards a Value for Money approach where the focus is on the effectiveness of our substantial investment in preventative services and interventions. The approach moves away from individual and ad hoc preventative initiatives to an integrated approach that is focused around core objectives for prevention, joins services and budgets together to achieve greater synergies in terms of improved outcomes and efficiency savings, and is supported by robust management information and performance management systems.
- 4.3 ASC's Strategic Commissioning Team is currently preparing the commissioning programme for 2011/12 and is considering how the work needed to develop and implement the New Model for Prevention and the work emerging from the Turnaround Project will be taken forward, within a whole system context and also taking account of key developments, such as GP commissioning.
- 4.4 We are aware of the high level of interest in this area from the Scrutiny Committee and among many other stakeholders. We will be considering as part of this process how we can best engage with stakeholders and we will keep you informed on developments.

JOHN DIXON
Director Director Adult Social Care

Contact Officer:
Rachel Lawrence
Service Manager, Promoting Independence & Prevention
(01865) 323867