

**15**

**YEARS:**

**FUTURE DIRECTION AND  
STRATEGIC AMBITIONS  
FOR ADULT SOCIAL CARE  
IN HERTFORDSHIRE**

**2018 - 2033**

**Adult Care Services  
Hertfordshire County Council**



# Adult Care Services Fifteen Year Direction

## Foreword

Social care budgets have been under pressure for seven years and future funding remains uncertain. Although there are fewer people getting council-funded services, the people we do support have more complex needs and need more care. The cost of care has also increased, together with changes in the law which set out new rights for carers and other groups.

Longer term planning is now required to ensure people's satisfaction with services is maintained whilst resources reduce. Strategies are needed to make sure the right range of housing and other accommodation is available, to ensure the development of the right workforce with more flexible skills and investment in the right technological solutions in line with people's expectations. Getting good value for money will be important and we will need to be prepared to decommission services where they no longer achieve the outcomes people want.

It is not possible for us to fully know how national events will influence the sector in the coming years; we do know that delivering services successfully through this period will demand our very best focus and attention, and we will need to regularly reflect upon and review plans.

This Fifteen Year Direction document sets out our ambition for the future, to guide the development and transformation of our services for all the people we support. We have discussed and developed the document with those who have an interest in this area, so we can work together to develop and deliver vital services united in a common understanding and vision of the role of adult social care.

As a leader in the local health and wellbeing system it is our responsibility to set out a vision for the future of adult social care in our county and then to work tirelessly and collaboratively with those who use services, communities and other stakeholders to make it a reality.

# Adult Care Services Fifteen Year Direction

## 1. Introducing our Future Direction

This statement is our opportunity to set out how we will develop and support social care services in the future. It will help us plan services, provide a direction for staff and give a shared understanding of the vision for adult social care in Hertfordshire.

[Hertfordshire County Council's Corporate Plan](#) sets out a vision for people in Hertfordshire to live healthy and fulfilling lives. The Corporate Plan recognises the role of the council in supporting all people in Hertfordshire people to live happy, purposeful and independent lives as a part of a strong community network.

We are also active partners in the [NHS Sustainability and Transformation Partnership](#) (STP) process which includes working together around preventing need, joining up health and social care to manage frailty as a growing demographic trend - and playing a key role in urgent and emergency care for people. The council will also work closely with the NHS in other areas including estates, IT and data sharing between organisations and workforce strategies.

Within this framework the adult social care system also needs to meet rising expectations in society for personalised services, plan for an expanding and ageing population; and plan for medical advances which mean that children born with disabilities now increasingly survive into adulthood.

The statement sets out a **vision** and **four ambitions** to guide our ways of working. Three-year delivery plans will take forward our detailed improvement activity.

The future direction for Adult Social Care is within the overall context of a county council which is committed to fostering healthy and vibrant communities. Our fundamental starting point as a council is that we want to delay, minimise or prevent the need for adult social care altogether.

## 2. The vision for Adult Social Care

The whole council and our partners in the county work to create a place where people lead healthy, purposeful, self-supporting lives, and so help to prevent and reduce care and support needs.

People who need care and support will have the same opportunities for a good quality of life as people who do not.

We will offer services to maximise people's independence and support the freedom to choose, helping people at risk be safe.

All care and support will be personalised to the individual and directed by them over their life. It will be based on their own strengths and their connections with family, communities and professionals.

## 3. The context - Changes in society

### ***Our society is changing and evolving. In Hertfordshire this means:***

- The population is growing and more of us can expect long and healthy lives; we are increasingly able to plan ahead for our future;
- Younger people with disabilities and health conditions are living into adulthood and enjoying much longer life expectancies thanks to medical and care advances;
- Deaths from cancer and heart disease are falling, but more of us experience chronic illnesses and long-term conditions;
- The incidence of dementia and frailty in later life is soaring;
- More of us are taking on caring roles for family and friends.

### ***The way we think about our health and wellbeing is developing in new ways:***

- We know how to live healthy, positive and purposeful lives;
- We know that some care and health needs can be reduced, avoided or prevented;
- We know that people make their own decisions about their health and well being;
- We know that supportive social networks and resilient communities are good for people's health and wellbeing;
- We know that 'communities' can be local neighbourhoods, people with common interests and can be online communities around the world;
- Our expectations are increasing about the quality of care we want;
- People want to be involved and have a say in how their needs are met; they want straightforward solutions from care and health services to support them to lead their lives.

### ***Social, political, financial, economic and technical influences are shaping the adult social care world:***

- It will be a challenge to meet rising demand with public funding;
- People will have more money (especially home owners) which will mean more of us are responsible for paying for our own care;
- It is likely that fewer people will receive publicly funded care in the future, but the future of adult social care funding is uncertain;
- Changes to welfare benefits and pension provision mean that more people are likely to work into older age;
- Social care has become a major part of the local economy in its own right;
- People with disabilities want the opportunity to take part in further education, work full or part time for the appropriate wage and volunteer in their communities;
- Hertfordshire is likely to remain a high cost place to live and work;

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- Advances in digital technology and social media will create new possibilities for providing care and support, with people and families able to co-ordinate their care;
- Social care is part of a broader, interconnected system with health, housing, planning, leisure and libraries, transportation and the private and voluntary sector.

## 4. Strategic Ambitions and actions

### SA1: Information and advice

**When people come to need adult social care, they and their families want good information and advice to get help at the right time.**

The role of the council as a source of advice, information and signposting will become more important. Our information and advice service will fit seamlessly with our partners including the community and voluntary sector, Children's Services, District Councils, Public Health and the NHS. Staff will be well informed and able to assist people to get the information they need. People tell us that they want more specialist advice to help them plan ahead.

We will use data to help prevent needs getting worse and understand the benefit of specific services so we can target these to enable people's independence.

*The focus of our information and advice will be:*

- Preparing and planning for a longer life, including financial, retirement and legal planning and support for carers;
- Facilitating good health and well being;
- How to recover from illness and remain independent;
- What to do when needing care and support and how to access services;
- What to do when caring for others;
- Choosing and paying for care and support;
- Accessible and easy to understand.

*In 15 years' time our information and advice service will:*

- Be delivered virtually and be accessible to everyone;
- Be up to date, comprehensive and available on a 24/7 basis;
- Support people in making connections, reducing loneliness and isolation;
- Be fully tailored to individuals and responsive as needs change;
- Be fully joined up with partners, allowing individuals to access their health and care records;
- Give good information about preventative approaches, encouraging self-help and based on what works;

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### Future Shot - imagining the way it could be

Claire is 45 with an ageing mum who lives 200 miles away. Claire is aware that in the future her mum may need to be supported. Claire's husband has a chronic condition but is in good health now. Claire has been investing in an Enhanced Care ISA<sup>1</sup> for 15 years choosing to top up beyond the standard required contribution levels.

Claire arranges a forward planning chat with her local care advice team. While she knows that she could have an on-line catch up whenever she wants, she has made an appointment for a video call with her care advisor. This will be a good opportunity for Claire to review her wellbeing projection and check out whether the Care ISA is on track.

Claire's mum joins the call for the first half an hour as she and her mum have been discussing how they can put a care plan together to store it until needed. It's been really easy to pull the plan together but they want the care advisor to cast her eye over it to see if there are any opportunities they've missed.

### **Actions for the three year delivery plan:**

- Review our information and advice strategy;
- Implement a new Assistive Technology Strategy;
- Link with the council's digital agenda and the new council website;
- Develop our 'HertsHelp' offer in Hertfordshire;
- Target information at specific groups such as carers;
- Build a library of useful apps that we will promote;
- Increasingly connect our social care information systems with the NHS;
- Enable people to access their social care records on line;
- Equip all our staff to guide and sign post and review our use of advocates;
- Build on the work to connect staff into communities.

### **SA2: Connected Communities**

#### **Recognising that we depend on each other and we need to build supportive relationships and strong and resilient communities.**

Family, friends and community will in most cases provide enough support for people to live fulfilling lives. The role of the council will increasingly be about helping people connect to sources of support in their own personal networks and local communities.

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<sup>1</sup>These don't exist in 2018 but one of the things we are trying to influence nationally is innovation in how people financially plan for old age which could be by incentivising saving<sup>1</sup>

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*The focus of our services will be:*

- Developing support services for all people in caring roles ensuring a focus on carer well-being, support for carers who are faced with changing circumstances, and ensuring carers are supported when crises emerge;
- Influencing the design of housing, neighbourhoods and environments so that they work better for those with care and support needs;
- Understanding our communities and what they can offer; supporting communities to build capacity and resilience, fostering new approaches and building networks
- Connecting people with local opportunities and resources;
- Working with our providers and partners so that they adopt this way of working.

*In 15 years' time our family, personal network and community support offer will:*

- Place carers at the heart of our approach, recognising and rewarding their contribution, giving them the skills they need to perform their role and at the same time maintain their own health and wellbeing;
- Connect the individual to resources and opportunities tailored to prevent need arising or increasing, enabling recovery and independence, and combatting loneliness and isolation;
- Be co-produced with service users, facilitating and empowering people to have control the design and delivery of services;
- Be accessible in locations throughout Hertfordshire, both rural and urban, as well as online, potentially as part of a wider offer with partners and providing focal points for inter-generational connections and community projects to flourish.

## **Future Shots – Imagining the way it could be**

Sophie is 20 years old and is combining a university course with being a carer for her disabled father. She is really well supported by her local carer network both online and whenever she needs a face to face chat – she finds this is keeping her going because juggling these demands can be tricky.

She's been really pleased with the recent Technology Refresh that the Hertfordshire Equipment Service did for her dad; they've upgraded his tech to the latest version and she's able to check in with him whenever she feels like it; it's taken a little bit of pressure off. Recently the carers network said Sophie might want to do the advanced Carers Certificate but Sophie wants to wait until she's finished her degree; doing the basic Certificate was really useful and entitled her to the Carers Minimum Allowance which has helped with the household budget

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Simon is 70 and was bereaved a year ago. He knows that whenever he likes he is welcome to help out at the local 'Social Shop'. He's been dropping in a lot recently and has just started to volunteer to befriend older people after having been approached by another volunteer. It's been a difficult year but Simon is feeling that the befriending is really helpful in making new friends.

### **Actions for the three year delivery plan:**

- Embed our Connected Lives approach into practice, and ensure a common understanding through the entire care workforce;
- Develop a new Carers' Strategy;
- Establish, deliver and evaluate a pilot project on using predictive data;
- Ask people how they'd like to spend their leisure time and review our day opportunities and transport offer accordingly;
- Do more to get people into education, employment or volunteering to broaden their own connections and independence, linking with the council's overall volunteering strategy;
- Develop our strategy for community hubs, making the best use of property and assets.

### **SA3: Valuing Independence**

**Services that prevent future need, help people get back on track after illness and support disabled people to be independent, living purposeful lives with all of the freedoms and opportunities offered by society.**

We will help keep people healthy and active, recover quickly after illness with suitable therapy and short term support, and prevent future social care needs. For those with life-long care needs we will help them to be the most independent they can be and have the same choices and life experiences that those without care and support needs live through. We see having access to technology and housing and the design of the built environment as critical to independent living.

*The focus of our services will be:*

- Smooth and seamless recovery services for people who have ill-health, particularly where they have to go into hospital, this might include access to therapy and community based health care;
- Supporting people to organise their own joined-up, local and personalised health and care plans, offering flexibility choice and control;



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- Being at the forefront of advances in technology including digital technology, virtual and assisted reality and voice technology. Using assistive technology creatively to maintain people independently in their home, prevent escalation of need and support family and friends who have a caring role;
- Working with those at risk of poor health by using data to spot problems early and intervening to prevent this;
- Lobbying for, supporting and commissioning housing that is tailored to individuals who want to remain independent for younger and older people;
- Significantly increase the amount of supported housing available to all people with care and support needs;
- Working with young people to support a positive transition into independent and purposeful adult life;
- Working with people of all ages to ensure they have meaningful opportunities to earn a living and play a full part in society;
- Ensuring those who provide social care services share a commitment to enablement and independence and work in ways which promote this.

*In 15 years our 'valuing independence' offer will:*

- Be fully joined up with health services to tailor support that will support people to get well and prevent readmission to hospital;
- Plan for long term housing and employment solutions and understand when people will need to access these.

### **Future Shots – imagining the way it could be**

Lucas is a young adult with autism and up to now has been supported by his family at home. He knows his social care advisor, Lisa, really well and they've been working together to plan how Lucas can live independently in the community. This has been the plan since Lucas was a young teenager so there has been plenty of time to work on the skills that Lucas will need.

Lisa has found it really easy to support Lucas to identify a place to live thanks to the helpful Housing Care and Support Officer at the local district council who links with adult social care to arrange housing. This has meant that Lucas has been able to consider several housing options, and Lucas has chosen a shared ownership option.

The house is adapted to the latest standard for Assistive Technology with voice and video links to Lucas's family so that Lucas can alert them if he wants their help. Lisa has arranged for a regular visit from Lucas's Independence Mentor and generally everyone is sure that Lucas can make a success of things.

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Jon lives alone and was recently discharged from hospital after an operation. The 'Welcome Home' team visited Jon in hospital to plan with him the care he would need to help him get back on his feet again and back to managing for himself. The Team discussed with Jon the sort of apps that were available so that his daughter could monitor that he was ok although she is based in Devon. The team also arranged for Jon to link into a group chat friends forum that meets online and organises a lot of social events in the neighbourhood. Jon has made a good recovery, and feels more involved with things locally. He and his daughter have decided to continue with the app monitoring for added peace of mind.

### **Actions for the three year delivery plan:**

- A new approach to agreeing with people what their care and support needs are, based on what their strengths are, what friends and family can help with and what is available in the community;
- Working with commissioned providers so they support these strategies;
- Define our approach to ensure people are discharged from hospital at the right time, and with the right support, delivering required business process improvements with NHS colleagues;
- Build on new interventions which alleviate pressures in hospitals for example 'Discharge Home to Assess' and aligning care worker teams with the NHS;
- Put in place a new Occupational Therapy strategy to promote independence;
- Develop a new employment and skills strategy for adults of all ages exploring what our communities, private sector businesses and charitable organisations can offer;
- Work with Children's Service to create an education, employment and skills strategy for older children transitioning into adult services, linking with groups such as the Local Enterprise Partnership, Hertfordshire Adult and Family Learning Services and Further Education Colleges;
- Develop an increased range of services for people with Autism and Asperger's;
- Build better relationships with District Councils and the housing sector. Develop plans for each district to deliver our ambitions to extend extra care and supported living accommodation;
- Take forward a strategy aimed at modernising assistive technology and using the benefits of digital technology;

### **SA4: Caring Well**

**Developing services that are personalised, good quality, address people's wellbeing and keep them safe and resilient. Services will be joined-up around an individual's needs and those of their family carers. Personal budgets are central to this approach.**

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Care services must be services that all of us would be happy to use ourselves. They must be high quality and put the individual at the centre. They should offer value, choice and control and help people to be safe and make them feel valued and respected.

*The focus of our services will be:*

- Respecting the choices and wishes of the individual. Helping people to be safe and take risks if they want to;
- Enabling self-help and self-care for people to manage long-term conditions;
- Offering flexibility and choice to arrange care at people's convenience;
- Supporting a vibrant and resilient local market for care and building the profile of the sector as one which offers attractive career options;

## **Future Shot – Imagining the way it could be**

Sam has advanced multiple sclerosis and uses care and support to help him live his life well at home with his family. He plans his care and support arrangements using an IT system that connects to his care record and allows him to choose from a range of carers that he knows and trusts. He can organise care where and when he wants it and pays with a flexible budget.

*In 15 years' time our 'Caring Well' offer will:*

- Be directed by the individual;
- Be mainly home based rather than delivered in residential settings;
- Be driven by a care plan which the individual has organised themselves or been fully consulted upon which builds in prevention and achievement of outcomes;
- Make available a range of technologies and support that the individual can purchase and organise themselves, easily and quickly dealing directly with providers rather than through the council;
- Be delivered by staff who are committed to the wellbeing and safety of the individuals they serve.

## **Actions for the three year delivery plan:**

- Roll out new practice principles which support delivery of these approaches;
- Consolidate and drive forward our new younger people's disability service;
- Review our workforce strategy including our strategy for Personal Assistants; innovating to attract, develop and retain people into the profession;
- Review our strategy for how individuals use our IT systems to manage and organise their care and build the investment case;
- Review our crisis response arrangements to make sure there is a robust and supportive offer for people who use services and their carers;
- Plan for the future approach to provision of the council's in house services;

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- Review our strategy for day opportunities;
- Respond to the Government's proposals around supported housing by working closely with District Councils to increase supply and support to people;
- Review our services for people with complex needs and increase provision;
- Create integrated personal care services for those with chronic and complex needs alongside the NHS, planning care jointly and using joined up personal budgets.

## Adult Care Services Fifteen Year Direction

### Population projections for Hertfordshire in 2030 by major care group

