Managing the Front Door to Social Care
Demand and prevention

A New Future for Social Care

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About North Tyneside

• Metropolitan Council in NE England:
  ○ Population of 202,700 (older people 19%)
• Mix of coastal, urban and semi rural towns and villages
• Low levels of unemployment
• Low levels of crime
• Clean and green environment
• Lower levels of deprivation – NE region
• Safest Met
Our challenges

• Mixed area of both wealth and deprivation
• Gap in life expectancy - 10 years
• Obesity, alcohol and CVD all major challenges
• Low levels of Direct Payment users
• Satisfaction rates have dipped BUT are improving

• Rising demand:
  • Customer expectations
  • Complexity / frailty of need
  • NHS and other professional referrals
  • And of course, there’s less money...
Our story

2006
£9m overspend and rising - high % of in-house provision

2008
Balanced Budget BUT increasing numbers of placements - over provision in the market

2010
Personalisation - customer numbers rising year on year and poor performance on review and outcome indicators

2012
Failure demand in assessment and care management - high proportion of low level packages

2014
Care & Connect launch, reconfiguration of Care Call, and establishment of Select & Direct

Council Wide Efficiency Programme
Managing demand at the front door

- Stratifying and understanding our customer base:
  - Over a third low level packages:
    - Community alarm, meals, equipment
- Removed social work management and gave direct access to services
- Marketed community alarm service with telecare:
  - Tiered offer
  - Commercial approach
- Created ‘select and direct’:
  - Direct access over the phone
  - promoted use of direct commercial outlets
Levels of supported people

People receiving a service as at

- All people
- CBS
- Perm. Care

Year 2011: 925, 4560
Year 2012: 1015, 2240
Year 2013: 895, 2130
Year 2014: 890, 2235
Year 2015: 717, 13580
Alternatives to assessment

Self Serve

- Direct access to help online
- Information – self serve
- Information and Signposting
  - Telephone and face to face information
- Advice and support on specialist areas
- Advisors
- Connectors and Resilience
  - Help to access local / universal services
- Advice and information as part of the core offer
- Care Planning
- Intensity of Support
- Personal Budget
Information self serve

- **My Care** – [www.northtyneside.gov.uk](http://www.northtyneside.gov.uk)
  - The care and support system online
  - Used existing platform - updated and promoted
  - Structured to direct people to self help options first

- **Promotion:**
  - Espresso road shows
  - Council magazine
  - Dedicated sessions for other Council services e.g. libraries
  - Ongoing

- **Buy in from CCG and FT**
SIGN

- CVS and Council network of existing services
- Free telephone or face to support
- Uses and helps maintain the online resources
- No direct funding but:
  - Free training / support
  - Communication network
- Contacts with over 30,000 per year
- Common language and service standards
- Widely promoted
- App Launch – external funding

[www.sign-nt.co.uk](http://www.sign-nt.co.uk)
Advisors

• From the SIGN network existing commissioned services that offer the expert advice:
  • Finance
  • Advocacy
• Independent quality assurance
• Based on existing contracts no additional money
• Steady demand – no notable increase
Connectors

• Most significant gap:
  • Those in between straightforward advice and information and care and support
  • Spending time to connect people to their natural / local resources takes more than a leaflet or quick chat

• Four main aims:
  • To plug the gap – preventing people entering assessment
  • Test out a new approach / alternative to assessment
  • Identify gaps in the community and plug them
  • Building resilience
Care and Connect

- Used Care Act monies to establish:
  - New team based in a local customer service centre and contact points across the borough
  - 4 x Community Navigators
  - Telephone and face to face – no home visits
  - Referrals / contacts from anyone
  - Support up to 4 weeks

- Redesigned front door pathway to redirect
- Focus on those leaving reablement
- Dedicated time to map and understand community resources – “community map”
Outputs

Information, advice and Signposting (96%)

50% received support passed their initial visit

9% required an assessment

2.4% received Personal Budgets delivered ALL via Direct Payments

• Expanding the offer to families
• Using learning to redesign the core assessment model
Care planning

- **Social work:**
  - Mandatory training and development for each worker on their new duties under the Car Act
  - Making clear that advice and information was the FIRST port of call and this had to be evidenced

- **Planning Cafe:**
  - Partnership with CVS
  - Alternative to social work
  - Advice and information as the core principle
  - Community map rather than traditional offer
  - Co production
  - Individual resilience
The challenges / lessons learnt

• We DO NOT have this cracked yet!
  – IT, IT and IT!!!
  – Pace of change with the NHS
  – Behaviour change with customers
  – Embedding change with assessment teams
  – Continued involvement from CVS
  – A whole offer for families
  – Learning from Childrens’ Services – early help assessments
  – Addressing Health at the Front Door
Where next

• **IT**
  - New web platform
  - Calculators
  - Unified service directory
  - Mobile working

• **Care and Connect:**
  - Mainstream social work – new operating model
  - Children and families

• **Closing the front door**
  - Moving resources to pre front door
  - Finding a new name!
Questions

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