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<b>Report to:</b>	Cabinet	<b>Date of Meeting:</b>	4 June 2015
<b>Subject:</b>	Adult Social Care Change Programme	<b>Wards Affected:</b>	All Wards
<b>Report of:</b>	Director of Older People		
<b>Is this a Key Decision?</b>	No	<b>Is it included in the Forward Plan?</b>	Yes
<b>Exempt/Confidential</b>	No		

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### Purpose/Summary

To present Cabinet with an update on the progress of the Adult Social Care Change Programme and the implementation of the Care Act 2014

### Recommendation(s)

- i. agree the proposed approach associated with supported living and note the intention to report back to the Cabinet outlining the vision and models of support; and
- ii. note the content of the report

### How does the decision contribute to the Council's Corporate Objectives?

	<b><u>Corporate Objective</u></b>	<b><u>Positive Impact</u></b>	<b><u>Neutral Impact</u></b>	<b><u>Negative Impact</u></b>
1	Creating a Learning Community		✓	
2	Jobs and Prosperity		✓	
3	Environmental Sustainability		✓	
4	Health and Well-Being	✓		
5	Children and Young People		✓	
6	Creating Safe Communities		✓	
7	Creating Inclusive Communities	✓		
8	Improving the Quality of Council Services and Strengthening Local Democracy		✓	

**Reasons for the Recommendation:**

Cabinet needs to be aware of the preparation towards and the consequent impact of the implementation of the Care Act 2014 on the Council and the new duties under the new legislation which came into force from April 1<sup>st</sup> 2015.

**Alternative Options Considered and Rejected:**

Maintaining the status quo was not an option due to new legislation and demographic and budgetary pressures.

**What will it cost and how will it be financed?****(A) Revenue Costs**

With regard to the Care Act the Council has received New Burdens funding of £1.969m in 2015/16. There is also a sum of £0.834m within the Better Care Fund associated with the Care Act implementation and this will be captured within the Section 75 Agreement currently being drafted with colleagues in Health. Funding for future years is not yet known.

**(B) Capital Costs**

The Council has been notified of an allocation of £0.307m in 2015/16, as part of the £0.849m Social Care Capital Grant, for capital costs associated with the implications of the Care Act 2014.

**Implications:**

The Care Act represents the most significant change in Adult Social Care in recent years, with changes to underpinning legislation, eligibility criteria, funding, the status of Adult Safeguarding and a host of other associated areas which are likely to impact across the Council. The known impacts of the proposed changes are described in the report. Adult Social Care's day-to-day operational model will expand and change over the period of implementation.

Demographics indicate a growth in demand for Care and Support services. The Council's strategic commissioning intentions will support market development to meet the range of needs for the individuals of Sefton, offering choice as to how their needs are met. Market shaping activities will encourage the care market to expand, where possible supporting economic growth and access to jobs.

An underpinning principle of the Care Act 2014 is the promotion of health and wellbeing to prevent, reduce or delay the need for care and support focusing on keeping people as independent as possible through prevention and early intervention. Comprehensive information and advice will enable individuals to make early informed choices about their care and support; those entering the care system will do so through clear pathways and be able to choose how their care and support needs are met through a range of commissioned support or direct payment.

The following implications of this proposal have been considered and where there are specific implications, these are set out below:

<b>Financial</b>	
There is a significant financial risk with potential additional cost for Care Act 2014 implementation and on going delivery.	
<b>Legal</b>	
The Children and Families Act 2014 and the Care Act 2014 and subordinate legislation and statutory guidance.	
<b>Human Resources</b>	
Regular consultation takes place with trade unions through recognised processes. Officers will continue to consult with trade unions and employees as necessary following these recognised processes.	
<b>Equality</b>	
1. No Equality Implication	<input checked="" type="checkbox"/>
2. Equality Implications identified and mitigated	<input type="checkbox"/>
3. Equality Implication identified and risk remains	<input type="checkbox"/>
The Care Act will have a positive equalities impact with an outcome based needs assessment ensuring that individuals views, needs and wishes are placed at the centre.	

### Impact of the Proposals on Service Delivery:

The Care Act represents the most significant change in Adult Social Care in recent years, with changes to underpinning legislation, eligibility criteria, funding, the status of Adult Safeguarding and a host of other associated areas which are likely to impact across the Council. The known impacts of the proposed changes are described in the report. Adult Social Care's day-to-day operational model will expand and change over the period of implementation.

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### What consultations have taken place on the proposals and when?

The Head of Corporate Finance and ICT can confirm that the Council has received £2.803m (as detailed above) in 2015/16 to support the costs of the implementation of the Care Act from April 2015. However there has been no announcement as to how much, if any, additional funding may be released to support any ongoing delivery of the Care Act

in future years. Any required expenditure above this level is not contained within the current Medium Term Financial Plan (FD 3548/15)

The Head of Corporate Legal Services have been consulted and any comments have been incorporated into the report. (LD 2840/15)

Meetings have also taken place with key partners, such as Sefton CVS, Healthwatch and the Carers Centre, to share information and explore ideas. These continue to take place.

### **Implementation Date for the Decision**

Following the expiry of the “call-in” period for the Minutes of the Cabinet Meeting

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### **Background Papers:**

There are no background papers available for inspection

## **1. Introduction/Background**

- 1.1 Implementing the changes associated with the Care Act is part of the Adult Social Care Change Programme. The overall aim of the programme of work is to develop a model for Sefton Council's Adult Social Care (ASC) that is sustainable, modern and flexible, delivering the four strategic priorities as set out in the ASC Strategic plan 2013-20. The strategic plan highlights the Council's commitment to safeguarding how the Council will focus resources on the **most** vulnerable, the need to work with our partners and the community, and the development of the market to deliver the required change. The scope of the programme also includes delivery of approved budget savings and designing the new model for Social Care.
- 1.2 To oversee the implementation of the Care Act in Sefton, the governance and work streams for the Adult Social Care Change Programme has been appropriately refreshed. The Programme Board oversees four distinct projects each working to their own implementation plan that includes working towards completion of reviewing relevant documents, policies, considering training and workforce development, charging and cost implications as well as understanding and identifying potential risks.
- 1.6 Prior to April 2015 implementation of the Care Act, Adult Social Care completed three self-assessments to determine Council's readiness for the changes. The first self-assessment was completed in August 2014 and shows that the Council were on track at this point, this assessment was repeated in September 2014 and January 2015 and showed that the Council was progressing well in the key areas. There is an upcoming stocktake in May which will be completed but had not been received at time of submission of this paper.
- 1.7 The New Burdens monies identified by Government associated with implementing the Care Act and the Better Care Fund are not likely to meet the true cost to the Council of implementing such a significant change, especially given the financial challenge. The additional burdens settlement for 2015/16 is £1.969m. There is flexibility around the usage of the money and it has been allocated around the priorities for implementation of Care Act. There is also a sum of £0.834m contained within the Better Care Fund to support elements of the Care Act implementation from April 2015.
- 1.8 There is an on-going programme of workforce development alongside stakeholder and partner activity, for example, Voluntary, Community Faith sector. Officers have embarked on a series of focussed development workshops with Adult Social Care staff and corporate legal services to ensure readiness for the duties under the new act. This has been supplemented by wider workforce briefings to enable information sharing with areas that closely link to Adult Social Care.

## **2.0 The Care Act 2014**

- 2.1 The Care Act 2014 is a comprehensive piece of legislation which combines some new initiatives with an overhaul of many and varied pieces of legislation that existed for Adult Social Care. Such a major piece of legislation is inevitably supported by a range of secondary legislation (regulations) and government

guidance, much of which has yet to be finalised or drafted by the government at this time. The overhaul means that there is one comprehensive source of legislation for Adult Social Care and it codifies many of the Council's existing practices.

2.2 Cabinet Members have been kept apprised of major departmental activity to prepare for the implementation of the legislation accordingly.

2.3 The new initiatives contained in the legislation include:

- the carers right to have an assessment in their own right (and not simply as part of the care package)
- introduction of national eligibility of assessment criteria (removal of the FACS criteria)
- financial cap on payment for care by an individual. This will be introduced in April 2016.

2.4 A number of policies will need to be reviewed in due course and if they have any budgetary implications these will need to be considered by the designated Cabinet Member.

### **3.0 Care Act 2014 Update – progress so far**

#### **3.1 Wellbeing and Prevention**

Key developments and work streams:

- Advocacy: On the 1st April 2015, following a successful procurement process led by Liverpool City Council, Voiceability were awarded a contract to deliver both Independent Mental Capacity Act Advocacy and Independent Care Act Advocacy on behalf of both Liverpool and Sefton Council.
- The Council is currently exploring options with the Company to provide a presence in the Borough and Voiceability has entered into a partnership agreement with the Alzheimers Society and will operate from two office bases, one based within the Neurosupport Office based within Liverpool City Centre and the other based within the Alzheimers Society office based within Southport. Discussions are ongoing about other parts of the Borough.
- In addition to the staff that are employed by Voiceability to deliver this service, the Alzheimers Society will provide a full-time Specialist Dementia Advocate, sharing equipment, casework systems, office space, team meetings and casework supervision with VoiceAbility advocates.
- Voiceability is one of the largest leading national advocacy organisations in the country who provide services to over 35 Local Authorities and NHS Organisations throughout the country. In May 2011, they were awarded the Quality Performance Mark for advocacy and in April 2012 were also awarded the IMCA specific Quality Performance Mark+. The organisation has a breadth/depth of experience around Advocacy under the Care Act, and over the last 18 months has been working with Parliamentarians to draft Care Act legislation and with the Department of Health to draft/amend substantial sections of Care Act Regulations and Guidance.

- The organisation merged with Advocacy Experience who has held a contract with both Sefton and Liverpool City Council since April 2007, to deliver Independent Mental Capacity Act Advocacy across both regions.
- Market facilitation: the refresh of the Prevention and Early Intervention Strategy to support development of the market and information services will commence shortly. There is also ongoing work with colleagues in Public Health to ensure there is connectivity on various schemes and aligned to the BCF programme. The Care Act places a duty on Authorities to develop a market that delivers a wide range of sustainable high-quality care and support services that will be available to our communities. As Cabinet is aware the Market Position Statement details the future requirements for the community of Sefton and this is being built upon with the development of the Market Facilitation Strategy and plan.
- Information services: there is a new statutory requirement to provide information services. Whilst we can utilise existing services to support this, the requirements to provide information are extensive and there is a duty to provide a range of materials to be made available. The Council is in a good position to meet these extended obligations. We are now developing and exploring what needs to be developed across the Council. We have also developed some new literature for both carers and the cared for that will be distributed to community services. Alongside this we have refreshed the hardcopy Sefton Directory to reflect legislation change and provide the general public with up to date information on eligibility and assessments as well as community services.
- Provider failure: The Act makes it clear that Authorities have a temporary duty to ensure that the needs of service users continue to be met if a provider fails. The Council has a responsibility towards all people receiving care regardless of whether they pay for their care themselves or whether the Council pays for it. The Council must ensure that the person does not experience a gap in the care they need as a result of the provider failing. A market failure plan is being developed in conjunction with other Local Authorities to ensure a consistent approach. This development work is still ongoing and Cabinet will be kept informed of progress.
- Prisoners and prisons – The Council is negotiating a Section 75 agreement with NHS England who will act as lead partner and commission the provision of social care services for Sefton's prison and prisoners (HMP Kennet). This provision is anticipated to commence in June 2015 and temporary arrangements are currently in place.

### 3.2 Charging and Financial assessment

Work was undertaken to assess all of the charging implications of the Care Act to ensure full implementation by April 2015. Key areas worked upon ahead of the 1<sup>st</sup> April were:

- The deferred payments process has changed and required additional work and resource. The Council was required to implement a new deferred payment scheme from the 1<sup>st</sup> April 2015 which included elements of local discretion. People who face the risk of having to sell their home in their lifetime to pay for care home fees will have the option of a deferred payment. This means that everyone in a care home who meets the eligibility criteria will be able to ask for a deferred payment regardless of whether or not the local authority pays for their care. Councils have been

able to charge interest on loans and an administration fee to ensure they run on a cost neutral basis. The Council's financial arrangements have been updated to include the changes as required in law and the new policy and associated charges will be published on the Council website.

- There are changes to the financial assessment for people who have a property; work is still underway to estimate the numbers of people affected by this, also there will need to be changes to IT to accommodate the differences.
- Sefton information systems have been reconfigured in line with the Care Act and new elements underwent significant testing by the ASC workforce. This has led to refreshed guidance. Further work is now underway to ensure that systems and process are aligned.

3.3 It has been estimated that there are circa 1,200 self-funders who will become the responsibility of the Council and circa 60 people who will require a deferred payment service. In addition to this the number of additional financial assessments is estimated to be circa 1,500.

#### 3.4 Safeguarding

A comprehensive work plan has been developed to give support and guidance for the Adults Safeguarding Board in relation to the Care Act. Guidance documents have been refreshed and loaded on the Sefton website. Alongside this there is a Safeguarding Adults Board development day to enhance the strategic plan.

#### 3.5 Carers

The Care Act 2014 places new statutory duties on local authorities to support carers of all ages. A carer's assessment is now parallel to the adult assessment requiring support under s20 of the Act. The Act gives carers the same rights to an assessment on the appearance of needs and, if a carer is deemed to have eligible needs, the right to a support plan and personal budget. If an 'eligible need' is identified then it must be met.

3.6 Once the assessment is completed the local authority will need to determine:

- The level of response;
- The level of impact on the carer;
- Whether the carer is providing 'necessary care' for the adult needing support;
- How they will promote the wellbeing of the carer;
- What the local authority will pay and whether the carer will pay;
- Complete a support plan setting out how outcomes will be achieved;
- Provide a statement to the carer (a personal budget) showing what the costs are of meeting their needs and any amount that the carer will pay (if any) and the amount the local authority will pay.

3.7 This will present a considerable challenge to local authorities with a need to review and amend (where necessary) their current approaches to the assessment and support of carers.

3.8 The current situation in Sefton is that the Carers assessment is either conducted by the Carers Centre or by the ASC teams as part of a joint assessment



### 3.9 Key changes from April 2015:

- Sefton Adult Social Care Teams will conduct Carers Assessment utilising a new process and framework
- The Carers Centre will develop the support plans and broker the identified support
- Reconfiguration of systems used by both ASC and the Carers Centre was needed and has been undertaken
- Redefined Service Specification will need to be agreed with the Carers Centre
- Training is needed for ASC and Carers Centre staff on new systems and some training has already been undertaken

### 3.10 As part of the ongoing developments of processes and procedures under the Care Act 2014. The following processes have been adopted from April 1 2015.

#### Sefton Adult Social Care teams will:

- Identify carers in need of assessment
- Complete a Carers assessment in line with Care Act requirements and in a form that is appropriate and proportionate
- Make an eligibility decision based on national minimum eligibility for Carers
- Assess Carers wellbeing through the use of nationally recognised tools
- Identify support and allocation

#### Carers Centre will work closely with Sefton Council to;

- Improve the quality of life for carers', including young carers and young adult carers in Sefton, and
- Prevent or delay the need for care and support
- Provide brokerage, care and support planning
- Identify carers', including young carers and young adult carers at the earliest opportunity, specifically targeting groups considered to be 'seldom seen' or 'hidden'
- The provision of information, advice and guidance, complimenting similar services as provided by Sefton Council
- Signposting and referring carer's, including young carers and young adult carers to the correct information, advice and support to ensure that they are not financially disadvantaged as a result of their caring role
- Supporting carers', including young carers and young adult carers to have their voice heard in decisions that affect them, and where appropriate, advocate on their behalf
- Providing short term, intensive support to those carers identified by adult social care, children's social care and health care services where there is a significant risk of 'carer breakdown'
- Expanding and diversifying the provision of activities and peer support for carers', including young carers and young adult carers
- Supporting carers', including young carers and young adult carers to take part in educational, training or work opportunities that they may feel excluded from because of their caring responsibilities
- Providing a range of learning and development opportunities for carers', including young carers and young adult carers, front line staff and the community

- Through a variety of methodologies, gathering and reporting on carer, including young carers and young adult, experiences of using mainstream health and social care services; and supporting carers to participate in the planning, commissioning and quality assurance of health and social care services

3.11 This new statutory requirement means that all carers are now entitled to an assessment. Although it cannot be stated exactly how many people this will entail it has been estimated to be in the region of 2,500.

#### **4.0 The Care Act key changes and new duties effective from April 2016:**

- a) There will be a cap on the maximum lifetime costs people will pay for their care, it is anticipated that this will be £72k for older people, with a lower cap for those of working age and zero for those people who have existing care needs at the point when they reach the age of 25 years.
- b) A care account will be used to record accrued direct care costs calculated using the Local Authority's usual cost of care rate. General living costs and support costs not identified in the person's care plan will be excluded.
- c) An increase in the financial assessment capital thresholds for those individuals with eligible needs.
- d) Direct payments for individuals residing in long term care.

4.1 The Council can consider introducing a fee to those customers who have the means to pay for their own care privately, but who choose the Council to commission and manage their care services on their behalf. A flat rate fee is proposed which would contribute towards the costs the Council would incur in providing such services as well as managing care accounts from 2016. The Council will liaise with other Councils over this and will adapt proposals to be in line with other Local Authorities once the Care Act has been reviewed fully.

4.2 Implications for the changes to take effect from April 2016 are still being considered and consulted on by Department of Health and will be considered by Sefton later in the year.

#### **5.0 Supported Living Review**

5.1 There has been significant growth of supported living arrangements for disabled people and also people with mental health issues over the last five years however the use of supported living needs to be reviewed against the outcomes required and whether these offer a sustainable and achievable model which promotes independence, resilience and recovery.

5.2 The Valuing People Strategy was developed in a different funding environment, prior to the local government spending reductions arising from the Comprehensive

Spending Reviews of 2010 and 2013. Delivery of the strategy, including the development of Supported Living arrangements was supported by specific additional funding streams. The current delivery model may be considered to be the best way of meeting the care and support needs of service users but the model now needs to be reviewed against the Council's ability to achieve outcomes in a sustainable and cost effective manner. In some cases this may require re negotiation of and re design of service models or the exploration of more efficient alternative provision and this will assist with the delivery of savings agreed by Cabinet as part of the 2015-17 budget process with identified savings of £1.8M.

5.3 The overall aim of this project is to develop a commissioning model for the Council that is sustainable, modern and flexible, whilst delivering the four strategic priorities as set out in the ASC Strategic plan 2013-20.

- Individuals to be self-sufficient and maintain independence, looking after themselves with help from family, friends and communities
- Work with the most vulnerable to ensure they are involved in all decisions about the provision of their care and support
- Develop the market to maximise and promote universal opportunities that are inclusive and accessible
- Safeguarding

5.4 The outcomes of the project will:

- Develop a Supported Living Policy
- Develop a Supported Living Strategy
- Develop a Placement Procedure to ensure placements are commissioned in line with Commissioning Policy / Strategy
- Ensure all existing Supported Living arrangements are appropriate to needs and as cost-effective as possible

5.5 The overall timeline and milestones for this work are presented in Annex A. Cabinet will be informed of progress and outcomes reported.

## **6.0 Risks & Challenges**

6.1 The Care Act 2014 needs to be considered in the context of key financial and demand risk factors already known concerning social care. These are demographic growth, particularly among older people and younger adults with complex disabilities; and increasing complexity of need among adult social care service users. Additional risks include the new duties to provide services to carers and to people who fund their own care. The Council are aware that the New Burdens monies identified by Government associated with implementing the changes required is not likely to meet the true cost to the Council of implementing such a significant change.

6.2 The key risks include:-

- The costs of implementation and ongoing delivery of the Care Act could create significant budget pressures

- Capacity might not be sufficient to meet the increase in demand for care assessments and reviews through new duties to support self-funders, carers and prisoners within current resources.
- Changes to ICT
- Community expectation
- Provider failure

6.3 The complexity of the Supported Living Review project means that there may be links /dependencies to other areas of the Council and partners. The Project Team will need to understand and manage any dependencies closely. Those projects and key areas of work that, at this stage, have a dependency and/or link are:

- Health & Well-Being priorities
- Care Act Responsibilities
- New Eligibility Criteria
- Children & Young People with Disabilities Pathway (Children & Families Act)
- Council Budget savings for 2015-17.

The project will regularly review strategic, operational and project risks and put in place measures to manage those risks. However it must be stressed that reductions in the Council's budget of the level required by Government cannot be achieved in a risk free environment. There will be significant risk associated with the implementation of the approved budget reductions, which will be mitigated where possible. It must be recognised that it is no longer possible to mitigate all aspects of risk. In those circumstances steps will be taken to ensure they are identified and managed within the limited resources available.

## **7.0 Policy Change, Communication, Consultation & Engagement**

7.1 The Care Act 2014 makes considerable changes to the law and practice around Social Care, most notably introducing the national eligibility criteria. However, it is important to note that the care system is developing not changing, in the sense that the Care Act builds on current practice, adjusts it and embeds best practice in the law. The Council will review and update its policies and guidance in light of these changes in a way that will continue to meet assessed need.

7.2 A Personalisation Strategy for Sefton has been drafted and approval of this strategy will be sought at the Health and Wellbeing Board on 17<sup>th</sup> June 2015. This will then be presented to Cabinet for consideration.

7.3 The Sefton Dementia Strategy is also being prepared and will be presented to Cabinet for consideration.

7.4 The need for consultation and engagement will be dependent on each policy and the nature of any service change as a result. Therefore, where significant change is applicable an appropriate level of consultation with key stakeholders will be undertaken.

- 7.5 For some changes the Council will inform the community on proposed new ways of working. Communications will include references to improved information and advice around preparing for later life needs and costs.
- 7.6 New and refreshed policies will be subject to appropriate approvals.
- 7.7 The scope of this change requires a whole Council and partnership approach. In addition to a training programme covering all areas of the act primarily aimed at the Social Care workforce a number of briefing sessions have taken place with the wider workforce.

## **8.0 Equality Act 2010 Duty and Impact Assessments**

- 8.1 As the Council puts actions into place to deliver the Care Act changes and Supported Living Review there is a need to be clear and precise about processes and impact assess any potential changes, identifying any risks and mitigating these as far as possible. The impact assessments, including any feedback from consultation or engagement where appropriate, will be made available in compliance with the Equality Act 2010.

## **9.0 Conclusion**

- 9.1 With regard to delivering and implementing the Care Act 2014 the scale and pace of the change required cannot be underestimated. The Council will need to continue to identify, develop and implement new models of care and the potential associated impact on the community will require appropriate capacity to deliver change. This is on top of increasingly demanding day-to-day-work, and against a backdrop of contraction over the last few years, means capacity will have to be created to enable the delivery of a programme to change and enable the Council to support those most vulnerable. It is important to note that this risk is likely to be mirrored by our partners and providers of services.
- 9.2 The combined impact of demographic pressures, new policy and statutory requirements present a significant challenge that will require a sustained and robust Council wide response with continued engagement with key partners. This will require the Council to develop solutions that ensure people remain independent for as long as possible; support carers to continue caring; encourage people to plan in advance for their care needs; and promote wellbeing and independence and community inclusion. Only a strategic approach can mitigate the demand and financial pressures that will continue to be faced by Adult Social Care.

## SUPPORTED LIVING STAGES, MILESTONES AND TIMELINE

## STAGE 1: Understanding



November 2014 to 31st  
May 2015

- **Providers** - where are services/locations; client profile; staffing ratio; voids; property condition; functions/provision within; other services & needs being met for clients
- **Finance/costs** - section 64; Independent Living Fund; Supporting People; Joint funding; direct payments
- **Data** - comparison v national; comparison v statistical neighbours; Liverpool City Region data
- **Clarity & Focus** - Timeline and plan; revise and finalise PID – definition and scope; Communications; develop RAID
- **Resource & Links** - ASC structure for governance; working teams; partner groups, provider groups; challenge and focus groups

## STAGE 2: Developing the proposed model



May to July 2015

- **Develop the model** - develop first draft of model(s) using information from stage 1; share with partners; service users; providers in groups and individual providers; discussion with providers on their ambitions and views on model; research other authorities for practice; consider variations for Learning Disability, Mental Health, Shared Lives, Transitions; Direct Payment clients
- **Draft policy framework** - developing from model and feedback
- **Cabinet report** - proposed model and policy for approval to consult

**MILESTONE Cabinet for approval to consult on  
draft model and policy**

## STAGE 3: Consultation and Engagement on model



July to  
December 2015

- **Consultation & engagement** - targeted at clients (600+) but also carers and whole community; questionnaires; group events; advocate use; e-consult; information and FAQs; potential clients; partners; providers;
- **Reports and analysis** - recommended policy and model; consultation report; equality analysis report; Cabinet report
- **Clients** - reassessments

**MILESTONE Cabinet - for approval of model/policy**

## STAGE 4: Implement changes



January 2016  
onwards

- **Providers** - Procurement process; commissioning; contracts
- **Finance** - review and forecast and set up monitoring

**MILESTONE - COMMENCE NEW MODEL/CONTRACTS**