

HEALTH AND WELLBEING BOARD

12 MAY 2015

Title:	Prevention: A Local Framework for Preventing, Reducing and Delaying Care and Support Needs In Adults		
Report of the Cabinet Member for Adult Social Care and Health			
Open Report	For Decision		
Wards Affected: ALL	Key Decision: YES		
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Sponsors: Cllr M Worby, Cabinet Member for Adult Social Care and Health Anne Bristow, Corporate Director, Adult and Community Services			
Summary: To implement the Care Act 2014 and meet its statutory obligations, the Council and its partners must develop a clear approach to prevention and how it plans to meet its responsibility in this regard. This report: <ul style="list-style-type: none">• sets out the statutory requirements in the Care Act 2014 relating to prevention• proposes a way in which the Council and its partners should respond to the requirements through the Framework at Appendix A• proposes next steps to further define and develop the approach. This report should be considered alongside the refresh of the Health and Wellbeing Strategy. This proposed prevention approach will be part of the borough wide delivery of Health and Wellbeing.			
Recommendation(s) The Health and Wellbeing Board is asked to: <ol style="list-style-type: none">(i) Note the duties and responsibilities of the local authority and its partners to help prevent, delay or reduce the likelihood of individuals developing increased needs for care and support as a whole borough responsibility.(ii) Comment on and agree the Prevention Framework set out in Appendix A and, in particular, agree the proposed next steps.			
Reason Section 2 of the Care Act 2014 requires that a local authority must provide or arrange for services, facilities or resources which would prevent, delay or reduce individuals' needs for care and support, or the needs for support to carers. Local authorities should develop a clear, local approach to prevention which sets out how they plan to fulfil this responsibility, taking into account the different types and focus of preventative support.			

1. Background and context

- 1.1. **Enabling social responsibility** is a key priority for the Council across Barking and Dagenham, encouraging residents to do as much as they can for themselves. The emphasis in NHS services and Public Health is similar.
- 1.2. Part one¹ of the Care Act 2014 became operational on 1 April 2015. The Health and Wellbeing Board has been well sighted on the local implementation programme and is familiar with the provisions of the Care Act and the implications for the Council and its partner organisations. The full scope of duties and requirements can be found in Chapters 1, 2, 3 and 15 of the Care and Support Statutory Guidance.
- 1.3. In summary, the Care Act requires that local authorities must:
 - promote wellbeing when carrying out any of their care and support functions in respect of a person.
 - provide or arrange for services, facilities or resources which would prevent, delay or reduce individuals' needs for care and support, or the needs for support of carers. Local authorities should develop a clear, local approach to prevention which sets out how they plan to fulfil this responsibility, taking into account the different types and focus of preventative support.
 - establish and maintain a service for providing people with information and advice relating to care and support. In addition to any more targeted approaches to communicating with individuals who may benefit from preventative support, this service should include information and advice about preventative services, facilities or resources so that anyone can find out about the types of support available locally that may meet their individual needs and circumstances, and how to access them.
 - ensure the integration of care and support provision, including prevention with health and health-related services which include housing. This responsibility includes in particular a focus on integrating with partners to prevent, reduce or delay needs for care and support.
- 1.4. Underpinning the Care Act is the concept and principle of promoting wellbeing (which includes prevention) which states that local authorities must promote wellbeing when carrying out any of their care and support functions in respect of a person. This means that wellbeing should be embedded through the local authority care and support system and be a feature of all stages of care and support. Importantly the principle applies to the whole population, regardless of having eligible needs or a pre-existing relationship with the local authority.
- 1.5. In response to the requirement of the Care Act 2014, the proposed Prevention Framework has been developed and is attached as Appendix A.

¹ Excluding the cap on care costs and appeals system which come into effect from 1 April 2016

2. Aim of the Framework

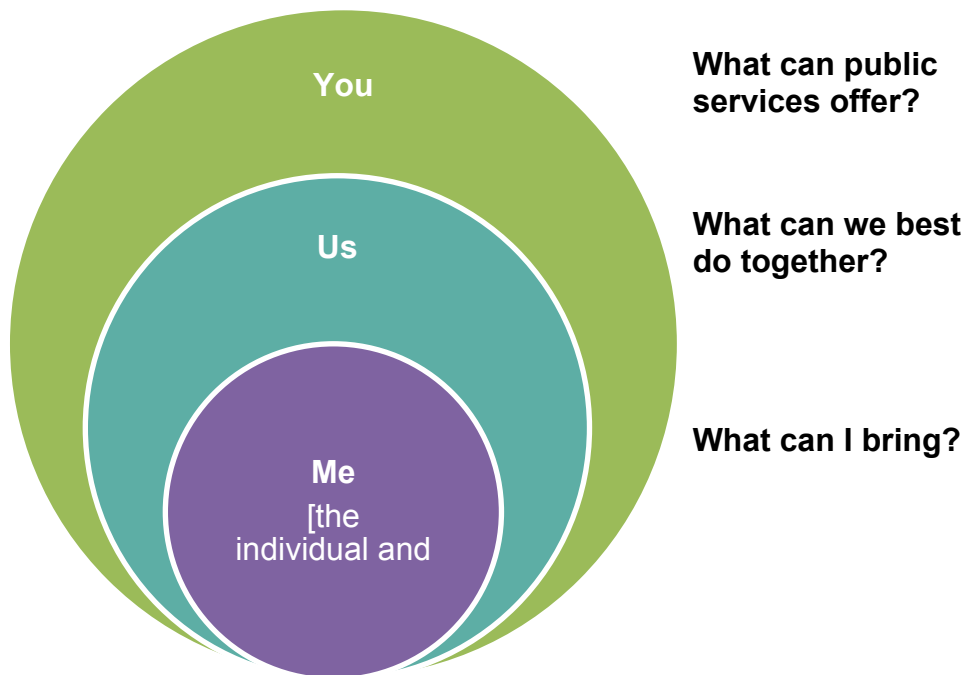
2.1. The aim of the Framework is to:

- engage the whole Council in the Prevention Approach and be a positive development to support priorities in Housing, Leisure, Children's Services, Planning and all aspects of the Council's activities
- set out a borough-wide approach to prevention that can be used consistently by all partners working together
- set out how the ways in which this approach is integral to the Health and Wellbeing Strategy and public health priorities
- make practical the approach to enabling social responsibility across the borough while maintaining support to the most vulnerable individuals and their carers, ensuring that the most help is given to those with the greatest need at the most appropriate time
- ensure that prevention is taken into account in:
 - Council wide activities
 - commissioning of specific social care activities
 - day-to-day interactions for social workers and related health and care professionals
 - priority setting for community based partners and the developing care sector
 - throughout the lifetime of people who may be at risk and particularly to underpin direct services

3. Prevention approach

3.1. The proposed Prevention Framework has three guiding principles.

3.2. Prevention is only effective when individuals (**Me**), communities (**Us**) and public services (**You**) work together. This promotes the strengths-based approach to assessing needs and supporting people. The diagram below illustrates the approach.



Starting with the individual further emphasises the whole person – a person centered approach. In doing this it is often useful to think of a person you know whose situation can represent the key principles. This helps to make this real for individuals and for agencies. For example, the experience in Torbay and Sweden where they characterise their approach using a named individual to make this seem more personal.

Principle 1: Prevention starts with every individual (Me)

- 3.3. The approach starts with the individual – the person who may have needs. This may include the contribution of friends and relatives who are providing care for someone with needs. The starting point is considering what the individual already has to help meet their needs, and what is potentially available.

Principle 2: Prevention is a job for the community (Us)

- 3.4. The next step is for the individual to consider what the wider community might be able to offer. Putting **Me** and **Us** together helps to create a community that underpins effective social responsibility. By bringing together civic pride, individual responsibility and local growth, neighbourhoods across the borough can recreate a sense of community wellbeing.

Principle 3: Prevention and the role of statutory agencies (You)

- 3.5. The statutory agencies, for example, the NHS, Council, police, employment agencies, colleges and schools continue to have duties of care. However, their role may be focused on specific population groups, or on people with high levels of need. Nonetheless, the principle of prevention that can delay or reduce the impact of needs must be ever-present.

4. Making it happen

- 4.1. The borough already has collective organisational, political, public and partner sign-up to prioritise promotion of wellbeing and development of a preventative approach. This is reflected through public health priorities, the Better Care Fund, integrated work with the NHS, partnership working with the third sector and commissioning. All this is set within the context of the Health and Wellbeing Strategy, and it is why there is no requirement for a separate prevention strategy.
- 4.2. Taking a preventative approach is not a new initiative or an additional burden imposed on or by the Council and its partners. Instead, the Framework:
 - re-emphasises prevention as part of day-to-day business as usual
 - embeds the preventative approach in existing services and current initiatives
 - sets prevention as a guiding principle in commissioning and service development

5. Next steps

- 5.1. Consult on the proposed preventative approach following comments and endorsement by the Health and Wellbeing Board.
- 5.2. Build the approach into our public health priorities for action and the Health and Wellbeing Strategy.
- 5.3. Emphasise and refine the Better Care Fund priorities and resources across NHS and Social Care on an individual basis.
- 5.4. Use the consultation as the basis for prioritising development of “commissioning for prevention” priorities.
- 5.5. Develop a “commissioning for prevention” methodology and scoring analysis/system along with a straightforward process for partners to use to apply to commissioning and contracting. Revise current contracts and develop new contracts to emphasise the preventative approach throughout all individual care or service pathways.
- 5.6. Set up a series of information seminars and briefing sessions to refine and develop the prevention approach and simultaneously revise existing activity.
- 5.7. Develop an action plan to review progress based on the above. This will be presented at the Health and Wellbeing Board in November 2015 with a final version of the Framework.

6. Consultation

- 6.1. While the prevention approach has been developed within the Commissioning workstream of the Care Act Implementation Programme, it has far wider cross Council and partner considerations. In drawing up the Framework, key departments (Public Health, Leisure and Housing) have been engaged and consulted, and this engagement will continue and increase.
- 6.2. In agreeing the Framework at Appendix A, the Health and Wellbeing Board will initiate a process of consultation with wider stakeholders, including the Health and Wellbeing Board member organisations. The purpose of further consultation is to align priorities around prevention and achieve collective buy-in from partners to

ensure that the thread of prevention (reduce and delay) in all situations and develop the 'commissioning for prevention' approach in Appendix A.

7. Mandatory implications

7.1. Joint Strategic Needs Assessment

The Framework is grounded on the most recent findings and recommendations of the JSNA.

7.2. Health and Wellbeing Strategy

The refreshed Health and Wellbeing Strategy priority areas are reflected in the Framework (see Appendix A of this report). Prevention priorities are set out in the Strategy with deliverables aligned to the Health and Wellbeing Strategy Delivery Plan. The report also takes on board the observations made by the Director of Public Health in his 2014 Annual report.

7.3. Integration

The Care Act is very specific that the responsibility for prevention is shared between stakeholders. The Care and Support Statutory Guidance states that 'Local authorities must ensure the integration of care and support provision, including prevention with health and health-related services, which include housing. This responsibility includes in particular a focus on integrating with partners to prevent, reduce or delay needs for care and support.' (para 2.34)

More generally the Care Act places new duties on the Council and its partners to further integrate. Sections 3, 6 and 7 of the Care Act require that:

- local authorities must carry out their care and support responsibilities with the aim of promoting greater integration with NHS and other health-related services;
- local authorities and their relevant partners must co-operate generally in performing their functions related to care and support; and, supplementary to this,
- in specific individual cases, local authorities and their partners must cooperate in performing their respective functions relating to care and support and carers wherever they can.

The Framework at Appendix A has been developed in the spirit of the duties above and seeks to strengthen local integration. A key outcome in drawing up this Framework is to bring coherence, alignment and direction to a range of activities that exist across the partnership.

7.4. Financial implications

There are no additional financial implications directly arising from this report. Resources for preventative services of approximately £1.5m funded from the Public Health grant are included in the Better Care Fund plan for 2015/16 agreed by the Health and Wellbeing Board.

Comments prepared by: Roger Hampson, Group Manager Finance, Adults and Community Services

7.5. Legal implications

There are no legal issues as all the statutory provisions have been dealt with and noted in the report to include the Care and Statutory Support Guidance to include policies such as the Joint Health and Wellbeing Strategy and the JSNA.

Comments prepared by: Dawn Pelle, Adult Social Care Lawyer

8. Non-mandatory Implications

8.1. Safeguarding

Protection from abuse and neglect is one of the nine domains of wellbeing as defined by the Care Act 2014. All initiatives under the umbrella of the Prevention Framework must have regard for safeguarding vulnerable adults in line with local safeguarding policies and procedures.

8.2. Contracts

Commissioners will need to ensure that existing providers are aware of the need to comply with the Framework which may require further engagement and development.

Where appropriate, when re-tendering or commissioning new services, it is essential that specifications for services have regard to the Framework, ensuring that it provides the guiding principles and foundation of key actions and activities in commissioning and service development. All such arrangements should incorporate 'commissioning for prevention'.

The Council's Market Position Statement, which will be refreshed later in 2015, should also have regard to this approach so that our vision is clearly articulated to the market so that local care and support providers (and providers from other sectors) can respond accordingly.

9. Background papers used in preparation of the report:

- DH Care and Support Statutory Guidance
- Joint Strategic Needs Assessment
- Better Care Fund Plan
- Joint Health and Wellbeing Strategy
- LBBD Market Position Statement (July 2014)
- Adult Social Care – the service and its role in an integrated system, NHS England Board (March 2015)

10. List of appendices

- Appendix A: Prevention: a local framework (DRAFT)