



Social Care Update

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Contents

Personalisation Gets Self-Assessment Tool	3
Extra Care Fund Secures Increase	4
Telecare events highlight progress	4
Ivan Lewis announces £27m extra for Social Enterprise	5
New Journal Entry Journal of Care Services Management	8
NHS chiefs opt for social insurance to fund elderly	8
EVENT- The future of adult social care - 4 June 2008, London	9
New Guide produced Common core principles to support self care: a guide to support implementation	9





Briefings

Personalisation Gets Self-Assessment Tool

07/04/2008

Early Spring has seen the publication of two key practical resources for responding to the personalisation and integration agenda.

David Behan, Director General for Social Care at the Department of Health, launched the Personalisation Self-Assessment Tool to help local authorities better understand the transformation of social care systems required by last December's *Putting People First* concordat.


The concordat, agreed by local and central government, will support the delivery of the personalisation agenda. The tool draws on the learning gained so far in implementing direct payments, the Individual Budget Pilot Programme and In Control.

It points to a range of practical sources of support and expertise. Registered participants receive a tailored report which can be downloaded and shared across the organisation.

Further tools are being developed by the government and leaders in the care sector, including ADASS.

The tool can be accessed at <http://self-assess.personalisation.org.uk> 

CSIP Networks is in the process of launching a network dedicated to personalisation. A temporary page can be accessed at <http://www.icn.csip.org.uk/personalisation>

Meanwhile, the ICN has published a radically updated version of its guide to true integration in care. [A Practical Guide to Integration](#)  reviews recent legislative and policy changes and provides case studies and practical tips on meeting the challenge of delivering integrated care.

Jeremy Porteus, CSIP Networks' National Programme Lead, said: "This guide is partly a response to the Putting People First concordat. However the evidence is clear: integrated systems are more effective ones and the document helps to arm local leaders, policymakers and managers with the knowledge to make that a reality."





Extra Care Fund Secures Increase

07/04/2008

The Department of Health has confirmed funding of £80m over two years (2008-10) for the Extra Care Housing Fund in a flurry of housing-related announcements and developments.

Local authorities will now bid for a slice of the funding to use on extra care schemes which will help older people and those with long-term conditions to live in a home of their own.

The figure represents a 25% increase on the allocation for the previous round and brings to nearly £230m the total made available since the fund's launch in 2004.

The Housing LIN will be involved in assessing applications against criteria emphasising a proven need for help in expanding such provision and developing effective local commissioning arrangements between local partners.

Further information is available from www.icn.csip.org.uk/housing with bidding guidance available from (take from housing newsletter).

Telecare events highlight progress

07/04/2008

In recent months, CSIP Networks has been bringing together outcomes and achievements in introducing telecare, telehealth and other forms of remote monitoring across health, housing and social care.

Social care authorities have been sending in examples for inclusion on the CSIP website and it is important that we receive examples from housing and health services to provide a comprehensive picture. Recently five CSIP Networks events were held in London, Leeds, Manchester, Taunton and Birmingham to review the progress made since *Building Telecare* in England was published by the Department of Health in 2005.

Delegates heard examples of case studies and evaluations covering community safety, extra care, multi-sensor installations, support for people with learning disabilities and dementia - together with vital signs monitoring for people with respiratory and heart conditions. There were many examples of joint and integrated working to support users, carers and their families.





CSIP Networks will be continuing to collect examples of improved outcomes from telecare and telehealth throughout 2008. You can send your examples to Mike Clark via the telecare mailbox (telecare@csip.org.uk) and with your permission; we will include them on the website at www.icn.csip.org.uk/telecareoutcomes. That site also has a full set of slides from the events held in January and February 2008.

Ivan Lewis announces £27m extra for Social Enterprise

Increased funding will help social enterprises deliver health and social care services

Ivan Lewis today announced a £27 million funding boost for social enterprises, increasing the amount of money available through the Department of Health's Social Enterprise Investment Fund to £100 million.

The Social Enterprise Investment Fund supports the development of social enterprises in health and social care such as women's refuges, migraine clinics and exercise programmes for the elderly, which take account of and address the needs of a wide range of patients and services users, particularly the most vulnerable and excluded.

Social enterprises are businesses, which reinvest their profits back into the organisation or into the local community, promoting independence, well-being and social inclusion and helping to improve people's quality of life.

The increased investment will provide start-up funding and longer-term investment to emerging and existing social enterprises in health and social care.

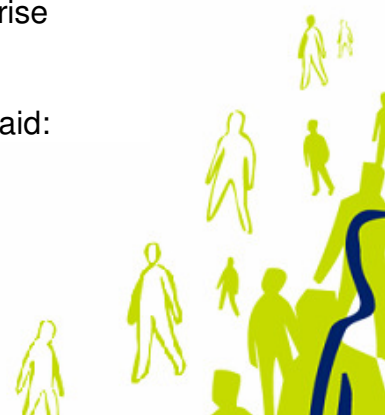
Care Services Minister Ivan Lewis said:

"This additional investment is testimony to our confidence in social enterprise as part of the solution to commissioning world class health and social care services.

"Increasingly, we are seeing social enterprises delivering the innovative and personalised services that people rightly expect. That is why we are supporting social enterprises in health and social care through investment from the £100 million Social Enterprise Investment Fund."

The announcement of the additional funding was made simultaneously in London by Ivan Lewis and in Liverpool at the National Social Enterprise Conference by Gordon Brown, who was speaking via video link.

Jonathan Bland, Chief Executive of the Social Enterprise Coalition said:





"This is the second year in a row a significant health fund announcement has been made at our national conference and we are delighted to see the Department of Health is continuing to lead the way in its support for social enterprise.

"Across the country we have so many fantastic examples of health and care social enterprises engaging with their communities to provide high-quality services. The finance revenue provided by the fund is vital to help boost their investment readiness and ensure even more people are able to benefit from their services."

Ivan Lewis will also today present cheques to three of the projects receiving the existing 2007/08 funding:

* Luton Women's Aid provides safe accommodation, support and information to empower women experiencing domestic abuse. It has over 34 years experience and is the only refuge provider in Luton. It has a strong working relationship with the council and helps them to meet statutory requirements on refuge provision. Expertise and experience allows them to provide training to other statutory and non-statutory organisations. Their long history and close links to the community mean they have good awareness of local needs. It will receive £48,895.

* The City of London Migraine Clinic which promotes research into the causes, treatment and management of migraine and headache and provides training for medical students of Barts and The London Queen Mary's School of Medicine and Dentistry has received £140,000. They are expanding their activities to offer specialist headache services to the NHS working with PCTs and PBC clusters. Successful partnership will increase choice for people with this condition and reduce pressure on NHS services. They can offer longer consultations at lower cost than competitors (NHS and private sector) and with short waiting times (average 6 weeks). They re-invest income and donations in services.

* Sit 'N' 'B' Fit, a Sunderland based organisation which provides seated and standing exercise classes for older and physically disabled people to promote independent living, reduce falls, improve self-esteem and mobility has received £54,000. Seated exercise is innovative because it aims to improve health and mobility in people who are often missed by mainstream services, which do not provide this type of preventative exercise. The main added value comes from people out of formal care services and the potential cost savings to the health service.

Paul Jansen, Interim CEO, the City of London Migraine Clinic said:

"The City of London Migraine Clinic aims to provide access to its unique treatment service to as many people with migraine and other primary headaches as possible. Migraine affects over 6 million people in the UK but it is still widely under-diagnosed and under-treated, in children and adults.





Thanks to the Department of Health's Social Enterprise Investment Fund, the Clinic will be in a much better position to offer its services to NHS trusts, thereby shortening waiting times and improving choice for NHS patients and service users. This will help to improve the quality of life for many thousands of people with these conditions."

Notes for Editors

1. The Social Enterprise Investment Fund is intended to stimulate and encourage the development of a vibrant social enterprise sector in the delivery of health and social care services. It aims to provide start-up funding and longer-term investment to emerging and existing social enterprises in the health and social care sector with a view to their sustainability. The Fund offers loans, grants and equity investments (or a mixture of these).

2. Ivan Lewis announced £73 million for the Social Enterprise Investment Fund in January 2007, the £27 million revenue announced today is additional funding, taking the total Fund to £100 million.

3. In 2007/08, £1.65 million revenue and £6.51 million capital has been invested in social enterprise projects from the Social Enterprise Investment Fund. Ivan Lewis will be presenting cheques to three of these projects Luton Women's Aid, City of London Migraine Clinic, and Sit 'N' 'B' Fit at College Green, Westminster from 11.30 - 11.45am on Wednesday 27th February.

4. Social enterprises are dynamic businesses with social and environmental aims. Well known examples include The Big Issue, Cafe Direct and Jamie Oliver's Fifteen, but there are many other social enterprises operating in a wide range of industries.

5. More information about the Department of Health's social enterprise programme can be found at:

<http://www.dh.gov.uk/en/Managingyourorganisation/Commissioning/Socialenterprise/index.htm>

6. The Social Enterprise Coalition is the UK's national body for social enterprise. Acting as the voice for the sector, it supports and represents the work of its members, influences national policy and promotes best practice.

<http://www.socialenterprise.org.uk>





New Journal Entry

Journal of Care Services Management

Commissioning for the whole community.

Reference: Journal of Care Services Management, 2(2), January - March 2008, pp.143-153.

Abstract: This paper examines the strategic role of directors of adult social services, looks at how sufficiency of supply can be ensured in the social care market and discusses the operation of that market. Finally, it outlines four key commissioning challenges that councils will have to address in the future.

NHS chiefs opt for social insurance to fund elderly

Britain will not be able to look after its growing elderly population unless people are compelled to insure themselves against the risks of contracting dementia and other debilitating conditions, health service chiefs said yesterday.

The NHS Confederation, representing the managers and directors of NHS trusts, said the cost of helping frail older people cope with the daily routines of living in their own homes is expected to treble to about £30bn by 2026. It forecast that the number of people with dementia will increase to 1 million within 30 years.

Dame Gill Morgan, the chief executive, said older people should continue to be entitled to free medical care, but taxpayers could not be expected to fund such a sharp rise in the costs of social care.

She said it was unreasonable to expect people who had worked and saved all their lives to sell their homes to pay for care, and their children might be unable or unwilling to foot the bill.

The best way to cover the costs would be a system of social insurance, similar to a scheme in the Netherlands where people must pay 12% of wages in contributions.

"This may need to be compulsory, albeit with an opt-out for the most wealthy and tax-funded top-ups for the poorest," the body will say in a paper for its June conference. The government is reviewing social care funding for the elderly.

The paper will say there is widespread belief the current system cannot be sustained. It was not widely understood the state does not provide social care for vulnerable people unless they have few assets and a tiny income. There is also a postcode lottery of care, it will say.





Morgan acknowledged to Society Guardian that social insurance contributions would add to other deductions from salary. "But the model we are looking at would not feel like another tax. It would be more like a savings account." People could draw on the investment to pay for social care in older age. Those who did not need care could bequeath the money.

EVENT- The future of adult social care - 4 June 2008, London

This conference is a chance to reflect on "the now" and "the future" in terms of what is working and what is not. It is also a chance to continue the thinking on what a future model of adult social care funding could look like. Delegates will hear the views of leading experts on a range of topics and will be encouraged to contribute their thoughts on the system now and a system for the future

New Guide produced

Common core principles to support self care: a guide to support implementation

Skills for Health and Skills for Care have worked with key stakeholders, including people who use services and carers, to develop a set of 'Common Core Principles to Support Self Care'. The principles capture best practice in order to support service reform and promote choice, control, independence and participation of people who use services.

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_084505

