

**Open Report on behalf of Glen Garrod,
Executive Director of Adult Social Services**

Report to:	Adults Scrutiny Committee
Date:	07 September 2016
Subject:	Non-Residential Care Contributions Policy Implementation report

Summary:

Following a public consultation that took place between 22 June and 28 September 2015, on 3 November 2015, the Executive approved amendments to the Council's Non-Residential Care Contributions Policy as follows:-

- a. To introduce a 72 hour (three days) notice period for cancelling care;
- b. To introduce an annual review of the contributions paid from service users where requested and to calculate entitlement to refunds by comparing the total cost of care for the whole year with the total annual contribution paid by a service user and refunding any amounts by which the total contributions paid are more than the total cost of care;
- c. To introduce a new rule so that everyone assessed to pay a contribution will be charged from 14 days after the financial assessment form is sent out;
- d. To assess service user contributions against the full cost of the services received;
- e. To increase the cap on service user contributions to £400 in 2016/17, £500 in 2017/18 and remove it completely in 2018/19;
- f. To proceed with the application of banded Disability Related Expenses (DRE) to new service users;
- g. To introduce a one-off arrangement fee for new self-funding service users who wish the Council to arrange their non-residential service care package.

Authority was delegated to the Director of Adult Social Services, in consultation with the Executive Councilor for Adult Care, Health and Children's Services to:

1. Make amendments and approve the final form of the Non-Residential Contributions Policy reflecting the changes approved;
2. Following a review, take decisions as to whether to apply the banded Disability Related Expenses (DRE) to existing service users, within the next six months;
3. Develop and approve implementation plans setting out the detail of how the policy changes will be implemented in practice; and
4. Following such engagement as he shall consider appropriate, approve the level of the fee to be charged for new self-funding service users who wish the Council to arrange their non-residential service care package.

This paper reports back on the implementation process and the four points above.

Recommendation(s):

That the Adults Scrutiny Committee:

- 1) Notes the successful implementation of the Non-Residential Contributions Policy.
- 2) Notes the Lessons Learnt at Section 7 of this paper.

1. Outcomes

1.1 Under delegated authority the following outcomes were achieved:

The Adult Care Non-Residential Contributions Policy was rewritten to reflect the amendments approved. As well as a full policy with all the details, a summary version was also written in an easy to understand format to be used by staff and sent out to service users. This work has been successfully undertaken and both the full policy and shorter version are available online <https://www.lincolnshire.gov.uk/adult-care/professionals-and-providers/professionals/strategies-policies-and-plans/non-residential-contributions-policy/129059.article>.

1. Following a review, a decision was taken not to apply the banded Disability Related Expenses (DRE) to existing service users. Existing service users who have already had full DRE assessments will continue to claim the actual costs as they do currently but will be required to

supply all receipts. Existing service users can request to be moved to a banded rate. See full policy 2.2.1 (b);

2. A full implementation plan was developed and implemented. A broad-based implementation team was also pulled together of staff from various parts of LCC and Serco. The team worked effectively, the plan was reviewed at a monthly meeting, and whilst significant effort was required of many people and their teams, implementation was successfully delivered.
3. A fee of £445 was agreed as the amount to be charged for new self-funding service users who wish the Council to arrange their non-residential service care package. This amount was calculated on the basis of what it costs the Council to support a service user and the fee does not make a profit for the Council.

2. Implementation

- 2.1 It was agreed by the Director of Adult Social Services in consultation with the Executive Councillor for Adult Care, Health and Children's Services, that the start date of the new policy would be 16 April 2016. This was to fit in with the annual financial review to save staff resources and confusion to service users.
- 2.2 The specific tasks that were outlined in the report to the Executive on 3 November 2015 included:

Task	Outcome
Re-writing the revised Adults Contributions Policy	Full and summary document written. Incorporates all changes and is a complete rewrite of existing policy into service user friendly format.
Establishing an Implementation Group to support the work	Extensive implementation group was set up to oversee project.
Engaging with Stakeholders e.g. Serco and People's Partnership	The FAICT team in Serco were fully involved in the project and put considerable extra time and resources into the success of this project. CSC team in Serco were on the project team and also took the calls from initial publicity and service users after letters went out informing of new contributions. Many other internal teams were involved. The People's Partnership was fully engaged in the production of the summary and full policy and have acknowledged improvements in the tone and content of the documents and thanked us for taking their

Task	Outcome
	input on board.
Reflecting on ongoing development of Agresso and implementation of Mosaic which is crucial to the billing and refund system	Unfortunately the new policy had to go live before Mosaic was ready to go live. However as well as taking into account the current status of existing systems the Mosaic development team were fully engaged to future proof the changes.
Implementation of systems and procedures around the proposals	The project team worked closely with Serco, staff and Brokerage to ensure smooth implementation of the changes. There are still one or two operational processes being finalised but all are in hand.
Ensuring quality of the service user data and financial information	FAICT carried out financial reviews on 5186 service users checking every one individually and entering new rates for each.
Reflecting on any related impact to service users Personal Budgets (PB)	As service users PB review dates come round they will each be looked at for any impact of new rates or policy changes. Service users can also request a review at any time if they feel they need one before their review date.
Future proofing for DWP changes moving from Disability Living Allowance (DLA) to Personal Independence Payment (PIP)	The new banding levels have been set for DLA and PIP.
Take into account the changes to home care rates (and other changes) from April 2016 in the light of national revisions to the living wage from April 2016.	New provider rates were taken into account.

2.3 Other tasks that were included were:

Task	Outcome
Publicity	The consultation was promoted through all the council's internal and external channels, including County News, the LCC website and social media channels, News Lincs, briefings for members and MPs. We also promoted the consultation through partners and providers, who added information to

Task	Outcome
	their own websites and newsletters for service users.
Notify Service Users	5186 letters were sent to service users. This required 490 additional working hours which also included the validation of all care packages and provider cost which required manual intervention on every single case. Following the mail out 947 calls were received via the CSC helpdesk that was put in place and 229 letters have been received.
Staff training	<p>Working closely with the Adult Care Workforce Development team and the Corporate Communications Team a comprehensive plan for communicating and embedding the new policy was developed and delivered:</p> <ul style="list-style-type: none"> • a special edition of the 'workforce matters' Newsletter to all staff and partner agencies; additional communications in the Adult Care Newsletter and the monthly Practice Development Bulletin; links to the appropriate policy and summary policy documents available via the LCC website. • a series of three face-to-face staff briefings during April 2016 were available to staff and partner agencies and we had around 60 attendees. The briefings were delivered by Matthew Fisher (Lead Professional) Simon Garner (Workforce Development Practitioner) and Wendy Crosson-Smith (Contributions Policy Advisor). • FAQs were collated from the briefings and were sent to all attendees to share with their teams.

3. Financial Outcomes

3.1 The initial in year saving for 2016/17 from the current service users' financial reviews is £698k against a full year target for the project of £883k. Therefore 80% of the target has been reached at this stage, with 2018/19 being the first full year, that is, when the cap on service user contributions is completely removed. The full impact of the changes cannot be measured until the end of the financial year due to changes in the service user cohort throughout the year.

4. Equality Impact

- 4.1 Members are referred to the Equality Impact Analysis available at www.lincolnshire.gov.uk/adultcare
- 4.2 5186 service user letters were sent out on 18 and 21 March informing existing service users of the impact of the changes to their personal financial assessment and the new contributions required from 16 April 2016.
- 4.3 This resulted in 947 calls to the Customer Service Centre 320 of which were referred to FAICT. This is approximately double the number of calls that are usually received following the annual financial reviews.
- 4.4 Only six calls were escalated to management concerning the changes to the contributions policy.

5. Specific Proposals

This section sets out each of the original proposals and highlights any issues and considerations that have been taken into account during the implementation process.

- 5.1 To introduce a 72 hour (three days) notice period for cancelling care.

Allowances will be made for emergency situations. One telephone number has been published and service users will be encouraged to use it. Work is ongoing exploring the implications of this arrangement on homecare providers.

- 5.2 To explain the way that refunds are calculated for cancelled or missed care.

This was not a change to policy but the policy now makes this clearer and gives examples.

- 5.3 To introduce a new rule so that everyone assessed to pay a contribution will be charged from 14 days after the financial assessment form is sent out.

There were a number of changes that needed to be made to the process to implement this:

- The financial assessment form is now sent out on the day care starts and not before to prevent charging before care starts;
- Serco have tightened up the processes to ensure service users return the forms promptly and the financial assessment is carried out in the timescale needed. This is explained in both the summary and full policy documents.
- A process has been put in place with the Direct Payments team so that those on Direct Payments are also contributing within 14 days;
- Discussions have taken place with the Mosaic team to ensure the 14 day rule is implemented correctly when the new system goes live.

5.4 To assess service user contributions against the full cost of the services received.

From 16 April 2016 all users have been assessed for contributions against 100% of the cost of care or their Personal Budget. This resulted in approximately 140 service users on Direct Payments paying 100% of their care and therefore not being due a Direct Payment.

5.5 To remove the maximum charge per week of £250 phased over three years as below:

Phased implementation	2016/17	2017/18	2018/19
New maximum weekly charge	£400	£500	No Max

The £400 cap has been implemented for 2016/17.

5.6 To introduce banded levels for Disability Related Expenses (DRE).

DRE banding has been implemented as in 1.1.2. All receipts are now required for any service user not on the banded rate.

5.7 To introduce a one-off arrangement fee for new self-funding service users who wish the Council to arrange their non-residential service care package

As a guide, an initial figure of £444 was calculated as a suggested charge. The Care Act 2014 allows the Council to issue a charge based upon the actual cost it would incur in arranging services for new self-funding service users. The fee suggested included the cost of establishing a suitable care package following a full assessment of the service user's needs, the cost of conducting a financial assessment, the cost of brokering and placing a service user and the cost of administration. The costs associated with those activities were based on information contained within the "Lincolnshire Model" which was used to establish the additional cost to the authority of implementing the Care Act 2014. The "Lincolnshire Model" was used by the Department of Health (DoH) to help calculate the cost of implementing the Care Act 2014 across England.

After further review the figure of £445 as a one-off fee was agreed. This fee applies to all 'new' clients' who have over £23, 250 and who choose to ask the council to arrange their care. To date there has been 9 such cases, though the number is expected to grow.

6. Benefits Maximisation

One of the key added benefits of the contract with Serco is the requirement placed on them to work to maximise service user benefits. It is very pleasing to be able to report that during 2015/16 when the new contract with Serco was in its first year and

when so much work was being undertaken in preparation for the introduction of the new Contributions Policy work was undertaken that:-

- Reviewed 640 service user cases
- The review led to an increase in service user weekly income of £20.2k per week, over £1m per annum
- And as a result of this, weekly income to the council increased by £7,648 per week, some £397k per annum

This work is continuing in 2016/17 and should again bring additional income into the Lincolnshire economy and additional income to Adult Care.

7. Process Improvements

The project team was committed to seeking improvements in the process from a service user perspective. Obviously the benefits maximisation work identified in the above paragraph is a significant benefit, but improvements were also sought in making the financial assessments process and documentation easier to understand. Improvements have included:

- A new financial assessment form which means that service users will only have to complete a financial assessment form once, irrespective of receiving care at home or within a residential setting. The form has been operational for three months and having received feedback from service users and carers some additional improvements have been made
- Work is being undertaken to produce a funding pack which covers the financial implications of receiving care and support through Adult Care, and this will be available shortly
- The waiver policy is being reviewed to align it with the new policy and review the terminology used
- Ongoing work as part of the Mosaic development

8. Lessons Learnt

The project team has reviewed the entire process from commencement of the policy review in late 2014 through to implementation in April 2016 and noted the following points for future reviews:

- Operational staff to be more extensively consulted at the proposal stage in order to appreciate the implementation issues;
- Commissioning and Brokerage to be more extensively consulted at an earlier stage;
- People's Partnership to be consulted more extensively at the proposal stage to understand impacts.

9. Conclusion

The implementation was successfully carried out by the live date of 16 April 2016 due to the joint involvement of a number of teams and consultation with partners.

The policy documents and impact assessment can be found at:

<https://www.lincolnshire.gov.uk/adult-care/professionals-and-providers/professionals/strategies-policies-and-plans/non-residential-contributions-policy/129059.article>

This report was written by David Laws, BCF and Financial Special Projects Manager, who can be contacted on 01522 554091.

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