Efficiency, Improvement & Transformation

Review Title: Fair Access To Care (FACS)

Scope

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Select Committee: Health	Type of Review: Scrutiny Review	

1. What services are included?

The review covers the policy in relation to **Fair Access to Care**.

The national framework is based around 4 levels of need: Critical, Substantial, Moderate, Low. People assessed as being within one of these bands are said to have 'eligible' needs and councils are required to decide which bands of need they will provide for.

SBC provides care across 3 bands (Moderate to Critical) for all adult social services, and across all 4 bands for aids/equipment. National guidance indicates that authorities should take account of their resources when setting eligibility criteria.

SBC is one of 2 NE authorities that offer care for 3 to 4 bands. This has been seen as supporting a preventative approach to care - however there are both performance and financial consequences arising from the current position. In line with the general population, the Borough is expected to experience an ageing population.

Review needs to consider: whether the current levels are sustainable, whether different models of service can be identified as alternatives to the traditional social care assessment model (see box 6).

2. The Thematic Select Committee's overall aim / objectives in doing this work is:

To identify options for future strategy / policy / service provision that will deliver efficiency savings and sustain / improve high quality outcomes for SBC residents.

3. Expected duration of enquiry? What are the key milestones?		
• 9 months.		
Baselining/Challenge	- 18 May/22 June/ 3 August / 14 September	
 Identifying opportunities for efficiency and improvement Reviewing and selecting the best options 	– 26 October – 14 December	
Select Committee Agreement of report/recommendations	– 25 January	
 Report to Cabinet with recommended EIT options 	- 11 February 2010	
4. In addition to analysis and benchmarking costs, performar processes are likely to be required to inform the review? (e observations; face-to-face questioning, telephones survey option of expert witnesses etc).	e.g. site visits;	
- Detailed baseline/challenge documentation including legal frame	work and case studies	
 Research into alternative practice/experience in other local authorities IDeA research into alternative practice examples of the experience of regional authorities examples of authorities in national benchmarking group including those that have reduced the number of bar maintained or improved their performance/inspection rational this regard (and experiences of alternative outcomes Bands) 	ands provided for, but have ngs, and their experiences in following changes to FACS	
 examples of alternative arrangements/ services that may be who are not eligible. Evidence in meetings from: Social Care Directors from neighbouring authorities – Hartlep - Leading authorities as identified via IDeA research 		
- Legal advice as appropriate		
- Government Green Paper on Care and Support (June 09). [The prescriptive impact on this review]	green paper may have a	
5. How will key partners and/or the public be involved and at	what stages?	
Potential consultation event linked into publication of Green Paper. [No targeted publicity until that stage.]		
6. Please give an initial indication how transformation will en improvements to be delivered by this EIT review?	able efficiencies and	
Improved performance – chosen FACS bandings can have an impresentation to the amount of care provided, and the time/resources associate volume of work can result in pressure on performance against key timeliness of assessments and provision of care packages. There improvement but currently the area is a relatively low performer content.	sociated with this. A high indicators relating to the has been some recent	

groups.

Efficiency savings – a <u>sample</u> of other authorities indicates that a saving of c.£250k - £300k per annum may be achieved by removing the Moderate FACS banding.

Alternative service delivery – could a different model of service offer alternatives to the traditional social care assessment model and could support the preventative approach in line with the requirements of the 'Personalisation' agenda?