**Appendix 2 – Project summaries**

| **Project title and description** | **Outcomes/Benefits** | **Current position** |
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| **Effective Reablement**  Provision of reablement support for up to 6 weeks targeted to those most likely to benefit | Reduce overall numbers requiring long-term care  Enable people to live independently with reduced levels of care  Increase numbers of people fully re-abled to live independently without long-term support | This project was closed and moved from the programme to ‘Business As Usual’ in November 2019.  The project has supported the delivery of effective reablement support.  Across all ages and referral routes, some 75% of people receiving reablement require no on-going care package following completion of the 6 weeks of support  This support has been targeted towards people who are assessed as having a good chance of achieving significant reductions in their care needs following initial presentation either from a community setting or following hospital discharge.  Revised and improved processes have been implemented, including a toolkit for staff to support the more targeted approach.  Future governance and monitoring and will be provided through the **ASC Improvement Board**  Longer term arrangements for the provision of reablement will be included in Programme’s **Commissioning workstream**. |
| **Effective Hospital Discharge**  Facilitate timely hospital discharge  Link to reablement support to enable people to be discharged to their home with support  Long-term care packages are not put in place at time of crisis/pressure  Ensure availability of appropriate care services following discharge (eg short-term interim care beds) | Ensure timely discharge from hospital  Increased effective targeting of referral to reablement to reduce need for long-term care  Reduced levels of on-going need for long-term care | This project was closed and moved from the programme to ‘Business As Usual’ in November 2019.  The project has ensured processes are in place to support timely discharge from hospital and ensure that people are provided with the most appropriate support to meet their needs.  The ‘Home First’ principles underpin the work:   * To ensure that wherever possible, placements are not made in residential or nursing care on discharge from hospital * Such placements are made only in exceptional cases where it may be necessary such as step-down bedded care at the point of initial discharge.   Targeted reablement support for up to 6 weeks has been successfully implemented for citizens discharged from hospital and has been successful in increasing the number of people who require no long-term care following reablement to 77%  In terms of delayed hospital transfers of care (DToC), performance has improved from 7.5 delayed days per 100,000 population to 5.5 which is within national guidelines and places Harrow 11th out of 33 London Boroughs. Of those delays, the number attributable to Social Care has fallen from 2.1 to 1.7 per 100,000  Future governance and monitoring and will be provided through the **ASC Improvement Board**  Longer term arrangements for the provision of step-down care will be included in Programme’s **Commissioning workstream** |
| **Using Assistive Technology**  Increasing use and provision of adaptive/assistive technology to enable more people to remain living independently in community settings  Widening the range of technology available | Increased numbers of people are enabled to continue to live independently with reduced levels of traditional care support  Delaying the need for residential care | Trials of two new types of Assistive Technology equipment began in November 2019.  There will be 50 people benefiting from one system, and 10 from the other. This will include people being discharged from hospital and others undergoing initial assessment or a review of existing care support.  Initial reporting on outcomes will be available in early 2020.  On—going monitoring and future provision will continue through the project group and **Commissioning workstream** |
| **Improving access to on-line information**  Review and update on-line information so it is easy to access, accurate and relevant  The range of information available supports strength based approaches  People are appropriately signposted to non-specialist community support | Residents are better able to access on-line information and advice  More people are able to ‘help themselves’  Increase in number of people accessing website  Reduction in personal contacts to Access Harrow  Increased user satisfaction ratings in terms of ease of access to information | The new Council website was launched on 3rd October. This phase 1 project was closed in November 2019.  Adult Social Care information on the website has been updated and will be kept under review.  Further work is being undertaken from October 2019 to analyse contacts to the Council relating to Adult Social Care. This will be a **corporate led project** and will identify opportunities to improve access routes and responses and better manage levels of contact and demand.  Web-site usage will be regularly monitored and satisfaction with access to information will be measured in the annual statutory Adult Social Care user survey in February 2020 and the Carer survey in November 2020 |
| **Strengths based approaches – 3 conversations**  Implement the 3 conversations model across all relevant teams – to deliver strengths based approaches making better use of personalised community networks | Reduce levels of demand for on-going traditional Adult Social Care support through use of alternative community based services  Citizens benefit from appropriate support within their communities | First innovation site launched June 2019 involving Access Harrow and Early Intervention Team.  Initial analysis shows:   * Increased numbers of people’s needs resolved at the first stage of the process to 88% in October 2019 * Reduced numbers of new long-term cases from community settings starting each week to 5.7 from 7.2 before the innovation site was launched   The second innovation site will be launched in January 2020 and the third will begin by March. Further roll-out is planned during 2020  Future governance and monitoring and will be provided through the **ASC Improvement Board** |
| **Adults Resources restructure**  Second stage of staff restructure to align Adults Resources services to deliver the vision  Covers brokerage, client finance, complaints, commissioning and contract management functions | Appropriate staffing resources and structures are in place  Brokerage functions are more efficient with stronger links to quality and price issues  Market management, commissioning and contract management functions are better developed | Following staff consultation earlier in the year, new structures are being implemented during October and November.  These include:   * A single brokerage service * New contract management posts * New commissioning posts   There were no reductions in staffing numbers as a result of the restructure.  The effectiveness of the new arrangements will be kept under review through the **ASC Improvement Board** |
| **Charging policy review**  Consultation on charging policy to remove disregards and allowances currently applied and introduce administration fees for self-funders | Charging policies align with most other Boroughs  Introduce changes over 3 year period  Increased income | Consultation on proposed changes to the Charging Policy will be undertaken during October and November 2019 with a decision on the proposals to be taken by Cabinet in January 2020.  If approved the new policy will be introduced from April 2020. |
| **Empowering People with Learning Disabilities - Harrow is Home**  Support people with Learning Disabilities to live independently and have clear move-on pathways. | More people with LD are supported to live in the local community  The number of people with LD in residential/nursing care is reduced  People with LD are effectively supported to access employment, education and volunteering activities | During 2019/20 51 people with learning disabilities will have their care support reviewed to ensure appropriate provision which promotes independence.  As at the middle of November 2019:  46 of those citizens have been reviewed. The remaining 5 will have been reviewed by the end of December  2019  14 have had their care plans revised to promote their wellbeing through more cost effective care plans  9 have moved to more independent settings  23 have had no changes to support  Changes to care packages are on target to fully deliver the MTFS savings target of £400K in 2019/20  The project and on-going monitoring will continue in the future through the **Commissioning workstream** |
| **Empowering People with Learning Disabilities – LD Integration**  Establish integrated and co-located Learning Disabilities service in partnership with NHS colleagues | Achieve better outcomes for people with LD through more integrated working across LBH & NHS  Integrated working should improve efficiencies from future models of care commissioning | The integrated Learning Disabilities service will move into the refurbished Civic 5 and 6 during November and December 2019.  The new arrangements will be kept under review during 2020 through the **ASC Improvement Board** |
| **Targeting reviews effectively**  Reviews are targeted, and more consistent, higher quality and reflect strengths based practice | Care packages are adjusted where appropriate to ensure needs are met in the most appropriate and cost effective way | All care packages should be reviewed at least once a year.  Approximately 355 care packages have been identified for targeted review where there is a potential to revise support to better meet needs.  As at 15th November, 214 of the targeted reviews have been completed. As a consequence, some remain unchanged, some have support increased and others have support reduced or changed.  These changes have delivered approximately £724,000 reductions in care package costs  By the end of the financial year, the predicted figures are 344 completed reviews delivering savings of £863K  Future governance and monitoring and will be provided through the **ASC Improvement Board** |
| **Market Management and Commissioning** | *Details of projects in this workstream are set out below –* Future oversight and governance of these projects will be provided through the **Commissioning Workstream** | |
| **i – Market Position Statement and Commissioning Plans**  Develop high level plans and strategies to ensure appropriate services are available to meet needs | Strategies are agreed which identify provision needed to meet anticipated demand  A commissioning programme is developed to ensure the provision of appropriate services | Market Position Statements detailing current service provision, anticipated future needs and a programme of future commissioning will be presented to Cabinet in February 2020 |
| **ii – MyCEP and CarePlace review**  Review the arrangements for managed Personal Budgets provided through MyCommunity e-Purse (MyCEP)  Review current and future use of CarePlace | Decisions are made on whether to continue use of MyCEP  Options for alternative Personal Budget models are explored  Options for maximising use of CarePlace are identified | Phase 1 of the project has been completed.  This identified that alternative arrangements for managed Personal Budgets are needed for the future.  Phase 2 of the work will identify options for future implementation.  The initial phase also identified areas such as e-brokerage where CarePlace can be used to improve processes and deliver efficiencies.  These issues will be picked up in future work. |
| **iii – Extra care**  Increase the amount of Extra Care housing available in Harrow | Reduction in admissions of Older People to residential care  Increased numbers of people enabled to live independently with support | A project group is in place to prepare for the introduction of planned new Extra Care services.  Plans to further develop Extra Care provision will be included in the MPS and commissioning plans |
| **iv – Housing with support**  Review the range and quality of housing with support to ensure it is appropriate to meet anticipated needs | An appropriate range of housing with varying levels and types of support is available to meet anticipated needs  People are supported to live independently with appropriate, high quality support | Plans to ensure appropriate provision of housing with support will be included in the MPS and commissioning plans |
| **v – Empowering people with Mental Health needs**  Review the current model of mental health care service delivery and provision and identify options for the future | Plans are developed to ensure the provision of mental health services which focus on prevention, recovery and promoting independence | A project launched in November 2019 which will review current service models and make recommendations for the future which promote prevention, recovery and independence  Where appropriate these will be included in future commissioning plans |
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