

Scope of Peer Review of Islington Adult Social Care 29 September – 1 October 2014

Theme

The **Care Act 2014** gives **new duties** to **local authorities**.

Local Authorities will have to **make sure** that their adult care and support **services meet the needs of all people** in their area who **need care and support**.

Islington Council have a strategic and operational approach to **market development**. **Market development** is a plan for **growth** that **finds** and **develops new areas**.

How effective is our approach?

We would like the **Peer Review team** to think about the following

- Islington Council examined the current **resource allocation** against **outcomes**.
The study is called the **Use of Resources**.
Is the document **clear about how we spend money and what we achieve against this?**
- Is growth and development included in the **Moving Forward** and **Care Act Implementation** programmes?
Is there **effective governance**?
Is there **effective capacity** and **leadership** to take this forward?
Can we do it **quickly enough**?
- Are the joint arrangements between the **Clinical Commissioning Group (CCG)** and **Adult Social Care** being **used to their best advantage**?
Consider the work being done across
 - The Chief Executive's department - leading on development within the third sector
 - Children's Commissioning
 - Public Health
- Is the information gathered by **Public Health** being used **effectively** around **market development**?
- Does Islington understand the **profile** and **potential needs** of the **self-funders** in the borough?
Self-funders are people who pay for their own care.

Overview

There are **two reasons** why **developing the market** is a **relevant theme** for Islington at this time

1. The **Care Act 2014** places **new responsibilities** on Local Authorities to **develop and shape** the market of Care
 - this includes services for people who **fund their own care**
 - there is also a responsibility to **take over care when another service provider fails**

2. Developing the market effectively supports the best use of reduced resources by
 - ensuring **quality** and **capacity** of supply
 - **making good use** of **community resources**
 - **reducing** or delaying **the need for more intensive services**

Working Theory

Islington has a **good history of engagement** with local and national providers. There are some good examples of **creative developments**.

The focus has been on **engagement with providers** rather than **strategic market development**.

The Service Director recognises that **this approach needs to change**.

The social care market must **support the implementation of the Care Act 2014**.

Islington have a difficult **savings programme** over the next four years.

Plans are being developed to start working on strategic market development.

At this stage it would be useful to have an objective view on

- The direction we are going in
Is it the **right way**?
- The scope and pace of our development
Is it the **right choice**? Are we going at the **right speed**?

Self - Assessment

- Please see the SWOT analysis in **Appendix 1**
- The document list is in **Appendix 2**
- Most documents will be made available to the review team by 12 September 2014
- The Use of Resources document will be sent on 15 September

Important questions

We propose the following questions

- Is the **Use of Resources** analysis **clear about how we spend money and what we achieve against this?**
This is an analysis of current resource allocation against outcomes.
- Is **growth** and **development** effectively scoped in the **Moving Forward** and **Care Act Implementation** programmes
Is there **effective governance?**
Is there **effective capacity and leadership** to take this forward?
Can we do it **quickly enough?**
- Are the **joint arrangements** between the **CCG** and **Adult Social Care** being used to their best advantage?
Consider the work being done across
 - The Chief Executive's department - leading on development within the third sector
 - Children's Commissioning
 - Public Health
- Is information gathered by **Public Health** being used **effectively** around **market development?**
- Does Islington understand the **profile** and **potential needs** of the **self-funders** in the borough? Self-funders are **people who pay for their own care.**

Standards

The University of Birmingham is developing a set of **standards to support the principles of commissioning.**

We want to use these standards to support the assessment by the Peer Review team. The commissioning standards for market development will be available by 8 September 2014.

The University of Birmingham defines the principle of market development as "Promotes **positive engagement** with **providers of care** and **ensures diversity, sustainability** and **quality** of the market.

Good commissioning **values** the **expertise** of **providers** and their role in stimulating innovation in order to find the best solutions to **deliver positive outcomes** for citizens and communities. It is concerned with **sustainability**, including the **financial stability of providers**".

Arrangements for the review

The review team

Grainne Siggins	Lead Director of Adult Social Services London Borough of Newham
Howard Tomlin	Review team co-ordinator London Borough of Newham
Claire Duignan	London Borough of Enfield
Simon Froud	London Borough of Redbridge
Susan Hasler-Winter	London Borough of Wandsworth

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Location

The Peer Review team will be based at

7 Newington Barrow Way, London, N7 7EP

The team will be allocated a room in the building. There will be a laptop with internet access. All interviews, focus groups, briefings and feedback meetings have been arranged. Access within the building has been arranged.

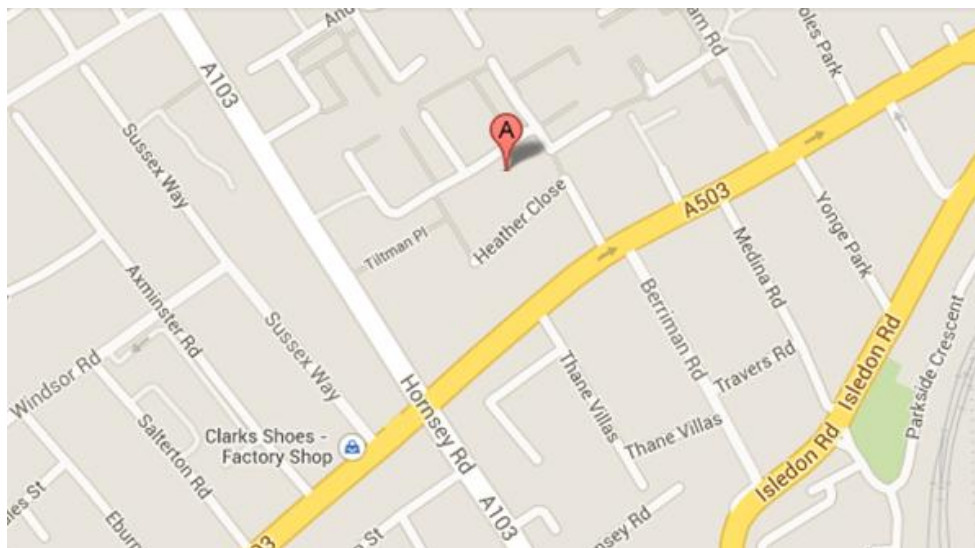
Refreshments will be available.

A map and directions to Newington Barrow Way are below.

How to get here <http://www.islington.gov.uk/about/contact-complaints/visitingoffices/Pages/7NewingtonBarrowWay.aspx>

By bus: 4, 43, 19, 236, 253, 254, 259, 279, 271, 17, 106, 153, 91, 210, W3, W7

By tube: Finsbury Park By train: Highbury & Islington



Appendix 1

SWOT analysis

A **SWOT analysis** is a **structured planning method**.

It is used to think about the **strengths, weaknesses, opportunities, and threats** involved in a project or business venture.

Strengths

The features of the business or project that give it an **advantage** over others

- Islington has **integrated** commissioning arrangements with **Islington CCG** and a **pooled Section 75** budget for commissioning.
This enables us to **jointly commission services** around mental health, substance misuse, sexual health and end of life services.
- We have a **joint commissioning strategy** with **NHS partners** that sets out how the council and NHS will **develop services until 2017**.
- **Islington Evidence Hub** is a partnership between **Islington Council** and the **local NHS**.
It brings information about different organisations into one place.
It is designed to be used by people **looking for evidence**, to help **ensure** that **local decisions** are made **based upon the needs of the local population**.
This enables easy access to JSNA information which is used to inform commissioning activities.
JSNA means Joint Strategic Needs Assessment.
- There are a number of **innovative** and **flourishing local providers**.
These include Centre 404 and Age UK Islington.
- There is a history of **good service user and family carer engagement** in developing new services.
Examples of this included the development of a new supported housing unit e.g. Leigh Road
- We have a good history of **innovative commissioning**.
We have developed **personalised alternatives** for people.
An example of this is our **new domiciliary care services**. The service allows people to **bank hours over a four week period** so that they can receive care and support at a time that is **convenient to them**.

Weaknesses


The features that put the business or project at a **disadvantage** compared to others

- We lack a **joint approach to market development** across the CCG and Local Authority.
This often means that both organisations end up **contracting similar types of services separately**.
Examples of this include the domiciliary care and continuing health homecare contracts that were commissioned independently.
There is a lack of a joint commissioning approach with Age UK services that both organisations purchase.
- To date only one **Market Position Statement** has been developed so far.
This is focused on Older People residential services.
A **Market Position Statement is a tool** to help organisations ensure their market grows to meet current and future need.
Market Position Statements have **not been part of the culture of commissioning in Islington**. This has **made communicating** our planning messages to the market **more difficult**.
- There is high level of **in-house services** in Islington.
These contribute to a high percentage of spending in the borough.
We have **not used a commissioning approach** when contracting these services.
- Commissioning is taken on by service user groups. This can sometimes encourage a **silos approach**.
A silo is a **management system** that **does not interact or share** with other systems.
This can result in duplication of effort and use of resources spent on procurement processes.
- Due to a lack of care home provision in the borough the majority of our residential and nursing placements are out of borough placements.

Opportunities


The features that the project or business could use to its **advantage**

- There are plans in place to **restructure the commissioning division** by the autumn.
The current approach focuses on service user groups.
The aim is to move to **commissioning across themes and programmes**.

- The Head of In-house Provider Services agrees to **develop a commissioning approach to in-house services**.
There is **good buy-in** from commissioners. This means that they are in agreement with or support the decisions being made.
 - The Assistant Director for Strategic Commissioning is leading work to align commissioning activity better.
It will ensure a **more joined up approach** and **reduce duplicated effort** across the locality.
This includes
 - Islington CCG
 - Public Health
 - Children's Social Care
 - Adult Social Care
 - There is a **high level of community engagement** in Islington.
This can be used to develop the services available.
 - We need to explore how we better **use the community assets we have** in order to **develop our universal offer in Islington**.
We need to do more **work with other council departments** and **external partners**.
 - Islington's status as an **Integration Pioneer** gives an opportunity to **explore new ways of working**.
We can do this by **joining up health and social care provision** more closely.
 - The **values-based commissioning approach** being tested by Islington CCG has **scope to be developed for social care commissioning**.
Values-based commissioning looks at what type of services should be commissioned and why.
 - Commissioners in Islington are engaged and enthusiastic about **trying new ways of commissioning and working with providers**.
An example of this is **collaborative commissioning**. This is where a group of CCG's **work together** to commission services.
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Threats

The features in the environment that **could cause concern** for the business or project

- Islington is not a **Commissioning Council**
 - There is **no corporate approach** to market development
 - Current management prefers to have **services in-house**. Their view is that this is better for residents.
This might be difficult to reconcile with a strategic approach to **sustainable market development**.
 - Some of the highest value contracts are **long-term PFI arrangements**.
PFI means Private Finance Initiative. This means **funding public projects with private money**.
There might be **limited scope to influence the behaviour or development** of providers. This includes most of our in-borough care home contracts.
This might not be a priority for the CCG. This would **limit the scope** for **effective collaboration**.
 - Islington wants to ensure that all providers and sub-contractors **pay at least the London Living Wage**.
There is a risk that this **could be difficult for new market development**.
It may also be **unsustainable** for current providers.
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Appendix 2

List of documents

- Islington Local Account 12-13
 - Islington Council/Islington CCG Joint Commissioning Strategy 2012-17
 - IPC Review of Commissioning
 - Islington JSNA via The Islington Evidence Hub
 - Moving Forward Programme PIDS and Programme Plan
 - Care Act Implementation PIDS
 - Market Position Statement – Older People Residential Care
 - PSS EX1 2013-14
 - 2013-14 Provisional Benchmarking on Unit Costs report
 - 2012-13 In-house vs External Unit Costs (if 13-14 data is available by then I will refresh so we can send that.
 - Draft Use of Resources Toolkit
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