

Age of Opportunity Strategy

Essex County Council's
4 year strategic plan in supporting choice and
independence for Older People
(2007-2011)

Contents

1. Introduction.....	3
2. Living longer in Essex- local context	3
3. Outcomes for people who use services.....	4
4. Underpinning principles and Standards	5
5. Making it happen.....	5
6. Listening to people.....	6
7. Individual Budgets and Direct Payments for Social Care	6
8. Bringing the Age of Opportunity to life	7
8.1 Improved Health	7
8.2 Improved quality of life	9
8.3 Making a positive contribution.....	11
8.4 Exercise of choice and control.....	12
8.5 Freedom from discrimination or harassment	13
8.6 Economic well-being	13
8.7 Personal dignity.....	14
9. Re-investment plan to deliver this strategic framework	15
10. Targets for 2011	15

AGE OF OPPORTUNITY

1. Introduction

The Age of Opportunity sets out the strategic direction and framework for Adult Social Care work with older people. It was developed in the light of the new emerging local and national priorities of enabling people to exercise greater choice, control and independence. Preparatory work began in 2005 with interested stakeholders, the strategy has been updated to take account of feedback and particularly the seven outcomes set out in the white paper '*Our Health, Our care, Our say: a new direction for community services*' and the Commission for Social Care Inspection's (CSCI) "Outcomes Framework for Performance Assessment of Adult Social Care".

The Age of Opportunity should be read in conjunction with corresponding strategies. These include:

- Health and Opportunity for the People of Essex, Local Area Agreement, (March 2006)
- Equal Lives Strategy (2006 to 2011) for services for people with physical and sensory impairments.
- Housing Strategy for Older People in Essex (draft)
- Joint Health and Social Care Commissioning Strategy for Older People's with mental health needs (draft)
- The Way Ahead: The strategy for people with learning disabilities.

2. Living longer in Essex- local context

The population of Essex is changing and people can generally look forward to living longer healthier lives than previous generations. As more people live into older age the need for a range of care and support will increase, often provided by family and friends.

- By 2011, the percentage of people in Essex aged over 60 is expected to have increased from 22% (2001) to 26%
- Estimates indicate that there will be an additional 6,500 older people in Essex aged 85+ by 2011 (an increase of 23%). In 2005 70% of people aged 85+ in Essex had a limited long-term illness
- People over 60 years in Essex are more likely to provide unpaid care, and for more hours, than younger people. The 2001 Census found that 13% of people aged over 60 provided some unpaid care, with 4% caring for more than 50 hours a week.

Local context

Essex is a large, diverse county and demands for and access to services vary for a number of reasons across the county. These include:

- **Levels of deprivation:** Although overall Essex is relatively prosperous there are areas of deprivation with Harlow, Tendring and Basildon amount the most deprived 50% of English districts
- **Housing needs:** Overall, approximately 74% of older people are owner occupiers. Almost a third of homes owned by the over 60s' are likely to need renovation or repair¹. 15% of householders rent social housing, but this proportion increases to 35% in Harlow and 23% in Basildon
- **Access to service provision in rural areas:** Only 23% of rural households are within 800 metres of an hourly or better bus service. This makes travelling to reach services difficult and can cause problems in providing a home-based service
- **Diversity:** Only 2.9% of the Essex population are from black and minority ethnic groups, but the percentage of non-white residents increases to 5.1% in Harlow and 4.9% in Epping Forest
- **Demographics:** Tendring has the highest proportion of residents over 65 (26%). The impact of demographic change is forecast to be above average significance in Essex because of the population inflow to the post-war new towns of Basildon and Harlow 50 years ago
- **Crime rate:** The Essex crime rate is below the national average, but fear of crime is high
- **Planned developments:** Proposed developments, including the Thames Gateway, Haven Gateway and the Stansted/M11 corridor, could result in an additional 100,000 homes being built in the county by 2021
- **Recruitment and retention:** Districts bordering London are competing with London boroughs for a limited pool of qualified staff.

3. Outcomes for people who use services

In consultation with key stakeholders, Essex County Council proposes that services for older people, should deliver the seven outcomes set out by CSCl:

- Improved health
- Improved quality of life
- Making a positive contribution
- The exercise of choice and control
- Freedom from discrimination or harassment
- Economic well-being
- Personal dignity.

The Age of Opportunity is now structured around each of these outcomes. Several services (such as transport) could fit equally well under more than one of these headings, but to avoid duplication they are only referred to within one outcome.

¹ Based on national survey by Home Improvement Trust

CSCI plan to inspect Adult Social Care services against the seven outcomes listed above.

Services will be sensitive to local needs and resources, and will usually be achieved in partnership with other statutory, independent and voluntary organisations as well as service user organisations. The County Council will continue to strengthen its ability to work at a local level to ensure all services consistently achieve these outcomes.

4. Underpinning principles and Standards

In working to meet these outcomes, Essex Adult Social Care Services will:

- respect service users' rights by supporting them to make informed decisions about the options available to them
- place equality and diversity at the centre of service planning
- recognise each older person as a unique individual, rather than regarding older people as a homogenous group
- ensure the aspirations, concerns and needs of people who use services and their carers, shape the way future services are commissioned
- develop innovative ways of working that are built around service users' needs and aspirations and not constrained by organisational and professional boundaries
- remain committed to working in partnership to achieve the best outcomes
- support, train and develop all staff to ensure that they are able to deliver modernised services.

5. Making it happen

In order to achieve the outcomes set out in this strategic framework, there is a need to implement an Adult Social Care action plan. The plan will specify the key milestones and how the Strategy will be delivered. The plan will be reviewed each year jointly with the older people's planning group and partner organisations.

Who does the Age of Opportunity cover?

The strategy identifies the Council's medium term plan to improve services for older people and their carers. There is no strict definition of an older person. As people generally have healthier and longer lives, some may not consider a person old until they are in their eighties or nineties. Much will depend upon individual self-perception and needs. To help encourage planning and future provision people in their fifties are increasingly included in older people groupings. In terms of access to Adult Social Care service, an older person is an individual aged 65 or over.

Older people will include individuals of all backgrounds and needs, who may at some point require and use any one of a range of services, some universally

available to all, others reserved for those whose health or care needs require more specialist support funded by the individual or subsidised by public bodies or voluntary organizations. One ongoing aim of the Age of Opportunity is to ensure a full range of support is available and services all work together to ensure they are effective and efficient and provide good value for money, whether they are provided by the County Council, District Councils, local NHS, Housing providers, Voluntary and community organizations and contracted providers,

6. Listening to people

The Age of Opportunity sets out seven key outcomes for developing services for older people over the next year and beyond. The principles in the strategy are based on:

- Feedback from service users, carers and the wider community about their needs and aspirations
- Views expressed at the visioning events for adult social care services in Essex following the Green Paper *'Independence, Well-being and Choice'*²
- National social care and health policy frameworks including 'Our health, Our Care, Our Say: a new direction for community services'.
- The County Council's Corporate Plan,
- Local priorities, identified by Local Strategic Partnerships and set out in the Essex Local Area Agreement.
- Projected future service needs, based on information about demographic trends and changing expectations.

7. Individual Budgets and Direct Payments for Social Care

Key to the Age of Opportunity is encouraging and supporting more people to use the opportunities offered through new ways of promoting independent living, offering choice and the ability to make decisions about the provision of their care. Individual budgets will allow people to have access to a support navigator or broker to assist in drawing up and negotiating a plan for the care services they need. This means people can transfer a share of their budget to something more appropriate and create more flexible packages of support. People can also choose whether to receive their support in the form of a cash 'direct' payment.

Individual budgets will therefore be a means by which there is a significant change in the investment pattern of social care monies to support older people over the next 4 years. (Note, although the names are similar, Direct [Social Care] Payments' are not related to the Pension Services' Direct Payment of pensions into people's bank accounts).

² Independence, Well-being and Choice, Department of Health, March 2005

8. Bringing the Age of Opportunity to life

This document sets key outcomes for Adult Social Care Services to deliver against on an annual basis up to 2011. It will be complemented by training to ensure staff are equipped to deliver these outcomes and a strategy to ensure the right services are sourced and available.

The following sections outline what we want to achieve and why. This will be complemented by plans set out by Local Strategic Partnerships detailing how these outcomes will be achieved in each locality.

8.1 Improved Health

Older people and their carers should be supported to enjoy good physical and mental health (including protection from abuse and exploitation), have access to appropriate treatment and support in managing long-term conditions independent, and have opportunities for physical and stimulating activity.

This aspiration is shared with the NHS and district and borough councils, with the County Council responsible for only some of the services contributing to improving the health of older people.

How will we help enable older people and carers:

1. Develop **integrated networks and social care and health teams** to support older people and their carers to live as independently as possible in their own homes, including those people with long term conditions.
2. Transform the approach to assessing and reviewing people's needs by ensuring that **holistic, needs-led assessments and reviews**:
 - are timely, culturally sensitive, and respectful of life experience
 - are proportionate to presenting needs
 - recognise carers, take their views into account and offer an assessment of their caring role
 - highlight personal aspirations, skills and abilities
 - explore the range of options and choices available including mainstream facilities as well as services within the voluntary and community sector
 - consider how barriers can be overcome to sustain people's friendships, relationships and community involvement,
 - encourage ongoing community participation to sustain and rebuild confidence and self-worth
 - consider a person's sense of safety in their local community as well as in their home
 - seek creative solutions, and are not driven by traditional service models or availability,

- consider where equipment can reduce the need for personal assistance
- 3. Provide **care management services** for people with the most complex physical and emotional needs using innovative ways of support
- 4. Extend the **telephone-based assessment** system to older people to allow them to make changes to their care by telephone
- 5. Develop **self-assessment** for older people and carers
- 6. Develop an **Expert Carer programme** to give carers the necessary skills and strategies to cope with the role of caring for a relative, friend or neighbour
- 7. Further develop expertise to **protect vulnerable people** from abuse including the development of quality standards for investigations into potential abuse and an electronic system for recording abuse alerts
- 8. Work with NHS Trusts to establish **local end of life networks** bringing together primary and social care services, hospices, third-sector providers, community palliative care services and hospital services
- 9. Raise awareness of practical measures people can take to **reduce the risks of falling at home**
- 10. Exploit all opportunities to encourage older people to **eat healthily** and drink sufficient to prevent their malnutrition and dehydration

How we will work in partnership with older people and carers:

- 11. Increased take-up amongst older people of the **Expert Patient Programme** which empowers people with long term conditions to be strong self-advocates within the NHS and improves the way they manage their condition.
- 12. Further reduce people's need to repeat information to a range of professionals by sharing information (with consent) and the development of an **electronic assessment** (e-SAP) across health and social care organisations
- 13. Appropriate **preventative services** e.g. dietary advice, increasing availability of specialist equipment, exercise and seated exercise courses.
- 14. Increased public awareness of the existence of **abuse of vulnerable older people**, and protection issues

8.2 Improved quality of life

Older people and their carers should be supported to access leisure, social activities, life-long learning and universal, public and commercial services. (The term 'universal services' refers to all facilities, services or groups open or available directly to the public, whether local or national.) They, should feel secure at home, have access to appropriate transport and have confidence in safety outside the home. These should combine to prevent people becoming socially isolated.

This aspiration is shared with district and borough councils, Health organisations, voluntary and community organisations, the Police Authority, and the Fire Service. The County Council is responsible for the delivery of some of the services and works in partnership with other agencies to contribute to improving older people's quality of life.

How will we help enable older people and carers:

1. Provide a **comprehensive range of information** about universal as well as social care services, readily available in different places and formats, including local transport options
2. Support the **voluntary and community (Third) sector** to develop subsidised 'low level' support services that prevent or delay people's need for social care services, prevent social isolation, improve well-being and quality of life
3. Provide **community equipment** and assistive technology that allow people to manage everyday activities more independently
4. Increase the use of **assistive technology** to support people with cognitive impairments at home, using technological advances that offer non-intrusive support options, in partnership with district and borough councils and NHS partners
5. Subsidise some low **level support services** that can make a significant difference to perceived quality of life by sustaining people's pride in their home.
6. Develop a **housing strategy** to meet the needs of older people across Essex, and the development of a range of accommodation options for people with high-intensity care needs to meet present and future demands in ways that generate a sense of safety for people at home
7. Support the development of '**floating**' **housing support** to assist older people to maintain their tenancies and meet need across the county
8. Increase the number of people with Telecare to 4,000 new users by 2008.

9. Support **Home Improvement Agencies** in the delivery of services to improve people's home environments, including benefit maximisation, handyperson schemes, home safety audits and gardening schemes
10. With partners, develop a range of home-based, intensive health and social care short term services in support of the restoration of people's confidence, particularly for people returning home from hospital provided with rehabilitation
11. Provide **specialist short term residential rehabilitation** to maximise chances of people returning home after a hospital admission.
12. Increase the **level of intensive home** in relation to the level of residential care from 28 to 29%
13. Commission **residential care** to ensure provision local to where it is needed and homes encourage residents' continuing contact and involvement with local communities.
14. Increase the availability of **community transport** and other initiatives to increase older people's access to their communities
15. Promote Essex Traffic Control Centre **information service** for older travellers
16. Ensure all Essex County Council contracted bus services are fully accessible by 2015

How we will work in partnership with older people and carers:

17. Support older people's participation in sporting, leisure, life-long learning and other cultural activities
18. Seek opportunities to shift resources from under-utilised housing schemes to floating support or Extra care schemes, depending on local priorities
19. An inclusive approach to planning housing developments to ensure that future building are designed with the needs of an ageing population in mind
20. Promote Older people's use of country parks and district & borough leisure services for walking, cycling and sporting activities
21. Local community safety partners and plans, to increase older people's sense of security e.g. neighbourhood watch schemes, self-defence classes

8.3 Making a positive contribution

Older people should be able to actively participate in the community through employment or voluntary opportunities, maintaining involvement in local activities and being involved in policy development and decision making.

How will we help enable older people and carers:

1. Promote **positive images** through regular press coverage of older people using adult social care services, their achievements, and the impact they have in the design and delivery of services
2. Maintain a countywide **Older People's Planning Team**, jointly led by older people and a senior manager, to work with the service on strategic planning, service development and redesign, and monitor services in terms of quality and delivery against the actions set out here.
3. Ensure the **participation** of older people from black and minority ethnic communities (including travellers) within the Older People's Planning Team, to ensure barriers these groups face in using Adult Social Care Services are identified and removed, and culturally sensitive services are developed
4. Establish systems for older people to **participate in mystery shopping** exercises of Essex County Council services
5. As a norm, establish **participation in recruitment** and selection of all posts within Older People's Services, and in planning events.

How we will work in partnership with older people and carers:

6. In partnership with Better Government for Older People and other organisations across Essex run by and for older people, establish a strong voice for older people which link with the Local Strategic Partnerships and the new Participation Networks Forum of organisations led by disabled or older people
7. Seek to support opportunities to develop inter-generational initiatives across a range of services run by Essex County Council and beyond
8. Challenge society's perception so older people are seen as a resource rather than a problem, and promote their significant contribution to society as mentors to children and vulnerable adults, support to parents and families, as grandparents, carers and volunteers

9. Support the development and promotion of interesting, imaginative and worthwhile volunteering opportunities for older people, for example Duke of Edinburgh Award assessors, involvement in school and college activities, and with the 2012 Olympic Games etc

8.4 Exercise of choice and control

This will be achieved for older people and their carers through access to information that enables them to make informed decisions, by people having the freedom to choose and control the types of service that they want, and managing the risks in their personal lives.

How will we help enable older people and carers:

1. Provide a comprehensive **range of information** about community as well as social care services that is readily available at different times and places, in a range of formats, in addition to being accessible through hyperlinks from a range of organisations' websites.
2. Establish a **voucher scheme** to support older people and their carers, initially for short term breaks
3. Ensure people wishing to purchase support services independent of the county council are **signposted** to appropriate good quality information to make free and informed choices
4. Develop systems for **self-assessment** and self-review by older people and carers
5. Introduce **individual budgets** to give people the freedom to meet their needs in the best possible way, with care or support managers/navigators available through user-led organisations – dependent upon an early pilot, this to be available by 2009
6. Acknowledge and actively support people's rights to take and live with their own **risks** where they are able to do this.

How we will work in partnership with older people and carers:

7. Explore opportunities through partnerships to ensure a comprehensive range of information and advice for people wishing to secure their own support services privately including one-stop shops
8. Voluntary organisations' communication networks as a means of disseminating information on the exercise of choice and control.

9. Independent providers of adult social care services to develop the market for more flexible support services.

8.5 Freedom from discrimination or harassment

Older people and their carers are entitled to equality of access to services, and should not be subject to any form of discrimination or abuse. All statutory, commercial and voluntary organisations share responsibility for this outcome.

How will we help enable older people and carers:

1. Provide assessments and reviews that acknowledge the **barriers** faced by older people
2. Provide and promote access to good quality **independent advocacy** services particularly those able to represent people from ethnic or other minority groups facing either discrimination or harassment
3. Increase public awareness of the **existence of abuse** of vulnerable older people, and protection issues
4. Ensure **equality impact assessments** of all social care services, including those provided by partner and voluntary organisations

How we will work in partnership with older people and carers:

5. Primary Care and Hospital Trusts to identify and address the barriers that older people with mental health problems currently face in accessing mainstream health services such as physical rehabilitation
6. An increase in public awareness of older people's participation in society, of the attitudinal barriers they face which need to be addressed, and so reduce the harassment they experience

8.6 Economic well-being

Older people should have an income and access to resources sufficient for a good diet, accommodation and participation family and community life, and the ability to meet costs arising from specific individual needs.

Whilst benefit levels are outside the control of the County Council, it is important to recognise the significance of this outcome.

How will we help enable older people and carers:

1. Ensure that all financial assessments for care services include **advice on benefit entitlement**

How we will work in partnership with older people and carers:

2. The continued development of services to which older people can be signposted for advice on the full range of options for maximising their available income and resources
3. Explore opportunities for more joint working with the Department of Work and Pensions and housing benefit authorities to streamline the process of assessing people's entitlement to benefits and their ability to pay for services
4. Through partnership with Primary Care Trusts, ensure the new national Continuing Care Policy supports people's rights to NHS-funded continuing care at home

8.7 Personal dignity

Disabled and older people have the right to be personally clean and comfortable, enjoying a hygienic and orderly environment, able to call on appropriate personal care or assistance as needed.

How will we help enable older people and carers:

1. Provide **personal assistance** that offers choice, is timely and enabling in philosophy, culturally sensitive, and with trained, sensitive staff who respect people's privacy and dignity.
2. Ensure a range of **flexible day services**, for those who need a break from home but whose needs cannot met through alternative universal or voluntary services
3. Explore more creative use of current day centres and develop as **resource centres** to provide innovative and more flexible support services (including Home from Home schemes) run by both voluntary organisations and independent providers
4. Ensure a range of services to **support carers**, including access to good information, advice and short term breaks
5. Monitor all services to ensure they provide **high quality care** and treat people with dignity and respect at all times.

Individual budgets will further enhance people's personal dignity by allowing them the freedom to secure the type of services they feel will best meet their needs, whether or not they are traditional types of social care services

How we will work in partnership with older people and carers:

6. Support the development of a countywide organisation that supports carers, and explore the opportunities to support the development of carers' resource centres
7. Primary Care Trusts to develop a joint strategic framework for responsive intermediate care across Essex.
8. Primary Care Trusts to jointly commission arrangements for support services for people with dementia including the onset of early dementia.
9. Residential and nursing home providers to ensure their residents have access to independent advocacy.

9. Re-investment plan to deliver this strategic framework

Individual budgets will be one of the means by which the balance of investment between types of service and budget policy area shifts to ensure that County Council resources move away from services that do not meet needs and expectations to ones that people actually want. Thus individual budgets will help promote the more effective use of the resources available to meet care and support needs.

A 5 year budget plan has been developed to identify the varying contribution existing budget areas will make towards this 2011.

10. Targets for 2011

It is likely that the national performance indicators set by the government will have changed by 2011, however, broadly the targets within the Age of Opportunity are:

1. Fifty percent of total expenditure for older people's social care (excluding only assessment and residential services) to be via individual budgets by 2011

2. Proportion of service users receiving a Direct (social care) Payment to remain in the top quartile nationally
3. Acceptable waiting times for assessments for new clients to increase from 81% (target in 2006/07) to 90%
4. All carers to be offered an assessment

Consultation

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We welcome your views on this draft strategy. Please send any comments by the 4th May 2007 to Catherine Mitchell, Head of Strategic Planning and Commissioning, care of Debbie Freeman, "A" Block, County Hall, Chelmsford CM1 1YS. Email: deborah.freeman@essexcc.gov.uk