

I'm sure you're all wondering how things have progressed so lets have a rundown on what's happened since Feb 2010?

- Working with Xentrall and CareWorks new servers have been built to host the CareDirector system here in Stockton. This has been done in a 'virtual' environment which will assist in making Director dependable and recoverable in the event of any unforeseen disaster. All of which means Director will be robust and reliable to support the work of our services.
- CareDirector has been installed here in Stockton by CareWorks. This is very much a 'vanilla' version though, so doesn't contain any of our Adults data (which is currently on CareFirst), or any of our pick lists, documents, teams or staff.
- A plan has been agreed around what data will be migrated from CareFirst into CareDirector. The plan details what data we aren't allowed to migrate due to retention and destruction of data requirements, along with which records we are required to populate in.
- The team of staff who will support CareDirector, and who will provide users with helpdesk support have been trained in certain aspects of the system, such as creating user profiles, developing 'electronic' documents, and creating workflows within the system.
- CareWorks Finance module has been installed, this will enable us to maintain our payments to residential providers. A specialist Finance consultant from CareWorks has been working with our Finance team at

Bayheath House to explore our current use of CareFinance and map that against the new finance module.

- A new system has been installed to support our Supporting People Team. This is a class leading solution and work to implement it has been going at a solid pace. We expect to roll this out in Summer 2010.
- Process mapping sessions have taken place with a number of teams across the adult's service. Information from these sessions and from a wide range of business process questions has been supplied to CareWorks. A specialist Adult Services Consultant from CareWorks has spent time here in Stockton working with a group of key operational representatives to look at how CareDirector may be used to support our business. For everyone involved in these sessions it proved a valuable introduction to CareDirector and the opportunities it presents.
- Many staff have taken the opportunity to brush up on their basic IT skills, this will assist when they start to make case recordings directly into CareDirector rather than their current paper based contact notes, assessments, plans and reviews.
- A 'document library' of the paper-based forms we currently employ has been developed.
- A Specialist Transformation Team has been established. In addition to supporting the transformation of services required for self directed support this team will also provide operational input and steer to the CareDirector implementation.

## Where do we go from here?

We must take this chance to thank Ann Workman for her great lead as Director of this project, we wish her all the best in her new role in Darlington.

Glyn Roberts now joins the ACMS project as Director. He will pick up and build on the fantastic work achieved by Ann. Glyn will lead us into the second half of 2010 where a lot of work will take place to move the CareFirst data over into CareDirector, this is a task that will continue right up to the point where we Go Live on Director in 2011.

Work to set up our organisation and team structure in Director is needed. Everyone who currently has access to CareFirst will continue to have access in Director. As we work through the migration we will take the opportunity to create more local pick lists and reference data.

More sessions will take place with the CareWorks consultants. Some local changes to 'Stocktonise' CareDirector will be identified and made as a result of these sessions.

Our aim is to move forward in 2010 to the point where we can invite operational staff to start testing the system on both its case management abilities and the quality of data migrated into it, all of which will give us a good indication that we can start thinking about a comprehensive training programme and a firmer 'Go Live' date for 2011.

**If you have any questions or queries, please don't hesitate to contact this Project via either Specialist. [transformationteam@stockton.gov.uk](mailto:transformationteam@stockton.gov.uk) or [tim.whitfield@stockton.gov.uk](mailto:tim.whitfield@stockton.gov.uk)**



Stockton-on-Tees  
BOROUGH COUNCIL

# Personalisation Newsletter

Issue 4 July 2010

## Welcome to the 4th edition of the Stockton-on-Tees Personalisation Newsletter.

**Since the last edition in March 2010 we have maintained steady progress with the introduction of self directed support and these arrangements are now being embedded into normal practice across adult social care teams.**

The last few months have continued to bring many challenges and opportunities to the Personalisation Project Team not least the departure in June of Ann Workman (Manager – ISA North) who has moved to our neighbouring authority in Darlington. Ann was the operational driving force, ensuring the self directed support arrangements were introduced despite the ever-increasing demands on all practitioners. Ann will be sadly missed but her move will encourage further partnership working between both authorities.

Arrangements to manage Ann's departure are now in place and Brett Bardsley (Team Manager Review & Stockton Central) will be providing support for the Direct Payment arrangements whilst Angela Connor (Team Manager, Sensory Loss & Billingham) will be responsible for operational integration. Alongside these changes the newly formed Specialist Transformation Team has

now become fully operational. The team of 12 people are mainly based in Billingham Council Offices. More information about the team and their roles and responsibilities are featured in the Newsletter.

Work to develop the Resource Allocation System (RAS) continues, led by Finance team colleagues. The remodelling of the RAS and the Personal Needs Questionnaire (PNQ) is now a priority and focus of the weekly Validation Forum meetings. These meetings are now being used to agree Indicative Personal Budgets for those people whose support needs are complex, high risk or where a high level of support is included as part of their interim care package, whilst team managers will approve the majority of the Indicative Personal Budgets.

There have been a lot of other developments in the transformation of adult social care over recent months and these will continue over the rest of this year. We expect to see the new web-based service directory being launched in the autumn. Details of the 'Support Planning' training arrangements for service users, carers and practitioners are explained in more

detail in the Newsletter. This training has come at a good time as we see the numbers of people wanting to explore self directed support options increase.

The issue of the newsletter also includes interesting articles about the E-learning training course on 'Understanding Personalisation' available for everyone and which will take about an hour to complete; User Led Organisation development across the Borough; the national workforce data collection tool (National Minimum Data Set); helpful guidance on how to undertake risk assessments and enable client safety in the new world of self directed support and an update on the local Personal Health Budgets pilot.

**Peter Smith,  
Personalisation  
Project  
Manager**



## Personal Health Budgets – the pilot progresses!

The Stockton/Hartlepool pilot is now offering people with long-term conditions a Personal Health Budget (PHB). Over 160 people are getting the chance to be part of the pilot with 80 being given a Personal Health Budget and a further 80 being part of the comparison group. We are working with people with multiple sclerosis, motor neurone disease and Chronic Obstructive Pulmonary Disease alongside people with pain management and continuing health care needs. By Autumn 2011 the outcomes for these

people will start to be evaluated, as we are one of 20 national in-depth pilot sites for this three-year pilot.

So what are PHBs? They are an allocation of resources made to a person with an established health need. They can be given as either a notional budget, held by the commissioner; given to a third party on behalf of the patient or as a Direct Payment now that legislative approval has been given. The PHB will help people access services they need to achieve the health and wellbeing results they want by taking more control over

how money is spent on their care.

As well as these benefits the pilot is expected to facilitate a cultural change, stimulate flexibility and creativity and use the experiences of PHB users to better inform and shape future commissioning intentions whilst transforming the way health services are eventually delivered.

**If you want to know more you can contact Emma Whitworth (PHB Project Manager) on 01429 284270 or email [emma.whitworth@hartlepool.gov.uk](mailto:emma.whitworth@hartlepool.gov.uk)**

## User Led Organisations in Stockton-on-Tees

Work on developing User Led Organisations (ULOs) has been progressing since February '10 when an action learning set delivered by the regional Improvement and Efficiency Partnership (RIEP) was held for local authorities in the south of the region. This helped facilitate opportunities to involve ULOs in the Personalisation agenda. In addition work has been going on to map existing and emerging ULOs across the region and to provide some business planning / skill development training for them. This culminated in a regional event held in Sunderland on 23rd March.

In Stockton we have identified six emerging ULOs. Stockton were partners in a bid to the RIEP, alongside Middlesbrough, Redcar & Cleveland and Hartlepool to undertake development work with emerging ULOs. This has led to £130k of funding being made available towards ULO development with Stockton and Middlesbrough getting £100k between them. Further work is now taking place.

**If you want to find out more please contact Peter Smith [p.smith@stockton.gov.uk](mailto:p.smith@stockton.gov.uk) Tel 01642 528446**

# What makes a Support Plan a Good Support Plan?



As regular readers will be aware each issue of the newsletter focuses on a specific step of the In Control “7 step approach to self directed support” and in this issue our focus is on step 3 “Getting my Plan Agreed”.

A good support plan is considered to be one in which a person, with whatever level of support they require, answers the following seven specific questions. Stockton on Tees borough council will consider all support plans against this criteria so read on to find out what we will be looking for!

## What’s important to the person?

When someone reads the plan, they should get a good sense of the person’s lifestyle. They should get an understanding of who the person is and their interests and hopes for the future. We will look for Information about the person. For example: what is important to them, any experiences that they may feel relevant, people who are important in their life. A plan will not be agreed if the information in the plan treats the person like a stereotype, and does not express their personality. A plan will not be agreed if it is written in very general ‘one size fits all’ terms.

## What does the person want to change?

This means the plan should say what a person wants to change about their lifestyle. This may include changing where they live, changing services they currently receive, or changing how they spend their time. We will look for changes that are realistic and achievable. The changes can include long-term changes that the person would like to make, however these must then be broken down into achievable steps. A plan will not be agreed if it does not clearly specify what the person wants to change or if the changes appear to be imposed by others. A plan will not be agreed if the actions would make a person’s situation worse.

## How will the person be supported?

The plan should say what kind of help or support the person is going to use to make the changes they want in their life.

It should say how they will make sure they stay safe and well. We will check that the plan says exactly what support the person wants, when they need it and how they want this to be provided. It should say who will provide this support or help - for example, from family, friends, or paid assistants. It should include information about how the person will manage any risks, and what support they need to stay safe and well. The plan will not be agreed if the person has no idea how they are going to use their Personal Budget to get support. The plan must not be agreed if the person or others are at unreasonable risk of harm but have put nothing in place to do anything about it.

## How will the person spend their Personal Budget?

A plan must set out how the person wants their Personal Budget to be used. If the person wants to receive their money as a direct payment, or a third party payment then their plan needs to say what their support service will cost for a year. The person can also ask their care manager to buy a service on their behalf – a service that provides the support set out in their plan. Another option is for the person to have their money as an Individual Service Fund with a support provider. This means that they agree to follow the person’s support plan and only spend a person’s money on that person. There are lots of kinds of support someone can spend their money on. People aren’t limited to paying for support from personal assistants. A plan will not be agreed if doesn’t say how the person’s money will be used. A plan will require further discussion if the services included in it cost significantly more than the indicative personal budget that has been offered. A plan will not be agreed if the person intends to do anything illegal!

## How will support be managed?

A plan must explain how any support a person pays for is going to be organised. A plan should say who is going to manage the money. If the person is going to employ people, it must say how they will sort out the payment of salaries, how people will be

supported, trained and supervised, and other arrangements. The plan will not be agreed if it is unclear who is responsible for what, or if a person doesn’t intend to do everything that they must be do by law. A plan must take into account employment and discrimination laws.

## How will a person stay in control of their life?

A plan must say how the person will stay in control of his or her own life. This means thinking about what decisions they will make. Where other people make decisions for the person, it has to be clear how they involve that person and get their agreement. A plan should describe the decisions that the person will be making, and those that others will make. If someone else is going to manage a person’s money on their behalf (for example an agent, Trust, care manager, or provider), the plan should say how the person wants to review their support with them. A plan will not be agreed if it looks like others are making decisions for a person who could reasonably make those decisions themselves.

## What is the person going to do to make this plan happen?

A plan should set out real and measurable things that will happen in the future. In that way it is possible to look back and see whether the plan is working or not. A plan should say who will be responsible for each action and when it will be done. A plan should say how the person will check this action plan to ensure that problems can be dealt with as they arise. It should be clear how these actions will help the person to make the changes they said they wanted to make. The plan will not be agreed if the person just said some general things that need to happen. There need to be clear actions that will make sure a plan will happen.

With thanks to In Control ([www.in-control.org.uk](http://www.in-control.org.uk))

# Specialist Transformation Team Update

The Specialist Transformation Team (STT) is now fully operational and mainly located at Billingham Council Offices.

The team has responsibility for operationally transforming our adult social care services, integrating new systems and supporting staff to understand the changes and how they impact on customers.

## The team consists of the following people:

- Peter Smith (Personalisation Project Manager)
- Rebecca Williams (Communications & Engagement)
- Tim Whitfield (Care Director Integration)
- Alan Lee (RAS Finance)
- Janet Hayes (Staff Training & Development)
- Emma Gatenby (Direct Payments)
- Sarah Garside (Independent Living Fund & Validation Forum)
- Annette Nelthorpe (Adults Integration Support)
- Andrew Jamieson (Learning Disabilities Integration Support) p/t
- Catherine Roberts (Mental Health Integration Support) p/t
- Susan Stabler (Mental Health Integration Support) p/t
- Melanie Stevenson (Administration & Support)

In addition Brett Bardsley (Team Manager – Review & Stockton Central ISA Team) will be providing support for the Direct Payment arrangements whilst Angela Connor (Team Manager – Sensory Loss & Billingham ISA Team) will be responsible for operational integration.

We are all working to improve decision making and a better relationship between people and the welfare state, so that people get better lives, as active and included citizens and are part of healthy communities.

It is not simply about giving people money; sometimes people are most impoverished when they are using their own money since they have no information, no connections, no confidence, no knowledge of other possibilities and no one to help them plan.

We know that people’s lives don’t split into health and social care. Our support needs to focus on whole people in their whole context with contributions to make as well as needs to be met.

# Support Planning Training

Arrangements are now in place for a FREE one-day support planning training course to be held at regular intervals over the coming months.

The training is being delivered by Tricia Nicoll (Regional Manager – in Control) and held at the Education Centre on 5th July and 14th, 20th, 23rd and 27th September. Further one-day sessions will be held later in the year. The training is open to everyone including practitioners, individuals and carers wanting to find out more about ‘support planning’. If you are interested or know of someone who would like to take part please contact the CESC Training Team

Stephanie.frost@stockton.gov.uk or telephone 528362.

In addition we are working with Tricia to develop a ‘Train the Trainers’ course in support planning to build a network of trained support planners able to assist others learn these skills. This training will take place later in the year and people will be identified from the introductory sessions.

If you’re interested please contact Peter Smith p.smith@stockton.gov.uk or telephone 528446

The central aim is that by the end of the programme, 200 people will have had the opportunity to attend a one-

day awareness-raising session and at least 50 people will have had the opportunity to take part in more in-depth training. All training will be with mixed groups of people, to include Care Managers, other council workers, people from provider organisations and Third sector organisations, people who use services and family carers.

People who use services and family carers will also have the chance to be part of the pass-it-on planning pilot that will be held in Stockton (a partnership between Tricia Nicoll Consulting and In Control) and further information will be provided in the next edition of the Newsletter.

## The National Minimum Data Set

The new National Minimum Data Set (NMDS) has been developed to provide details of the workforce within care-providing organisations and establishments. This includes workforce details of care related staff working in Stockton Borough Council. The data set has been designed to capture reliable workforce data on the social care sector and replaces the annual SSDS001 return. The NMDS once populated will provide valuable planning and funding information at a local, regional and national level.

The data required for the NMDS needs to be collected from within the Council and through independent sector providers. HR involvement is enabling data to be obtained which will be transferred to the database.

Information required from independent sector providers will be obtained directly from those providers and linked to amendments within contracts.

More information can be obtained from [andrew.thomas@stockton.gov.uk](mailto:andrew.thomas@stockton.gov.uk) Tel 01642 527223