

Essex County Council Prevention Strategy  
May 2008

**Our vision is to build a stronger community infrastructure in neighbourhoods and provide accessible public services for adults to reduce, delay or prevent them becoming socially excluded and needing more intensive, costly support from social and health care agencies.**

Adults, Health & Community Wellbeing 3 year plan for increasing the quality and coverage of preventative and universal services across Essex.

Version Number	Date	Purpose	Author
FINAL	7 <sup>th</sup> May 2008	Comment from C.W.O.P. Board + A.H.C.W. SMT	Fiona McMahon



## Foreword

We have both welcomed the opportunity to work in collaboration with our colleagues in the health and local authority, voluntary and community sectors, to design and deliver this strategy. The production of the strategy represents the recognition of the value of investment in preventative services to delay entry into social care and health services and the importance of the promotion of well being and community involvement for all our citizens.

Across Essex we will face many challenges as a result of the projected increase in the number of older people, the introduction of this strategy and supporting action plans with the continued focus on the engagement of voluntary and community groups to deliver universal and community wellbeing services represents a pragmatic and exciting response to the future for all Essex citizens.



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## Introduction

The population of Essex is set to increase and there are plans for many more households to come into the Essex area over the next twenty years. Together with the fact that people are living longer, this means that the number of older people, disabled people, people with sensory impairments and people with mental health needs will grow.

This strategy is published to present the County Council's approach for the provision of prevention services in Essex. It has been produced in response to what we know about the growing needs of the population and the need for all services to work together to reduce inequalities, improve wellbeing and promote social inclusion of Essex communities.

This strategy is a subset of the Community Wellbeing Strategy. It will complement the Children's Prevention Strategy, current commissioning strategies within Adults, Health and Community Wellbeing and support the targets within these strategies as well as the indicators within the Local Area Agreement and the pledges made by Members in Essex Works.

Our Health, Our Care, Our say states 'A greater focus should be placed on preventative services across the wider wellbeing through better targeted early interventions that prevent or defer the need for more costly intensive support'. Prevention measures involving a range of local authority services such as housing, transport, leisure and community safety in addition to social care can achieve significant improvements in wellbeing. Building and supporting the VCS to extend the range and quality of services and support for a strong and vibrant VCS is an essential component of our vision.

## Drivers

- **Population Increase** (detailed in the Joint Strategic Needs Assessment)
- **Targeting** of social care services on those people at greatest need or risk and with an increased need for a new approach to supporting people not eligible for care including adults with learning difficulties.
- **Council Priority** – Members Pledges to residents 2008/09
  - Make Essex the safest place to live in England within 5 years
  - Increase tenfold the number of Adult Social Care users who, through Personal Budgets, have greater choice and control over their care
  - Keep next year's Council Tax increase below the level of inflation
- The **Government Drive** to create preventative strategies to address social exclusion and increase the percentage of services provided by the voluntary sector
- **External Assessment** of performance will consider whether a whole council approach is taken to prevention and development of services for older and vulnerable people
- The increasing need for the **efficient use of resources** in the public sector and demonstrable value for money in all that is done
- **LAA** priority 2 more older people helped to live at home with sufficient support for carers
- Statutory services will not be able to respond to **increasing need** without developing preventative services that empower individuals to plan for later life

## Scope of the strategy

This strategy will cover prevention support and services for older people, people with physical disabilities, people with mental health needs, people with learning difficulties/disabilities and their carers who :

- are deemed at risk of social isolation and social exclusion
- or are needing more intensive health and social care support
- or will require appropriate access to information and services in the future

It will require that partners listen carefully to people and engage with them as citizens, acknowledging their hopes for the future and the contributions that they can make to their communities.

It will also require services be designed to promote independent living and clear, accessible systems to enable people to find out about them when they are needed.

The strategy will adopt a person centred approach, to support independence, enable easy access to services and build safer, stronger communities. Evidence suggests that adults want to live in their own homes for as long as possible, to feel safe and well and to live a full and active life.

## Partnerships

This strategy will work across all geographical and service areas, forging links and addressing the whole range of issues, policies and activities that impact on the lives and wellbeing of people.

The wider scope of the prevention strategy cannot be implemented without engagement, help and support of a diverse range of organisations and needs to include wider lower level prevention services and support such as:

- Transport (including community transport)
- Information
- Libraries – G.P.Prescription Learning
- Culture services
- Health Promotion
- Leisure
- Education and Life Long Learning
- Housing and Housing Support
- Community Safety including crime prevention and reduction.
- Community development Programmes
- Employment / Volunteering
- Supporting People Partnership

**Previously, services have tended to focus on a small group of vulnerable adults who have needed intensive support. This strategy actively seeks to 'invert the traditional triangle of care' by providing a more holistic service through partnership.**

## **The National Context**

The channelling of resources to those with the greatest need is challenging local authorities and health partners across the Country. Sir Derek Wanless in his 'King's Fund' report warns of a time bomb in which the rising elderly population means older people's social care costs will rise from £10bn in 2002 to £24bn in 2026. Sir Derek believes that to offer this level of support across the board will result in the annual costs increasing to £31bn (excluding people with learning impairments and severe physical disabilities).

Despite the limitations of the evidence base, the Wanless Social Care Review concluded 'Recognition should be given to the wealth of qualitative evidence about the value placed on lower level services by older people in helping them maintain their independence'. It suggests that overall the development of specialist, high quality services to improve the lives of older people with the greatest levels of need has been at the expense of low-level preventative services, which have generally relied on local initiatives or partnerships with voluntary sector organisations.

The Age Concern publication 'The evidence base for preventative services' discusses the need for 'Good partnership working and stresses that appropriate targeting of preventative interventions is vital. The likelihood of cost effectiveness seems to increase with the extent to which preventative community based services can be targeted at people greatest in need and the degree to which health and social care services are organised in a co-ordinated and integrated fashion.

Valuing People Now – A Learning Disability strategy from the Department of Health requires us to deliver a seamless transition into adulthood for young people with learning disabilities. Addressing their housing needs by inclusion into the planning process for the future to prevent care crisis with older carers and subsequent homelessness.

## **The role of the Voluntary and Community Sector**

In addition to the health and social care agenda, the government is committed to supporting the VCS to build community infrastructure and extend their role to deliver public service contracts. The county council has invested considerable resources to support third sector organisations locally and countywide.

In the financial year 2006/07 Adult Social Care spent over £52m in the third sector in Essex. This ranged from multi-million pound contracts with large provider organisations to grant funding below £1,000 to smaller voluntary and community organisations. In 2008/9 Adult Social Care plan to give £3m to support carers, over £800,000 of which will be in the form of grants. In addition the voluntary and community grant will fund third sector organisations by over £700,000 to support universal and community wellbeing schemes. Work is on-going to identify which other agencies also give grants in these areas. One of our objectives is to co-ordinate these with the ECC funding to achieve best value.

## **The Evidence for Prevention.**

More people across all age groups are being supported to live at home, but at the same time resources are increasingly targeted at those with the greatest need. This is despite emerging evidence from the Partnership for Older Peoples Projects (POPPS) which indicates that earlier intervention, before people reach high levels of need, may be more cost effective for the health and social care system, as well as providing better outcomes for Individuals. This is also supported by The Office for Disability Issues report 'Better Outcomes, Lower costs' into housing adaptations.

It has been increasingly shown that developing homecare reablement services can support independent living and deliver value for money. Assisstive technology, such as telecare and minor adaptations, like fitting a handrail, can also enable people with support needs to continue to live in their own homes. This is further supported by the CLG sponsored report (Capgemini) that demonstrated that £1 spent on SP services resulted in savings of £1.73 elsewhere.

The commitment to develop a national dementia strategy recognises the importance of people receiving an early diagnosis and being offered informed choices rather than waiting until a point of crisis.

All this indicates that faced with long term demographic change, the current system of social care delivery has to be fundamentally re-engineered and modernised to respond to the pressures on the system, the increased expectations placed upon it and to tackle the substantial culture change required. This change also needs to be set in the context of the recognition to explore options for the long term funding of the care and support system. Central Government have committed to producing a green paper in 2008 setting out options for reform.

This strategy sets out the council's approach to beginning this transformation towards more focused enablement and early intervention. The lessons learnt through our phased approach to initiatives will allow positive practise to be built into future commissioning plans and for us to remain flexible to adopting national guidance as it develops.

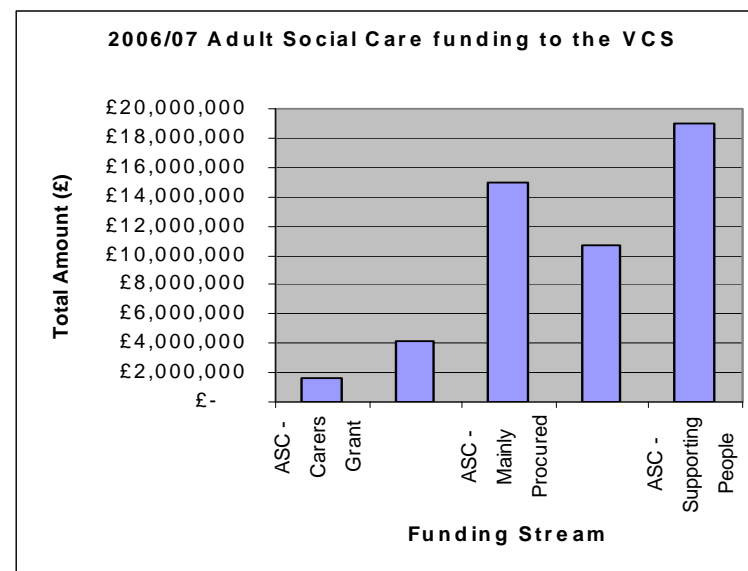
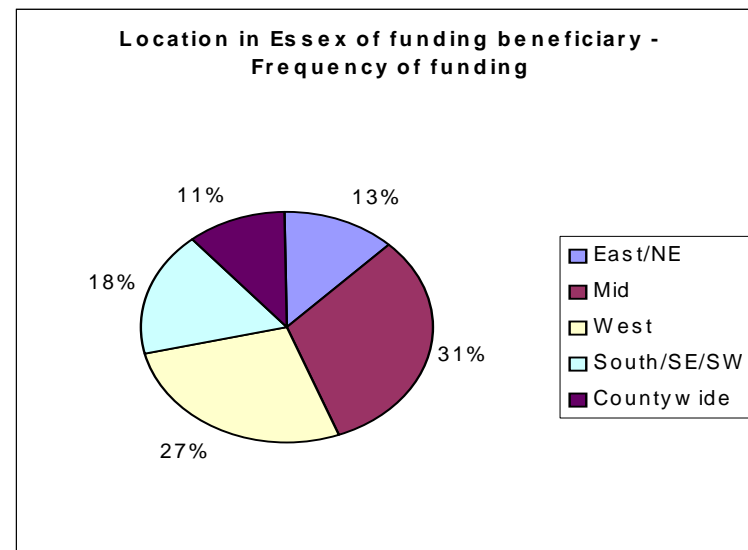
Our aim is to ensure that the new system is fair, sustainable and unambiguous about the respective responsibilities of the state, the family and the individual.

## The local context

The county council is committed to supporting people with substantial and critical care needs and implementing a model of self directed support through the provision of personal budgets to those with eligible needs.

The County's VCS are directly affected by the County Council's eligibility threshold – many of the services provided by the VCS are provided for people at the lower end of the eligibility threshold.

Adults, Health and Community Wellbeing fund over a hundred different third sector organisations. In 2008/09, the voluntary and community grant plans to fund countywide infrastructure schemes with roughly £122,000 to provide advice and support to voluntary organisations and individuals at district level as well as across Essex. In addition Adults Health and Community Wellbeing will fund low-level preventative activities, with the Mental Health Trusts supporting people with mental health needs and is exploring with PCTs, District and Borough Councils how to work more effectively with the third sector to support the citizens of Essex.



*We want to support vulnerable adults to live healthy, independent and fulfilled lives, providing excellent prevention services and promoting community empowerment, and supporting those at greatest risk of social exclusion.*

## **Core principles for the provision of Preventative services**

- Preventative services are needed to be rooted within the community so they can appropriately support vulnerable adults with less complex needs that do not need the intervention of health or social care professionals. Vulnerable adults include people with learning disabilities, mental health needs, older people, people with physical impairments and sensory impairments and their carers.
- The prevention strategy will support the provision of low-level prevention services that will compliment the role of health and social care statutory services with the aim of delaying or preventing individuals from needing more intensive or high level care.
- The voluntary and community sector is a key provider of preventative services and we will work more closely with the sector as a partner in delivering preventative services, acknowledging the VCS is often well placed to complement more intensive support.
- Current level of take-up for welfare benefits and tax credits combined with complexity of system and diversity of potential claimant population suggests strong continuing demand for effective, accurate and authoritative, non-governmental welfare rights advice service. (Commission National Association of Welfare Rights Advisors.)

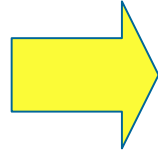
## **The value of the Voluntary and Community Sector**

- Having more established links with the wider community and better reach to all communities including the more disadvantaged and 'hard to reach'
- Having specialist knowledge and experience that statutory services may not, as well as being better placed to fill gaps in provision
- More freedom from institutional pressures so quicker to respond and more flexible in approach
- Able to access additional resources for innovation
- Able to be more responsive to local needs and respond quicker than statutory services
- Able to provide economies of scale and fulfil niche markets which often provide the greatest challenges for public service purchasers.

## Contributory Factors Supporting the Requirement for Prevention Strategy

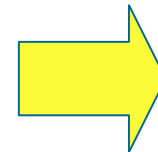
### Impact Assessment

Factors Leading to social exclusion



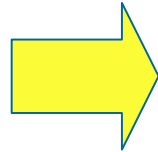
- Lack of material resources
- Lack of contact with other people
- Poor access to services
- Lack of engagement in neighbourhood activities
- Changes of role (loss of job, family moving away, death of relative or carer)
- Decline in health – leading to increased falls, poor mobility etc.

Current population trends in Essex



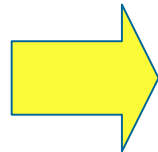
- Overall population growth
- Growth in older population
- Growth in adults with physical disabilities

Future challenges of an ageing population

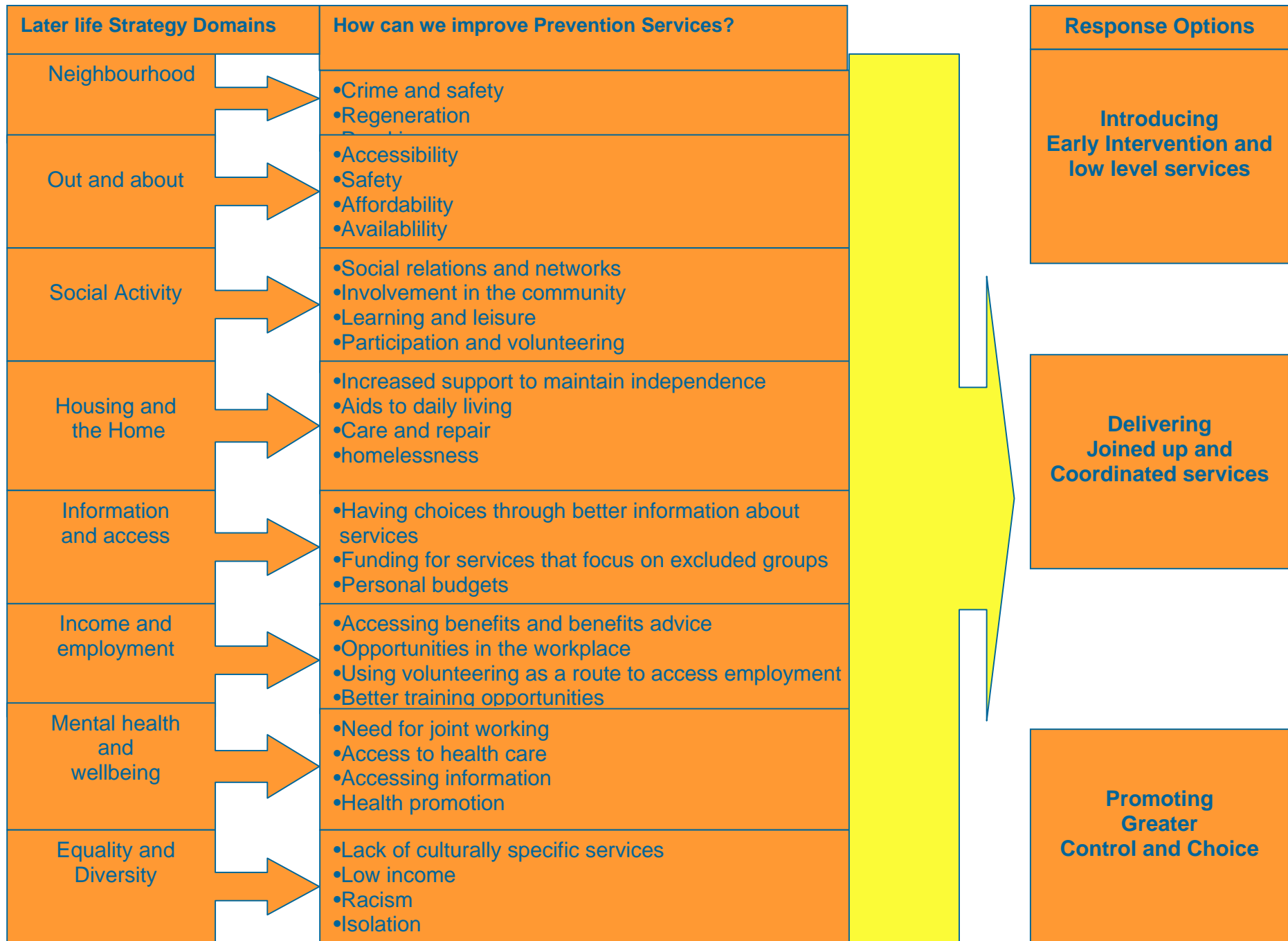


- Increased public spending needed
- Impact on the national labour market (less working age adults)
- Need for intensive services, low level services and financial support
- Higher levels of exclusion will have considerable economic and social impacts

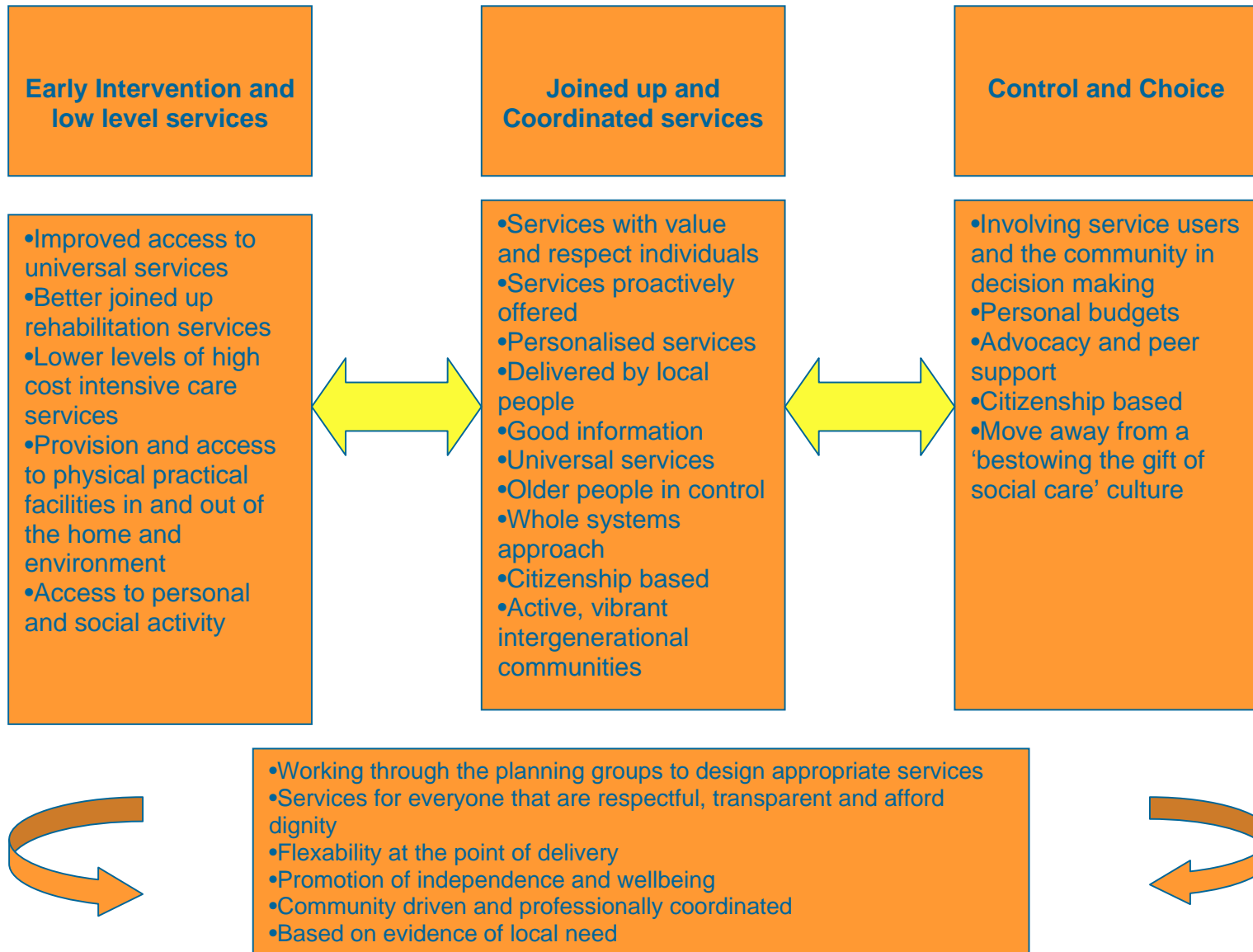
New opportunities



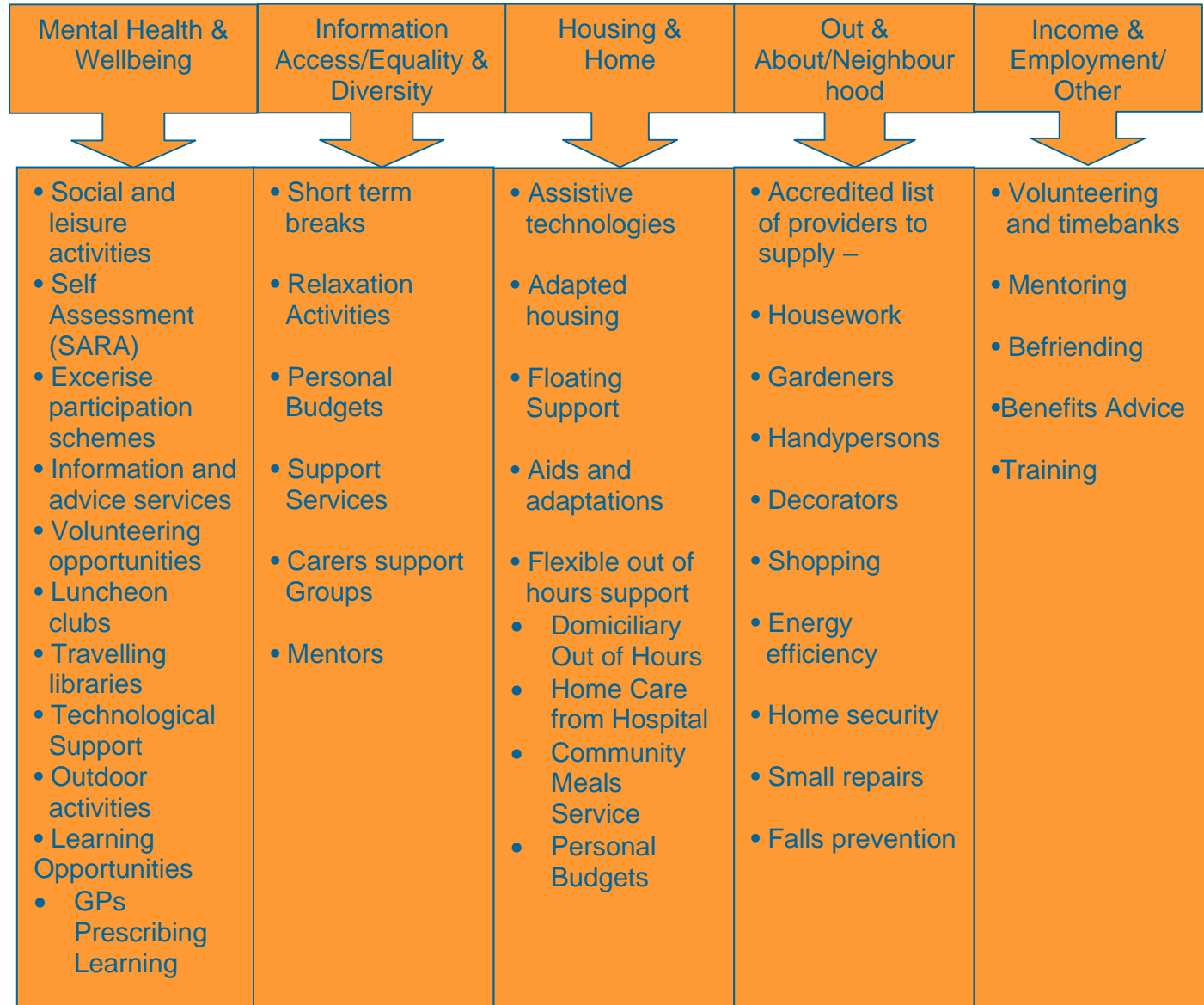
- Exclusion, ill health and acute needs are not inevitable consequences of ageing
- Wellbeing and low level services and a positive approach to disability and ageing address exclusion
- Early intervention can lead to greater quality of life
- Prevention is better than cure.



## Relationship Between Response Options



## Prevention Services – Delivering Improvements Across Essex



## Current Picture

There are already a broad range of practical services being delivered across the county by many different organisations within the private, voluntary and public sectors. Part of this strategy will be to bring together the contact and referral information into one central point that is easily accessible, with the overall aim of providing information to people when they need it, how they need it and where they need it. There is a need to ensure that all agencies across the social care sector, including the voluntary, public and private sector collaborate effectively to create a 'menu' of services available to people within the county.

It is recognised that without preventative and community based services vulnerable people can very quickly move into more acute services and become at risk of losing their independence

## Developments needed

- A co-ordinated approach to providing information about services to ensure people are able to access services or support when they want to.
- Falls prevention services across the county to be expanded and made accessible so people at risk of a fall can access.
- Assistive technology useage expanded and information on the benefits widely publicised.
- 'Brain training' activities to be developed to encourage people to keep an active mind
- Community developments such as improved neighbourliness and timebanks that will reduce social isolation and increase volunteering.
- Lifestyle choice supports so individuals are able to exercise choice and control of nutrition, smoking and exercise
- Basic home maintenance such as gardening to help people remain independent.
- Access to accredited services – eg shopping, gardening and repairs
- Expert Patient programmes to support individuals to manage their long term condition
- Engagement of G.Ps in prescribing learning/fitness or healthy living lifestyles
- To identify appropriate locations for vulnerable people to access places of safety
- To establish a structured community resource to support services for people with learning difficulties.

## Prevention Initiatives

### Early Intervention and low level services

### Joined up and Coordinated services

### Control and Choice

#### Phase 1- Implementation Qtr2 2008

- Stop Smoking Pilot in residential care homes.
- Handyman/Gardening Prevention Pilots

- NE Re-ablement pilot
- Care line Holistic Interview pilots
- Red Cross Next Steps pilot
- Deafblind UK

- CWB centre Consultation
- Development of Promotion & accessibility of Universal Services

#### Phase 2 Prioritisation to be Agreed in Qtr 2 2008

- Smoking cessation. Phase 2
- Falls Pilot
- Social Isolation

- Allocation of funds to LSPs to deliver against LAA Priorities 1 & 2 08/09
- Roll out of reablement across the county

- Red Cross contact Essex – Callbacks pilot
- Be Smart, Be safe- Pilot –Phase 1
- Be Smart Be Safe roll out

#### Phase 3

- Sept 2008 – April 2009  
Review of Prevention initiatives

- Housing Allocation Coordination