

Policy Document

<p>Putting People First Self Directed Support Strategic Policy</p>

Lead Director:	Liz Chidgey, Deputy Executive Director, Adults Health & Community Well Being		
Policy approved by:	Adults, Health & Community Wellbeing Management Team		
Date Policy approved:	17 th July 2008		
Implementation Date:	July 2008		
Review Date:	July 2010		
Status:	Final	Version no:	6



Document Control Sheet

Title of Policy:	Putting People First Self Directed Support Strategic Policy
Purpose of Policy:	To set the strategic direction for the implementation of self directed support as part of the Putting People First transformation of Adult Social Care in Essex.
Type of Policy:	Strategic Policy
Target Audience:	Directors, Managers and staff in Adult Social Care
Implementation Date:	September 2008
Action required:	ASC to adopt as the new strategic direction for provision of on-going support services for eligible service users and carers.
This policy supersedes:	n/a
This policy should be read alongside:	Existing Corporate policy documents including EssexWorks, Essex County Council Corporate Plan, Essex County Council Adult Social Care Service Plan (2007-10) and suite of SDS operational policies.
Lead Director:	Liz Chidgey, Deputy Executive Director, Adults Health & Community Well Being
Policy Lead / Author:	David Williams / Kate Burke
Project Team:	SDS Policy Reference Group: Karen Wright, Anna Casbolt, Amanda Julian, Karen Bellamy, Danny Graham, Stephen Bunford, Helen Terry
Draft Versions only:	
Comments to:	
Deadline:	

Putting People First

Self Directed Support Strategic Policy

1. Policy Statement

- 1.1 Essex Council Council (ECC) has committed to transforming the way adult social care is provided in Essex. ECC will establish a more personalised system of support that better meets the challenges of the future and is more responsive to the needs of those who use services and carers.
- 1.2 In line with the strategic direction articulated in the Putting People First concordat, the transformation of social care in Essex is designed to promote the independence, health and wellbeing of service users and carers by focusing on prevention, early intervention, enablement and high quality, personally tailored services.
- 1.3 As part of the overall transformation of adult social care, ECC will introduce self directed support (SDS) for service users and carers with assessed eligible needs. Eligibility for support services under SDS will be based on a FACS assessment and the ECC Fair Access to Care Services Policy and Guidance.
- 1.4 Under SDS, instead of a package of support, ECC service users with eligible assessed needs will be offered a personal budget to spend on meeting their social care needs. Service users will be supported to choose and organise their support in the way that suits them best. Service users will have the choice of taking their personal budget either as a cash payment in lieu of services paid directly to them or to a third party, or as a commissioned service, or a combination of these options.
- 1.5 Introducing SDS as part of the Putting People First transformation will give service users more choice and control over planning and managing their support and thereby promote the independence, health and wellbeing of service users and carers.
- 1.6 This policy sets the strategic framework for the introduction of the SDS model of care provision to ECC. SDS will:
 - Promote independent living and wellbeing
 - Increase choice and control for people eligible for social care services
 - Allocate resources fairly and transparently
 - Improve the quality of services
 - Make better use of resources

2. Guiding Principles

2.1 Personalisation of Adult Social Care

- Support services should be designed around the needs of citizens.
- Support services should be designed to promote the four goals and seven outcomes outlined in Our Health, Our Care, Our Say.
- Service users, as citizens, should have control and choice over how they live their lives, including their support.
- Support should be planned to best meet the personalised outcomes of individual service users and carers.
- The role of Adult Social Care is to help people maintain or regain their independence, regardless of age, impairment, sexual orientation, ethnicity or personal circumstances.
- Service users should have access to information and advice and universal services, to empower them to live independent lives, increase their well being and address their social care needs themselves.
- Not all service users have the desire or capacity to plan for and meet their own support needs.
- ECC will provide appropriate support to service users who do not have the desire or capacity to plan for and manage their own support needs to ensure that their assessed eligible needs are met.

2.2 Allocate Resources Fairly and Transparently

- Resources should be fairly allocated to service users on the basis of assessed eligible needs, regardless of gender, age, ethnicity, sexual orientation or impairment.
- A transparent, accurate and reliable Resource Allocation System (RAS) should be used to set the indicative personal budgets of service users.

2.3 Improve the Quality of Services

- Facilitation of support services that assist individual service users and carers reach personalised outcomes.
- Facilitation of the development of a functioning market for support services assists service users to access a choice of services and providers to enable them to benefit from more tailored support.

2.4 Make Better Use of Resources

- Enabling service users to have greater choice and control over their support can drive up the quality of support services and promote better use of resources.
- Prioritising prevention, early intervention and re-ablement promotes greater wellbeing and independence and can reduce the need for on-going support.

3. Outcomes

- 3.1 Implementing this policy will assist ECC to deliver the Adults Health and Well being Mission by:
Empowering adults to achieve and maintain independence and wellbeing through increased choice and control.
- 3.2 It will also assist ECC to deliver the Essex vision by improving the quality of life of service users and carers in the County.
- 3.3 Introducing this policy, as part of the system-wide transformation of adult social care in Essex, will assist ECC ASC to deliver:
- 3.4 *Better Health and Wellbeing through:*
- Implementing a model that promotes independent living and builds on the capacity of service users to plan and manage their support needs while providing them with assistance should they need more support.
 - Developing arrangements to prioritise prevention, early intervention and re-ablement, alongside SDS.
- 3.5 *Better Support through:*
- Enabling service users to make more choices and have more control over their support.
 - Providing service users with access to information and advice to support decision making and access to support services.
 - Promoting a broader market of support services and providers.
- 3.6 *Better Value for All through:*
- Enabling service users to meet their needs in a more cost-effective way, using personal budgets
 - Encouragement of a broader market of universal services and support providers to help drive up quality and better meet the needs of service users.
- 3.7 This policy will also provide the framework for development of appropriate processes and practice for implementation of SDS.

4. Scope and exclusions

- 4.1 This policy applies to everyone with eligible assessed needs to ensure that funding is targeted at those most in need of assistance from Essex County Council.
- 4.2 The criteria and standards contained in the Department of Health's Fair Access to Care Services (FACS) Guidance will be used to determine whether individuals are

eligible for support from ECC. Eligibility for support services under SDS will be based on a FACS assessment and the ECC *Fair Access to Care Services Policy and Guidance*.

- 4.3 In the first phase of implementation, current service users will continue to receive support under existing arrangements. Following implementation of personal budgets for new service users, arrangements will be put in place to enable existing service users to choose to move to SDS. ASC will implement a phased, risk based approach to moving existing service users from existing arrangements to SDS. The approach adopted will require the consent of existing services users to transition to SDS.

5. Background: Regulatory and Policy Context

- 5.1 Central government sets the strategic direction of adult social care in England. Central government also provides a legal and policy framework for adult social care provision.
- 5.2 ECC, as a local authority with responsibility for adult social care, has a statutory duty to assess adults and carers in the Authority's area who may be in need of services and, once assessed, to provide services to meet their eligible social care needs.

National Policy and Regulatory Framework

- 5.3 Adult social care services in England are facing two key challenges:
- Higher expectations of service users.
 - Demographic changes that are placing increasing demands on the social care system.
- 5.4 Service users are demanding greater choice and control over the planning and delivery of their support. In addition, greater life expectancy combined with an increase in complex cases is leading to a growing recognition of the inability of the existing model to cope with future need.
- 5.5 National policy makers have responded to the challenges of changing expectations and increasing needs by setting a new strategic direction for adult social care in England. *Our Health, Our Care, Our Say* (2006) propose that service users, as citizens, should be given more choice and control over their support.
- 5.6 In December 2007, the Government's new strategic direction was endorsed by the *Putting People First* concordant. Government, local authorities, health authorities, professional bodies and voluntary organisations agreed to the strategy and on the necessity of replacing the existing model of social care delivery with a system focused on prevention, early intervention, re-ablement and tailored on-going support services.

- 5.7 *Our Health Our Care Our Say* and Putting People First propose that the adult social care system should therefore be built around enhancing the independence of service users by giving them more control over how their support needs are met.
- 5.8 National policy has also set new priorities that focus on prevention, early intervention, choice and designing support around the personalised outcomes of individual service users and carers. The focus on new priorities is designed to achieve better outcomes for service users and to make better use of resources.
- 5.9 The new national priorities for social care delivery are:
- increased focus on prevention
 - facilitation of greater choice
 - reduction in inequality and improved access to service
 - increased support for long term needs
 - Personal dignity and respect
- 5.10 National and local governments are now in the process of transitioning from a model of direct service provision to one where the service user is empowered to take control of their own care through the medium of a flexible personal budget.
- 5.11 The Local Authority Circular (LAC (2008) 1 *Transforming Social Care*) introduced guidance on how local authorities should move towards SDS, and provided for grants to assist the process.
- 5.12 A list of key national policy documents and legislation is set out in Appendix A.

Local Policy Framework

- 5.13 At a local level, ECC has responded to the challenge and has developed a new vision for the Adults, Health and Community Well Being Directorate in Essex. The administration of adult social care in Essex is governed by a number of key ECC strategic policy documents that aim to incorporate national aims and priorities into the strategic direction and operation of adult social care in Essex.
- 5.14 A Local Area Agreement has been made between the Government and the Essex Partnership of public, private and third sector organisations to bring together national policy with local priorities, informed by the vision developed by local partners in the Essex Strategy.

6. Policy Background

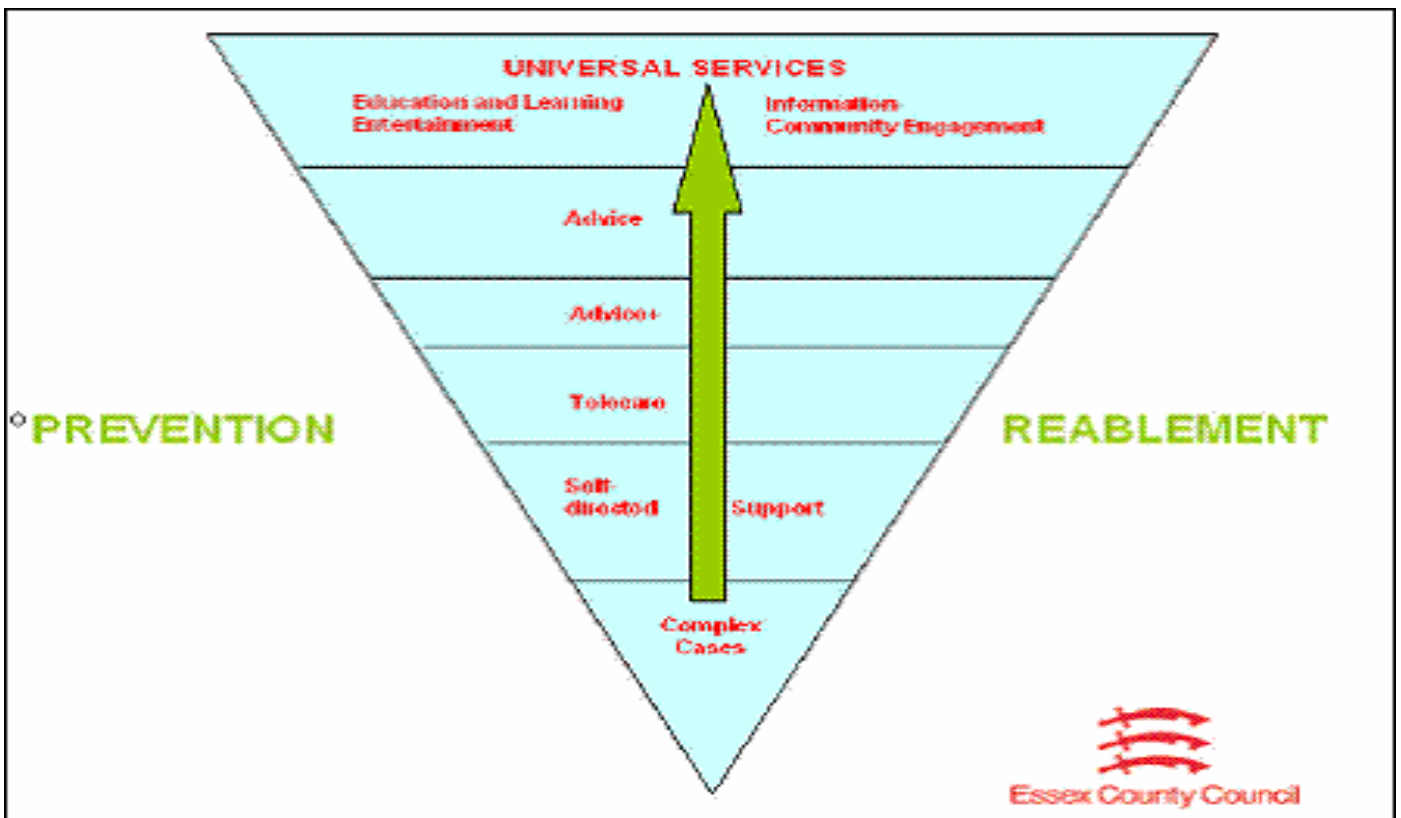
The Impetus for Change

- 6.1 Service users in Essex want greater choice and control over the planning and delivery of their support. The vast majority of people want to live in their own homes for as long as possible and live fulfilling lives in their communities and require a

model of social care delivery that can help ensure that they remain independent for as long as possible. In addition, demographic changes are increasing demand for ASC services, leading to a growing recognition of the inability of the existing model to cope with future need.

The Wider Transformation of Adult Social Care in Essex

- 6.2 ASC is moving towards adoption of a model of social care that encourages greater service user control and responsibility, combined with early intervention. By providing service users with greater access to high quality comprehensive preventative and early intervention services, including access to re-ablement where eligible, ASC can enable service users to address their social care needs themselves and may reduce demand for on-going support.
- 6.3 This approach is summarised in the following diagram. The diagram stresses the significance of the more universal services (including prevention, information and advice) as key elements in an overall approach to meeting both the national and local policy objectives for adult social care.



Self Directed Support

- 6.4 It is only where individuals have on-going, assessed, eligible social care needs which cannot be met by the provision of information, advice, one-off interventions or re-ablement that they will need on-going support via SDS.
- 6.5 Service users with eligible assessed needs will be offered a personal budget to spend on meeting these needs. Service users will be supported to choose and organise their support in the way that suits them best. Service users will have the choice of taking their personal budget either as a cash payment in lieu of services paid directly to them or to a third party, a service commissioned by Council, or a combination of these options.
- 6.6 This approach promotes the independence, health and wellbeing of service users by giving them more choice and control over planning and managing their support. It can also potentially integrate what are at present multiple funding streams that may be available to service users with eligible social care needs.
- 6.7 Under SDS, support is designed around meeting the eligible needs and personalised outcomes of individual service users and carers, so that support is better able to meet needs and achieve the outcomes that are most valued and most benefit the individual service user or carer.
- 6.8 *The Main Components of the Self Directed Support Model:*
- A network of information, advice and support to take preventative action, address short term and minor needs and reduce the need for on-going support services.
 - A process of supported self assessment to enable service users with on-going needs to be supported in identifying their capabilities, needs and personalised outcomes themselves.
 - A resource allocation system – or RAS - that combines existing funding streams to set indicative personal budgets for service users.
 - A personalised outcomes-based support plan that reflects an individual's support needs and priorities, based on an early indication of the budget available.
 - Access to sources of support and advice to help service users throughout the assessment, planning and delivery process.
 - A personal budget allocated to the service user or to an appropriate third party to manage, with a high degree of flexibility on what it can be spent on as long as it is legal and makes a clear contribution to the eligible needs and goals outlined in the support plan.
 - The ability to choose a mix of formal and informal services and support in the community from a well established and functioning support market.
 - Oversight by Council to ensure its responsibilities and duty of care are met and risks are well managed.

Council Responsibility for Planning and Delivery

- 6.9 There will be some service users who do not have the capacity, even with assistance, to plan for and meet their own support needs and have no appropriate person to make decisions for them.
- 6.10 The capacity of individual service users will be assessed in accordance with the requirements of the Mental Capacity Act 2005 and ECC Mental Capacity Act Policy and guidance.
- 6.11 There will also be service users who choose not to take responsibility for planning and managing their support.
- 6.12 In all such circumstances, ECC will take responsibility for planning and managing their support, together with the service user, carer and any representative. For such cases, an indicative personal budget will be identified and services will be commissioned within the agreed resources allocated and in line with the service user's support plan.

7. Policy Requirements

7.1 Introducing SDS will require a complete redesign of how ASC delivers support to eligible service users with on-going needs. This section of the policy document outlines how ECC proposes to redesign the delivery of support for service users with on-going care needs. It identifies the major areas of policy and process that will need to be developed to deliver SDS.

7.2 Accessing the System

7.2.1 **Output:** *Development of a centralised, accessible source of information, advice and support that empowers service users to address their social care needs themselves and refers them to on-going support services, if required.*

7.2.2 ECC will aim to provide a source of centralised information, advice and referrals to universal services to better:

- empower individuals to control their own support and remain independent.
- encourage early contact and use of prevention and early intervention services, which can prevent or defer on-going support needs.
- allow for the delivery of re-ablement programs to reduce the need for on-going support
- promote timely and straightforward access to support, information and services quicker and easier for service users.
- allow short term needs to be met while planning for on-going support.
- allow the needs of carers to be addressed.
- reduce the demand for on-going support services

7.2.3 Assessment

The access point will assess the support needs of potential service users and address their needs appropriately.

- Where service users have support needs that are not eligible for financial support from ECC, the access point will support them to manage their own support needs by providing information, advice and referrals to appropriate support and universal services.
- Where service users have on-going support needs that cannot be met by the provision of information, advice and universal services, the access point will initiate the assessment process to enable service users to obtain re-ablement or on-going support services.
- Where service users have eligible on-going support needs, the access point will initiate processes to meet their needs in the short term, while their on-going support needs are assessed and a support plan is developed.

7.3 Assessment Process

7.3.1 **Output:** *A fair and transparent assessment process that uses supported self assessment to help determine eligibility and level of need, and provides the appropriate level of support to individual service users to assist them in the assessment process.*

7.3.2 Under the SDS model, service users who require on-going support will maintain control and exercise choice through the supported self assessment of their support needs and the allocation of a personal budget with which to commission the services they require.

7.3.3 A cornerstone of the SDS model is a supported self assessment process to identify the support needs of individual service users. Supported self assessment recognises that the service user is best judge of their support needs and allows service users to be supported to identify their capabilities and needs themselves.

7.3.4 The basic functions of a support assessment are to:

- Accurately identify the support needs of service users.
- Determine the eligibility of service users for support services from ECC.
- Ensure that Council meets its statutory assessment obligations.

7.3.5 ECC will ensure that the assessment process is:

- fair, transparent and accessible to all service users, regardless of age, impairment, ethnicity or personal circumstances.
- Takes account of the needs of carers.
- Promotes streamlined and timely assessment of social care needs.

7.3.6 *FACS Assessment*

The criteria and standards contained in the Department of Health's Fair Access to Care Services (FACS) Guidance will be used to assess whether individuals are eligible for support from ASC. Eligibility for support services under SDS will be based on a FACS assessment and the ECC *Fair Access to Care Services Policy and Guidance*.

7.3.7 *Financial Assessment*

There will also be a need for a financial assessment. The application of charges for non-residential services under SDS will be governed by government guidance contained in LAC (2001) 32 and the ECC ASC *Non-Residential Charging Policy*.

7.3.8 *Statutory Obligations: Community Care Assessments*

ECC will continue to meet assessment obligations placed on councils by the National Health Services and Community Care Act (1990), existing practice and guidance on conducting support assessments and in the Community Care Assessment Directions 2004.

7.3.9 *Fairness and Accessibility: Provision of Support and Advice*

Supported self assessment encourages service users to take a leading role in identifying their support needs. ECC will take steps to ensure that support and advice services are available in order to ensure that all service users can fulfil their role adequately. ECC will aim to ensure that appropriate support is available to all service users, regardless of their age, impairment, ethnicity, sexual orientation or personal circumstances.

7.3.10 *Council Responsibility for Assessment*

There will be some service users who cannot, even with assistance, adequately assess their own care needs and who have no appropriate person in a position to take decisions on their behalf. Service users may also choose not to undertake a supported self assessment. In such circumstances, ECC will have the responsibility for assessing the needs of the service user, as appropriate, through the use of the supported self assessment tool.

7.3.11 *Policy Requirements*

The following policies will require ongoing review, revision or development to ensure that they are appropriate for the new model:

- Self Assessment – including eligibility
- Determining eligibility and application of FACS
- Application of Community Care Assessments
- Assessment process support, advice and reviews
- Safeguards

7.4. Allocation of Resources

7.4.1 **Output:** *Development of transparent, accurate and reliable Resource Allocation Systems that are capable of producing an appropriate indicative personal budget for service users and carers.*

7.4.2 Under SDS, those service users with ongoing eligible needs under the FACs Guidance will be offered a financial sum that they can use to enable them to meet their needs, which may be made available as a cash payment if they wish. This financial sum will also potentially encompass other funding streams currently available to support service users with support needs.

7.4.3 ECC will develop two separate Resource Allocation Systems to determine the indicative funds required to meet the assessed needs of service users and carers.

7.4.4 The Systems will produce an indicative personal budget for each service user and carer based on an assessment of their support needs, the cost of meeting those needs and the existing resource envelope.

7.4.5 During the support planning process, service users will be informed of the amount of their indicative personal budget, to assist them in planning their support. Once the indicative personal budget is validated, service users can use as much of their personal budget as they require to meet their eligible support needs. Any remainder will be retained by or returned to ECC.

7.4.6 ECC will aim to develop a RAS that is

- Simple
- Transparent
- Fair
- Controllable
- Integrated with other funding streams

7.4.7 *Key Function of a RAS*

- To provide an indicative allocation of resources based on a supported self assessment of needs, the cost of meeting those needs and the existing resource envelope.

7.4.8 *Key Functions of Personal Budgets*

- To indicate how much a service user has to spend to meet their assessed support needs.
- Payments made to service users will be paid net of any service user contribution, which will be determined through a financial assessment.
- To be used by ECC to plan the care of service users who cannot or choose not to manage their own support.

7.4.9 *Policy Requirements*

The following policies will require ongoing review, revision or development to ensure that they are appropriate for the new model:

- Resource Allocation System
- Individual Budgets and Direct Payments
- Charging
- Re-ablement

7.5. Developing a Support Plan

7.5.1 **Output:** *Establishment of flexible, outcomes-based planning options that allow the service user to choose the level of assistance they need and assists them to retain as much control over developing their individual support plan as their capabilities and circumstances allow.*

7.5.2 Under SDS, service users will be supported to develop a highly personalised, outcomes-based support plan that identifies:

- the support needs and priorities of the individual service user or carer.
- how the service user intends to spend their personal budget to best meet their assessed needs and support goals.

7.5.3 Each support plan will have the following essential features:

- Proportionate to the level of need of the service user or carer.
- Outlines of the assessed needs, goals and priorities of the service user or carer.
- Details of the combination of formal and informal support that will meet the assessed needs of the service user or carer and help achieve their goals and identified personalised outcomes.
- Takes account of the views and needs of carers.
- Specifies how the plan will meet the service user's social care needs.
- Identification of a clear contingency plan for a period of 4 weeks.
- Adaptability and flexibility, so service users can revise their plans as they learn what works best for them or as their circumstances change.

7.5.4 Capacity

The capacity of individual service users to take control of developing their support plan will be assessed in accordance with the requirements of the Mental Capacity Act 2005 and ECC Mental Capacity Act Policy and guidance.

7.5.5 Not all service users will have the capacity to take control of developing their support plan and may have no appropriate person in a position to take decisions on behalf of that person

7.5.6 In such circumstances, ECC will be the responsible decision maker. For such cases, a support plan will be developed and services will be commissioned within the agreed resources allocated and in line with the service user's support plan.

7.5.7 Where service users have capacity but do not wish to develop their own support plan, ECC will be required to manage the support planning process on their behalf.

7.5.8 *Support*

ECC will ensure that support in developing the support plan is tailored to the capacity and needs of the service user. Some service users will need information and guidance, while others will need much more intensive support in planning their package. ECC will seek to ensure that advice and support offered is appropriate, accurate and objective and tailored to the individual service user.

7.5.9 ECC will facilitate development of a choice of support planners to provide advice and information to service users and carers and to act as a facilitator in identifying their personal outcomes. The planners will provide assistance to service users to identify their needs and goals and to determine how they can best be met in the context of the individual budget allocated.

7.5.10 *Approval and Risk Management*

Unlike the current model, under SDS the responsibility for risks in support planning and provision will be shared between the service user and the Council.

7.5.11 While service users will assume responsibility for developing their support plan under SDS, it will remain the responsibility of Council to review and validate all SDS support plans and personal budgets.

7.5.12 ECC will retain its duty of care to ensure that the assessed social care needs of service users are met. ECC will therefore ensure that the support plan meets the support needs of the service user and uses funds appropriately.

7.5.13 *Review*

ECC will retain its statutory obligation to review service users at least annually, to ensure that their social care needs continue to be met adequately.

7.5.14 *Policy Requirements*

The following policies will require ongoing review, revision or development to ensure that they are appropriate for the new model:

- Supported Planning
- Safeguards
- Fraud
- Direct Payments and Individual Budgets

7.6 **Delivery of Allocated Resources**

7.6.1 **Output:** *Establishment of a range of options for delivering allocated budgets that offers service users varying levels of control over using and managing their personal budgets, so they can choose a delivery option that is in line with their identified personalised outcomes, capabilities and circumstances.*

- 7.6.2 Under SDS, service users will be able to use their personal budget to purchase or direct the purchase of their support in a way that suits them and that is in line with their support plan.
- 7.6.3 Service users who have been offered a personal budget and have an agreed support plan in place will have the choice of taking their personal budget either as a cash payment paid directly to them, a cash payment to a third party, or as a commissioned service, or a combination of these three options. Under SDS, unlike traditional models of service provision, support will be commissioned by service user, not ECC.
- 7.6.4 *Payments in Lieu of Services*
In line with national government policy, ECC will promote direct cash payments in lieu of services as the preferred means of delivering allocated resources to service users and carers under SDS.
- 7.6.5 ECC will develop and promote a new, more flexible, option for payments in lieu of services under SDS. The new option will increase the well being of service users and carers by providing them with greater flexibility and choice over how they use and control their budgets.
- 7.6.6 ECC will make this new form of payment in line with its powers under s 3(2) of the Local Government Act 2000.
- 7.6.7 ECC will continue to meet its statutory obligations relating to direct payments.
- 7.6.8 ECC will develop a framework for delivery of allocated resources that promotes service user choice and creative use of payments in lieu of services, while also meeting statutory obligations and appropriately managing risk to ECC and service users.
- 7.6.9 ECC will take steps to ensure that there is a range of assistance and support arrangements available to assist service users manage their support in a way that best suits their individual needs and capabilities.
- 7.6.10 *Audit and Monitoring*
ECC will establish arrangements for the auditing and monitoring of payments to service users and carers that are proportionate and risk based, to ensure that funds are used appropriately.
- 7.6.11 *Policy Requirements*
The following policies will require ongoing review, revision or development to ensure that they are appropriate for the new model:
- Debt Recovery
 - Direct Payments and Individual Budgets
 - Charging
 - Fraud
 - Safeguards

7.7 Encouraging a Care and Support Market

7.7.1 **Output:** *Facilitation of the development of a wide network of high quality services that provides choice of services and providers for service users.*

7.7.2 The SDS model is built on the premise that allowing service users to choose services in a competitive market will allow those services that best meet the needs of service users to thrive and will help promote better use of the resources available to meet support needs. ECC recognises that facilitating the creation of a broad, responsive social care market is important to ensure the best outcome for service users and more effective use of care funding.

7.7.3 ECC will play a leadership role in developing and promoting a support market that can supply good quality, safe, strategically relevant, support services.

7.7.4 *Policy Requirements*

The following policies will require ongoing review, revision or development to ensure that they are appropriate for the new model:

- Charging
- Risk Management
- Debt Recovery
- Fraud
- Safeguards

7.8 Whole System Requirements

7.8.1 **Output:** *Develop the capability of ECC to deliver change and a range of overarching policies to underpin the SDS model.*

7.8.2 To ensure successful development and implementation of self directed support, the model requires a number of overarching policies that will apply to all stages of the process. Successful development and implementation will also require sufficient capacity within ECC to manage and deliver change.

7.8.3 *Overarching Policy Requirements*

ECC will develop or revise key policies that will assist in governing multiple aspects of the self directed support system including:

- Charging
- Fraud
- Safeguards

7.8.4 *Developing Organisational Capability*

ECC will take steps to develop the organisational capacity of ECC to develop and implement the SDS model and to facilitate a shift in the organisational culture about the principles and processes guiding the provision of support.

8. Summary and Key Policy Requirements

8.1 By adopting SDS, ECC is implementing a new model of social care provision. This new model has the potential to better meet service user needs and use resources more efficiently and effectively.

8.2 ECC recognises that delivering all the potential benefits inherent in the model is a significant challenge. ECC will endeavour to ensure that the policies and processes developed to implement SDS balance benefits and risks appropriately and act in tandem to deliver the aims and objectives of the model.

8.3 There are a number of crucial and overarching policy requirements that will be necessary to review, revise or develop to underpin development of an SDS care model:

- Charging
- Debt Recovery
- Re-ablement
- Direct Payments
- Fraud
- Safeguards

Notes

¹ AHCW Directorate Plan 2008-09 to 2010-11