Day Opportunities – Coproduction Report

Stage 2

Task and Finish Groups
**Introduction**

The council currently arranges a range of day opportunities for younger and older adults including those with mental, physical, sensory and learning disabilities. These services are provided by both the internal and external social care market.

In line with the council's goal to support citizens to be resilient, living independently whenever possible and exercising choice and control so that they can live good quality lives and enjoy good health and wellbeing a co-production project is in place to develop a refreshed model for the provision of day opportunities.

Day opportunities are the activities that people take part in during the day. This will include activities that are focussed on or have elements of work, volunteering, contributing to the wellbeing of others, leisure, sport, healthy living, education, arts, training and developing skills for independent living.

We know that people who use, or are connected to, a service are the best people to help design that service, so we have developed a co-production approach, working in partnership with service users, their carers and families, and service providers.

**Coproduction:**

*A way of working whereby citizens and decision makers work together to create a decision or service which works for them all.*

The stage1 approach to the co-production model was to engage with service users, carers and service providers asking a series of questions about day opportunities. This provided an opportunity for service users and carers to meet with the commissioning team and understand the work that we were undertaking in partnership with a potential to redesign day opportunities. The engagement sessions were held January-March 2018.

To start the second stage of the co-production approach invitations were issued to service providers to share with service users and carers inviting them to a series of focus groups held on the 13th, 15th & 20th March. 17 service users, 24 carers and 24 service providers attended their respective sessions.
Each session introduced the idea of setting up four task and finish groups themed around:

- Direct Payments and Personal Assistants
- Quality Standards and Outcomes
- Community Assets and Accessibility
- Pricing Guide Model

The Top Ten Tips for Co-Production produced by the think local act personal (TLAP) National Co-production Advisory Group was shared with the attendees to promote best practice in co-production.

**TLAP: What is great about co-production?**

* Everybody is equal.
* The outcomes are meaningful and positive.
* People who use your services, carers and families are seen and recognised as assets.
* Your service will improve.
* It is a fun and productive way of working together.
* You have the opportunity to see different perspectives that may differ from your own.

At the close of each session attendees were asked to express their interest in joining the groups.

The Task and Finish groups commenced meeting on 10th April. Meetings were, and continue to be held at a number of different day care centres.

**Direct Payments and Personal Assistants**

Direct payments are Adult Social Care and Health payments for people who have been assessed as needing help from social services, and who would like to arrange and pay for their own care and support services instead of receiving them directly from the Council. Direct payments are the council’s preferred method of payment and are being increasingly used.

It was proposed that the Task and Finish Group would:

- Research what having a direct payment means
- Identify benefits and challenges of having a direct payment
- Produce a set of recommendations for the council to consider

A personal assistant is someone who can help to support an adult with their social care needs. A personal assistant will help to support the adult to live their day to day life as normal as possible and assist them to take part in everyday activities that others take for granted.

Each role is unique and personal assistants carry out a wide range of tasks based on the individual needs of their employer, providing flexible support with things like personal care, healthcare, domestic tasks, employment and social activities.
The council wants to encourage more people to use personal assistants.

The group met three times to discuss direct payments and personal assistants which identified a set of both benefits and perceived challenges.

**Benefits to having a direct payment:**

- Support families who need help with having a disabled adult person living with them at home.
- Support some individuals in helping them access the community and does work well for some.
- Give the service user a better sense of independence with more choice and control.
- Give greater flexibility to the times that services can be accessed
- Give a more personalised service.
- Enable a complex jigsaw puzzle of support to be designed and use the resources as wisely as possible.
- Offer flexibility, personalisation and control

**Perceived challenges to having a direct payment**

- Some services are not equipped to accept direct payments, such as allotment services.
- The complexity and confusion about what a direct payment can be used for is putting people off
- Some people can manage a direct payment themselves whilst others find the prospect of managing the finances daunting.
- The different rates payable for care make allowing for day services and care packages difficult especially given that some services charge more.
- There should be more choice involved with direct payments as they may not be suitable for everyone.
- The literature supplied or provided by professionals can appear to be confusing and may need clarifying
- Direct payments do not allow for 2:1 support so can still isolate disabled people who have complex needs.
- The funding has not increased for a number of years
- Where a 5 day service is required, e.g. working parents, this is rarely funded in full.
- The direct payment may be in the service users name but it is often managed by another person. May lead to financial abuse or ‘abuse of choice’ in that the carer dictates how the direct payment is used rather than the service user.
- Feeling that direct payments only benefit the most motivated and capable disabled people
- The council has not developed peer support so no easy way for disabled people to learn from other about how to make a direct payment work for them
**Benefits of having a Personal Assistant:**

- Reduce isolation
- Should be someone that understands your needs very well and that you feel confident in
- Should be equipped with the right skills to support you to access community activities.
- Are an excellent way of bringing to together people with a shared interest to support each other
- Offer flexibility to employ a person with the right skills, interest and attitude – important that it is a person that you get on with and trust

**Perceived challenges to having a personal assistant.**

- The sector is not regulated or quality assured. How do you know who you are employing? Who is suitable and dependable?
- How do you get a personal assistant if you do not have someone in mind?
- Where do personal assistants access training?
- Access to drivers is an issue. Using public transport is challenging and service users do not feel safe. Many service users require specialist transport.
- The hourly rate used for direct payments might not be enough to attract the right kind of people to employ
- Difficulties finding personal assistant with the right skills, interests and attitudes – especially if only have a small budget

The consensus of the group was that both direct payments and personal assistants are to be welcomed if they are the right choice for the individual. Clearly there is still much misinformation and misunderstanding to be addressed to encourage greater take up of direct payments. To address some of the issues officers from the Birmingham City Council Training, Learning and Development Service attended a group meeting. Information was shared about the programme of free training provided by the council.

Emerging from the discussions are the following recommendations:

- There should always be a choice if a service user wants direct payments or not. Service users should not be penalised for not taking up a direct payment.
- Better communication about direct payments is required. Information should be in clear English with less jargon and a better explanation of the relevant forms
- The time taken between the assessment process and the charging process needs to be shorter to allow for better control of the funds. Avoid telephone reviews.
- The rates attached to direct payments need to be reviewed to reflect actual or realistic market rates and any rate increases should be across the board so as not to disadvantage some service users.
- Reviews and assessments should be fairer especially if the needs are complex or significantly high.
• Increase partnership working to design dual packages which would be better for everyone.
• Disseminate information about the new Adult Social Care constituency model and the Three Conversations approach.

As the council’s work around increasing uptake of direct payments increases and the personal assistant market is developed the group members have expressed interest in contributing to on-going activity. An invitation to join existing working groups was issued to service users and carers.

**Quality Standards and Outcomes**

Quality standards help to improve the quality of commissioned care. These standards enable us to:

• Identify gaps in services;
• Locate areas for improvement;
• Measure the quality of care provided to service users at an individual level,
• Provide a baseline with which can be used to improve care throughout the city.

The current system of day opportunities provision is unregulated with no standardised form of quality monitoring by CQC or other. The council wants to be sure that the day opportunities that citizens use are of a good quality and are safe. In order to achieve this, the Task and Finish Group has written a set of draft standards which will support the council to achieve this. The standards cover safeguarding; information; staffing; environment; transport; activities; empowerment; choice and control; and healthcare needs.

The standards are linked to the day opportunities outcomes.

It was proposed that the Task and Finish Group would:

• Review the standards
• Test the standards with a number of service providers
• Report findings back to the Council

A set of outcomes has been developed which the Task and Finish group considered for their relevance to service users and how they can be measured. The outcomes have been drawn from the “Having a Good Day” outcomes and existing social care and health outcome sets.

The Task and Finish group met three times to discuss quality standards and outcomes. The group members agreed that:

• Quality standards are essential because the day care sector is not regulated so anyone can set up a centre without inspection, monitoring or audit.
• Facilities should be checked to make sure that they are able to meet the basic needs of service users.
• Service users’ views are important and everyone has the right to be heard including those who do not communicate verbally.
• When the standards are introduced it is crucial that there is regular monitoring.
• Some providers may need support to manage the quality standards process in the first instance.
• The council must avoid over regulation.
• The process should be checked against CQC requirements for other sectors.
• Information must be accessible both in terms of where it is located and the format used.

Having reviewed the draft quality standards, and outcomes an invitation was issued to the day opportunities providers to test the standards. Fifteen providers expressed interest. The exercise was completed by end September 2018. Overall the participating providers were able to provide evidence of best practice across all of the standards.

The next step is to confirm how and when the quality standards will be implemented across the existing service providers with a full audit. Consideration is being given as to how a peer to peer component of the audit can be developed. For example, service users interviewing other service users. Training would be provided for adults wishing to be a Peer Auditor.

**Community Assets and Accessibility**

Community assets are the wide network of services which range from very small, very local services provided by volunteers through to faith groups and community groups, national charities and private companies and businesses. They are all part of the wide network of community assets which provide choice and enable people to engage with others in activities they enjoy and which add meaning to their lives – having a good day.

For people to engage in community activities there needs to be a wide range of community assets which the council should ensure are in place these include:
- Community centres,
- Leisure centres,
- Parks,
- Gardens and allotments.

People need to be able to feel safe to come out of their homes to enjoy them. Furthermore Community assets must be accessible to everyone with the support available to meet different needs.

It was proposed that the Task and Finish Group could:
- Identify existing community assets of interest
- Visit and assess a range of community assets for accessibility
- Develop a set of draft accessibility standards
- Explore the impact of transport on accessing community assets
- Report findings back to the council.

At the first meeting of the group there was a discussion about the “Health Matters Community Centre Approaches” document. Five key areas were highlighted:

1. Why communities matter for reducing health inequalities, engaging with those most at risk of poor health, empowering people to have a greater say in their lives and health and to create connected, resilient and more cohesive communities.
2. What are community health assets? – Skills, knowledge and commitment of individual community members, resources and facilities with the public, private and 3rd sector; friendships, good neighbours, local groups, community and voluntary associations and physical, environmental and economic and resources that enhance wellbeing.
3. Being connected with other people matters for your health, research shows that a lack of social connections is bad for our mental and physical health. Loneliness increases the likelihood of premature mortality by 26%.
4. The family of community-centre approaches - Strengthening communities, Volunteer and peer roles, Collaborations and partnerships and access to community resources.
5. Call to action – Develop a whole-system approach across sectors, ensuring genuine co-design and co-delivery, map and mobilise local assets, commission across the four strands of the family, measure community outcomes and integrate community-centred, asset-based approaches as part of placed-based commissioning and strategic planning.

A draft set of Community Assets Accessibility Standards was shared with the group. The group gave their views on what the standard needs to further include so that the revised standards could be used to support the visits to a range of community assets over the summer. The council’s commissioned Health and Wellbeing Centres, Community Centres and Leisure Centres supported the Task and Finish Group to facilitate site visits. There were also visits to the city centre and use of some public transport services. It has been also been suggested that a meeting is facilitated with the officers responsible for the Commonwealth Games 2022.

The group are keen to work towards a quality standard or benchmark for all Community Assets.

There was also discussion about the increasing number of web sites which promote and support disabled people to move around Birmingham and the importance of using assistive technology to access and engage in day opportunities.

**What we have done so far**

Between the beginning of June and the middle of August 2018 visits were made by service users and commissioning officers to a variety of venues where groups and individuals may like to spend some time.
These included:

- Wellbeing Centres and Wellbeing Hubs – run by Birmingham City Council,
- Community Centres and Community Hubs - run by Birmingham City Council
- Leisure Centres – run by Serco on behalf of Birmingham City Council,

Also to areas of Birmingham city including:

- The Bullring and Grand Central Shopping Centres
- New Street Station
- Birmingham Council House
- Train and Tram Access
- City Centre streets and pedestrian areas.

In general this exercise was well received by members of staff at the places visited. The facilities were generally good and the service users and carers provided valuable insight into any problems that may be encountered. Feedback will be given to each service/facility area by service users and commissioning officers.

A full report detailing the visits and findings is available.

**Pricing Guide Model**

Currently there is not a pricing model in place for payment of day opportunities so to ensure that everyone gets a good quality service at a fair price wherever they live in Birmingham there was discussion about how the council might approach the development and implementation of a pricing structure. The structure will be aligned to different types and levels of need.

**What we have done so far**

- Contact has been made with other local authorities to establish the price they pay for external day opportunities.
- Developed a set of information to understand the number of clients attending by service provider, the minimum daily rate, the maximum daily rate, the median average and total weekly and approximate yearly costs.

The Task and Finish group discussed:

- The development of a price model for day opportunities based on a client’s level of need
- Ensuring that Adult Social Care colleagues understand the impact of clients being reviewed against the price model
- The purpose of providers participating in a financial and capacity information gathering exercise using a BCC template in order to have a better understanding of the business models of the external provider market.

The group proposed that the council should introduce policies about payment for transport and meals, payment for service user non-attendance, clearer invoicing and payment systems in line with other sectors of the care market.
The fixed price approach will connect with the proposal to introduce quality standards and outcomes.

Over the summer a small number of providers soft tested the first version of a pricing guide. The outcome of which was that there is a need to gather and analyse business model data from each of the current service provider market.

**Next Steps**

Through the redesign exercise the ethos of co-production has been adopted with the key stakeholders including service users, carers and providers of provision. It is intended that these working relationships are maintained and developed in to the future.

Stage 3 will include the development of a Co-production Steering Group to be led by service users. A separate carers focus group will be formed to ensure that a wider group of carers can participate in co-production. This group can have representation on the steering group. The community assets/accessibility work will continue.

**Acknowledgements**

We would like to acknowledge the support and contribution made to the co-production process by the service users, carers and providers

Also thanks to the venues that hosted the meetings