

CABINET

14 DECEMBER 2023

ADULTS PREVENTION AND EARLY INTERVENTION STRATEGY

Relevant Cabinet Member

Councillor Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care
Councillor Karen May, Cabinet Member with Responsibility for Health and Wellbeing

Relevant Chief Officer

Mark Fitton- Strategic Director for People

Local Member(s)

Not applicable

Recommendation

1. **The Cabinet Members with Responsibility for Adult Social Care and Responsibility for Health and Wellbeing recommend that Cabinet:**
 - a) **Notes and endorses the new Adults Prevention and Early Intervention Strategy 2023-2028**
 - b) **Approves commencement of the implementation of the proposed Adults Prevention and Early Intervention Strategy from January 2024.**

Background

Strategic context

2. The Adults Prevention and Early Intervention Social Strategy is in response to the rapidly changing context of health and social care and therefore, this five-year strategy is underpinned by our vision of 'supporting individuals to live the lives they choose, in a place they call home, connected to people, places and opportunities that are meaningful to them'. The strategy sets out how we will achieve our statutory duties whilst enabling our residents to achieve the best possible outcomes regarding care and support needs. The strategy has been developed, and takes direction, from the following key documents and partnerships.

3. The County Council Corporate Plan: [Shaping Worcestershire's Future](#) sets a clear ambition to "*support Worcestershire residents to become more active, healthy and self-reliant in managing their health for as long as they can*", as well as to "*tackle loneliness and isolation and ensure people feel connected and involved in their local area*". The ambitions in the Corporate Plan underpin our aspirations to deliver three key areas of priority.

4. The [Joint Local Health and Wellbeing Strategy](#) reinforces this ambition through a commitment to improve mental health and wellbeing, supporting people to live well

and in good health for as long as possible, particularly those who have poorer health outcomes. The strategy champions the collective action required across the health and care system to ensure residents live longer, more independent lives in good health, with fewer people going on to need care and support.

5. The Herefordshire and Worcestershire Integrated Care Partnership Assembly brought together a wide range of representatives supporting Worcestershire residents to develop the Integrated Care Strategy. The Strategy presents eight commitments which builds upon existing strategies and plans to enable improvement in health and healthcare outcomes for all.

6. Our work with the NHS and other care partners through the Integrated Care System will help co-ordinate our services to ensure good Health and Wellbeing for our residents. We need to work more closely with residents and communities to encourage active lifestyles, enabling people to live longer, healthier, and happier lives.

What do we mean by prevention?

7. In its broadest sense, prevention is the action taken to stop something happening that usually has a negative impact. Skills for Care carried out research in 2019 and found that most adult social care employers define prevention in four main areas:

- Supporting people to live as healthily as possible, both mentally and physically
- Reducing the use of health services, including primary care, emergency services and hospitals
- Preventing or reducing the escalation of health issues and
- Supporting people to remain as independent as possible.

8. When considering our prevention approach, we recognise that:

- Prevention isn't a standalone principle, but one which links closely with wellbeing, empowerment, and partnership
- It should be an ongoing consideration, rather than something that happens only once before people develop more significant needs and,
- The duty to prevent needs from developing or increasing is distinct from the duty to meet eligible needs.

9. Our responsibility to prevent needs from developing applies to all adults living in Worcestershire. It is separate from our legal duties under the Care Act to meet the needs for care and support of eligible adults and to provide support for carers.

The challenges facing Adult Social Care

10. Demand for Adult Social Care is growing. The number of adults (aged 18-64) requiring care is forecast to increase by 29% by 2038. For people over 65 years predictions are even higher with a forecast 57% increase in people who may require care and support over this period.

11. More people are living longer with long term conditions. People's needs are becoming more complex as they age, making care and support more difficult to deliver in later life, often requiring more specialist care.

12. The costs of delivering care and support are rising. Currently £16.5bn is spent by Local Authorities across the Country and all are seeing increasing demand and complexity of needs of their population. Worcestershire County Council currently spends £270m on ASC services.

13. Nationally there are significant staffing challenges across social care. In 2023, the national social care vacancy rate is reported as 9.9% (approximately 152,000 vacancies) particularly regarding specialist roles such as Approved Mental Health Professionals, Social Workers, and Occupational Therapists. In Worcestershire we have experienced challenges recruiting and retaining the people that are needed to deliver the services we provide.

Our legal responsibilities

14. As a local authority, we have a legal responsibility to meet assessed eligible care and support needs in accordance with its statutory duties prescribed in the Care Act 2014, associated Regulations and Statutory Guidance. The promotion of Wellbeing (also known as the Wellbeing Principle) is one of the guiding principles of the Care Act 2014. The wellbeing principle is a general duty imposed on local authorities requiring that every action taken, function performed, or decision made by it both corporately and operationally must give demonstrable regard to the impact upon the person's Wellbeing. It is broadly defined under the following categories:

- Personal dignity (including treatment of the individual with respect)
- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect control by the individual over their day-to-day life (including over care and support provided and the way they are provided)
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family and personal domains
- Suitability of the individual's living accommodation
- The individual's contribution to society

There is no hierarchy in the areas of wellbeing listed above – all are equally important. There is also no single definition of wellbeing, as how this is interpreted will depend on the individual, their circumstances, and their priorities.

15. Wellbeing encompasses several areas of life. Therefore, using a holistic approach to ensure a clear understanding of the individual's views is vital to identifying and defining wellbeing in each case.

Evidence base

16. There are several published reports which provide strong evidence and justification for investment in preventative services. It is important to remember that when reviewing preventative approaches/services, the impact needs to be measured over several years to assess the medium and long-term effect of early intervention.

17. In 2019, the Local Government Association (LGA) published 'Prevention-A Shared Commitment' which highlights the unsustainable nature of approaches to 'cure' social care and health services. Instead, it emphasizes the need for preventative strategies which provide better outcomes for individuals whilst reducing the need for costly reactive interventions. Their rationale for this recommendation is that the delivery of local upfront prevention services stops challenges arising in the first instances and reduces the escalation of difficulties, which are more complicated, lengthy, and costly to address. The LGA highlight that service delivery and transformation is difficult and to effectively achieve this, organisations need to ensure care planning, good leadership and a skilled workforce are all in place.

18. Prevention in social care is about encouraging people to be more proactive about their health and wellbeing. It can increase independence and reduce or delay the need for care and support services.

19. We have been reviewing how we work to ensure we deliver better outcomes for our residents given the rising demand. Without earlier intervention to reduce demand on statutory services, the total spend on our services would not only exceed the council budget but compromise our already stretched service provision. We therefore need to embed a prevention approach to achieve a sustainable method to service delivery to ensure we improve the life chances of Worcestershire residents in our identified key priorities.

Involving people

20. At the heart of this strategy are the people of Worcestershire. After talking to our staff, reviewing data collated from the resident engagement for the Health and Wellbeing strategy, and reviewing the level of demand and need for care and support across Worcestershire, this prevention and early intervention strategy is structured around three key areas, which we believe will enhance the resilience of our local community whilst delivering our statutory duties. These are: -

- 'Reducing Social Isolation and Loneliness'. Creating a sense of connection through inclusive communities and improving the quality of life of Worcestershire residents.
- 'Ageing Well'. Creating a culture and fostering behaviours where being active becomes the norm in everyday life, supporting good physical health in later life to maintain independence.
- 'Advice, Guidance and Information'. This priority aims to enable individuals to be healthy and well and make informed decisions about their future and have control over their day-to-day life.

21. Adult Social Care recognises and embraces the fact that the strategy is ambitious. We have therefore identified specific actions which we will focus on for the first year of our strategy.

22. We have engaged widely with our partners across Worcestershire, including Voluntary, Community or Social Enterprise organisation (VCSE), NHS, Primary Care Networks, District Councils, Healthwatch, Integrated Care Board and the Local Government Associations all of whom are eager to be involved in the development of

a work plan to support this work and ensure we offer an integrated and joined up approach to prevention across Worcestershire.

23. The strategy will be reviewed and monitored both internally via the Quality Assurance and Performance Board for Adult Social Care in addition to externally through our partners and the Building Together Forum.

Overview and Scrutiny

24. This strategy has been subjected to scrutiny and overview from key partners across Place, this includes NHS colleagues, Primary Care, District Councils and Healthwatch. We want to engage widely with people who use services through our Building Together Forum going forward and subject to approval at Cabinet will be reviewed regularly by the Adult Care and Wellbeing Overview and Scrutiny Panel.

Legal, Financial and HR Implications

Legal

25. The core purpose of adult health and social care support is to help people to achieve the outcomes that matter to them in their life.

26. The Care Act 2014 (“the Act”) sets the Council’s statutory power to direct the provision that:

- Personal dignity (including treatment of the individual with respect)
- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect control by the individual over their day-to-day life (including over care and support provided and the way they are provided)
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family and personal domains
- Suitability of the individual’s living accommodation
- The individual’s contribution to society

27. Beyond the Act itself the obligations on Local Authorities are further set out in the Care Act statutory guidance issued by the government. By virtue of section 78 of the Act, Local Authorities must act within that guidance. The Care Act Statutory Guidance at paragraph 4.52 requires Local Authorities to: “... have in place published strategies that include plans that show how their legislative duties, corporate plans, analysis of local needs and requirements (integrated with the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy), thorough engagement with people, carers and families, market and supply analysis, market structuring and interventions, resource allocations and procurement and contract management activities translate (now and in future) into appropriate high-quality services that deliver identified outcomes for the people in their area and address any identified gaps”.

Financial

28. The aspirations of this strategy are to prevent, reduce and delay need. If implemented correctly, it is anticipated that this will provide efficiencies across the service whilst balancing the rising demand and complexity of need.

HR Implications

29. There are no identifiable HR implications in relation to this strategy. The strategy describes different ways of working in terms of practice and process but does not require a change in staffing resources.

Risk Implications

30. Regarding risks to health and wellbeing of residents, the highest risk relates to doing nothing, which is likely to lead to an adverse impact on the long-term health and wellbeing of residents and an increased dependency on adult social care services.

31. In terms of risk of underperformance, key deliverables will be outlined in the work plan and performance monitored in regular review meetings (ASC Quality Assurance Board).

Joint Equality, Public Health, Data Protection and Sustainability Impact Assessments

32. Joint Impact Assessment screening in respect of these recommendations identified that no further impact analysis was required requiring further assessment during implementation. Please see Appendix 2.

Supporting Information

Appendix 1 – Adults Prevention and Early Intervention Strategy 2023-2028
Appendix 2 – Equality and Public Health Full Impact Assessment (Available online)

Contact Points

Specific Contact Points for this report

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Background Papers

In the opinion of the proper officer (in this case the Strategic Director for People) there are no relevant or required background papers relating to the subject matter of this report.