

## Introduction

Skills for Care’s policy briefings aim to provide the sector with a brief summary of current research, policy initiatives and strategic developments impacting on the future direction and delivery of adult social care in England.

## Table of Contents

Pilotlight: self-directed support resources .....	3
Improving GP services: commissioners and patient choice.....	3
Sector insights: skills and performance challenges in health and social care .....	4
Hospital competition improves performance .....	4
Next-generation social care: The role of e-marketplaces in empowering care users and transforming services .....	5
Health and social care priorities for the Government .....	6
Annual budget survey 2015 .....	6
Care Act first-phase reforms .....	7
Five year forward view - the success regime: a whole systems intervention.....	8
Learning opportunities: Local authorities' role in the apprenticeship system .....	8
Regulations implementing the National Minimum Wage – a report on the Apprentice Rate .....	9
2015 local health profiles .....	9
Options for integrated commissioning: beyond Barker .....	10
Creating a better care system: key considerations for a reformed, sustainable health, wellbeing and care system of the future...11	
At a cross-roads: understanding the future likelihood of low incomes in old age .....	11
Adult social care efficiency tool.....	12
Social work bursary information packs - 2015 academic year .....	12
Assessed and supported year in employment (ASYE) .....	12
Right here, right now: people’s experiences of help, care and support during a mental health crisis .....	13
What do people think about complaining? .....	13
Every complaint matters: a seven-point plan for the NHS and social care .....	14
Public service markets: putting things right when they go wrong .....	14
Transforming general practice: what are the levers for change?.....	15
Designed to move: active cities – a guide for city leaders .....	15
Outcome-based payment schemes: government’s use of payment by results.....	16
Micro-enterprises: small enough to care? .....	16
Housing for health.....	17

# Policy briefing 32

---

People not process - Co-production in commissioning .....	18
Top Tips: Commissioning for Market Diversity.....	18
Individual Service Funds (ISFs) and Contracting for Flexible Support .....	18
Public perceptions of the NHS and social care: winter 2014 .....	19

# Policy briefing 32

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## Pilotlight: self-directed support resources

The *Pilotlight* project from the Institute for Research and Innovation in Social Services (IRISS) aimed to demonstrate how to design support for seldom heard groups, provide more personalised and appropriate services and increase the marketplace of support providers. The resources which were produced as a result of this project include information on the self-directed support approach; eligibility and assessment resources; support planning information; risk enablement support plans; and information on learning and development linked to self-directed support.

You can find out more and access the downloadable resources here:

<http://pilotlight.iriss.org.uk/>

### Business and Workforce Implications

- Skills for Care has a range of resources, including common core principles, around self-care. Further information is available here:

<http://www.skillsforcare.org.uk/Skills/Self-care/Self-care.aspx>

## Improving GP services: commissioners and patient choice

The report commissioned by Monitor and produced by Ipsos MORI presents the findings of a review into how GP services are working for patients, with a specific focus on the role of choice and competition. The review drew on a variety of sources of evidence; a commissioned survey of 3,200 patients, interviews with 25 GP providers and spoke to and gathered information from NHS England, CQC and other stakeholders.

Key findings include:

- The majority of patients rate their current GP practice as average or above average
- When patients actually make a choice, convenience of location is the main consideration
- A significant proportion of patients do not feel as though they have a choice of GP practice if they wanted to change
- When comparing GP practices patients tend to rely on word of mouth. 15% use the NHS Choices website while just five per cent use GP patient survey results

# Policy briefing 32

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The full report can be accessed here:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/430776/Exploring\\_choice\\_in\\_GP\\_services\\_Ipsos\\_MORI\\_survey.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/430776/Exploring_choice_in_GP_services_Ipsos_MORI_survey.pdf)

## Sector insights: skills and performance challenges in health and social care

This research from the UK Commission for Employment and Skills highlights that more needs to be done to improve progression routes in health and social care, as demand for those working in the sector is set to increase. The report highlights that in some areas there are limited opportunities to progress to higher level roles, and younger workers may leave the sector as a result.

The report can be accessed here:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/430137/Skills\\_and\\_Performance\\_Challenges\\_in\\_Health\\_and\\_Social\\_Care.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/430137/Skills_and_Performance_Challenges_in_Health_and_Social_Care.pdf)

### Business and Workforce Implications

- Skills for Care collects, analyses and reports far more comprehensively on the adult social care workforce in England via our *National Minimum Data Set for Social Care*. Further information about this and access to our key reports '*The size and structure of the adult social care sector and workforce in England*' and '*The state of the adult social care sector and workforce in England 2014*'; can be found here:

<http://www.skillsforcare.org.uk/NMDS-SC-intelligence-research-and-innovation/NMDS-SC/NMDS-SC-and-workforce-intelligence.aspx>

## Hospital competition improves performance

This report from the Centre for Economic Performance shows that hospital competition can improve healthcare by improving the quality of management practices. The research measured the management quality of 100 public hospitals through a management survey of clinicians and managers, and used data published by the government to assess the performance of NHS hospitals in England.

The report is available here:

<http://cep.lse.ac.uk/pubs/download/dp0983.pdf>

# Policy briefing 32

## Business and Workforce Implications

- It should be noted that in this study the improvements in performance were based on measures of clinical quality, productivity, staff satisfaction and performance as rated by the government regulator of hospitals. We would argue that a well-managed service is likely to be a significant benefit for people who need care and support. However, there is also a risk that managerialism can lead to a focus on processes and procedures which is not necessarily consistent with a person centred approach. We have seen in previous studies that the measures used in this study do not necessarily translate into service user satisfaction. It is an omission that this research neglected to incorporate customer experience / satisfaction data as well.
- Skills for Care, the home of the National Skills Academy for Social Care, supports leadership and management across the sector in England. Further information can be accessed here:

<https://www.nsasocialcare.co.uk/about-us/leadership-strategy>

## Next-generation social care: The role of e-marketplaces in empowering care users and transforming services

E-marketplaces have the potential to radically transform social care services. Through interviews, case studies and original analysis, this report from the Institute for Public Policy Research (IPPR) explores how they can, if done well, deliver personalised, innovative and integrated care.

The report concludes:

- Digital services must be designed around the user's experience and journey
- Proactive offline activity is necessary for an e-marketplace to succeed
- Cultural changes, particularly around trusting users and adopting appropriate attitudes to risk, are prerequisites for success

For those trying to lead around e-marketplaces the report recommends:

1. Work across local authority boundaries
2. Work in close partnership with the Government Digital Service to embed local digital government
3. Developing the workforce for next-generation social care

# Policy briefing 32

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4. Care coordinators, based in the community, to teach digital skills

The report is available here:

[http://www.ippr.org/files/publications/pdf/next-generation-social-care\\_May2015.pdf](http://www.ippr.org/files/publications/pdf/next-generation-social-care_May2015.pdf)

## Business and Workforce Implications

- Details of Skills for Care work around digital working, including the joint strategy: *Digital working, learning and information sharing - A workforce development strategy for adult social care*, can be accessed here:

<http://www.skillsforcare.org.uk/Skills/Digital-working/Digital-literacy.aspx>

## Health and social care priorities for the Government

The Nuffield Trust has produced a briefing outlining what it sees as the 10 key health and social care priorities for the new Government.

It describes the challenges they believe are critical to the longer term success of the health and social care system and which the new administration will need to prioritise; covering themes across funding, quality, new models of care and workforce.

The briefing is available here:

<http://www.nuffieldtrust.org.uk/publications/health-priorities-next-government-2015-2020>

## Business and Workforce Implications

- Increasingly discussions about care are framed within the context of 'health and social care' yet, as is the case in this briefing, the discussion is primarily about the NHS and health care in general. The challenge for social care and allied sectors, locally, in regions and at a national level, is to develop a level of influence that can be heard above the loud, powerful and well established health channels, that in many instances are also the gate keepers to influence.

## Annual budget survey 2015

This annual from the Association of Directors of Adult Social Services (ADASS) survey aims to provide an analysis of the state of adult social care finances and intelligence on how adult social care is responding to the twin challenges of meeting increased demand and managing reducing resources. Key findings include:

# Policy briefing 32

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- There have been 5 years of funding reductions totalling £4.6 billion and representing 31% of real terms net budgets.
- This year, adult social care budgets will reduce by a further £0.5 billion in cash terms.
- Taking the growth in numbers of older and disabled people into account, this means that an additional £1.1 billion would be needed to provide the same level of service as last year.
- This year (2015/16) councils are running out of 'efficiencies' and will make service reductions of £420 million to people needing that care and support and their carers

The report can be found here:

[http://www.adass.org.uk/uploadedFiles/adass\\_content/policy\\_networks/resources/Key\\_documents/ADASS%20Budget%20Survey%202015%20Report%20FINAL.pdf](http://www.adass.org.uk/uploadedFiles/adass_content/policy_networks/resources/Key_documents/ADASS%20Budget%20Survey%202015%20Report%20FINAL.pdf)

## Care Act first-phase reforms

According to this report from the National Audit Office, the Department of Health has implemented the first phase of the 2014 Care Act well. Ninety-nine per cent of local authorities were confident that they would be able to carry out the act reforms from April 2015. However, it warns that the cost estimates and chosen funding mechanisms have put local authorities under increased financial risk given the uncertain level of demand for adult social care. It concludes that in a challenging financial environment, with pressure on all services, authorities may not have enough resources to respond if demand for care exceeds expectations. It also finds that the Department of Health consulted carefully on the act, to understand the main risks and respond to sector concerns, and there is wide support for the act.

The report is available here:

<http://www.nao.org.uk/wp-content/uploads/2015/06/Care-Act-first-phase-reforms.pdf>

### Business and Workforce Implications

- Implementation of the Care Act has significant implications for the adult social care workforce in England. Skills for Care and the National Skills Academy for Social Care in partnership with The College of Social Work (TCSW) have developed a suite of learning materials about the Care Act. They are available here:

# Policy briefing 32

<http://www.skillsforcare.org.uk/Standards/Care-Act/Learning-and-development/Learning-and-development.aspx>

## Five year forward view - the success regime: a whole systems intervention

This publication from Monitor provides guidance about the new 'success regime' to support the Five year forward view in a number of challenged local health and care systems.

The Five year forward view signalled the intention by the national bodies to introduce a new regime to create the conditions for success in the most challenged health and care economies. Led by HS England, Monitor and the NHS Trust Development Authority, working closely with the Care Quality Commission the 'success regime' will work across whole health and care economies with providers, commissioners and local authorities to secure improvement in three main areas:

- short-term improvement against agreed quality, performance or financial metrics
- medium and longer-term transformation, including the application of new care models where applicable
- developing leadership capacity and capability across the health system

The guidance is available here:

<https://www.gov.uk/government/publications/five-year-forward-view-the-success-regime-a-whole-systems-intervention>

## Learning opportunities: Local authorities' role in the apprenticeship system

This report from the Institute for Public Policy Research (IPPR) looks at the changing role of apprenticeships, and at how local authorities can target and coordinate services and pool capacity in order to maximise the value of apprenticeships – improving quality, boosting uptake and diversity, and benefiting apprentices and employers alike.

The report argues that a high-performing apprenticeship system can help to resolve deep-seated social and economic problems of unemployment and inactivity, as well as driving up skills and productivity. Yet the report argues that the current system is failing to realise its potential and that the apprenticeships system needs to be reformed in



# Policy briefing 32

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various ways, in order to allow local authorities to maximise the value of apprenticeships within their local economies, for the benefit of apprenticeships and employers alike.

You can access the report here:

<http://www.ippr.org/publications/learner-drivers-local-authorities-and-apprenticeships>

## Regulations implementing the National Minimum Wage – a report on the Apprentice Rate

The government has published its response to the Low Pay Commission's (LPC) recommendation for the apprentice National Minimum Wage rate from 1 October 2015. The Government proposes to accept the LPC recommendations for the following rates:

- a 20p (3.1%) increase in the adult rate (from £6.50 to £6.70);
- a 17p (3.3%) increase in the rate for 18-20 year olds (from £5.13 to £5.30)
- an 8p (2.2%) increase in the rate for 16-17 year olds (from £3.79 to £3.87)
- a 27p (5.3%) increase in the NMW Accommodation Offset rate (from £5.08 to £5.35)

However, the Government proposes to depart from the LPC's recommendation to increase the Apprentice rate by 7p (2.6 %) from £2.73 to £2.80, in favour of increasing the rate by 57 pence to £3.30.

You can access the full report here:

<https://www.gov.uk/government/publications/national-minimum-wage-report-on-the-2015-apprentice-rate>

### Business and Workforce Implications

- Skills for Care, in partnership with the Department of Health, actively promotes social care apprenticeship programmes. Further information is available here:

<http://www.skillsforcare.org.uk/Qualifications-and-Apprenticeships/Apprenticeships/Apprenticeships.aspx>

## 2015 local health profiles

Public Health England has published a series of profiles which draw together information to present a picture of health in each local area in a user-friendly format. They are a valuable tool helping local government and health services to understand

# Policy briefing 32

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their communities' needs, so that they can work to improve people's health and reduce health inequalities.

The health profiles are available here:

<http://fingertips.phe.org.uk/profile/health-profiles/data>

## Business and Workforce Implications

- The information in these profiles can be 'mashed up' and compared in various ways. The information isn't just health, care and lifestyle data it also includes: crime, deprivation, homelessness, unemployment, and educational attainment. It may be a usefully considered alongside Skills for Care's regional reports as well as the more detailed information available in the NMDS-SC open access dashboards. Further information is available here:

<http://www.skillsforcare.org.uk/NMDS-SC-intelligence-research-and-innovation/NMDS-SC/Workforce-intelligence-publications/Regional-reports.aspx>

## Options for integrated commissioning: beyond Barker

This report from the King's Fund argues that with around 400 separate local organisations each responsible for commissioning different health and social care services, the current organisational landscape is fragmented and unsustainable. Support is growing for a new settlement based on a single ring-fenced budget and a single local commissioner - as recommended by the Independent Commission on the Future of Health and Social Care in England, chaired by Kate Barker.

This report explores the options for implementing that recommendation:

- Option 1 – build on existing arrangements – it is argued that it is unlikely to deliver change at the scale and pace required
- Option 2 – CCG or local authority takes the lead - would involve organisational change and could result in very different arrangements across the country
- Option 3 – a new vehicle: 'health and wellbeing boards plus'? - Requires legislation and would be a profound step-change for existing health and wellbeing boards

You can access the summary and full report here:

<http://www.kingsfund.org.uk/publications/options-integrated-commissioning/summary>

# Policy briefing 32

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## Creating a better care system: key considerations for a reformed, sustainable health, wellbeing and care system of the future

This report, by Ernst and Young and commissioned by the LGA, based on the views of the LGA and its partners, proposes the establishment of £5.2bn additional transformational funding to develop a new health and social care system supported by a pooled health and social care budget of between £6.6bn rising to £141.1bn by 2020.

The report maintains that this additional funding should lead to transformation with councils and Health and Wellbeing Boards setting the strategic direction of primary care, integration and devolution of commissioning powers, moving to a place based approach, with a focus on keeping people independent and preventing complex and long-term conditions. The full report is available here:

<http://www.local.gov.uk/documents/10180/6869714/Creating+a+better+care+system+June+2015/0692d75a-5c26-4b85-a2b5-9e7dd59b455e>

## At a cross-roads: understanding the future likelihood of low incomes in old age

In this new White Paper the International Longevity Centre (ILC-UK) Centre for Later Life Funding argues that “*Recent successes in poverty reduction at older ages could be reduced to a footnote in history*” in the absence of a long term strategy for later life funding. The paper proposes that a strategy for later life funding must:

- Secure effective funding for adult social care
- Implement the Dilnot reforms
- Find ways of ensuring the provision of mass market financial advice
- Develop default options for those who “sit on their pension pots and do nothing”.
- Incentivising downsizing
- Support innovation in the equity release market
- Support policy which extends working lives

The White Paper sets the agenda for the ILC-UK Centre for Later Life Funding, which will explore these issues and trends over the coming year. The paper is here:

# Policy briefing 32

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[http://www.ilcuk.org.uk/index.php/publications/publication\\_details/at\\_a\\_cross\\_roads\\_understanding\\_the\\_future\\_likelihood\\_of\\_low\\_incomes](http://www.ilcuk.org.uk/index.php/publications/publication_details/at_a_cross_roads_understanding_the_future_likelihood_of_low_incomes)

## Adult social care efficiency tool

The adult social care efficiency tool, which helps local authorities to understand how their services compare for value for money with similar local authority areas, has been updated.

The tool is available here:

<https://www.gov.uk/government/publications/adult-social-care-efficiency-tool>

## Social work bursary information packs - 2015 academic year

The Department of Health has published information for higher education institutions (HEIs) and students on how the new social work bursary arrangements will work.

The information pack can be found here:

<https://www.gov.uk/government/publications/reforming-social-work-bursary-information-packs>

## Assessed and supported year in employment (ASYE)

The Department for Education has published information on the government's policy on the assessed and supported year in employment programme. It explains the ASYE programme for newly qualified social workers, and how organisations can register to take part. It is available here:

<https://www.gov.uk/government/publications/assessed-and-supported-year-in-employment-asye>

### Business and Workforce Implications

- Skills for Care supports employers of social workers in local authorities, the NHS and the private and voluntary sectors to meet their workforce needs. Further information about this work, including the Assessed and Supported Year in Employment (ASYE), can be found here:

<http://www.skillsforcare.org.uk/Social-work/Social-work.aspx>

# Policy briefing 32

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## Right here, right now: people's experiences of help, care and support during a mental health crisis

This report published by the Care Quality Commission is based on feedback from almost 1,800 people with experience of a mental health crisis, along with local area inspections looking at how services work together, surveys of service providers and a review of national data. It found that the quality of care experienced by a person in crisis can vary greatly depending on where they are and what help they require. Many people also experienced problems getting help when they needed it, and found that healthcare professionals sometimes lack compassion and warmth when caring for people who are having a crisis.

You can access the main report, summary and easy read version here:

<http://www.cqc.org.uk/content/right-here-right-now-mental-health-crisis-care-review>

### Business and Workforce Implications

- Skills for Care has published *Common core principles to support good mental health and wellbeing in adult social care*, based on work by the Mental Health Foundation as well as a range of further resources that are available here:

<http://www.skillsforcare.org.uk/Skills/Mental-health/Mental-health.aspx>

## What do people think about complaining?

The Parliamentary and Health Service Ombudsman has published results of a survey about what do people think about complaining. Key findings include:

- 92% agree that people have a right to complain about a public service if they are unhappy with it
- 90% Agree that people should complain about public services if they are unhappy with the service they receive
- However, just 34% of those who have experienced poor service in the past 12 months went on to complain

The survey results are available here:

[http://www.ombudsman.org.uk/\\_data/assets/pdf\\_file/0005/32576/Presentation-What-people-think-of-complaining-2015.06.04SS-SP.pdf](http://www.ombudsman.org.uk/_data/assets/pdf_file/0005/32576/Presentation-What-people-think-of-complaining-2015.06.04SS-SP.pdf)

# Policy briefing 32

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## Every complaint matters: a seven-point plan for the NHS and social care

This action plan published by Healthwatch lays out seven points of action for the government to reform the health and social care complaints system that will create an effective and compassionate system that both gives patients what they need and ensures the NHS and social care services can learn from their mistakes.

The action plan is available here:

[http://www.healthwatch.co.uk/sites/healthwatch.co.uk/files/15062015\\_every\\_complaint\\_matters\\_-\\_action\\_plan.pdf](http://www.healthwatch.co.uk/sites/healthwatch.co.uk/files/15062015_every_complaint_matters_-_action_plan.pdf)

## Public service markets: putting things right when they go wrong

According to a new report from the National Audit Office over 10 million people who used public services (approximately 1 in 5) in the UK last year faced problems when using those services.

The problems ranged from fairly straightforward issues, such as types of food in care homes, to serious and life-threatening safeguarding issues. The report says that consumers find the complaints and redress system confusing, that they have to deal with many different organisations, and that they have a low awareness of which ones to turn to. It finds that system-wide improvements are inhibited by poor central leadership and that public service organisations do not make enough use of complaints to improve services and there are serious impediments to doing so.

The report makes a number of recommendations including:

- An authority within government should be nominated to manage reforms
- Ensure that service users can access redress easily and increase consistency in complaints handling across ombudsmen and other complaints bodies
- Make the complaints and redress system easier to navigate for consumers
- Review the effectiveness of complaints-handling arrangements for private providers where they receive public money

The report is available here:

<http://www.nao.org.uk/wp-content/uploads/2015/06/Putting-things-right.pdf>

# Policy briefing 32

## Business and Workforce Implications

- Skills for Care's Manager Induction Standards (MIS) set out clearly what a new manager needs to know and understand, including complaints handling:

<http://www.skillsforcare.org.uk/Standards/Manager-Induction-Standards/Manager-Induction-Standards.aspx>

- The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life. It includes complaints handling:

<http://www.skillsforcare.org.uk/Standards/Care-Certificate/Care-Certificate.aspx>

## Transforming general practice: what are the levers for change?

The Nuffield Trust has published a briefing which examines the approaches that could be used to promote change in general practice amid increasing pressure for GPs to transform how they work to implement new models of care and bring more care into the community.

The briefing argues that the process should be driven through concerted investment in GP workforce development and ensuring that better data is available to evaluate impact.

The report can be downloaded here:

[http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/transforming\\_general\\_practice\\_levers\\_change.pdf](http://www.nuffieldtrust.org.uk/sites/files/nuffield/publication/transforming_general_practice_levers_change.pdf)

## Designed to move: active cities – a guide for city leaders

This report from *designedtomove.org* lays out the economic case for designing cities to encourage greater physical activity such as walking and cycling. It argues that active cities not only confer benefits to health but also to the economy, society, the environment and personal safety.

The Active Cities report is available here:

<http://www.designedtomove.org/resources>

# Policy briefing 32

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## Outcome-based payment schemes: government's use of payment by results

The government's payment by results (PbR) schemes are now estimated by the National Audit Office to account for at least £15 billion of public spending. However, neither the Cabinet Office nor the Treasury currently monitors how PbR is operating across government. Government has a growing portfolio of PbR schemes where payment depends, at least in part, on the provider achieving outcomes specified by the commissioner. This report looks at a number of areas where PbR is now used, including welfare to work, family support, offender rehabilitation, and international aid. It concludes that, without a common source of shared expertise and a strong evidence base, PbR schemes may be poorly designed and implemented, and commissioners are in danger of 'reinventing the wheel' for each new scheme.

The report makes particular recommendations for commissioners, including:

- PbR is not suited to all public services. It is most likely to succeed if the operating environment has certain features, for example results that can be measured and attributed to providers' interventions. If PbR is applied inappropriately there is a risk that either service quality or value for money may be undermined.
- PbR is a technically challenging form of contracting, and has attendant costs and risks that government has often underestimated
- It is essential that commissioners establish performance expectations at the start of a scheme, taking into account baseline performance and non-intervention rates

The full report is here:

<http://www.nao.org.uk/wp-content/uploads/2015/06/Outcome-based-payment-schemes-governments-use-of-payment-by-results.pdf>

## Micro-enterprises: small enough to care?

Twenty seven organisations, including 17 micro-enterprises, took part in this co-research approach study undertaken by the University of Birmingham. It aimed to test the relationship between size and performance in organisations providing adult social care to see if micro-enterprises outperform larger care providers in delivering services to users that are valued, innovative, personalised and cost-effective. Key findings included:



# Policy briefing 32

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- Micro-providers offer more personalised support than larger providers, particularly for home-based care
- Micro-enterprises deliver more valued outcomes than larger providers, in relation to helping people do more of the things they value and enjoy
- Micro-providers are better than larger providers at some kinds of innovation
- Micro-providers offer better value for money than larger providers

The report is here:

<http://www.birmingham.ac.uk/Documents/college-social-sciences/social-policy/HSMC/research/micro-enterprise/Micro-enterprise-full-report,-final.pdf>

## Housing for health

Developed by the NHS Alliance This resource is for strategic leads in general practice, primary care and clinical commissioning. It provides:

- information about the housing system and how it is organised
- insights into roles housing organisations are adopting within local health economies to improve patient care, reduce demand on the NHS and prevent people from needing expensive healthcare – and why they are doing this
- specific examples of health-housing partnerships that are emerging
- advice on how to build relationships with local housing partners

It aims help understanding and engagement with housing organisations and to develop important partnerships with other organisations operating beyond NHS boundaries.

This website is here:

<http://www.housingforhealth.net/>

### Business and Workforce Implications

- While aimed at increasing health's understanding of the housing sector there is considerable overlap with adult social care which will be of interest to anyone considering new models of care and working more closely with the housing sector.

# Policy briefing 32

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## People not process - Co-production in commissioning

People not process is a web based tool that explains what councils should think about to make sure they are working in the way the new Act says they should. This includes encouraging councils to seriously think about using co-production in their approach to market shaping and commissioning, which is described in the guidance as a "shared endeavour".

This online tool explains how councils can do this, drawing on a range of evidence of innovative practice and incorporating advice and examples to illustrate the steps that can be taken to make progress. It was developed by the New Economics Foundation in partnership with people who use services and carers and can found here:

<http://www.thinklocalactpersonal.org.uk/co-production-in-commissioning-tool/>

## Top Tips: Commissioning for Market Diversity

This guide will help council commissioners focus on the work they need to do in developing a care and support market that reflects the diversity of their local population and offers choice to all.

Top Tips offers examples and links to further information and a short series of questions that will help councils assess their progress in meeting market shaping duties and developing a diverse local market, as defined in the Care Act 2014.

The guide can be downloaded here:

<http://www.thinklocalactpersonal.org.uk/library/Resources/NMDF/TLAPTopTips.pdf>

## Individual Service Funds (ISFs) and Contracting for Flexible Support

This Guide, aimed at council commissioners and providers, sets out how councils can contract flexibly with a service provider to meet a person's needs, and contract in a way that gives the person more control over their support.

Think Local Act Personal (TLAP) developed the report with the Housing and Support Alliance. Dr Simon Duffy from the Centre for Welfare Reform was the primary author. It is part of a suite of resources commissioned by the Department of Health in partnership with the Local Government Association and the Association of Directors of Adult Social Services to support local government in implementing the Care Act 2014.

# Policy briefing 32

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The guide is available here:

<http://www.thinklocalactpersonal.org.uk/library/Resources/SDS/TLAPISFsContractingFINAL.pdf>

## Public perceptions of the NHS and social care: winter 2014

This report provides the results from an IPSOS Mori survey of public perceptions of the NHS and social care services. The survey is the latest in a series of surveys that have tracked public perceptions and attitudes since spring 2000.

According to the report the public tend to be more positive about local social care services than about national social care policies, reflecting a pattern that is also seen for the NHS. Key findings include:

- 38% people agree that their local authority is providing good social care services - a decline since spring 2013 (from 43% to 38%) and echoes the decline in the proportion of people agreeing that their local NHS provides them with a good service
- Only 24% agree the Government has the right policies for social care in England.
- 52% of the public agree that people are treated with dignity and respect – an increase of 9 percentage points from 43% in winter 2013 which is as high as it has ever been since the question was first asked in summer 2007.
- 51% of the public agree that people are treated with compassion an increase of 6 percentage points from 45% in winter 2013.
- Only 27% of people have started preparing financially to pay for social care services they might need and 71% have made hardly any preparations or have not started preparing at all.

The full report is available here:

<https://www.gov.uk/government/publications/public-perceptions-of-the-nhs-and-social-care-winter-2014>