Meeting	Services Scrutiny Committee
Date	12 February 2015
Title	A review of the Enablement Service's arrangements
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1.   Purpose of the report

1.1   To respond to a request from the Scrutiny Committee to outline "*what is the vision in terms of enablement for the service now and over the coming months*".

1.2   As one aspect that required consideration in seeking to address the overspend, the service has been reviewing the arrangements that are in place with the enablement service.

         Therefore, this is an opportunity to update the members on the main findings deriving from this work, along with national learning in this field.

2.   A Review of the Enablement Service

2.1   To set a context for the service, the enablement service is simply a way of responding intensively for a short period of time. It is based on the principle of promoting independence and not creating dependence. It has been operational in Gwynedd from January 2010. The service is available for a specific period of time, which can vary from a few days to up to 12 weeks. Therefore there is no specified time when the service is available. It is a service provided by home care workers with specialist support from occupational therapists.

2.2   We have been running such enablement services for over four years now, and we have seen success against the criteria with around 58% of the individuals who receive enablement staying away from the service for at least a year.

         Also, a figure close to £1 million has been calculated as a saving and has been transferred out of the budget following a savings scheme. This figure was based on the argument of what would have happened to the individual had the enablement intervention not taken place.

2.3   The argument is that this short-term support prevents them from remaining dependent on the service in the long term. Evidently, this cannot be scientifically proven; rather we work out what would have happened to those individuals had they not received an enablement service. This is of course a matter of opinion, and it is not possible to be definite with such a calculation.

2.4   It appears from the measures we are using that we are succeeding with our enablement plans. We have also managed to yield significant savings from the older people service due to this success.

2.5   The members will be aware that there has been a situation of overspend in the older people services recently, and perhaps there is a question to answer in light of taking out £1 million as a result of enablement and this overspend. We therefore needed to revisit the arrangements of this service in light of the financial situation.

Furthermore, there is now national evidence by John Bolton, an expert in the field of older people's care, which requests us as councils across the UK to look again at our arrangements for the enablement service and assure ourselves that we are using our resources correctly and effectively. From the research undertaken by John Bolton, it appears that a large number of councils in England have identified that there has been overuse of expensive enablement intervention with individuals who did not require it, and for longer periods of time than necessary.

John Bolton argues that authorities have used the intake model, and have provided a service to individuals who probably could have returned home without any type of support or intervention, and would have managed in the long term without any intervention.

John Bolton also argued that enablement services were provided for longer periods of time than necessary to individuals. This service is relatively expensive to provide due to the intensive professional support that is available. It is also a completely free service for individuals. It is therefore essential that the service is targeted at the right individuals, and that it is not provided for longer than necessary to those individuals.

2.6   A managerial review was undertaken by the Older People Service and it appears that some aspects work well, but that some aspects should be changed for the future.

These are the main aspects that need to be changed / lessons to be learned:-

2.6.1   It appears that there are examples of individuals receiving an enablement service who would not require this type of intensive intervention. It seems that there is not enough targeting of suitable individuals and that everyone who leaves the hospital or approaches us as a service is entered immediately to receive this service. There is therefore a need to **use the enablement**

resource in the most effective way possible – an example of an application for an enablement service was to provide respite to a carer – this is not a suitable use of enablement.

2.6.2 The enablement service is a relatively expensive service to provide and in order to ensure that we make the best use of resources, once again we need to ensure that there are robust monitoring arrangements to ensure efficiency. There is evidence that monitoring is inadequate in some parts of the county and it was seen that some individuals were receiving the service for longer than necessary.

Interestingly, an urban myth has existed from nearly the very beginning, that the enablement service was "free" for everyone for up to six weeks. This is not true, as is noted below, the service is available for an unspecified period of up to 12 weeks (though many would not need it for 12 weeks), and six weeks was the average period of time. It seems it was introduced too close to the time where the old system of six weeks free of charge came to an end, and staff and residents confused one with the other.

2.6.3 It does not appear that our performance measures have identified the right things to measure – we have measured success based on the % of users who return to us within a year – but this may not be the correct measure of success with the service for the future. The measure should look at achieving outcomes that we have agreed with the user at the beginning of the intervention rather than the requirement in the future. It seems the service placed all its focus only on achieving efficiency savings.

3. Steps that are underway

3.1 The above lessons have already been shared within the department and managers have already put steps in place to improve arrangements. These are the main matters that have already been implemented:-

3.1.1 Remind managers what the purpose of the enablement service is, ensuring that this is reiterated to frontline workers. This was done across the older people service and the provider services.

3.1.2 Individual managers have revisited their individual monitoring arrangements, seeking to ensure that packages do not over-run beyond the individual's recovery time.

3.1.3   As members may be aware, one of the department's main projects at present is the Gwynedd Way project (Vanguard) and this is currently being implemented. This team looks specifically at how they use enablement services, and tries to identify further lessons. This team will look at the best performance measures for enablement.

3.1.4   The Adults Service Manager will receive quantitative information regularly to monitor the numbers in the service in order to seek high-level assurance that the lessons are being realised immediately.

4. Conclusion

4.1   The enablement service is important to us for delivering our promises and achieving our vision. However, it is not suitable for everyone, and it is a significant investment for us to make as a council as it is a free service for users, and it is also a service of intensive intervention by professional workers. Therefore we must weigh up the investment against the outcomes for the residents of Gwynedd. It appears, despite the good work by frontline staff, that we must learn some lessons for the future and ensure that the best use of resources occurs. A short intensive intervention has proved to be a positive thing for us to do, in the interests of the individuals and the Council. The above lessons build on the good work and ensure that we progress into the future with an effective and sustainable procedure.