



Self-Directed Support: Support in the Right Direction Fund



April – September 2016 Interim Progress Report



Organisations delivering Self-directed Support Support in the Right Direction Fund projects

- Advocacy Aberdeen
- ARC Scotland
- Argyll Voluntary Action
- Ayrshire Independent Living Network (AILN)
- Borders Independent Advocacy Service (BIAS)
- Cantraybridge
- Carers Trust
- Carr Gomm
- Ceartas
- · Children in Scotland
- Circles Network Inverclyde
- Community Brokerage Network
- Deaf Action
- Direct Inclusive Collaborative Enterprise (DICE)
- Disabled Person's Housing Service (DPHS)
- Diversity Matters
- Dundee Carers Centre
- Enable
- Encompass
- ENeRGI
- Glasgow Centre for Inclusive Living (GCIL)
- Glasgow Disability Alliance
- Grampian Opportunities
- i-Connect North East
- In-Control Scotland
- IRISS
- Kindred Advocacy
- Lothian Centre for Inclusive Living (LCIL)
- MECOPP
- PAMIS
- Penumbra
- RNIB
- Self-directed Support Forum East Renfrewshire
- Self-directed Support Scotland
- Simon Community Scotland
- VOCAL



Support in the Right Direction Fund: Building the capacity of Support and Information Organisations

Self-directed Support is Scotland's mainstream approach to social care. Through the Social Care (Self-directed Support) (Scotland) Act 2013, adults, children and carers who require social care are supported to decide what matters to them (their personal outcomes), how their support is delivered and by whom within the available budget. Independent support helps people to make informed decisions and is crucial to success.

The Support in the Right Direction Fund (2015-18) aims to build the capacity and availability of independent support services across Scotland. £1.36 million has been invested in 36 projects in the first half of Year 2 (1 April 2016 – 30 September 2016).

Now in their second year of delivery, funded projects were asked to report on their progress in October 2016, at the mid-point of year two. All but one of the projects are now at their half way point (that one being a two year project), so activity has started to bed in and projects are now in a position to review the effectiveness of their approaches and identify learning and barriers which still exist in implementing Self-directed Support. Support and information provision forms the basis of this fund.

Support in the Right Direction Fund April – September 2016 Activity

Projects were asked to report against a framework of key activities*. The most common activities reported by projects for this period were:

- and development Training for organisations, for individuals, for statutory services, and for commissioners and funders - 23 projects.
- Awareness raising delivered by 21 projects.
- Evaluating, reporting and sharing learning delivered by 19 projects.
- Engagement and consultation delivered by 18 projects.

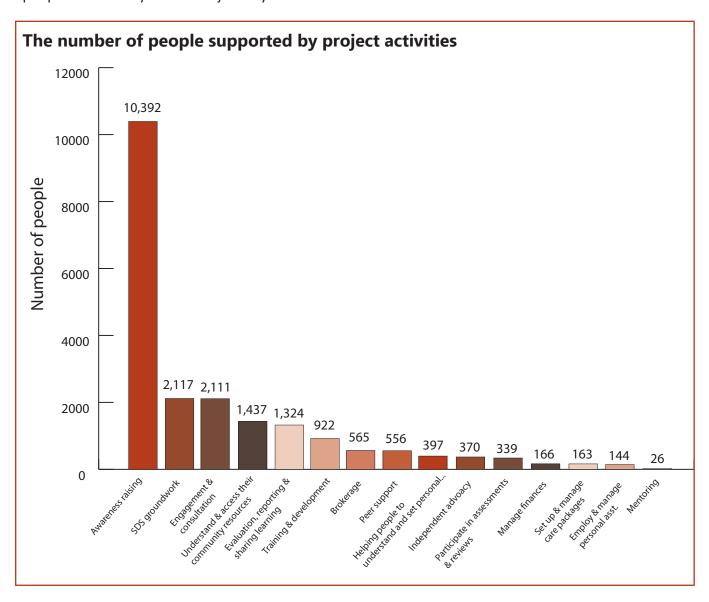
- Helping people to understand and access their community resources - delivered by 18 projects.
- Helping people to understand and set personal outcome plans - delivered by 15 projects.
- Helping people to participate in assessments and reviews - delivered by 14 projects.
- Self-directed Support groundwork delivered by 14 projects.

*The reporting framework used is Support in the Right Direction - The value of Independent Support. This provides a list of types and examples of activities that make up Independent Support. This has been developed further based on learning from the first year of the projects to accurately reflect the breadth of work being delivered



Training and development for organisations is the most common activity delivered but in terms of the number of people reported as taking part in each activity, as the chart below shows, awareness raising is by far the widest reaching, followed by groundwork and engagement and consultation (figures as reported by projects).

This shows that work is still required to increase knowledge about Self-directed Support and to prepare people before they start their journey.





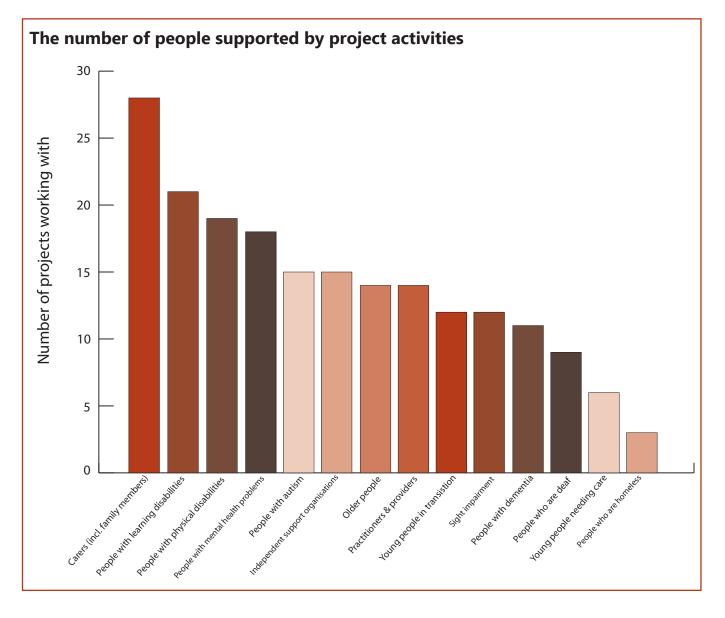
Support in the Right Direction Fund April – September 2016 User Groups

The Independent Support organisations funded support people across the spectrum of social care.

Some projects are targeted at particular groups of people, such as the Carers Trust and Deaf Action, while others raise awareness of Self-directed Support with, and support, anyone who may benefit from social care. People may also need support for more than one reason.

While nearly all projects gather beneficiary monitoring information, some feel that this can be viewed as a deficit-based model focusing on what is wrong with someone, rather than what matters to them. These figures are therefore not fully representative of the client groups worked with across the fund.

The user groups that projects are identified as supporting are (projects will support more than one group):





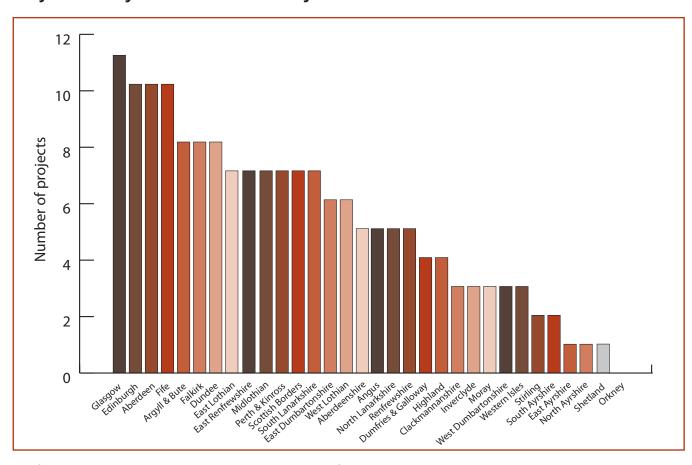
Support in the Right Direction Fund April – September 2016 Geographic areas of work

Funded organisations are working throughout Scotland. 8 organisations operate on what could be considered to be a national level, working in at least 10 local authority areas each: Self Directed Support Scotland, Carers Trust, ARC Scotland, In-Control Scotland, Penumbra, PAMIS, Deaf Action and Kindred Advocacy.

The geographic spread of projects has increased slightly in the last 6 months. At the time of the last reporting in March 2016 no projects were working in Clackmannanshire – now there are three: Carers Trust, Ceartas and Deaf action.

Orkney is the one local authority area which no project has reported actively working in since the fund started, although Self Directed Support Scotland has a national reach and people and organisations across the country can contact them and access their services.

Project activity across local authority areas



The figures presented here do not correlate to the number of projects based in each geographic area, but are the areas that projects have reported working in.



Support in the Right Direction Fund April – September 2016 Outcomes

As with the Fund activities, the outcome reporting framework used is from Support in the Right Direction – The value of Independent Support with the incorporation of some additional outcomes that have been identified as being delivered by some projects.

The most common outcomes reported by projects for this period are that people and carers:

- · access clearer information about Selfdirected Support (5199 people).
- are more aware of support available to access and manage Self-directed Support (3857)
- make progress towards personal outcomes and live the life they want to live (1107).
- can define personal outcomes (1006).
- feel listened to, supported and less stressed (534).
- have increased understanding of the principles of Self-directed Support (371).
- feel more empowered, have confidence to challenge decisions and seek out different support options (326).
- make more informed choices about Selfdirected Support (241).

These outcomes follow a similar trend to the last reporting, although previously we asked projects to report on how many people were achieving their personal outcomes and living the life they wanted to (126 people).

We now ask how many people are making progress towards their personal outcomes and living the life they want to live, and we are seeing much higher numbers reported (1107). This reflects that people need ongoing support to achieve their outcomes and refine their care as circumstances change, and that achieving outcomes often happens over a longer term.

It should be noted that all figures above are as reported by the projects and that the first two outcomes could be inflated by people who may have only taken part in an activity once. For example, people who have attended a presentation but not received any follow on support with Self-directed Support. While many projects ask for feedback from events there is sometimes an element of assumption that attendance at a presentation has helped to raise awareness and led to these outcomes, however, the longer term impact of this cannot be measured where follow on support has not been provided.

The most common outcomes reported for organisations, care providers and statutory services are they:

- learn about and understand best practice (241).
- increase capacity to support people (65).
- work effectively together (62).
- · respond creatively and flexibly to people's needs (58).

Again, these outcomes are similar to the most frequently reported outcomes previously.



Support in the Right Direction Fund April – September 2016 Challenges

Projects were asked to share problems they have encountered which have slowed progress or prevented outcomes from being achieved.

Some examples that were given have been grouped under the challenges identified in the Self-Directed Support Strategy Implementation plan for 2016-2018, which was launched on 1 December 2016.

This is not an exhaustive list and the examples are not necessarily new, but this demonstrates that previously identified issues still exist and have not been overcome yet.

Commissioning

- There is a lack of choice in care provision across some local authority areas, with a limited number of providers who can be short of staff, or charge high rates. This is particularly a problem in rural areas where choices are naturally limited and are compounded by the distances required to be travelled by care staff and the associated time and cost of this.
- Some local authority building-based services are being reviewed or have closed, where individuals chosen have alternative provision. This is positive as it shows a commitment to providing more flexible provision and moving away from traditional care models. However, when services close, this can impact on choice and control for those wishing to continue accessing them, which in turn impacts on people's perceptions of Self-directed Support.

Risk enabling practice

Some people find they are being restricted in how creatively they can spend their budgets to meet their personal outcomes. Many people are also confused about what they can spend their budget on. As a result, there are examples of people returning budgets when they cannot agree with their care manager what it can be spent on. In some cases this may be because the original budget was too high, but it can also leave people without the support they need to meet their identified outcomes.

Working with limited public resources

It is widely recognised that the coinciding of Selfdirected Support policy implementation with the austerity measures the public sector faces has hampered it is delivery, including:

- High thresholds for eligibility are an issue.
- Living wage legislation and the impact this has on budgets for people receiving direct payments.
- Local Authority charging policy.

Knowledge and awareness

Awareness of Self-directed Support is being raised but it is not widespread yet. This is compounded by confusing and contradictory information and terminology, for example Option 2/Individual Service Fund, beign used by different sources. There also seems to be the perception in some areas that Self-directed Support is a separate or add on process that someone goes through, as opposed to Scotland's mainstream approach to social care.



- Restructuring of local authority budgets and staff can also lead to a lack of clear guidance on funding rates and what budgets can be spent on.
- Personal outcomes are still not always the focus during an assessment, with potential support being discussed primarily in terms of time and task.
- Major system change
- The promotion of Self-directed Support ways of working often relies on individual champions, when they move on this can lead to a loss of knowledge and momentum and the need for relationships with independent support organisations to be developed again.
- Health and social care integration can make it difficult to know where to build relationships in local authorities.

Systems and processes

- There can be a lack of consistency within local authority areas as to the level of budgets awarded and their approved uses, which would benefit from closer moderation from decision makers. Person centred approaches can mean different decisions are legitimate but, due to confidentiality, this is not always apparent to individuals, which can lead to frustration and confusion. Closer moderation would bring more confidence in decisions made and budgets awarded.
- The length of time between being allocated a social worker, getting an assessment and a budget decision can lead to people going into crisis before support can be put into place, impacting on the person's health and well-

- being and requiring a new assessment to take place.
- The change in provision once someone reaches 65 can lead to different support being put into place although the person's situation has not changed.



Support in the Right Direction Fund April – September 2016 Conclusion

The scale of change required to fully implement Self-directed Support is huge and has come at a time of restrictive budgets, however, four years on from the Social Care (Self-directed Support) (Scotland) Act 2013 levels of awareness are not as high as they could be.

The key learning to share at this point is that there is still some way to go before knowledge and awareness of Self-directed Support is sufficiently widespread among people eligible for and working in social care as to make it common practice.

There is a concern reported by some of the funded organisations that people's expectations are being raised by their work with them to develop personal outcome plans, only for them not to meet eligibility criteria, or be told they cannot spend their budget in ways they have identified to meet their outcomes.

This is impacting on staff morale of the funded organisations. The high eligibility thresholds also means valuable preventative work is missed that could stop someone's situation deteriorating.

This should not detract however from the positive impact that Self-directed Support is having for the people supported through Support in the Right Direction. Despite budget cuts and eligibility thresholds, projects are supporting more people to be aware of their rights under the new legislation, they are encouraging more creative use of individual budgets and are making more use of community resources.

All of this is to support individuals to have choice and control over their care. The case studies and quotes included here show the impact projects are having on individuals.

Next steps for Inspiring Scotland are to support a better mutual understanding of the conditions different sectors are working in, to improve relationships between independent support organisations, care providers and local authorities.

Some more work also needs to be undertaken to refine project evaluation plans to fully evidence the impact of the work being done, which is critical to showing the benefits of this work and the difference it can make to people's lives.

Inspiring Scotland will support learning in this way and help projects to achieve their outcomes.



Case studies

From April to September 2016, Kindred Advocacy have raised awareness of Self-directed Support with 97 families who have a child aged 14 to 18 with additional support needs going through the transition to adult services. They also provided one to one support to some families to prepare for social work assessments and to set up and manage care packages and support. Evidence is collected on an on-going basis of progress towards outcomes using a "spider" evaluation, which measures parent's confidence, sense of isolation, sense of being informed and confidence to make choices, and how they feel about family life.

"You just don't feel as alone...as worried. Information is powerful and I don't think you can offer enough. Families at home are desperate. You meet other people (at these events) so you feel you're not on your own and you think 'that's a good idea...I could try that.' If you don't offer anything it just leads to depression and there's no way out... these kind of days are so important." One parent's feedback around how sharing experience and gaining information can be crucial.

Carr Gomm's Community Contacts project provides a variety of one to one Self-directed Support support ranging from person centred outcome planning, exploring choices around the four options, helping people to plan in advance of a review to prepare their key points, attending reviews, advocacy and support to challenge decisions, support to use budgets to achieve outcomes once approved and support recruiting and managing staff.

Supporting people to make connections with other community resources is a central part of the approach they take. They also provide group

■ High tea at an Self-directed Support Blether Group

support through local Self-directed Support Blether Groups who meet to discuss social care issues, get peer support and meet with support organisations.

"Because we've been able to work with you [Community Contacts], we've felt able to ask our Social Worker questions. It felt like a piece of string with no ending, but now I'm feeling knots and I can see an end to that piece of string." A project user.



Ayrshire Independent Living Network (AILN) is a peer-led dedicated Self-directed Support support service for Ayrshire. They help people to understand the options available through Selfdirected Support and make a choice about the care they want to receive, using materials and guidance the project produces.

One of their case studies shows the impact of their work: AILN supported Mary, whose dad has dementia. After the loss of her mum, and then unexpectedly her brother, Mary was determined to keep dad at home. Her social worker suggested Self-directed Support. Mary was worried about all the paperwork and regulations this would involve. However, after receiving free information and advice from AILN, she decided to try it. With the support of AILN she devised a care plan using



■ Ayrshire Independent Living Network

personal assistants (PAs). Since hiring PAs Mary's dad has regained both his confidence, and his independence. He attends Country and Western nights on a Saturday, attends day centres during the week and has such a strong relationship with his PA that he goes with her when she does voluntary work, and helps out too!

Mary says, "Self-directed Support has meant I can return to my normal work hours, this is improving my family's quality of life and I'm completely confident that dad is happy, socialising and being cared for properly."





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