

Putting People First

Transforming Adult Social Care

Putting People First sets the direction for adult social care over the next 10 years and more. This document describes the sort of society Putting People First envisages, where people can have choice and control in their lives, whether they need support from others now or in the future.

To do this there needs to be a big change in the way communities, organisations and individuals work to support people. The Government has provided money specifically to help councils to make these changes. People want better quality services that are personal to them and more control over decisions that affect them. They want the right support, at the right time, in the right place. They also want to be treated with dignity and respect, regardless of who is paying. Councils and their partners need to be asking themselves 'What does it feel to be an older or disabled person living here?'

There are four areas on which councils and their partners should focus to help make sure services become more personalised and to get the right results for people. *Putting People First* is clear that these areas link together. To make sure change is successful all of them have to be in place to ensure people can have the right quality of life.



First are the general support and services available to everyone locally (universal services) including things like transport, leisure, education, health, housing, community safety and access to information and advice.

These services are important in everyone's lives, not just those people with care and support needs. Universal services work best when everyone can get the information, advice and support they need readily and easily to be able to use them effectively. They can then maintain their health and wellbeing, exercise choice and control over their everyday lives and participate fully in their communities.

Success would mean people in wheelchairs are able to live independently. Not only managing in their own homes but also at work and participating in their communities' activities because the physical barriers both inside and outside their homes have been removed. Another indication would be that the local public transport system is set up to enable older and disabled people to attend hospital appointments and social/education activities easily and with confidence.

The second area is the support available to assist people who need a little more help, at an early stage to stay independent for as long as possible (early intervention & prevention services). These include things like support to recover from the effects of illness and help to manage a long-term condition from someone with experience of a similar condition. These services also include help to safely maintain home and garden, training to get a job or return to work after a break, or support to start taking some exercise.

Not only do these early interventions make sure people can stay in their own homes for as long as they want, but are also the best way of keeping the costs down in the future.

Success would mean people were supported to get the right exercise and equipment following a fall so they would not have to go into hospital, and could stay at home without significant risk of falling again. Alternatively, through effective use of telecare people with dementia are routinely able to stay at home with their families, who are able to continue their everyday lives.

The third part of *Putting People First* is about self-directed support. This means having services available to meet people's needs rather than people having to fit in with the things on offer. People who need support should be able to choose who provides that support, and control when and where the services are provided. The right information and advice needs to be available to help people decide. Some people will need extra help to negotiate their support and may need advocates to help them. It is important to be safe, and guaranteeing this will be an important role for the local council and local community. However, it is also important that people can take responsibility for themselves and that councils and other advisers are not limiting in their advice about what is possible. There is a guide for local councils to use which make sure this can be done safely and that people can be supported to make decisions (*Independence, choice and risk: a guide to best practice in supported decision making*).

Systems should be easy to follow and everyone involved should work together with the person at the centre of the plan. This is true whether the council is providing the support or people are buying the services themselves. To do this planning, people (or their advocates and supporters) need to understand what money is available to spend on their support. If it is their own money, they need to know what support there is locally, and that it is of a high quality and safe for them to choose. The same is true if some or all of this money comes from the council, people have a choice to spend part or all of the money in a way that they choose.

For example, they can make their own plans for services with the money from the council. They can also get together with friends to make the plans together, or they can ask an agent or the council to arrange things for them. They must show that the money they have been given is making the difference it was supposed to make (the agreed outcomes).

Success would mean people in the community who need support and their families and carers feeling empowered to come up with flexible solutions to meet their needs, individually or collectively. They would understand what is available and be confident the services available to buy were suitable, safe and reliable. People feel they have a life rather than a set of services.

The fourth part of *Putting People First* is about how society works to make sure everyone has the opportunity to be part of a community and experience the friendships and care that can come from families, friends and neighbours. This should be done without putting an unreasonable burden on friends and family who want to help. Carers need to be recognised and supported in their role. They need a life of their own outside caring.

The effect of the local community on the quality of people's lives is significant for everyone, but can be even more important in the life of a person who has care and/or support needs. Positive interaction may be seen in many ways, including through church groups and other faith communities, where people are encouraged to be interdependent, supporting each other in different ways. It is also about older and disabled people being full members of the community. This is sometimes described as social capital, and can be built in communities by engaging with people and showing them how they can influence the decisions that affect their lives. People who have support needs, their carers and others who find support difficult to access need to be encouraged to be part of those discussions about community life. Society should support them to influence decisions and build wider relationships through opportunities like volunteering.

Evidence of success would be community groups working with the council to put good ideas into practice to make the area a better place for older and disabled people.