This report sets out Think Local Act Personal’s work in 2014-15 against the objectives set out in its Partnership Agreement and work programme. It includes the results of interviews with 14 TLAP board members and/or partners, the results of an online survey\(^1\) completed by a further seven partner organisations, and analysis of selected statistics relevant to personalisation. It then shares the details of the work programme deliverables and their impact.

---

\(^1\) Semi-structured telephone interviews were held with 14 board members or partner representatives, based on 6 key questions. Interviewees were also asked to rate progress with personalisation across the sector overall, and to rate TLAP’s contribution. More detailed results are in the report from Care Performance Partners.
<table>
<thead>
<tr>
<th>CONTENTS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Key messages</td>
<td>2</td>
</tr>
<tr>
<td>About Think Local Act Personal</td>
<td>4</td>
</tr>
<tr>
<td>Key achievements for 2014-15</td>
<td>6</td>
</tr>
<tr>
<td>TLAP in 2015-16</td>
<td>20</td>
</tr>
<tr>
<td>Appendix 1: How TLAP works</td>
<td>22</td>
</tr>
<tr>
<td>Appendix 2: How TLAP spends the money</td>
<td>24</td>
</tr>
<tr>
<td>Appendix 3: Detailed overview of TLAP’s work programme in 2014-15</td>
<td>26</td>
</tr>
<tr>
<td>Appendix 4: TLAP in numbers 2014-15</td>
<td>42</td>
</tr>
<tr>
<td>Appendix 5: List of all products published in 2014-15</td>
<td>43</td>
</tr>
<tr>
<td>Appendix 6: TLAP work programme for 2015-16</td>
<td>46</td>
</tr>
</tbody>
</table>
KEY MESSAGES

1) TLAP’s co-production approach and open culture is strongly valued, especially the inclusive “dialogue among equals” on how to improve the impact of personalisation. By bringing together the right people, and creating an effective co-production environment, it has been one of the partnership’s biggest successes in helping the sector to better define, understand and extend the reach of personalisation. Most of the participating organisations have been, and remain committed to the principles of co-production. TLAP helps by modelling best practice, which helps the partners shape and improve the ways they do this in their own work.

2) The momentum and focus on integration especially between health and adult care services is welcomed and needs to be maintained, especially as this has strong potential to make an impact on people’s lives, especially at a time when NHS commissioning is under pressure to change. Aligning initiatives to help avoid the need for constant re-invention is helping to create more effective impact.

3) TLAP is leading the growth of personalisation, both intellectually and in communicating knowledge and experience about personalisation. TLAP is effective and punches well above its weight given its operating model as a small organisation with a small core team, modest budget, and uncertain financial underpinning. It is getting the personalisation message across through very good communications and useful products and by including people and organisations working with people who have more complex or challenging needs.

4) There is still a need to demonstrate the case for personalisation with stronger evidence (specifically measures to indicate potential return on investment) for commissioning more personalised health and social care support. The evaluation of personalisation with suitable metrics – particularly those that are needed in health services – is needed to support the business case for change with robust value-for-money evidence. This will help commissioners and providers to establish the case for change in business terms, above and beyond the already well-made case for quality improvement.
5) The work is not finished and the partnership needs to consider new ways to influence larger mainstream service providers with the personalisation message: recognising TLAP’s modest resources, but also addressing an associated lack of recognition of the “brand” in some parts of the sector especially large mainstream social care providers and in the health services. The language and branding of personalisation is not always widely understood among some parts of the sector, including mainstream care home and home care providers. There is lack of core capacity to help organisations translate generalised messages into locally tailored programmes for change.

6) There is a need to develop work in new areas: how to build community capacity, and whole-family based approaches to personalisation; as well as addressing change in the statutory processes of assessment and support planning, to make them more personal to individual people and families. It should also address openly the impact of budget cuts – especially for those who do not receive financially supported services.

7) Overall levels of self-directed support and direct payments have increased and the level of satisfaction of people who use services improved on the previous year. However, the overall number of people who have council funded support or care has continued to reduce, so the indicators cannot reflect the experience of people who are not now eligible to receive them.2

8) Councils that have signed up to Making it Real, particularly those at the action plan stage, had a much higher proportion of people using self-directed support and direct payments; and the people using care and support services in those areas report a higher level of satisfaction with services and support than those in areas where councils have not signed up.3

2 TLAP commissioned Care Performance Partners (CAPP) to assist in reviewing and analysing relevant statistics relating to personalisation, including council performance against the Health and Social Care Information Centre (HSCIC) Data 2013-14. More detailed results are in the report from Care Performance Partners.

3 Comparison between HSCIC data and the Making it Real sign up database.
Our most valuable involvement in TLAP is “...being part of a national coalition that collaborates to keep a focus on personalisation. The partnership with other organisations, including the voluntary sector, the National Co-production Advisory Group statutory bodies means we are able to contribute to define what personalisation means.... We are part of a vehicle that can influence the agenda for participating organisations – for example, with the NHS in its work on integrated health and care budgets.”
– TLAP survey of partners 2014

Think Local Act Personal (TLAP) is a national strategic partnership of more than 50 organisations committed to supporting the continued implementation of personalisation and community-based health, care and support.

The Partnership spans central and local government, the NHS, the voluntary, community and independent provider sectors and people with care and support needs, carers and family members, through the National Co-production Advisory Group.

**Think Local Act Personal is:**

- A catalyst for change: focusing the work of partners on a shared vision for personalisation and securing specific commitments, renewed annually, for how they will support its delivery.

- An enabling framework: through the production of practical tools and resources and support for their use.

- A knowledge exchange: creating opportunities nationally and regionally for leaders to share learning about what works and using partner’s extended networks to reach out and engage organisations locally.
A model of co-production in practice: setting an example in the way people with care and support needs, carers and family members are engaged in leading and shaping the work programme.

A different approach to improvement: which in challenging times, recognises the benefits and necessity of shared endeavour and values everyone’s contribution to making change happen.

**TLAP works to:**

- Shape and influence national policy relating to personalisation and community-based support across the public service reform agenda.
- Delivering a work programme through a number of work streams focused on supporting the drive to deliver personalisation and community-based support.
- Call on action from partners to make commitments, shape the work programme and contribute their time and energy to its delivery.

Think Local Act Personal’s work is driven by the Partnership Agreement **Working Together for Personalised, Community-based Care and Support 2014-17**. It was developed with TLAP partners and people interested in what’s next for personalisation; provides the platform for TLAP’s national work programme and informs the work of all partners. It sets the national context for the continued transformation of health, care and support at local level. The agreement is published alongside a set of commitments from each of our partners describing how they will support its delivery.

Further information about how TLAP works including details of its co-chairs and board structure is in **Appendix 1**.

TLAP is grant funded annually by the Department of Health; with smaller commissions from other partners. See how the money was spent in **Appendix 2**.
KEY ACHIEVEMENTS FOR 2014-15

1) **Building a strong and broader partnership with commitments for action**
by co-producing a new partnership agreement across the sector, signing up over 50 partners including a number of new health and housing sector partners and asking each partner to commit to actions that would deliver on the vision set out on the new agreement.

2) **Continued modelling of co-production with people who use services, carers and families** who hold us to account by constructively reviewing and challenging the partner commitments and co-designing and co-delivering our work stream products.

3) **Supporting implementation of the Care Act 2014** in partnership with the Department of Health, Local Government Association and the Association of Directors of Adults Services and other delivery partners including Skills for Care and the Social Care Institute for Excellence.

4) **Strongly focusing on health and social integration at the level of the individual**
through increased partnerships with the NHS and other health organisations including the Integrated Pioneers Programme, the new Integrated Personal Commissioning Programme and the work of the Collation for Collaborative Care.

**Building a strong and broader partnership with commitments for action**

“**TLAP is creating a truly cross sector representation among people who use services, commissioners, and providers: adopting a constructive approach that is thoroughly inclusive.**”

– TLAP annual survey of partners 2015

TLAP launched a new partnership agreement in June 2014. It drew upon learning from more than six years of implementing personalisation in social care and set out a framework for how a national partnership of people and organisations should go forward from 2014-17.
It was co-produced with people from across health, housing, education and social care, and drew upon contributions to Personalisation Summit hosted by Care Services Minister Norman Lamb and facilitated by TLAP in September 2013, and the “Personalisation: What’s next?” campaign, which ran between November 2013 and March 2014 and featured over 30 blogs from various existing and new partners.

This broad engagement helped TLAP shape a new set of priorities and connect our work with that of our partners. A total of 49 partners signed up to the agreement, increasing from the 32 original partners established in 2011.

In addition to signing up to the agreement, each partner made a commitment as to how their organisation would deliver on the vision outlined in the Partnership agreement. A process for gathering these commitments was created that was proportionate to the resources available within TLAP (mostly non-financial) and not too onerous for partners; and which we hope will be repeatable for 2015-16 and 2016-17; and compatible with an approach to demonstrating impact and outcomes.

The commitments each partner made differ in a number of ways:

- The number of commitments made (from a 1-21 with 3 as the average).
- The nature of the commitments made (from a relatively common commitment to disseminate TLAP products, materials and key messages through partner networks, through to particular work that will be undertaken in support of the agreement).
- The specificity of the commitments made (from very high level supportive statements, through to specific products and deliverables).
- The measurability of the commitments made (linked to the above points, it being more obvious how some commitments can be “evidenced” than with others).

The full list of partner commitments in 2014-15 can be accessed [online](#).

In January, TLAP worked with the National Co-production Advisory group to facilitate conversations and constructive challenge to help review these commitments to find out what worked well, what could work better and what they might want to commit to in the next year.

“It was really good for partners to be interviewed by co-production members. The exercise was well received as it moved the conversation from written commitments to thinking about clearly delivered actions, which made the partnership real”.

– Kathy Roberts, Chief Executive Mental Health Providers Forum
A number of organisations shared that they completed their commitments – for example:

- The Association of Directors of Children’s Services supported the Children’s Personalisation Network through TLAP and the Council for Disabled Children; and published their Making it Real “I” statements on its website.

- Carers Trust continued their support for the Carers Hub which showcases and shares good practice in personalised support for carers; produced a toolkit for their network of carer’s organisations on the new requirements of the Care Act; and monitored developments on personal health budgets and ensured that the impact on carers is part of the ongoing work in that area.

- CQC continued its work to ensure a focus on personalisation in its activity.

- Community Catalysts continued to build up their evidence base of community capacity building through its website and brought their learning and challenge to TLAP’s market development work stream.

- Volunteering Matters (formerly CSV) showed how volunteering can support the drive for personalisation by undertaking joint work with InControl on supported volunteering by disabled people; and working through the Health and Care VCA Programme to support Care Act implementation.

- Disability Rights UK shared information on personalisation to their membership as well as sharing their work on barriers to direct payments with the wider TLAP partnership.

- Housing LIN worked to support personalisation at the centre of new housing development opportunities by influencing the development of and co-signing the sector-led Health and Housing Memorandum of Understanding; and producing a series of briefings on commissioning care at home; as well as case studies on co-creating and co-designing inclusive environments.

- Independent Age developed new information resources on social care and health services to give older people and those who care for them greater control over their lives and supported other organisation’s developments of information resources, including the BBC’s care cap calculator.

This process will be refined and improved in 15/16.

The list of partner commitments for 2015-16 is published with the TLAP work programme for 15-16.
Working in this way is... “Enabling service users and carers to get together with Voluntary Organisations Disability Group (VODG) trustees, policy makers and commissioners. Our members really value this aspect, and it has enabled VODG to speak strongly within a co-production framework. It is enabling “big conversations” with stakeholders.”

– TLAP survey of partners 2015

Continued modelling of Co-production to the partners and sector

“TLAP has helped to develop Shared Lives own thinking about co-production, enabling it to use the approach more routinely and effectively in the way it works with providers and people who use services.”

“As a carer, when things get difficult or out of control working with service organisations, it is satisfying to be part of a movement that seeks change and puts people who use services and carers first”.

“TLAP works as one with TLAP and is model for the way that organisations should work in this area. It’s “much more than consultation” and this approach runs through from ideas to delivery at every stage.”

– TLAP survey of partners 2015

TLAP’s co-production approach and open culture is strongly valued, especially the inclusive “dialogue among equals” on how to improve the impact of personalisation. By bringing together the right people, and creating an effective co-production environment, it has been one of the partnership’s biggest successes in helping the sector to better define, understand and extend the reach of personalisation. Most of the participating organisations have been, and remain committed to the principles of co-production. TLAP helps by modelling best practice, which helps the partners shape and improve the ways they do this in their own work.

TLAP continued to be co-chaired by Marjory Broughton and Clenton Farquharson from the National Co-production Advisory Group (NCAG), with standing items at each TLAP programme board meeting and acting as spokespeople on all our announcements. Members from NCAG opened all our workshops and events, particularly the Care Act related strategy workshop; and informed the development of TLAP’s contribution to the Integrated Personal Commissioning programme.
Our work on co-production was significantly highlighted at two major national events:

- TLAP held a 2nd National Conference in Liverpool on 26th November, engaging directly with 215 people on the day and with thousands more through social media. The event was co-designed and co-delivered with members of the National Co-production Advisory Group. The day was co-chaired by TLAP chairs Clenton Farquharson and Marjory Broughton.

- This followed a strong TLAP presence at the National Children’s and Adults Services conference in Manchester in October, with more than 100 attending our policy session and two speaker’s corner sessions on co-production and integrated personal budgets.

- Members from the National Co-production Advisory Group spoke at a number of other external conferences and events, including Community Care Live in Birmingham, the ADASS Information Management Group National Conference “Delivering the Vision –Information for Social Care”. Representatives of NCAG also attended the Independent Living Fund (ILF) Advisory Group, VODG Personalisation Network meetings as well as workshops for Integrated Personal Commissioning (IPC) where their inputs were well received.

Other highlights include:

- Producing the Top Ten Tips for Co-production in Easy Read.

- Co-producing the Personal Budgets Minimum Process Framework which was commissioned by the PMO to support Care Act implementation.

- Co-producing Developing the Power of Strong and Inclusive Communities. A framework to support health and wellbeing boards fulfil wellbeing and prevention duties outlined in the Care Act.

“Co-production in the genuine sense of ‘nothing about me without me’. Policy-makers do not usually engage with people who use services; TLAP has made this much more possible. For example, in a recent event on local councils’ preference for the use of pre-payment cards, an NCAG member was able to put forward a point of view about their disadvantages from a service user’s perspective. Although a lone voice, NCAG was able to get the point across that options are not the same as choices. TLAP has opened doors to new ways of creative thinking about personalisation.”

– TLAP survey of partners 2015
Support for Care Act 2014 implementation

“TLAP has had direct and positive influence on the content of the Care Act and its associated guidance. My personal view is that TLAP has kept personalisation from being lost in all the transactional and architecture change in health and social care. Progress through common endeavour is still the way forward and is as relevant today as ever.”

“Working on the Care Act developments has been made easier because of the relationships already established through TLAP networks TLAP is a joy to work with-talented, professional, and positive in the face of serious challenges.”

“TLAP are good partners in complementary activities: for example in working together on the delivery of aspects of the Care Act. They have clarity of purpose and are streamlined. They bring people together in ways that avoid self-aggrandisement.

– TLAP survey of partners 2015

Following our support to Government in 2013-14 to help shape the Care Act regulations and guidance, this year TLAP worked alongside other delivery partners including Skills for Care and the Social Care Institute for Excellence to deliver support to the 152 local authorities in preparing for and meeting the new requirements set out in the Care Act 2014.

The support materials and offers we developed and delivered included the highlight below and all are available here.

Information, advice and brokerage

TLAP addressed the strategic challenge of implementing the Care Act for councils and partners; detailed the work in progress at six volunteer sites across England for other areas to model; and showed what benefits might be delivered by information, advice and brokerage services, and how they might be measured.

This was delivered in three related reports Shaping the Future, Gearing up for Change and Seeing the Benefits; which were backed up by a web-based toolkit to help councils develop their information and advice strategies; 31 case studies from across England and several regional workshops.
More than 100 delegates attended two workshops with representatives from South East, East and London regions.

The reports and online web tool were launched in Oct 2014.

WEB STATS
The Information and Advice Strategy web tool and suite of three reports received 45,567 page views from 4,879 users with an average session duration of 7 minutes, an average of six pages viewed per session and received an extremely low bounce rate of 13.32% which suggests thorough engagement.

TRIBUTES
People who attended the Care Act workshops said they valued hearing what other local authorities are doing, the practical examples and guidance shared, especially around Care Act compliance and the finances; and the networking with colleagues and the opportunities to hear from others and share thinking.

Participants said they will take away ideas on best practice and links to content and guidance; ideas and networks to tap into; renewed vigour to push forward and some reassurance that they were going along the right lines to ensure Care Act compliance. They said they will share this in a variety of ways including through team meetings and working groups; local Care Act boards; wider networks in their local areas and incorporate into training programmes.

Self-directed support and personal budgets
TLAP provided support to local authorities and partners to deliver Care Act compliant lean social care systems and processes for delivering personal budgets; set out how council commissioners and providers can contract in a way that gives the person more control over their support through individual service funds; and provided practical examples for delivering Care and Support plans that are both Care Act compliant and person-centred in their approach.

This was delivered in the updated in the Personal Budget Minimum Process Framework which is now an interactive online tool; the publishing of two guidance documents Delivering Care and Support Planning and Individual Service Funds (ISFs) and Contracting for Flexible Support.
The minimum process tool covered 13 processes which can cause problems for people using personal budgets. Each problematic process has a case study to show the kinds of activities that are being undertaken to resolve the process issues.

WEB STATS
In the first month of its launch the Personal Budgets Minimum Process Framework had 4,421 page views of which 3,256 were unique with users spending approximately 4 minutes on the tool.

TRIBUTES
@mithransamuel: This tool looks good from @TLAP1 on cutting personal budgets bureaucracy in a #careact compliant way – lots of info.
@DrSallyHayes: Great @TLAP1 walk through on how the #CareAct fits in with personalised care planning and budgeting.
Caroline Waugh: I think this is brilliant.

Delivering Care and Support Planning was launched in January 2014. It was shared at regional events in Doncaster, Yorkshire and Humber. The Doncaster event was 30% over subscribed with some excellent feedback from delegates. Further events are being delivered like this in 2015-16.

WEB STATS
The resource had 65,810 page views by 13,922 users who viewed an average of three pages per session for approximately 3 minutes, which suggests good engagement for the period ending 1st April.

TRIBUTES
Rich Watts: Using @TLAP1’s care and support planning practical guidance for some work I’m doing. It really is excellent!
**Tanya Moore:** Excellent new resource from @tlap1 Delivering Care and Support Planning.

**Ross Young:** Check out this fantastic new resource – Delivering care and support planning.

**The Individual Service Funds (ISFs) and Contracting for Flexible Support** was published in June 2015, as part of the suite of Care Act products commissioned by the PMO.

**WEB STATS**
In the first month of the launch had 5,666 page views by 1,598 users who reviewed an average of 3 pages per session for 3 minutes. This is an excellent result.

**TRIBUTES**

**Rhidian Hughes @rhidianhughes:** A strong report from @TLAP1 on personalised care through Individual Service Funds #ISFs.

**CollaborativeCare @Co4CC:** Our partner @TLAP1 has great guide to help councils and providers meet Care Act ‘14 guidance on Individual Service Funds.

The ISF work in 2014 will result in learning sets being established in a number of regions in 2015.

**Market Development**
TLAP supported councils to use co-production in their market shaping and commissioning practice according to Care Act guidance, as well as advice on developing a care and support market that reflects the diversity of their local population and offers choice to all. This was delivered in an interactive online tool People not Process: co-production in commissioning and Top Tips: Commissioning for market diversity.
People not process – Co-production in commission was released as an online tool in June 2015, as part of the suite of Care Act products commissioned by the PMO.

WEB STATS
In the first month of the launch had 17,297 page views by 2,611 users who reviewed an average of 5 pages per session for approximately 4 minutes which is very positive given it was the summer period and reflects the strength of the promotional activity which included a guest blog from Dr Sam Bennett on the Department of Health blog spot.

TRIBUTES
“This looks really good, it’s not too overloading with information and is well paced in its tone. Well done!” – Paul Ross from SCIE Paul D S Ross (MCLIP) | Senior Information Specialist and Project Manager

@LifewaysGroup: Working in partnership is so important, we think this guidance by @TLAP is really interesting #peoplenotprocess.

Top Tips: Commissioning for Market Diversity was published at the same time as part of the suite of Care Act products commissioned by the PMO.

WEB STATS
In the first month of the launch had 8,207 page views by 1,475 users who viewed an average of 4 pages per session for almost 5 minutes which shows that it was read.

TRIBUTES
@Sitrapolicy: Excellent new resource for commissioners on how to develop a diverse market under the #CareAct.
Expansion to health partners

Working with health partners has provided an opportunity for supporting and challenging the way those organisations champion personalisation amongst health service providers and how it can be applied within health services, based on evidence. It has also helped them in gaining “awareness of current developments in adult social care to support the organisation”, especially those relatively new to working in or with adult social care to produce evidence-based guidance, advice for practitioners, to develop quality standards and metrics, and provide informational services. TLAP has been successful in influencing the agenda with the NHS in its work on integrated health and care budgets by “getting the right people together” and “aligning initiatives across health and care”.

“The ambitions of personalisation are clear and most people agree already with the aspects of quality improvement: but more work is needed to convince health bodies that it can really work in business terms for health services.”

– TLAP survey of partners 2015

Integrated Personal Commissioning

TLAP welcomed NHS England Chief Executive Simon Stevens’s announcement in June that people with high levels of health and care needs will be offered the ability to control their own support using money from both NHS and social care budgets through an Integrated Personal Commissioning Programme.

The IPC announcements formally recognised TLAP as a “delivery partner” to the NHS in this initiative and the prospectus was published alongside TLAP’s supporting paper “Getting serious about personalisation in the NHS” which charts the context and draws implementation lessons from the social care experience. TLAP was also significantly involved in agreeing the criteria and selection process for sites coming forward to take part in the programme.

This work was followed up with a series of strategy workshops for the nine IPC sites that were announced in early 2015.
“People are the best integrators of their care and support and personal budgets can be a way to achieve this. For people with support needs and carers, the divisions between health and social care can feel artificial and have a negative impact on their experience. For people with complex needs, it is increasingly imperative that health and social care organisations work together to deliver a seamless, person-centred service. It is vital to unify health and social care and ensure it is directed by the individual.”

– Marjory Broughton and Clenton Farquharson, TLAP Co-Chairs 2014-15

“The Integrated Personal Commissioning programme confirms the next stage of personalisation will be its most ambitious. The time is now right to do this – the pressures on the system demand we think differently and embrace the transformations necessary to drive forward a new model of care and a truly person-centred NHS. This means people with health and social care needs themselves, with the support they need, leading the change as the most effective integrators of their own care and support. Think Local Act Personal is ready to support the IPC programme as a key delivery partner, bringing together years of learning and experience and the leadership of the wider health and care sector around a shared commitment to make the next stage of personalisation a success.”

– TLAP Director Sam Bennett, 2014

Integration Pioneers

TLAP started work with the Kent Integration Pioneer Programme to support them in developing their Making it Real action plan. The Kent programme is based on whole system transformation and is unique in that it comprises 7 CCG’s, 12 district councils, Kent County Council, acute sector, Kent Community Health NHS Trust, Commissioners Support unit and Kent and Medway Social Care partnership trust. TLAP is very keen to support such an integrated approach to Making it Real and will continue this work into 2015/16.
Coalition for Collaborative Care

TLAP also welcomed the launch of the Coalition for Collaborative Care, bringing together a partnership of organisations focused on making person-centred, coordinated care a reality for people with long-term conditions. Partners include those responsible for NHS delivery and development at a national level, the Royal Colleges, major charities and voluntary organisations, professional and leadership bodies in health and social care and leading development agencies. C4CC is funded by NHS England. TLAP sits on its steering group and we are working on joint programmes including Building Community Capacity and Coordinated Care.

A detailed overview of all of TLAP’s work programme deliverables for 2014-15 is in Appendix 3.
“TLAP needs to be the conscience of the sector: the grit in the oyster that keeps the momentum going and combats any risk of complacency about progress with personalisation. Although the term itself is now part of common parlance and also embodied in legislation, there is plenty more still to do. Given the reductions in funding for adult social care, TLAP, with its partners, must ensure that it is vigilant in ensuring that people who need a service are supported. It needs to continue to move on with work that develops health and housing services and it may be necessary to consider what to stop doing in the future.”

“The evidence base is not yet strong enough. More practical guidance based on evidence is needed to demonstrate how personalisation can work in a health service environment. This really matters for the NHS during the current austerities, when there has to be a sound financial case for shifting investment – often from hospital care where high risks often exist – to different kinds of care: and it’s a tough challenge. To decommission a service and replace it with an alternative demands not just improved quality, but also evidence of value for money: so there must be a sound business case. “

– TLAP survey of partners 2015

In 2015-16, TLAP is working across three main areas:

1) Active dissemination and engagement: TLAP has produced a significant quantity of products and materials to support the successful implementation of personalisation since 2010 adding to a growing body of best practice evidence for “what works.” Rather than focusing primarily on producing further products in 2015-16, programme activity will shift to actively disseminating our existing materials and providing opportunities for people to engage with them and network with one another.

2) Supporting change locally: TLAP has delivered a number of projects recently that have entailed supporting and/or charting change within local areas and sharing this learning, e.g. intensive work with six councils on information and advice in 2014-15. TLAP will strengthen this way of working to focus greater attention on projects that deliver real change on the ground in 2015-16.

3) Breaking new ground: TLAP has organised its programme around 7 work stream areas in 2014-15. While some of these will remain relevant, TLAP will target underdeveloped areas in the 2015-16 work programme and will cease doing some things altogether where the strategic fit with the new TLAP Partnership Agreement is not as clear.
In addition, TLAP will maintain a non-commercial delivery model.

The programme outlined in Appendix 5 includes:

- The continuation of some core elements of TLAP business (e.g. Making it Real and the National Personal Budgets Survey).
- The continuation of some projects that began in 2014-15 that will continue (e.g. our NHS England funded work on PHBs for children and young people with complex needs).
- Suggested work linked to implementation of Care Act building on materials produced in 2014-15.
- Suggested new work areas responding to developments in 2014-15 and looking ahead (e.g. Integrated Personal Commissioning).

In the interviews with TLAP partners, some of their recommendations for future activity include:

- Developing metrics to help TLAP evaluate its own impact and products more directly.
- Simplifying the personalisation messages to reach a wider audience amongst providers in particular.
- Stabilising funding from sources that are sustainable to help give more strategic capacity as well as to maintain an independent voice in the field.
- Exploring ways of reaching more of the mainstream services, so that personalisation is better understood and valued.

The finances

The Department of Health has deployed a reduction in core grant funding for 2015-16, alongside open market tendering where requirements are identified through the Programme Management Office. This will mean a reduction in grant funding to £850,000 (15%).

This has been managed by top-slicing work stream budgets to spread the budget reduction across the programme and is workable given plans to reshape activity away from product development towards regional and local engagement.

The full TLAP work programme for 2015-16 is published alongside this report here.
Each year, TLAP delivers a work programme, agreed with partners and funded annually by the Department of health, with a number of specific commissions from other agencies. See our budget information in Appendix 2.

The work programme is delivered through a number of work streams (See Appendix 3). Day-to-day work is coordinated by a small core team reporting to a Programme Board that includes representatives drawn from the wider partnership, and which is co-chaired by the President of ADASS and Chair of the Care Provider Alliance. The full partnership is co-chaired by two members of the National Co-production Advisory Group, putting TLAP in the unique position of bringing together people who use services and carers with national organisations.

For full details, see the Terms of Reference, which were updated in July 2014.

All of TLAP’s work is supported by the National Co-production Advisory Group (NCAG). They are a team of people from different backgrounds. They either use services, care for or are a family member of someone who uses support, an expert by experience or patient. Most importantly, they are committed to ensuring that personalised services and support based in the community become a reality for all.
Membership of the Think Local Act Personal Programme Board as of July 2015

Ray James  ADASS President
David Pearson  ADASS Immediate Past President
Dawn Wakeling  ADASS Personalisation Network
Alex Fox  Shared Lives Plus/Care Providers Alliance
Bridget Warr  United Kingdom Home Care Association/Care Providers Alliance
Kathy Roberts  Mental Health Providers Forum/Care Providers Alliance
Sheila Scott  National Care Association/Care Providers Alliance
Andrea Sutcliffe  Care Quality Commission
Clara Swinson  Department of Health
Colin Noble  Local Government Association
Sarah Mitchell  Towards Excellence in Adult Social Care programme
Isaac Samuels  National Co-production Advisory Group (NCAG)
Martin Yates  NCAG
Sally Percival  NCAG
Luke O’Shea  NHS England
Gillian Leng  NICE
Martin Caunt  Programme Management Office
Elaine Rashbrook  Public Health England
Tony Hunter  Social Care Institute for Excellence
Sharon Ilen  Skills for Care
Philippa Russell  Standing Commission on Carers
Sam Bennett  TLAP Director
Linda Doherty  TLAP Business Manager
Jaimee Lewis  TLAP Communications Advisor
Paul Richards  TLAP Co-production Coordinator
Since its inception in 2010, TLAP has been grant funded by the Department of Health. Between 2010 and 2013, grants supplemented legacy funding from Putting People First spread across the three years. Between 2013 and 2015, funding has come predominantly through a grant of £1M per annum, which maintained programme activity at the same level following the depletion of legacy funds. At the same time there has been some growth and diversification of income with grants secured from NHS England and Public Health England, though these grants have been non recurrent and accounted for less than 10% of income during this period.

In 2014-15 TLAP’s budget grew through commissions through the Programme Management Office (PMO) relating to implementation of the Care Act. While these commissions have been subject to additional governance and oversight (separate to the TLAP Programme Board), they were nevertheless still primarily shaped by the Partnership, i.e. the need for the work and its specification happened through the normal TLAP business planning process even though the funding route differed. This has meant a total budget in 2014-15 of £1.6M.
### How we plan to spend the money in 2015/16

#### Income
- Department of Health core grant: 850,000
- NHS England Young People: 22,500

Total funds received: 872,500

#### Carry forward from 2014/15
- Department of Health restricted funds (information and advice): 30,073
- Department of Health restricted funds (integrated care and support planning): 32,758
- NHS England Personal Health Budgets: 9,980
- General: 184,246

Total brought forward: 257,057

**TOTAL INCOME**

1,129,577

#### Expenditure
- Core Costs (including hosting, staffing, meetings and events, communications): 652,132
- Making it Real: 40,000
- Self directed support: 70,000
- Person – centred coordinated care: 70,000
- Market development and workforce: 65,000
- Information and advice: 50,000
- Building community capacity: 45,000
- Co-production: 90,000
- To allocate in year: 47,445

**TOTAL EXPENDITURE**

1,129,577
APPENDIX 3: DETAILED OVERVIEW OF TLAP’S WORK 2014-15

TLAP had four broad priorities for its work programme in 2014-15:

1) Choice and control
   a) Information and advice
   b) Self-directed support
   c) Market development and workforce

2) Active citizenship and prevention

3) Quality

4) Integration

Each encompassed a programme work stream, except for choice and control which contains three work streams – information and advice, self-directed support and market development and workforce. The programme has two “enablers” co-production and the Making It Real programme, which support delivery across all the work streams.

Making It Real

Making it Real (MiR) supports a practical step by step approach to the commissioning and delivery of personalised care and support through co-production with people who use services and carers. The programme provides an enabling framework for people and organisations across the sector to take responsibility for change and to publically share the progress made. MiR is closely aligned with the 2012 White Paper and current Care Bill and 800+ organisations (including 90 councils) have so far “signed up,” which includes a board level commitment, and the co-production of a local action plan with people using services, carers and family members to meet agreed objectives.
OUTCOMES FOR 2014-15

- Creating a common language about “what good looks like” in delivering personalised care and support by working with partners in Health, including National Voices.
- Embedding Making it Real as a tool to stimulate co-production and improve outcomes within many more organisations.
- Building stronger traction and engagement with groups of people not currently well served by personalisation (including people with complex needs and mental health).

DELIVERABLES FOR 2014-15

- Bespoke support to the Kent Integration Pioneer Programme to help them develop their Making it Real action plan. The Kent programme is based on whole system transformation and is unique in that it comprises 7 CCG’s, 12 district councils, Kent County Council, acute sector, Kent Community Health NHS Trust, Commissioners Support unit and Kent and Medway Social Care partnership trust. TLAP is very keen to support such an integrated approach to Making it Real.
- Supporting further signup and engagement with MiR across the sector through specific versions of the “I” statements and what good looks like in practice for different groups of people.
- Working with a number of organisations to develop a Making it Real narrative for people with a sensory impairment.
- Working with SITRA to develop a Making it Real narrative for people who receiving housing support.
- Delivered a number of presentations to a number of organisations to promote Making it Real including a keynote speech to Hertfordshire Partnership University NHS Foundation Trust who have committed to make this a priority in their social work strategy.

PRODUCTS

- My life, my support, my choice: a narrative for person centred coordinated care and support for children and young people with complex lives – report sets out how good, coordinated – or integrated- support looks to children and young people with complex lives up to the age of 25.
- No Assumptions: a Narrative for Personalised, Coordinated Care and Support in Mental Health – guide highlights the key factors that are particular to managing mental health and wellbeing from the perspective of people who use mental health services.
IMPACT

Feedback from the Kent Integration Pioneers and Hertfordshire Mental Health Trust has been incredibly positive. It’s clear the work done with these areas to support the development of MiR has enthused and motivated.

The Sensory impairment steering group has been a great example of strong collaborative working; there’s been a genuine shared approach to taking this forward and again, informal feedback demonstrates that TLAP is viewed as the gel that can bind the various strands together to oversee the development of a much wanted/needed product.

VODG published their own collection of organisations using Making it Real.

Islington Council’s Making it Real programme was shortlisted for a MJ Award in delivering better outcomes for people using social care and published their own evaluation report.

The survey of TLAP partners reports that Making it Real has made it possible to articulate to service providers what personalised services should look like from the perspective of a person who uses services:

“Getting the right people around the table and enabling courageous conversations – especially in financial hard times. The issues can be very emotive.”

“The work on co-production has brought the concept to many more people and organisations.”

“Making it Real is normalising personalisation so that it is valued, both from a taxpayer’s perspective as well as for the obvious quality benefits that everyone agrees with. Although some short term gains are easier to demonstrate, there needs to be better evidence around the longer term outcomes and costs of the approach.”

“MacIntyre whole heartedly embraced Making it Real and our action plan has led to significant improvement in our development and improvement of co-production in our own organisation. There has been real tangible benefit for all involved. The strengthening of the user voice in MacIntyre has improved decision making and helped our push to a more asset based approach to our care and support. Making It Real has changed the way people in our organisation (or those we work with) understand what good care and support looks like. There is objective evidence that our adoption of MIR has improved the understanding of individuals both in terms of their own aspirations but also on their confidence to comment on how well we are doing.”

“I worry that it preaches to the converted; not sure it has influenced those not engaged.”

– TLAP survey of partners 2015
Information, advice and brokerage

TLAP worked closely with the Department of Health and other key stakeholders to support the delivery of the aspirations set out in the Care Bill regarding the provision of universal information and advice – a critical building block for people to make informed choices and to be in control of their own care. The 2014-15 work stream completed work started in 2013/14 to develop tools and resources to support councils with the new duties outlined in the Care Bill, including the development of statutory guidance and will support their dissemination throughout the consultation period.

OUTCOMES FOR 2014-15

- Cross sector input to the development of statutory guidance in this area.
- Councils understand and are better equipped to deliver new duties around information and advice in advance of the Act.
- A more consistent, common language and understanding of health and social care terminology to assist professionals and the public to navigate the system.

DELIVERABLES FOR 2014-15

- Publishing a report on the commissioning challenge of meeting the new duty, including in depth case studies and evaluation of different information and advice strategies and services.
- A revamped, web based version of the TLAP “Jargon Buster" to accommodate further health and social care terminology (this product won a Plain English Award in 2013).
- Development of a framework to inform local information and advice strategies in line with the Care Bill (and developed in parallel with the consultation period for the statutory guidance).
- Support for the dissemination and implementation of the Bill through regional workshops to share and demonstrate support tools developed by TLAP in 2013-14 and 2014-15.

PRODUCTS

- Shaping the Future, Gearing up for Change and Seeing the Benefits – series of three reports setting out strategic challenge of implementing the Care Act for councils and partners; detailed the work in progress at six volunteer sites across England for other areas to model; and showed what benefits might be delivered by information, advice and brokerage services, and how they might be measured.
- 31 case studies from across England.
- Information and advice strategy tool (web based resource to assist councils with implementing new duties in the Care Act).
- An electronic version of the Jargon Buster was published in June 2014, following its award from the Plain English Campaign in 2013. Approximately 15 new tested definitions are now being added each month. By end of March 2014, the resource now holds more than 200 words.

**IMPACT**

- Our survey of partners reports that 90% agree that there has been progress with provision of information and advice and 89% positively agree that TLAP has contributed to this:

  “This is a core purpose of TLAP and is undertaken with integrity and some creativity. There is still a long way to go and we often underestimate how disconnected people who are seeking information are.”

  “TLAP has produced a vast range of information which is really helpful but this needs to be more accessible to Deaf people.”

  “I think TLAP has helped to raise the profile, and despite this being a core element of the Care Act, progress is at best varied. Query how many agencies have a universal information and advice strategy, and have fully implemented it; and have a whole system approach – the latter is almost none existent.”

There have been 22 widget downloads since introduction of the functionality in November 2014.

**TRIBUTES**

“The Jargon Buster is absolutely brilliant – well done” – Head of Campaigns, Stoke Association

“Hi I found the Jargon Buster really useful and will look at adding it to our own webpages where appropriate” – City of Stoke on Trent

“TLAP have updated their care and support Jargon Buster so it’s even better than it was before!” – Researcher, Oxford
Building Community Capacity

TLAP’s work on building community capacity has focused on demonstrating how social capital can be grown and sustained in co-production between public agencies and communities to promote the inclusion and contribution of older and disabled people. In 2014-15, TLAP supported health and well-being boards and their members to develop and implement strategies which are financially sustainable while helping achieve radically new relationships between public agencies, communities and individuals. This was a joint programme of work delivered in partnership with Public Health England to fulfil the White Paper commitment to establish a collaborative network to spread the adoption of community based approaches. The 2014-15 work stream expanded this work in recognition of the high priority of asset based approaches and demonstrating value, in the context of the Care Bill and ongoing pressure on public finances.

OUTCOMES FOR 2014-15

- Growing evidence base for effectiveness (including cost effectiveness) of community capacity building initiatives in furthering prevention and reducing demand.
- Model for Health and Wellbeing Boards to drive personalisation across the system.
- Strengthened links with LGA and other relevant Health and Wellbeing programmes.
- Leaders trained alongside people with care and support needs, carers and family members (with NCAG involvement).

DELIVERABLES

- Maintenance and support to TLAP Building Community Capacity Practitioners Network which aims to develop a comprehensive picture of activity taking place in the space, identifying gaps and synergy, share learning and challenges and give and receive peer support.
- Planned a leaders seminar for Spring/Summer 2015 to bring together national system leaders to develop shared messages about the importance of engaging and empowering communities to develop a more people-powered health and care system; the outputs from this seminar will have a significant impact on the delivery of the 2015/16 BCC work programme.
- Continued support to seven Health and Wellbeing Boards engaged with TLAP and Public Health England to test and refine a comprehensive framework for community empowerment.
- Support for the dissemination and implementation of the Framework through regional workshops with key partners to share and demonstrate the framework in the context of national policy, legislation and other key frameworks.

- Further cohorts of Leadership for Empowered and Healthy Communities Programme (jointly funded with the National Skills Academy, Skills for Care, NHS Confederation).

**PUBLISHED TOOLS**

- Developing the power of strong and inclusive communities (framework for building community capacity developed with Public Health England) was published at the National Children’s and Adults Services Conference in October 2014.

**IMPACT**

- Feedback from practitioners network attendees illustrates the appetite for this forum – there is a sense that a gap has been closed in coordinating this work.

- Partners on the steering group express gratitude that TLAP is leading on this in such a collaborative way and have informed the team that TLAP has shown itself to be at the forefront of walking the talk and providing the space, support and resources to make things happen.

- The survey of TLAP partners show that 75% of respondents see some improvements to prevention overall but only 53% see this as a result of TLAP’s contribution. In terms of people being supported to use their own resources, skills and assets to meet their care and support needs, all except five identify progress in the sector, and TLAP’s contribution is positively acknowledged by 78%:

  “Involvement in the work on Building Community Capacity has been helpful for us. TLAP has made a positive impact within the resources available, but is under resourced.”

  “The contribution to work on building community capacity is one of TLAP’s biggest achievements. The public sector can be sectarian under financial pressure and TLAP has both a “hard hitting message” and the “ability to bring resolution” to (such) difficult problems.”

  “Events, such as the recent one on building community capacity are one of TLAP’s biggest achievements: TLAP finds the right people, creates the right ambiance, and is an effective catalyst.”
Person-centred, coordinated care (integration)

In 2013 TLAP was one of the signatories to the Shared Commitment to integrated care and support which established a national collaborative of organisations committing to supporting integration at pace and scale. As part of this TLAP worked with National Voices to adapt Making it Real as the Narrative for person-centred, coordinated care. This programme also includes the Integrated Care Pioneers. In 2013, TLAP also forged links with NHS England to support the rollout of personal health budgets, including the use of personal budgets across health and care. In 2014-15, the work stream will build on these foundations, to support the successful rollout of personal health budgets beyond Continuing Health Care and to ensure that Integrated Care Pioneers are including personalisation and personal budgets as part of their local integration plans.

OUTCOMES FOR 2014-15

- Developing a powerful connection between thinking on integration and personalisation.
- Building an evidence base through the Pioneers programme for how joint personal budgets can support prevention strategies and reduce demand on acute services.
- Further advancing personal health budgets in the NHS, beyond Continuing Health Care.

DELIVERABLES FOR 2014-15

- Delivery partner support for the Integrated Personal Commissioning Programme including developing the criteria and selecting IPC sites; running a sharing and learning residential for all nine IPC sites; producing a compendium of resources and designing and delivering up to nine place-based strategy workshops for IPC sites.
- Support to Integrated Care Pioneers and others with a specific interest in joint personal budgets (delivered in partnership with NHS England).
- Supporting the rollout of personal health budgets, including producing a compendium of PHB resources to assist implementation with the NHS Confederation.
- Running a series of three events for health and care leaders on personal health budgets with NHS Confederation and the Kings Fund on integration, mental health and sustainable commissioning, each producing a briefing/position paper on the system and outcomes benefits.
PRODUCTS

- Online compendium of resources for Integrated Personal Commissioning sites.
- Personal budgets in mental health – a briefing aimed at clinical commissioning groups expanding the use of personal budgets to people with mental health conditions, as part of the NHS mandate.
- Getting the sums right – How to sustainably finance personal health budgets – case studies showing how to implement personal health budgets.
- Joining up health and social care personal budgets – relevant to commissioners and providers at different stages of implementation.
- A wealth of information: Your questions on personal health budgets answered – briefing on practical information for commissioners and providers of NHS-funded care, as they introduce personal health budgets.
- Getting serious about personalisation in the NHS – guide to complement the Prospectus for the Integrated Personal Commissioning (IPC) Programme

IMPACT

- The survey of TLAP partners asked for views on whether there is a whole-systems approach to care and support and this makes more efficient use of public service resource. This includes work with housing providers. 74% responded that there had been progress, with 26% reporting no progress in this area. 56% believe that TLAP made a positive contribution in this area. When asked if there has been progress with better integration of health and social care, with a specific focus on integration at the individual level, 21% said they do not think there has been progress with better integration but TLAP’s contribution was recognised by 78% of respondents.
- Working with health partners has provided an opportunity for supporting and challenging the way those organisations champion personalisation amongst health service providers and how it can be applied within health services, based on evidence.
- It has also helped them in gaining “awareness of current developments in adult social care to support the organisation”, especially those relatively new to working in or with adult social care to produce evidence-based guidance, advice for practitioners, to develop quality standards and metrics, and provide informational services.
- TLAP has been successful in influencing the agenda with the NHS in its work on integrated health and care budgets by “getting the right people together” and “aligning initiatives across health and care”.
Quality

The TLAP National Quality Forum was established in 2013 following work TLAP conducted with the sector to further develop the “bringing clarity to quality” framework published alongside the White Paper. The Forum brings together leaders from all parts of the care and support sector alongside people using services and their carers and has identified priority areas where TLAP’s collaborative approach can add value. In 2014, the Forum conducted work for the Department of Health on the impact of the forthcoming Duty of Candour in Adult Social Care.

OUTCOMES FOR 2014-15

- Greater coordination and leadership for quality across national partners, clarifying who does what and what this means for people and organisations in the field.
- Providing a sounding board for national partners to support their engagement with important quality initiatives as they develop.
- Developing practical tools to support organisations to understand and engage with the quality landscape.

DELIVERABLES FOR 2014-15

- Maintaining and supporting the National Quality Forum which met three times in 2014-15.
- Mapping and bringing coherence to national quality initiatives and developing a web based resource to assist leaders.
- Building on the social care sector’s response to the Francis Inquiry (including the duty of candour and its implications and application in social care, the wider transparency and openness agenda).
- Designing and commissioning training for CQCs inspectors on what good personalised care and support looks like in different settings.

PRODUCTS

- Duty of Candour – a report following the Quality Forum’s engagement with sector representatives on the Duty of Candour, with a particular focus on the harm threshold.
Quality Map – this simple map is designed to help providers of adult social care in particular, to navigate the complex quality system. It identifies the organisations responsible for policy, setting quality standards and guidance, along with key frameworks and initiatives that providers need to know about. The map will evolve over time as new organisations or initiatives are added when appropriate.

IMPACT

CQC’s training academy to develop thematic modules covering personalisation in different service settings remains in its early phase. It has emerged that there is some duplication in requests to SCIE and it now makes sense for TLAP to come together with SCIE due to synergies between the two work plans.

The survey of TLAP partners asked for perceptions on whether person-centred care and support is available in all settings including residential and domiciliary care; and health and housing services. 84% acknowledge some progress with this, and 78% reported that they see TLAP as a positive contributor:

“TLAP has helped CQC to shape thinking about the right questions to consider in inspection -for example is assessing how person-centred services are in practice. The team are a pleasure to work- passionate and committed above the call of duty.”

“TLAP needs to strengthen links with the National Quality Board – more joint work on mutual/overlapping areas of work might be useful.”

Self-Directed Support and Personal Budgets

TLAP runs the National SDS Forum, which presented key priorities for improving delivery of personal budgets to the Ministerial summit on personalisation in September 2013. A number of the group’s members have assisted in the subsequent development of the cross sector action plan which maps current personalisation activity across a number of national partners against key themes identified at the summit.

The work stream also links directly to the ADASS personalisation network. In 2014-15, the work stream continued to measure progress with personal budgets, as well as delivering further materials specifically designed to support implementation of the Care Act.
OUTCOMES FOR 2014-15

- Providing an overall picture of progress with self-directed support and personal budgets, which focuses on people’s experience and outcomes and highlights necessary areas for further policy development and practice improvement.
- Support to the ADASS personalisation network to share learning.
- Supporting Care Act implementation so that councils better understand and are well equipped to meet duties in the Act (following on from the work TLAP Chaired on behalf of the Department of Health on personal care and support planning, personal budgets and direct payments).

DELIVERABLES FOR 2014-15

- Charting progress with personal budgets and identifying areas for improvement through the annual National Personal Budgets Survey.
- Working with the Towards Excellence in Adult Social Care Programme to target support for local PB improvement through Sector Led Improvement.
- Supporting the Children’s Personalisation Network.
- Updating the minimum process framework for SDS and personal budgets as an interactive resource developed with councils.
- Developing best practice guidance and materials to support councils with care and support planning and review duties.
- Practical recommendations and guidance on extending the use of ISFs for managed personal budgets (this work held over to Summer 2015 as part of the 15-16 work programme).

PRODUCTS

- Third National Personal Budget Survey – report of 4000 Adult social care personal budget holders and carers from Lancaster University and InControl.
- 2nd National Personal Health Budgets survey – report of 200 personal health budget holders and carers from Lancaster University and InControl.
- Personal Budgets Minimum Process Framework – An interactive tool for local authorities and partners to deliver Care Act compliant lean social care systems and processes for delivering personal budgets.
- Getting Better Outcomes for Older People Using Personal Budgets – Report on what does and doesn’t work well for older people using personal budgets.
Delivering Care and Support Planning – This report offers councils practical examples for delivering Care and Support plans that are both Care Act compliant and person-centred in their approach.

IMPACT

Looking overall at social care-related quality of life, the England score from a composite indicator based on reported outcomes for people who receive services shows an increase of 0.2%. In the Towards Excellence in Adult Social Care (TEASC) report for 2013-14, the response to this from sector representatives is that it “demonstrates the success of the personalisation approach”….and states that “Even in the context of extreme financial constraint, the core elements of a personalised approach continue to deliver improved quality of life”.

The adult social care survey continues to show that fewer people who use self-directed support report “feeling safe” than those who do not have self-directed support.

Overall, the percentage of people receiving services who have some form of self-directed support (SDS) increased to 61.9% in 2013-14 from 56.2% in 2012-13 – an increase of 5.7 percentage points. Amongst the Making it Real group of councils, those at the “Action Plan” stage had a much higher proportion (74%) of people with SDS. Most board members and partners responding to the survey believe that TLAP has made a contribution to this progress.

Overall, the percentage of people who use direct payments also increased from 16.8% to 19.1%. Amongst the Making it Real group of councils, those “Action Plan” stage had a much higher proportion (30%) of people using direct payments. Most board members and partners responding to the survey believe that TLAP has made a contribution to this progress.

Overall for England, the level of satisfaction of people who use services with their care and support improved by 0.7% on the previous year. Councils that have joined up to Making It Real mostly demonstrated a higher satisfaction level with services and support than those who have not signed up.

In the key points above and below, it should be remembered that the overall number of people who have council funded support or care has continued to reduce: in 2013-14 it had reduced by 29% from 2008-09). The statistics refer to percentages of people who do receive services: so the indicators cannot reflect the experience of people who are not now eligible to receive them.
Considerably fewer people who have self-directed support spend their time doing the things they enjoy, compared to those who do not have self-directed support: but this level is showing a larger increase between 2011-12 and 2012-13.

In the survey of TLAP partners, perceptions were checked on whether all people eligible for social care funding have a personal budget. 82% agreed that progress has been made, but of these, only two thought this was strong progress. 71% acknowledged progress due to TLAP.

While more people have a direct payment, 72% of TLAP partners surveyed agree there has been some or strong progress with the number of people receiving a direct payment. Only 35% agree that TLAP has made a contribution.

People are using personal health budgets beyond continuing healthcare funding. 63% of TLAP partners surveyed agree there has been some or strong progress with the number of people using personal health budgets beyond continuing health care funding, with 47% agreeing that TLAP has made a contribution.

Only 56% agree that some progress to streamline systems and processes in ways that empower people to take control has been made though 44% thought not. Only 56% recognise that TLAP’s efforts with this have made a contribution to progress.

It is a common perception that TLAP is focused on personal budgets, and this may need to be re-thought and there is a need to focus more on the delivery of genuine personalisation in mainstream services such as home care and residential.

The ADASS survey completion rate by councils in England, and reports were used by ADASS to develop regional and local improvement plans.

The NPBS remains the sole outcome based monitoring took available and uptake now covers a third of councils in England.

Market Development and Workforce

The TLAP National Market Development Forum (NMDF) together with leaders from across the health and care sector on the commissioning and provider side, alongside people with care and support needs, carers and family members, come together to address issues of shared concern in developing diverse markets of personalised care and support.
The Forum has produced practical materials, including early work to shape the model of market facilitation and the development of Market Position Statements, and the encouragement of better commissioning and market relations. A subset of the NMDF is currently acting as a steering group for the development of statutory guidance and associated work to develop commissioning standards.

OUTCOMES FOR 2014-15

- Councils better understand and are well equipped to meet new duties in the forthcoming Act.
- Improved evidence base and capacity for excellence in commissioning for outcomes, aligned with personalisation, to be utilised in peer reviews through sector led improvement.

DELIVERABLES FOR 2014-15

- Coordination and co-production of the ADASS/LGA/TLAP Commissioning for better outcomes project designed to support local authorities improve their commissioning practice in line with new duties under the Care Act.
- Conclusion and publication of Market Dynamics and Workforce Metrics research with Skills for Care, exploring patterns in retention, price and quality in homecare.
- Continuation of work underway with the Winterbourne View Joint Improvement Programme to model and demonstrate a personalised response to the Winterbourne challenge.
- Citizen led commissioning – this work was held over for publishing until Summer 2015 and produced as Co-production in Commissioning.
- The reality of choice – research and practice review to explore the reality of choice for people with personal budgets and direct payments and self-funders and the diversity of local markets, to include recommendations for improvement. This work was held over for publishing until Summer 2015 and produced as Top Tips for Commissioning Market Diversity.

PRODUCTS

- Commissioning for Better Outcomes – A Route Map – provides a framework for councils to self-assess their progress and identify areas for further improvement, and is relevant to all aspects of commissioning, service design and decommissioning.
Impact of Market Dynamics on Workforce Metrics in Homecare – an investigation amongst homecare providers of the impact of contract arrangements on workforce measures like staff turnover and pay rates.

People not Process: co-production in commissioning – online tool to help councils use co-production in their market shaping and commissioning practice according to Care Act guidance.

Top Tips: Commissioning for market diversity – advice on developing a care and support market that reflects the diversity of their local population and offers choice to all.

IMPACT

A grant has been secured from NHS England to support work on the use of personal health budgets in transition to prevent ATU placements and support the development of community based options for young people with complex needs. The MOU for the grant includes assurance that the funding can straddle the financial years to enable effective delivery and this work will continue into 2015/16.

The survey of TLAP partners asked if people, carers and families are actively involved in shaping local services. 79% agree that there has been progress in actively involving people, carers and families in shaping local services and 72% acknowledge TLAP’s contribution to this.

It also asked if a wider range of flexible care and support services are available from a variety of providers. 74% agree that the range of services has widened, with only 33% agreeing that TLAP has made a contribution to this.

The survey also checked perceptions of whether staff across the sector are equipped with the skills to play their part in the shift to personalisation. No-one thought there had been strong progress across the sector, and 11% disagree there had been progress at all. 65% consider that TLAP has made a contribution to progress.

The TLAP partners surveyed said they valued bringing together commissioners, service providers with people who use services and carers to “bring out the relevant expertise” of all parties and that TLAP’s work has brought self-funders more into the debate about personalisation – they have not always been fully recognised.

Partners also said that widening the reach of co-production in a way that has helpfully balanced the formerly dominant role of commissioners with wider discussion amongst all the stakeholders was a key achievement but that TLAP needs to “Speak plainly to Government about the impact of budget cuts, their impact on the market, and the sustainability of support and services, regardless of the funding relationship with the Department of Health.”
APPENDIX 4: TLAP IN NUMBERS 2014-2015

3,556
Hours volunteered by partners for TLAP including National Co-production Advisory Group members

5,201
Twitter users – double from last year

363,749
TLAP website page views

42,808
TLAP products downloaded based on top ten

19,192
Subscribers to the e-newsletter

*Based on attendance at 10 board meetings, 2 Partnership meetings, TLAP national conference, steering group meetings, forums, regional workshops for 7 policy areas)

Web traffic to TLAP’s Care Act web pages 2014-2015

15,504 Sessions
88% of overall sessions to the website

10,088 Users
88% of users to the website

69,877 Page views
85% of page views

Average session duration: 5 min 33 sec
Compared to 3 min, 6 sec for the rest of the website
Appendix 5: List of all products published in 2014-15

My life, my support, my choice: a narrative for person centred coordinated care and support for children and young people with complex lives – report sets out how good, coordinated – or integrated- support looks to children and young people with complex lives up to the age of 25.

No Assumptions: a Narrative for Personalised, Coordinated Care and Support in Mental Health – guide highlights the key factors that are particular to managing mental health and wellbeing from the perspective of people who use mental health services.

Information and advice strategy tool (web based resource to assist councils with implementing new duties in the Care Act).

An electronic version of the Jargon Buster was published in June 2014, off the back of its award from the Plain English Campaign in 2013. 15 new tested definitions are now being added each month. By end of March 2014, the resource now holds more than 200 words.

Developing the power of strong and inclusive communities (framework for building community capacity developed with Public Health England) was published at the National Children’s and Adults Services Conference in October 2014.

Online compendium of resources for Integrated Personal Commissioning sites.

Personal budgets in mental health – A briefing aimed at clinical commissioning groups expanding the use of personal budgets to people with mental health conditions, as part of the NHS mandate.

Getting the sums right – How to sustainably finance personal health budgets – case studies showing how to implement personal health budgets.

Joining up health and social care personal budgets – relevant to commissioners and providers at different stages of implementation.

A wealth of information: Your questions on personal health budgets answered – briefing on practical information for commissioners and providers of NHS-funded care, as they introduce personal health budgets.
Getting serious about personalisation in the NHS – guide to complement the Prospectus for the Integrated Personal Commissioning (IPC) Programme.

Duty of Candour – a report following the Quality Forum’s engagement with sector representatives on the Duty of Candour, with a particular focus on the harm threshold.

Quality Map – this simple map is designed to help providers of adult social care in particular, to navigate the complex quality system. It identifies the organisations responsible for policy, setting quality standards and guidance, along with key frameworks and initiatives that providers need to know about. The map will evolve over time as new organisations or initiatives are added when appropriate.

Third National Personal Budget Survey – report of 4000 Adult social care personal budget holders and carers from Lancaster University and InControl.

2nd National Personal Health Budgets survey – report of 200 personal health budget holders and carers from Lancaster University and InControl.

Personal Budgets Minimum Process Framework – an interactive tool for local authorities and partners to deliver Care Act compliant lean social care systems and processes for delivering personal budgets.

Getting Better Outcomes for Older People Using Personal Budgets – report on what does and doesn’t work well for older people using personal budgets.

Delivering Care and Support Planning – this report offers councils practical examples for delivering Care and Support plans that are both Care Act compliant and person-centred in their approach.

People not Process: co-production in commissioning – online tool to help councils use co-production in their market shaping and commissioning practice according to Care Act guidance.

Top Tips: Commissioning for market diversity – advice on developing a care and support market that reflects the diversity of their local population and offers choice to all.
Commissioning for Better Outcomes – A Route Map – provides a framework for councils to self-assess their progress and identify areas for further improvement, and is relevant to all aspects of commissioning, service design and decommissioning.

Impact of Market Dynamics on Workforce Metrics in Homecare – an investigation amongst homecare providers of the impact of contract arrangements on workforce measures like staff turnover and pay rates.

Further reading

TLAP Evaluation Survey 2014-15
TLAP report from Care Performance Partners
Appendix 6: TLAP work programme for 2015-16

This plan sets out the shape and content of TLAP’s activity in 2015-16. It may be subject to further iteration through engagement with the TLAP Programme Board, funders and the wider Partnership.

The TLAP Board agreed principles to underpin “how” TLAP should work in 2015-16 in October which are reflected in this document:

- Active dissemination and engagement: TLAP has produced a significant quantity of products and materials to support the successful implementation of personalisation since 2010 adding to a growing body of best practice evidence for “what works.” Rather than focusing primarily on producing further products in 2015-16, programme activity will shift to actively disseminating our existing materials and providing opportunities for people to engage with them and network with one another.

- Supporting change locally: TLAP has delivered a number of projects recently that have entailed supporting and/or charting change within local areas and sharing this learning, e.g. intensive work with six councils on information and advice in 2014-15. TLAP will strengthen this way of working to focus greater attention on projects that deliver real change on the ground in 2015-16.

- Breaking new ground: TLAP has organised its programme around 7 work stream areas in 2014-15. While some of these will remain relevant, TLAP will target underdeveloped areas in the 2015-16 work programme and will cease doing some things altogether where the strategic fit with the new TLAP Partnership Agreement is not as clear.

- In addition, TLAP will maintain a non-commercial delivery model.

The programme outlined below includes:

- The continuation of some core elements of TLAP business (e.g. Making it Real and the National Personal Budgets Survey).
■ The continuation of some projects that began in 2014-15 that will continue (e.g. our NHSE funded work on PHBs for children and young people with complex needs).

■ Suggested work linked to implementation of Care Act building on materials produced in 2014-15.

■ Suggested new work areas responding to developments in 2014-15 and looking ahead (e.g. Integrated Personal Commissioning).

Think Local Act Personal Programme Structure 2015-16

<table>
<thead>
<tr>
<th>Priorities</th>
<th>Choice and Control</th>
<th>Building community capacity and prevention</th>
<th>Integrated Personal Commissioning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work streams</td>
<td>Info &amp; Advice</td>
<td>Self-Directed Support</td>
<td>Shaping the market/workforce</td>
</tr>
<tr>
<td>Projects:</td>
<td>Projects:</td>
<td>Projects:</td>
<td>Projects:</td>
</tr>
<tr>
<td>Projects:</td>
<td>Projects:</td>
<td>Projects:</td>
<td>Projects:</td>
</tr>
</tbody>
</table>

Enablers

- Co-production
- Making it Real
- Regional programmes

Think Local Act Personal Annual Report 2014-15
Information, advice and brokerage

TLAP worked closely with DH and other stakeholders to develop tools and resources to support councils with new duties outlined in the Care Act around information and advice in 2014-15. The work stream will shift the focus towards regional dissemination and engagement, building further through this on existing tools and resources which are well used.

OUTCOMES

- Councils understand and are better equipped to deliver new duties around information and advice.
- A more consistent, common language and understanding of health and social care terminology to assist professionals and the public to navigate the system.

ACTIVITY

- Regional dissemination and engagement events to share tools and resources and shape a more immersive regional offer.
- Regional action learning sets to support areas further develop their information and advice strategies and learn from one another.
- Working directly with several areas to support the development of exemplar information and advice strategies and plans.
- Commissioning further case study materials of what is being tried and learned in different areas to further populate the strategy tool.
- Further expanding and developing the web based Jargon Buster.
- Develop a short film of people who use services and carers talking about why the changes outlined in the Care Act including those relating to information and advice are important.
- Using co-production to influencing the design of websites and digital information channels.

BUDGET

£50,000
Self-directed support and personal budgets

TLAP has developed tools and resources to support improvements in the implementation of personal budgets and personalised care planning. The work stream will continue to measure progress with personal budgets, as well as delivering further materials specifically designed to support implementation of the Care Act.

OUTCOMES

- Providing an overall picture of progress with SDS and personal budgets, which focuses on people’s experience and outcomes and highlights necessary areas for further policy development and practice improvement.
- Support to the ADASS personalisation network to share learning.
- Supporting Care Act implementation so that councils better understand and are well equipped to meet duties in the Act (following on from the work TLAP Chaired on behalf of the DH on personal care and support planning, personal budgets and direct payments).

ACTIVITY

- Charting progress with PBs and identifying areas for improvement through the annual National Personal Budgets Survey.
- Supporting further development of the POET tool – broadening out scope beyond personal budgets to measure personalisation outcomes.
- Regional dissemination and engagement events to share tools and resources produced in 2014-15, including personalised care planning and ISF guidance.
- Supporting professional bodies to develop guidance and training materials for social workers on asset based approaches in line with the Care Act.
- Supporting the Children’s Personalisation Network (work programme tbc).
- Further development of SDS Minimum Process Framework through the identification of good practice case studies.
- Personalisation in mental health project (narrative of progress, barriers, next steps to inform TLAP and partners work).

BUDGET

£70,000
Market Development and Workforce

The TLAP National Market Development Forum (NMDF) brings together leaders from across the health and care sector on the commissioning and provider side, alongside people with care and support needs, carers and family members, to address issues of shared concern in developing diverse markets of personalised care and support. The Forum has produced practical materials to support implementation of the Care Act in 2014-15. The work will shift focus towards regional and local engagement around these in 2015-16.

OUTCOMES

■ Councils better understand and are well equipped to meet new duties in the forthcoming Act.
■ Improved evidence base and capacity for excellence in commissioning for outcomes.
■ Providers better understand and are well equipped to prepare for the changes brought about by the Care Act.
■ Providing a sounding board for national partners to support their engagement with important quality initiatives as they develop.

ACTIVITY

■ Programme of support to areas developing community based options for children and young people with complex needs, including the provision of personal health budgets.
■ Regional dissemination and engagement events to share tools and resources developed in 2014-15 – on co-production in commissioning and commissioning for market diversity and choice.
■ Work with Partners to develop an offer for providers around personalisation and the Care Act.
■ Design, organise and facilitate 3 meetings of the NMDF in 2015/16.
■ To design, organise and facilitate 3 meetings of the Quality Forum in 2015/16.
■ To contribute to the development of a new Quality Hub by providing expertise on personalisation.
■ Supporting and coproducing training for CQC’s inspectors on what good personalised care and support looks like in different settings.

BUDGET

£65,000
Building Community Capacity

TLAP’s work on building community capacity has focused on demonstrating how social capital can be grown and sustained in co-production between public agencies and communities to promote the inclusion and contribution of older and disabled people. In 2014-15, TLAP published a framework for Health and Wellbeing Boards to lead this work locally in partnership with PHE and following work with 7 areas. In 2015-16 activity will shift significantly towards regional dissemination of existing materials and continued work on site with local areas who are implementing the framework.

OUTCOMES

- Growing evidence base for effectiveness (including cost effectiveness) of community capacity building initiatives in furthering prevention and reducing demand.
- Health and Wellbeing Boards better equipped to lead on community capacity building in their areas.
- Leaders trained alongside people with care and support needs, carers and family members (with NCAG involvement).

ACTIVITY

- Maintenance and support to a national network of Building Community Capacity “practitioners”.
- National leaders event bringing together system leading organisations to map messaging and activity around community capacity building – a short strategic briefing to bring national coherence and identifying further areas for joined up action.
- Regional dissemination and engagement events of Health and Wellbeing Board framework with PHE, LGA etc.
- Regional thematic action learning sets to support areas to make progress with community capacity building and to learn from one another.
- Working directly with HWBB’s to strengthen their approach to community capacity building, document what they try and learn and expand the tools and resources available to support implementation of the Wellbeing Duty.
- Support co-production of the Leadership for Empowered and Healthy Communities Programme.

BUDGET

£45,000
Integrated Personal Commissioning

TLAP has been working with NHSE to support the integration of personal budgets and personal health budgets and the wider rollout of PHBs beyond NHS CHC. In 2015-16 TLAP is a key delivery partner to NHSE for the Integrated Personal Commissioning Programme.

OUTCOMES

- Further advancing personal health budgets in the NHS, beyond Continuing Health Care.
- Areas are better able to integrate their personal care and support planning and personal budgets processes across health and care.
- Better health and wellbeing outcomes for those cohorts of people with complex needs identified as the focus of the IPC programme.
- A greater understanding across the system of new models of care implemented under IPC.

ACTIVITY

- Development of pathways and guidance for integrated personalised care planning and personal budgets for older people with long term conditions and people with severe and enduring mental health problems.
- Support to IPC Demonstrator sites to document and share their learning from implementing the IPC model of care, both amongst themselves and with the wider sector.
- Linking TLAP Partners into the IPC Programme – matching requests for support to tools, resources and offers, building awareness and supporting and brokering their involvement as needed.

BUDGET

£70,000
Making It Real

Making it Real (MiR) supports a practical approach to the commissioning and delivery of personalised care and support through co-production. The programme provides an enabling framework for people and organisations to take responsibility for change and to publically share progress made. C.800 organisations have “signed up” to MiR, including 96 councils, providers and an increasing number of NHS organisations. TLAP has produced specific versions of MiR for dementia, carers and mental health.

OUTCOMES

- Creating a common language about “what good looks like” in delivering personalised care and support across all sectors.
- Embedding Making it Real as a tool to stimulate co-production and improve outcomes within many more organisations.
- Building stronger traction and engagement with groups of people not currently well served by personalisation (including people with complex needs and mental health).

PROPOSED ACTIVITY

- Supporting further signup and engagement with MiR across the sector through regional programmes.
- Commissioning further case study materials to demonstrate how people have used MiR and the difference this has made.
- Working directly with several health and care economies that are signing up to MiR together to support, document and share the learning.
- Developing a business case demonstrating the value of sign up to MiR.
- Reviewing and updating the current MiR process based on learning to date.

BUDGET

40,000
Think Local Act Personal

Think Local Act Personal (TLAP) is a national strategic partnership of more than 50 organisations committed to supporting the continued implementation of personalisation and community-based health, care and support.

web: www.thinklocalactpersonal.org.uk
email: thinklocalactpersonal@scie.org.uk
twitter: @tlap1