

**Critical**

**Path**

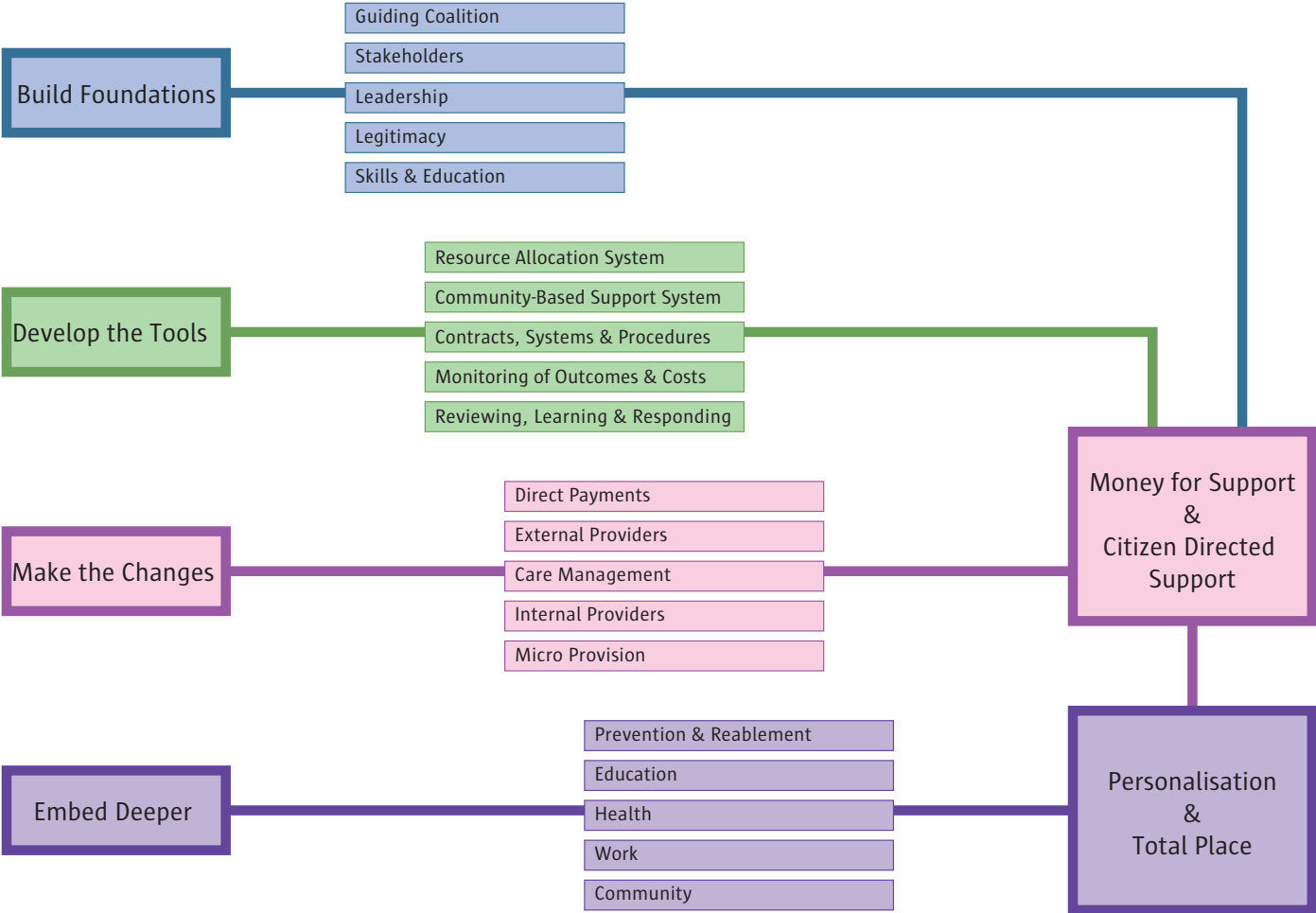
**Framework**

**Produced  
to support the  
development of  
Citizen Directed  
Support in Wales**





The Critical Path Framework diagram opposite is the latest version of this Framework by Simon Duffy, Head of Centre for Welfare Reform



# Development of the Critical Path Framework

This Critical Path Framework has been produced in consultation with the Welsh Local Authorities that are involved in the development of Citizen Directed Support in Wales. Particular detailed input was provided by Elaine McGuire, Wrexham County Borough Council.

These Welsh Local Authorities have also taken part in Masterclass sessions with Simon Duffy, Head of the Centre for Welfare Reform. The questions that the officers from the Welsh Local Authorities raised during the sessions have contributed to the ongoing development of this framework. Simon Duffy's latest version of the Critical Path Framework has been changed in the light of this work in Wales and is being used in this document as an outline for the Framework.

At the start of this process, we referred to in Control's Tri Score and Critical Path documents. Development of the Framework was facilitated by Don Derrett, **self direct**, on behalf of the Wales Alliance for Citizen Directed Support; supported by Social Services Improvement Agency.

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It is not essential that each step of the Critical Path Framework is followed by the next step in the order presented in this document. When putting an implementation plan together it is important to use the steps in a way that makes sense to your Local Authority Area. However, the first step of developing a partnership for the vision by creating a guiding coalition is critical to the success of implementing the change programme.

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## Build Foundations

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  2. Map of Stakeholders
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Each of the 20 Critical Path Framework steps below has suggested Actions, Examples and Questions that Local Authorities in Wales have asked in order to support their own learning and the development of Citizen Directed Support in Wales. Questions are aimed at Local Authorities already implementing the changes; please answer those you can or say what you aim to do in the future.

# Build Foundations

## 1 Guiding coalition

**Action:** Create guiding coalition: that understands the culture change needed in order to change the systems

### Example

#### Internal – L.A. senior decision makers

Social Services Head  
Contracts  
Commissioning  
Solicitor  
Finance  
Auditor  
Head of Service  
Project Manager  
Supporting People Manager  
Lead elected officer for Health & Social Care

#### External

Consultant/Advisor  
Social Services Improvement Agency representative  
Health, Clinical Manager responsible for decisions on joint funded packages

**Q1.** Was this your first step? Did you have a different set of decision makers?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

# Build Foundations

## 2 Map of Stakeholders

**Action:** Mapping of Stakeholders

### Example

#### Internal

Housing  
Education  
Leisure  
Legal/finance/audit  
Benefits/Welfare Rights maximisation  
Social Care practitioners  
In-house providers  
Local Council scrutiny committees/  
executive

#### External

Housing Associations  
Community organisations  
Independent Living Fund (ILF)  
Families/carers  
Advocacy  
Providers  
Health  
SSIA

**Q1.** What level of engagement existed before and after?

**Q2.** Was there some mapping of existing provision?

**Q3.** Was there some mapping of existing culture and skills re: Person Centred approaches and Planning Mechanisms?

**Q4.** Are there other stakeholders that you included?

**Q5.** How did you engage with stakeholders?

**Q6.** Did you analyse stakeholder's "interest"/"power" mix? If so, did you use this to influence / involve "vital" for success stakeholders?

**Q7.** Did you set up a reference group of stakeholders and if so how involved were they in all aspects of the change process?

**What worked/what didn't? What have you learnt? What would you have done differently?**



# Notes / Solutions

Q1.

Q2.

Q3.

Q4.

Q5.

Q6.

Q7.

# Build Foundations

## 3 Leadership

**Action:** Identifying people who “get the vision” and are able to enlist others

**People who are committed to:**

- Taking a risk
- Sticking with it
- Keeping the end in mind
- Shifting the power from services to people at whatever level, internal and external, ie. citizen leaders, but one essential aim is to enlist commitment at senior officer level

**Q1.** Did you adapt or create any roles within existing resources?

**Q2.** Who is leading the change programme and what position do they hold? Has this changed over time?

**Q3.** Did you have some external assistance to provide, advise and/or support for the leader/leaders, ie. consultant?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

# Build Foundations

## 4 Legitimacy

**Action:** Getting sign up at senior elected member level

### Examples

- Use real life examples to win hearts and minds
- Explain the economic case and demographic case

**Action:** Getting sign up internally

### Examples

- Presentations to stakeholders, ie. team meetings, strategic meetings
- One-to-one lobbying

**Action:** Getting sign up across the community

### Examples

- Open days, communicating real life examples
- Engage local media via internal communication/press office

**Q1** What communications strategy did you use?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

# Build Foundations

## 5 Skills and Education

**Action:** Identify present strengths across teams, gaps in skills, new skills that need to be developed and plan workforce development

### Examples

- Changing role of commissioning/market shaping/links with brokerage
- Person Centred Planning / support planning training
- Revive Social Work skills/develop these, recognising potential for preventative work
- Develop skills to support the completion of new assessment forms, recognising what needs to be in a support plan
- Enable/re-enablement; maximising independence and not over supporting people, avoiding dependency
- Developing a “Learning Community” approach that recognises the nature of the change programme over a number of years
- Offer Partners in Policy Making training for families and for people that use services

**Q1.** What particular skills did you need to be developed in your team / teams?

**Q2.** What took a long time to learn/undo?

**Q3.** Did you offer training for families and people that use services

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

# Resource Allocation System

## 6

## Resource Allocation System

**Action:** Develop a system for allocating resources

### Examples

- Develop the RAS and change as necessary/learn from early implementation
- Financial monitoring of budget
- Financial monitoring of in-house service viability
- \* Modelling of future spend/savings/re-allocation
- Recognising the need to respond to demand which may result in less control of the budget initially

**Q1** Which RAS model did you use? How do you fit other funding streams into this?

**Q2.** Have you changed this? If so, why and how?

**Q3.** Have you accounted for new people coming into the system and if so, where does ILF fit, particularly if Social Care funding reduces?

**Q4.** What did you do?

**Q5.** How do you treat high cost complex needs, ie. outside RAS?

**Q6.** What different assessment forms have you used and how are people using them, i.e. with or without support from L.A. social work team?

**Q7.** If you haven't used a RAS model, what have you used instead?

**Q8.** Has the development of a new way of allocating resources freed up

resources and if so what have you used these for, i.e. prevention / early intervention?

**Q9.** What other forms of allocating funds have you used, i.e. Small Sparks?

**What worked/what didn't? What have you learnt? What would you have done differently?**



# Notes / Solutions

Q1.

Q2.

Q3.

Q4.

Q5.

Q6.

Q7.

Q8.

Q9.

# Resource Allocation System

## 7 Community - based support system

**Action:** Remodel support systems, redeploy staff

### Examples

- Backroom direct payments support system adapted / increased staff time
- Client contribution deduction at source
- Less staff time involved with the charging policy process

**Q1.** How easily did you find it to adapt your existing direct payments support systems?

**Q2.** Have you continued to deduct charges after money is allocated or do you allocate money net of charging, how have you managed this?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

# Resource Allocation System

## 8

## Contracts, Systems and Procedures

**Action:** Develop new policies and procedures; identify what needs to change in existing policies and procedures

### Examples

- Guidance and flow chart for practitioners
- Panel process changed
- Risk Enablement developed
- Financial processes, agreement forms for individuals
- Vetting agency, run by the L.A. to check out people who want to work with people who have Money for Support, i.e. Direct Payments (or in England Individual / Personal Budgets); includes C.R.B.s, references and checking training record

**Q1.** How have you managed to run two systems alongside each other?

**Q2.** Do you have a system that offers support with safe recruitment, i.e. a vetting agency?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

# Resource Allocation System

## 9

## Monitoring of Outcomes and Costs

**Action:** Develop the systems that can capture information to monitor outcomes and costs

### Examples

- Developing the tools to capture the support plan outcomes (achieved or not) and costs (used or not) and what the money has been spent on
- Develop monitoring systems that captures information about individuals
- Develop monitoring systems that captures information about the departments performance
  - 1) Qualitative – ie. how easy was the process for people?
  - 2) Quantitative – ie. how many people have received Money for Support (in England; Personal / Individual Budgets) over what period of time?

**Q1.** Where you able to adapt existing systems or did you have to develop or buy new systems to do this?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

# Resource Allocation System

## 10 Reviewing, Learning and Responding

**Action:** Put in place a system for effectively reviewing information gained, assessing the learning and sharing this

### Examples

- Capturing information to inform market develop
- Capturing information to adapt/modify existing systems

**Q1.** What tools have you used for this?

**Q2.** Are you able to monitor if people are achieving their outcomes, if so what results are you able to share?

**Q3.** What evaluation tool are you using? Is this “off the shelf” or have you developed this yourself?

**Q4** Have you participated in an independent evaluation; if so, with whom?

**Q5.** If you have taken part in an independent evaluation, how much did it cost, either in time or money or both?

**What worked/what didn't? What have you learnt? What would you have done differently?**



# Notes / Solutions

Q1.

Q2.

Q3.

Q4.

Q5.

# Make the changes

## 11

## Direct Payments

**Action:** Review the implementation of Direct Payments and assess any changes that need to be made

### Examples

- Review / change the role of the Direct Payments Team

**Q1.** Has Direct Payments become part of the process or is it a separate activity within the L.A.?

**Q2.** What was your Direct Payments percentage uptake before introducing Citizen Directed Support (in England; Self-Directed Support)?

**Q3.** How many people are taking Money for Support (in England; Personal / Individual Budgets) directly, with support if required, and how many are leaving it to be care managed?

**Q4.** How big a change did you have to make to the local interpretation of the Direct Payments guidance, i.e. have you slimmed down your local policy / procedure guidance?

**Q5.** How flexibly were people able to use Direct Payments before and how flexibly can people use them now?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

Q4.

Q5.

# Make the changes

## 12 External Providers

**Action:** Start to shape and change the external market-place

### Examples

- Review the commissioning role and process
- Communicate early in the change process with external providers
- Provide joint training for providers
- Encouraging imaginative thinking around support planning and provision
- Support providers to understand how they need to adapt their businesses
- Introduce different contracting arrangements/changes to service level agreements
- Develop brokerage as a function and also identify the need for independent brokerage services
- Identify champions

**Q1.** How soon did you engage local providers and how did you do it?

**Q2.** Were some providers resistant and what has happened to them? – have they changed and if so, at what point and how did it happen?

**Q3.** If you have got rid of block contracts, how did you do it and have you gone through a decommissioning process?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

# Make the changes

## 13

## Care Management

**Action:** Review the role of the care management team and identify changes that are needed

### Examples

- Letting go of the “gate keeping” role, i.e. streamlining administrative tasks
- Key role now becomes checking and signing off the assessment questionnaire / checking and signing off the support plan / reviewing
- Involvement of the care management team in changing the processes and documentation
- Shift in power from the practitioner to the person

**Q1.** How resistant were the Care Management Team (on a scale of 1-10, 10 is high)?

**Q2.** If resistant, what were you able to do to bring them on board?

**Q3.** If there was resistance, what was it about and is there still resistance – how much has that reduced (on a scale of 1-10, 10 is high)?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

# Make the changes

## 14

## Internal Providers

**Action:** Review the in house provision of services and identify any changes that need to take place

### Examples

- Explore how in house services can become more flexible
- Training/communication with direct staff
- Information about how it can work for in house services, i.e. people continue to choose good services
- Giving space to share concerns in a safe way
- Terms and Conditions review
- Identify real cost of services, including overheads

**Q1.** How have your in-house services changed?

**Q2.** Are more or less people using in-house services?

**Q3.** Have any in-house services closed or are there plans to close any?

**What worked/what didn't? What have you learnt? What would you have done differently?**



# Notes / Solutions

Q1.

Q2.

Q3.

# Make the changes

## 15 Micro Provision

**Action:** Identify existing micro providers (employing less than 5 Personal Assistants) and identify the support they need, develop the support needed and support / encourage the development of new micro providers

### Examples

- Provide support to develop micro providers

**Q1.** Do micro providers have to register?

**Q2.** How are they monitored?

**Q3.** What sort of support does the L.A. provide?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

# Embed deeper

## 16 Prevention and Reablement

**Action:** Review existing support, systems and processes to for early intervention, prevention and reablement and make changes to expand and embed these widely

### Examples

- Every support plan contains a section on enablement
- Telecare
- Befriending
- Transport training
- Peer support groups / community organisations

**Q1.** How have your in-house services changed?

**Q2.** Are more or less people using in-house services?

**Q3.** Have any in-house services closed or are there plans to close any?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

# Embed deeper

## 17 Education

**Action:** Review the experience of the person coming into contact with the system, is it a joined up process that looks holistically at the support someone needs

### Examples

- Getting the right balance between natural/unpaid support and paid support
- Relationship of carers to the support package
- Keeping support plans “live” so that people can change things quickly and flexibly as long as their outcomes are met
- Ensuring there is a joined up approach between social care and health provision

**Q1.** Has there been some expectation that natural/unpaid support will develop and has this played any part in your accounting of this in future budgets?

**Q2.** How are carers viewed in terms of the RAS and have you developed a separate carer’s RAS, ie. if there is natural support, is there a reduction made?

**Q3.** How do you ensure someone’s experience of moving between social care support and health care support is as ‘seamless’ as possible?

**What worked/what didn’t? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

# Embed deeper

## 18 Health

**Action:** Review existing support, systems and processes to for early intervention, prevention and reablement and make changes to expand and embed these widely

### Examples

- Get colleagues in Health on board early
- Joint funding, money passed to L.A. to pass onto individual as Money for Support (in England; a Personal / Individual Budget), provided health needs are met within the package and the health portion of the Money for Support (in England; Personal / Individual Budget) is only spent on support needs

**Q1.** Where people have become eligible for Continuing Health Care funding and governance moves to the N.H.S., how have you dealt with it?

**Q2.** If the above has not happened yet in your L.A. area, what are your plans to deal with it?

**What worked/what didn't? What have you learnt? What would you have done differently?**



# Notes / Solutions

Q1.

Q2.

# Embed deeper

## 19 Work

**Action:** Be proactive in supporting people into work opportunities

### Examples

- Work Opportunities service that assists people to access paid or voluntary employment in the community and preparation for work, ie. C.V. writing/ interview skills
- Links with local businesses, ie. Asda's "buddying" system, charity organisations and the L.A., ie. voluntary work in museums and libraries

**Q1.** Have people been able to use Access to Work money as part of someone's Money for Support (in England; an Individual Budget) and if so, how has it worked?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

# Embed deeper

## 20 Community

**Action:** Proactively develop and promote the community support people need

### Examples

- Community Resource List, contact numbers
- Community Bridge Builder
- Community Inclusion Team

**Q1.** How are you supporting voluntary/ community organisations?

**Q2.** How are you shaping your community to ensure that there are meaningful activities available which are cost effective for people to include in their plans?

**Q3.** Do you have a Centre for Independent Living (C.I.L.) and what does it do?

**Q4.** Do you have equivalent community inclusion/building teams – what do they do?

**Q5.** What other methods / systems do you use to make sure people have access to the information and advice they need to identify and access options available in their communities to meet their care and support needs?

**What worked/what didn't? What have you learnt? What would you have done differently?**

# Notes / Solutions

Q1.

Q2.

Q3.

Q4.

Q5.

