

Gloucestershire County Council

Communications Strategy for Putting People First

April 2010

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Contents

<i>Contents</i>	1
<i>1. Context - Setting the scene</i>	2
1.1 What is happening?.....	2
1.2 What does adult social care currently look like?	2
1.3 Current perceptions.....	3
1.4 Why the need for change?	3
1.5 What will adult social care look like in the future?	4
<i>2. Communications role</i>	5
2.1 Scope of the Communications Strategy.....	5
2.2 Communication Objectives.....	6
<i>3. Risks and mitigation</i>	7
<i>4. Key Messages</i>	9
<i>5. Stakeholder engagement</i>	10
5.1 Internal audiences.....	10
5.2 External audiences.....	11
<i>6. Roles and responsibilities</i>	14
<i>7. Interdependencies/Linkages</i>	15
<i>8. Resources</i>	15
<i>9. Appendices</i>	15
<i>10. Approval</i>	16
For Communications Team Use:.....	17
<i>11. Outline of approach</i>	17
<i>12. Evaluation</i>	19
Appendices.....	21
Appendix 1: Self Directed Support – the process	21
Appendix 2: Frequently Asked Questions.....	22
Appendix 3: Action Plan 2010	22

Communications Strategy for:

Directorate:	Community and Adult Care
Service:	Adult Social Care
Policy issue:	Putting People First Programme

1. Context - Setting the scene

1.1 What is happening?

Putting People First (PPF) is a national change programme in the way in which social care for adults is delivered – the largest transformation to social care in over thirty years.

It is made up of four key components:

1. **Universal services:** ensuring that anyone requires care and support can find the services they need in their community
2. **Preventative services:** helping people to maintain their health and well being for longer
3. **Choice and control:** giving people as much control as they want over decisions which affect their care
4. **Building social capital:** recognising that individuals can receive care and support from their friends, families, neighbours and community groups



All local authorities in England will start to implement the changes by 2011, giving people more say in how they live their lives and receive their care. Eventually, everyone who receives adult social care support will be given a personal budget and they will be able to decide how to spend it to help them continue living independently, at home for as long as possible.

Within Gloucestershire, we have been working on developing the PPF programme since 2008 and now have several work streams establishing new policies as well as significant structural and cultural changes. These work streams are working closely with a wide range of stakeholders, from staff to carers, voluntary organisations to users themselves to make sure the changes reflect their needs. This 'co-production' is essential for a successful change programme.

From April 2010, people will start to see some of the changes as the new-look adult social care is gradually introduced to those in need of support, initially older people new to social care.

Through a phased approach, we will start to introduce the new Self Directed Support process amongst people with physical or learning disabilities, mental health problems, carers and existing service users (through their annual review) from October 2010. This second phase of introduction will be supported by a wider social marketing [awareness campaign](#).

1.2 What does adult social care currently look like?

Our aim is to support older people and those adults with disabilities and mental health issues to be active, stay healthy and live independently for as long as they can.

Whilst the focus will always be universal access to high quality support, the current adult social care system tends to be paternalistic and reactive: Assessing people's needs; assessing their financial situation; and then offering prescriptive services which are available to them. These

services tend to be traditional council, health-provided or commissioned services such as day care centres, domiciliary care or meals on wheels, for example.

Since 2002, many Gloucestershire residents and carers eligible for support have received 'Direct Payments' – these are cash payments in place of a regular social service to spend on services. This existing system should slot relatively easily into the future 'personal budgets', although the allocation of resources as well as the more 'personalised' or individual approach to creating a care and support plan will ensure that people, not services, are at the centre.

1.3 Current perceptions

Service Users and Carers

- Recent research has shown that there is a surprising lack of understanding about "who 'social services' are". Where people already receive a service, they may not link it to social services.
- They are often unsure where to go to for help – there is a lack of information or 'one stop shop' for help with signposting.
- In some circumstances, people are using traditional services in lieu of any alternative.
- Whilst they might not like the thought of change, when taken step by step through the opportunities and benefits (including examples of how to develop a personal care and support plan), they generally buy in to the changes.
- Carers are particularly reticent to take risks in changes to care provision, wanting reassurance about protection and safety.

Staff

- Many already buy-into the strategic thinking behind Putting People First, but don't yet understand the detailed impact on workload of their staff, or the steps on how to implement it. Other staff feel that they are already offering a personal approach to care and are 'person friendly'.
- With public sector finances in the headlines and the ongoing 'Building our Future' programme delivering efficiency savings across the council, there is inevitably concern from staff about resources.
- Fieldwork staff are already under pressure to fulfill performance targets and will be very worried about the impacts of the change (both BOF and PPF) on their jobs, on their workload and on the individuals that they support.
- Fieldwork staff will be concerned about the scope of their responsibilities, especially as they are handing more 'control' to service users and carers.

1.4 Why the need for change?

Social care in England has to change. Current models are unsustainable at the rate of demand:
Demographics

1. The number of people living in Gloucestershire aged over 75 is set to increase by 70% by 2025, when approximately 1 in 4 of the county's population will be over 75 years old and potentially in need of support. With people living longer, we are experiencing an increase in more complex needs including dementia and chronic illnesses.
2. The estimated number of people living with learning disabilities in Gloucestershire is set to rise from 10,827 in 2008 to 12,311 in 2025.
3. Change in family structures mean that more people are living alone.

Expectations

1. People want to live in their own homes for as long as possible.
2. Individual's aspirations over choice, control and investment have all increased.

Resources

1. Local government finances as well as social care workers are already under pressure, before the change in demographics increase demand for services.

1.5 What will adult social care look like in the future?

Putting People First will give people more say in how they live their lives and receive they care. Within Gloucestershire, our approach to this national change is to help individuals and carers develop their personal 'circle' of support – whether people, places or services.

“**Your Circle**” will:

- Help people **stay healthy** and **recover quickly** from illness through early intervention and preventative support – enabling them to receive appropriate support before they reach crisis point.
- Help people **retain independence**, to enable them to continue living at home for as long as possible; exercise maximum control over their own life and where appropriate the lives of their family members
- Offer easily accessible **information, advice and support** to everyone through a wide range of channels to suit all residents, not just those that need social care support.
- Offer a personal budget, which gives people more **choice** and **control**. This will ensure that support and care will be more tailored to their individual needs, rather than focusing on the services available to them.
- Offer a **safety net** to ensure that people, particularly the vulnerable, are safe. Care and support plans will be reviewed to make sure that they offer the best support to meet individual needs, offer protection, conform to legal requirements and offer value for money.
- Ensure that health and social care resources are allocated more **fairly** throughout the county.
- Gradually provide **need-led services**, rather than prescribed services. Resources will be put where evidence shows a need. For example, in-house services, such as day care centres, may become less in demand whilst new creative services and products may flourish.
- Enable people to participate as **active and equal citizens**, both economically and socially
- Enable people to have the best possible **quality of life**, irrespective of illness or disability
- Enable people to retain maximum **dignity and respect**.

In summary, the programme will deliver seven national outcomes:

1. Living independently.
2. Stay healthy and recover quickly from illness.
3. Exercise maximum control over lives.
4. Be active and participate equal citizens economically and socially.
5. Sustain family life.
6. Achieve the best possible quality of life.
7. Retain maximum dignity and respect.

2. *Communications role*

2.1 Scope of the Communications Strategy

The Communications Strategy will allow us to exercise better control over how we are approaching the national change to social care within Gloucestershire.

It should weave the interlinking processes and interdependencies to present one clear and comprehensible voice, feeding into all internal and external communications. This in turn will help inform, engage and involve all stakeholders for whom the change in adult social care delivery is relevant.

It will also demonstrate how we evolve from the nationally recognised 'Putting People First' programme, into the Gloucestershire approach through *Your Circle* – helping people build a support network of trusted people, places and services to meet their individual needs.

The communications strategy covers the following GCC strategic priorities:

Supporting communities and vulnerable people

- Promoting independence for all
- Enabling more people to stay in their own homes
- Strengthening communities and enabling people to live safe and satisfying lives
- Encouraging healthy lifestyles
- Developing strong and positive relationships between people from different backgrounds and circumstances.

How we will drive excellence

- Keeping Council Tax down
- Becoming more efficient, so that resources can be spent on the most important things
- Improving the ways that our customers can contact us, and giving them choices in how they access our services
- Using our knowledge of, and engaging with, people and communities to best meet their diverse needs
- Being well run, open, and accountable
- Making real improvements through working in partnership with others
- Enabling our staff to deliver the council's ambitions.

Other objectives we aim to achieve within the strategy include:

- Community Leadership
- Partnership Working
- Accessibility, Fairness and diversity.

Department of Health targets and milestones

The Department of Health (DH) has agreed with the Association of Directors of Adults Social Services (ADASS) and the Local Government Association (LGA) priorities a for the first phase of transformation (by 2011). Milestones relating to communications are:

- That communication has been made to the public, including all people who currently need care and support, and to all local stakeholders about the transformation agenda and its benefits for them
- That the move to personal budgets is well understood and that local people who need care and support are contributing to the development of local practice
- That the public are informed about where they can go to get the best information and advice about their care and support needs.

2.2 Communication Objectives

Communication is crucial to the success of PPF. Our overall aim is to raise and maintain awareness, understanding, involvement and commitment to this programme amongst our stakeholders.

To achieve this we will:

1. Support the **phased roll-out** of the change programme amongst a range of target audiences from April 2010
2. **Raise awareness** of the national change rolling out in Gloucestershire, clarifying why the change is necessary
3. **Inform**, through clear key messages, the implications the changes will have in Gloucestershire, including:
 - a. Promoting the **benefits** of a personalised adult social care system, including personal budgets
 - b. Guiding all stakeholders (service users, carers, staff, and service providers) through the **changes in processes** (see [Appendix 2](#) – Self Directed Support) - providing information to ensure that they have a good understanding on what the changes are likely to mean to them
4. **Reassure and build trust** during a time of change by:
 - a. Demonstrating how we have **engaged with stakeholders** to allow them to shape the new processes
 - b. **Alleviating fear** by dispelling common misconceptions
 - c. Emphasising the **safety net** in place to ensure people are still safe and protected (particularly those who are more vulnerable)
5. Introduce the Gloucestershire approach of trusted support networks through the development of **Your Circle**
6. **Generate staff buy-in** and encourage staff and partners to become advocates for the programme
7. Offer **inspiration** through succinct examples of person-centred assessment, personal budgets and care and support plans
8. Clarify the opportunities that **community** can play - where social care becomes integral throughout the community. Social care is everybody's business, not just a list of services.

3. Risks and mitigation

1. Cynicism over political change and distrust in local government
 - Ensure key messages are adhered to, outlining why the change is taking place, and what the key benefits are for all target audiences
 - Outline that all political parties have bought into the PPF approach
2. General election on 6 May 2010 - purdah
 - Ensure communication is not politically biased, and where necessary postpone contentious consultation until after the elections
3. Adult social care and the forthcoming change is an extremely complex issue for staff and service users alike, which is highly jargonised
 - Plain English checks on all communications, sticking to the hierarchy of key messages
4. Change invokes fear and confusion: for example “choice” is a double-edged sword: too much can be debilitating, particularly to vulnerable people; “independence” can be linked to isolation
 - Regular and clear communications to express, why, what, when and how
 - Clear guidance on support and advice available for staff and service users
5. Staff and public perception and misconceptions identified below
 - People will be left to fend for themselves
 - People will not be protected
 - Personal budgets will be accessible for financial abuse
 - People will have to sort out all of their services / manage their finances themselves
 - Services will be cut
 - People will no longer be means tested
 - It's a cost cutting exercise
 - Tax payers money is being spent on seemingly frivolous non-traditional services
 - Mitigate through clear key messages, accessible FAQs [[See Appendix 2](#)]; proactively feeding staff, the media and our websites with positive case studies
6. Government introduction of Free Personal Care at Home from October 2010 could lead to confusion and overwhelming the assessment resources and budget
 - Clarity in key messages about impact of new Bill on our services in Gloucestershire*
7. Impact of Building Our Future and governmental public sector spending cuts on staff (and morale):
 - Clarity on prioritising front-line services and staff; management support for increased staff capacity during the implementation of the new approach
 - Emphasise the impact on longer term financial sustainability the changes will bring, especially prevention and early intervention
8. Complexity of working with a number of different cultures, languages and levels of understanding

- Engage with different groups to determine the best way to communicate with them including BME, older people, people with disabilities (including sensory impaired), people with learning disabilities, people with mental health issues
 - Review [Equality Impact Assessment](#) and [Hard to Reach communications plan](#) for each phase of communications
9. One solution won't fit all; one style of communication will not fit all
- Offer a phased roll out of communication with overarching message; specific targeted messages relevant to the group affected
 - Offer multiple channels to disperse information according to the needs of the target audiences (including face to face, online, print, audio, texting).

** to be expanded when more information is available*

4. Key Messages

- **Gloucestershire County Council is committed to helping people in the county stay healthy and live in their own homes for as long as possible.**
- **Adult social care is changing across England:** The way we provide adult social care in England is changing from the traditionally prescriptive and reactive provision of care services.
- **In future we will offer more choice, more control and more independence:** 'Putting People First' is a national approach which will offer more choice, more control, more independence and a better quality of life for older and vulnerable people – one of the most exciting and far reaching reforms we have seen.
- **The new approach will focus on prevention and early intervention** - keeping people healthier, happier and living within their own home for longer, which in turn should delay the onset of more serious problems that are more costly
- **Roll-out of changes within Gloucestershire will be gradual:** In Gloucestershire, these changes will come into effect from April 2010, through a phased introduction until April 2011, initially amongst new service users focusing on older people. From October 2010, it will expand to include existing users during their annual review.
- **Your Circle will offer choice, control and personal budgets to suit individual needs:** In Gloucestershire, our approach will be to help individuals and carers develop their 'Circle' of trusted support. This personalised approach will offer personal budgets, giving people more say in how they live their lives and receive their care, while making sure they receive as much support as they and their carers need.
- **The Your Circle symbol will identify where people can get the best information and advice** –Whether or not someone is eligible for adult social care, we want to make sure that everyone can easily find information about Gloucestershire's services and facilities online (www.yourcircle.org.uk), through our established Adult Help Desk (01452 426868), face to face through their social care worker, Village or Community Agent or through an advocate.
- **Ultimately, Your Circle isn't just about people who receive social care.** It applies to everyone, representing the support networks that they need to retain or regain their independence whatever their circumstances. *Your Circle* may well include statutory sources, but just as likely, people will want to take advantage of universal services available locally (including transport, leisure, education, health, housing and community safety) as well as the support offered through voluntary and community groups, neighbours, carers, friends and family.

5. Stakeholder engagement

5.1 Internal audiences

Stakeholder	Broad Objective	Communication, engagement and consultation channels
PPF work stream leads PPF Exec Board PPF Programme Management Board Programme Sponsors COMT	2-way communication to keep information up to date and offer opportunities for involvement Provide information to enable decision-making and approval of next steps	Direct Email Team, Exec and PMB meetings Status reports PPF Newsletter – 6 monthly PPF Comms Bulletin
GCC elected Members Lead Cabinet Members (Antonia Noble, Tony Hicks, Mark Hawthorne) Scrutiny Committee Audit Commission	Increase awareness and improve understanding of change including benefits and reasons for change Obtain necessary support / consent for any policy changes	Members Matters PMB meetings LCM briefings Member Briefing sessions Market Place events after council PPF Newsletter – 6 monthly
Frontline staff Field workers, social care workers, day centre staff, CSOs Health staff: District nurses?	Increase awareness and improve understanding of change Promote benefits of person-centred adult care system 2-way communication to keep information up to date and offer opportunities for involvement To offer guidance, resources and reassurance Clarify gradual roll-out To encourage advocacy (including <i>Your Circle Champions</i>)	Training and workshop sessions Direct mail / email (toolkits) Via managers through team meetings, PARS PPF Newsletter – 6 monthly This Week Staffnet Information Portal (website) Super Users <i>Your Circle Champions</i>
Staff: Managers (Team, General, Operational Development Managers)	Increase awareness and improve understanding of change Promote benefits of person-centred adult care system 2-way communication to keep information up to date and offer opportunities for involvement To offer guidance To share documentation and resources to enable managers to	Direct mail / email Managers Monthly Briefings PPF Newsletter – 6 monthly This Week Training and workshops Toolkit Staffnet Information portal

Stakeholder	Broad Objective	Communication, engagement and consultation channels
	deliver change through their staff Reassure them that the care system will offer protection as well as more fairly allocated resources	<i>Your Circle</i> Champions
Staff (all GCC)	To keep informed of how national change programme is being implemented in Gloucestershire To update as service users / carers	'This Week' One Magazine Staffnet news pages
Trade Unions (Unison and Unite)	To keep informed of implications on changes on staff practices	Direct mail (?)

5.2 External audiences

Stakeholder	Broad Objective	Communication, engagement and consultation channels
MPs & MEPs	Raise awareness and understanding Update on progress To gain support	Meetings / briefings by Principal Officers Direct mail / email PPF Newsletter – 6 monthly Press releases via Press Office0
Partners NHS Gloucestershire; PCT; 2gether Trust Healthy Gloucestershire Partnership Department of Health – regional and national Department of Communities and Local Government	To update on progress To engage in order to co-produce	Meetings and briefings Direct mail: PPF Newsletter – 6 monthly PPF Comms Bulletin
VCS agencies VCS Reference Group Glos Assembly Ref Group (GAVCA) Glos OP Assembly (GOPA) Carers Ref Group (including Carers Glos) Young Carers	Raise awareness and understanding of change To update on progress To gain support and deliver 'co-production' To learn best practice for communication channels To use VCS communications channels to inform and engage with service users, carers, service	Representation through Exec and PMB groups Events Briefing sessions and engagement with representative groups (Philip Amos) Direct mail e.g. PPF Newsletter PPF Comms Bulletin to feed

<p>Community Agents Village Agents BME Carers Group BME Reference Group LD Partnership Board Gloucester Lifestyles Speakout / Rethink Mental Health User Group GDA Deaf Association GCAB Blind Association Faith Groups</p>	<p>providers indirectly</p>	<p>into VCS stakeholder publications Direct PR into identified newsletters and e-bulletins</p>
<p>Service providers: In-house (including libraries) External (contract/non contracted providers) Transport providers Future potential</p>	<p>Raise awareness of change and understanding on impact of changes on services Enable them to become positive advocates To encourage development of new and creative solutions to meet people's individual needs (at affordable prices)</p>	<p>TBC (Dawn Porter / Jan Halliday) Meetings and briefings Direct mail: PPF Newsletter – 6 monthly <i>Your Circle</i> portal / GCC site Partner websites <i>Your Circle</i> marketing tools PPF Comms Bulletin to feed into service provider stakeholder publications PR in identified titles National PR via The Forster Company (campaign May '10)</p>
<p>Stakeholder Agencies e.g. District council benefits advice Citizens Advice Bureaus Housing Associations South West Communications Forum Parish Councils GP Surgeries / GPs</p>	<p>Raise awareness and understanding of changes Encourage co-production and sharing of information and advice as best practice Enable them to become positive advocates</p>	<p>Direct mail Press releases E-zine PPF Newsletter – 6 monthly GAPTC articles Online (GCC, portal, partner sites) PPF Comms Bulletin to feed into stakeholder publications</p>
<p>Service users Service User Forums Older people, people with physical or learning disabilities, people with mental health needs</p>	<p>Raise awareness of changes and the benefits they bring Offer guidance on how to access support Offer guidance in changes in processes</p>	<p>Targeted and integrated social marketing campaign in October 2010, highlighting the benefits and impacts of the changes to adult social care, to include: Face to Face through multiple</p>

<p>New service users Existing service users Hard to reach groups (including BAME, vision and hearing impaired) Gloucestershire Local Involvement Network (LINK)</p>	<p>Offer reassurance on support and services available Inspire new and creative alternatives to traditional in house services</p>	<p>channels including Health and Social Care fieldworkers; Village & Community Agents; service providers such as Meals on Wheels, <i>others to be determined</i> PR (partner publications e.g. parish magazines, local and regional media, radio, TV, online, CSV Action Desk) Direct mail (targeted - tbc) Events Online (GCC, portal, partner sites) Video and audio recordings hosted online or on DVD/CD Text messaging (sensory impaired and people with learning disabilities) Targeted advertising or advertorials (partner publications e.g. parish magazines, health A-Z, local and regional media, radio, online)</p>
<p>Carers Family members Friends Community members Professional care providers</p>	<p>Raise awareness of changes and the benefits they bring Offer guidance on how to access support Offer reassurance on support and services available Offer guidance in changes in processes Inspire new and creative alternatives to traditional in house services</p>	<p><i>As above</i> Events (e.g. In Touch, Carers Workshops) Via Reference groups Via field work staff</p>
<p>Local/Regional Media</p> <ul style="list-style-type: none"> - Local press - Radio - BBC Points West - BBC Countryfile - Trade press - Talking Newspapers - Lifestyle magazines - Parish News 	<p>To raise awareness; educate and gain endorsement for the changes To negate negative publicity of individual cases</p>	<p>Press briefings Editors briefing Media releases Advertorials Advertising (online, press, radio)</p>

N.B. The Stakeholder Engagement Strategy developed by Mark Hourston will help drive communications and the two documents are clearly interlinked.

More comprehensive channel information will be established through individual communication plans for each phase of programme delivery.

6. Roles and responsibilities

Lead Cabinet Members:	Tony Hicks (Adult Social Services) Antonia Noble (Care and Community Services) Mark Hawthorne (Communications)
Programme Sponsor:	Dave Martin, Interim Executive Director (x5101)
Programme Manager:	Carey Wallin (x5198)
Programme Support Manager:	Mark Hourston (x5620)
Communications:	Rachel Topps (x6406), Jenny Keen (x6521)
Press:	Emma Smith (x6887)
C&ACD Comms Manager:	Graham Twarog (x5605)
Work stream leads:	
Information, advice, advocacy:	Rosie Callinan (x7385)
Early intervention & prevention:	Julie Goodenough (x6741)
Self Directed Support:	Kevin Salter (x5290)
In-House Services:	Dawn Porter (x2351)
Strategic Commissioning:	Jan Halliday (x6151)
Changing the way we do business:	Julie Branton (x5131)
Finance:	Sharon Fossali (x5114)
Back Office:	Mandy Guest (x5129)/ Steve Tubb (x7466)
Involvement & Events Coordinator:	Philip Amos (x5079)

7. *Interdependencies/Linkages*

1. Within the Putting People First programme at GCC:
 - a. Stakeholder Engagement Strategy (Mark Hourston) *[include link when published]*
 - b. Information, Advocacy and Advice Strategy (Rosie Callinan) *[include link when published]*
2. The person-centre approach is being delivered across the council (transition from CYPD to C&ACD).
3. Existing Policies and Standards in place for adult social care e.g. Direct Payments
4. Putting People First is a priority action within the multi-agency 'Health Gloucestershire Strategy, 2008-2018'.
5. In the South West, we are working closely with the South West Communications Forum and regional representative, Pam Richards.
6. Department of Health is reviewing best practice and has employed 'The Forster Company' to deliver a PR strategy to support the programme across England. Both DH and The Forster Company have been briefed on Gloucestershire's *Your Circle* approach.

8. *Resources*

The Social Care Reform Grant will support the transitional arrangements and costs associated with programme delivery and service users transferring from the existing system to a Personal Budget process in 2010/11.

Communication budget for 2010/11 has yet to be confirmed. *Link to budget when confirmed.*

The Campaigns Manager, Rachel Topps and Information Office, Jenny Keen, will support the PPF Programme deliver communications, with support from corporate resources including the web team, publications team and press office.

9. *Appendices*

Appendix 1: [Appendix 1: Self Directed Support – the process](#)

Appendix 2: [Appendix 2: Frequently Asked Questions](#)

Appendix 3: [Appendix 3: Action Plan 2010](#)

10. Approval

Signature

By email

Date

4th April 2010

Name in BLOCK letters

DAVE MARTIN

CAREY WALLIN

Contact telephone number

01452 425101

01452 425198

Position/Title (BLOCK letters)

INTERIM GROUP DIRECTOR

PUTTING PEOPLE FIRST PROGRAMME MANAGER

Directorate/Dept

C&ACD

C&ACD

For Communications Team Use:

11. Outline of approach

The communications strategy aims to be proactive through integrated social marketing, working in partnership with key agencies including NHS Gloucestershire and 2gether.

As the introduction of PPF will be phased over a number of months during 2010, communications will be staggered, initially targeting those individuals affected (including staff, service users, carers, partners, service providers and VCS groups).

In October, a wider social marketing campaign will be delivered to raise awareness of the needs, the benefits and the opportunities that the new-look adult social care service provides.

This Communications Strategy will be reviewed as the programme progresses to reflect learnings.

Key milestones 2010

- 1st March 2010: Launch of interim information portal
- 22nd March: Launch of support 'Self Directed Support Toolkit' to enable trained staff to undertake new person centred approach
- 1st April: Launch of service user and carer's support information (new users or those undertaking reassessment; older people only)
- May 2010: The Forster Company national PR campaign to highlight benefits of PPF within key stakeholder trade media
- June 2010: *Your Circle* website promotion to service providers and community groups
- 1st October 2010: Gloucestershire awareness campaign to support wider rollout of PPF through multiple channels to all existing service users
- 31st March 2011: 30% of service users to be using the new PPF system of support.
- 31st March 2011: End of Social Care Reform Grant

Brand

The primary brand is Gloucestershire County Council, with NHS Gloucestershire and/or NHS 2gether Trust support where appropriate. GCC will add credibility to the new *Your Circle* identity, helping to ensure that Gloucestershire residents and organisations trust the proposition.

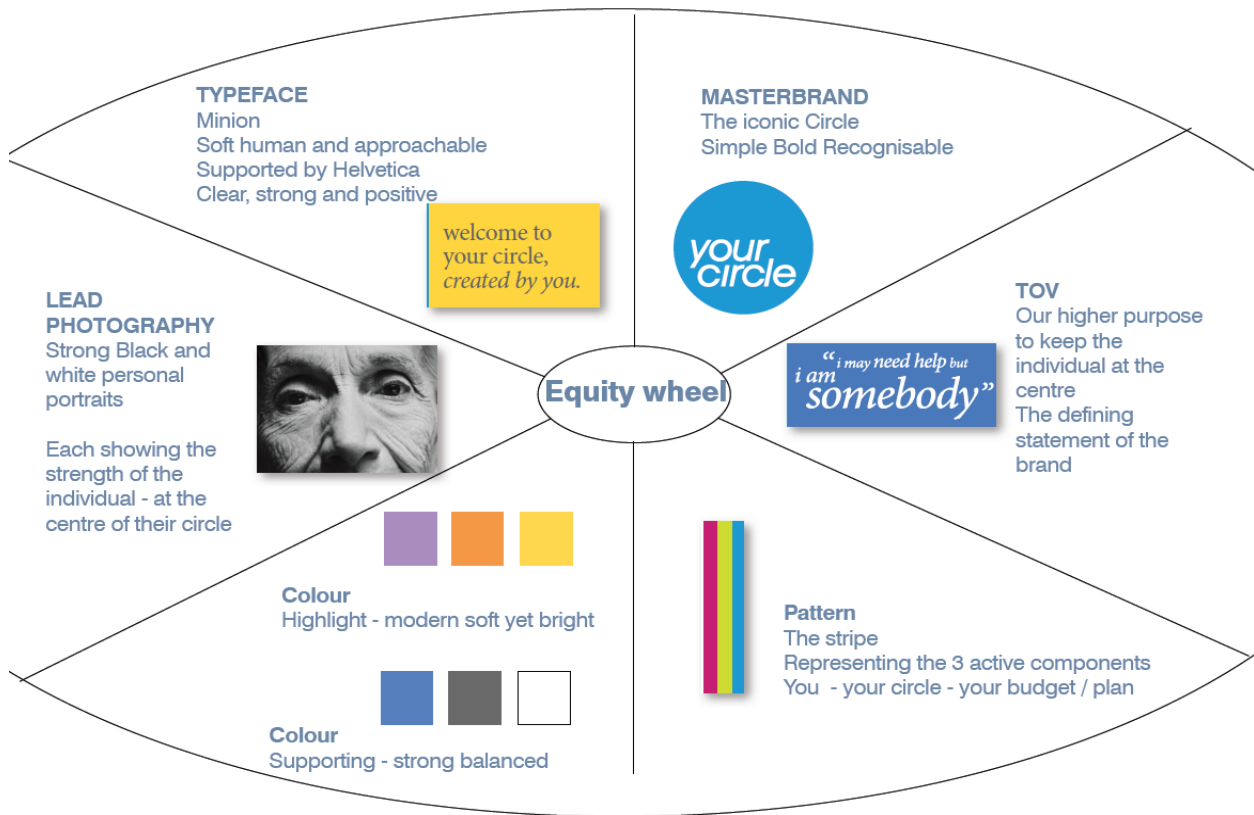
The overall *Your Circle* identity is designed to be simple, flexible and adaptable to fit with Gloucestershire County Council's existing identity. We need the *Your Circle* mark to gain recognition and this means it must be applied consistently across all applications.

Creative identity guidelines have been developed to support *Your Circle* communications. See: <..\Creative Work\Your Circle guidelines & templates\Your Circle Guidelines.pdf>

The principles of Gloucestershire's approach to the Putting People First programme are clearly defined in the *Your Circle* overview. See: [\[link to Your Circle Principles when published\]](#).

It is worth noting one of the key benefits of the *Your Circle* identity: Through countywide coverage, it should ensure that the council starts to get credit for services that we provide, many of which are currently unrecognised by service users.

Summary of Your Circle identity



Images

Photography is an essential part of the Your Circle identity – it should follow the central theme of focusing on the individual. Whether a portrait, or real life situation, the individual should shine through. Use styles of imagery to suit the target audience; avoid overly posed or clichéd images. Each shot should have a story to tell which will engage the reader and urge them to want to know more.

Tone

Following Gloucestershire County Council guidelines, copy tone should be:

- Approachable
- Caring
- Trustworthy
- Reliable
- Plain English

To fit with *Your Circle* guidelines, communication should also be:

- Positive
- Confident
- Enabling / empowering

We want every individual who is reading *Your Circle* literature to feel that we are talking directly to them. We want them to understand what *Your Circle* might mean to them, no matter whether they need health or social care or not:

That means:

- instead of referring to the impersonal ‘individual’, we refer to ‘people’ or simply ‘you’
- instead of the paternalistic tone of ‘help’ and ‘offering care’, we should empower people to ‘make their own decisions’ about ‘support’ they might want, ‘with help if they want it’

“*i may need help but
i am
somebody*”

We should ensure that *Your Circle* does not just focus on those people receiving health or social care and support, but should look more widely:

- helping people (through prevention and early intervention) to remain independent and living in their own homes for as long as possible
- offering easy access to information and advice to local and national support services, organisations, social events, etc
- improving existing social capital, where neighbours help neighbours, family, friends and carers support each other and community organisations, village agents, social networks support each other within the local community.

12. Evaluation

Overall communications will be evaluated through:

- Achieving the DH communications milestones (see [Section 2.1](#))
- Lessons learned feedback (Board and team meeting on 26 April 2010)
- Staff Survey to monitor moral (although caution over BOF change programme which will impact on results in 2010/11)
- Feedback from other local authorities via The Forster Company and the south west regional communications forum
- Media coverage.

Detailed evaluation, both quantitative and qualitative measurements, will be identified through each individual communications plan. This may include:

- Monitoring and evaluating involvement and engagement events (Philip Amos)
- Focus groups through VSC, Carers and Service User Forums reference groups
- Media visibility: Balanced general media coverage incorporating key messages, including articles in trade titles such as ‘Carers Matter’
- Web visibility: Online hits to www.yourcircle.org.uk and PPF pages on GCC website; invite comments
- Customer satisfaction surveys – via Customer Support Officers (tbc)
- Campaign awareness (from October 2010): Touch screen surveys through user groups, libraries, drop-in centres, etc.
- Team Exchange – request staff feedback to change programme in C&ACD department
- Staff Survey amongst those in contact with service users and service providers including Village Agents, Community Agents and CSOs.

Approval – Corporate Communications

Signature

Date

4th April 2010

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Appendices

Appendix 1: Self Directed Support – the process

What will the new process look like?

From April 2010, older people starting to receive social care will start to build their 'circle' of support, with help if they need it.

Information and advice will be available to everyone to help them build this circle of support and care, which can include a mix of trusted people (from family members to care professionals), established care and support services (both voluntary and statutory), and even certain places (from community colleges to fitness centres).

There will be an emphasis on prevention and early intervention to delay the onset of more serious problems – enabling people to receive support before they reach crisis point.

Where people do need longer term support, rather than assess a person's needs and then allocate resources to meet those needs, we will be working with individuals to help them determine their 'circle' of trusted support through self-directed assessment, a personal budget and a tailored care and support plan.

A personal assessment, (including assessing financial eligibility) will help them identify their care needs in order to improve the quality of their life. If they are eligible for help from the council, this will then generate a personal budget and a tailored care and support plan, which will be regularly reviewed.

A new 'Resource Allocation System' will ensure that budgets are fairly and equitably allocated.

With help if wanted, people will be able to decide how to spend their personal budget through the development of their care and support plan, based on what is most important in their lives, giving individuals, families and carers much greater choice and control over the care services they receive and who provides them.

Guidance will be offered through multiple channels to suit different requirements, including an online directory of support services (www.yourcircle.org.uk); by telephone or email to the Adult Care Customer Service Centre; face to face through social care staff and Village and Community Agents; through local voluntary and statutory organisations including libraries, job centres, GP surgeries.

Some people will want to carry on exactly as before, using services organised by the county council. Others may want to organise everything themselves or employ a personal assistant. Alternatively, we can provide a mix – with the council offering a selection of services or initial information and let them manage it from there.

All support plans will be reviewed before being agreed, to ensure that they meets a person's needs, but also provide protection, conform to legal requirements and offer value for money. The county council retains the requirement to provide a 'duty of care' to people who are eligible to receive social care and the usual safeguarding procedures and controls will remain.

In the long term, services provided by the council as well as commissioned services are likely to adapt according to demand. We will also see new innovative services developing as people come up with different solutions to meet their own care needs.

Appendix 2: Frequently Asked Questions

See:

[External FAQs](#) (hosted on GCC and Staffnet)

[Internal FAQs](#) (hosted on Staffnet)

Appendix 3: Action Plan 2010

The Action Plan 2010 outlines all communications activities and links to the relevant communications plans. It is updated on a weekly basis.

See:

[Action plan 2010.doc](#)

Rachel Topps

Campaigns Manager, Gloucestershire County Council

April 2010