Title: Modernising Adult Social Care in Northern Ireland

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Introduction

In June 2015, the Commissioner for Older People for Northern Ireland (COPNI) published *Modernising Adult Social Care in Northern Ireland* in response to the findings from research conducted by a team of academics from Queen’s University, Leeds University and Penn State University (U.S.A.) (see Duffy, Basu, Davidson and Pearson, 2015).

The primary aim of the original research was to present the Commissioner with options for legal reform to adult social care provisions for older people in Northern Ireland. This was in recognition of the fact that the range of Northern Ireland’s existing adult social care legislation dates back over forty years and is typified by disparate and dated pieces of law which are disconnected and void of thematic coherency. The current legislation governing adult social care in Northern Ireland is provided through a myriad of laws dating back to 1978 where, in some instances, the language and terminology used is both outdated and oppressive. In order to investigate possible options for legal reform, the following objectives underpinned the research:

**Research Objectives**

1. To identify gaps and issues in current legislative framework.
2. To compare existing law and practice in Northern Ireland with law and best practice in other jurisdictions.
3. To recommend changes or identify options for the current Northern Ireland framework.
4. To participate in a roundtable event with stakeholders to discuss outcomes and recommendations.

**Methodology**

The findings from this research were based on an international literature review of adult social care in the local, national and international contexts. A Rapid Evidence Assessment (REA) method was used to identify, select and analyse the literature relevant to this review. REAs provide a rigorous, open and effective means of evaluating what is known on a topic and are particularly suited to projects where the potential literature is very broad but the themes from the evidence are needed to inform policy direction (Government Social Research Centre and the Evidence for Policy and Practice Information and Coordinating Centre (2013). The key stages of this particular REA involved: developing search strategies and identifying appropriate databases; screening the results against agreed inclusion criteria; assessing the quality of the included results; extracting the key findings from the included
results; and providing a synthesis of the key themes to inform the discussion and recommendations of the review. The final research report recommendations are thus directly linked in with the evidence gathered by the research team across different countries with contrasting systems of welfare. The following countries were included in the Review: Northern Ireland, England, Scotland, Wales, Republic of Ireland, Denmark, Sweden, India, Canada (Ontario), Australia (Victoria) and the United States (including Pennsylvania, Florida and Maine as State examples).

The recommendations from this research on how best to reform Adult Social Care for the future in Northern Ireland have therefore been developed by reviewing Northern Ireland’s existing position in terms of law and policy in comparison with international good practice.

**Recommendations**

1. **There should be a new single legislative framework for Adult Social Care with accompanying guidance for implementation.** This could either be new or consolidated legislation, based on human rights principles, bringing existing social care law together into one coherent framework.

2. **All older people in Northern Ireland should be offered a Support Visit upon attaining 75 years by an appropriately trained professional.** This will be based on principles of choice and self-determination and is aimed at helping older people to be aware of the support and preventative services that are available to them.

3. **Increasing demands for health and social care reinforce the importance of considering how these services should be funded.** All future funding arrangements must be equitable and must not discriminate against any group, including older people, who may have higher levels of need.

The review of adult social care in Northern Ireland in comparison to other jurisdictions led to the conclusion that the legal system for social care provision in Northern Ireland needs to be amended. The Rapid Evidence Assessment revealed examples in several countries where this has occurred and is effective as a mechanism for addressing the needs of older people in a clear and consistent manner. The review also uncovered consistency in several countries in the value that is placed on preventative services and the importance of service provision against a legislative backdrop built on human rights based principles (Scharlach & Lehning, 2016). An integrated health and social system has served
Northern Ireland well for over forty years, particularly during a troubled period of our history, but the research noted inconsistencies in regard to disparities in service provision across the domains of health and social care.

**Prevention** was a theme that was apparent in the research team’s review of adult social care in the United Kingdom and Scandinavia, in particular. The idea of introducing **Support Visits** for older people when they are 75 years old could be one important way in which older people’s social care needs could be adequately addressed and responded to.

**Introducing Support Visits for Older People in Northern Ireland**

The specific recommendation to introduce Support Visits to all older people in Northern Ireland came directly from the research team’s review of adult social care in Denmark where **Preventive Visits** are an established aspect of care provision for older people. Denmark is a country not much bigger in population than Northern Ireland where a progressive system of social welfare built on person centeredness, choice, autonomy and empowerment has developed (Rostgaard, 2012).

The system in Denmark is particularly typified by the following:

1. **Preventive Visit Scheme** whereby older people (75+) receive a visit twice per annum to determine their need for social care services.

2. One overarching piece of legislation in the Consolidation Act on Social Services to holistically meet the needs of the adult social care population.

3. Adoption of the concept ‘ageing in place’ to concretely shift service provision to the ‘home’ environment for older people.


(cited from Duffy, Basu, Davidson and Pearson (2015:16))

The Preventive Visit is legally mandated through Denmark’s Consolidation Act on Social Services wherein it is described as follows: “The municipal council shall offer preventive home visits to all citizens who have attained the age of 75 and are residents of the municipality. The municipal council shall offer at least one annual preventive home visit.”
(Section 79a, Consolidation Act no.1093 of 5 September 2013).

Prior to their introduction on a statutory basis in Denmark, the effectiveness of these Preventive Visits were also examined through randomized control trials which found reductions in hospitalisations and nursing home admissions for older people with associated cost efficiencies, improvements in functional ability and improved mortality (Elkan et al 2001; Stuck et al. 2002; Vass et al, 2002; Rostgaard et al, 2011). The focus of this visit is on needs assessment and helping continue planning for sustained independent living (Schulz, 2010).

The introduction of these type of annual Support Visits to Northern Ireland would align both with meeting the expressed needs and wishes of older people as well as aligning with the requirements of current policies such as Transforming Your Care (2011) and Delivering Together (2016).

**Meeting the Needs and Wishes of Older People**

Following the completion of the research, the Commissioner for Older People for Northern Ireland (COPNI) was keen to obtain the views of older people about the recommendations being put forward in the report. For this reason, an engagement programme was undertaken by COPNI in collaboration with Age NI to “test” the recommendations against the real life experiences, concerns, and barriers identified by current users, carers and potential future users of adult social care (Age NI, 2015). In total 58 older people, including current and potential future users of adult social care together with family members or carers, across a range of domiciliary, day care and group settings, participated in this engagement process.

The view was strongly expressed by older people and their families and carers about not knowing what they are entitled to under current law and policy in Northern Ireland. The following quote supports this latter point in regard to rights and entitlements: “It is important for older people to know their rights, if older people don’t know they will never ask for them and won’t get the help they need” (COPNI, 2015).

The focus on Prevention through provision of a Support Visit was positively received. It was felt that this would enable older people to exercise choice and control rather than having to make life changing decisions at a time of crisis which so often is the case for many older people in their first encounter with the adult social care system.

**Consistent with current policy**
"Transforming Your Care (TYC)" (2011) is undergirded by the principle of the person being at the centre of their care and that such care should be prioritized within the community setting as opposed to hospital when it is within the person’s best interests. This key policy roadmap also highlights the importance of prevention alongside its person centeredness focus. The introduction of a Support Visit to Northern Ireland would therefore fit alongside these core established principles of TYC. With the focus on prevention, the Support Visit would allow an older person to clearly express choice and control over services and help that they might wish to access when made aware of their rights and entitlements by the suitably qualified professional undertaking the Visit.

"Health and Wellbeing 2026 - Delivering Together" (DOH,2016), recently published by the Department of Health, in response to the recommendations from the review led by Professor Rafael Bengoa, who was tasked with ways of responding to the many challenges in Northern Ireland’s Health and Social Care System, is also very relevant as a policy context. At the heart of Delivering Together is a call for partnership working, co-production and co-design with service users, patients, families and care providers. The provision of a Support Visit provides an early creative and innovative opportunity for older people to actively engage with staff in influencing and co-producing the type of help and support that would assist in maximizing and promoting their continuing, independent living in the community.

**Implementing a Support Visit to Northern Ireland – Next Steps**

The idea of introducing a Support Visit for all older people in Northern Ireland has been informed by the evidence from the research conducted by Duffy et al (2015) on behalf of the Commissioner for Older People for Northern Ireland. As stated in the research report, such a Visit has to be based on the key principles of choice, control and partnership with older people otherwise its person centered ethos would be devalued and diminished. It would seem very timely to consider the introduction of Support Visits in Northern Ireland by piloting these in one of Northern Ireland’s Health and Social Care Trusts. Accompanying such a pilot, it would be necessary to undertake a careful evaluation of effectiveness similar to the work conducted in Denmark prior to its adoption officially into policy.

**References**


