Appendix 6

EIT REVIEW

LEARNING DISABILITY SERVICES

REPORT ON THE EVALUATION OF WORKING PRACTICES

20 SEPTEMBER 2011

REVISION HISTORY

Version	Comments	Date	
1.0	Initial first draft of report circulated to Project Team for consideration / comment	tbc	
1.1	Initial report version 1.1 presented to Core Project Team for consideration / comment	21 Sep 2011	
1.2	Initial report version 1.2 presented to Project Board for consideration / comment	4 Oct 2011	
1.3	Initial report version 1.3 presented to Select Committee for consideration / comment	17 Oct 2011	
1.4	Further develop report with revised version 1.4 circulated to Project Team for consideration / comment	tbc	
1.5	Further develop report with revised version 1.5 presented to Core Project Team for consideration / comment	19 Oct 2011	
1.6	Further develop report with revised version 1.6 presented to Project Board for consideration / comment	3 Nov 2011	
1.7	Further develop report with revised version 1.7 presented to Select Committee for consideration / comment	28 Nov 2011	

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	3.9 3.10	In-house provision Other specific issues?		

4.0 SUMMARY OF RECOMMENDATIONS

1.0 AIMS AND OBJECTIVES

The aim of the review has been to evaluate the current approaches and working practices in place for learning disability services and, where appropriate, identify opportunities to strengthen and improve upon the existing arrangements. Specifically the review has considered:

- Client assessment, including risk policy;
- Alignment of approaches with government policy, e.g. Valuing People Now;
- The development and approval of individual care packages;
- Mechanisms for the review of individual care packages;
- The implementation of care package and arranging for services;
- The interaction between care managers and commissioning;
- The interaction between care managers, commissioning and other service areas e.g. housing, children's services (transitions), etc;
- Forecasting the future demand for services and netting-up of need (i.e. strategic planning of services);
- Strategically planning the commissioning of services;
- Managing the delivery of services using appropriate management information e.g. client database, unit costing, etc;
- Ensuring value for money through benchmarking and other mechanisms;
- Approaches to the procurement of services and contractual arrangements for the management of providers (including performance management arrangements.

2.0 SUMMARY OF FINDINGS

To be drafted when main body of report completed

3.1 ACCESS TO ASSESSMENT (REFERRALS / REQUESTS)

3.1.1 CURRENT PRACTICE

Outline the process by which people become known to the Council – i.e. what are the routes into having an assessment – e.g. First Contact Team / other routes? – what mechanisms are in place to ensure that the care management team (i.e. social workers) receive the referral / request for an assessment – how quickly is an assessment completed – are there performance targets for time it takes to get an assessment from first contact / enquiry – how many requests for assessment come through each of the various routes e.g. First Contact / Transitions / Other

3.1.2 EVALUATION

Do the arrangement work well – are there issues with the arrangements – are there opportunities to strengthen the arrangements – can quality of service be improved – are there efficiencies that could be introduced, etc.

3.1.3 OPTIONS AND PROPOSALS

What could be done to improve – are there different options that could be implemented – what are the benefits of the proposed changes – how will it address the issue – if there are options – what are the pro's and con's of each – what is the preferred option and why

3.1.4 RECOMMENDATIONS

3.2 ASSESSMENT OF THE INDIVIDUAL CLIENT

How it is risk averse / traditional in focus – intro of 6 point plan – risk policy – staff training, etc

3.2.1 CURRENT PRACTICE

3.2.2 EVALUATION

3.2.3 OPTIONS & PROPOSALS

3.2.4 RECOMMENDATIONS

3.3 AGREEING THE INDIVIDUAL CARE PACKAGE

How package is approved – how is it ensured that it is fit for purpose – what is delegated to social worker – what goes to placement panel – limitations of process – effectiveness of panel – recommendations to strengthen panel

3.3.1 CURRENT PRACTICE

3.3.2 EVALUATION

3.3.3 OPTIONS & PROPOSALS

3.3.4 RECOMMENDATIONS

3.4 COMMISSIOING THE INDIVIDUAL PACKAGE

Who arranges the services for the individual client – how is it done – how are providers selected – duplication / clarity of ops team and commissioning team in this role, etc

3.4.1 CURRENT PRACTICE

3.4.2 EVALUATION

3.4.3 OPTIONS & PROPOSALS

3.4.4 RECOMMENDATIONS

3.5 REVIEWING AND AMMENDING THE CARE PACKAGE

Who does it – how often – robustness of review – is it light touch or challenging – who approves the continuation of the package / revision to the package – what are the mechanisms for changing the package at request of provider/carer/client – who approves such changes

3.5.1 CURRENT PRACTICE

3.5.2 EVALUATION

3.5.3 OPTIONS & PROPOSALS

3.5.4 RECOMMENDATIONS

3.6 STRATEGIC PLANNING FOR COMMISSIONING

How is this currently undertaken – explain why the database needed to be developed – explain how netting-up did not take place – outline other planning intelligence that needs to be considered – e.g. the forecasting data – transitions data, etc – also how well is emerging / changing policy and its impact accounted for in planning future need, etc

3.6.1 CURRENT PRACTICE

3.6.2 EVALUATION

3.6.3 OPTIONS & PROPOSALS

3.6.4 **RECOMMENDATIONS**

3.7 PROCUREMENT, COMMISSIOING AND SECURING VFM

How are services currently procured / commissioned – how is unit cost / target cost / benchmark cost factored into the procurement and commissioning process – what contractual arrangements are in place – what alternative models are there e.g. Durham – how does procurement fit with selection of providers for individual client packages, etc – what arrangements are in place to monitor value for money / ensure contracted costs are appropriate

3.7.1 CURRENT PRACTICE

3.7.2 EVALUATION

3.7.3 OPTIONS & PROPOSALS

3.7.4 RECOMMENDATIONS

3.8 PROVIDER MANAGEMENT

How do we work with providers to develop services – how is the performance of providers managed, etc

3.8.1 CURRENT PRACTICE

3.8.2 EVALUATION

3.8.3 OPTIONS & PROPOSALS

3.8.4 **RECOMMENDATIONS**

3.9 IN-HOUSE PROVISION

How is the level of in-house provision determined – what arrangements are in place to manage in-house provision – how is performance of provision managed – what is the relationship between in-house provision and commissioned when selecting providers for individual clients

3.9.1 CURRENT PRACTICE

3.9.2 EVALUATION

3.9.3 OPTIONS & PROPOSALS

3.9.4 **RECOMMENDATIONS**

4.0 SUMMARY OF RECOMMENDATIONS / PROPOSED ACTION PLAN

Recommendation	Outcome Measure	Target Date	Responsibility