### **Health Select Committee**

28 November 2011

# EIT Review of Learning Disability Services - Progress Update

### **Summary**

Members are requested to consider the progress update, and note the preparations for the meeting of 9 January.

### Detail

## Value for money

- As previously noted, a key area for this review is to achieve value for money from learning disability services. At the previous meeting Members received a report that outlined both national benchmarking information, and data that compared Stockton to those authorities who were in the top quartile for low cost services.
- 2. It was noted that considerable savings may be achieved should the Council reduce its costs in some areas, in line with the authorities in the top quartile. For example, the national benchmarking showed that SBC's average cost of commissioned residential care was reported as £1001 per week (PSEX1 2009/10 data) and if this was in line with the average top quartile authority then the average costs should be circa £866.
- 3. However, it is also recognised that there is only limited confidence in the national benchmarking data due to uncertainty surrounding the information provided by each authority, and it is also important that the Council achieves the balance between providing quality local services as well as ensuring that they are low cost.
- 4. In order to further improve the Council's understanding of what is represented by best value, the project team has been examining the use of the Care Funding Calculator (CFC). This is a tool that has been widely used by authorities in the south of England. The CFC requires detailed information on a clients needs (for example, the amount of time needed for help with bathing) and uses this information to provide a figure on the type of weekly costs that may be expected for that client.
- 5. Using the CFC pushes care managers to be clear about exactly what is being specified for as client and this will help address the comments made previously by CSED in relation to risk averse or vague care planning. It will also help commissioners and providers have a much clearer idea of the care needs of an individual. It is proposed to test the CFC for use in Stockton by applying it to a sample number of client cases for residential care (both high and low cost).

- 6. Once a sample has been identified, the CFC will be applied to each client. Should it be found that care packages are more expensive than may be expected, the information found via the CFC will be used as a basis for negotiation with providers in order to reduce the cost. The CFC may also identify where current prices are too low based on the CFC price parameters and consideration will be given to an approach to ensuring a fair price for providers.
- 7. Using the information provided from the sample, this will show an estimate for the financial impact should the CFC be implemented across all clients. The CFC could also be used to refine current care plans and this may be used to make recommendations for change to care plans as appropriate.
- 8. There is also an independent living model for the CFC, and this will also be applied to the five providers used by the Council in order to also test those costs as part of the pilot process.
- 9. Members should also note the proposal to undertake longer term work on a framework agreement in line with the information provided by Durham County Council at the meeting on 5 September.

## **Development of Options for Future Service Delivery**

- 10. Work continues to develop options for future service delivery with a particular emphasis on day time activities (including community support), respite care, and services for clients with autism.
- 11. In relation to **day time activities**, work is continuing in relation to costs to ensure there is a like-for-like comparison between in-house and commissioned services. The overall aim will be to reduce unit costs, and also ensure that clients who are able to can access universal services as an alternative.

# 12. Ongoing work includes:

- Identify who needs building based services and what the services should look like;
- Consider how if we were to keep in house services we can make them more business focused and drive out efficiencies:
- Consider how we drive out efficiencies in commissioned services:
- Identify people currently in day services who could access universal services via Bridge Building (potentially saving day care days over a period of time);
- Identify all transitions who are likely to be eligible for day services over the next three years and direct them through bridge building to identify who needs building based services and who can take up the bridge building approach (this will manage the flow of new people into services);
- Develop Autism specific day services in the Stockton locality to prevent out of borough placements, and respond to current unmet need.

- 13. Following the presentation received at the meeting of 17 October, work continues to identify resources to pilot Bridge Building-type services for appropriate clients for 12 months. This will involve financial monitoring to track the savings that may accrue.
- 14. In relation to **autism**, the MAIN Group are currently, on behalf of Tees Valley LA's, undertaking some research into the needs of people with autism, mapping available and missing service provision. They are interviewing service users and carers as part of this work.
- 15. This is due to report by February although headline information should be available by December. This will be used to inform likely need for services (including transitions), and will inform decisions in relation to the development of local services. Currently the Tees Valley Autism Framework is currently not being fully utilised due to the lack of local provision.
- 16. Phase 1 consultation showed that there was additional need for **respite care**. A menu of respite services needs to be developed, and may require invest to save approaches.

#### **Older Carers**

17. It is recognised that work is required to better understand how SBC is targeting the needs of older carers as our learning disability population live longer due to advances in health care and living standards. CSED in their case file reviews talked about the number of new annual entries into residential provision. We need to understand if there are any interventions which we can make to prevent early admissions into residential care and promote/prepare individuals for future independent/supported living. The operations team are being consulted on how to engage with older carers.

### **Ordinary Residence Cases**

18. There are 20 potential identified cases which are being looked at with a view to deciding whether ordinary residence is appropriate to pursue. A number of these are already being actioned by legal services, and the remaining cases will be prioritised.

### Consultation

19. In order to ensure that all involved in the review are kept fully up to date, information will be provided to those who were consulted as part of Phase 1 in order to provide both the results of Phase 1, and an update on progress of the review as a whole. This will take place in December 2011. Following the development of the service proposals outlined above, these will then be subject to further public consultation.

# **Working Practices**

20. Members have previously received a draft of the Working Practices manual that is being drawn up in order to improve the operation of learning disability services in future.

- 21. It is clear that there needs to be clearer roles and responsibilities ensuring that activities in relation to commissioning and procurement of care are carried out by the most appropriate staff member.
- 22. The development of a Working Practices Handbook will ensure all of this is mapped out by breaking down all the interventions required from a service user first requesting an assessment for access to services, to the review stage. A review of how to improve the transitions process is essential to this EIT review and we are mapping this out with suggested changes for the future.

# **Housing Provision**

- 23. Work is ongoing in order to plan the number of people currently on the database of clients who want to pursue options for independent living. There are a number of people who have done so and housing pro-formas are being completed for each to assess their requirements.
- 24. This intelligence will be used to influence our housing strategy (currently being updated) and we will develop appropriate action plans to bring on stream relevant housing. The revised working practices document will be used to ensure Housing Services are regularly appraised of current and future housing need.
- 25. If we are to move more people into the community this will require practical support for service users (getting to know potential house sharers, purchase of furniture, moving in etc) and we will need to reflect this in our business plan. Likewise training for independence will need to be targeted to these individuals (this is currently delivered from a number of venues but sometimes delivered to those who are in residential provision and are unlikely to live independently in the future).

### **Future Trends**

26. Understanding future trends will be critical to managing future resources for learning disability services. Ultimately as well as ensuring the Council obtains good value for money in service provision we need to better understand our population's future trends, changing needs etc. The learning disability budget has increased over the last 6 years by 47% and work is being undertaken to understand more detail on the drivers for this so we are prepared for the future.

# Preparation for meeting of 9 January

27. Work will now take place in order to bring information on the development of services including for day services, autism and respite care to the Committee in January, and this will be used to assist the Committee in identifying its proposals for change. Initial findings from the sample approach to the CFC should also be available.

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