

## Appendix 5

### Desk Top review and Database Summary

1. During August a desk top review was carried out on the clients held on the database compiled previously. All the cases **open** to the Learning disability team were reviewed and a significant number of those cases held in the review system were reviewed. There are still a number of clients in review system who will need a desk top review of the services they receive. The desk top review identified 661 clients who are known to LD services of these 490 have been reviewed and a further 171 remain. The Desk top review was able to summarize the services the clients receive and also indicate areas that may be developed further.
2. The services and the number of clients accessing those service areas across the LA are as follows;
  1. CST +day care = 8 clients
  2. CST +day Care +transport = 6clients
  3. Day care +transport= 57
  4. Direct Payments=51
  5. Day care across the LA = 97clients
  6. Day Care +a DP =18
  7. Day care +dp+transport= 4clients
  8. Independent Living +day care + DP =2clients
  9. Day care +DP = 6 clients
  10. DP +transport = 16 clients
  11. DP +CST +Transport = 3 clients
  12. DP +CST=3clients
  13. Independent Living + day care = 16 clients
  14. Independent Living Only= 39 Clients
  15. Ind Living +day Care + transport = 13 clients
  16. Ind Living + CST +transport =1 client
  17. Ind Living +CST +DP= 1 client
  18. Ind Living +day care +respite +dp =1 client
  19. Ind Living +dp = 2 clients
  20. Ind Living +transport = 2clients
  21. In House residential care + 6 clients
  22. In house Resi + day care + trans[port = 5 clients.

23. NO commissioned service's (assessment, Com Nurse , SW support) =63 clients
24. Residential only(in Borough) =32 clients
25. Residential +day care in Borough =41 clients
26. Residential + day care + transport = 2
27. Residential Out of Borough = 57 clients
28. Residential OOB + day Care = 11 Clients Residential OOB + day care + transport= 2 clients
29. Transport only = 20 clients
30. 70 clients access respite care
31. 164 clients live with family members and a further 7 live with partners.

Nb. Reference to Ind living means all clients not in receipt of residential care, ie. living alone or with family or in supported living. Residential care is 24 hour care.

### Unsuitable packages of care

3. As part of the review it was identified that a number of packages of care were deemed unsuitable in the longer term for 181 clients. This was for a number of reasons the main one being the provision of residential care. This figure also included residential and day services and where days service were not meeting needs of the clients. Also included was residential care that relied on additional day services.

### Residential care

4. Any client in residential, care was classed as unsuitable largely because any residential placement is an unsecure tenancy and as such a formal decision needs to be made as to whether a placement is in the clients best interests. The Audit Commission under NI145 defined unsettled accommodation as:

#### **Definition:**

*The percentage of adults with learning disabilities known to Councils with Adult Social Services Responsibilities (CASSRs) in settled accommodation at the time of their latest assessment or review.*

*Adults with learning disabilities known to CASSRs: learning disabled clients aged 18-64 who are assessed or reviewed in the financial year and who have received a service, as well as those who are assessed and/or reviewed but who have not received a service.*

*Settled accommodation: Refers to accommodation arrangements where the occupier has security of tenure/residence in their usual accommodation in the medium- to long-term,*

*or is part of a household whose head holds such security of tenure/residence. The accommodation types that represent settled accommodation for the purpose of this indicator are:*

- *Owner Occupier/Shared ownership scheme (where tenant purchases percentage of home value from landlord)*
- *Tenant – Local Authority/Arms Length Management Organisation/Registered Social Landlord/Housing Association*
- *Tenant – Private Landlord*
- *Settled mainstream housing with family/friends (including flat-sharing)*
- *Supported accommodation/Supported lodgings/Supported group home (accommodation supported by staff or resident caretaker)*
- *Adult placement scheme*
- *Approved premises for offenders released from prison or under probation supervision (e.g., Probation Hostel)*
- *Sheltered Housing/Extra care sheltered housing/Other sheltered housing*
- *Mobile accommodation for Gypsy/Roma and Traveller community*

***Non-settled accommodation:*** *Refers to accommodation arrangements that are precarious, or where the person has no or low security of tenure/residence in their usual accommodation and so may be required to leave at very short notice. The accommodation types that represent non-settled accommodation for the purpose of this indicator are:*

- *Rough sleeper/Squatting*
- *Night shelter/emergency hostel/direct access hostel (temporary accommodation accepting self referrals)*
- *Refuge*
- *Placed in temporary accommodation by local authority (including homelessness resettlement) – e.g. bed and breakfast*
- *Staying with family/friends as a short term guest*
- *Acute/long stay healthcare residential facility or hospital (e.g., NHS or Independent general hospitals/clinics, long stay hospitals, specialist rehabilitation/recovery hospitals)*
- *Registered Care Home*
- *Registered Nursing Home*
- *Prison/Young Offenders Institution/Detention Centre*
- *Other temporary accommodation*

5. There are cases identified as part of the review that supports the use of residential care and in those cases there should be clear reason why it is in that persons best interest to live in those circumstances ie unsettled accommodation. It is clear that further work will be necessary to review these residential placements to inform if residential care is the best way of meeting and individual needs.

6. One area that is evident from the information on the database is the range of costs for residential provision and the range of services provided for that cost.
- 69 clients are in residential accommodation out of borough at a Net cost of £79,918.12 per week.
  - Out of these 69 clients 40 cost in excess of £900 per week up to £4,360 per week for each client.
  - 13 of these clients are in separate day care at an additional cost of £2,487 per week.
  - 16 of these clients are in specialist placements out of area that need Autistic, MH and High level of Nursing need.
  - There are 32 clients in residential care in area and an additional 41 in residential care with day care services.
  - The cost for these services range from £304 per week to £1,996.13 per week

#### Residential care + day care

7. As part of the 181 unsuitable packages a number of residential cases received a day service in addition to the 24 hour care support. This will need further exploration as residential care should be 24 hour care and not be double funded.

#### Day Services

8. As part of the 181 unsuitable cases a number of those were attending day services that had been recognized as not meeting their needs. Either the clients wanted something different or the care managers felt more could be offered.

#### Family Placement

9. Four clients had been identified as being placed in family placements but these placement's had been classed as residential care and clients charged for this service. Family placements are not seen as an unsettled accommodation and as such should not be seen as residential care. We should also not be charging these clients residential charges. These clients need reviewing and re – assessing. The benefits for the clients would be financial and security of placement. Also those in family placements OOB may be ordinary residence of that LA.

## Housing Numbers

10. As part of the desk top the future housing need for those people with a learning disability was questioned. Of those clients reviewed **113** had housing needs of which **7** were described as urgent. In addition to those there were a further 76 clients who had a potential need in the future, ie living with older carers.

## Elder carers and living with family.

11. The information on the date base so far shows that of those clients reviewed **176** live with family members and **8** live with partners. The total numbers of carers are as follows:
  - Carers over 40 years of age
  - 91 carers over 50
  - 56 carers over 60
  - 35 carers over 70
  - 16 carers over 80
  - 3 carers over 90
12. The number of carers who are elderly does impact on the housing prediction as it is likely that the clients will need a home of there own or residential care if this cannot be provided.

## Advocacy

13. It is clear from the desk top review that there is a need for an Advocacy service for clients with a learning disability. Whilst there is an assumption that a person has capacity to make choices it is also accepted that those people who have a learning disability can be disadvantaged when It come to making choices and they need independent representation. Of those clients reviewed over **54** were identified as needing either an advocate or an IMCA.

## Court of Protection

14. With the drive towards independent living for clients it was clear that some of those would need help to understand a tenancy. The desk top review tried to capture the numbers of those people who may need access to the court of protection when signing a tenancy agreement. The desk top review identified **73**

**clients** who would need Court of Protection input when signing a tenancy. There were a number who could manage an easy read tenancy and many who could manage without any help.

#### Ordinary Residence issues.

15. The desk top review tried to capture the potential for Ordinary residence disputes when considering the future of those clients who live out of area. If we were to address the Unsettled accommodation issue then it may be that the best option for some people will mean that they move into supported living in the area that they are placed and become an ordinary resident of that area. If this is the case then the responsibility for those client then shift to the LA in which they live. This can be a disputed fact as other LAs are likely not to want to accept that responsibility and cost implications. Any client who lives out of this area in residential care may choose to stay in that area rather than move back into Stockton. The desk top review identified **15** clients with this potential or with ongoing disputes.

#### Transitions

16. Information from the desk top review included an overview of those clients who are part of the transition process and due to move into adult services. These figures need considering as when assessed by the adult team they may or may not be eligible for services either in LD or mainstream teams.
  - **20** clients from Sept 2011 to November 2012 will need assessing for adult services of these 9 have a diagnosis of autism, 5 clients with PMLD and 5 with no diagnosis.
  - **14** clients from January 2013 to Dec 2013 will need assessment for adult services of these 8 have a diagnosis of autism 2 PLMD , 2 with severe LD and 2 with severe epilepsy.
  - From Jan 2014 to Nov 2014 **13** clients will need an adult assessment.
17. The difference in eligibility criteria from Children's services and adult services needs considering as it may be that some of those clients do not meet the Substantial criteria needed to access a service in adult teams.

#### Services that need commissioning.

18. The desk top review looked at whether the current package was suitable and if there would be an alternative. There were clear themes coming from the review.
- Specialist services including autism specific services were needed in order to move people on and provide an appropriate service. This was significant with transitions and the number of clients diagnosed as having Autism. 4 clients attending specialist day services out of borough is a good example as well as the 16 clients who are seen as receiving specialist residential care out of borough with a cost range of £900 to £4,000 per week.
  - Alternative to day care. The desk top review evidenced that an alternative to days services is needed. Whilst it is also evidenced that the current days services meets the needs of some clients there are a number who would want or benefit from an alternative. The residential placements that rely on day care in addition to their service also needs further review to ascertain in detail what are the differences in service and differences in cost between those that provide their own day care and those that rely on external day care.
  - Alternative to residential unsettled accommodation. Residential accommodation as evidenced by the data base is seen as unsettled accommodation. There are a number of clients who would want to move into their own homes and would want to live locally. There are equally a number of clients who want to stay where they are and not move at all. The evidence from the desk top review shows that a further piece of work is needed to explore the options open to each client and give informed choices about those options. There is also a piece of work to look at when is residential the only and best option of meeting a client's needs. This work is extensive and covers all OOB places and any arising Ordinary residence issues. There are a number of clients in expensive placements and we need to determine if the packages are value for money and if that particular client needs that level of services.
  - There are a significant number of clients who use respite care in house and this is often overloaded. We need to consider how respite care or short breaks can be offered to carers, This needs to be flexible and a range of options that can meet the needs.
  - Range of service to provide support in own home. The desk top review indicates a need for arrangement of home care support services that can meet the needs of a diverse client group. These services should be able to be

matched to need from Autism to mainstream home care support. The desk top review evidenced that in most cases where an alternative care package was planned a provider of that service had not been found.

- A range of service that is inclusive of the minority groups. The desk top review shows that there is a small take up of service from the BME groups and we need to understand why this is.
- Current supported living schemes need reviewing to determine suitability of packages. The desk top review has indicated that those people living in supported living schemes have a suitable package of care but do have a need for a review of services to see if they are meeting any planned outcomes and enabling clients to be independent.
- The desk top review evidenced that few clients have positive risk assessments in place that encourage choice and positive risk taking . The desk top review showed that **93** clients had been identified as **not** having a positive risk assessment in place. There was evidence of risk assessments on clients files but these were about risk management and not specifically about a client being able to take risks. There may be a piece of work about encouraging Positive risk assessments when compiling care plans in the future for client who want to move on.
- Assistive technology is an area that needs further development. The desk top review shows that there are a significant number of client who could use this service if it was offered and more if it was tailored to suit the needs of the LD client group. A **106** clients were recorded as being able to use assistive technology . There were a number who could not but a significant number of unknowns. This is another piece of work to be incorporated into the assessment and review processes to determine in advance if a client can use assistive technology.

## **SUMMARY**

19. The desk top review looked at all the clients known to the LD team. Initially it began by looking at 506 clients who were regarded as having a service, the number of clients shown on the database at time of writing this report is 661 clients. There is some more work to be done to review those clients that are in review and have not been part of the desk top review.
20. There is also more work needed to answer some of the queries the desk top review has raised about individual packages of care and check the accuracy of some of the information.



21. The number of clients in receipt of Continuing Health care services has not been accurately recorded only those who have been receiving support from the LD team are included on the data base. There needs to be a detailed list of those clients who are CHC and have a learning disability but not currently the responsibility of the LD team( SSD) as this may have an impact on future service need.
22. The issue of who maintains the data base and ensure the information is up to date needs to be resolved. The work done to advise future commissioning and practice should continue and be used to plan services for the future.