



**29<sup>th</sup> October 2012**

**Agenda Item: 9**

**REPORT OF THE SERVICE DIRECTOR, PERSONAL CARE AND SUPPORT  
(YOUNGER ADULTS)**

**PROGRESS REPORT ON DELIVERY OF THE LEARNING DISABILITY AND  
MENTAL HEALTH COMMUNITY CARE EFFICIENCY PROJECT**

**Purpose of the Report**

1. This report is for information purposes and updates on the progress of the Learning Disability & Mental Health Community Efficiency Care project. It compares the project's actual savings achieved to date against its savings target, the challenges in delivering efficiencies, and key achievements. It also outlines the targets to be met by the project during 2012/13 and beyond.

**Information and Advice**

2. The budget approved by the County Council on 24<sup>th</sup> February 2011 required the ASCH&PP Department to make savings and efficiencies totalling £63.827 million for the period 2011/12 to 2014/15. Over £27 million of these were to be delivered in the 2011/12 financial year, through delivery of various projects spanning across both the Adult Social Care and Health and Community Safety.
3. One of these projects is the Learning Disability and Mental Health Community Care Efficiency programme, which has a target to make savings and efficiencies totalling £5.124 million for the period 2011/12 to 2014/15 (£1.281 million each year), through delivery of 11 workstreams that together aim to:
  - a. Reduce the demand for services,
  - b. Review the commissioned level of service,
  - c. Deliver alternatives to residential care,
  - d. Implement new ways of working,
  - e. Tender for new care arrangements,
  - f. Reduce the cost of supplying services,
  - g. Implement equitable, affordable and transparent pricing,
  - h. Apply more robust management controls.
4. A short description of each project workstream is outlined in **Appendix I**.
5. The project is overseen by a Project Sponsor, the Service Director for Personal Care and Support (Younger Adults), supported by a Project Manager and various

Workstream Leads which make up a Project Board that meets monthly to review progress.

6. As at the end of March 2012, the project had achieved its entire Year 1 (2011/12) savings target of £1.281 million, and had already begun to deliver some of its Year 2 (2012/13) savings target ahead of schedule. This includes the full year effect of savings where activity started to generate savings part way through 2011/12. This put the project in a strong position for its second year of delivery.
7. Already in 2012/13, the project has achieved savings in excess of £1.2m, and once again is projected to deliver some of its Year 3 (2013/14) savings target ahead of schedule.

### **Key Project Achievements to Date**

8. Notable project achievements to date includes:

- The majority of savings achieved so far have focused on delivery of efficiencies by changing the way in which services are delivered, fee negotiations with external providers and recommissioning services. As a result, the impact to date on front-line services has been minimised.
- Dedicated staff time has helped to build positive relations with residential care and supported living providers, who have successfully worked together to ensure services delivered represent value for money, benefiting both the authority and Health partners, where they contribute towards placement costs.
- 28 adults have been successfully supported to move from residential care into supported living. This provides them with more housing security, and gives them more control over where they live, who they live with and how they wish to be supported. This work has also resulted in positive work with district councils, in order to ensure there is a suitable supply of supported living properties in Nottinghamshire.
- In addition, there have been a number of successful transitions of younger adults from residential care into supported living. One such case, which involved providing support and accommodation for twin brothers with autism who were approaching age 18, has been promoted as a case study example externally to the local press.
- The project leads have successfully worked together as 'One-Council' with other departments and corporate functions in order to bring mutual benefits. For example, closer working with colleagues in Corporate Procurement in the re-commissioning of the former in-house supported living service and eight Partnership Homes.
- Similarly, officers have worked with external partners to achieve efficiencies and bring improvements. For example, two joint projects are being undertaken with Health commissioning colleagues around people leaving

out of area treatment services and moving back into the local community. One is for people with a learning disability and the other for people with mental health problems:

- The learning disability work has involved developing a jointly agreed commissioning process with two approved providers to deliver supported living options. Set hourly rates have been agreed with the providers, who are assured of the business regardless of which commissioner leads on the support packages.
- The mental health work involves working with health colleagues to develop new cost effective supported living alternatives for individuals with high needs who have historically been accommodated in residential care when they leave out of area treatment, leading to better outcomes for service users.

### **Challenges Encountered**

- Managing the capacity pressures faced by staff involved in implementing the changes, including both service staff and those working in finance, procurement, human resources, pensions, legal services, IT and communications. This has included providing training and guidance, and securing additional temporary support, when required.
- Managing the fast pace of change within the Division, especially at the same time when the Council as a whole is implementing other large-scale changes, such as the new Business Management System, which brings together the former financial, human resources, payroll and procurement systems.
- Developing robust methodologies and processes for measuring, monitoring and reporting on the cashable benefits stemming from the project's workstreams.

### **Savings and Efficiency Targets for 2012/13 Onwards**

9. Moving forward, during 2012/13 savings achieved as a result of cost reduction work with external providers will continue to be the main focus of the project. As the project moves into Years 3 and 4 of delivery (13/14 and 14/15), the following will begin to be the main areas of focus:
  - a. Savings stemming from modernisation work (e.g. moving suitable individuals from residential care into supported living); and
  - b. Reviews of support packages (i.e. identifying where existing care packages need to change in response to changing service user needs and through the use of Assistive Technology) will begin to be the main areas of project focus.
10. A pictorial representation of this shift of focus is provided in **Appendix II**.

11. Notable challenges moving forward include:

- a. Continuing to negotiate fee reductions with external providers, where appropriate.
- b. Working with the new provider of the Partnership Homes to remodel some of the existing eight homes to ensure they will continue to deliver appropriate services for existing service users, whilst being able to meet the demands of the market going forward.
- c. Continuing to work with staff and Supported Living providers to see if there are opportunities for the use of Assistive Technology, where appropriate.
- d. Accurately predicting the number of individuals requiring access to learning disability and Aspergers services over the coming years, to inform budget planning and help to pre-plan appropriate support packages for service users.
- e. Developing person centred support packages for each individual in the *Challenging Behaviour* pilot that are appropriate to their needs, that deliver good outcomes (such as more community presence, more contact with family members and friends, and less physical interventions), and present value for money.
- f. Continuing to identify opportunities to reduce the number and cost of residential placements for service users, by developing suitable alternative options (such as supported living), where appropriate.

### **Other Options Considered**

12. The Project Board, through its monthly meetings, has continued to scrutinise the way in which services are arranged and delivered with a view to identifying further opportunities for achieving efficiencies and improving services. For example:

- a. Identifying improvements needed to the department's Framework system, on which social care staff information and activity relating to individual service users is recorded.
- b. Undertaking a business process review on the annual development of future Transitions / Predicted Needs lists, in order to identify any improvements that can be made to the process to improve budget forecasting.

### **Reason/s for Recommendation/s**

13. This report is for information purposes only and there are no recommendations stemming from it.

### **Statutory and Policy Implications**

14. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights,

the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **RECOMMENDATION/S**

- 1) It is recommended that the report be noted.

**JON WILSON**

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**For any enquiries about this report please contact:**

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### **Constitutional Comments [NAB 10.07.2012]**

15. This report is for information purposes and noting only by the Adult Social Care and Health Committee. Constitutional Comments are not required.

### **Financial Comments (RWK 05/10/2012)**

16. There are no financial implications arising from the report.

### **Background Papers**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- 24<sup>th</sup> February 2011 County Council – Budget meeting. The budget report can be found at: 11-12 Budget Report

### **Electoral Division(s) and Member(s) Affected**

17. All.

ASCH 31

## Appendix I: *Learning Disability & Mental Health Community Care Project* – Description of each Workstream

Workstream Name and Total Savings Target Across Project Lifetime	Description
Transitions / Predicted Needs (NB: no savings target assigned to this workstream)	<p>The project is informed by two enabling workstreams, which do not have any savings targets assigned to them:</p> <p>a). The <i>Transitions</i> strand aims to identify all young people approaching 18 years, including those approaching the end of full time education, who are eligible to receive Nottinghamshire County Council commissioned Learning Disability and Aspergers services in adulthood. Estimated costs are identified.</p> <p>b). The <i>Predicted Needs</i> strand involves considered estimates of additional resource requirements to support adult service users with learning disabilities and Aspergers (who have previously been cared for via other sources, eg families / carers / NHS) over the next 12 months in order to meet predicted demand.</p> <p>Both the <i>Transitions</i> and <i>Predicted Needs</i> work aims to result in a reduction in the number of unexpected / unidentified cases of individuals requiring access to learning disability and Aspergers services, and a more effective response to demographic changes. This helps to ensure that appropriate support packages for service users are pre-planned and the re-investment of savings, which in turn will benefit a wider cohort of service users with eligible needs.</p>
Care Funding Calculator (£990,000)	Applying a 'care funding calculator' (CFC) to all learning / physical disability and mental health residential care placements where current weekly fees are high. The CFC is an Excel spreadsheet, developed by South East REIP (Regional Efficiency and Improvement Programme), and used by several local authorities to provide transparency in the negotiation and placement of service users in residential care. Social workers are involved in the process, to ensure that provision remains appropriate to service users' needs.

Supported Living Alternatives to Residential Care (£1,205,000)	<p>Supporting suitable younger adults (aged 18-65) with learning disabilities who are currently living in residential care to move into supported living*. This will provide a greater degree of choice and control for service users in settled accommodation, and is part of a national drive to reduce reliance on residential care and encourage more independent living.</p> <p>* The Supported Living Service provides support to people with learning disabilities aged 18 or over to help them live as independently as possible in their own homes – on their own, with a partner or with a small group of friends.</p>
Partnership Homes (£300,000)	Re-commissioning care and support services within eight residential care homes that house residents who have a moderate or severe learning disability (commonly known as 'partnership homes'). The successful provider, who took over responsibility for delivery of the service in July 2012, is required to remodel some or all of the homes in order to better meet the needs of current and future service users.
PCT Funding Transfer (£200,000)	Achieving efficiency savings from a £10.2 million budget that transferred to the County Council in April 2011 from the Primary Care Trust.
Developing Assistive Technology Solutions (£200,000)	Using assistive technology to promote the independence of care of younger adults (aged 18-65) with learning disabilities (either living in their own homes, in supported living tenancies or residential care homes) and to reduce the need for other forms of support, such as staff cover at night. The technology will also improve the dignity of care for service users and the quality of life for carers.
Reduction in Supported Living Costs (£750,000)	Working with current providers of supported living to review existing expenditure and identify opportunities to reduce their rates.
Review of Supported Living Hours (£850,000)	Working with providers of supported living to identify whether service user needs have reduced over time, or whether support can be provided in a different way. If the need to change existing packages of care is identified, any changes are agreed with providers, service users and families.
Re-commissioning the former in-house Supported Living Service (£454,000)	Re-commissioning supported living and supporting people services that have previously been delivered in-house to external providers who are approved under the authority's supported living framework agreement.
Challenging Behaviour Pilot (£50,000)	Piloting a process, working with five individuals with learning disabilities who are also labelled as having 'challenging' behaviour, to test how we can better commission alternative support for them, whilst also delivering good outcomes and value for money. This work is being led by the authority and

	delivered in partnership with the Challenging Behaviour Foundation, Health colleagues, service users, families and providers.
Mental Health Residential Care Spend (£125,000)	Identifying opportunities to reduce the number and cost of residential placements for mental health service users.

## Appendix II: How Savings are to be Achieved across the Lifetime of the Project

