

29th October 2012**Agenda Item: 4****REPORT OF THE SERVICE DIRECTOR, PERSONAL CARE AND SUPPORT
FOR OLDER ADULTS****OVERVIEW OF PERSONAL CARE AND SUPPORT FOR OLDER ADULTS****Purpose of the Report**

1. To provide an overview of the responsibilities and services provided by the older adults services.

Information and Advice**Key areas of service**

2. The Service Director for Personal Care and Support (Older Adults) holds the responsibility for a range of diverse services across the County. These include assessment and care management services as well as some direct provision of services to people predominantly over the age of 65 years. Older adults services generally consist of:
 - Services for older people who have mental health issues
 - Services to people in a hospital setting
 - Community-based services provided in people's own homes
 - Residential and respite services
 - Services providing support and assistance to carers.
3. **Demographics – The Local Picture** - The expected increase in the number of older adults across Nottinghamshire is well documented and understood. Currently, 18.1% of the population are over the age of 65 years (150,200) with a predicted increase of 29% by 2025 (194,500). In particular the increase in people over the age of 85 is of significance as the majority of services are provided to those over the age of 80. The table below gives the latest predictions for the County in comparison to similar Counties.

Projected growth of population 85 and over (2012-2030)

	2012	2015	2020	2025	2030
Nottinghamshire	19,800	21,500	25,200	30,700	38,300
Derbyshire	20,200	21,900	25,900	31,500	40,300
Leicestershire	16,100	18,200	22,00	27,100	34,000
Lincolnshire	20,400	22,600	27,100	33,700	42,600
Staffordshire	20,500	22,900	28,000	35,400	45,300
Warwickshire	13,700	15,200	18,300	22,800	29,200

4. **Current Demand and Cost for Services** – Older adult services provide care and support to almost 14,000 older adults across the county. There are currently 5,585 service users over the age of 65 years, receiving a personal budget, of which, 979 receive this through a direct payment. The net revenue budget for older adult services for 2012/13 is £99 million, of which, over 60% is spent on long-term nursing and residential care.
5. Over 9,600 people receive care and support services in their own homes and assessment staff have completed 2,900 new assessments since April 2012
6. Through the development of services providing real alternatives to long-term care over 100 people last year were diverted from long-term care, enabling them to continue to live, with appropriate care and support, at home or in local communities.
7. **Assessment and Care Management Services** - there are currently 14 district-based social work teams providing a range of assessment and care management services to older adults. These are formed around 4 localities and provide assessment of need as well as support planning to service users and their carers. Social work staff are involved in safeguarding work to ensure that vulnerable older people are able to live as safely as possible and assist in identifying and reducing risks that people live with on a daily basis. The number of safeguarding referrals received has increased over the last 2 years; consequently the numbers of assessments have also increased. The percentage of referrals resulting in assessments has decreased from 40% in 2011-12 to 36% in 2012-13.
8. **Referral rates and safeguarding assessments aged 65+**

2011-12		2012-13 actual (Apr to Aug)		2012-13 predicted	
Referral	Assessment	Referral	Assessment	Referral	Assessment
1438	581	787	289	1889	694

9. Social work teams have recently been restructured creating multi-disciplinary teams combining Occupational Therapy and Social Work services into single teams.

10. **Occupational Therapy Services** - there are 25 Occupational Therapist in Older Adults services working across the County. Occupational Therapists can be instrumental in promoting independence and enabling people to remain in their own homes, providing advice, equipment and adaptations thereby enabling people to live safer in a homely environment.
11. The objectives of the occupational therapy service in Nottinghamshire are to assist people with a physical impairment to achieve health and wellbeing by improving their ability to carry out daily activities. This is done by placing the emphasis on supporting independence and enabling people to achieve their maximum potential.
12. There is a range of equipment and adaptations to peoples' homes that can be provided through the occupational therapy service. These are delivered to people following an assessment and equipment is provided through the ICES (Integrated Community Equipment Store) service. This is an equipment service jointly funded with health partners and operated by the Red Cross. Nottinghamshire County Council contributes £1.4m annually to the service.
13. Plans to pilot the training of all community care officers in two integrated teams to be able to undertake social care and OT assessments have been agreed. It is anticipated that this will deliver a more flexible and efficient service by reducing the need for duplicate visits by more than one member of staff.
14. There are a number of factors that are placing increasing demands on the need for occupational therapy services. These include demographic changes, an increase in people wishing to remain or return home at the end of their lives, and service users' choice which has increased the numbers of people with complex health needs and disabilities being cared for in their own home.
15. Given the rising demand for home-based care and support the Older Adults Teams will need to consider how to deliver services more efficiently. Consequently, Daily Living Clinics have been trialled in a number of locations to provide people with a timely appointment for an assessment by an occupational therapist. These clinics could be expanded to include social care as well as OT assessments and help deliver a more flexible, cost effective and timely service.
16. **Hospital based Social work teams** - There are hospital based social work teams based in the five main acute hospitals across Nottinghamshire. These teams work alongside Health colleagues to facilitate safe and timely discharges from Hospital enabling people to return to their own homes in local communities wherever possible. We are working closely with Health to develop and improve integrated discharge teams to maximise joint working and enable patients to be discharged from Hospitals in a safe and timely manner. Currently, we have 1.61 people per 100,000 population delayed in hospital due to social care. This is an improvement on last year when it was 2.6 on average per month. (In July this meant 15 people were delayed across the County).
17. **Older People with mental health issues** – there are a range of services provided enabling people with mental health issues to continue to live in local

communities wherever possible. Many of these services are provided jointly with Health including specialist intermediate care teams and social care support to Memory Assessment Services. Early diagnosis of dementia is one of the key aims of the National Dementia Strategy¹ and locally both Primary Care Trusts have committed additional funding to extend the provision of Memory Assessment Services (MAS) across the county. Advice, guidance and support is crucial to people who are newly diagnosed and their carers and research has shown the early information and support can prevent crisis situations occurring and delay the need for statutory services. Nottinghamshire County Council jointly funds a MAS social care support service which is currently provided by the Alzheimer's Society.

18. **Mental Health/intermediate Care Teams** - provided jointly with Health the teams work specifically with people living with dementia and their carers in local communities to provide support and enable independent living where appropriate. Last year, 232 people received a service, as a result of which 162 remained in their own home and only 22 were admitted into a care home. The other 48 were admitted into hospital, short term care or died. An evaluation of the service showed that of the people that remained at home 75% were still at home 90 days after discharge from the service and after 180 days 67% were still at home.
19. Both Primary Care Trusts have made a commitment to extending this service into all districts. From October 2012 the existing teams of Rushcliffe, Newark and Sherwood, and Broxtowe will be joined by teams in Bassetlaw, Mansfield and Ashfield, and Gedling. These teams are funded mainly through the Primary Care Trusts with annual team costs at around £400,000 per team, with the social care contribution being social work support to each team.
20. **Specialist Short-Term Services** - a range of services are currently provided to facilitate early discharge and to try and prevent direct admission into long-term care from hospital settings. These pilot assessment beds are based in seven care homes providing 33 beds. In the first six months 99 people were accepted into an assessment bed; on discharge 27 of those returned home and only 17 were admitted into a care home, the remaining people were either admitted back into hospital, short-term care or died. This service works in conjunction with the Reablement Service as well as Intermediate Care.
21. There are a number of short-term care beds available throughout the County, providing much needed respite for carers. Last year over 700 people benefited from short breaks in these establishments receiving over 2,529 weeks of respite care (compared to 2,029 in the previous year).
22. **Residential Care Homes** - following the sale of 6 local authority Care Homes to the independent sector, the authority has retained the remaining 6 homes across the County. Business plans are currently being prepared; outlining how these homes can be utilised to provide specialist short-term care, gradually reducing the amount of long-term care provision in the future. These homes

¹ [Living Well with Dementia – a National Dementia Strategy](#) – 3rd February 2009 – Department of Health

currently provide 157 beds achieving an occupancy level of 84 % over the last 12 months.

23. **Extra Care Housing** – the authority, in partnership, currently provides 153 extra care places in five establishments throughout the County. It has been recognised for sometime that additional extra care housing facilities are required in order to provide a real alternative to long-term care. The authority has entered into a procurement exercise investing £12.65m to develop up to seven extra care housing facilities over the next 4-5 years. Phase 1 of the project is almost complete and a report concerning this will also be presented to the Committee today.

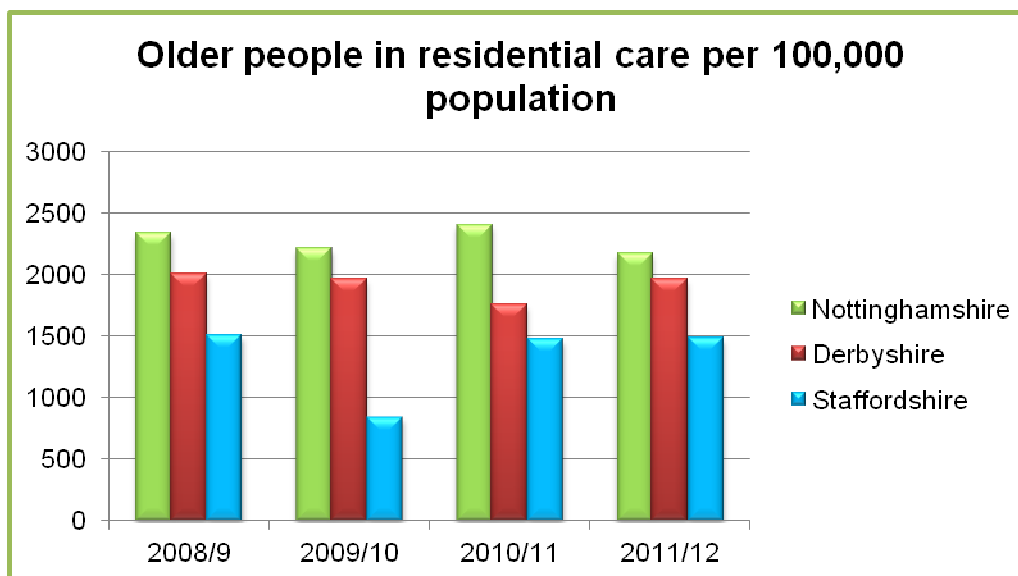
Residential Care Services – Independent Sector. In 2011/12, the authority spent over £55m on long-term care contracting with over 169 residential and nursing care home providers throughout the county. The authority currently supports 2,175 (per 100,000 population) older people in long-term care. The current fees paid to the independent sector range from:

Nottinghamshire County Council – Banded Fee Rates 2012/13

Band	OP Residential	OP Residential Dementia	OP Nursing	Op Nursing Dementia
1	303/348.00	359.00	376.00	386.00
2	391.00	438.00	439.00	480.00
3	417.00	464.00	465.00	506.00
4	443.00	489.00	491.00	532.00
5	469.00	515.00	516.00	558.00

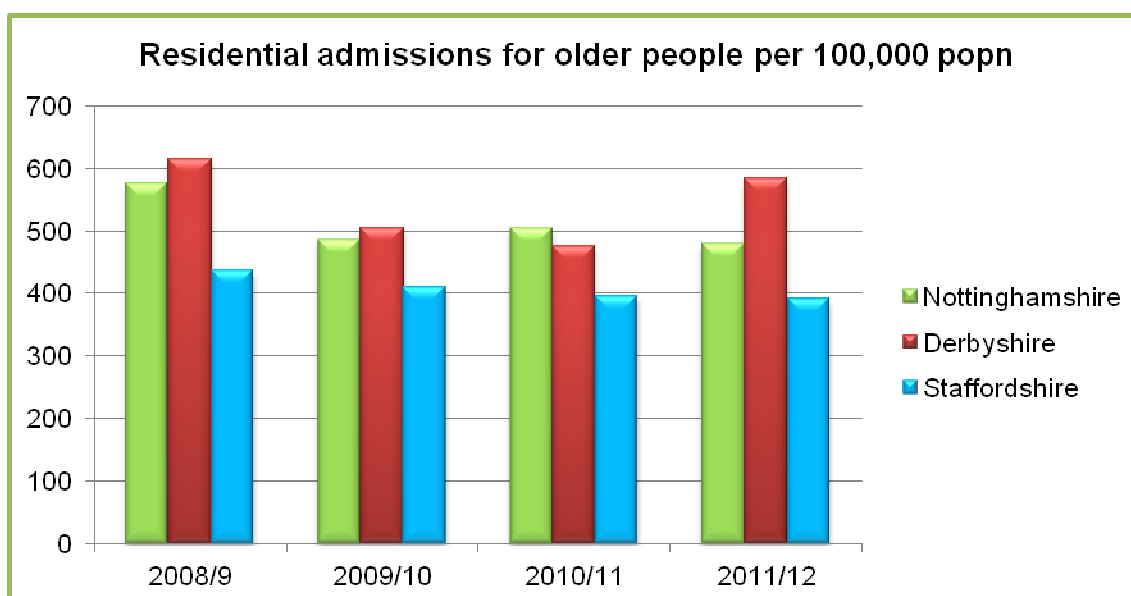
24. Number of older people in long-term care

Older people in residential care per 100,000 population				
	2008/9	2009/10	2010/11	2011/12
Nottinghamshire	2340	2215	2410	2175
Derbyshire	2005	1970	1755	1965
Staffordshire	1510	845	1475	1490



25. Number of admissions of older people to residential care

Residential admissions for older people per 100,000 population				
	2008/9	2009/10	2010/11	2011/12
Nottinghamshire	575	486	503	478
Derbyshire	615	505	475	585
Staffordshire	435	410	395	390



26. Living At Home Project – as one of the key savings and efficiencies projects the Living at Home programme consists of 6 separate projects developing alternatives to long-term care and looking at new ways of enabling older adults to live at home. These projects are as follows:-

- Extra care housing
- Use of Assistive Technology

- Demand Management – looking at ways to avoid or delay unnecessary admissions
 - Joint working with Health
 - Reablement
 - Care and support centres.
27. These projects collectively aim to divert 483 people away from long-term care over the next 4 years. This will result in efficiency savings of £3.1 million over the same time period.
28. A programme board has been established and launch events have been held with staff to engage them fully in the 6 projects.
29. **Carers Services** - According to the 2001 census, there are approximately 83,000 carers in Nottinghamshire. Of these 83,000, 18% were aged 65 and above. This equates to 14,940 older carers in Nottinghamshire. It is likely that this number has increased with an ageing population.
30. All older adult carers are entitled to a Carers' Assessment. A person can have a carers' assessment whether or not the person they care for has had a community care assessment. In 2011/12 over 3,380 people received a carers' assessment.

Summary of services available to Carers

31. **Breaks for carers** - these are planned following the completion of a community care assessment for the service user. Whilst there is no charge for services provided as a result of a carers' assessment, services provided to the service user following a community care assessment, are subject to financial assessment to establish whether a financial contribution is payable.
32. **Carers' Personal Budget** - The authority provides carers' with a personal budget as a one-off payment of up to £200 to help carers look after their own health and wellbeing. This personal budget is often used to fund college courses, driving lessons, funding towards the cost of holidays, funding to support a return to work, gardening, domestic help, etc. During 2011/12, 603 carers received this one-off payment.
33. **Assistive Technology for Carers** - Some carers are eligible for 'Assistive Technology for Carers'. This free scheme provides equipment which can alert the carer, through use of sensors and a portable pager unit, if the person they care for needs help. There is a separate report on today's agenda which covers this in more detail.
34. **Carers' Crisis Prevention Scheme** - North Nottinghamshire Crossroads and East Midlands Crossroads are commissioned to run the crisis prevention scheme, which enables the service user to be looked after at home if the carer has an unforeseen or emergency situation, e.g. admission to hospital or death of a relative.

35. **Emergency Card** - The emergency card is a free small card which identifies the cardholder as a carer in the event of an emergency, when emergency contact arrangements are triggered.
36. **Advice and information for carers** - The Carers' Federation are commissioned to provide free advice and information to all carers. The Carers' Federation also provides information regarding local support groups and services for carers.
37. **'Looking After Me'** - This is a free course run by Nottinghamshire County Health Partnerships, available to adults who care for someone living with a long-term health condition or disability. The course helps carers to make time to look after themselves.
38. **Information for carers** - This is made available on the Council's website, including links to national resources, e.g. Carers Direct, Carers UK, NHS Choices, Direct Gov, and the Princess Royal Trust for Carers. These will provide general and specific information e.g. Carers' Rights, Employment and Education, Money and Benefits, Health Services.
39. **Nottinghamshire Information Prescriptions** - also provides a wide range of information relating to long-term conditions, for example stroke and dementia.
40. **Carers' survey** - The Department of Health requires all local authorities to carry out a survey. This has been conducted during October and involves a random sample of 800 Carers across the County. The results from this will assist in informing future plans and will be presented to Elected Members when the results are available.
41. **Budget for older adults** - the net revenue budget for older adults services for 2012/13 is £99 million. In addition, the County Council has received additional funding from the Department of Health in order to address a number of the current pressures in older adult services. In 2012/13 this additional funding totals £9.262 million which is to be used to address ongoing pressures and explore new ways of working more closely with Health as well as contributing to improved Health and social care outcomes for the people of Nottinghamshire. There is a separate report on today's agenda which covers this in more detail entitled NHS Support for Social Care.
42. Key areas of spend include over £60 million on nursing and residential care and over £23 million on home care and direct payments.
43. **Performance** - overall performance of the service is improving and the department continues to benchmark against others to ensure continued improvement.
44. A key area of performance is in relation to the numbers of older people admitted into and financially supported by the Council in long-term care. This year there have been 332 admissions into long term care (April – August). During the

same period last year, 368 people were admitted into long-term care showing a reduction of 36 admissions.

45. Whilst admissions are reducing there is still a higher number of older people living in long-term care than other comparable Councils (see graph on page 5). Work is underway through the Living at Home programme to address this issue.
46. **Key Challenges** - The actual and predicted growth in demographics for older adults demonstrates the anticipated increase in demand for services. Supporting older adults living at home remains a challenge given the ageing population many of whom have multiple long term conditions, requiring significant health and social care support. Many traditional services e.g. home care were not established to meet the needs of older people with such complex and multiple conditions. There is, therefore, a need to transform many services to meet the growing and changing needs of our population.
47. The service continues to work well with partners to facilitate safe and timely discharges from hospital. However, the recent unprecedented demand on the major acute hospitals has been challenging, despite this we continue to maintain good standards in terms of hospital discharge and have relatively few delays across the County.
48. The focus on avoiding unnecessary admissions into long-term care and hospitals combined with the need to discharge people from hospitals sooner will place increased demand on community-based services.
49. Safeguarding adults continues to be a high priority and is a clear focus for work both in communities and residential care settings. There has been a significant rise in safeguarding referrals in older adults services, rising from 1,253 in 2010/11 to 1,438 2011/12. It is anticipated that the development of the Multi-Agency Safeguarding Hub (MASH) will help to manage this area of work in the future.

Areas for Further Development

50. Over the coming year further work will be completed, exploring closer joint working arrangements with a range of partners, including health. It is anticipated that a number of current pilot schemes will help to inform this work and lead to improved services for services users and their carers as well as delivering savings and efficiencies across the health and social care economy. The department anticipates an increase in integrated commissioning with Health to achieve identified joint objectives.
51. Building upon the range of real alternatives to long-term care remains a priority and best use will be made of the NHS Support to Social Care funding to trial a number of new services and implement new ways of working.
52. Work will continue on the 'Personalisation journey' to ensure that older adults can maximise the use of personal budgets and direct payments and exercise

their choice and control over how their needs are met in the future in the context of maximising independence wherever possible.

53. The six retained residential care homes will evolve into more specialist and short-term care and support centres in local communities. They will promote independence and provide much needed respite and support for carers. In the future more flexible short-term care including; respite, assessment, crisis response services, will be developed all with the aim of enabling people to return to (or remain in) their homes.

54. Work will continue to provide better and more timely information, advice and signposting (to other services) which will divert people who do not need social care services thereby enabling a greater focus of resources on those with the greatest risk of losing their independence.

Reason/s for Recommendations

55. This report is for information only and there are no recommendations made.

Statutory and Policy Implications

56. 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 Committee notes the content of the report.

DAVID HAMILTON

Service Director, Personal Care and Support (Older Adults)

For any enquiries about this report please contact:

David Hamilton

Tel: (0115) 977 3909

Email: David.Hamilton@nottscg.gov.uk

Constitutional Comments

57. Because the report is for noting only, no constitutional comments are required.

Financial Comments (RWK 17/10/2012)

58. There are no additional financial implications arising from the report.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All.

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