

Adult Social Care and Health Committee

Monday, 03 June 2013 at 10:30

County Hall, County Hall, West Bridgford, Nottingham NG2 7QP

1	To note the Appointment of Chair of the Committee and Vice-Chair. To note appointment of Councillor Muriel Weisz as Chair of the Committee and Councillor Yvonne Woodhead as Vice-Chair.	1-2
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minutes

Meeting ADULT SOCIAL CARE AND HEALTH COMMITTEE

Date 22 April 2013 (commencing at 2.00 pm)

Membership

Persons absent are marked with 'A'

COUNCILLORS

Kevin Rostance (Chairman)
Stuart Wallace (Vice-Chairman)
Reg Adair
Ged Clarke
John Doddy
A Rachel Madden
Geoff Merry
Alan Rhodes
Martin Suthers
Chris Winterton
A Jason Zadrozny

Ex-officio (non-voting)
A Mrs Kay Cutts

OTHER COUNCILLORS IN ATTENDANCE

Councillor Mel Shepherd

OFFICERS IN ATTENDANCE

Caroline Baria, Service Director, Joint Commissioning, Quality and Business Change
Paul Davies, Democratic Services Officer
Sarah Gyles, Committee Support Officer
David Hamilton, Service Director, Personal Care and Support for Younger Adults
Jennie Kennington, Senior Executive Officer
Paul McKay, Service Director, Promoting Independence and Public Protection
David Pearson, Corporate Director, Adult Social Care, Health and Public Protection
Anna Vincent, Independent Group Administration/Research Officer
Jon Wilson, Service Director, Personal Care and Support for Younger Adults

MINUTES

The minutes of the last meeting held on 25 March 2013 were confirmed and signed by the Chairman, subject to a correction to show that Councillor Steve Carroll had been present at the meeting in place of Councillor Alan Rhodes.

APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors Madden and Zadrozny (both on other County Council business).

DECLARATIONS OF INTEREST

There were no declarations of interest.

AGENDA ORDER

With the consent of the Committee, the Chairman changed the order of the agenda.

PROGRESS ON DEVELOPMENT INITIATIVES IN THE SOCIAL CARE WORKFORCE

RESOLVED: 2013/035

That the report be noted, and a progress report be presented in early 2014.

PRESSURE ON HEALTH AND SOCIAL CARE SERVICES FOR OLDER PEOPLE

RESOLVED: 2013/036

That the report be noted, and progress reports be presented to future meetings of the committee.

TENDER FOR REPLACING THE INFOCARE SYSTEM

RESOLVED: 2013/037

That approval be given to commencing the tendering process for a new electronic monitoring system to replace the InfoCare system.

COPRODUCTION IN MENTAL HEALTH SERVICES

RESOLVED: 2013/038

- (1) That the excellent work being undertaken by the Co-production Services and the intention to expand this to other vulnerable groups in the county be noted;
- (2) That 1 fte (37 hours) temporary Co-production Co-ordinator, Band C, scp 39-44 be extended for a further year from 31 March 2014 to 31 March 2015 and the post continue to be allocated approved car user status;
- (2) That 3 fte (37 hours) temporary Co-production Workers, Band A, scp 29-34 be extended for a further year from 31 March 2014 to 31 March 2015 and the posts continue to be allocated approved car user status;

WORK PROGRAMME

RESOLVED: 2013/039

That the work programme be noted, subject to the inclusion of progress reports on development initiatives in the social care workforce and pressures on health and social care services for older people.

The meeting closed at 3.05 pm.

CHAIRMAN

3 June 2013**Agenda Item: 5****REPORT OF CORPORATE DIRECTOR, POLICY, PLANNING AND
CORPORATE SERVICES****MEMBERSHIP AND TERMS OF REFERENCE****Purpose of the Report**

1. To note the Committee's membership and terms of reference.

Information and Advice

2. The membership of the Adult Social Care and Health Committee is:

Councillors

Alan Bell

John Cottee

Dr John Doddy

Sybil Fielding

Michael Payne

Andy Sissons

Pam Skelding

Stuart Wallace

Muriel Weisz

Jacky Williams

Yvonne Woodhead

Ex-officio (non-voting)

Councillor Alan Rhodes

3. The Committee's terms of reference are:
4. The exercise of the powers and functions set out below are delegated by the Full Council in relation to adult social care and health:
 - a. All decisions within the control of the Council including but not limited to those listed in the Table below
 - b. Policy development in relation to adult social care and health, subject to approval by the Policy Committee or the Full Council
 - c. Review of performance in relation to the services provided on at least a quarterly basis
 - d. Review of day to day operational decisions taken by Officers

- e. Approval of relevant consultation responses
 - f. Approval of relevant staffing structures as required
 - g. Approving all Councillor attendance at conferences, seminars and training events including any expenditure incurred, within the remit of this Committee and to receive quarterly reports from Corporate Directors on departmental officer travel outside the UK within the remit of this Committee.
5. If any report comes within the remit of more than one committee, to avoid the report being discussed at several committees, the report will be presented and determined at the most appropriate committee. If this is not clear, then the report will be discussed and determined by the Policy Committee.
 6. As part of the detailed work programme the Committee will receive reports on the exercise of powers delegated to Officers.
 7. The Committee will be responsible for its own projects but, where it considers it appropriate, projects will be considered by a cross-committee project steering group that will report back to the most appropriate Committee.

Table
Responsibility for adult social care matters (eg. people aged 18 or over with eligible social care needs and their carers)
Responsibility for promoting choice and independence in the provision of all adult social care
Responsibility for promoting good health, health improvement and individual and community wellbeing and the reduction of health inequalities

Other Options Considered

8. None.

Reason/s for Recommendation/s

9. To assist the Committee in its work.

Statutory and Policy Implications

10. 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) That the Committee's membership and terms of reference be noted.

Jayne Francis-Ward
Corporate Director, Policy, Planning and Corporate Services

For any enquiries about this report please contact: Paul Davies, x 73299

Constitutional Comments

1. As the report is for noting, no constitutional comments are required.

Financial Comments

2. None.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All

3rd June 2013**Agenda Item: 6****REPORT OF CORPORATE DIRECTOR, ADULT SOCIAL CARE, HEALTH
AND PUBLIC PROTECTION****OVERVIEW OF ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION****Purpose of the Report**

1. To provide an overview of the responsibilities of the Adult Social Care, Health and Public Protection department.

Information and Advice

2. The department has specific responsibility for:
 - planning and delivery of health and social care services across Nottinghamshire
 - delivery of housing related support services on behalf of the Supporting People partnership
 - leading the implementation of national and local standards in our services
 - working in partnership with other care providers, service users, carers and local stakeholders to develop, plan and deliver services
 - promoting social inclusion and wellbeing
 - emergency planning to ensure that effective arrangements are in place to manage emergencies and civil contingencies in the county, including safety in sports grounds
 - registration of births and deaths, and conducting civil marriages, civil partnerships and citizenship ceremonies
 - ensuring a fair and safe trading environment for consumers and reputable traders
3. The Public Protection services (Trading Standards, Emergency Planning and Registration Services) are overseen by the Community Safety and Planning and Licensing Committees.

Key strategies and service developments

4. **Personalisation** - The most significant change for adult social care is 'personalisation' and offering choice and control to people through use of Personal Budgets and Direct Payments. From 3 October 2010, all new service users were put onto a Personal Budget and this has taken place alongside reviewing every service user eligible for a Personal Budget.

5. Good progress has also been made in offering a direct payment to service users with dementia and Nottinghamshire is one of the better performing local authorities in this respect, according to the Alzheimer's Society. During 2013/14 the department will focus on extending the offer of a Personal Budget to new service user groups and ensuring all service users are on a Personal Budget regardless of the care setting, such as residential homes.
6. **Reablement** - The department aims to provide support to people that will enable them to regain or maintain their independence wherever possible, to avoid unnecessary hospital admissions and support successful discharge from hospital care, and to avoid the need for long term care support. To this end, the department is promoting flexible ways of working across the County to provide an effective multidisciplinary reablement service through a range of flexible services in a variety of community settings, including intermediate care and home based services.
7. The Short-Term Assessment and Reablement Team (START) works with people to help them regain the skills and confidence to live as independently as possible. It helps with personal care and domestic care tasks. START staff may suggest doing things differently to how they have been done in the past, offer small items of equipment to make tasks easier and inform people about other kinds of help they could receive. This support normally lasts for up to six weeks and is free of charge. During this time support needs are constantly reviewed to see if people will require any long-term personal support.
8. **Joint Commissioning** – There is a significant inter-relationship between services to adults with social care needs and many health services, as well as a significant overlap in relation to cost. Improving outcomes for service users and providing cost effective health and social care services requires excellent joint commissioning. The Health and Wellbeing Board is well placed to provide leadership to promote integrated commissioning and provision between health, public health and social care. The Health and Wellbeing Board is legally required to produce a Joint Strategic Needs Assessment and a Health and Wellbeing Strategy.
9. The aim of the Health and Wellbeing Strategy (HWS) is, based on evidence in the Joint Strategic Needs Assessment, to jointly agree what the greatest issues are for local communities, what can be done to address them and what outcomes are intended to be achieved. Commissioning plans across health and social care should be aligned to the HWS.
10. The HWS will not reflect the entirety of what needs to be commissioned. It will focus on the issues requiring greatest attention that also have the potential to make the biggest difference. The first version of the HWS largely reflects common priority areas already included in current strategies.
11. There are established joint commissioning arrangements with Health in place for the following areas:
 - Younger adults (Mental Health, Learning Disability & Autistic Spectrum Disorder, Carers)
 - Older adults (Older People & Older People Mental Health, Carers, Physical Disability, Sensory Impairment)
 - Substance Misuse

12. The Health and Wellbeing Implementation Group oversees the development and delivery of the joint commissioning agenda.

13. Examples of successful joint working to date include:

Just Checking - a lifestyle monitoring system involving the placement of sensors within the home of an older person with dementia, to ascertain their movements, routine and habits which allows assessment of the person to establish whether they are at risk living at home and whether placement into long term care may be necessary. This is funded by NHS Nottinghamshire County and the County Council.

During the pilot stage of the scheme, 11 out of 14 individuals initially identified as requiring residential care were able to be supported at home on an ongoing basis. The net cost saving from diverting people from residential care as a result of Just Checking is an average of £5,675 per person per year. The robust community based assessment tool can reduce the hospital length of stay and results in better targeted community care packages, reducing the risk of hospital admission and readmission. During 2011/12, 179 assessments of people with dementia were informed by use of the Just Checking system.

Emergency Department Avoidance Support Service (EDASS)

This is a pilot scheme funded jointly by NHS Nottinghamshire County and the County Council and based at acute hospitals. The aim is to reduce avoidable hospital admissions through provision of a rapid response crisis support service. To date the scheme has succeeded in diverting around 700 people from the emergency departments each year.

Organisational Arrangements

14. Four Service Directors oversee key functions within the department:

- The **Promoting Independence and Public Protection** service is responsible for the management of customer access to adult social care services, the development of the personalisation agenda, provision of reablement services and Trading Standards, Emergency Management and Registration Services.
- The **Joint Commissioning, Quality and Business Change** service is responsible for the management of business change and support, strategic oversight of the safeguarding adults agenda, service commissioning and managing the performance and quality of contracted care providers, policy and performance, and supported employment services.
- The **Personal Care and Support Younger Adults** service is responsible for the assessment and commissioning of a range of support services to younger adults (under 65) with physical disabilities, mental health needs and learning disabilities. This includes county wide teams for adults with Asperger's syndrome and adults who are Deaf or visually impaired (ADVIS). The service also manages day services, residential services and the Shared Lives Service.

- The **Personal Care and Support Older Adults** service is responsible for the assessment and commissioning of a range of support services to older adults (over 65). The service also manages 6 Care and Support Centres and hospital based social work teams.

Budget

15. In 2013/14, the department is responsible for a gross budget of £317.845m; the net budget is £218.891m and income accounts for £98.954m. £2.6m of this is the budget for Public Protection services (Trading Standards, Emergency Management and Registration).
16. The department manages a care market of £228m and works in partnership with over 300 care providers from the voluntary, statutory and independent sectors. Around 72% of the department's gross expenditure is on the commissioning of external services that deliver care and support to people with critical and substantial needs.
17. In common with the Council as a whole, Adult Social Care, Health and Public Protection is making savings and is forecast to save £65m in the 4 year period from 2011/12 to 2014/15. There are currently 42 savings and efficiencies projects in progress across the 4 service areas.
18. The 2011/12 NHS Operating Framework provided details of non-recurrent Primary Care Trust (PCT) allocations for 2011/12 and 2012/13 to be transferred to local authorities to invest in "social care services to benefit health and to improve overall health gain". It was stipulated that the funding should be used for social care services. Additional funding, allocated by Department of Health in January 2012 to support this same agenda increased the allocation by around £2m. In January 2012 the Department of Health announced an additional one-off allocation for 2011/12. For Nottinghamshire this means additional funding to the sum of £2.233m.

Performance

19. Previously all Councils were expected to report to the Care Quality Commission (CQC) on their achievements and areas for improvement. For adult social care the CQC then awarded a performance rating. In 2009-10 the CQC judged that Nottinghamshire County Council was 'performing excellently'. This was the third year in succession that the Council was judged as excellent – the only Council in the East Midlands to be in this position.
20. In April 2010 the Government changed the way it expects local authorities to report on their performance. The Council is now required to be 'self regulating', meaning that it is now the Council's responsibility to monitor and report on its own performance through:
 - self-assessment of performance targets
 - reviews by other organisations – the Council was the first in the East Midlands to undertake a Peer Challenge in April 2013
 - seeking the views of people who use Council services
 - consulting the wider community on specific issues

- using survey information collated by the Department of Health (DoH) from people receiving Council services
- receiving people's views and comments through the complaints and compliments process.

21. The annual performance assessment of councils with adult social care responsibilities has now ceased. Publication of the Government's Vision for Adult Social Care, Transparency in Outcomes, Taking the Lead: Self Regulation and Improvement in Local Government, and agreement on the Adult Social Care Outcomes Framework has put the focus on Sector Led Improvement. This is founded on the principle of self regulation; expecting councils to take responsibility for their own performance, and improvement being best achieved through engagement with citizens, with collective responsibility between councils and partners.

22. Although the authority is no longer required to report to the Government on a large number of national performance indicators, we continue to assess ourselves against some of these to help improve our performance.

23. The department will provide regular reporting to the Committee on 5 key performance indicators which are listed below:

- Proportion of adults who have had a safeguarding assessment which leads to a safeguarding plan
- Number of people (aged 65+) financially supported in residential and nursing care
- Proportion of people requiring no service after reablement
- Rate of delayed hospital discharges caused by a lack of social care service provision
- Proportion of service users on a personal budget.

24. The Government does require the Authority to monitor and report on performance against four categories within an Outcomes Framework. The categories require us to look at how well services:

- Enhance the quality of life for people with care and support needs
- Delay and reduce the need for care and support
- Ensure that people have a positive experience of care and support
- Safeguard adults whose circumstances make them vulnerable and protect them from avoidable harm

25. The key priorities for the department, along with actions and targets, are identified in the ASCH&PP Business Plan. The latest plan covers the period from 2011-2014 in line with the Council's Strategic Plan.

Key Responsibilities and Processes

26. **Assessment and eligibility for services** - The department uses Government guidance to decide whether a person's ability to live independently would put them at risk if services are not provided or arranged to help them. This is called Fair Access to Care Services guidance (FACS). If there is a risk to a person's independence the department has to decide whether

the risk is critical, substantial, moderate or low. Councils have a statutory responsibility to meet needs that are not met by other means, such as through care provided by informal carers or the health service.

27. People will be **eligible for help** with any problems that pose a **critical or substantial risk** to their independence. If the identified problems pose a **moderate or low risk** to their independence people **may not be eligible for help** from the Council.
28. The Council has a significant role in providing information and advice for people who are not eligible for Council provided social care services. The Council has recently joined up with Nottingham City Council, Leicester City Council and Leicestershire County Council to provide Choose My Support - a web based portal that allows service users, carers, staff and the public to look at services and products available from providers who have registered with the Council. There is also the Notts 50+ website providing information targeted at older people.
29. The Community Care Assessment (CCA) is the core assessment used by staff to assess the needs of all service users.
30. The CCA is used to:
- assess presenting need and agree level of support required
 - establish the amount of informal care that is available
 - determine eligibility for long term social care support. Staff must provide evidence to support their decision, based on Fair Access to Care Services guidance.
 - collect information to inform a referral to other agencies if required. It is the responsibility of the worker to make the necessary referrals or enquiries to other agencies based on the information provided by the service user or carer during the assessment.
31. If an assessment identifies eligible need people will be offered a personal budget. This is an amount of money identified to meet the individual's long-term social care needs. Personal budgets can be provided in three different ways:
- **Direct payment** - this is a cash payment given to allow people to buy the support they need. A direct payment allows people the most flexibility and control over the support they need. It also means people have more responsibility for arranging their own support
 - **Managed personal budget** – the council arranges the services that meet a person's support needs. A managed personal budget is less flexible than a direct payment but people have less responsibility to arrange their own support.
 - **Mixed personal budget** – people can arrange part of their support themselves using a direct payment and ask the Council to arrange the rest using a managed personal budget.
32. **Charging for services** - Service users have a financial assessment to decide the contribution towards their Personal Budget. This is undertaken in line with the Fairer Contributions Policy which was introduced nationally in 2010. Fairer Contributions represents a fundamental shift from charging for units of service (Fairer Charging guidance) to people making a contribution to their total service package.

33. The service user's contribution is based on the amount of personal budget allocated and what the person can afford – this is identified by the financial assessment. Some elements of service users' income will be disregarded. This is known as the set amount. It includes the Pension Credit Minimum Income Guarantee plus 25%, a certain amount allowed for extra costs associated with a disability, some benefits, earnings and housing costs. The Pension Credit Minimum Income Guarantee is set by the Government and depends on an individual's personal situation.
34. The service user's contribution will be no more than the weekly personal budget and people on low incomes will pay less or, in some circumstances, nothing at all. People with savings above £23,250 will pay the full cost of the Personal Budget/service, in line with charging for residential care.
35. **Support planning** - Once people know their indicative personal budget a support plan is devised. This must clearly show what support is needed (such as help with washing or dressing or getting out in the community); what services or activities the service user intends to spend their personal budget on to meet these needs, what plans they have for an emergency (for example carers being ill) and any risks there are in the plan.
36. Social care staff will help people complete the support plan, as well as family, friends or an advocate. The support plan has to be agreed by the Council to ensure it is affordable, legal and a proper use of social care funds. The department publishes a social care directory, which provides details of a range of organisations across Nottinghamshire that can provide support, services and activities that can be used in support planning. The Support with Confidence register provides a list of approved personal assistants who have been trained in supporting people to live independently. They have all had enhanced Criminal Records Bureau checks and references.

Key Partners/Partnerships

37. The Nottinghamshire Safeguarding Adults Board (NSAB) is the multi agency group of senior managers from key organisations responsible for developing and implementing Nottinghamshire's strategy for safeguarding vulnerable adults. Safeguarding adults is about enabling those who are or may be in need of community care services to retain independence, wellbeing and choice and to live a life that is free from abuse and neglect.
38. The aim of the Board is to safeguard vulnerable adults from harm and abuse by effectively working together. NSAB has four standing sub-groups: Communication, Training, Quality Assurance and Serious Case Review. It is through these sub-groups that the work of the Board is delivered. In addition to the board, a Countywide safeguarding adults partnership has been established with over forty organisations who come together to advise the Board, participate in safeguarding developments, and act as a conduit for dissemination of information across the County.
39. There are 6 newly formed Clinical Commissioning Groups with a Service Director from Adult and Children's Services linked to each group:
- Newark and Sherwood
 - Bassetlaw

- Nottingham North and East
- Principia (covering Rushcliffe)
- Mansfield and Ashfield
- Nottingham West

40. A shadow Health and Wellbeing Board was established in 2011. The Board is chaired by the Deputy Leader of the Council and includes 5 Councillors, lead GPs from the Clinical Commissioning Groups, representatives from the District Councils and Healthwatch, Director of Children's, Families and Cultural Services, Director of Public Health and Director of Adult Social Care, Health and Public Protection. The Health and Wellbeing Board started operating on a statutory basis from 1st April 2013.

41. As already mentioned the Board is responsible for the production of a Joint Strategic Needs Assessment and a Health and Wellbeing Strategy for the County.

The future of adult social care and reform of adult social care funding

42. It is a fantastic achievement that people are living longer, participating in and contributing to society. However, at the same time needs are steadily increasing. Over the next 20 years, the number of people aged 65-84 is expected to increase by a third; the number of people over 85 is expected to double.

43. The Commission on Funding and Support of Social Care, headed up by Sir Andrew Dilnot, published its recommendations and report in July 2011. The Commission identified that under the current system adult social care expenditure will need to increase from £14.5 billion to £22.8 billion, the equivalent of £125 million for Nottinghamshire by 2025. Prior to that, the Law Commission had published a report proposing the need for a major review of the law relating to adult social care.

44. The Government's response to the recommendations made by the Commission are:

- a cap of £72,000 on care costs
- free care for adults who have eligible care and support needs before the age of 18, and a lower cap for those of working age
- moving the upper capital threshold for state support from £23,250 to £118,000 (for adults in residential care)
- increasing the lower threshold for phased financial state support from £14,250 to £17,500 (for adults in residential care)
- In addition to care costs everyone will be expected to contribute to general living expenses estimated at around £12,000 per year.

Implementation of the new system has been brought forward to April 2016

45. The Care Bill 2013 was presented in the recent Queen's Speech. The key headings from the Bill are as follows:

- legal entitlement to a personal budget
- right for carers to receive assessment and support
- duty for local authorities to prevent, delay or reduce the need for care and support

- duty for local authorities to undertake responsibilities with aim of integrating services with Health
- safeguarding adults on a statutory footing – local authorities responsible for convening adult safeguarding boards and involving police and the NHS
- introduction of national eligibility threshold for care and support
- introduction of cap on the costs that people will have to pay for care
- universal deferred payment scheme so that people will not have to sell their home in their lifetime to pay for residential care
- local authorities required to develop and maintain a diverse range of high-quality care providers in their area
- Clarification of protection in place to ensure care not disrupted if provider goes out of business
- Ofsted-style ratings for hospitals and care homes

Reason/s for Recommendations

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

Statutory and Policy Implications

47. 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 PEARSON
Corporate Director

For any enquiries about this report please contact:

Jennie Kennington
Senior Executive Officer
Tel: 0115 9774141
Email: jennie.kennington@nottsccl.gov.uk

Constitutional Comments

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

Financial Comments (CLK 23/05/13)

49. There are no financial implications contained in this 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:

ASCH&PP Business Plan 2011-2014

Electoral Division(s) and Member(s) Affected

All.

ASCH127

3rd June 2013**Agenda Item: 7****REPORT OF SERVICE DIRECTOR, PERSONAL CARE AND SUPPORT
(YOUNGER ADULTS)****COMMISSIONING OF SENSORY IMPAIRMENT SERVICES****Purpose of the Report**

1. This report seeks approval to combine the commissioning of the Deaf Floating Support Service and Dual Sensory Impairment services to deliver greater efficiencies. The report also seeks to reduce the impact of Supporting People savings on the contract value for the Deaf Floating Support Service.

Information and Advice

2. Supporting People (SP) currently funds two services for people with a sensory impairment:
 - The Deaf Floating Support Service
 - One member of staff to co-ordinate volunteers and provide Dual Sensory Impairment Support services within the Adult Deaf and Visual Impairment Service (ADVIS).

Deaf Floating Support

3. The Deaf Floating Support service provides housing related support to twenty-eight Deaf service users at any one time by staff trained in British Sign Language. The current funding allocated to this service is £96,000.
4. On 30th June 2011 the Council approved changes to the Supporting People programme that would deliver savings of £10 million against the 2010/11 budget.
5. The savings in relation to Deaf floating support are planned to be delivered through a phased reduction during 2013/14, taking initial effect in October 2013 and a further saving to be delivered by April 2014. Following an assessment of the impact on Deaf floating support and the likelihood of a reduction in this service leading to a potential increase in the costs of other Nottinghamshire County Council services, the target saving has been reduced. This will enable the Deaf Floating Support Service to remain viable. There remains £74,000 funding available for this service.
6. This service is effective in preventing Deaf service users from accessing more costly social care services.

7. Financial modelling based on a lower hourly rate and a more innovative approach to service delivery has forecast that a newly procured service at the new funding level could provide support to twenty-five service users.

Dual Sensory Impairment Service (DSI):

8. There is £28,000 current Supporting People funding allocated to the Dual Sensory Impairment Support Service. This is a contract held by Nottinghamshire County Council which pays for a volunteer co-ordinator to work with people that are both Deaf and Blind.
9. The Dual Sensory Impairment Service has already achieved a saving of £10,000 and contributed to the overall savings achieved by the Adult Deaf and Visual Impairment Service (ADVIS).
10. In July 2012 the Adult Social Care and Health committee approved the team establishment for ADVIS including consideration of tendering this part of the service.
11. The Dual Sensory Impairment (DSI) team does not undertake assessment work but provides direct support to Deaf/Blind service users in the community. The focus of work is on prevention and other local authorities commission this via independent and voluntary sector organisations.
12. There are benefits in tendering the Dual Sensory Impairment and Deaf Floating Support services together. Not only will this provide for a more efficient procurement process for the County Council, but also provide for management and overhead savings for the successful provider from the award of a single contract. By tendering the DSI team there will be a reduction in management responsibilities for the current Team Manager of ADVIS, to align this with other single management teams.
13. It is recommended that the Deaf Floating Support Service be tendered in conjunction with the Dual Sensory Impairment services to ensure maximum efficiency. The service would be tendered during 2013 with the new contract operational from 1st January 2014.

Other Options Considered

14. Tender the Deaf Floating Support Service separately. However, this would not achieve the same level of efficiencies and economies of scale in tendering the services together.
15. Maintain the service in-house. This would require an increase in management hours in terms of a more permanent continuation of the Senior Practitioner and would therefore increase costs.

Statutory and Policy Implications

16. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, 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.

Implications for Service Users

17. Service users within the current Dual Sensory Impairment Service will continue to receive a service. There is no change to the criteria and there are no financial contributions to this service at present. Referral routes to the service will be via ADVIS and service users will continue to meet eligibility criteria in the majority of cases. There is currently a mix of Supporting People and mainstream funding and there will be no change in access to the service.
18. The Deaf Floating Support Service will reduce from supporting 28 people to 25 people in order to achieve the outlined savings.

Financial Implications

19. The combined value of funding available for a joint contract is £124,000. This includes Supporting People funding of £74,000 for the Deaf Floating Support Service; and Supporting People funding of £28,000; together with ADVIS funding of £22,000 for the DSI support service element.
20. This proposal will continue to meet the adjusted saving requirements in line with the reduction in Supporting People funding contained within the budget for 2013/14.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee:

- 1) Agrees to procure the Deaf Floating Support Service and the Dual Sensory Impairment Service together as a single tender exercise.

JON WILSON

Service Director for Personal Care and Support – Younger Adults

For any enquiries about this report please contact:

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Group Manager - Disability South

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Constitutional Comments (LM 22/05/13)

21. The Adult Social Care and Health Committee has delegated authority to approve the recommendations in the report.

Financial Comments (KAS 22/05/2013)

22. The financial implications are contained within paragraphs 19 and 20 of the report.

Background Papers and Published Documents

None

Electoral Division(s) and Member(s) Affected

All

ASCH 123

3rd June 2013**Agenda Item: 8****REPORT OF THE SERVICE DIRECTOR FOR PERSONAL CARE AND
SUPPORT – YOUNGER ADULTS****SHARED LIVES – CARER PAYMENT PROCESS****Purpose of the Report**

1. The purpose of this report is to seek approval for consultation on proposed Shared Lives payment rates and service users' contributions.

Information and Advice**Background**

2. The County Council has operated an Adult Placement Scheme (APS) providing long-term placements and short-term breaks in a carer's home for adults with a learning disability for many years. This model ensures trained and approved carers are able to look after vulnerable people in a household environment, providing an alternative to residential care.
3. In 2011/2012 the department developed a business case to propose that the APS service should be developed into a new service, called Shared Lives. Shared Lives is a service delivered by individuals and families within the community to people in need of support in their day to day lives. This will move away from the idea of just offering an adult fostering arrangement to providing a range of flexible support options that promote independence and community inclusion. The scheme will also be expanded to support more adults with a learning disability, as well as other service area groups including mental health, physical disability and older people. This expanded service will allow Shared Lives carers to provide a range of services including:
 - Short or long-term accommodation and support provided within the carers own home.
 - Rehabilitative or transitional support.
 - Short breaks – a couple of weeks, over night or just for an evening or a day (e.g. if the service user usually lives with their own family or another Shared Lives carer).
 - Day time support.
 - Outreach support where a carer acts as 'extended family' to someone living in their own home.
4. The service is managed by a small team within Nottinghamshire County Council who have the responsibility of recruiting and training carers, taking service user referrals, matching

service users and carers according to the needs of the service user and capacity of the carer. The team will then monitor the placements and offer on-going support to the carers.

5. Individual carers join the Shared Lives scheme which is registered with the Care Quality Commission (CQC). The Nottinghamshire County Council team includes the scheme's registered manager and ensures that individual carers meet the CQC standards.

New Payments Rates for Carers

6. As part of the development of the new service we are looking at all existing processes. At a meeting with existing carers in September 2012 the issue of current payments was raised. Carers felt that the payments did not reflect the differing impact of caring (i.e. someone who had a person with low needs was paid as much as a person with very complex needs or someone who went to a day service five days a week). Payments to carers had not increased in the last three years.
7. The current average income for a long term carer per person they support is £356 per week (inclusive of rent paid by housing benefit or the service user). This is to care for an individual with a learning disability with a variety of needs who may or may not be getting other services (e.g. day service). The new payment rates would span £192 to £792 (again inclusive of rent) for service users from all user groups depending on the level of need the service user has and the amount of other service they receive.
8. A new payment process has been created which reflects the levels of need of the individual they are caring for and the amount of additional service that person receives. The rates also reflect national benchmarked rates so are now more in line with other local authority payments and reflect a fairer price. The principles of this process were agreed as part of the Shared Lives in Nottinghamshire Policy which was approved by the Adult Social Care and Health Committee in November 2012 and by Policy Committee in December 2012.
9. The new Shared Lives rates still demonstrate considerable savings against either residential care or supported living and therefore does not impact on the ability of the Shared Lives scheme to achieve savings going forward. It is hoped that the new payment process will also encourage carers to work with people with higher levels of need where the savings potential is greatest.
10. The new process is being used for all arrangements which started after 1st April 2013.

Payment to Existing Carers

11. We have not yet rolled out the new payment rates to existing carer arrangements as this requires a period of consultation.
12. Under the new rates thirteen carers would see an increase in overall payment but for five carers the money paid would be less.
13. It is proposed that we protect the five carers who would lose money under the new payment rates, i.e. keep paying them at their existing rate for as long as the current arrangement exists.

Contribution from Service Users

14. The new payment process also involves a contribution from service users toward their daily living costs. Currently, despite being entitled to full welfare benefits in the same way as anyone living in the community, existing service users in Shared Lives schemes do not pay any contributions towards their food or fuel bills. This is unlike other Shared Lives schemes nationally where contributions range from £35-£78 per week. The rent element is currently paid via Housing Benefit but the board element is currently part of the Council payment. The recent Dilnot report made it very clear that councils should not be expected to pay for an individual's 'hotel costs' and that this should be separated out from the cost of care.
15. In Nottinghamshire we are proposing £56 per week as a standard none means tested contribution. This would reduce the overall payment from Nottinghamshire County Council to carers by £56 per week.
16. For any new arrangements, this contribution will be paid by the service user directly to the carer.
17. We have not yet implemented this contribution with existing service users as it will require a period of consultation with both service users and their carers.

Alternative Options Considered

18. Implementing a lower payment rate, under current national benchmarks would not require an increase to current arrangements. However, this would not provide fair rates going forward and may impact on the future viability of the service if both existing and new carers see the rates as too low.
19. Not implementing the new payment process for existing carers. However, as they have raised the issue of disparity in payments there was a danger of alienating existing carers whom we need to help in the recruitment of new carers (word of mouth is the best advert) if we did not address their concerns.
20. Not protecting payments to existing carers who would lose out under the new payment schedule. It was felt that this would give a message that existing carers are not fully valued and may jeopardise existing arrangements and new arrangements with existing carers. Even at current rates, the payment represents a saving compared to alternative residential or shared lives arrangements.
21. Implementing lower rates for service user daily living expenses. The rates are about average compared to other national schemes and reflect the approximate amount an individual would be spending on food and bills if living in their own accommodation. Therefore this is also helping prepare individuals to move onto more independent living.

Statutory and Policy Implications

22. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, 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.

Financial Implications

23. The impact of the new payments structure for existing carers, including the payment protection for carers who would lose out will be a net cost of £22,000 per annum for as long as the existing arrangements continue. (£67,000 is the net cost of implementing the new payment rates payable to existing carers with an additional £19,000 if we do not reduce payments to those who would lose out, total cost £86,000 per annum. Income from service user contribution for existing service users would be £64,000). This will be funded from the Learning Disability Community Care Budget.
24. The current payment from Nottinghamshire County Council to carers for supporting the existing twenty-two long term service users is £363,000 per annum. In addition to this paid leave for the carers is provided at a further cost to Nottinghamshire County Council of £107,000 (this includes spend in current local authority short breaks units as well as other Shared Lives arrangements and private residential care).
25. Current payments for long term arrangements would therefore increase from £470,000 a year to £537,000. Average increase from £410 per week to £469 a week per service user. This compares with an average weekly cost for a person with a learning disability in residential care of around £1,000.
26. The overall aim of the project is to save £450,000 over a three year period by recruiting new carers and increasing the number of people benefitting from Shared Lives as opposed to an alternative more costly service (e.g. Supported Living or Residential Care).

Equal Opportunities Implications

27. These proposals will provide for a fair price paid to carers which takes into account national benchmarks as well as the amount of care an individual is expected to provide.
28. Service users in other types of service all have to pay for their food and fuel bills. The contribution from service users in Shared Lives will ensure that they are no longer subsidised by the Council when they have benefits and other income to fund this.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee:

- 1) Agree to carry out a 3 month consultation period with existing carers regarding the proposed implementation of the new Shared Lives payment scheme.
- 2) Agree to protect existing carers who would otherwise see a decrease in their income.

- 3) Agree to carry out a 3 month consultation period regarding the proposal that service users living in Shared Lives services should make a set contribution towards their food and fuel bills.

JON WILSON

Service Director for Personal Care and Support – Younger Adults

For any enquiries about this report please contact:

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Constitutional Comments (LM 22/05/13)

29. The Adult Social Care and Health Committee has delegated authority to approve the recommendations in the report.

Financial Comments (KAS 21/05/2013)

30. The financial implications are contained within paragraphs 23 to 25 of 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.

- a. Shared Lives Services in Nottinghamshire (Policy approved 12th December 2012)
- b. Previous Shared Lives report 26th November 2012

Electoral Division(s) and Member(s) Affected

All.

ASCH124



Nottinghamshire County Council

Policy Library Pro Forma

This information will be used to add a policy, procedure, guidance or strategy to the Policy Library.

Title: Shared Lives services in Nottinghamshire

Aim / Summary: To identify the basic principles of Shared Lives services in Nottinghamshire and to clearly identify the service offer to carers and service users and the roles and responsibilities of the carers, service users and Nottinghamshire County Council in relation to the service.

Document type (please choose one)

Policy	X	Guidance	
Strategy		Procedure	

Approved by:

Version number:

Date approved:

Proposed review date:

Subject Areas (choose all relevant)

About the Council		Older people	
Births, Deaths, Marriages		Parking	
Business		Recycling and Waste	
Children and Families		Roads	
Countryside & Environment		Schools	
History and Heritage		Social Care	X
Jobs		Staff	X
Leisure		Travel and Transport	
Libraries			

Author: Cath Cameron-Jones

Responsible team: Shared Lives Team

Contact number:

Contact email:

Please include any supporting documents

1. Current APS carer and service user handbooks will be reviewed in line with this policy in consultation with existing carers and service users.

2. Current APS process documents will be reviewed in line with this policy.

3.

4.

5.

Shared Lives Policy

1. Context

The County Council, as is reflected in its Strategic Plan 2010-14 is committed to ensuring that Nottinghamshire is a place where people want to live and can feel safe. Two of the priorities for securing this are:

- to foster aspiration, independence and personal responsibility
- to securing good quality, affordable services

This policy sets out how the Shared Lives service will be run in Nottinghamshire to provide good quality, value for money services which actively promote independence and engagement in the local community.

Shared Lives (previously known as Adult Placement) is a service delivered by individuals and families within the community to people in need of support in their day to day lives. The service is based on the principle of sharing family life including the carers' home. The service is commissioned by the County Council and is regulated by the Care Quality Commission.

The service can include:

- Short or long term accommodation and support provided within the carers own home.
- Rehabilitative or transitional support
- Short breaks –a couple of weeks, over night or just for an evening or a day (e.g. if the service user usually lives with their own family or another Shared Lives carer)
- Day time support
- Outreach support where a carer acts as 'extended family' to someone living in their own home.

The service may also offer Homeshare where a carer moves into the home of a person needing support.

Shared lives can provide alternatives to residential care or intensive supported living, day service or outreach provided by a personal assistant or support provider who is paid on an hourly basis to deliver support in a structured manner. Shared Lives can also be used as a short or medium term solution to help an individual develop skills around cooking, cleaning, managing bills and money as well as learning how to engage with the community and find natural support networks before moving onto more independent living.

2. Scope of this policy

This policy will include:

- The responsibilities of the Shared Lives service and clarify how this fits within the wider social care responsibilities of the department.
- The criteria for becoming a Shared Lives carer and the terms and conditions of the role.
- The criteria for becoming a Shared Lives service user.

This policy is intended to act as an umbrella under which guidance and procedures will sit.

3. Principles and Commitments

3.1 Values of Nottinghamshire Shared Lives Service

- Respect – through appropriate support of carers and careful matching of service user needs and skills with carer capacity.
- Promoting independence – the service aims to maximise the independence of all service users and will support the carer to facilitate this.
- Social Inclusion – this service is about sharing lives. It may be that an individual shares a carer's home but just as important is the sharing of the carer's community and wider family networks and support the service user to build and maintain their own community networks.
- Safeguarding – the service has a duty of care to both to the service users and carers. Carers have a duty to care for any service users placed with them.

3.2 Service eligibility

Shared Lives is designed to meet the needs of any adult eligible for social care services that are in need of support to enable them to live within the community. This includes individuals who

- Have a learning disability
- Have mental health issues
- Are older people with age related support or care needs
- Have a physical disability
- Have other disabilities or impairments which cause them to be vulnerable or at risk

Shared Lives Service Users must

- be aged 18 or over
- meet Nottinghamshire County Council's eligibility for social care services as determined through application of the Fair Access to Care services (FACs) criteria
- have had a self directed support assessment which indicates their level of need could be met appropriately by the service within their indicative budget
- have had a risk assessment which takes into account the kind of family they could be supported by and pose no significant risk
- want to receive support within the community as part of a Shared Lives service.

Service users will make a standard weekly contribution to their board and lodgings and may, following a fairer charging assessment, be required to contribute to the cost of their care and support.

Young People in transition to adulthood aged 16+ may begin the introduction process to live with Shared Lives carers prior to their 18th birthday. This may include overnight stays and introductory visits.

4. Commitments

4.1 A Shared Lives Team to undertake the following roles:

- a. A registered manager for the service to comply with Care Quality Commission requirements
- b. Ensure the service and individual carers meet standards as defined by The Care Quality Commission
- c. Promote the Shared Lives service to ensure care managers from both Health and Social care are aware of the service and know how to refer to the service
- d. Promote the Shared Lives service within the wider community to enable an on-going recruitment process for Shared Lives carers.
- e. Undertake the initial assessment of potential Shared Lives carers and, where relevant, their family, including ensuring relevant checks with the disclosure and barring service are undertaken.
- f. Make recommendations as to potential carers' suitability to the approval panel.
- g. Undertake an assessment of the home to ensure it is suitable for the delivery of Shared Lives services.
- h. Provide directly or source other appropriate training for initial induction and on-going development of the Shared Lives carers.
- i. Receive service user referrals and ensure a robust process is used to achieve the most appropriate match between the service user's needs and skills and the carers ability and capacity.
- j. Provide on-going support to Shared Lives carers in the form of practical help, support, advice and guidance by way of regular contact and discussion through visits, attendance at meetings and training sessions and by telephone
- k. Engage with the service users' care manager to keep them informed of any issues arising and facilitate contact between the Shared Lives carer and care manager as appropriate.
- l. Support the carer to write and update support plans and risk assessments based on the care manager needs assessment and self directed support plan.

4.2 Shared Lives Carers will:

- a. Be committed to the Shared Lives values and are prepared to undertake training to ensure they have the necessary knowledge and skills to provide a safe and supportive service.
- b. Work within guidance provided in the carers' handbook and within the standards required by the Care Quality Commission.
- c. Engage with the Shared Lives team and the service users' care manager to address any issues with the service or individual service user.
- d. Report any concerns regarding the individual service user, including accidents and significant incidents to the care manager according to Nottinghamshire safeguarding guidance.
- e. Feel supported and appropriately trained to undertake the role of carer with any individual they have been matched with.
- f. Be paid according to the level of need of the service user they are working with and the amount of service provided (e.g. taking into account day care or carer breaks services received from an alternative carer or support provider). Payment will be made up of Housing Benefit, any eligible Continuing Health Care contribution and funding from the County Council in the form of a managed budget or paid directly to the service user in the form of a direct payment.
- g. Have a minimum of four weeks entitlement to carer break services per year.

4.3 Care Managers who:

- a. Will ensure FACS criteria are met
- b. Will undertake the initial self directed support assessment and support plan
- c. Will discuss with the service user or family carers Shared Lives as a support option where appropriate
- d. Will, on referral to the Shared Lives service, ensure all information regarding support needs, including issues relating to risk, are shared with the Shared Lives team.
- e. Will review individual support needs at least annually or where the Shared Lives carer feels there is a change in support required.
- f. Will undertake all usual care management functions relating to the service user including safeguarding, mental capacity assessments.
- g. Pass on any concerns regarding the quality of the support or accommodation to the Shared Lives team.
- h. Will, in the event of a breakdown in the support, be responsible for finding alternative accommodation and or support for the service user.

5. Key actions to meet the commitments set out in the policy

The Council will work with carers and service users to review and develop guidance that is fit for purpose. A service user guide and carer handbook will form part of this guidance to ensure all parties are clear about what is expected of them and what they can expect in return. Shared Lives plus national guidance will be taken into account when developing this local guidance. This will be reviewed annually to ensure best practice is maintained.

The Council will review its procedures around the carer approval process and training programmes on an annual basis to ensure that the most efficient and effective methods are in place which ensure the values of the Shared Lives scheme are promoted.

The Council will facilitate a Shared Lives carer event at least annually to allow carers to meet together and with members of the Shared Lives Team to discuss issues, concerns and share good practice.

An update report will be made to Adult Social Care and Health and Public Protection Committee annually on the progress of the service.

3rd June 2013**Agenda Item: 9****REPORT OF THE SERVICE DIRECTOR, PERSONAL CARE AND SUPPORT
(YOUNGER ADULTS)****CO-LOCATED TRANSITIONS SERVICE****Purpose of the Report**

1. To update Committee on plans for the Adult Social Care and Health Transitions Team and obtain approval for a Business Support resource.

Information and Advice

2. Transitions refers to a process and is the term used for the arrangements made to prepare a young person moving from children's services and full time education to adulthood and adult services. It includes identifying appropriate services when a young person reaches 18 and working with colleagues in education and health to ensure young people have access to the support they need to move towards independence.
3. In April 2012 a feasibility study in relation to Transitions was completed. This considered a variety of options, including a multi-agency approach to Transition and recommended the co-location of staff from Adult Social Care Health and Public Protection with the Children with Disabilities service (in the Children Families and Cultural Service) to create a co-located Transitions Service.
4. In line with these recommendations the Adult Social Care and Health Committee in September 2012 approved the establishment of a full time Team Manager post for Transitions as part of the Organisational Redesign. On 1st October 2012 the Committee report 'Services to Support Young People in Transition' was approved at the Adult Social Care and Health Committee.
5. In order to create the co-located team alongside Children with Disabilities workers, existing posts from within Community Learning Disability Teams and Physical Disability Teams will transfer to the Transitions Team. It was agreed that 0.7 fte staff from each of the following Adult Social Care and Public Protection teams will be required to provide a total of 7 fte Social Worker posts in the Transitions Team:
 - a) Three Physical Disability teams in Ashfield/Mansfield; Newark/Bassetlaw; and Broxtowe/Gedling and Rushcliffe
 - b) Seven Community Learning Disability Teams in Ashfield, Mansfield, Newark, Bassetlaw, Broxtowe, Gedling and Rushcliffe

6. One newly appointed Team Manager commenced in post on 2nd April 2013 to review policies and procedures and to gain an understanding of the local and countywide arrangements in place in order to develop consistent processes. Following an enabling process Social Workers within Adult Social Care and Health will move to Meadow House, Mansfield in June 2013 with further recruitment to any vacant hours. This team of staff require Business Support at Meadow House from 10th June 2013.
7. A Business Case to relocate Transition Workers in Adult Social Care to Meadow House was presented to the Ways of Working Team in January 2013. Work is underway to ensure that space within this building can accommodate these workers to promote closer work between childrens and adults staff.
8. Business Support is required for the following functions:
 - a) Assisting the Team Manager to review policies and procedures.
 - b) Maintaining a list of caseloads of transition service users from the age of 14 plus. This will include maintaining an overview of high cost placements in and out of the County.
 - c) Co-ordinating information in relation to individual future needs within the Children's Disability Service and Adult Transition Workers.
 - d) Co-ordination with the existing Learning disability and physical disability teams and the countywide Supported Living team.
 - e) Creating mail shots and publicising the service including sending correspondence to young people in transition and their families (837 cases identified in the feasibility study in April 2012).
 - f) Working closely with Corporate Communications to produce public information.
 - g) Co-ordination with the Children's Disability Service administration staff.
 - h) Ensure Transition Workers are following Health and Safety procedures including maintaining lone working arrangements.
 - i) Day to day administration tasks for the team including preparation of letters, co-ordination of meetings, arranging appointments.
 - j) Taking minutes for multi-disciplinary meetings, reviews and as required by the Team Manager.
 - k) Maintaining a database of local and countywide resources for transition cases.
 - l) Co-ordination of events, purchasing resources and checking and coding invoices.
9. A Vacancy Protocol for one fte Business Support resource has been approved on a temporary basis for 3 months only. The Adult Transition team will require longer term Business Support to support the new co-located transitions service from June 2013.

Other Options Considered

10. The Children's Disability Service have Business Support but there is no capacity to take on administration for the Adult Transition workers. The Adult workers have access to Business Support within their current district teams but following the integration of various functions it is not possible to separate out support to individual workers in 10 different office bases and therefore this will not be available to the Transitions Team once they move to Meadow House.

Reason/s for Recommendation/s

11. The Adult Social Care, Health and Public Protection social care staff working in the new co-located transition service will need Business Support as this is not included in the current Children's Disability Service.

Statutory and Policy Implications

12. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, 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.

Financial Implications

13. The cost for 1 fte (37 hours) Business Support Administrator, NJE Grade 3, scp 14-18 will be £19,861.80-£21,728.41 per annum (including on costs). The costs of this post can be met from the existing learning disability budget. Within the last financial year a post of Community Access Worker was deleted, however the budget for this post was not removed from the budget within 2012/13 therefore the cost of this post can be transferred to the Business Support Administrator post.

Human Resources Implications

14. This report proposes to establish the following temporary post on a temporary basis:
 - a. 1 fte (37 hours) Business Support Administrator, temporary for 2 years, NJE Grade 3, scp 14-18. Cost contained in financial implications section above.
15. This post is to be based at Meadow House within the Adult co-located transitions service.

Ways of Working Implications

16. This post is already established on a temporary basis and therefore is already accommodated within existing office resources.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee:

- 1) Approves the establishment of 1 fte (37 hours) Business Support Administrator, NJE Grade 3, scp 14-18 (£19,861.80-£21,728.41 per annum) on a temporary 2 year basis.

JON WILSON

Service Director for Personal Care and Support – Younger Adults

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Constitutional Comments (LM 22/05/13)

17. The Adult Social Care and Health Committee has delegated authority to approve the recommendation in the report.

Financial Comments (KAS 22/05/2013)

18. The financial implications are contained within paragraph 13 of 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.

- a. ASCH committee report 'Services to Support Young People in Transition' dated October 2012.
- b. Feasibility Study – Transitions dated April 2012

Electoral Division(s) and Member(s) Affected

All.

ASCH 125

3rd June 2013**Agenda Item: 10****REPORT OF THE SERVICE DIRECTOR FOR PROMOTING INDEPENDENCE
AND PUBLIC PROTECTION****ALTERATIONS TO THE ESTABLISHMENT AND MANAGEMENT OF THE
ADULT ACCESS TEAM****Purpose of the Report**

1. To propose alterations to the existing establishment and management of the Adult Access Team, to include an additional Team Manager post, a temporary Project Manager post (to oversee implementation of the Nottinghamshire Welfare Assistance Fund) and a temporary social work post.

Information and Advice

2. The Adult Access Team is based at the Customer Service Centre, Mercury House. The team is a mixture of dedicated advisors and professional workers who are responsible for responding to enquiries at the front end. The current make-up of the team is as follows:
 - One senior practitioner
 - Five service advisors
 - Three social workers
 - Five occupational therapists
 - Four benefit advisors (one senior)
 - Six temporary occupational therapy workers
 - One carers worker
 - One pre-admissions social worker (temporary)
 - One commissioning officer
3. The Adult Access Team's function has grown significantly since the inception of the team and now provides a range of services across the county. These are listed below:
 - triage of referrals for social care
 - mobility assessments for blue badges
 - Nottinghamshire Welfare Assistance Fund
 - benefits advice, information and guidance
 - occupational therapy assessments for non-complex cases

- pre-assessment and booking of services for post elective surgery
4. During 2011 the Adult Social Care, Health and Public Protection department was restructured to provide a more streamlined management arrangement which included a reduction of senior management posts and a realignment of service activity.
 5. Within this process the Adult Access Team was established under Promoting Independence and Public Protection and managed by the Group Manager, Customer Access.
 6. In January 2013 as part of the County Council redesign process, initial assessment work for Occupational Therapy service that could be completed at the front end was amalgamated within the Customer Services Team to meet the needs of service users and carers more efficiently and effectively. The integration of initial assessment of occupational therapy has many benefits for service users and staff, however the additional occupational therapy staffing has added to the establishment size of the Adult Access Team without additional team management capacity.
 7. From April 2013, the Department of Work and Pensions transferred the responsibility for the funding in the current Social Fund to the Council, which will offer a support service called the Nottinghamshire Welfare Assistance Fund. During the development stage it has been recognised a dedicated part time project manager is required to oversee the delivery with the appointed provider, Northgate Public Services. This follows Government reforms of the welfare system and replaces some of the previous payments administered by the Department for Work and Pensions, such as Community Care Grants and Crisis Loans.
 8. In addition to the service changes over the last year noted above, there are further proposals to locate the responsibility for hospital discharges and initial social work assessments within the Adult Access Team. A pilot is underway with a social worker completing pre-admission assessments for service users who will require support post elective surgery. Should these plans be expanded the additional workload this would incur could not presently be undertaken within the current structure.
 9. It is now apparent that the current establishment of the Adult Access Team is not consistent with the Council's organisational redesign principles in that their size and make up go beyond the good practice guidelines for management spans of control. The principles of the organisational redesign process suggest that front line services should have a ratio of one manager to eight or more staff.
 10. The current span of control is too large for a single Team Manager to manage on an on-going basis. It is therefore proposed that the current establishment of the Adult Access Team is increased to establish a second Team Manager post. In addition, it is proposed to establish a project manager to help deliver the Nottinghamshire Welfare Assistance Fund and to establish a temporary social worker post to complete initial social care assessments resulting from hospital discharges.
 11. This would require a transfer of staffing from the existing Younger and Older Adult Teams into the Adult Access Team with an additional Team Manager to provide managerial and practical supervision.

Other Options Considered

12. The other option would be to leave the team as it is currently, however this would mean the team not having capacity to do the work highlighted in the report.

Reason/s for Recommendation/s

13. The establishment of an increased Adult Access Team will ensure appropriate management control and supervision of staff, thereby enabling a safe discharge of the authority's functions.
14. The establishment of the project manager for the Nottinghamshire Welfare Assistance Fund will enable close monitoring of a new scheme with an annual budget of £2.1 million.
15. The establishment of the social worker post will enable proportionate assessment and timely discharge from hospital with improved outcomes for service users and carers.

Statutory and Policy Implications

16. 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.

Implications for Service Users

17. Service users will continue to receive Reablement, Occupational Therapy and Social Care Support commensurate to their needs.

Ways of Working Implications

18. The additional post to be established will be based at the Customer Service Centre, Mercury House and will be accommodated within existing office space, making use of flexible work arrangements.

Financial Implications

19. A Team Manager, temporary for 2 years, 1 fte (37 hours), Pay Band D £50,708 per annum would be required to lead and manage the new team. The total cost of £50,708 per annum can be met from the NHS to Social Care funding. Should the NHS funding to social care cease in future years, the cost of this post will be met from within existing social care budgets.
20. A Project Manager post (26 hours), Pay Band B, scp 34-39 (£36,075-£41,434 per annum) with authorised car user status at £1,300 per annum be established within the team for a

period of one year. This total cost can be met from the Nottinghamshire Welfare Assistance Fund.

21. A social worker post, 1 fte (37 hours) Pay Band A/B, scp 29-39 (£30,940-£41,434 per annum) with authorised car user status at £1,300 per annum be established on a temporary basis for 2 years. The total cost can be met from the NHS to Social Care funding. Should the NHS funding to social care cease in future years, the cost of this post will be met from within existing social care budgets.

Human Resources Implications

22. This report proposes to establish the following posts:

- a. 1 fte Team Manager, temporary for 2 years, Pay Band D, scp 42-47 (£35,430-£39,855 per annum).
- b. 0.7 fte (26 hours) temporary Project Manager, Pay Band B, scp 34-39 (£28,636-£32,800 per annum)
- c. 1 fte (37 hours) Social Worker, temporary for 2 years, Pay Band A/B, scp 29-39 (£24,646-£32,800 per annum)

23. The posts would be requiring office accommodation and equipment commensurate with flexible workers and approved car user status.

24. The Trade Unions have been consulted and no comments have been received.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee:

- 1) Approves the establishment of the 1 fte (37 hours) Team Manager, temporary for 2 years, Pay Band D, scp 42-47 (£35,430-£39,855 per annum), to be based at Mercury House, Annesley also to carry approved car user status
- 2) Approves the 0.7 fte (26 hours) temporary Project Manager, Pay Band B, scp 34-39 (£28,636-£32,800 per annum) be extended for a further year from 31st March 2013 to 31st March 2014 and the post continue to be allocated approved car user status.
- 3) Approves the 1 fte (37 hours) Social Worker, Pay Band A/B, scp 29-39 (£24,646-£32,800 per annum) be established on a temporary basis for 2 years and the post be allocated approved car user status.

PAUL MCKAY

Service Director, Promoting Independence and Public Protection

For any enquiries about this report please contact:

Jane North

Group Manager, Customer Access Social Care

Jane.north@nottsc.gov.uk

Constitutional Comments (SLB 09/04/13)

25. Adult Social Care and Health Committee is the appropriate committee to consider the content of this report; it is responsible for approving relevant staffing structures. The Council's Employment Procedure Rules require Human Resources comments and trade union consultation where changes to staffing structures are proposed.

Financial Comments (CLK 23/05/13)

26. The financial implications are contained in paragraphs 19 to 21 of the report.

Background Papers

None

Electoral Division(s) and Member(s) Affected

All.

3 June 2013**Agenda Item: 11****REPORT OF CORPORATE DIRECTOR, POLICY, PLANNING AND
CORPORATE SERVICES****WORK PROGRAMME****Purpose of the Report**

1. To consider the Committee's work programme for 2013/14.

Information and Advice

2. The County Council requires each committee to maintain a work programme. The work programme will assist the management of the committee's agenda, the scheduling of the committee's business and forward planning. The work programme will be updated and reviewed at each pre-agenda meeting and committee meeting. Any member of the committee is able to suggest items for possible inclusion.
3. The attached work programme has been drafted in consultation with the Chair and Vice-Chair, and includes items which can be anticipated at the present time. Other items will be added to the programme as they are identified.
4. As part of the transparency introduced by the revised committee arrangements in 2012, committees are expected to review day to day operational decisions made by officers using their delegated powers. It is anticipated that the committee will wish to commission periodic reports on such decisions. The committee is therefore requested to identify activities on which it would like to receive reports for inclusion in the work programme.

Other Options Considered

5. None.

Reason/s for Recommendation/s

6. To assist the committee in preparing its work programme.

Statutory and Policy Implications

7. 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) That the committee's work programme be noted, and consideration be given to any changes which the committee wishes to make.

Jayne Francis-Ward
Corporate Director, Policy, Planning and Corporate Services

For any enquiries about this report please contact: Paul Davies, x 73299

Constitutional Comments (HD)

1. The Committee has authority to consider the matters set out in this report by virtue of its terms of reference.

Financial Comments (PS)

2. There are no direct financial implications arising from the contents of this report. Any future reports to Committee on operational activities and officer working groups, will contain relevant financial information and comments.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All

ADULT SOCIAL CARE & HEALTH COMMITTEE - WORK PROGRAMME

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
3 June 2013			
Adult Access Team	To seek approval for alteration to the establishment of the Adult Access Team	Service Director for Promoting Independence and Public Protection	Jane North
Commissioning Sensory Impairment Services	To provide an update on progress made with commissioning the deaf floating support service	Service Director – Joint Commissioning, Quality and Business Change	Beth Cundy
Shared Lives Policy	To report back to Committee on the implementation of the Shared Lives Policy	Service Director for Personal Care and Support – Younger Adults	Cath Cameron Jones
Services to Support Young People in Transitions - Update	Update on the work taking place on the transition from Children's to Adult Services.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
1 July 2013			
Promoting Independence and Public Protection	Report to update members on the area of work of the Service Director for Promoting Independence and Public Protection	Service Director for Promoting Independence and Public Protection	Paul McKay
Proposals for redesign of community based services	Update on redesign of community based care services.	Service Director – Joint Commissioning, Quality and Business Change	Sue Batty
Living at Home – Extra Care	To report on the outcome of the bid for funding to the Department of Health and the Homes and Communities Agency's Care and Support Specialised Housing Fund.	Service Director for Personal Care and Support – Older Adults	Cherry Dunk/ Paul Boyd
Pressure on health and social care services for older people	Update report on pressure on health and social care services for older people.	Service Director for Personal Care and Support – Older Adults	Phil Teall
Multi-Agency Safeguarding Hub (MASH) Advanced Social Work Practitioner	Report to seek approval for posts within the MASH Team	Service Director – Joint Commissioning, Quality and Business Change	Claire Bearder

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
Nottingham Welfare Assistance Fund	Quarterly update on the Nottingham Welfare Assistance Fund	Service Director – Promoting Independence and Public Protection	Paul McKay
Overview of Adult Social Care and Health savings and efficiencies programme	Update on progress of projects in the department and savings made to date.	Service Director – Joint Commissioning, Quality and Business Change	Kate Revell
Extension of Reviewing Teams	To seek approval of the extension of the Reviewing Teams	Service Director – Promoting Independence and Public Protection	Jane North
22 July 2013			
Personal Care and Support – Younger Adults	Report to update members on the area of work of the Service Director for Personal Care and Support – Younger Adults	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
Carers Strategy - Update	Update on Carers Strategy and how the additional funding will be used across Health and Social Care.	Service Director for Personal Care and Support – Older Adults	Penny Spice
Care Quality Commission – Secondment of an Officer – progress report	To report on the progress of the Secondments.	Service Director – Joint Commissioning, Quality and Business Change	Caroline Baria
Supporting People – Tendering Accommodation Based Services	To provide an update on Tendering Accommodation Based Services	Service Director – Joint Commissioning, Quality and Business Change	Beth Cundy
Direct Payments Support Service	Report on Direct Payments Support Service	Service Director – Joint Commissioning, Quality and Business Change	Sue Batty
Care Support and Enablement Services	Report on Care Support and Enablement Services	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
23 September 2013			
Personal Care and Support – Older Adults	Report to update members on the area of work of the Service Director for Personal Care and Support	Service Director for Personal Care and Support – Older Adults	David Hamilton

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
	Older Adults		
Update on the progress of assistive technology use in maintaining the independence of vulnerable people	Update on the progress on the Assistive Technology (see report of the 29 th October 2012)	Service Director for Personal Care and Support – Older Adults	Mark Douglas
Transforming Care – Nottinghamshire's Response to Winterbourne View Hospital	To provide an update on the local action being taken to respond to the national concerns.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
28 October 2013			
Joint Commissioning, Quality and Business Change	Report to update members on the area of work of the Service Director for Joint Commissioning, Quality and Business Change	Service Director – Joint Commissioning, Quality and Business Change	Caroline Baria
NHS Support for Social Care	To report back to Members as stated in the report on the 29 th October 2012	Service Director for Personal Care and Support – Older Adults	Jane Cashmore
Nottingham Welfare Assistance Fund	Quarterly update on the Nottingham Welfare Assistance Fund	Service Director for Promoting Independence and Public Protection	Paul McKay
25 November 2013			
6 January 2014			
Care Quality Commission – Secondment of an Officer – final report	To report on the conclusions of the Secondments.	Service Director – Joint Commissioning, Quality and Business Change	Caroline Baria
Nottingham Welfare Assistance Fund	Quarterly update on the Nottingham Welfare Assistance Fund	Service Director for Promoting Independence and Public Protection	Paul McKay
3 February 2014			
Development Initiatives within the Social Care Workforce	Update on the progress of Development Initiatives within the Social Care Workforce	Service Director for Personal Care and Support – Older Adults	Claire Poole

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>

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