

Health & Wellbeing Learning Disability Finance

1.0 Purpose

1.1 To update members on the progress made with the Adult Social Care, Health and Pubic Protection Department, Learning Disabilities Finance project.

2.0 Information

- 2.1 Members may recall a report to committee in 2010 detailing the work completed on Learning Disability Finances.
- 2.2 The report outlined why the expenditure on Learning disability services was high in comparison to other authorities and tested three hypotheses in explanation of this.
- 2.3 The first hypothesis was that there was a higher level of needs in Nottinghamshire than other similar authorities. This was not proven
- 2.4 The second hypothesis was that Nottinghamshire County Council commissioned more services for people than other authorities. This was partly proven.
- 2.5 The third Hypothesis was that Nottinghamshire County Council paid more for similar services. This was partly proven.
- 2.6 The report made a number of recommendations which were presented to the Health and Wellbeing Committee and members asked that an update be given on progress in meeting the recommendations.
- 2.7 Subsequent to the report to committee, and in response to the reduction in funding available to the local authority, the County Council embarked on a service review and improvement programme for all services.
- 2.8 As a consequence, a specific project has been established within the improvement programme to reduce expenditure on learning disabilities and mental health community care budgets by £5m over the course of the next four years. The recommendations of

the learning disability finance project are now contained within this improvement project.

2.9 The detailed savings proposals within the project are listed below

Implement the Care Funding Calculator in residential care: £1.2m over three years

2011/ 12	£500K
2012/13	£500K
2013/14	£200K

- Involves application of a Care Funding Calculator (CFC) across all Learning Disability / Physical Disability / Mental Health residential care placements with a gross weekly fee > £800.
- This excludes the cohort of placements being reviewed by OLM, external consultants, during 10/11.
- Aim is to achieve 10% efficiency saving on placement fees across all providers.
- Involves visits to providers over four phases, starting with those where weekly costs are currently highest (generally, where most placements costs £2k and above).
- Service users are Younger Adults (18-65) who have physical and learning disabilities, though only a minority have physical disabilities.

Provide Supported Living alternatives to residential care: £1.1m over four years

£175K
£325K
£370K
£230K

This workstream will support 15 people a year over 4 years to move from residential care into supported living. This process involves:

- Raising awareness amongst staff and external stakeholders.
- Identifying service users appropriate to move into supported living.
- Tendering for approved housing providers.
- Managing the transition of service users into supported living and providing appropriate support.

Review of NHS funding transferred to the local authority: £500K over two years

2011/12	£200K
2012/13	£300K

• £10.2m NHS funding was transferred to the county council who are now responsible for commissioning services to adults previously commissioned by the NHS. This element involves achieving savings from the budget transferred into the Local

Authority from Health from April '11. In particular, savings to be made from the Supported Living and Residential Care budgets.

• The tender of Partnership Homes services will result in a reduction of the current expenditure by £300K within the next two years.

Developing AT solutions: £200K over four years

2011/ 12	£50K
2012/13	£50K
2013/14	£50K
2014/15	£50K

Identifies appropriate application of assistive technology (AT) in order to reduce other forms of support provided to service users (eg support staff cover), and to promote independence. Five different approaches to be covered by this workstream:

- Using AT to reduce amount waking night cover needed, through conversion to sleeping night cover (reducing waking/sleeping staff ratios).
- Using AT to remove completely the need for sleeping night cover (eg through community warden approach or clustering of units).
- Using AT in service users' homes, to defer the need for them to move into residential care (or alternatives).
- Using AT within residential care homes, in order to reduce care costs.
- Extending scope of pending commissioning of a night response service for high risk service users (though low night time cover need) to also include Learning Disability / Mental Health (currently just older people).

Reduction in Supported living provider costs: £750K over three years

2011/12	£430K	
2012/13	£250K	
2013/14	£ 70K	

Aims to work with supported living providers to bring prices down to at least the upper limit of the authority's new capped rates within two years, starting in 2011/12. This involves:

- Reviewing existing spend on each of 21 providers of supported living.
- Identifying opportunities to reduce rates down to cap rates in new Framework (e.g. £14/hr day/waking rates).
- Meetings and negotiations with most providers.
- Establishing new rates with providers ready for start of next two financial years. Tracking achievement of savings.
- Identifying further opportunities for savings on an ongoing basis.

Reduction in Supported living commissioned hours: £750K over three years

5	
2011/ 12	£400K
2012/13	£300K
2013/14	£ 50K

Savings to be generated by reviewing all 480+ supported living packages and reducing commissioned hours. This involves:

- Briefing supported living providers.
- Providers undertaking initial audit of service user support requirements, using pro-forma provided.
- Supported Living Co-ordinators assessing and validating audit findings.
- Potential for reducing support packages identified.
- Agreeing new commissioned support packages with providers, service users and families.
- Amendments to Individual service contracts and Framework

Outsourcing In house supported Living: £325K over four years

2011/ 12	£75K	
2012/13	£ OK	
2013/14	£150K	
2014/15	£100K	

- Aims to cease the provision of in-house supported living services for adults with learning disabilities.
- The workstream is to be concluded by April 2012 and involves the transfer of services to alternative support providers who are approved under the NCC Framework agreement.

Alternatives for people who challenge services: £50K over two years

2011/ 12	£ 15K
2012/13	£ 35K

Builds on funding received from the Challenging Behaviour Foundation to test how the Authority can better commission alternative support for people who challenge services.

Reduction on Mental Health residential care spend: £125K over four years

2011/12	£	25k
2012/13	£	50k
2013/14	£	25K
2014/15	£	25K

The aims of this work stream are to

- Support people to live independently within the community
- Reduce the number of admissions of people with mental health needs entering residential care establishments

• Provide people living in residential care with appropriate alternative forms of care and support which meet their needs and are cost effective

The overall governance of the project is overseen by a project Board sponsored by the Service Director Personal Care and Support Younger Adults, who reports to the Adult Social Care, Health and Public Protection Department Business Improvement Board.

The project in common with all Improvement programme activity reports through to the County Council Improvement Programme Board on a monthly basis.

In addition to the above governance process, the project outcomes will be reported to the learning Disability Partnership Board which includes representation from service users, carers, elected members and partner organisations

Recommendations

It is recommended that the Health & Wellbeing Standing Committee;

- 1. consider and comment on this update
- 2. identify any further information that is required

Councillor Ged Clarke Chair of Health & Wellbeing

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Background papers: nil