

7 July 2014

Agenda Item: 13

# REPORT OF THE SERVICE DIRECTOR FOR PERSONAL CARE & SUPPORT, SOUTH NOTTINGHAMSHIRE

# PROGRESS UPDATE – COMMUNITY & RESIDENTIAL CARE FOR YOUNGER ADULTS SAVINGS PROJECTS

# Purpose of the Report

1. To update Committee on progress on savings proposals related to community and residential care for younger adults.

# Information and Advice

- 2. The budget approved by the County Council on 27<sup>th</sup> February 2014 required the ASCH&PP department to make savings and efficiencies totalling £32.641 million for the period 2014/15 to 2016/17, through delivery of 36 projects spanning across both the Adult Social Care and Health and Community Safety committees. The projects have been grouped into different themes, each overseen by a Delivery Group chaired by a relevant Service Director.
- 3. This report provides an update on projects falling under the remit of the Younger Adults Community Care and Residential Care Spend Delivery Group. The Delivery Group is responsible for ensuring the successful completion of the following savings projects:

|  | 14/15  | 15/16  | 16/17  | Total  |
|--|--------|--------|--------|--------|
| Reducing the average community care budget<br>- Younger Adults | 925k   | 1.178m | 701k   | 2.804m |
| Reduction in Long Term Younger Adult Care Placements           | 550k   | 550k   | 423k   | 1.523m |
| Development of Reablement in Physical Disability Services      | 150k   | 150k   | 0      | 300k   |
| Managing Demand in Younger Adults                              | 175k   | 200k   | 0      | 375k   |
| Total  | 1.800m | 2.078m | 1.124m | 5.002m |

4. The projects build on the former Learning Disability & Mental Health (LD/MH) Community Care project, which was one of the Department's savings and efficiency initiatives as part of the 2011/12 to 2014/15 budget savings programme. The project has realised its savings target and has now been closed. A summary of each of the new projects, and their intended outcomes, is provided at Appendix I. Some of the projects build on similar work that formed part of the LD/MH Community Care project, whilst others introduce new activity.

- 5. The projects have been categorised into high or medium/low governance requirements, depending on their level of strategic significance, savings targets, risk and complexity. The governance category assigned to each is also referenced in Appendix I.
- 6. Progress to date and next steps for each project is as follows:

# 6.1 Reducing the average community care budget - Younger Adults

### Progress to date

A 'discover and analyse' phase has been undertaken to confirm the breakdown of savings anticipated from each element of the project.

Priorities have been set for the two reviewing teams (North and South) that are undertaking reviews on packages of care for those with Physical Disabilities. The teams have also begun undertaking reviews on individuals receiving phone line rental payments and direct payments for transport.

Briefing events have been held with both staff and legacy Care Support and Enablement (CSE) providers, to confirm arrangements for providers delivering savings against Supported Living and Outreach packages from June 2014. For new providers, following the CSE re-tender process, this will be written into their contracts.

A pilot approach to testing implementation of a move from double to single care, where viable, in high cost moving and handling homecare cases has been approved.

### Next steps

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# 6.2 Reduction in Long Term Younger Adult Care Placements

### Progress to date

A new service for multiple service user groups in Retford has opened.

A number of moves have already taken place and some significant savings have already been achieved. Project is on track to deliver target of 40 moves during 14/15.

Dialogue with relevant stakeholders is taking place around the development of more alternative supported living accommodation. Linkages are being made with the Council's Extracare Strategy as part of this.

### Next steps

Continue programme of targeted moves.

Continue to explore options with relevant stakeholders for developing more supported living alternatives.

# 6.3 **Development of Reablement in Physical Disability Services**

### Progress to date

Identifying how Lean+ changes can assist with streamlining the pre-assessment reablement pathway, bring alignment with the Occupational Therapy offer, and bring consistency across Younger Adults activity and for those such as START service users.

Senior Practitioners have met with the Frameworki (Fwi) Team to ensure consistency in the use of Frameworki across teams.

#### Next steps

Follow up meeting planned to consider some FWi process issues in more detail and confirm performance indicators for the project.

More work to be undertaken to confirm the role of the Promoting Independence Workers moving forward, priorities, the process they will follow, the point at which they can most effectively intervene, and the period of time for intervention. Associated staff guidance to be developed.

### 6.4 Managing Demand in Younger Adults

# Progress to date

Initial analysis has been undertaken on:

- The number of service users receiving support currently falling within the project's target cohort, and current average levels of expenditure.
- Current levels and forms of support to existing service users.

The Younger Adults referral policy and scripts at the Customer Service Centre have been updated.

Discussions have taken place across specialisms of how each service area is working with this type of case, to identify the most effective ways of avoiding over commissioning in future.

Findings to date show that:

- The savings will be hard to achieve in isolation of the other Younger Adults projects. In particular, the Reducing the Average Community Care Budget Younger Adults project.
- There is more work to be done to release staff time from managing cases where there are no commissioned services.

### Next steps

Reviewing eligibility of existing service users and identifying people no longer needing support. Where existing levels and forms of support are not appropriate, organising alternative provision or case closure.

Working with Team Managers and staff in the most affected teams to move people from team caseloads where they are receiving professional support. The new ASCH strategy will set the framework for this.

- 7. Each project has an assigned service lead, which is a relevant service Group Manager. Each projects reports progress on delivery on an exceptions basis monthly to the Delivery Group, in order to have early visibility of any issues arising, so that these can be addressed.
- 8. Key challenges in delivering the projects will be:
  - a) Achieving further savings, in addition to those already achieved as part of the 2011/12 to 2014/15 savings programme, and other new savings projects as part of the 2014/15 to 2016/17 programme. The next phase of savings projects will have a greater impact on the amount of services received by service users and carers. The new ASCH strategy will set out the framework for this.
  - b) Managing change for service users, their circles of support, providers and other key stakeholders. Any change to services will be in consultation with all relevant stakeholders. Where required, advocacy support will be provided to ensure service user views are heard and Mental Capacity Assessments and Best Interest Assessments will be used. Assessment work and subsequent support planning processes will ensure that any decisions to change care packages are informed by current service user needs.
  - c) Managing the fast pace of change for staff, especially at the same time when the department and Council as a whole is implementing other large-scale changes, such as its future operating model, requirements of the new Care Act, and integration with Health and Housing. The department's Transformation Board, which includes Health and Public Health representation, will plan for and manage the implementation of transformational change.
  - d) Managing the capacity pressures faced by staff involved in implementing the changes. A temporary Younger Adults Transformation Team is to be established for two years from October 2015. The team will allow mainstream staff to focus on core duties and temporary posts to focus on specific priority areas and projects that require a short term focussed approach. The adoption of the new Adult Social Care Strategy will help to provide a framework within which staff can make decisions and management escalation can be described. Associated staff guidance is to be provided.

- e) Managing interdependencies between the projects, including unintended consequences such as cost / work shunting and changes to demand. Projects have been grouped into themed delivery groups to ensure co-ordination and help manage interdependencies. In addition, the Department's Commissioning and Efficiency Delivery Group will oversee delivery of all of the Department's savings projects.
- 9. The following distinct initiatives will serve as enablers to project delivery:
  - a) Investment in specialist equipment, including Assistive Technology.
  - b) Capital investment to develop supported living alternatives to residential care.
  - c) Continued delivery of the Shared Lives scheme, which can serve as an alternative to long-term residential/nursing care.
  - d) The new Adult Social Care Strategy, as referenced above, which sets out the Council's proposals for the future of adult social care in Nottinghamshire, in line with its Strategic Plan 2014 – 2018 and in anticipation of the Care Act.

# **Other Options Considered**

12. There are no other options to outline as this report aims to update Committee on progress to date and next steps for the Younger Adults Delivery Group's work.

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

13. There are no recommendations being made in the report, other than for Committee to accept the contents of the report.

# **Statutory and Policy Implications**

14. This report has been complied after consideration of implications in respect of crime and disorder, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working 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**

- 15. It is recommended that the Committee
  - 1) Notes the contents of the update report.

# CAROLINE BARIA

Service Director for Personal Care & Support, South Nottinghamshire

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

Ellie Davies, Project Manager, Transformation Programme.

# **Constitutional Comments**

16. As this report is for noting only, no constitutional comments are required

# Financial Comments (KAS 20/06/14)

17. The financial implications are contained within paragraphs 3 and 15 of the report.

# **Background Papers and Published Documents**

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:

- Report to Full Council, 27<sup>th</sup> February 2014: Annual Budget 2014/15.
- Report to the Adult Social Care and Health Committee, 3<sup>rd</sup> March 2014: Outcome of the Consultation on the Model for Adult Social Care in Nottinghamshire and Use of Resources Policy.
- Report to the Adult Social Care and Health Committee, 12<sup>th</sup> May 2014: Overview of Savings Projects to be Delivered 2014/16 to 2016/17 by the Adult Social Care and Health Department.

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

All.