# Best Value Service Review Promotion of Independence of Young Disabled Adults

### **Baseline**

### **Personal Support**

### **Current Position**

Support for independent living at the widest level includes personal assistance, information, housing, education, access to public goods and services, employment and training and access to the environment and political arena. This baseline describes the current position around personal support at home and in the community.

In physical disability and sensory impairment personal support is provided by domiciliary services (see chart 1) and by the Social Services Department's Day and Community Support Services (see chart 2). Supporting People help is described in the Housing baseline. Direct payments for young adults in the 16-25 years age range as at 04.02.04 stand at zero for 16-18 year olds and fifteen for those aged 18-25 (see chart 3).

All are white British in ethnic background, and this is the case across all disability groups in this age range. One of the actions arising from the 1998 conference, "The Development of Service Provision for Black disabled people and carers" was to: "Promote services available to Black Disabled People and their Carers".

The number of people aged 18-25 living in independent living funded by learning disability services is 42 as at February 2004. Domiciliary services are providing home care to one person in this age range although it may in reality be higher than this due to data unreliability. The majority of personal support is provided within day care settings, or whilst people are at college or supported employment.

In mental health services personal support is provided by a combination of professional support from mental health teams and housing related support provided by Framework ("Household"). The housing related support covers tasks such as budgeting, paying bills, and maintaining the home. 265 people {aged 18-65} are assisted at a higher level of support service (defined as 6 homes average per week) and 70 at a lower level (defined as 3 homes average per week).

### Known Problems Nationally

The SSI report, "New Directions for Independent Living" (2000) for young physically and learning disabled adults (18-65) reported on 10 Social Services Departments. The key findings were:

1. Most councils and their staff have fully to absorb and carry through the independent living philosophy

- 2. Direct payments schemes are taking off slowly with some council and some staff still ambivalent. The success of these schemes and of direct payment users' individual benefits needs further publicity so that success can breed success
- 3. Support for people with physical disability lags behind support for people with learning disabilities in terms of principles, policies and practice to enhance users' capacity for experience of independent living.
- 4. There was scope for more referrals to the Independent Living Fund to increase resources available for users.
- Social Services were increasingly working with health and other agencies to plan and develop better services for supporting people to live independently. Scope remained for better and closer working at the service provider level.
- 6. Significant variation remained between councils in terms of resource input and the levels and quality of services used.
- 7. Occupational therapy services were usually over-stretched, although some innovative arrangements had been made to use OTs' skills and experience to work across the boundaries between housing and social services. OTs' skills and experience were insufficiently contributing to policy and management developments.
- 8. Many assessments and care plans lacked a holistic approach, were insufficiently integrated with health and were still service-rather than needs-led, failing to specify planned outcomes.
- 9. Services and the use of resources needed better monitoring.

"Independence Matters" (Dec. 2003) on social care services for physically and sensory disabled people identified areas for improvement as:

- Home care is not sufficiently reliable or flexible and is not provided in a way that promotes independence
- Although waiting times for equipment and minor adaptations have improved some people have to wait unacceptably long times for major adaptations using the disabled facilities grant
- Services for those with brain injury are not well enough developed across the country
- Culturally sensitive services for disabled people are not well developed
- Disabled parents are often not effectively supported
- Day services needs reshaping to be more community-based, inclusive and linked to increasing employment opportunities

 Although the numbers receiving direct payments are increasing there is still a long way to go before they are part of mainstream provision

In Learning Disability the national framework is established by the Valuing People programme that focuses on the four principles of:

- Legal and civil rights
- Independence promoting independence is a key aim for this Government's modernisation agenda
- Choice
- Inclusion

In mental health the national picture has been established by the NSF for Mental Health {2000}. For the age range of the BVSR, 16-25, the key programme is Early Intervention in Psychosis. Nationally the mean age of onset of psychotic symptoms is 22. One in ten people with psychosis commits suicide – two thirds of these deaths occur within the first five years of illness. Research indicates that the following principles of care are important:-

- Culture, age and gender sensitive
- Family orientated
- Meaningful and sustained engagement based on assertive outreach principles
- Treatment provided in the least restrictive and stigmatising setting
- Separate, age appropriate facilities for young people
- Emphasis on normal social roles and service user's development needs, particularly involvement in education and achieving employment
- Emphasis on managing symptoms rather than the diagnosis

For disabled young people leaving care a report from the Action on Aftercare Consortium {2004} has identified:

- Gaps in planning for specific groups of care leavers, including young disabled people {including post 18}
- Still some way to go in achieving adequate multi-agency working, especially where CAMHS and periods of transition such as moving to adult services were concerned.
- More targeted work recognising the specific needs of young people with disabilities

Increasing access to health and particularly mental health services

### **Known Problems in Nottinghamshire**

The low numbers of young physically disabled adults who receive personal support at home highlights that insufficient attention is being paid to the transitions stage for people with physical and sensory impairment. For disabled people access to facilities and services continues to be a problem. With the restructuring of Day and Community Support Services with more flexible job descriptions, social services specialist transport services may need to make commensurate changes to operate over a more extended period and over more flexible routing of vehicles.

In mental health services the new Crisis Home Treatment Service with Nottinghamshire Heathcare Trust has only just been established in Ashfield-Mansfield, and the remainder of County coverage is to follow. Services are therefore entering a significant period of change and transition. Home Support services via Framework are relatively well developed in the north of the County but more development is required across Broxtowe/Gedling/Rushcliffe in the south.

Known problems in learning disability services exist in the following areas:

- Need to further evolve roles between Health and Social Services staff to create a more flexible workforce, e.g. in the delivery of rectal diazepam.
- Financial risk to Social Services and Health associated with the reassessment of learning disabled people living in Supporting People accommodation settings.
- Lack of capacity in alternative provision to traditional social services day centre services. Whilst progress has been made in a number of areas of County Council departments {e.g. Libraries, Bestwood Park-other areas may not be giving sufficient priority to learning disabled adults accessing a range of community provision. Also long-established patterns of post assessment care planning by CLDT staff may be an inhibiting factor.
- Problem of insufficient "escorts" provided on Social Services transport to enable learning disabled adults to make maximum use of transport. Need for more flexibility in the way vehicles are utilised and support provided.
- No OT service in Bassetlaw
- Lack of facilities to teach people life skills in appropriate settings e.g. Resource Houses
- Insufficient of Social Care and Health Care staff in CLDTs to respond appropriately to Person Centred Planning and the resultant action plans.
- Capacity of direct payment support team (2 staff only in post) to help learning disabled adults who may need additional help, and a different style of help, in managing direct payments.

### **Ideas, Solutions and Options**

The review of physical disability day services led to the development of decentralised day and community support services as from January 2003. These are now well established (see data in

chart 2) across the County. It has been suggested that the service could better coordinate its work with the home care service, particularly in "down time" so that a greater volume of basic home support tasks could be transferred over, thus releasing additional capacity in day and community support services.

In adult mental health services there are estimated to be 80-90 residents living in the private registered home (mental health) sector. This would appear to be increasingly a less attractive option for younger adults as, in 2003-4, some £200,000 of the mental health residential allocation was unspent. It would appear that home support options, as in the Framework "Household" scheme, is a more attractive option when younger service users exercise choice of residence type.

A review of the role of day care services in mental health has just been initiated. Currently £100,000 is going into employment-related work in the North of the county

Within learning disabilities services much progress has been made on extending Direct Payments to adults with more severe disabilities. A number of initiatives have been taken to bring health nursing staff into social services day centre settings enabling more efficient health-social care services on single sites.

The overall plans for the day service restructuring are now being implemented with a project manager in post.

It is intended to Increase take-up of ILF (but only after Fairer Charging Policy anomalies sorted out).

Investment in CLDTs is proposed to provide greater equity across County and enhance service capacity.

### Particular Differences for People 16-25

In physical disability services there is a need to research into and provide more age appropriate services to this population. Current service design may be overly shaped by the past and present needs of a generally older population of service users.

Mental health services are charged with developing an early intervention service in Nottinghamshire for people aged 14-35 with a first presentation of psychotic symptoms. The DH position is that early treatment is crucial because the first four years of psychosis carries the highest risk of serious physical, social and legal harm.

With regard to learning disability services for young adults a difference is that there are now higher societal expectations from users and carers, and a more critical public. There is generally a higher visibility of people with learning disability in the public domain. The likelihood of survival into adulthood despite significant impairments will place increased demands on all services.

# <u>Table 1 - Best Value Service Review Promotion of Independence Young Disabled Adults</u> Table One

Number of service users aged between 18-25 years - on the books as at 31st March 2004 to receive services

			Non-	Non-community services Community based services					Comn	vices			l			
Primary Client type	individual	Clients 18-25 as a percentage of total clients 18- 64	LA Residential care	Independent sector residential care	Nursing care	Home care	Day care	Planned short breaks	Direct Payment s	Professional Support	Transport	Equipment and Adaptations	Other	Supported Employment	Total	Clients aged 16-18 (Known to Children's Services)
Physical disability fraility and sensory impairment (total)	127	8%		15		22	24	9	20	33	17	47	17		204	27*
Of which: Physical disability, fraility and/or temporary illness	103	8%		13		21	15	7	17	22	15	33	6		149	
Hearing impairment	14	10%										13	1		14	
Visual impairment	10	6%		1							1		9		11	
Mental Health (total)	66	6%		3	1		9	2	11	56	25	7	7		121	
Learning Disability (total)	257	16%	1	35	4	14	123	32		118			28	33	388	18
Substance Misuse (total)	5	42%						5							5	
Emotional or Behavioural Difficulties	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	1
Other Disability (unk)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	10
Total of above	455	10%	1	53	5	36	156	48	31	207	42	54	52	33	718	56**

#### Ethnicity by Primary Client Type - 18-25 year olds

Ethnicity	Physical disability fraility and sensory impairment	Mental Health	Learning Disability	Substance Misuse	Total
White:					
British	116	59	246	4	425
White any other background	3	1	1		5
Mixed:					
White and Black Caribbean	1		1		2
Whie and Asian					
Mixed any other	1	1	1		3
Asian or Asian British:					
Indian			3		3
Pakistani		1	2		3
Any other Asian		1			1
Black or Black British:					
Caribbean	1	•			1
Any other Black	1				1
Not stated	4	3	3	1	11
Total	127	66	257	5	455

### Clients with more than one client category code

	Physical disability fraility and sensory impairment	Mental Health
Total	127	66
Mental Health	1	0
Learning Dis.	14	4
Sub. Misuse	0	1

16-18 year olds Other Disability

<sup>\*</sup> Of the 27, 19 have a physcial disability and 8 sensory impairment

<sup>\*\*</sup> This includes 5 cases open to Transition Co-ordinators located in Adult Care teams

# Best Value Service Review Promotion of Independence Young Disabled Adults DAY & COMMUNITY SUPPORT SERVICES PHYSICAL DISABILITY AND SENSORY IMPAIRMENT, February 2004

### **Disabled people supported in the community**

	Under 25's	Other Age Range	Total No Supported	Range of Disabilities	Visual Impairment	Hearing Impairment	Ethnicity
Rushcliffe Resource Centre	2 - 1 spina bifida 1 cerebral palsy	25 – 65+	30	5 spina bifida 5 CVA 2 MS 3 Huntingdons Disease 13 other	2	3	White British – 29 Other White – 1
Eastgate Resource Centre	0	32 – 70	17	6 CVA 3 Arthritic Conditions 5 Other	3	0	British White
Balderton Resource Centre	1 Epilepsy	24 – 79	13	3 Learning Disability 2 Arthritic Conditions 2 Epilepsy 4 other	2	0	British White
Dallas St Resource Centre	0	33 – 59	13	1 CVA 2 Arth Cond 1 MS 3 Head/Brain Injuries 3 Other	3	0	British White
High Pavement Resource Centre	0	28 - 68	9	4 CVA 1 Cerebral palsy 1 Huntingtons Disease 1 Parkinsons 1 MND 1 Polio	1	0	British White
Totals	5		73	63	10	3	

# BEST VALUE SERVICE REVIEW: PROMOTION OF INDEPENDENCE YOUNG DISABLED ADULTS

## **DIRECT PAYMENTS AS AT 04/02/04**

### Service Users 16-25

Age group	Disability type	District	Ethnic origin
18-25	Physical	Mansfield	White British
18-25	Physical	Mansfield	White British
18-25	Learning	Ashfield	White British
18-25	Learning	Ashfield	White British
18-25	Physical	Ashfield	White British
18-25	Physical	Ashfield	White British
18-25	Physical	Ashfield	White British
18-25	Learning	Ashfield	White British
18-25	Learning and Physical	Bassetlaw	White British
18-25	Learning	Bassetlaw	White British
18-25	Physical	Bassetlaw	White British
18-25	Physical	Bassetlaw	White British
18-25	Physical	Bassetlaw	White British
18-25	Learning	Bassetlaw	White British
18-25	Learning	Newark	White British
18-25	Physical	Newark	White British
18-25	Learning	Newark	White British
18-25	Learning	Newark	White British
18-25	Physical	Newark	White British
18-25	Physical	Newark	White British
18-25	Physical	Newark	White British
18-25	Learning	Broxtowe	White British
18-25	Learning	Broxtowe	White British
18-25	Learning	Broxtowe	White British
18-25	Learning	Gedling	White British
18-25	Learning	Gedling	White British
18-25	Physical	Gedling	White British
18-25	Physical	Gedling	Not known
18-25	Physical	Gedling	White British

# Best Value Service Review Promotion of Independence Young Disabled Adults

# <u>Learning Disabled Adults – Service Provision</u> <u>February 2004</u>

Numbers	Home Care	Supported	Direct	Day Care
		Housing	Payments	
18 – 65	67	199	42	240

### 2003/2004

Report showing number of organisations by service type for selected client categories\* funded by Nottinghamshire County Council Social Services Department through:

- 1. Service Agreements CCSB, Alternatives to Residential Care; Mental Health Grant
- 2. Grant Aid;
- 3. Carers' Grant;
- 4. Prevention Grant.

\*Physical Disability & Sensory Impairment - Adults & Children Learning Disability Mental Health Vulnerable Adults Advocacy

#### Please note that:

- 1. the total amounts are annual but approximate. Awaiting confirmation on current amounts from Locality managers as some service agreements are paid by LFOs;
- 2. still awaiting information from 1 Locality on any locally commissioned services of which Purchasing & Contracting Unit has not been notified.

# Physical Disability & Sensory Impairment Adults

Count of ORGANISATION	
Service Type	Total
Advice	2
Advice & Support	2
Assessment_Advice	2
Counselling	1
Day Care	3
Equipment	4
Home Improvement Scheme	1
Interpreting Service	1
Preventative Adaptations Scheme	1
Running costs	2
Short Breaks	1
Support	2
Talking Books	1
Training	1
Transport to day care	1
Grand Total	25

Total amount	£601,204
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### Physical Disability & Sensory Impairment Children

Grand Total	3
Sessions for deaf children	1
Play scheme	1
Day Care & Support	1
Service Type	Total
Count of ORGANISATION	

Total amount	£115,280
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## **Learning Disability**

Count of ORGANISATION	
Service Type	Total
Activities	2
Co-ordinator care services	1
Day Care	3
Day Care & Residential	
services	1
Sitting service & Befriending	1
Sitting service	3
Support	3
Supported Employment	2
Work Project	1
Grand Total	17

Total amount	£865,891

## Mental Health

Count of ORGANISATION	
Service Type	Total
Activities	1
Advice & Support	1
Breaks for carers	1
Day Care	2
Employment Schemes	3
Sitting service	3
Support	6
Support to Vol. Organisations	1
Grand Total	18

Total amount	£454,344
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## **Vulnerable Adults**

Support Grand Total		3
O a set		4
Befriending		1
Advice & Support		1
Service Type	Total	
Count of ORGANISATION		

Total amount £6	88,263
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### Advocacy Adults, Older People & Children

Support_Information Grand Total	1	
Support & Information	1	
Advocacy	4	ŀ
Service Type	Total	
Count of ORGANISATION		

Total amount	£218,165
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Adults

# People with Learning Disability Living in Supported Housing at February 2004

Age	Numbers
19	3
20	4
21	9
22	5
23	5
24	10
25	6
Total:	42

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