



7th March 2016

Agenda Item: 7

REPORT OF CORPORATE DIRECTOR, ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION

ADULT SOCIAL CARE AND HEALTH – OVERVIEW OF CURRENT DEVELOPMENTS

Purpose of the Report

1. The report updates the Committee on a number of developments and activities that have been, and are, taking place across the department.
2. The report also seeks approval of the following:
 - that progress with personal health budgets in the County be reviewed by the Committee in six months
 - that the provision of the Disabled Persons' Registration Card be ceased
 - the proposed changes to the staffing establishment within the Bassetlaw Hospital Team and the Adult Deaf and Visual Impairment Service
 - that a further update on the Transforming Care programme be provided to the Committee in six months.

Information and Advice

3. This report covers: current progress on the introduction of personal health budgets in Nottinghamshire; a recommendation to cease the Disabled Persons' Registration card; a request to approve changes to the staffing establishment in the Bassetlaw Hospital Social Work team and the Adult Deaf and Visual Impairment Service; and a progress update on the Transforming Care programme.

Introduction of Personal Health Budgets in Nottinghamshire

4. A personal health budget (PHB) is an amount of money which can be used to meet a person's identified health and wellbeing needs. The way in which the money is used is based on preferences of the individual, usually in conjunction with their families or carers and agreed with the local NHS team. It enables care to be provided in a more flexible and personalised way than would be the case if standard NHS services were used.
5. The guidance specifically refers to children and people with learning disabilities but the expansion of PHBs is not restricted to these groups. There is information from the pilot sites about who could benefit from PHBs which is linked to need rather than a particular diagnosis or condition. For example, it could include people:

- receiving NHS Continuing Healthcare or children’s continuing care
 - who have suitable high levels of need but are not receiving NHS Continuing Healthcare
 - with learning disabilities or autism and high level support needs
 - who make on going use of mental health services
 - with long-term conditions prone to relapse and for whom current services do not appear to work, resulting in frequent access to acute services
 - who need high cost, longer term rehabilitation, e.g. people with acquired brain injury, spinal injury or mental health recovery needs
 - children with education, health and care plans who could benefit from a joint budget including funding from the NHS.
6. Adults eligible for NHS continuing healthcare and children in receipt of continuing care have had a right to have a personal health budget since October 2014. Personal health budgets have featured strongly in NHS Planning Guidance and other high profile policy initiatives over the last three years.
7. Performance in the development of PHBs across the country is very variable. Areas that participated in the PHB pilot programme understandably report higher activity figures for people with PHBs, for example Northampton, Nottingham City, and Lincolnshire, which is a pilot site for integrated personal budgets. The table below shows the numbers of personal health budgets in place from the Markers of Progress data submitted to NHS England at 30th September 2014. Nationally there is currently a total of 4,000 people with PHBs.

Table 1 – Markers of Progress Data at 30th September 2014

East Midlands Clinical Commissioning Groups (CCGs)	NHS funded Continuing Health Care PHBs	Joint funded (health and social care) PHBs	Long Term Care PHB including Mental Health	Children’s PHBs	Total PHBs
<i>Nottinghamshire</i>	22	3	0	5	30
Nottingham City	32	44	4	6	86
Derbyshire	12	1	0	2	15
Northampton	36	38	54	6	134
Lincolnshire	21	43	0	4	68
Leicestershire	9	2	0	1	12

NB: The Markers of Progress template is currently under review and data as at the end of December 2015 is expected to be available by early February 2016.

8. In Nottinghamshire, an interim PHB lead is working with the five local CCGs (with the exception of Bassetlaw CCG). Recruitment is underway for a PHB Manager who is expected to be in post for March 2016. The Interim PHB lead is liaising with Council commissioning colleagues. A representative from the Council attends the Nottingham

PHB network meeting, and will be present at the NHS England PHB event 'Moving forward with personal health budgets - Developing a Local Offer' in February.

9. Some joint arrangements for managing PHBs have also been made between Bassetlaw CCG and the Council. There are 4 Continuing Health Care cases that are being pursued or managed as PHBs in Bassetlaw.
10. The Government's mandate to NHS England 2016/17 includes a goal of 50-100,000 people to have a personal health budget or integrated personal budget by 2020 (up from the current estimate of 4,000). For 2016/17 CCGs are required to produce a plan with specific milestones for achieving this goal. For Nottinghamshire County CCGs this would equate to between 680 and 1,300 PHBs by 2020.
11. As part of the development of a local plan, key activities for the CCGs over the next 12 months will include significant engagement work with local stakeholders, including establishing a Local Peer Network. The Council's work with partners to integrate personal health and care budgets for people for whom it is relevant is an essential pre-requisite for the effective integration of health and social care.
12. It is recommended that progress with personal health budgets in the County be reviewed by the Committee in six months.

Disabled Persons' Registration Card

13. The Disabled Persons' Registration Card (DPRC) was introduced in Nottinghamshire in May 2008 following a suggestion from a member of the public. It was initially for adults, but in 2009 it was agreed that eligibility for the card should be extended to children and young people under the age of 18 years. The purpose of the card was for people to have formal 'proof' that they have a disability, which would reduce the likelihood of them being inappropriately challenged about their use of facilities for disabled people. The card was free to new applicants and to people wanting to renew an existing card.
14. In 2013 a new organisation, CredAbility, approached the Council to promote its national Access Card. As the DPRC is not a statutory service and the Access Card is available to a wider range of disabled people and children, it was felt that this would be a good replacement for the Council's card. In January 2014 it was agreed with the Chairman of the Adult Social Care and Health Committee that all new applicants would be encouraged to apply for the Access card, although the Council would renew the DPRC for life for existing card holders if asked to do so.
15. The number of new applicants for the DPRC had been declining before this decision was made, and since then the number of cards renewed by existing card holders has declined significantly. In 2014/15 there were eight applications for the card compared to 519 in 2011/12. The Council has not received any applications for renewal since August 2015.
16. The Access Card serves the same purpose as the DPRC and the provider is also negotiating concessions for disabled people who have the card. The development of the service can be seen on their [website](#). There are now 60 Access Cards on issue to

Nottinghamshire residents and applications continue to increase slowly; there were six applications in September and three in October 2015.

17. The administration of the DPRC is the responsibility of the Customer Service Centre. The cards are produced using a machine, which has needed maintenance from IT in the past year. The cost of replacing the machine would be around £1,000 and the number of cards now being renewed means that it would not be cost-effective.
18. It is recommended that the DPRC is no longer renewed and that existing card holders are directed to other disability identification cards, including the Access Card. Advice about disability identification cards is available on the County Council's [website](#).

Changes to staffing establishment in Bassetlaw Hospital Team and Adult Deaf and Visual Impairment Service (ADVIS)

19. The Committee is asked to approve the conversion of a Service Advisor post (Grade 4, 30 hours per week) to a Community Care Officer post (Grade 5, 27 hours per week) at Bassetlaw Hospital on a permanent basis. This can be achieved within existing staffing budgets (at a cost of £20,247 pa).
20. This change is requested because the Community Care Officer role is more versatile in the hospital setting, particularly with the use of Trusted Assessors, who make decisions about discharge plans for people in hospital. Trusted Assessors are professionals from both health and social care within the Integrated Discharge Team. They carry out generic, preliminary assessments of patients' needs when they are ready for discharge. The post in question is currently vacant.
21. The Committee is also asked to approve a request for a permanent Advanced Social Work Practitioner in the ADVIS structure (Band C, 27 hours per week). This would be achieved through conversion of a vacant Rehabilitation Officer post (Band A, 18.5hrs pw), and Social Worker hours (Band A, 14.5 hours pw); both of which are currently available within the team's existing staffing budget. ADVIS is a multi-disciplinary team covering the whole of the County, working with both older and young adults. The team currently consists of 1 full time Team Manager and 17 members of staff. This proposal would allow for the establishment of a duty system, sharing of case management supervision, and would provide more support to the whole staff group.
22. The Advanced Social Work Practitioner post would be Band C at a cost of £32,298 per annum. This can be met from within existing budgets.

Update on the Transforming Care programme

23. At the Committee meeting in November 2015, Members were notified that Nottinghamshire had been deemed a 'fast track area' in partnership with Nottingham City and the 7 CCGs. The idea of the fast track was to be a forerunner in the ambition to change services for people with learning disabilities to ensure fewer people were admitted to mental health hospitals and more people were appropriately supported within the community.

24. In December, the national plan was published and all areas have now been asked to develop their own plans for Transforming Care. The Nottinghamshire fast track area developed a plan in September 2015 and the five work stream groups have been meeting regularly to take the plan forward.
25. Progress to date includes:
- ensuring processes developed are fit for purpose across children's services and autism services as well as learning disability in adults
 - development of an overarching strategy – this is a live document which will change as the work progresses
 - development of an engagement strategy with stakeholder mapping for consultation, including key service user groups, carers, advocates and key professionals
 - two provider events held to ensure engagement in the current development of crisis support and longer term transformation of learning disability and autism services
 - establishment of a sub-group to progress a skills academy to create a consistent approach across providers and share training capabilities and assets and foster a closer cross-provider relationship
 - working on pooled budgets and understanding the current spend from all partners
 - establishment of a professionals reference group to ensure front line health and social care staff are engaged
 - involvement of independent provider representatives on the work streams and the Operational Committee.
26. It is recommended that a further update on the Transforming Care programme is presented to the Committee in six months.

Other Options Considered

27. The report covers a range of activities within the department, most of which are for the Committee to note. With regard to the DPRC, the report suggests that a viable alternative is available and can offer more than the Council's original option. In addition, the number of people renewing the Council's card is now so low that other options would not be cost effective. The Market Position Statement is a refreshed version of a departmental publication that already existed. The proposed staffing changes are suggested in order to better manage the nature of work that is required within both of the teams.

Reason/s for Recommendation/s

28. With regard to the DPRC, it is not cost effective to replace the machine for the DPRC. The card is a discretionary service, which is being successfully promoted and developed by another provider. With regard to the posts in the Bassetlaw Hospital team and the ADVIS team, the recommendation is to change the staffing establishment to better meet the needs of the service users.

Statutory and Policy Implications

29. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health

services), the public sector equality duty, safeguarding of children and adults at risk, 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.

Financial Implications

30. With regard to the proposed option for the DPRC this will save the minimal staff costs and the cost of replacing the card machine. The financial implications of the changes to posts in the current establishment can be found in **paragraphs 19 and 22**.

Human Resources Implications

31. With regard to the DPRC, some short term additional time will be required to update the Council's website and to change the scripts at the Customer Service Centre. With regard to the staffing changes, this will require disestablishment of the existing vacant posts in order to replace them with the requested posts. There are no redeployment requirements.

Human Rights Implications

32. The Access Card supports Article 8 of the Human Rights Act – the right to respect for private and family life. It enables card holders to prove that they have a disability without having to explain private details of their condition in public and enables service providers to quickly and efficiently work to remove the barriers disabled people face.

Public Sector Equality Duty implications

33. The Access Card allows disabled people to provide formal proof that they have a disability. Evidence suggests that this reduces the likelihood of card holders being inappropriately challenged about their use of facilities provided for disabled people. It supports disabled people as equal members of the community and helps to prevent discrimination against them.

Implications for Service Users

34. The wider eligibility criteria for the Access Card enables more people to enjoy its benefits and address some of the specific barriers that disabled people face. The Access Card has benefits that the Council's card does not. However, disabled people will in future be charged £15 for three years for the Access Card, whilst the Council's card is currently free.

RECOMMENDATION/S

That the Committee:

- 1) notes the work taking place in relation to personal health budgets and the Transforming Care programme
- 2) agrees that progress with personal health budgets in the County be reviewed by the Committee in six months

- 3) agrees that a further update on the Transforming Care programme be provided to the Committee in six months
- 4) agrees to cease the provision of the Disabled Persons' Registration Card
- 5) approves the changes to the staffing establishments within the Bassetlaw Hospital Team and the Adult Deaf and Visual Impairment Service as described in paragraphs 19 to 22.

David Pearson

Corporate Director, Adult Social Care, Health and Public Protection

For any enquiries about this report please contact:

Jennie Kennington
Senior Executive Officer,
Adult Social Care, Health and Public Protection
T: 0115 9774141
E: jennie.kennington@nottscc.gov.uk

Constitutional Comments (LM 16/02/16)

35. The recommendations in the report fall within the Terms of Reference of the Adult Social Care and Health Committee.

Financial Comments (KAS 23/02/16)

36. The financial implications are contained within paragraphs 19-22 and paragraph 30 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.

Personal Health Budget Update including proposals from the Vanguard Site - report to Adult Social Care and Health Committee on 7 September 2015

Transforming Care (Winterbourne) update - report to Adult Social Care and Health Committee on 7 September 2015

Electoral Division(s) and Member(s) Affected

All.

ASCH377