



14<sup>th</sup> November 2016

Agenda Item: 4

## **REPORT OF THE SERVICE DIRECTOR FOR MID-NOTTINGHAMSHIRE**

### **COMMISSIONING PLAN FOR SHORT TERM INDEPENDENCE SERVICES FOR OLDER ADULTS 2017-19**

#### **Purpose of the Report**

1. To seek approval of the proposed future model for Short Term Social Care Assessment Beds utilising the £1.365m Better Care Fund (BCF) funding allocated for this from 2017 to 2019.
2. To seek approval for the associated temporary assessment posts to be made permanent and to establish additional posts that are required to enable the delivery of the schemes.
3. To seek approval to bring a further report to the Committee in February 2017 on the evaluation of the Poppy Fields Short Term Social Care Assessment Beds pilot.

#### **Information and Advice**

##### **Policy and Performance**

4. Short Term Social Care Assessment Beds are part of the Council's Short Term Independence Services. On 10<sup>th</sup> October 2016, Adult Social Care and Health (ASCH) Committee approved the reconfiguration of existing social care posts to create two Short Term Independence Services: one for Mid Nottinghamshire and one for Bassetlaw, which will include the following services:
  - a) Short Term Independence Social Care Assessors and Occupational Therapists (OTs)
  - b) Short Term Assessment and Reablement Team (START)
  - c) Short Term Assessment Beds/Apartments
5. The services are provided on a time limited basis to enable older people to live as independently as possible. The main objective is to re-able people and maximise their potential for recovery of confidence, skills and well-being. Key to achieving this is the ability to provide the right care, at the right time, in the right place. This reports builds on the previous one and specifically seeks approval for the future model for Short Term Social Care Assessment Beds/Apartments and associated posts.
6. The Council's Strategic Plan sets out the Council's intention to develop individual and community resources to prevent, delay and reduce the need for care and support. One of the guiding principles of this priority is the need to reduce demand for institutional care, such as long term residential care. Preventing the need for social care services also has

the benefit of reducing costs in the longer term. The Council is also committed to avoiding unnecessary admissions into residential care and hospital.

7. In 2014 the requirement for local authorities to report on their short term services was introduced in the Short and Long Term Return (SALT)<sup>1</sup>. This is the return required by the Government from social care authorities. The indicator connected to this return is the “percentage of people at home 91 days after discharge from hospital” and for the Council this includes intermediate care and reablement services. The current performance is 84% which benchmarks well nationally, even with the recent inclusion of the people with higher needs who use the Council’s Residential Short Term Assessment Beds, in addition to people using the high performing community based START service.

### **Short Term Independence Assessors**

8. As agreed at ASCH Committee in October 2016, the reconfiguration will mean that staff will come under a single line management in each locality, enabling team managers to deploy resources flexibly across the various health bed and community based Intermediate Care services, as well as the Council’s short term social care Assessment Beds and START services. It will enable common goals and objectives to be embedded, as well as enabling the Council’s services to align with the emerging models of intensive, short term community health teams, establishing ‘virtual teams’ in local areas.
9. In May 2016, ASCH Committee approved the temporary extension up to March 2017 of the following posts, pending a detailed review of the Council’s Short Term Services and how this would align with health:
  - 0.8 full-time equivalent (fte) Community Care Officer – CCO (Grade 5), Broxtowe, Gedling & Rushcliffe (BGR) Intermediate Care Team
  - 4 fte Social Workers (Band B) (1 in Ashfield and Mansfield, 2 in BGR Intermediate Care Teams and 1 in Bassetlaw Intermediate Care)
  - 1 fte Community Care Officer CCO (Grade 5), Bassetlaw Intermediate Care.
10. Historically these posts have been funded through various temporary grants and budgets, however, the review has confirmed that these posts are required on a permanent basis.
11. In order to implement the line management changes required for the Short Term Independence Service across Mid Nottinghamshire and Bassetlaw it will be necessary to convert 1 fte Social Worker post at Band B to a 1 fte Senior Practitioner post at Band C within the Mansfield Community Hospital structure. If approved, the Senior Practitioner post established would enable the line management of the Newark Hospital team to be moved to the King’s Mill Hospital team and provide sufficient line management for the split of Newark & Bassetlaw resources to be equitable. This has an additional cost attached of approximately £5,000.
12. The review has also evidenced that therapeutic input into the Council’s Short Term Assessment Beds is crucial to maintain good outcomes for people. Current informal arrangements to deliver this input will cease in March 2017. Ideally 2 fte Physiotherapist

---

<sup>1</sup>[http://www.hscic.gov.uk/media/12020/Guidance-supporting-SALT-collection/pdf/SALT\\_Guidance\\_v1\\_5.pdf](http://www.hscic.gov.uk/media/12020/Guidance-supporting-SALT-collection/pdf/SALT_Guidance_v1_5.pdf)

(Band B) posts and 2 fte Occupational Therapist (Band B) posts are required to cover the planned 54 places. Due to a national shortage of physiotherapists, historically, it has not been possible to recruit to these posts, so it is recommended that 4 fte Occupational Therapist (Band B) posts are permanently established to support the developing model.

13. 1 fte temporary Project Manager (Band D) post is required for 12 months to develop the partnerships, procure the Short Term Independence Services beds/apartments, re-configure staff into the new service and complete work on START efficiencies. Two current temporary posts supporting this area of work end in December 2016 and March 2017.

### **START – Short Term Assessment and Reablement service**

14. The START service is a key contributor to realising the Council's intention to provide services that promote independence and it is critical in ensuring people are discharged from hospital promptly. It continues to deliver excellent outcomes for people; 65% of clients were fully reabled and a further 19% needed a reduced package of care on leaving the service in 2015/16. The implementation of the Total Mobile rostering and monitoring system will improve the accessibility to the service, use of capacity and will provide up to date monitoring and business information, reducing the need for manual processes.
15. There is ongoing work with health partners to create seamless pathways into the service and to identify and reduce any duplication. Initial indications from this work show significant improved cross organisation working relationships and greater understanding of roles and decision making processes, both of which are critical in ensuring that people are on the right care pathway<sup>2</sup>.

### **Accommodation Based Short Term Assessment Beds and Apartments/Flats**

#### **Demand**

16. The Short Term Assessment Beds in the Care and Support centres have become a very useful resource. They are successful in facilitating discharges from hospital and diverting people from long term residential care. For example, at James Hince Court, 52% of people return to their home after a period of assessment there, with only 10% entering Long Term Care from there.
17. Occupancy and demand analysis of the current model has been completed to predict the number of assessment beds or flats that will be required to meet current and increasing demand as 'Transfer to Assess' and 'Discharge to Assess' care models are embedded. This shows that 54 units of Short Term Assessment Apartments/Beds are needed across the County.

#### **Model**

18. There are three main options for procuring short term assessment units:

---

<sup>2</sup> LGA – Efficiency opportunities through health and social care integration

1. creating assessment apartments/flats within current sheltered accommodation
  2. utilising Extra Care schemes so people have their own unit/apartment
  3. using bed based care in independent sector residential care homes.
19. Options A and B are preferable over residential care home beds as it enables individuals to regain their skills and confidence and be assessed in an ordinary domestic and homely environment. For example, everyone has their own or access to kitchen areas and can make drinks and meals, which is not possible in residential care. This helps people to retain and regain their skills and mobility more quickly and provides a clearer understanding of people's on-going care needs, thereby helping to avoid any unnecessary admissions into long term residential care.
20. Initial analysis indicates that using apartments/flats within Extra Care and sheltered housing accommodation has the potential to deliver better outcomes and also be a more cost effective option compared with using residential care homes. Purchasing places in independent sector residential care would cost the Council approximately £533 per bed per week compared with an estimated £460 per bed per week of utilising Extra Care apartments at Poppy Fields in Mansfield and Ashfield.
21. The Council is currently undertaking soft market testing to explore the position of providers' ability, ideas and appetite to deliver Short Term Assessment Beds and apartments/flats across the County. A flexible framework enabling the procurement of these services will be in place by March 2017. A brief description of developing models for each area is provided below.
22. In Mid Nottinghamshire, assessment units are being trialled at the Poppy Fields Extra Care scheme in Mansfield and Ashfield. Early work using two ASSIST sheltered housing scheme flats has shown that they are a viable alternative to using residential care, indicating that most needs can be met through this model. The Poppy Fields pilot will test and refine this new model of partnership working, inform future capacity needs and provide learning for all the short term assessment unit models across the County.
23. In Newark and Sherwood consideration is being given to the use of units within the Bowbridge Extra care scheme when it becomes available in 2018. Moorfields Court has also been identified as a possible site to provide additional capacity, with the benefit of these units having lower associated costs due to current rental arrangements.
24. Bassetlaw Clinical Commissioning Group (CCG) has offered, in principle, the use of a small number of residential beds within a new purpose built Intermediate Care facility on the Bassetlaw hospital site from autumn 2017. Residential beds may be required in Bassetlaw as there are no local community hospital beds. Dependent on viability of costs, this option would see a continuation of the excellent partnership working with health seen at James Hince Court and make best use of assessment and therapy resources due to co-location. Bassetlaw CCG has been asked for costs to compare with the results of the soft market testing.
25. Currently there are no assessment apartments/flats being developed in South Nottinghamshire. The soft market testing aims to stimulate interest in this and provide more options as to how Short Term Assessment Units could be delivered in this area including considering new Extra Cares schemes as they become available.

## Finance

26. There are three proposed funding sources for the development of the Short Term Independence Assessment team and Assessment Units. The following table indicates modelled service and staffing costs against the available amounts by year:

**Short Term Independence Services Budget Information 2017-2020**

		2017/18	2018/19	2019/20
Service Costs	Staffing - Permanent	1,228,000	1,228,000	1,228,000
	Staffing - Temporary	55,000		
	Assessment Beds	315,149	934,769	934,769
<b>Total Cost</b>		1,598,149	2,162,769	2,162,769

		2017/18	2018/19	2019/20
Available Budgets	Intermediate Care Budget	879,000	879,000	879,000
	Better Care Fund	744,013	621,769	
	Care and Support Centre Reprovision		779,000	779,000
<b>Total Budget</b>		1,623,013	2,279,769	1,658,000
<b>Balance</b>		24,863	117,000	- 504,769

27. **Intermediate Care Budgets** - In 2013/14 the Council's intermediate care budget (excluding Community Hospital Budgets) was £3,521,000. Phase 1 & 2 options for change will have delivered £2,680,000 savings. The recurrent remaining budget will be £879,000 from March 2017 and this was retained to pay for the social care and assessment staff required for both health intermediate care services as well as the Council's own Short Term Assessment Beds. In order to fund adequate staff capacity to facilitate assessments and therapists across all of these services will require £1,283,000 which is a shortfall of £404,000 in 2017/18.
28. The posts and temporary Project Manager post can be funded from the temporary BCF funding in 2017/18 and then permanent staff from the recurrent funding when it becomes available through the closures of the Care and Support Centres from 2018/19 onwards.
29. The remaining BCF funding identified for the development of Short Term Assessment units will pay for the replacement services as they come on line from January 2017 and in 2018/19. Due to the dynamic nature of and changing budget sources for the proposed model a full service review will be required in 2019.
30. **Paragraphs 26 to 29** and the table at para 26 detail the available budget sources and service requirements. In summary:
- The cost of the service in 2017/18 will be £1,598,149. This will be funded from recurrent Intermediate care budgets of £879,000 and temporary BCF of £744,013.

- In 2018/19 the service will cost £2,162,769. This will be funded from remaining Intermediate Care budgets as above, temporary BCF of £621,769 and the Care and Support Centre re-provisioning budget of £779,000.
- The estimated under-spends identified in 2018/19 and 2019/20 will be from Better Care Fund. A recommendation will be made to the Better Care Fund Board to carry forward any underspend from 17/18 and 18/19 into 19/20 in order to reduce the predicted shortfall of £504,769.
- In 2019/20 the service will cost £2,162,769 and will be funded by the remaining £879,000 Intermediate Care budget and the Care and Support Centre re-provisioning budget of £779,000. The potential £504,769 shortfall in 2019/20 arises from uncertainty about the future of the Better Care Fund. If this funding is not available, further savings will need to be identified during development of the model, or provision will need to be scaled back, with the potential risk of increasing residential care costs.

### **Other Options Considered**

31. The proposed model for Short Term Assessment Beds allows for flexibility across three different options according to local need and value for money. Through soft market testing the Council will work with providers to develop innovative and cost effective services.
32. Sufficient social care assessor and Occupational Therapy staff are required to support the co-ordination, assessment and support planning for individuals in these services to ensure throughput of people and achieve the best outcomes for them returning home. There is not sufficient capacity within the current permanent staffing structure to undertake this work.

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

33. There is evidence that using Short Term Assessment Beds helps the Council to enable people to return to their homes and contributes to savings and efficiencies. This report sets out the rationale for the benefits of using Short Term Assessment apartments as opposed to residential care beds.
34. The individual planning areas require tailored approaches due to the emerging care models.
35. Therapy input is critical for people to achieve good outcomes. The current temporary assessment staff are required to support both the Assessment Beds and remaining intermediate care services and support emerging care models to ensure effective throughput of clients.

### **Statutory and Policy Implications**

36. 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**

37. The financial implications are contained in **paragraphs 26 – 30.**

## **Human Resources Implications**

38. Paragraphs 28 to 30 in the “Update on progress with arrangements to Integrate Health and Social Care in Mid Nottinghamshire” report to Adult Social Care and Health Committee on 10 October 2016 details HR implications of the agreed proposal to create the Short Term Independence Service (STIS).
39. In summary, the frontline staff already work in the different localities, so other than a potential change of line manager for some staff, there would be minimal change and Human Resources have advised that creating the new service would be a re-configuring of staff and not a restructure.
40. Trade Unions have been consulted with through the Joint Consultative and Negotiating Panel and a workshop will be held for staff with Trade Union representatives in attendance on 4<sup>th</sup> November. The workshop will be an opportunity to identify any issues arising and provide staff with re-assurance regarding training needs.

## **Implications for Service Users**

41. This paper recommends that the current capacity is maintained to enable similar volumes of people to return to their home. The continued aim of the service is to provide people with the best opportunity to remain at home for longer, and the models being considered are those which most replicate a homely environment allowing a more accurate assessment of their needs and will therefore provide better outcomes.

## **RECOMMENDATION/S**

That:

- 1) the proposed future model for Short Term Assessment Beds, utilising the £1.365m Better Care Fund funding allocated for this purpose from 2017 to 2019, is approved
- 2) the permanent establishment of 4 fte Occupational Therapy (Band B) posts is approved.
- 3) the 1 fte Social Worker post at Band B within the Mansfield Community Hospital structure is converted to a 1 fte Senior Practitioner post at Band C.
- 4) the following current temporary posts are made permanent:
  - 0.8 fte Community Care Officers – CCO (Grade 5), Broxtowe, Gedling & Rushcliffe Intermediate Care Team

- 4 fte Social Workers (Band B) (1 in Ashfield and Mansfield, 2 in Broxtowe, Gedling & Rushcliffe Intermediate Care Teams and 1 in Bassetlaw Intermediate Care)
  - 1 fte Community Care Officer CCO (Grade 5), Bassetlaw Intermediate Care.
- 5) a twelve month extension up to 31<sup>st</sup> March 2018 of 1 fte Project Manager (Band D) post is approved
- 6) the Committee receives a further report in February 2017 on the evaluation of the Poppy Fields pilot.

**Sue Batty**  
**Service Director, Mid Nottinghamshire**

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

Karen Peters  
 Project Manager, START Reablement  
 T: 0115 9772926  
 E: karen.peters@nottsc.gov.uk

**Constitutional Comments (SLB 18/10/16)**

42. Adult Social Care and Health Committee is the appropriate body to consider the content of this report, subject to the Council's Employment Procedure Rules which require all reports regarding staffing structure changes to include HR advice, and for consultation to be undertaken with the recognised trade unions.

**Financial Comments (KAS 19/10/16)**

43. The financial implications are contained within paragraphs 26-30 and 37 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.

Extension of Better Care Fund and Intermediate Care posts – report to Adult Social Care and Health Committee on 16 May 2016

Update on progress with arrangements to Integrate Health and Social Care in Mid Nottinghamshire – report to Adult Social Care and Health Committee on 10 October 2016

Lease for Older Adults Short Term Independence Assessment Accommodation, Poppy Fields, Mansfield - report to Finance and Property Committee on 19 September 2016.

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

All.



ASCH433