

Appendix A- Template for Business Case for ITT Bids

Service and Portfolio: Adult Care Services			
Project Sponsor: Sue Darker / Helen Maneuf		Budget Holder & Budget Manager:	Sue Gale Sue Darker
Project Name: Adult Disability Service Efficiency Programme			
Brief Project Outline: To improve the management of growth in demand for services for people with learning disabilities and thereby improve value for money for spend, and control the cost of future demand. Benchmarking information indicates that Hertfordshire’s Learning Disability (LD) services are some 9.4% more expensive on average than comparator authorities, after adjusting for expected regional cost differences. Modelling indicates that bringing costs down to five per cent above average by 2025/26 could offer an annual financial benefit of £7.7m in comparison with costs that might be expected if no other action is taken ¹ . The intention of the bid is to create the capacity to support the Adult Disability Service Efficiency Programme that will see the council’s spend profile move closer to other local authority comparators, reducing the cost of future demand to the council, particularly in relation to accommodation costs. The Invest to Transform (ITT) activity will focus on both: <ul style="list-style-type: none"> • Driving forward the Adult Disability Service Efficiency Programme, putting in place the overall arrangements for efficiency in this area as identified in this bid document. • Improving data, intelligence, strategic planning and strategic commissioning capacity to analyse predicted demand, and plan and deliver solutions for how it is managed, and within the overall programme, specific pieces of activity associated with the Right Home / Right Time workstream: <ul style="list-style-type: none"> • Improving access to mainstream housing for people with mild to moderate learning disabilities • Improving access to mainstream residential and nursing care for older people with learning disabilities. 			

¹ Further detail on caveats and assumptions later in document

Context

National Picture of Learning Disability Spend

Nationally LD spend is recognised as one of the more difficult areas of social care spend against which to achieve savings. Spend on LD service users has not reduced at the same rate as for other user groups over the five years to 2014/15². Councils are experiencing growth in demand of around 3% from new service users who have a learning disability.

Those councils which have developed more sustainable solutions for improving outcomes and efficiency in this service area have³:

- **Detailed knowledge of service users and costs paid to meet needs**
- **Ensured all opportunities to maximise independence are taken**
- A strong focus on ensuring all social workers, commissioners, carers and providers work to achieve outcomes
- Good partnership working with carers to achieve outcomes
- Reduced discrepancies in support levels between children and adult services
- Good partnership working with NHS for those with very challenging behaviours
- Developed a workforce with the right skill sets to support this agenda
- **Housing strategies to support those who are suited to supported living**
- **Housing and associated strategies for those with more complex needs**
- **Appreciated the necessity for culture change and time to achieve and embed new ways of working and service design.**

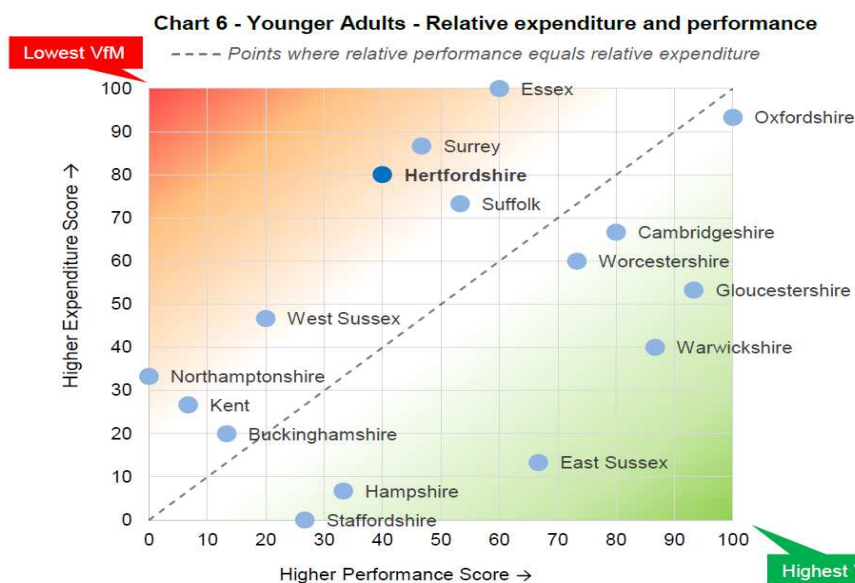
² LGA Adult Social Care Efficiency Project

³ LGA LD Services Efficiency Report

Hertfordshire Picture of LD Spend

HCC budgeted spend on people with learning disabilities in 2016/17 is £152.4m.

Benchmarking information⁴ (2015/16 actual data) demonstrates that Hertfordshire is a high cost authority for Learning Disability expenditure, even after controlling for area cost differences:



Hertfordshire's pattern of comparatively high spend is likely to have continued in 2016/17, particularly since the LD service financial outturn for 2016/17 was £7.6m overspend. This outturn result continued a trend of increasing overspend pressure in the service in recent years:

Financial Year	2013/14	2014/15	2015/16	2016/17
	£'000	£'000	£'000	£'000
Final outturn LD	-2,129	478	4,324	7,619

⁴ LG Futures Financial Intelligence Toolkit 2016/17 – NB chart shows spend for younger adults for all client

The Accommodation Challenge for People with Learning Disabilities

A major cost driver for LD is that of accommodation and care / support delivered into specific settings. The national policy direction is towards more choice and control, and options that promote independent living. Central to this is ensuring there are more 'settled accommodation' options that give people control over where they live and how they are supported. In this context, 'settled accommodation' means individuals having security of tenure in the medium to long term, in models where the individual's status as owner/ occupier or tenant allows them to access certain benefits and, if they wish, change their provider without having to move home.

Currently in Hertfordshire there are three main options for meeting personalised housing related needs:

1. A place in a residential care home – this is not 'settled accommodation' in terms of the above definition, although residential settings are still viewed as having an important role to play for certain care groups; the council funds care and 'hotel' costs
2. A place in supported accommodation – this is 'settled accommodation' in terms of the definition, with users typically having tenant status; 'hotel' costs are often funded through benefits
3. Living at home with family carers.

The table below shows 17/18 budgeted LD accommodation / care purchasing spend:

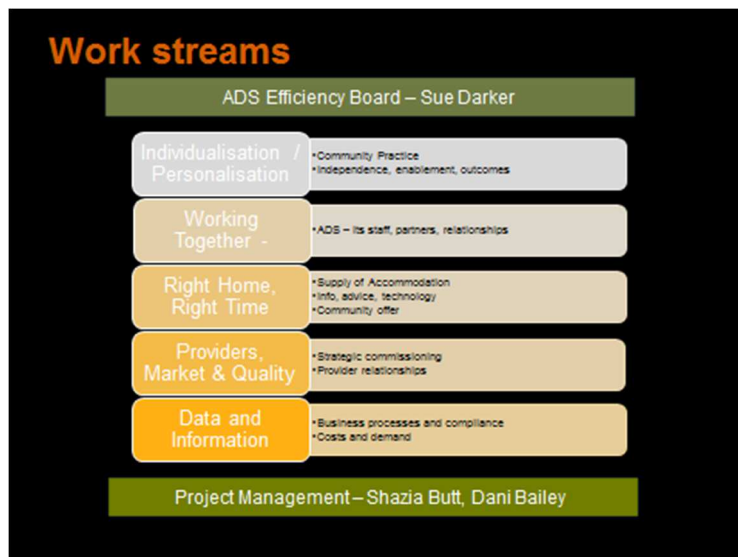
Category	Budgeted spend 2017/18 £'000
Adult Placements	863
Funded Nursing Care	(254)
Residential – long stay – gross	70,908
Nursing	790
Short Stay - gross	1,537
Supported Living	39,868
Total Residential Spend	113,713

Ensuring that all people with a learning disability are living in the right home environment in relation to their needs and aspirations is core to achieving individual outcomes and wellbeing, and also a key area in achieving value for money. In Hertfordshire work on this area has been ad hoc and opportunistic for a number of historical reasons; an effective approach requires new ways of working and a re-thinking of approach.

ACS is developing an Accommodation Strategy to work with new and existing partners to develop its accommodation ambitions locally. The strategy will seek to provide both large scale supported accommodation schemes (moving away from residential care) and locally responsive initiatives that help the council meet accommodation needs in an efficient and effective way.

Adult Disability Service Efficiency Programme

Building on the analysis in the LGA LD Efficiency report cited above, ACS has created an Adult Disability Service Efficiency Programme⁵ which brings a ‘whole systems approach’ to delivering an efficient and effective LD service delivered within budget. The programme recognises that this is a department wide issue and drive. The approach aims to stabilise annual increases in spend and maximise the amount of people supported within available resource, summarised in the diagram below:



The ITT bid seeks support for the overall Adult Disability Service efficiency programme approach and capacity to take forward the ‘Right Home, Right Time’ workstream; all proposed activity is also linked closely to the other workstreams in the diagram above.

⁵ The Adult Disability Service comprises Learning Disability and Physical Disability services for adults 18-64

Cost Reduction Scenario Modelling

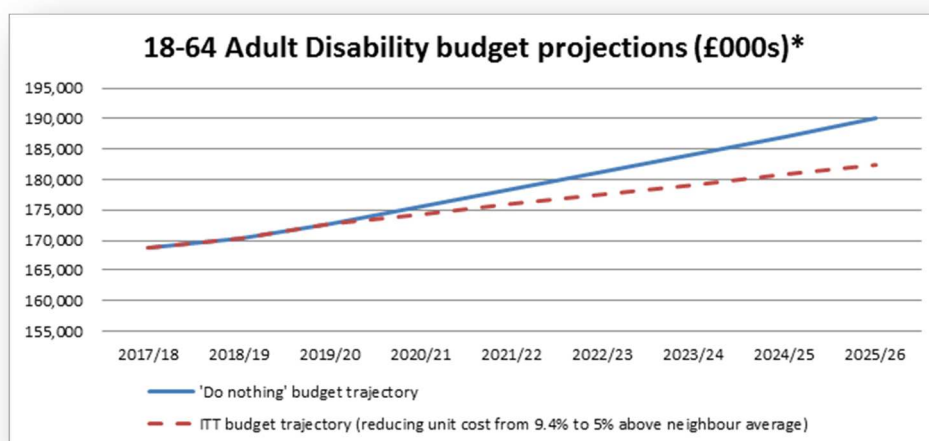
The population of adults with Learning Disabilities in Hertfordshire is due to increase by 14.7% by 2030 and therefore the council is likely to continue to need to expand LD funding in overall terms. This bid aims to support the drive to better cost management in the service with a view to improving value for money over the longer term and reducing the cost to the council of future demand.

The graph below models what would happen if per capita costs were to reduce from 9.4% above nearest neighbour average per the benchmarking report to 5% above average by 2025/26.

The model uses IP figures to 2019/20 and beyond that assumes 0.6% annual population growth and underlying inflation of 1%. The blue line therefore assumes per capita costs increase 1% per year from 2020/21 onwards. The red dashed line assumes this per capita cost increase can be made lower as a result of ADS efficiency programme. By 2025/26, per capita costs would need to be brought down by £1.5k from a 'do nothing' projection of £37.5k to £36k which results in a £7.7m annual saving.

The model assumes that the impact of the whole systems approach starts to be seen in 2019/20 which marks the point at which the thick and dashed lines start to diverge. This is a key milestone as the Council anticipate that by this date there is a new contractual framework for supported living along with property activity that will be improving the supply of suitable care and accommodation for people transitioning into accommodation.

The key risks in the model are around the timing and deliverability of the reduction in per capita costs, along with the assumptions on population growth and the underlying inflation rate. N.B. The model is applied across with Adult Disability Service as a whole including staffing costs.



* assumes budget per IP to 2019/20 and thereafter 1% underlying inflation and population growth

* assumes relative reduction in unit costs from 2020/21 onwards from 9.4% to 5% above average

ITT Bid: LD Efficiency

1. Project 1:

- a) Driving forward the Adult Disability Service Efficiency Programme, putting in place the overall arrangements for efficiency in this area, working with corporate departments, comparison with other council approaches, and ensuring the sustainability of new arrangements at the end of the ITT bid period**
- b) Strategic capacity, management of future demands, improvement of management information, planning and service development activity**

- 1.1. Page 2 of this document identifies the areas required in order to ensure value and effectiveness in relation to expenditure in this area. Whilst the current service has elements of many of these areas there is a need to ensure all these areas are sustained and embedded into standard practice. Project 1a) proposes a programme approach to deliver this and ensure the necessary focus and momentum. This project will also be responsible for embedding the new arrangements so that they are sustained beyond the lifetime of the bid period.
- 1.2. A further element of Project 1a) will be the formation of strong linkages with corporate services for example links with the Intelligence Team to support the development of better management information, and to links to property related activity including the work of the emerging PropCo. Activity will also take place to explore approaches with other councils particularly those showing better performance in the LG Futures benchmarking work.
- 1.3. Project 1b) builds on this to take forward the fundamental transformation of the strategic planning and commissioning capacity in this area. Key to this is developing management information that presents a 'single version of the truth' i.e. a consistent view between service data, finance data and commissioning information. At present management information is held in a variety of places across the organisation, and gives an incomplete and unreliable overview of demand. This makes it difficult to identify and plan ahead to fully understand the level of services required to meet needs and the level of accommodation support required. This in turn hampers the development of appropriate service models and leads to crisis management and reactive placements, which tend to be costlier in nature.
- 1.4. Currently there are fragmented commissioning pathways from the 0-25 operational team and education services into adult services. Additionally, there has been an absence of a strategic commissioning approach for adults with LD aged 18 and over. The absence of a strategic framework has created a difficult market environment, and supply side difficulties. Providers are reluctant to develop new models for support and services in the county. There is an

opportunity for improved market engagement and for procurement activities to drive new and innovative provision including from providers who currently are not trading in Hertfordshire.

- 1.5. Quality, timely and detailed information about service user needs as they move through transition is business critical in order to have effective control of spend. In addition to this, better data and information will support the identification of problematic trends in expenditure, and enhance the ability of commissioners to respond to these by developing appropriate, preventative and cost effective strategies for meeting need, with an ultimate aim of reducing the cost of future demand.
- 1.6. For example the 'LG Futures, Financial Intelligence Toolkit 2016/17- Adult Social Care Report', indicates that Hertfordshire spends proportionately more than comparator authorities on residential spend within the younger adults group, at 40.7% of total accommodation spend, compared to 37.5% for the nearest neighbouring authority and 31.5 % across England. A better understanding of what is driving this distribution of spend will facilitate alternative approaches.
- 1.7. Project 1b) will therefore develop and embed a data management system in order to undertake service user needs analysis and drive commissioning activity.
- 1.8. The project will also review commissioning arrangements to align processes across the department and in relation to the 0-25 service.
- 1.9. This activity will put in place the strategic capacity to deliver the broader LD Efficiency agenda. It will also give the capacity to take forward specific targeted activities, of which projects 2 and 3 below are examples of the sorts of approaches to be developed.

2. Project 2 - Right Home; Right Time - Access to Mainstream Accommodation

- 2.1. This project involves targeted work to support people with a mild to moderate learning disability to live as independently as possible, working in partnership with district/borough council housing services and the county council's Property Services Department. The objective is to identify and alleviate pressures created by either gaps in services or placements which have overtime become inappropriate.
- 2.2. For the existing group already in mainstream housing this project will:
 - (a) Provide appropriate support where this is lacking to sustain tenancies and avoid the need for costlier interventions at times of crisis
 - (b) Move people from supported living into mainstream accommodation with enablement. The Council estimate that there are around 60 people annually who would benefit from a move to mainstream housing with

support

- 2.3 For others still at home with parents this will support work to accommodate people, when they wish for this and where appropriate, in mainstream housing thus reducing the need for more specialist forms of provision.
- 2.4 In principle this will:
- (a) Reduce the cost of care for some service users who are 'over-provided' for;
 - (b) maximise the existing budget to allow for more people to access support within the spend
 - (c) enable people to achieve greater independence at the right time
 - (d) further develop community support where there are currently service gaps i.e. for low level housing related support for people in the community with a Learning Disability.
- 2.5 Spend analysis indicates 292 people are currently in supported living where spend is less than 10k per annum individually – this is a total annual cost of £1,639,415 and average of £5,614 per person per annum. This equates to an hour of support a day and may be an indicator that mainstream accommodation could be beneficial for these individuals, and freeing resource for higher need individuals coming through transition. Care management support will be needed to conduct the care assessments and conversations to carefully support people in moving into settings as appropriate.
- 2.6 In addition and based on information from the Asperger's Team there are approximately 20 people currently who could benefit from living in mainstream housing with minimal support.
- 2.7 Through building on already established links with the county wide district Heads of housing group there is an opportunity for a 'mutually beneficial' arrangement in moving this forward. This will involve engagement from LD team managers taking active role in building local relationships and pathways to support with District Borough council housing services; this could also be an opportunity for the county council's own property strategy.
- 2.8 The Council will also alongside commissioners review the support offered by existing floating housing related support to this LD cohort to establish if further development of service models or investment could support preventative service and a move from social care provision.

3 Project 3 – Right Home / Right Time: Supporting older people with a Learning Disability by accessing mainstream services.

- 3.1 Currently the vast majority of people with a learning disability aged over 60 years live in either, small and specialist LD residential care homes or supported living. As these individuals age, some of the existing care settings are unable to meet their needs due to either the physical environment and/or personal care arrangements which are geared around supporting people with an LD. Whilst the aim is to keep all older people living in their own homes for

as long as possible, inevitably sometimes needs cannot be best met within these limitations. At this point there is an opportunity to create a clear pathway to access services for older people in the same way as the general population. This third project accordingly is around creating the pathway and developing services for older people with LD, so the approach is embedded in to business as usual.

- 3.2 Creating these pathways and developing mainstream residential services will ensure that older people with a learning disability have their needs met, create services to meet new need, and thereby maximise the efficient use of care budgets and service placements.
- 3.3 The total annual spend on people over 65 years of age with LD is £24,382,378. The current average cost per placement in LD is £1193 per week, and for older people in mainstream residential and nursing provision the current cost per placement is £575 per week. The difference on average is £618 per week per placement.
- 3.4 It is clearly unrealistic and inappropriate to move 392 older people out of their homes specifically to achieve savings. A significant saving however is possible with the movement of smaller numbers of people who are struggling to have needs met appropriately in their current care setting.
- 3.5 If at the appropriate time The Council were to place 20 people in Care home for older people with dementia and or mental health conditions at £575.32 the annual cost would be £599,943. The equivalent cost in LD residential placements at an average of £1193 would be £1,244,060. An approximate annual saving of £644,117 would be made for every 20 people placed.
- 3.6 The Council already have examples of older people with a learning disability in mainstream residential care as below case studies highlight;

Example A

Client Y (aged 66) was resettled from Cell Barnes hospital to Granta homes in Baldock in 1991. She has severe epilepsy, severe physical disability and is nonverbal. In 1999 she moved to Poppis Gardens in Ware as her care needs had increased. In the financial year 2014/15 the cost of placement at Poppis Gardens was £64,010. In that year her physical health deteriorated further and she was placed in Premier Court in Bishops Stortford. The Cost of that placement in 2017/18 is £49,809 to HCS and £8,150 to the health service for her nursing care contribution.

Example B

Client X (aged 62) in 2008/09 has a learning disability and was living in Stamford Avenue at an annual cost of £115,366. In 2013/14 she suffered a severe stroke and Stamford Avenue were no longer able to provide the care she needed. Client X moved to a BUPA Nursing home in Luton at an annual cost in 2017/18 of £34,560 to HCS and £8,150 to the health service for her nursing care contribution.

- 3.7 As part of the process the Council would need to ensure that any legal

obligations are fulfilled i.e. court of protection applications and mental capacity processes completed in order to facilitate the moves.

- 3.8 In order to facilitate these moves LD operations would need to prioritise service users over 60 years old for review and care management support to identify and then enable appropriate individuals to move now or in the foreseeable future

4. Project Costs and Savings

Cost of the scheme (revenue and capital) and, where relevant, projected savings :

The main element of the bid costs are for creation of a staff team to deliver this activity. There is a need to invest additional resource for a period of time to create the strategic capacity required to deliver the transformational change required; it is not possible to free up existing resource to do this given the scale of the task and the need for operational teams to focus on day to day activity.

The assumption is that the team is established from August 2017 for two years until July 2019. A further residual amount is required from August 2019 until July 2020 for project completion and transfer to business as usual. In total £ 1,142k is required across the three year period from August 2017.

Staffing aspects cover the following areas of programme activity:

- a) Programme management for the Younger People's Efficiency Programme (1 M5 role) and admin support (1 H6 role) – Project 1a)
- b) Commissioning leads for Supported Living procurement and the management of specific commissioning work strands including: establishing strategic commissioning arrangements, reviewing the linkages between commissioning teams and operational teams, stakeholder management, communications, systems development of management information for forecasting future need (2 * M3 roles) – Project 1b)
- c) Care Management staff and management to oversee operational care management related tasks including assessments of needs and reviews , and leadership around all aspects of service user and carer engagement (1 M4 role; 1 M3 role; 1 M2 role; 2 H9 roles) – Projects 2 and 3
- d) Senior Estates officer – to provide linkages between corporate property and support on suitability of property, opportunities (1 M2 role) - Projects 2 and 3

Costs are summarised below

1	Revenue Costs		WTE	17/18	18/19	19/20	20/21
2				£	£	£	£
3	Programme						
4	Programme Manager	M5	1	42,799	64,196	21,397	0
5	Admin officer	H6	1	19,552	29,326	9,774	0
6	Commissioning						
7	Commissioning Manager	M3	1	37,688	56,529	56,529	18,841
8		M3	1	37,688	56,529	18,841	
9	Care Management						
10	Manager	M4	1	40,194	60,288	20,094	0
11	Deputy	M3	1	37,688	56,529	18,841	
12	Advanced Practitioners	M2	1	35,142	52,710	17,568	0
13	Social Wokers	H9	2	55,881	83,817	27,936	0
14	Estates						
15	Senior Estates Officer	M2	1	35,142	52,710	17,568	0
16							
17	Total			341,773	512,634	208,549	18,841
18							
19	Workforce Development			10,000	15,000	0	0
20	Comms			8,000	7,000	0	0
21	Service User Engagement			10,000	10,000	0	0
22							
23				369,773	544,634	208,549	18,841
24	Overall total						1,141,797
25							

Project Savings and Benefits

Cashable revenue savings are estimated below:

	2017/18	2018/19	2019/20
Revenue Savings			
<i>Older LD project – based on:</i>			
<i>7 people in year 1</i>	(224,952)	(482,040)	
<i>15 people in year 2 onward</i>			(482,040)

Non-cashable revenue benefits: The bid document models a £7.7m reduction in future demand as set out above, subject to various assumptions which are detailed.

Wider benefits are mapped in the embedded document and shown in more detail at section 5 below:



Benefits Map.docx

Performance Monitoring

Progress will be monitored monthly at the Adult Disability Service Transformation Board with regular updates to Adult Care Service Management Board.

A series of milestones are proposed in section 5 below and accountability for these will be assigned to individual Transformation workstreams. This will allow the tracking of project progress.

The management information and data workstream will monitor and report on financial progress.

Section 5: Project Benefits, Outputs and Measures for Success				
<u>5. Benefits for each Project area</u>	Timeline, August 2017 – August 2019	Outputs	Outcomes	Measures for Success
<u>Transition for 0-25</u>	Year 1	<ul style="list-style-type: none"> • Tool developed for recording the need for accommodation and other relevant data gathered - all year groups aged 14 -25 • Needs of 14-25 year olds will be identified and recorded in line with tool • Management Information shared with provider market and District/ Borough Councils 	<ul style="list-style-type: none"> • Analysis will highlight the type of accommodation and level of need • Commissioning analysis to align to procurement model requirements for SL (with cashable/ non cashable savings options) 	<ul style="list-style-type: none"> • Commissioning strategies by district reflect 100 % full details of need for 14-25 by April 18. • Embedding of tool into business as usual for work of 0-25 and commissioning teams in HCS i.e. regular management information is provided to commissioners to inform planning • Use of assistive technology within accommodation settings is increased , 20 % increase year on year
	Year 2	<ul style="list-style-type: none"> • Second year group analysis completed for Year 10 to Year 14 • Needs of 14-25 year olds identified and recorded in line with tool. • Management Information shared with Provider market and District/ Borough Councils. • Procurement for Supported Living Go Live 	<ul style="list-style-type: none"> • Analysis will highlight the type of accommodation and level of need • Potential high need service users identified and 0-25 teams identify early case work on outcomes needed. • Service developments begun to meet needs analysis by District Borough Council areas. • Business process embedded into 'business as usual' in 0-25 teams and HCS Commissioning 	
<u>Access to Mainstream Accommodation</u>	Year 1	<ul style="list-style-type: none"> • Existing care pathways to mainstream housing mapped 		<ul style="list-style-type: none"> • 20 people per district are offered more appropriate levels

		<ul style="list-style-type: none"> Partnership working approach agreed with ten District /Borough Councils ,and operational teams New care pathway pilot set up and trailed in two District Borough areas Care managers communications and/or trained on pathway development in pilot teams 10 service users moved in line with pathway in two pilots 10 people supported in existing tenancies in pilot areas 		of service independence
	Year 2	<ul style="list-style-type: none"> Agreement of District Borough councils to roll out programme across county and LD teams (explore option for PD SU's) Support Living providers facilitating an enabling pathway for people locally to move in a and out of specialist and mainstream provision with support 	<ul style="list-style-type: none"> 50 people move across Hertfordshire to mainstream housing from home or existing supported housing 50 people supported across county in mainstream housing Embedding of pathway completed across all ten District/ Borough councils and LD teams (and for PD groups). 	<ul style="list-style-type: none"> 50 places are freed up countywide from people in traditional LD settings

<p><u>Older people with a Learning Disability by accessing mainstream residential services</u></p>	<p>Year 1</p>	<ul style="list-style-type: none"> • Identification by each District Borough area of two residential and Nursing homes which are able to admit older people with learning disability. • Care managers and Nurses to identify individuals whose needs are not met by existing LD residential or supported living due to increasing frailty • Consider contractual or fee changes with providers, commissioners • Establish requirements for staff to be trained on adjustments needed for supporting people with a learning disability. • Involve Nurses in LD teams as named link for the individual homes and arrange for them to deliver awareness training. • Establish a process for CST to maintain the list of homes by District area 	<ul style="list-style-type: none"> • Contracts in mainstream residential are expanded for LD access/outcomes • Established pathways are agreed between homes /LD teams/nurses 	<ul style="list-style-type: none"> • 7 people move in year 1. A part year saving of £224.5k
	<p>Year 2</p>	<ul style="list-style-type: none"> • Care homes by District and Borough councils begin admitting across the county. • Each home has a named Nurse liaison • Pathway established as business as usual • Service embed approach into resi contract renewal process April18 	<ul style="list-style-type: none"> • Approach is embedded into business as usual across stakeholder groups as need identified all service users move 	<ul style="list-style-type: none"> • Approach is business as usual i.e. peoples primary needs are core to housing options • 15 people move in year 2. A full year approximate saving of £482,000

Significant Assumptions and Risks

Below outlines some of the key risks that have been identified across project areas. In order to mitigate against individual risks the Council will develop an overarching risk register to articulate and monitor on a monthly basis the relevant areas. In addition to this, there will also be reference to the work of the ADS Efficiencies Board and the implementation of a new Adult Accommodation strategy in Herts as areas of significant interdependency.

Project Area	Significant Risks/Assumptions to Project Success	Mitigations
<p>Project 1 : Programme Management / Strategic Commissioning</p>	<p>Risks</p> <ul style="list-style-type: none"> • A lack of engagement from transition team/operational/commissioning teams and education services due to existing priorities • A lack of clarity around roles and responsibilities between programme resources and commissioning /operational services • Culture – resistance to move away from the current approach • Unless substantial changes are made to operating models unmet need will be hard to predict due to poor planning and lead in time needed to develop service solutions , leading to rises in costs , increases in crisis placement and out of county solutions • Providers do not see the benefits changing service models to meet new demands – and that prices continue to be inequitable comparably for LD against other care groups <p>Assumptions</p> <ul style="list-style-type: none"> • That key stakeholders (HCC) accept significant and bold changes need to be made in order to maximise use of budgets going forward- and that Senior Managers collaborate in relation to key messages around 'rationale' for change • Support Living providers (post procurement) will engage with new ways of working i.e. drive community first 	<ul style="list-style-type: none"> • HCSMB sign off around roles and responsibilities/expectations -and relevant sign off from Children's service as appropriate • Workforce development – identification and implementation around organisational development requirements • Key messages are developed for internal/external stakeholders • Clarity about the roles of different stakeholders across the commissioning cycle is revisited and agreed for e.g. CST,BVT, Strategic Commissioning • Savings for key HCS stakeholder teams will need to be linked to team plans/PMDS targets

<p>Project 2 - Access to mainstream housing</p>	<p>Risks</p> <ul style="list-style-type: none"> • There could be mixed views on the importance of the project from districts which will result in fragmented business processes across the county resulting in delays to placing and/or supporting people appropriately • A lack of clarity around roles and responsibilities between programme resources and operational/commissioning services • LD operational Services are unable to engage due to existing pressures (they will be required to link with district leads as well as undertake case work) • Service users may not want to leave where they currently are as want to sustain existing relationships and feel more secure in a familiar setting <p>Assumptions</p> <ul style="list-style-type: none"> • That there are services users in LD specialist housing who may be overprovided for (based on costs analysis) – and there are people in mainstream housing with an LD who have care and support needs but currently don't receive support. Some of the people in specialist services may be reluctant to move as do not want change for a range of reasons • Future supported Living providers will engage with new ways of working i.e. community first 	<ul style="list-style-type: none"> • Mutual benefits will need to be clearly communicated i.e. ensuring people in both mainstream housing and specialist services get the right care and support and can sustain a tenancy as appropriate. Key messages developed for internal/external stakeholders • There will be some requirements around court of protection processes and capacity assessments for service users prior to moves • LD will be required to ensure the work is linked to the future planning process • Savings for LD teams will need to be linked to team plans/PMDS targets
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<p>Project 3 - Older People with Learning Disability (LD) moving into mainstream residential care</p>	<p>Risks</p> <ul style="list-style-type: none"> • Mainstream residential care providers are unable to provide flexible care either due to existing capacity pressures and/or perceive they are unable to meet the needs of older people with an LD • This could push up price as a new demand i.e. the cost of mainstream residential care increases hence lower efficiency margin • People with learning disability experience discrimination in mainstream services as their needs are not understood and/or met • LD teams are unable to support case work due to existing pressures and /or reluctant too due to perceptions that mainstream services cannot meet needs • Service users are reluctant to move despite needs being better met and therefore savings are not realised and capacity not released – this is likely to result in increased care costs (total budget terms) in LD to meet future demands <p>Assumptions</p> <ul style="list-style-type: none"> • There will be mixed interest from mainstream residential providers but with some workforce development the needs of LD people will be able to be met 	<ul style="list-style-type: none"> • Contracts for mainstream residential services will need to be varied in order to ensure the needs of people with a LD are met • There will be variable interest from residential providers around supporting LD service users – workforce development opportunities will need to be identified and provided to facilitate change • Case examples shared with mainstream providers to show where LD people are already being supported • There will be some requirements around court of protection processes and capacity assessments for service users prior to moves • Savings for LD teams will be required to be linked to team plans/PMDS targets
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