

HERTFORDSHIRE COUNTY COUNCIL

ADULT CARE AND HEALTH CABINET PANEL

TUESDAY 24 APRIL 2018 AT 10:30 AM

**ADULT DISABILITY SERVICES TRANSFORMATION
UPDATE**

Agenda Item No.

5

Report of the Director of Adult Care Services

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1. Purpose of the Report

- 1.1 To inform Panel members of Adult Disability Services (ADS) developments including changes within the operational ADS service and strategic commissioning arrangements.
- 1.2 To provide a consolidated update of the ADS Efficiencies Programme and related activity to deliver system wide efficiencies and transformation, linked to Integrated Planning (IP) requirements.

2. Summary

- 2.1 There are a number of pressures within Adult Disability Services (ADS) due to a range of factors which include legislative and statutory responsibilities, both budgetary and demography based, which are creating challenges at both a national and local level. There is a requirement to address these within the context of our Integrated Planning process.
- 2.2 As a response to the above pressures this report highlights the transformative opportunities identified to address strategic challenges and programme management approach being led by Adult Care Services to take these forward. This includes the creation of a new ADS Efficiencies Board to oversee the planning, implementation and governance arrangements to our response. In addition to this a number of areas have been reviewed covering an assessment of our strategic capacity and structures to oversee transformation activity covering operational and commissioning arrangements, alongside developments around a new assessment model for service delivery 'Connected Lives'.

3. Recommendation

3.1 Panel is asked to note and comment on the report.

4. Legislative and Policy Context for Adult Disability Services

4.1 In delivering services to people with learning and physical disabilities, Adult Care Services (ACS) is required to remain fully compliant with the [Care Act 2014](#) and other legislative responsibilities, and keep these at the centre of our planning, decision making and practice.

4.2 To further advance the local implementation for these duties an Adult Disability Service (ADS) was formed in April 2017 offering a multi-disciplinary care management, health liaison, and nursing service to people with a Learning Disability (LD) and /or Physical Disability (PD), in addition to meeting the needs of people with needs such as Asperger's or people who form part of the Transforming Care programme. The ADS service vision is;

'A service focused on enabling and empowering adults with additional needs in their communities. We will promote the development of personal skills to facilitate greater independence and to obtain access to true citizenship'

4.3 This followed the move of the LD 'Transitions' teams into Children's Services to form a new 0-25 service in October 2016 which strengthened continuity of care and support and future planning for young people moving into adulthood.

5 Financial context and challenge for Adult Disability Services

5.1 Nationally, Learning Disability spend is recognised as one of the more challenging areas of social care spend against which to achieve efficiencies. Expenditure for Learning Disability service areas has not reduced at the same rate as for other user groups over the five years to 2014/15¹. Councils are experiencing growth in demand of around 3% per annum from new service users who have a Learning Disability. In Hertfordshire, as outlined in the [ACS 15 year plan](#), by 2030 we expect to see a 14.7% increase in population for people with a Learning Disability and 11.4 % increase for people with a Physical Disability (Appendix 1) from our 2015 position.

5.2 At a local level the council has already recognised that it is a comparatively high cost authority for the care and support of people between the ages of 18-64 or 'younger adults'. The latest available comparative information confirms this, with the County Council's gross long term spend on adults aged 18-64 per head of population above average for the region and nationally for 2016/17. Note that this analysis includes spend on all types of support needs within this age group.

¹ LGA Adult Social Care Efficiency Project

5.3 The County Council has set a net budget of £156m for expenditure in relation to adults with physical and learning disabilities in 2018/19. As part of our work programme to deliver transformation and efficiencies, Panel will recall that there are a number of IP requirements for ADS focusing as tabled below on the following service and strategy areas as per the [IP Cabinet report](#):

Description	IP Reference	Efficiency Required			
		18/19	19/20	20/21	21/22
ADS Transformation		£'000	£'000	£'000	£'000
ADS Strategy 1: Day Opportunities	NE33	-1,100	-1,600	-2,100	-2,600
ADS Strategy 2: Accommodation	NE34	-1,100	-3,600	-5,100	-6,600
ADS Strategy 3: Transforming Care and Out of County & CHC Income	NE35	-450	-1,100	-1,750	-2,400
ADS Strategy 4: Provider VFM & BVT	NE25 & NE36	-1,800	-2,600	-3,400	-3,900
		-4,450	-8,900	-12,350	-15,500

6. Responses

- 6.1 A new Transformation Board for ADS (“the Board” is made up of key senior managers from ADS and other key service areas) was established in spring 2017 to further strengthen our strategic capacity, which is needed to ensure we deliver on our core business objectives in parallel to achieving IP target requirements. The Board created an ADS Efficiency Programme² which brings a ‘whole systems approach’ to delivering effective and efficient services within budgets. This work also supports the implementation of the ACS [3 year plan](#) and 15 year plans.
- 6.2 On the 10 July 2017 Cabinet supported an initial [Invest to Transform](#) (ITT bid) for £1.14m for fixed term resources over three years. This bid allocated funding to focus on the strategic commissioning of accommodation for adults with disabilities and broader programme management resource.
- 6.3 In the light of continued overspend pressures in the LD service and to fully assure ourselves that we have the needed internal working arrangements and resources in place to maximise efficiencies, the Director of Adult Care Services also undertook an internal review of the ADS service (in Autumn 2017). This followed a number of lines of enquiry:
- last year (2016/17) ADS were overspent by £5m and so the review sought to identify progress around budget management and reductions and also identify opportunities around mitigating these pressures and the ability for the service to transform within its current capacity

² The Adult Disability Service comprises Learning Disability and Physical Disability services for adults 18-64

- an assessment of referral rates and case work levels in the light of the creation of both the ADS Service and the 0-25 Service. The assessment identified that there had been a significant increase in safeguarding referrals and additional administrative functions on teams in relation to appointeeship, Court of Protection and financial management
- strategic commissioning functions were reviewed, both in terms of supporting the operational teams and delivering IP savings over the next four years. This was to make sure we position ourselves to develop a market fit for the future i.e. to meet the needs of a rising demographic of adults that will need our services.

6.4 The review made a series of proposals related to the structure of the operational teams and the need to establish a strong strategic commissioning focus across all care and support services for adults with disabilities. A second [ITT bid](#) was brought to Cabinet on the 19 February 2018 which proposed funding to support the new structure, to complement funding which was able to be identified internally within the department.

7. Key Areas of ADS structure changes

7.1 The new structure will fully come into effect from 1 April 2018 and will comprise:

7.2 **Adult Disability Commissioning Team** – a new commissioning team to focus on the needs of adults of working age, including through bringing together ‘micro’ and ‘macro’ commissioning elements under strategic commissioning. This provides a positive opportunity to shape the future service provision to make it best value for money but also modernize services and ultimately meet service user needs through high quality services. Key themes include work on accommodation, designing and developing a new day opportunities offer for younger adults, delivering the efficiencies agenda for transport, and developing a strategic approach to provider management, and securing value for money on package costs.

7.3 **Adult Disability Locality Teams** - The locality teams will continue in their current seven team structure with Asperger staff and Review Team Community Care Officers being integrated into the teams. In addition we have introduced a second Deputy Head of Service Post, and increased the number of social workers, occupational therapists and community care officers within the teams (including some additional resources into the 0-25 team). This will provide capacity to deliver the ‘Connected Lives’ model as discussed below.

7.4 The structure also includes the introduction of Service Link Officers (SLOs) across ADS Locality Teams. SLOs have successfully supported operational staff in Older People services for a number of years with a focus on the business administrative side of activity. Over recent years in ADS this administrative work has increasingly fallen on social workers, community care officers and management. The SLO roles will relieve the increased pressure on the teams and allow for an improved approach to financial case work, reporting and specialist support functions such as safeguarding.

8. A new approach - Connected Lives

8.1 A new assessment framework, Connected Lives was launched across ACS in January 2018, (model outlined in Appendix 2) and forms a significant part of the underpinning approach and principles for the transformation of ACS as a whole. Connected Lives is Hertfordshire's whole service approach to community practice, personalised enablement and new models of commissioning. Key to this model is the concept of connecting and the approach follows the principles below:

- exploring personal strengths and community connections;
- focussing on enablement;
- recovering from crisis before long term plans are made;
- preventing escalation of need.

8.2 As well as being a model which expresses the enabling and personalised ethos of the Care Act, the approach will ultimately mean a more considered use of financial resources, particularly for service users with a mild to moderate need. The above principles will also be applied when reviewing service user care packages which will be a priority in the next 2 years.

9. ADS Efficiencies Transformation Update (IP strategies)

9.1 In parallel to the internal changes outlined above, the following sections provide details on our strategic planning and project activity underway targeted on delivering on IP requirements via ADS transformation.

9.2 Negotiating Strategies

To ensure value for money to maximise the number of people we can support within budgets and deliver savings, work is progressing to develop and implement a new negotiating strategy for ADS providers. The strategy will cover a number of areas including;

- targeted and tactical negotiations for a range of service areas covering both ADS voluntary and commercial services – this will establish how we prioritise our resources based on where we can have the biggest impact in terms of benefits realisation;

- opportunities for existing and new providers to grow their business in Hertfordshire;
- decommissioning strategies where services no longer achieve the outcomes that people want;
- delivery of Care Act 2014 responsibilities around market shaping, market oversight and contingency planning;
- clear and effective communications for external stakeholders to demonstrate the benefits and rationale for negotiation approaches.

9.3 **Optimal Accommodation for All: 'Right Home Right Time'**

This work stream oversees a number of key projects based around accommodation settings to ensure that people are offered appropriate levels of support to maximise independence and choice whilst fully meeting assessed needs.

9.3.1 Currently the vast majority of **older people with a Learning Disability** aged over 60 years, live in either, small and specialist Learning Disability 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 Learning Disability. Mainstream service providers across Hertfordshire have already expressed an interest in developing their service model in order to meet needs and review work is progressing to identify individuals who will benefit, and twenty individuals have already moved to mainstream residential settings.

9.3.2 **Pathways to access mainstream housing** are also being developed including through the exploration of 'property swap' options. Through building on established links with the county wide District Heads of Housing group there is an opportunity to pilot the approach in both North Herts and Watford. This will involve the provision of appropriate support where this is lacking to sustain tenancies and avoid the need for costlier interventions at times of crisis, as well moving people from supported living into mainstream accommodation with enablement.

9.3.3 **Shared Lives services** at a national level have seen growth at 27% in the last 2 years. The shared lives service offering consists of community based accommodation with carer support, preparing service users for more independent living and provision of support for 'moving on'. From a low baseline in terms of take up we are looking to expand this service as part of our core offering. The Shared Lives service was provided by Guidepost Trust until November 2017 when it was transferred to the County Council in house service and the ambition to increase the number of service users living in shared lives households is dependent on two areas that we will target our efforts on;

- the recruitment and retention of new families and households able to offer Shared Lives placements;
- the identification of service users suitable and matching of the service users with the Shared Lives households identified.

9.3.4 **Supported Living** key principles are that people own or rent their home and have control over the support they get, who they live with (if anyone) and have real choice over how they live their lives. As part of a transformation programme for Supported Living, new service and contractual arrangements will be in place from April 2019 with a number of provider engagement events already undertaken with positive feedback. Currently the biggest age group in need of a placement is younger people, aged between 17-25 years. With this in mind there will be an initial focus on implementing the approach for new packages of care in order to:

- create capacity for people who do not currently have access to the right accommodation and support, including preventing unnecessary and costly moves outside of Hertfordshire;
- better manage and control the cost of future provision;
- give clarity to the market to inform future development;
- the second phase will focus on the transferring of existing services onto the framework terms and conditions.

9.3.5 **Residential Care** has been an important part of our offer for service users who have the greatest level of need. However, as part of our strategies to offer service users greater independence we have for a number of years looked to develop Supported Living model options as described above, thus minimising the requirements for residential care. As the cohort of service users in residential care ages there is a need to consider the medium to long term sustainability of residential services in offering long term care for this group. Accordingly, we are taking forward a new work programme consider how we will support residential providers in responding to these changes in the market place.

9.4 Citizenship (Direct Payments, employment and volunteering)

9.4.1 **Direct Payments**³ have expanded greatly as a service solution over the last ten years and in November 2017 accounted for 9% of the total spend on people with a Learning Disability and Physical Disability. For 18-25 year olds the percentage of spend delivered through Direct Payments was 23%. Younger service users are increasingly requiring different approaches to the more traditional service offers and there is an opportunity as we design these to link in to our new negotiating strategy and contracting processes, which will minimise the use of ad hoc arrangements and also open up opportunities for new providers to join the Hertfordshire marketplace.

A strategic review of Direct Payments is underway, and operationally the focus is on a reviewing process for existing services users to identify opportunities to maximise independence through implementing Connected Lives principles. The expansion of the use of payment cards is enabling us to avoid situations where high balances of unused funds accrue in service user bank accounts, improving the effective use of resource.

9.4.2 **Employment and Volunteering** – as part of our ambitions to support adults with disabilities to achieve full citizenship, including through achieving individual aspirations and goals with regards to employment, volunteering and education, we are currently reviewing the local service offer, and will develop and implement a targeted approach for people as they move through transition into adult care. As part of our approach, work is underway to review and enhance our ability to help people with a disability to navigate to the appropriate ‘on line’ support information for employment and volunteering. A series of locality based ‘campaign’ events: ‘Connected 2 work’, in partnership with library services, will take place over the coming year

9.4.3 **Changing Services Together** – this project is focused around day opportunities and entails a review of the support provided to individuals, to maintain independence and wellbeing. Through a targeted approach and, by focusing on and changing provision for young people entering adult care, efficiencies and a more enabling range of services can be delivered by 2020. These services are of specific importance to carers as they often provide daily respite for them. The model for future services will be co-produced with service users and carers.

³Care Act 2014 requires local authorities to offer eligible people [Direct Payments](#) as a method of meeting assessed needs. This involves giving people a personal budget in order to secure service provision

9.5. Continuing Healthcare, Transforming Care and Out of County provision

9.5.1 Continuing Healthcare (CHC) – our work here involves a targeted approach around ensuring entitlement to NHS funding as appropriate. An initial scoping exercise to identify potential cases has been completed with a programme of work underway to progress these.

9.5.2 Out of County provision – reviewing residential care packages (in and out of county) for people where unit costs are high compared to the dependency of the client group.

9.5.3 Transforming Care — the Transforming Care programme (a response to the exposure of abuse at Winterbourne View) is a three year national programme ending in March 2019. The programme is about improving the quality of life for people with a learning disability and/or autism who display behaviours that challenge, including behaviour which is attributable to a mental health condition. The programme priority was to enable individuals that were currently living in assessment and treatment units to be discharged and live successfully in the community. Efficiencies will be achieved through reducing the number of people who go into hospital and cutting stay times by making sure as many individuals as possible can live in their local community with the right level of support. A focus on ensuring people are supported and enabled to live as independently as possible should see a reduction in the level of direct care required. Through careful planning and risk management we are exploring how we can mainstream the service offer as the programme comes to an end.

9.6 For each of the project areas outlined above there are individual project plans and governance arrangements in place which will monitor the project delivery against financial and performance targets. This includes robust reporting requirements at both a work stream and broader programme level as part of the ADS Efficiencies governance framework.

10. Financial Implications

10.1 As outlined in section 6.2 and 6.4 of this report two ITT bids covering a 4 year period totalling individual amounts for £1.4m and £1.1m have been agreed to support ADS Transformation activity and are critical in ensuring delivery of IP requirements. Work is continuing to improve the ability to monitor the achievement of savings targets (outlined in 5.3) and to identify alternative solutions where required

10.2 In addition a review of base budget funding has identified up to £1m to transfer internally within the ADS from care purchasing to staffing budget lines. This will provide capacity to implement the Connected Lives model. The expectation is that this will lead to reductions in care purchasing spend.

11. Risk implications

- 11.1 There are strategic risks associated with the general pressures on ADS and ACS budgets which arise from the demand led nature of costs in this area. Adult social care budgets have been under pressure for a number of years due to the growing and ageing population and rising expectations of people who need care and their families. The funding deficit arising from these pressures and the plans to bridge this via efficiency and saving proposals create a further cumulative pressure and risk, hence further funding requirements outlined in section 9 are critical.
- 11.2 There are robust programme governance arrangements in place for planning, reporting and monitoring against progress for ADS Transformation with a strategic performance framework under development (to include key performance indicators) as a further measure. This will provide critical oversight of key work streams of activity and escalation points to take forward approaches around addressing strategic and cumulative risks arising.

12. Property or accommodation implications

- 12.1 Over the medium to longer term the developments around Supported Living procurement will lead into an opportunity to align our transformation approaches and strategies with the newly formed Property Company, Herts Living.
- 12.2 Our approach needs to take account of the existing residential market for people with a learning disability, which largely developed as a response to resettlement from the long stay hospitals. As a consequence many of these services risk being unsustainable as service users age, and we need to develop a strategic approach to this, and explore opportunities to create additional supported living arrangements including through more innovative use of capital assets.

13. Other Implications

- 13.1 There are a number of critical opportunities to align ADS Transformation delivery with other key ACS and IP related programmes of work. These include;
- assistive technology – this will provide better support people with care and support needs and carers through modern assistive technology solutions and more pro-actively identifying and meet a person’s ongoing care needs;
 - workforce development - building the adult social care workforce in the county delivering the necessary growth in the workforce to meet the increase in people requiring care and support needs;

13.2 At a departmental level the ACS IP strategies will fundamentally transform the ACS department in line with the themes set out in the [IP Strategic Direction](#).

14. Evidence of where we have engaged staff, partners and service/users in this proposal

14.1 As part of the internal service review, initial management briefings took place in November 2017, detailing the review proposals. Wider vision and planning sessions were carried out across all sites with whole service attendance to explain the business case for change, introduce updated service vision proposals and expectations, (covering links to Connected Lives and IP requirements). As part of this process staff were given opportunities to influence and develop ideas for future delivery. Operational staff are also engaged in key ADS Efficiencies projects.

14.2 From Autumn 2017 through to the current date a number of workshops and presentations have taken place with service providers. Engagement activity to date has focused on a number of service areas including developing access to mainstream services for older LD people, Supported Living transformation and also ambitions around our local employment and volunteering service offer. Service users and carers, including experts by experience and young commissioners (younger aged individual service users) are also engaging with future planned activity.

15. Equality Implications

15.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.

15.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.

15.3 The Equality Act 2010 requires the Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.

- 15.4 A cumulative EQIA for the ADS transformation programme is under development with each key project within the programme required to undertake an EqIA to inform service design and decision making. A number of individual project EQIA's have already been undertaken. A specific EqIA has also been undertaken and relates to the internal service review undertaken in autumn 2017 and subsequent consultation.
- 15.5 Analysis to date identifies that these proposals have potential to impact on disabled people and their families and these impacts have the potential to be negative, for example if disability providers seek to exit the market, or positive, for example if suitable accommodation solutions are available in Hertfordshire.
- 15.6 The following mitigating actions taken or planned are aimed at minimising any negative impact of the proposals and promoting good relations across diverse communities:
- robust needs analysis to ensure the service proposals and specific accommodation options match the needs of the users, including by age, and use a wide range of data sources, including national data and learning from other areas that have introduced similar changes;
 - appropriate engagement and consultation will ensure the views of service users, carers and groups that represent them are taken into account and help build a consensus around the case for change;
 - Co-ordination with other partners and agencies to ensure vulnerable people are supported, including signposting and referral of service users and carers where appropriate;
 - robust monitoring of the overall ADS budget to make best use of existing resources to ensure support is targeted at those who need it most;
 - continual monitoring to ensure positive benefits are being realised;
 - monitoring to ensure culturally appropriate care continues to be provided and that individuals who do not have high levels of proficiency in English will be supported;
 - person-centred evaluation on a case by case basis of the potential for a new model of care and support;
 - Service-level reviews as part of implementation plans to ensure that cumulative impacts are identified and addressed;
 - integrated approach to developing the market and negotiating with providers; including fully risk assessing each provider and considering quality and safeguarding issues as well as financial; and working with local, regional and national partners around market resilience.

Appendix 1 – Adult Care Services 15 Year Plan Direction - Population projections for Hertfordshire in 2030 by major care group



Appendix 2 – Adult Disability Services and Connected Lives Model

