Business Case

A/R.6.114 Increasing independence and resilience when meeting the needs of people with learning disabilities

Project Overview

Project Title	A/R.6.114 Increasing independence and resilience when meeting the needs of people with learning disabilities		
Project Code	PR000176	**Business Planning Reference**	A/R.6.114
Business Planning Brief Description	A three-year programme of work was undertaken in Learning Disability Services from 2016/17 to ensure service-users had the appropriate level of care - this saving is the remaining impact of part-year savings made in 2018/19		
Senior Responsible Officer	Tracy Gurney		

Project Approach

Background

Why do we need to undertake this project?

Following the third year of a programme of reassessment work for all people open to the Learning Disability Partnership (LDP) in 2018/19, the focus was on continuing to develop independence and resilience of individuals and their networks through the Transforming Lives approach and the application of policy lines approved by Adults Committee in 2016.

The Project Assessment Team have been in place throughout 2017/18 and 2018/19 and have achieved savings using a combination of social work and specialised brokerage negotiations. The methodology that they have been using has been shared with the locality teams within the LDP who will use that methodology to achieve further savings from the remaining cases.

This 2019/20 saving of £200k, is the remaining impact of part year savings expected to be delivered in 2018/19

What would happen if we did not complete this project?

Some people with learning disabilities may be over-supported. Assistive technology may not be used to its full potential and some people with learning disabilities may be less independent than they could be.

Approach

Aims / Objectives

Ensure that all support packages for people with learning disabilities are appropriate to meet the needs of the people with learning disabilities and offer value for money for the Council.

Project Overview - What are we doing

This saving is the remaining impact of part-year savings made in 2018/19 - the existing programme of service user care reassessments which requires each person's care needs to be reassessed in line with the Transforming Lives model and with the revised policy framework with a view to identifying ways to meet their needs at reduced overall cost and a stronger focus on promoting independence and a strengths based approach.

Savings will be delivered through the remaining effect of care costs that have been reduced in 2018/19. Where savings are made in-year the remaining part of the 12 month effect is seen in the following financial year.

Savings achieved are monitored as part of the monthly process of monitoring package changes that social work teams engage in.

What assumptions have you made?

Savings are estimated based on an approximate £10k saving per case.
The saving is based on a set of assumptions about the phasing of the reassessment work - this is being monitored and may be subject to change.

What constraints does the project face?

The main constraint continues to relate to the capacity of the team delivering the reassessment work. There have been a number of difficulties recruiting social workers to the team and this has affected the pace of delivery.

Delivery Options

Has an options and feasibility study been undertaken?

Scope / Interdependencies

Scope

What is within scope?

500 highest cost packages of support for people with learning disabilities. Packages of support for people living in the same setting as those with high cost packages.

What is outside of scope?

Packages of support for other people with learning disabilities. Packages of support that have already been reassessed by the LDP locality teams.

Project Dependencies

Title

Transforming Lives

Cost and Savings

See accompanying financial report

Non Financial Benefits

Non Financial Benefits Summary

Title

Risks

Title

Appendix 2

Project Impact

Community Impact Assessment

Who will be affected by this proposal?

People with learning disabilities with eligible social care needs receiving a funded care package.

What positive impacts are anticipated from this proposal?

The intention is to meet people's care needs whilst maximising their independence. The care model focusses on building on people's existing strengths, their natural support networks, the use of technology and new care models to meet needs.

Reducing the overall cost of care packages will also produce a financial benefit for people who contribute to the cost of their own care (in full or in part). Social care costs can be substantial for families and so making care more cost effective can produce very significant financial benefits for families.

What negative impacts are anticipated from this proposal?

This proposal does not include any change in care thresholds or reduction in the commitment to meet eligible needs. However it does include the intention to make demand management savings by working with people in a way which supports them to be more independent of care services. It might therefore represent a less risk-averse model. Decisions about the best care setting for an individual will always be made in the best interests of service users with social workers acting to identify the most appropriate care plan and making judgements about the level of independence and support required.

Are there other impacts which are more neutral?

N/A

Disproportionate impacts on specific groups with protected characteristics

Details of Disproportionate Impacts on protected characteristics and how these will be addressed

The project is focused on people with a learning disability with an eligible care need, therefore they are likely to be disproportionately affected by this proposal.

Business Case

A/R.6.126 - Learning Disability - Converting Residential Provision to Supported Living

Project Overview

Project Title	A/R.6.126 - Learning Disability - Converting Residential Provision to Supported Living		
Project Code	TR001412	**Business Planning Reference**	A/R.6.126
Business Planning Brief Description	This is an opportunity to unregister a number of residential homes for people with learning disabilities and change the service model to supported living. The people in these services will benefit from a more progressive model of care that promotes greater independence.		
Senior Responsible Officer	Tracey Gurney - Head of Service, Learning Disability Partnership		

Project Approach

Background

Why do we need to undertake this project?

Supported living settings promote greater independence in people while still providing 24 hour support to meet their care needs. They have the advantage of allowing people to hold their own tenancies therefore providing security of accommodation in contrast to residential settings where the care provider can call notice on people.

There are also benefits to the Council. In residential settings, the Council pays for accommodation and living expenses as part of the weekly fee. In contrast in supported living settings, these costs are met by the individual, generally through benefits.

Converting residential settings to supported living settings will promote independence for people with learning disabilities within those settings as well as providing cost savings to the Council.

What would happen if we did not complete this project?

Savings would not be achieved and potential independence or improved outcomes for people living in residential settings would not be delivered.

Approach

Aims / Objectives

Aims are as follows;

- Three services to convert from residential to supported living, over the duration of the programme (financial years 2017/18, 2018/19 and 2019/20)
- Financial benefits to the council as housing costs are met through housing benefit.
- Social benefits for people as they can hold their own tenancies, enabling them to have better control over the support they receive.

Appendix 2

Project Overview - What are we doing

We are identifying existing residential care provision where there is potential to work with the provider and the service users to convert the model to supported living settings.

There is a staged process for each provider

- initial service viewing.
- initial benefits estimates
- reassessments of service users
- negotiation with OOA (out of area) commissioners.
- families meeting takes place.
- financials are finalised.
- feedback requested by families.
- submit de-registration plan to CQC (Care Quality Commission).

What assumptions have you made?

1. Providers/Service users/Families are in agreement in principle with this idea.
2. Assumption is that our calculations are correct in that this is better value for the Council.
3. OOA commissioners will be in agreement.
4. CQC will be in support of the de-registration plans.
5. All three services are able to be de-registered, and by the end of the multi-year delivery programme.

In progress [Full year effect £150k, 18ppl for 2018/19]

- Churchfield Avenue – six people
- St David's – three people
- St Joseph's – three people
- Kay Hitch – three people
- Waterbeach – three people

Start 1/4/18 [Full year effect £75k, 17ppl] – if providers agree

- Bramley – five people
- Alderton House – nine people
- Conifer Lodge – three people

What constraints does the project face?

1. There is no potential to extend the project.
2. Dependent upon unanimous agreement from Service Users/Families/providers. Therefore delays are expected in delivery.

Delivery Options

Has an options and feasibility study been undertaken?

Scope / Interdependencies

Scope

What is within scope?

From the original number of 15 residential units identified there are three units left, leaving approximately 17 people as potentially suitable to be in scope at this stage.

What is outside of scope?

All other residential units and other settings.

Appendix 2

Project Dependencies

Title

Cost and Savings

See accompanying financial report

Non Financial Benefits

Non Financial Benefits Summary

Title

Risks

Title

Project Impact

Community Impact Assessment

Who will be affected by this proposal?

People with learning disabilities currently living in residential settings.

What positive impacts are anticipated from this proposal?

The model of supported living will be more focused on empowerment and independence and choice and control than residential provision.

In most cases service users will experience a positive financial impact as benefit entitlements will change meaning they will have improved disposable income.

Supported living arrangements also offer service users greater security of tenure, in residential settings providers are only obligated to offer 28 days notice if they want to end the offer of a place – whereas in supported living the tenure is significantly more secure.

What negative impacts are anticipated from this proposal?

No negative impacts are envisaged

Are there other impacts which are more neutral?

N/A

Disproportionate impacts on specific groups with protected characteristics

Details of Disproportionate Impacts on protected characteristics and how these will be addressed

This project only relates to settings for people with learning disabilities and therefore is likely to have a disproportionate impact on people with learning disabilities. No negative impacts are anticipated from this project.

Business Case

A/R.6.127 Care in Cambridgeshire for People with Learning Disabilities

Project Overview			
Project Title	A/R.6.127 Care in Cambridgeshire for People with Learning Disabilities		
Project Code	TR001441	**Business Planning Reference**	A/R.6.127
Business Planning Brief Description	Work to enable people with learning disabilities who have been placed out of county to move closer to their family by identifying an alternative placement which is closer to home. This will be approached on a case-by-case basis and will involve close work with the family and the person we support. It will also involve ensuring out of county placements are cost effective and are appropriately funded by the NHS.		
Senior Responsible Officer	Tracy Gurney - Head of Service: Learning Disability Partnership		

Project Approach

Background

Why do we need to undertake this project?

This is the continuation of a programme of work to achieve improved outcomes for people with learning disabilities and financial efficiency for the local authority by identifying and providing suitable care arrangements in Cambridgeshire for people who are currently living in other counties.

The work programme will continue to achieve two outcomes:

1. A comprehensive review of all current out of area placements and a managed programme to organise care in Cambridgeshire where it is in service users' best interests and in line with their wishes.

2. A strategic commissioning review of the sufficiency of care provision in Cambridgeshire now and in the future – and plan to create the additional capacity and improved commissioning processes we will need to minimise the number of new out of area placements in future.

Placements made out of area tend to be more expensive and less cost effective. This is often due to the placements being made to care for people with complex and very significant needs where there is no sufficiently specialist provision available in county. Out of area placements also tend to be less cost effective than those in county since out of area placements are more likely to be individual placements rather than as part of a larger service likely to deliver economies of scale. There are also additional ongoing costs to the locality teams when reviewing care and support for out of area placements.
This work is linked with the Transforming Care agenda to reduce the number of people with learning disabilities placed in in-patient settings. This work will give the opportunity to commission a specialist service to meet the needs of some of the people returning to county as well as some of the people in in-patient settings in county.

What would happen if we did not complete this project?

If this project were not completed, increasing numbers of people with learning disabilities would be placed out of county at a distance from their existing networks of support and potentially at an increased cost for the Council.

Appendix 2

Approach

Aims / Objectives

1. A comprehensive review of all current out of area placements and a managed programme to organise care in Cambridgeshire where it is in service users' best interests and in line with their wishes.

2. A strategic commissioning review of the sufficiency of care provision in Cambridgeshire now and in the future – and plan to create the additional capacity and improved commissioning processes we will need to minimise the number of new out of area placements in future.

Project Overview - What are we doing

It is proposed to use iBCF (improved Better Care Fund) funding in to 2019/20 to continue to fund two dedicated social workers to support this work. The expectation is that the funding will be front loaded to continue to progess delivering the savings, building on success from 2018/19. The overall saving to be achieved is £250k.

It is not necessarily appropriate for every person placed out of county to be brought back to Cambridgeshire. Of the 130 existing people with learning disabilities living out of area at the start of the programme, 27 have been identified where it would be beneficial for them to move back to Cambridgeshire. There are a further 35 people where more work is required to identify if a move back to Cambridgeshire would be beneficial.

What assumptions have you made?

This is modelled on extending the existing cohort of people identified to move back to Cambridgeshire. The saving modelled is a full year effect, however the introduction of the 50% confidence level will allow account for some slippage relating to timing.

What constraints does the project face?

Risks and mitigation relating to this saving are therefore:

a) 31 additional people are not able to be moved back into county. This risk is being mitigated by identifying dedicated social workers to work on this. This will enable the social workers to progress conversations with the existing provision, family and advocates at pace to support the move back into county.

b) There is insufficient provision in county to meet the needs of those moving back to county. This is being mitigated by dedicating capacity in service development and negotiation to meet the needs of those moving back to county.

c) People are moved back into county but there are fewer savings delivered than anticipated. This will be mitigated by the regular review and re-modelling of the savings to be delivered from the identified cases. The current modelling is based on a conservative estimate of the number of people that can be moved back into county combined with a challenging target for the amount of savings to be delivered from each case. Combined with the confidence level of 50%, this means that there is sufficient flexibility in the modelling for the savings to be delivered even if not necessarily from the originally anticipated people.

d) There is a risk that savings may be delayed if a number of the cases need to go to Court of Protection. The mitigation for this risk is frontloading the social workers' time to identify cases that may need to go to Court of Protection quickly so that the delay can be minimized.

Appendix 2

Delivery Options

Has an options and feasibility study been undertaken?

Yes – as per paper that was agreed by GPC on 19.09.2017

Scope / Interdependencies

Scope

What is within scope?

Current out of area placements with the exception of those placements that are actively being worked on by the locality teams.

A strategic commissioning review of the sufficiency of care provision in Cambridgeshire now and in the future.

What is outside of scope?

Placements in Cambridgeshire and those placements outside of Cambridgeshire where there is existing work to move people back to Cambridgeshire within the locality teams in the Learning Disability Partnership.

Project Dependencies

Title

Cost and Savings

See accompanying financial report

Non Financial Benefits

Non Financial Benefits Summary

Title

Risks

Title

Project Impact

Community Impact Assessment

Who will be affected by this proposal?

- People with learning disabilities placed out of county
- Parent/carers and support networks of people with learning disabilities
- Providers for people with learning disabilities both in and out of county

What positive impacts are anticipated from this proposal?

People with learning disabilities who it is appropriate to move back into county will be closer to their existing support networks which is associated with better outcomes.

Parent/carers will no longer need to travel significant distances to visit service users.

People with learning disabilities for which it is not appropriate to bring back into Cambridgeshire will have a detailed reassessment to ensure that their current placement is meeting their needs.

Appendix 2

What negative impacts are anticipated from this proposal?

There will potentially be some minor disruption in some services due to people moving in or out. This will not be of a greater magnitude than the normal disruption caused by placement moves.

Are there other impacts which are more neutral?

N/A

Disproportionate impacts on specific groups with protected characteristics

Details of Disproportionate Impacts on protected characteristics and how these will be addressed

The project is focused on people with learning disabilities, therefore there will be a disproportionate impact on people with learning disabilities. The impact is expected to be positive.

Business Case

A/R.6.128 Better Care Fund

Project Overview			
Project Title	A/R.6.128 Better Care Fund		
Project Code	PR000227	**Business Planning Reference**	A/R.6.128
Business Planning Brief Description	The Better Care Fund (BCF) is our joint plan with health partners aimed at providing better and more joined up health and care provision and easing financial and demand pressures in the system.		
Senior Responsible Officer	Will Patten		

Project Approach

Background

Why do we need to undertake this project?

The Better Care Fund (BCF) is our joint plan with health partners aimed at providing better and more joined up health and care provision and easing financial and demand pressures in the system. Priority areas of focus are protecting frontline services, preventing avoidable admissions to hospital and ensuring people can leave hospital safely when their medical needs have been met.

The Cambridgeshire BCF plan provides vital support to mainstream services, and also funds a range of new schemes in areas including: preventing falls, increasing independence, investment in suitable housing for vulnerable people and enhanced intermediate care, Reablement and homecare for people leaving hospital.

The Better Care Fund includes an element of funding intended to protect Adult Social Care services, as the revenue support grant has decreased and demand continues to increase. On this basis a proportion of the overall BCF spend is proposed to be taken to savings, in order to protect services and avoid the need for any service reductions in adult social care services.

Cambridgeshire and Peterborough's full BCF plan is contained within the papers for the Health and Wellbeing Board, available here.

What would happen if we did not complete this project?

If we did not use the BCF to adequately protect social care services there is a significant risk that adult social care services would become unsustainable, creating safeguarding risks to adult social care service users.

Approach

Aims / Objectives

The aim of Cambridgeshire's BCF is to move to a system in which health and social care help people to help themselves, and the majority of people's needs are met through family and community support where appropriate. This support will focus on returning people to independence as far as possible with more intensive and longer term support available to those that need it.

This shift means moving money away from acute health services, typically provided in hospital, and from ongoing social care support. This cannot be achieved immediately – such services are usually funded on a demand-led basis and provided as they are needed in order to avoid people being left untreated or

unsupported when they have had a crisis. Therefore reducing spending is only possible if fewer people have crises. However, this is required if services are to be sustainable in the medium and long term.

Project Overview - What are we doing

The BCF creates a pooled budget between health, social care and housing services in each Health and Wellbeing Board area. Cambridgeshire has a single Health and Wellbeing Board. Plans are developed and agreed by local authorities and NHS commissioners, and signed off by the Health and Wellbeing Board.

BCF contains elements of funding that:
- provide mainstream health, social care and housing services
- supports the development and delivery of transformation projects that will support a shift away from acute health care and long term social care towards care that is more preventative and personalised and focused on keeping people well.
- supports the sustainability of the care market and protects social care services from reductions.

Cambridgeshire's BCF budget for 2018/19 will be c. £50m. It is proposed that £7,200k is taken as a saving to manage increasing demand for social care. The Better Care Fund includes an element of funding intended to protect Adult Social Care services, as our revenue support grant has decreased and demand continues to increase. This part of the BCF spend will be used to avoid the need for any service reductions.

What assumptions have you made?

We have assumed that the Better Care Fund budget will match previously published allocations for 2018/19.

What constraints does the project face?

Better Care Fund plans, including this proposed saving, must be agreed by a range of partners through the Health and Wellbeing Board; and signed off by NHS England and the Department for Communities and Local Government.

Delivery Options

Has an options and feasibility study been undertaken?

Scope / Interdependencies

Scope

What is within scope?

Social care services for adults; health services for older people and adults with long-term conditions

What is outside of scope?

Social care and health services for children 0-18

Project Dependencies

Title

Cost and Savings

See accompanying financial report

Appendix 2

Non Financial Benefits

Non Financial Benefits Summary

The Better Care Fund aims to shift demand across health and care services to an approach based around supporting people to live as independently as possible for as long as possible. In this way we can reduce care costs whilst also securing better quality of life for patients and service users. In particular we want to support people to remain living in their own homes for as long as possible and to receive support from their own network of natural support - rather than just a reliance on formal care provision.

Title

Risks

Title

Reduction in Better Care Fund allocation

Project Impact

Community Impact Assessment

Who will be affected by this proposal?

Patients and social care service users

What positive impacts are anticipated from this proposal?

Better coordinated care and more sustainable care market promoting better outcomes for service users and patients

What negative impacts are anticipated from this proposal?

This proposal does not include any change in care thresholds or reduction in the commitment to meet eligible needs. However the Better Care Fund is predicated on shifting demand by working with people in a way which supports them to be more independent of care services. It might therefore represent a less risk-averse model. The evidence suggest that service users living within the community and semi-independently supports better outcomes - with the community focus supporting effective recovery and a greater chance of them returning to good mental health sustained over the longer term. However living more independently does by definition mean that intensive help is not available as readily as it would be in a 24 hour setting for example. Decisions about the best care setting for an individual will of course always be made in the best interests of service users with social workers acting to identify the most appropriate care plan and making judgements about the level of independence and support required.

Are there other impacts which are more neutral?

Disproportionate impacts on specific groups with protected characteristics

Details of Disproportionate Impacts on protected characteristics and how these will be addressed

Not applicable

Business Case

A/R.6.132 Mental Health Social Work PRISM Integration Project

Project Overview			
Project Title	A/R.6.132 Mental Health Social Work PRISM Integration Project		
Project Code	TR001427	**Business Planning Reference**	
Business Planning Brief Description	The introduction of social workers and social care support staffing into the community / primary care health services (PRISM) will deliver improved mental health outcomes for Cambridgeshire residents and reduce demand for services through a focus on prevention, early intervention and strengths-based approach.		
Senior Responsible Officer	Fiona Davies, Head of Mental Health		

Project Approach

Background

Why do we need to undertake this project?

Transformation funding of £340k was approved as part of the 2018/19 Business Plan to test the hypothesis that including social care practitioners in community/primary care mental health services (PRISM) and Adult Early Help (AEH) will deliver improved mental health outcomes for Cambridgeshire residents. This would lead to a reduction in demand and result in an estimated saving to Adult Social Care of £200k.

If the proposed approach delivers the outcomes predicted, the funding will constitute bridging funding to enable short term interventions to be delivered and caseloads to be built up in the new service while the capacity needed in the specialist mental health services is reduced and can then be reviewed. It will also allow deficiencies in the delivery of Local Authority Care Act responsibilities to be addressed.

Strategic background

The proposal supports delivery of the Transforming Lives principles and delivery of the Adults Positive Challenge Programme outcomes in terms of: maximising independence and outcomes, strengthening links with the community, influencing behaviour through the information and advice offer, engage more effectively with self-funders, making Technology Enabled Care the norm and increasing support for carers. It also supports delivery of the Cambridgeshire and Peterborough Mental Health Strategy for Adults Aged under 65 years (2016 – 2021).

What would happen if we did not complete this project?

- Rates of referrals for secondary care would continue in line with current trends and social care costs would increase accordingly.
- Mental health patients would continue to lack access to social care advice at the point that they receive primary care

Approach

Aims / Objectives

Improving service efficiency

Social workers operating within NHS services as part of a Section 75 Partnership Agreement with local authorities are key to both facilitating access to support for people with mental health needs, providing a focus on the social aspects of mental health and playing a legal safeguarding role[1]. However, in Cambridgeshire (and Peterborough) they are currently based solely in the secondary care mental health services i.e., there are none present within PRISM. This means that it is likely that opportunities for early information, advice, support and interventions are being missed. Therefore, including social workers in PRISM is likely to be essential to addressing this issue and to maximising outcomes from both the PRISM service and specialist secondary care mental health services and ensuring best value for money is achieved.

[1] https://www.kingsfund.org.uk/sites/default/files/field/field_publication_file/mental-health-under-pressure-nov15_0.pdf

[2] PRISM is an enhanced community/primary care service for mental health commissioned from Cambridgeshire and Peterborough Foundation Trust (CPFT) by the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) to support patients who fall into the gap between what "standard contracted GP care" can offer and meeting the specialist secondary care treatment provided by health and social care practitioners for people with more complex mental health challenges. The establishment of PRISM is enabling specialist (secondary care based) mental health practitioners to provide more intensive/consistent treatment in order to achieve strong recovery outcomes for people who need specialist treatment from specialist mental health services. Data collected by CPFT shows a 39.8% less referrals to specialist secondary mental health services than the Advice Referral Centre (shown below). PRISM = 1760 (2017-18). ARC = 4420 (2017-18).

Project Overview - What are we doing

In light of the gap in social care expertise within PRISM, it is proposed that a fully integrated health and social care community/ primary care mental health service should be created. This service would be capable of providing a single point of access to both primary and secondary care based services including: mental health assessment, information, advice and/or support. This will be achieved by including mental health social workers and support workers in the PRISM community/primary care mental health service, a recent innovation within the Cambridgeshire and Peterborough Foundation Trust (CPFT) integrated mental health service[2]. Within this model, a specialist mental health worker role would also be established within Adults Early Help (AEH) to provide specialist mental health advice and support to individuals and team members.

What assumptions have you made?

- Reducing the number of assessments taking place for secondary care will reduce the number of new secondary care packages.
- Efficiencies of 2-5% on gross cost of care will be achieved

What constraints does the project face?

Delivery Options

Has an options and feasibility study been undertaken?

Scope / Interdependencies

Scope

What is within scope?

- Integrating 1.75 FTE social work professionals into PRISM
- Integrating 0.5 FTE social work professional into Adult Early Help
- Seeking to reduce the number of new assessments for secondary care

What is outside of scope?

- Removal of further posts within CPFT

Project Dependencies

Title

Adults Positive Challenge Programme, Mental Health Reablement Workstream

Cost and Savings

See accompanying financial report

Non Financial Benefits

Non Financial Benefits Summary

Increased capacity earlier in the pathway which will lead to a reduction in the overall numbers of people taken into secondary care

Including:

1.1. A reduced number of onward referrals from PRISM for secondary/ specialist care by meeting customer need at first point of contact and thereby a reduction in the number of initial assessments that the team undertake.

1.2. An overall reduction in demand for secondary care services. In particular, it is anticipated that this model will impact on demand for the following elements of care provision:

- Residential Home Placements
- Domiciliary Care (HCST), and;
- Community Based support

1.3. A reduction in the duration of service user contact with services
Efficiencies/ cost avoidance

Improved outcomes for residents through earlier intervention: reduction/minimising escalation of symptoms; less time in services

Increased service efficiency

Including:

2.1. Delivery of a fully integrated offer across health and social care

2.2. Improve the service user / patient journey between organisations

2.3. Reduce bureaucracy between organisations and hand offs between services

Efficiencies

Improved outcomes for residents through earlier intervention: reduction/minimising escalation of symptoms; less time in services

Improved focus on prevention, early intervention and strengths based approach

Including:

3.1. Improvement in the provision of information, advice and support early in the course of delivery of

early intervention/preventive approaches

3.2. Enabling and facilitating access to Tier 1 and Tier 2 services

3.3. Prevent the escalation of problems

3.4. Reducing the duration of episodes of mental illness

3.5. Ensure the deployment of a strengths-based approach

Efficiencies/cost avoidance

Improved outcomes for residents through earlier intervention: reduction/minimising escalation of symptoms; less time in services

Collaborative approach through combining skills

Including:

4.1. PRISM/ NHS workers more skilled in diverting people who might otherwise be taken into secondary care who have a social care need. This will reduce demand for social care.

4.2. Creating a model in which the social determinants for mental health as well as the clinical presentation are addressed.

Efficiencies/cost avoidance

Improved outcomes for residents through earlier intervention: reduction/minimising escalation of symptoms; less time in services

Ensure compliance with the Care Act 2014.

Statutory compliance

Title

Risks

Title

Project Impact

Community Impact Assessment

Who will be affected by this proposal?

- Adults with mental health conditions that access primary care.
- Older people with mental health conditions that access primary care.

What positive impacts are anticipated from this proposal?

- Enabling and facilitating access to Tier 1 and Tier 2 services
- Facilitating the user journey for patients so that they are able to access social care advice earlier

What negative impacts are anticipated from this proposal?

N/A

Are there other impacts which are more neutral?

N/A

Appendix 2

Disproportionate impacts on specific groups with protected characteristics
Details of Disproportionate Impacts on protected characteristics and how these will be addressed
N/A

Business Case

A/R.6.133 Impact of Additional Occupational Therapist Investment

Project Overview			
Project Title	A/R.6.133 Impact of Additional Occupational Therapist Investment		
Project Code	TR001438	**Business Planning Reference**	TBC
Business Planning Brief Description	Investment in Occupational Therapy (OT) for Reablement and Adult Early Help Team		
Senior Responsible Officer	Diana Mackay		

Project Approach

Background

Why do we need to undertake this project?

Occupational Therapy (OT) for Reablement

The OT resource for Reablement has been severely underfunded since Reablement was first set up in 2010. As part of the original set-up, three posts were commissioned and deployed as part of the South Reablement service. A recent benchmarking exercise across the eastern region demonstrated that Cambridgeshire has one of the lowest rates of investment in therapy for Reablement when compared to counties of a similar size (Hertfordshire has 8.5 OT posts, and Suffolk has nine). Peterborough has 5 therapy posts (4 OT's and 1 physio).

OT intervention is an essential element of the Reablement pathway and is backed up by a number of pieces of evidence and research (available on request). By OT's being proactively involved in reablement goal setting and, most importantly, the review of those goals, evidence shows that people are able to achieve greater independence at the end of reablement which results in avoided costs in terms of domiciliary care.

Adult Early Help Team

When this team was set up, CPFT (Cambridgeshire and Peterborough Foundation Trust) were asked to commit two OT posts from their NT (Neighbourhood Team) establishment to work as part of the AEHT (Adult Early Help Team). Whilst this has always been referred to as a 'secondment', no formal agreement was ever signed off with CPFT and the arrangement simply resulted in a lack of capacity within the CPFT structure and affected waiting times for community assessment. A dedicated OT resource for AEHT is required as a matter of urgency so that the 'secondees' can return to their substantive posts within the CPFT Neighbourhood Team Structure, thereby releasing capacity in the mainstream community OT service.

What would happen if we did not complete this project?

It is likely that :

- Community OT waiting times would continue to increase
- Larger packages of care would be commissioned at the end of Reablement, thereby creating further strain on Adult Social Care budgets

Appendix 2

Approach

Aims / Objectives

To prevent, reduce and delay demand for social care through Occupational Therapy in-house intervention

Project Overview - What are we doing

- Appoint an additional two OT's so that there are a total of five across the County
- Appoint two OT's for Adult Early Help Team

What assumptions have you made?

AEHT have 4,000 cases per year. 75% of those are diverted away from social care already. 25% of the remaining 1,000 cases are likely to benefit from OT intervention (250 cases).

Average cost of a first-time social care package = £6K. If OT intervention means that 15% of these do not need any ongoing social care, that will deliver £225K savings (avoided costs).

In terms of Reablement, Older People services has a savings target of £1m for 2018-19. This will be addressed through a combination of initiatives, including Reablement. Additional OT resource will enhance the outcomes expected of the investment and will be closely monitored through better modelling of outcomes achieved at the completion of the reablement pathway. It is estimated that this could enhance the savings achieved by approx. £175K.

What constraints does the project face?

National shortage of OT's may make recruitment challenging.

Delivery Options

Has an options and feasibility study been undertaken?

Scope / Interdependencies

Scope

What is within scope?

- Internal Recruitment of OT's.
- Partnership working with CPFT OT service and other OT's within Cambridgeshire County Council

What is outside of scope?

Project Dependencies

Title

Cost and Savings

See accompanying financial report

Appendix 2

Non Financial Benefits

Non Financial Benefits Summary

More people enabled to live as independently as possible in the home of their choice.

Title

Risks

Title

Project Impact

Community Impact Assessment

Who will be affected by this proposal?

The proposal covers all of Cambridgeshire.

The proposal only applies to adult service user groups

The proposal will benefit a number of different demographic groups – ie those in need of OT assessment and review

What positive impacts are anticipated from this proposal?

This proposal will mean more capacity within Occupational Therapy Services which supports the early intervention and prevention agenda as well as delivering quantifiable savings across other parts of the health & social care system.

What negative impacts are anticipated from this proposal?

There are no negative impacts but there is a risk that it will be difficult to recruit to the posts due to a national shortage of OT's

Are there other impacts which are more neutral?

N/A

Disproportionate impacts on specific groups with protected characteristics

Details of Disproportionate Impacts on protected characteristics and how these will be addressed

Appendix 2

Business Case

A/R.6.143 Review of Business Support Functions in Adults

Project Overview

Project Title	A/R.6.143 Review of Business Support Functions in Adults		
Project Code	TR001444	**Business Planning Reference**	
Business Planning Brief Description	Review of Business Support Functions in Adults		
Senior Responsible Officer	Emma Middleton		

Project Approach

Background

Why do we need to undertake this project?

Following the creation of the Adults Finance Team and launch of Mosaic we now need to review the functions of the Adults Business Support Team

What would happen if we did not complete this project?

We would have inconsistent service across teams and would be working in an inefficient way with existing processes

Approach

Aims / Objectives

To streamline processes and release capacity through automation

Project Overview - What are we doing

What assumptions have you made?

The adults finance team will be fully functioning by November 18 and the Mosaic implementation will go live according to current timescales.

What constraints does the project face?

Any delays to the Mosaic implementation would impact this project

Delivery Options

Has an options and feasibility study been undertaken?

Appendix 2

Scope / Interdependencies

Scope

What is within scope?

All Adults Business Support Roles and Functions

What is outside of scope?

Non Adults Business Support Functions

Project Dependencies

Title

Mosaic Implementation

Cost and Savings

See accompanying financial report

Non Financial Benefits

Non Financial Benefits Summary

1. Creating a flexible and county wide Business Support Service and to cover all client groups
2. Reviewing of processes to ensure consistency and efficiency
3. Refresh job descriptions and Business Support career paths

Title

Risks

Title

Quality of Service

Project Impact

Community Impact Assessment

Who will be affected by this proposal?

1. All Adults Business Support Staff
2. All Adults Service and Team Managers
3. All Adults Practitioners

What positive impacts are anticipated from this proposal?

1. More efficient processes
2. Consistency and flexibility from the team
3. An equitable service across all groups
4. A positive financial impact

What negative impacts are anticipated from this proposal?

Short term service disruption through the consultation process

Are there other impacts which are more neutral?

Appendix 2

Disproportionate impacts on specific groups with protected characteristics
Details of Disproportionate Impacts on protected characteristics and how these will be addressed

Business Case

A/R.6.176 Demand management savings in adult services (Adults Positive Challenge Programme)

Project Overview			
Project Title	A/R.6.176 Demand management savings in adult services (Adults Positive Challenge Programme)		
Project Code	TR001396	**Business Planning Reference**	A/R.6.176
Business Planning Brief Description	The Adults Positive Challenge Programme seeks to design a new service model for Adults Social Care which will continue to improve outcomes whilst also being economically sustainable in the face of the huge pressure on the sector. By 2023 local people will drive the delivery of care, health and wellbeing in their neighbourhoods.		
Senior Responsible Officer	Charlotte Black		

Project Approach

Background

Why do we need to undertake this project?

Through investment from the Council's Transformation Fund, a consortium of Capgemini and iMPOWER was appointed to support an initial discovery phase of the Adults Positive Challenge Programme which has included a baseline analysis, development of a new vision and identification of opportunities for improvement, efficiency and further transformation.

The initial discovery phase has evidenced that the Cambridgeshire system is already broadly efficient and effective. The quality of outcomes for services users in Cambridgeshire was found to be in line with the national average, despite a lower than average level of expenditure. The analysis also found that the Transforming Lives Programme has made progress in encouraging a proactive, preventative and personalised approach to care and highlighted that a larger proportion of service users in Cambridgeshire are supported to live independently at home, rather than in residential or 24 hour care settings.

There are however, several key challenges that are driving the need for a new approach – specifically:

- a substantial supply capacity challenge in the current care workforce;
- continuing increases in demand from a growing and aging population;
- a combination of demand growth and inflationary pressure leading to a substantial budget deficit in the coming years;
- limited digital tools and inadequate use of data causing productivity losses in staff time and impacting on the frequency and quality of case reviews

In response, Cambridgeshire County Council (CCC) needs to design and create financially sustainable services that continue to enable residents to live fulfilled lives, to build on people's strengths, and to support people in a way that works for them. If left unchecked, financial pressure could lead to a budget deficit of £27m for CCC Adult Services by 2023.

There is evidence that over 30% of social care cases include people whose needs could have been prevented, delayed or reduced. CCC must make use of technology; change working practices and adopt a more

community-centered approach to improve better outcomes for residents and to reduce costs.

What would happen if we did not complete this project?

Financial pressure could lead to a budget deficit of £27m for CCC Adult Services by 2023, if left unchecked. This would put at risk the council's ability to undertake its statutory requirements.

Approach

Aims / Objectives

The fundamental principle of the strategic change is a model which is based on *putting choice and independence directly into the hands of individuals and communities*. The new model will be driven by the neighbourhood or place based approach, and success will mean that citizens have greater independence and better outcomes with reduced state intervention by:

- addressing citizens' needs early on to prevent them from escalating - working in partnership with communities and health partners to share information, act as one care workforce and be proactive;
- empowering individuals to do more for themselves - providing them with the resources, tools and local support network to make it a reality; and
- building self-sufficient and resilient communities - devolving more preventative care and support resources at a neighbourhood level and enabling individuals to spend their long term care budget within their community.

By 2023 local people will drive the delivery of care, health and wellbeing in their neighbourhoods.

Project Overview - What are we doing

The work undertaken in Phase One of the programme indicates that taking our proposed approach could result in savings to the Council through demand management and cost avoidance strategies of approximately £17m over the next five years. The APC Programme is focused on taking forward the service demand management opportunities identified through the Outline Business Case (OBC) and subsequent work, and aims to deliver at least £3.8m of benefit in 2019/20 and an additional benefit of £3.8m in 2020/21.

The Adults Positive Challenge Programme has eight key work streams to achieve the council's future vision for Adult Social Care:

1) Changing the Conversation
This workstream will embed a person centered, strengths-based, community connected, and outcome focused approach in social care and support planning. This requires a step change in terms of culture and practice of staff and partners, and a change in mindset in service users, families, and other citizens of Cambridgeshire.

2) Expanding the use of Technology Enabled Care
This workstream will ensure that Technology Enabled Care (TEC) is one of the first considerations for support planning to facilitate as much independence as possible for people through the provision of more accessible and intelligent TEC solutions, and appropriate community equipment provision.

3) Commissioning for Outcomes
This workstream will move commissioning away from a focus on activity, towards a focus on outcomes: getting the best possible result for neighbourhoods and for individuals in the way that suits them; enabling people to meaningfully direct their own care; and making the most effective use of the available resources, ensuring financial sustainability for the council.

4) Learning Disability Enablement
The aim of this workstream is to support individuals with a learning disability (including individuals with autism and Asperger's who may not have a learning disability) to acquire, develop and maintain independence.

5) Neighbourhood Based Operating Model
Building on the pilots already underway, this workstream will develop a neighbourhood-based approach to coordinating care.

6) Increasing Access to Carers Support
This workstream aims to minimise the demand on statutory services, the cost of crisis services and improve outcomes achieved for carers by ensuring that carers receive the right support at the right time to enable them to sustain their caring role.

7) Targeted Reablement
This workstream will deliver a consistent, effective and efficient Reablement service across Cambridgeshire and Peterborough that maximises outcomes for the whole community. The prevention element of the reablement service will be expanded so that it becomes a community resource.

8) Mental Health Model and Reablement
This workstream will improve outcomes and minimise the demand for long term support services from people with mental health problems by adopting a strengths based, holistic approach and conversations with individuals, drawing on best practice from both Cambridgeshire and Peterborough to deliver consistent outcomes, and effective and efficient reablement services for everyone with mental health problems who need them.

What assumptions have you made?

- There will not be any changes in legislation with regards to adult social care.
- Projections of population growth in Cambridgeshire over the next five years are accurate, particularly with regards to the 65-85 age group.
- Needs can be prevented, delayed or reduced sufficiently across the adult social care cohort to achieve the demand management savings set out in this business case.
- The demand management savings take account of where multiple work streams are working together to reduce demands for the same cohort. The financial savings are not counted multiple times.

What constraints does the project face?

- Adult Social Care services must continue to meet the requirements of the Care Act.
- There are financial constraints that the programme must work within.
- There is limited scope to reduce the unit cost of existing care services as private care providers are already operating on narrow margins.

Delivery Options

Has an options and feasibility study been undertaken?

Scope / Interdependencies

Scope

What is within scope?

Demand management savings that result from the Adults Positive Challenge Programme.

What is outside of scope?

Any cashable savings that result from Adults Positive Challenge Programme.

Project Dependencies

Title

Support from Enablers

Cost and Savings

See accompanying financial report

Non Financial Benefits

Non Financial Benefits Summary

The overarching benefits for the programme include:

- Addressing needs early on to prevent them escalating
- People receive the right package of care and support which targets what they want to achieve
- Peoples' quality of life, mental and physical health and wellbeing, is improved
- Maximising independence by empowering individuals to do more for themselves
- Building self sufficient and resilient communities
- Staff have the appropriate knowledge, skills and tools

Title

Risks

Title

Project Impact

Community Impact Assessment

Who will be affected by this proposal?

Adult Social Care Clients, Carers, Providers, Partners and Staff.

What positive impacts are anticipated from this proposal?

The entirety of the Adults Positive Challenge Programme supports the need to shift social care practice away from long-term support towards more preventative support and advice, which will support people to live healthier and more independent lives

What negative impacts are anticipated from this proposal?

Safeguarding vulnerable adults is central to the purpose of Adult Services. As the service's focus encompasses more preventative activities and less long-term care support, ensuring that risk is managed effectively and arrangements are in place to support appropriate safeguarding of vulnerable adults will continue to be essential.

Are there other impacts which are more neutral?

Disproportionate impacts on specific groups with protected characteristics

Details of Disproportionate Impacts on protected characteristics and how these will be addressed

Appendix 2