



Adult Social Care Select Committee  
13 March 2012

**Public Value Review of services for people with learning disabilities**

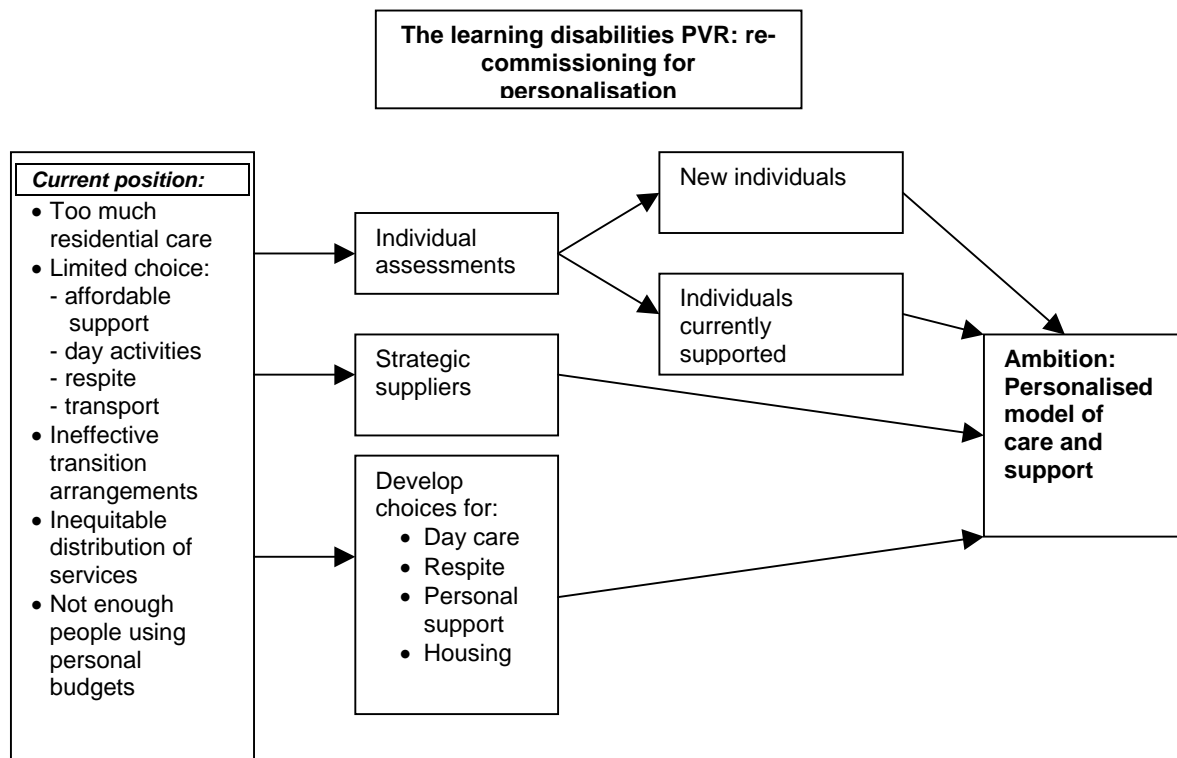
**Purpose of the report:** Scrutiny of Services/Policy Development

To present to the Select Committee the recommendations of the Public Value Review of services for people with learning disabilities.

**Introduction:**

1. This Public Value Review (PVR) has identified the need for a strategic shift in the way that services for people with learning disabilities are commissioned and delivered in Surrey. Current services reflect historical patterns of commissioning and do not offer choice, value for money or the improved outcomes sought by people with learning disabilities, and their family/carers.
2. This PVR proposes a single strategic objective: to realise the County Council's ambition of personalisation for people with learning disabilities. This will ensure:
  - Individuals with a learning disability supported by Surrey County Council are offered person centred care and support planning, through supported self-assessment, the application of the Resource Allocation System, and are offered a personal budget where eligible.
  - Individuals with a learning disability enjoy a wider choice of affordable options from a market of strategic suppliers committed to working with Surrey County Council to shape the future market for accommodation, care and support, day activities, and respite.

This is summarised visually in the chart below:



3. This PVR has consulted extensively on the services currently commissioned and provided for people with a learning disability in Surrey. Over 500 people have attended engagement events, the Learning Disability Partnership Board PVR website averages 1,000 hits per month, and over 3000 monthly bulletins are distributed. The following core themes have emerged from the consultation:
- a) Personalisation
  - b) Supporting people with high support needs
  - c) Housing
  - d) Health
  - e) Day activities/employment
  - f) Transport
  - g) Information and communication
  - h) Quality and safeguarding
  - i) Staff in general
  - j) Adult social care staff/practitioners
4. In response to the consultation themes the PVR recommendations together form a targeted programme of activity between 2012-2015 that will:
- Form a new joint commissioning strategy for people with learning disabilities
  - Achieve £8.1m recurrent savings by 2014/15

- Contribute savings in addition to the £8.1m above as part of the Medium Term Financial Plan (see MTFP 2011-15 page 56)

## **Recommendations**

### **Recommendation 1: Personalisation**

5. By 1 April 2015 we will deliver £2.5m efficiencies by:
  - 5.1 Developing personalised support options with strategic suppliers, including clearly priced, locally developed, options for personal support, day activities, respite and short breaks.
  - 5.2 Completing a coordinated programme of reviews to deliver personalised services that meet the assessed needs, improve outcomes and offer value for money for the following specific groups:
    - a) 150 young people over 15 years of age expected to transition into Adult Social Care over the next three years (avoiding long-term costs)
    - b) 300 individuals over 65 years of age currently supported by specialist learning disability services (delivering £0.5m efficiencies by 2014)
    - c) 223 individuals currently accessing respite/short break services across social care, health services and the independent sector
    - d) 100 individuals currently receiving high cost packages of care in and out of Surrey
    - e) 750 individuals currently accessing day services (including Surrey County Council's in-house services)
    - f) 460 individuals currently receiving Supporting People funded services
6. The report should be written in plain English, avoiding jargon or specialist expressions as far as possible. Acronyms should always be explained when they are first used.

### **Recommendation 2: Accommodation**

7. By 1 April 2015 we will deliver £2.4m efficiencies by developing personalised accommodation options for people with learning disabilities, with strategic suppliers and housing partners and deliver a shift from residential and nursing care to individualised community accommodation options.

### **Recommendation 3: Health**

8. We will develop integrated commissioning with health partners to determine appropriate packages of care and support, to ensure health and wellbeing needs are met effectively, and implement "responsible commissioner" guidance.

### **Recommendation 5: Transition**

9. We will influence how services are planned and delivered for young people with learning disabilities by working with children, schools and families to identify individuals earlier, jointly understand and assess needs, and facilitate service developments that support personalisation.
10. We will ensure people with a learning disability over the age of 65, and those with early onset dementia, are supported to access, through existing pathways (e.g. Dementia pathway), a range of services that best meet their assessed needs.

**Recommendation 6: Respite**

11. We will cease to commission respite and short breaks in residential services where people permanently live, as the Care Quality Commission considers it poor practice.

**Recommendation 7: Quality assurance (including workforce and safeguarding)**

12. We will implement a standard approach to quality assurance and contract monitoring across services commissioned for people with learning disabilities.

**Recommendation 8: Information and communication**

13. We will improve sources of accessible information relating to services and support for people with learning disabilities.

**Recommendation 9: Stronger partnerships**

14. We will shape and develop the existing market of services in response to our ambition for personalisation by working with our partners, including family/carer groups, The Learning Disability Partnership Board, Surrey Care Association, health colleagues, advocates, and Borough/Districts.

**Implementation**

15. The recommendations of this PVR are contingent upon:
  - 15.1 undertaking large-scale re-assessment and review of people with people learning disabilities identified above (Recommendations 1-2)
  - 15.2 developing Surrey's own skills and capacity in front line teams to plan support effectively, creatively and cost-effectively, working together with individuals and their family/carers
  - 15.3 ensuring that any new service meets or exceeds quality standards and demonstrates improvements in outcomes identified for each individual
16. The PVR therefore proposes a one-off investment of £1.1m. This will fund dedicated additional social work capacity, aligned to each borough and district and partner health services, to work with individuals and their

family/carers to take forward the above. This investment will ensure the personalisation ambition is realised and will generate recurring savings building to £8.1m from 2015.

<b>Background to the PVR</b>
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17. On 14 July 2009 as part of its consideration of the paper *Leading the Way: changing the way we do business* the Cabinet agreed to undertake a three-year programme of Public Value Reviews (PVRs) with the aim to look at all services/functions provided by the Council. The outcomes are expected to be services that place the Council in the top quartile of local authorities for performance and the lowest quartile for unit costs thus providing *improved outcomes and value for money for the residents of Surrey*.
18. This PVR followed the standard PVR methodology:
  - challenging why, how and by whom a function/service is provided;
  - comparing performance with others in the quest to be world class;
  - consulting widely including with residents and specifically vulnerable groups and communities and with staff;
  - collaborating with partners and/or contractors; and
  - testing the market to see if the function/service could be delivered more efficiently, effectively or economically.
19. In Surrey 20,463 adults are estimated to have a learning disability, which represents 2.35% of Surrey's 870,153 adult population aged 18 and over. Of these 16,572 people are aged 18-64 and 3,891 are aged 65 and over. Surrey County Council supports 3,375 people or an estimated 16.5% of all people with a learning disability in Surrey.
20. Following the Transfer of Commissioning responsibility from the NHS to local authorities, Surrey County Council is now the sole commissioner of social care services for people with learning disabilities in Surrey.
21. The overall commissioning budget (net) for services for people with learning disabilities is £133m (in 2011/12), which represents 41% of the net Adult Social Care budget (gross £120.8m under 65 year olds, £18.3m LD Older People over 65 years old, £3.6m supporting people, less £9.6m income =£133m net).
22. Efficiencies from learning disabilities form a significant contribution to Adult Social Care's medium term financial plan (MTFP). The PVR will deliver £8.1m recurrent savings by 2014/15 and contribute towards the wider savings required by the Medium Term Financial Plan (see MTFP 2011-15 page 56). Efficiencies totalling £1.2m have been achieved through management actions in 2011/12. The PVR savings (full details at Page 19) may be summarised as follows:

	<b>£m recurring by 2014/15</b>
Achieved in 2011/12	£1.2m

Recommendation 1	£2.5m
Recommendation 2	£2.4m
Recommendation 4	£2.0m
<b>Total</b>	<b>£8.1m*</b>

*\*Dependent on one-off investment of £1.1m*

23. This PVR began in March 2011, sponsored by Sarah Mitchell, Strategic Director for Adult Social Care, and led by Simon Laker, Senior Commissioning Manager. The PVR driven by Surrey's Learning Disability Partnership Board and four local Valuing People Groups and has been overseen throughout by a Member Reference Group of County Councillors: Sally Marks (Chair), Fiona White, Margaret Hicks, Mel Few, and Tony Samuels.
24. The review has incorporated external independent challenge from:
- Jo Poynter, Department of Health South East and National Lead for Valuing People Now, focusing specifically on service provision, service development and improved outcomes and
  - Surrey County Council's Internal Audit team focusing on the robustness and testing of finance and data models leading to the PVR recommendations

### Consultation

25. This PVR has consulted extensively on the services currently commissioned and provided for people with a learning disability in Surrey.
26. Over 500 people have attended the engagement events to date and the following core themes have emerged from the consultation:
- a) Personalisation
  - b) Supporting people with high support needs
  - c) Housing
  - d) Health
  - e) Day activities/employment
  - f) Transport
  - g) Information and communication
  - h) Quality and safeguarding
  - i) Staff in general
  - j) Adult social care staff/practitioners
27. There continues to be significant numbers of visitors to the Learning Disability Partnership Board website [www.surreypb.org.uk](http://www.surreypb.org.uk) and since April 2011 the web pages have included dedicated and accessible sections providing information on the PVR as it has progressed.

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28. A four-page easy read PVR bulletin has been produced and over 3000 copies are distributed monthly. An electronic version has been sent to all Adult Social Care Staff, distributed through the Surrey Care Association Learning Disability Provider Group; CVS network; Surrey Coalition for Disabled People; Surrey Autism Partnership Board and Royal Mencap Surrey.
29. Surrey's Learning Partnership Board includes key stakeholders and people with learning disabilities. It is co-chaired by the Cabinet Member for Adult Social Care and Health and a person with a learning disability. Each month the PVR Team has updated the Partnership and has held specific meetings to agree Terms of Reference, forecast savings, themes from the PVR consultation, outline recommendations, and to obtain stakeholder input to each of the PVR's Equalities Impact Assessments (EIAs).
30. The PVR Team has worked effectively engaged people who use services. To date this has included:
  - a) People with learning disabilities helping to design and test easy read information on each PVR topic
  - b) People with learning disabilities have been "secret shoppers" visiting district/boroughs to find out what information was available on housing, and giving feedback
  - c) A group have helped to make a DVD on housing and supported living, which includes families and individuals talking through their experiences
  - d) A group is working with Surrey Police to promote keeping safe and explain how to report hate crime
  - e) User-led Quality Checkers to review new service models
  - f) People with learning disabilities being involved in developing PVR pilot projects
31. Below is summary of activity and feedback to date from key stakeholder groups.
  - 31.1 Feedback from people with learning disabilities:
    - a) It is critical that staff are well trained to support us: this includes staff helping to go to shops, do chores, and to allow us stay out late rather than when staff shifts end
    - b) We want regular staff – "faces we know"
    - c) We want more [easy read] information and in particular more support to understand self directed support and housing
    - d) Like "taster" sessions from the PVR [pilot services] and like feedback from other individuals who have been trying new things
    - e) Want to feel safe, make sure services are quality checked so that we know people are involved in running their own home
    - f) Must not forget about people with high needs and how they access services

g) Need regular reviews because needs do change

### 31.2 Feedback from family/carers:

- a) We have welcomed the PVR dialogue and want more ongoing communication - now it's started keep it up
- b) Overall we agreed in principle with direction of travel of PVR
- c) It is paramount that services are of good quality, monitored regularly and that staff are well trained to support people
- d) We want more information about self-directed support and housing and what it will mean for our family
- e) Carers want to be assured that their loved ones will have activities to go to during the day, contact with friends and places to meet
- f) Need to better explain what supported living actually is and that someone could have 24-hour support and would not have to live alone. Again staff support is vital for this to work
- g) Above all we are concerned about not having regular reviews: if this doesn't happen how will we understand personalisation and make it really mean something?
- h) We are getting older – how will older carers be supported?
- i) Will you make people come back from “out of county” placements?

<b>Key findings</b>
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32. This section summarises the key findings of the PVR in relation to each theme from the consultation exercise and the subsequent recommendations.

### Personalisation

- 33. A consistent theme to emerge from dialogue with people with learning disabilities and their family/carers is that personalisation “hasn't really happened to us”. Despite the personalisation agenda tracing its roots to the learning disability population, this is an unfortunate situation that means this PVR starts with some fundamental recommendations that seek to provide a firm foundation upon which any subsequent improvements are made.
- 34. The PVR has found that very few of the total number of people with a learning disability supported by the County Council use a personal budget (c.150 excluding people with direct payments). In addition, the learning disabilities stakeholder group and well-established partnership has experienced numerous “failed starts” and ill-conceived strategies to change models of service without regard for assessed needs, the importance of alternatives, and long-term affordability.
- 35. The PVR found that it takes longer both to assess and complete support plans for people with learning disabilities when compared to other client groups. This is because people with learning disabilities have, in most cases, higher needs and effective support planning is time consuming.



36. A sample of cases showed that there were a number of one off costs towards meeting people's needs that are not routinely captured by reporting systems; further work is needed to decide on what is the best way of capturing one off costs and communicating them to individuals and family/carers.
37. A sample of cases showed that the costs of Surrey's in-house services (such as day services, transport, or short term breaks) and block contracts (e.g. NHS respite via Surrey and Borders NHS Foundation Trust) are not routinely captured or reported. This should be entered for each individual to capture full costs of support packages entered.
38. Feedback to date from people who use services and their family carers is positive toward the emerging outcomes for people with learning disabilities in receipt of personal budgets. Key themes are greater choice, more flexibility and a sense of control. However, there are wide variations in cost and availability of services, which limits the possibility of genuine and affordable choice.
39. The PVR has engaged extensively with stakeholders and has found individuals with learning disabilities, parent/carers, and providers all recognise the financial challenges faced by the County Council. Each stakeholder will commit to contributing to delivering savings if there is a common approach that fundamentally places the assessed needs of individuals first and any subsequent strategic or policy direction is informed by that approach. To date, all stakeholders agree personalisation is that approach.

### **Better planning of services for the most complex and challenging individuals**

40. There is a strong case made by family carers that people are individuals and that they are assessed for and provided with appropriate care and support based on individual needs. The weight of opinion favours an end to the term 'complex' needs for this group of individuals.
41. The timescale for assessment and diagnosis can be a protracted one; both social care and health professionals are involved at varying stages of assessments both for care/support and accommodation, in particular environmental needs.
42. Indicatively, based on the number of referrals for Continuing Health Care (CHC), there are 1,000 individuals funded by the County Council deemed to be complex i.e. around a third of all those funded. This 1,000 individuals represent 13% of all the CHC referrals made by Surrey County Council. At present there are around 500 cases awaiting a determination, 130 of these with NHS Primary Care Trusts outside Surrey.
43. Of the individuals assessed as "complex" supported by Surrey County Council, 100 individuals in residential care currently cost a total of £11m

per annum. At present 12 of these individuals await a CHC determination.

44. Suitable supported living accommodation is hard to find for people with profound and multiple learning disabilities, with limited choice across the county.
45. Overall the PVR found that people currently defined as having complex needs – a term which needs to change – account for a significant proportion of Surrey's costs and need active interventions in view of the need to assess their health needs properly and seek ways to generate opportunities for supported living

## **Housing**

46. There are approximately 1,800 residential care places for people with learning disabilities in Surrey. Of these approximately 940 (53%) are purchased by Surrey County Council at an average cost of £1236 per week, 543 (31%) are purchased by 70 other local authorities (not SCC), 180 places (10%) are vacant and 6% are unknown.
47. Of the 1,800 residential care places in Surrey, 45% are located in the east of the county (Reigate and Banstead and Tandridge), 22% are located in the south west (Guildford, Surrey Heath and Waverley) 18% are located in mid Surrey (Elmbridge, Mole Valley, Epsom and Ewell), and 15% are located in the north west (Runnymede, Spelthorne and Woking).
48. Of the 70 other local authorities who are funding individuals in residential care places in Surrey, approximately 263 individuals (48%) are placed by authorities who are one of Surrey's 14 bordering local authorities.
49. There are 223 residential homes for people with learning disabilities in Surrey. Of these 151 have at least one resident funded by SCC, but only 72 (32%) have only residents funded by Surrey County Council, which means that three quarters of residential homes in Surrey have people living in them placed by other local authorities.
50. Surrey County Council fund residential places outside of Surrey for approximately 609 people. Of these, 410 are located in areas immediately bordering Surrey, of which 90% are living in West Sussex, Hampshire, Kent, East Sussex, Croydon and Sutton. For the remaining 200, 90 live in the South West, 47 live in the South East, 22 live in London, 21 in the Midlands, 10 in Wales and 11 in the North and Scotland. The average cost of these placements is £1,276 per week.
51. There are approximately 450 people living in supported living placements funded by Surrey County Council. Of these, 73 (15%) are listed as residing outside Surrey and potentially able to have their funding transferred to the host local authority under ordinary residence rules; 50% of the supported living placements are in Mid and East Surrey and 35% are in North and South West Surrey.

52. There are block contracts in place totalling approx £4m with 20 providers supporting 460 people with learning disabilities funded by the Supporting People initiative. The PVR has identified potential overlaps between these contracts and services funded with the same providers from spot purchases from adult social care. There are also variations between hourly rates charged for essentially the same service under the supporting people contract and the spot purchase from adult social care.
53. Surrey County Council remains a large provider of residential care and currently runs five residential homes with capacity for 102 people, which equates to 5% of the overall residential market in Surrey (summary of home capacity and respite provision below):

Home	Residential Capacity	Respite offer
Arundel	18	offers short-term breaks for 5 people
Badgers Wood	17	offers short-term breaks for 2 people
Coveham	10	no short-term breaks capacity
Hillside	22	offers short-term breaks for 2 people
Mallow Crescent	35	offers short-term breaks for 6 people

54. Surrey County Council’s residential homes comprise a mixture of physical environments. There is no standard model that has been developed, consequently the portfolio range from large traditional converted homes to smaller self-contained detached properties in a residential setting.
55. In the market generally (not just Surrey County Council) there are a number of vacancies in existing supported living services which have been unfilled for many months, and the reasons for this are varied: from unsuitable properties to unsuitable locations, historic reputations and proximity to family homes and local communities.
56. There are a number of properties providing accommodation for people with learning disabilities either in use or vacant which are subject to capital charges held by the NHS or Secretary of State for Health.
57. At any one time, there are between 60 and 90 people in residential care or specialist treatment services, both in and out of County, funded by NHS Surrey as the responsible commissioner.
58. The PVR concludes that there is a range of options available in Surrey to facilitate a potential large-scale shift from residential and nursing care to individualised community accommodation options including residential care, day services, domiciliary care and supported living.

**Day activities/employment**

59. Surrey County Council provides day services to 650 individuals during the day five days per week from seven-day services across the county with a series of satellite community support.

60. In addition there are countywide services delivering employment, communication and learning support.
61. The County Council is the dominant provider of day services in Surrey: there are limited alternatives available, none at all in some areas of the county. Other providers of day services include Surrey and Borders NHS Partnership Foundation Trust and very few independent providers and charities.
62. The use of day services, particularly extended services into the early evening, is recognised by family carers as an important form of respite care.
63. Overall the PVR has found that in-house services form a significant part of the day service market in Surrey, daytime activities are limited in choice and a greater range, clearly priced, should be developed for people using personal budgets.

### **Transport**

64. Current in-house Surrey County Council services (day services in particular) are not necessarily close to where people live. As a result there is a significant transport cost to individuals accessing current provision: £1.8 million is spent on transport to and from day services by the County Council each year.
65. In addition, Surrey County Council frontline social care teams fund an additional £1.8m of ad hoc transport for individuals to/from a variety of settings (residential care, supported living, respite).
66. Recent projects in Surrey have generated new options for individuals and groups living together, seeing providers working with commissioners to maximize mobility allowances and a variety of vehicles, public transport and assisted schemes put into practice.
67. Overall, the PVR has found that transport costs are significant and alternative models of providing transport can be introduced and should be evaluated.

### **Improving transition arrangements for young people with a learning disability**

68. There are 385 individual cases currently open to Surrey's Transition Team. Of those, 30 are aged 15-18 and 303 are aged between 18-21. This reflects an historic "jump" in both numbers and Adult Social Care's awareness of people after their 18th birthday i.e. too late to plan an effective transition.
69. There are a significant number of individuals placed out of county in specialist education services. Around 1,200 young people aged 14-18 have a Statement of Special Educational Needs (SEN). Not all of these individuals will transition into Adult Social Care. Tracking is difficult

because some young people with a statement of special educational needs may meet criteria for Children's services, some don't and others choose not to use services.

70. The PVR has found that a number of young people are known to different services and the process between them or in parallel can be difficult to understand. Feedback has highlighted that young people and their families in particular find the process difficult.
71. Overall the PVR has found that more needs to be done to identify and track pre-adult transition cases and that Adult Social Care and Children's Schools and Families together need to develop local provision with local providers and make sure pathways support individual and maintain continuity.

### **Effectively planning services for older people with learning disabilities**

72. A large number individuals over the age of 65 with a learning disability are currently supported by Surrey County Council in specialist learning disability services. Significant numbers of people with learning disabilities are living longer and may call on additional support later in life: 12 individuals are aged 90+, 73 individuals are between 80-89 and 219 are aged between 70-79.
73. There are no established older people services in Surrey that currently provide care and support for people with learning disabilities over 65 years of age. Traditionally as individuals with learning disabilities get older they have remained in specialist learning disability services regardless of whether their needs have changed.
74. Feedback suggests that more information needs to be made available publicly on how to support older people with learning disabilities, focusing in particular on community services already available such as meals on wheels.
75. About 20% of people with a learning disability have Down's syndrome, and people with Down's syndrome are at particular risk of developing dementia. The prevalence of dementia in people with other forms of learning disability is also higher than in the general population, estimated at 13% among the over 50's and 22% among the over 65's or about four times higher than in the general population.
76. Surrey County Council day services operate a specialist learning disability service for this group at The Cottage in Ewell. The PVR has set up a pilot service for older people at Park Hall, a Surrey County Council older people's home. These opportunities have allowed the PVR to review which skills can be developed in other settings, including improved training on understanding PLD and dementia, and the factors to consider when supporting people differently going forward.
77. Overall the PVR has found that more needs to be done to identify and assess older people with learning disability early enough to plan services

effectively, and to develop support options accessible to older people in the community.

**Respite and short-term breaks**

78. There are 223 people with learning disabilities known to have an allocation of respite provision. Surrey County Council's in-house services offer 18-beds located within residential homes, and utilise a total of 3748 nights per year.
79. 86 people access Surrey and Borders Partnership NHS Foundation Trust respite services, 14 beds, using 4303 nights per year in total. The commissioning responsibility for respite services for these individuals has recently been transferred to the Council.
80. 53 people access services provided by other providers across the independent and not for profit residential providers.
81. The allocation of nights per individual varies hugely, with some individuals accessing up to 30 nights per year and other accessing in excess of 160 nights per year: in total 70 people access 30 nights per year and 150 people access 45 nights per year.
82. There are relatively few options for respite for individuals using self directed support; current services are buildings-based and often part of residential services.
83. The vast majority of respite demand is Thursday to Sunday and there is a corresponding shortage of capacity on those days/nights across current providers.
84. The cost of respite services varies hugely (between £170 and £422 per night) and further limits scope for individuals using Self Directed Support.
85. There is limited respite for individuals with behaviours that challenge support needs; particularly short term breaks outside Surrey and/or in a variety of locations.
86. The transport costs for individuals going to and from respite tend to be high as many people travel long distance. The appropriateness of such arrangements is under review. Feedback from families and good practice suggests that it is not appropriate to offer respite to individuals in residential homes.
87. There is a lack of clear information regarding the availability and cost of respite services.
88. The market is keen to engage with commissioners to develop innovative respite offers, including hospitality and leisure services that cater for a wide range of needs.
89. The PVR has found that the service pattern for respite and short-term breaks has developed unevenly due to historic factors, but the PVR

recommendations are well-placed to ensure a unified and consistent commissioning approach to achieve better value and improved outcomes.

### **Stronger partnerships with suppliers**

90. As reported above 3,375 people with a learning disability are supported by Surrey County Council totalling 16.5% of all people in Surrey with a learning disability. The remaining 83.5% not known to social care services may well be accessing alternative services and having their needs met in alternative ways, including through services provided by Districts and Boroughs, such as community support, housing, leisure services.
91. The PVR has found that in 2010/11 the County Council allocated approximately £3.3 million to grants and contracts with Districts and Boroughs and the voluntary sector, with a primary focus on prevention and promoting independence. The range of services funded include, day care, community transport and meals on wheels.
92. Current monitoring arrangements do not routinely capture information in relation to the people that access these services. For example, learning disability' is not a separate client category recorded for people accessing Districts and Borough day services.
93. Districts and Boroughs do not provide specialist day services for people with learning disabilities and day care provided by them is of discretionary nature, mainly accessed by vulnerable people and people aged 50 and over. Very few people with learning disabilities attend these day centres, and these are people with lower care needs.
94. The PVR has piloted an approach at Cobham in partnership with Elmbridge Borough Council. This is a new model of day activities with the intention to enable service users to purchase this service with their personal budget at the end of this first year of operation; some (but not all) other districts and boroughs have expressed interested in developing new joint-up approaches to day services.
95. As reported above, social care and health professionals assess a significant number of individuals and a more joined-up approach in relation to healthy lifestyles could benefit people with learning disabilities. Research shows that: (1) People with learning disabilities often have worse health than people who do not have learning disabilities; (2) People with learning disabilities are more likely to suffer from nutritional ill-health (including overweight).
96. Currently Telecare equipment is provided by District and Borough Councils; in 2010-11 about 1300 pieces of telecare sensors were installed in Surrey. However, the majority of telecare equipment currently on offer is targeted at Older People and is not entirely suitable for people with learning disabilities. The PVR has found that Telecare has the potential to deliver positive outcomes for people with learning

disabilities in providing independence and supporting family carers, combined with reduced social care packages.

97. Working with providers of learning disability services the learning disabilities commissioning team and procurement have renegotiated commercial terms with a significant number of Strategic Suppliers. The PVR has found that working closely with these Strategic Suppliers is key to delivering efficiencies, maintaining the quality of services, offering choice and greater equity of local provision.

<b>Outcomes sought</b>
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98. The PVR will culminate in a new joint strategy for the commissioning of services for people with learning disabilities. This will outline Surrey's commissioning intentions between 2012 – 2015 and based on a) feedback from PVR engagement and b) the findings of the PVR analysis, deliver the following outcomes:
- 98.1 Everyone with a learning disability known to Surrey County Council will be reviewed/reassessed and allocated a personal budget where eligible
- 98.2 A range of support options available to all people with a learning disability to access using their personalised budget including:
- a) personal support needs,
  - b) day activities,
  - c) respite and short breaks
- 98.3 A shift from contracted residential care to a broader range of personalised accommodation options across Surrey
- 98.4 Individuals out of county will be supported to make informed decisions about where they chose to live
- 98.5 Increased availability and accessibility of health services for all people with learning disabilities, reducing health inequalities for people with learning disabilities
- 98.6 Improved assessment, diagnosis and treatment experience and service access through joint work on individuals with high support needs, autism, Asperger's and other specific conditions e.g. Prader Willi
- 98.7 A shift from historical double funding transport arrangements within residential care services
- 98.8 Individuals and families will be supported to maximise their benefit entitlement to promote independence and identify long term transport options



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- 98.9 A reduced number of entry and exit points to and from Adult Social Care; improved processes for identifying individuals sooner and jointly developing or commissioning services that support smooth transition; an outline model of services for older people who have learning disabilities
- 98.10 New services able to meet individually assessed needs, however challenging and numerous, from a broad range of providers at an affordable cost
- 98.11 A better understanding of the needs of young people entering the adult social care system
- 98.12 Good local provision for children in transition
- 98.13 People with a learning disability supported to access older people's services as would any other older person
- 98.14 People with learning disability and dementia access existing dementia pathways
- 98.15 A market offering innovative and affordable respite options across the county for people who have a personal budget to choose and buy respite when they need it
- 98.16 A standard approach to quality assurance to support the effective commissioning of services in the future
- 98.17 Good use of Quality Checkers, people with learning disability who are trained and have reviewed services in past
- 98.18 Information relating to people with learning disabilities is easy to find, in an accessible format and is up-to-date
- 98.19 A market developed in collaboration with all partners able to respond to an increasing number of individuals using a personal budget to access services

### **Commissioning for personalisation**

- 99. In practice, to deliver the outcomes above, the PVR proposes the following approach:
  - 99.1 A person centred model of care and support planning: supported self-assessment, the application of the Resource Allocation System, and a personal budget where eligible. This will apply, as part of a planned approach, to:
    - a) all individuals new to Adult Social Care e.g. in transition
    - b) all individuals currently funded by Surrey County Council

## ITEM 9

- 99.2 Targeted work with strategic suppliers to implement a programme of re-registration and service re-design that will increase access to a range of personalised accommodation options
- 99.3 Targeted work with suppliers of personal support, including respite, day activities, transition and transport, to implement a programme of service re-design that will increase access to a range of personalised support options
100. The PVR has developed the most comprehensive understanding of all people with a learning disability supported by the County Council: this new database identifies each person, their package of care and support, their location and their current cost. The database has been used to assess the scale of the task to support all people with learning disabilities through personalisation.
101. The PVR has also run a series of pilot services to test the feasibility of new approaches to care and support. These have focused on day activities, older people, young adults, respite, and the limited re-registration of residential services to supported living. The learning from these informs our commissioning activity and the confidence intervals for each recommendation, action and corresponding efficiency.
102. Together, the pilot services and PVR database, inform the presentation of each recommendation to ensure they are delivered the following will be implemented:
- resources will be deployed to undertake the review and reassessment activity as part of a targeted programme management approach
  - each PVR recommendation and supporting actions will prioritise key groups and individuals, cross-referenced with current caseloads in Adult Social Care's localities, to identify the total number of reviews/reassessments that must be undertaken annually 2012-15
  - a joint commissioning infrastructure to ensure multi-agency assessment and review of individuals, including community health support and those awaiting CHC determination, will be developed
103. The scale of the work proposed will require a one-off investment of £1.1m to fund dedicated additional social work capacity, aligned to each of the 11 boroughs and districts and community learning disabilities teams, to:
- undertake large-scale re-assessment and review of people with people learning disabilities identified above (Recommendations 1-2)
  - develop Surrey's own skills and capacity to plan support effectively, creatively and cost-effectively, working together with individuals and their family/carers
  - ensure that any new service meets or exceeds quality standards and demonstrates improvements in outcomes identified for each individual
104. This investment will ensure the personalisation ambition is realised and will generate recurring savings building to £8.1m from 2015.

**Recommendations**

105. Each recommendation follows below, with accompanying summary of its rationale, actions, and deliverables:

<p><b>Recommendation 1: Personalisation</b>                      By 1 April 2015 we will deliver £2.5m efficiencies by:                      - Developing personalised support options with strategic suppliers of care and support, including clearly priced, locally developed, options for personal support, day activities, respite and short breaks.                      - Completing a coordinated programme of reviews to deliver personalised services that meet assessed needs, improve outcomes and offer value for money.</p>			
Fact(s)	Issue(s)	Outcomes sought	Action(s)
<p>Of the 3375 people with a learning disability known to SCC only a small proportion currently have a personal budget. The government ambition is for all people in receipt of social care packages to have a personalised budget by April 2013.</p> <p>We have identified the following:</p>	<p>An analysis of a sample of 35 people with learning disabilities receiving personal budgets showed that it takes longer both to assess individuals and complete support plans for people with learning disabilities when compared to other client groups. To complete this process properly it is a resource intensive exercise.</p> <p>There are wide variations in cost of service provision and availability limiting the possibility of genuine and affordable</p>	<p>Everyone with a learning disability known to Surrey County Council will be reviewed/reassessed and allocated a personal budget where eligible</p> <p>.</p> <p>There will be a range of support options available to all people</p>	<p>To commission additional qualified social work capacity to undertake a programme of re-assessment and review of people with people learning disabilities over the next three years</p> <p>Work alongside commissioners on a targeted programme of activity with strategic service</p>

<p>-150 young people over 15 years of age expected to transition into Adult Social Care over the next three years</p> <p>-300 individuals over 65 years of age currently supported by specialist learning disability services</p> <p>-223 individuals currently accessing respite/short break services across social care, health services and the independent sector</p> <p>-100 individuals currently receiving high cost packages of care in and out of Surrey</p> <p>-750 individuals currently accessing day services (including Surrey County</p>	<p>choice over their support.</p>	<p>with a learning disability to access using their personalised budget including:</p> <ul style="list-style-type: none"> <li>• personal support needs,</li> <li>• day activities, respite and short breaks</li> </ul>	<p>providers to develop current services and a new market for services for people using individual budgets.</p> <p>Ensure all options are clearly priced to help individuals make choices.</p>
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<p>Council's in-house services)</p> <p>-460 individuals currently receiving Supporting People funded services</p>			
<p><b>How we will deliver the efficiencies</b></p> <p>Each year from 2012/13 to 2014/15 we will conduct a targeted reassessment of 28 individuals costing in total £3.2m per annum.</p> <p>This recommendation also works with specific groups and individuals. We will conduct a targeted reassessment of:</p> <ul style="list-style-type: none"> <li>- 209 older people with a learning disability costing in total £12.2m per annum</li> <li>- 115 individuals currently accessing respite in excess of £400 per night</li> <li>- 14 individuals with high cost packages in Surrey costing £1.6m per annum</li> <li>- 9 individuals with high cost packages outside Surrey costing £1.1m per annum</li> </ul> <p>As a result we will better understand their assessed needs, within each year better plan for those assessed needs, and establish whether current services (in and out of county) meet those assessed needs and offer value for money.</p> <p>To date, based on undertaking significant re-provision projects, we have achieved a reduction in costs in the region of 20%. This has been through (a) commissioning alternative support options (b) renegotiation of placement/contract terms and (c) innovative and more appropriate care and support plans.</p>			<p><b>Efficiencies</b></p> <p><u>PVR savings target</u></p> <p><u>12/13 = £0.4m</u>  <u>13/14 = £1.9m</u>  <u>14/15 = £0.2m</u></p> <p><u>MTFP Savings target £1.2m</u></p>

<p><b>Recommendation 2: Accommodation</b>                      By 1 April 2015 we will deliver £2.4m efficiencies by developing personalised accommodation options for people with learning disabilities, with strategic suppliers and housing partners and deliver a shift from residential and nursing care to individualised community accommodation options.</p>			
Fact(s)	Issue(s)	Outcomes sought	Action(s)
<p>There are 1,500 people who are supported to live in residential care homes. This costs SCC £89m per annum.</p> <p>Surrey funds                      -100 people in residential care run by SCC in Surrey,                      -800 are in other homes run by commercial/not for profit organisation in Surrey,</p> <p>-600 people are in homes outside Surrey.</p>	<p>Many parents (particularly those with young adults) do not want their relative to live in residential care homes, which they view as 'old fashioned' and not person centred.</p> <p>Surrey County Council is dependent on residential care and lacks alternatives in Surrey</p> <p>It is often a high cost and resource intensive exercise to review/monitor individuals resident out of county</p>	<p>A shift from contracted residential care to a broader range of personalised accommodation options across Surrey</p> <p>Better understanding of future accommodation needs of people with learning disabilities in and out of Surrey.</p> <p>Individuals out of county supported to make informed decisions about where they chose to live</p>	<p>Work with strategic suppliers on a programme of re-registration</p> <p>Review the 900 people who are living in residential care in Surrey and consider accommodation option in the areas/locality they choose.</p> <p>Review the 600 people who are living in residential care outside Surrey and considered for a supported living placement in the host area or offered the</p>

		<p>Stronger partnerships with neighbouring and distant commissioners to determine ordinary residence decision-making.</p>	<p>opportunity to move back to Surrey.</p> <p>To engage other local authority commissioners with people placed in Surrey and where Surrey has placed individuals, to ensure service people are supported to choose where they want to live.</p> <p>Review all existing 'supporting people' contracts and the needs of the individuals supported, including the need for additional hours to be provided by Adult Social Care</p>
<p><b>How we will deliver the efficiencies</b></p> <p>We will undertake a programme management approach targeting and making achievable our ambition to reregister existing residential services to offer personalised accommodation options. The rationale for this being:</p> <ol style="list-style-type: none"> <li>1) volume pressures (in terms of the number of people to work with)</li> <li>2) strategic suppliers willing to reregister and support this programme</li> </ol> <p>In 2012/13 we will commence the programme by reassessing 60 individuals currently in residential care in Surrey costing in total £6.4m and 30 individuals currently in residential care outside Surrey costing in total £3.7m. We will better understand their assessed needs, within each year better plan for those assessed needs, and establish whether current services meet</p>		<p><b>Efficiencies</b></p> <p><u>PVR savings target</u></p> <p><u>12/13 = £0.45m</u></p> <p><u>13/14 = £0.98m</u></p> <p><u>14/15 = £0.98m</u></p>	

<p>those assessed needs and offer value for money.</p> <p>Based on pilot projects we have learnt to be cautious as there have been wide variations in efficiencies delivered to date, between 2% and 10%, and the efficiencies forecast are conservative as a result. We will monitor and evaluate our progress each quarter and amend both our estimated efficiencies and individuals to work with in years 2 and 3</p>	
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<p><b>Recommendation 3: Health</b>          We will develop integrated commissioning with health partners to determine appropriate packages of care and support, to ensure health and wellbeing needs are met effectively, and implement “responsible commissioner” guidance.</p>			
Fact(s)	Issue(s)	Outcomes sought	Action(s)
<p>Health and social care commission services for people with learning disabilities separately.</p> <p>NHS Surrey have scored as amber in the national health self assessment.</p>	<p>Families and people with a learning disability find it frustrating that they have to repeat information twice and would like more joined up working between health and social care.</p> <p>The health services need to improve to meet the health and well-being of individuals.</p>	<p>Jointly commissioned services with health partners.</p> <p>Increased availability and accessibility of health services for all people with learning disabilities, reducing health inequalities for people with learning</p>	<p>To jointly review the health and social care needs of people with learning disabilities, including those awaiting CHC determination.</p> <p>We will incorporate the themes of the learning disability self assessment framework in the development of a joint health needs strategy for people with a learning disability.</p>



<p>NHS Surrey continues with responsibility for 63 people identified as requiring continuing healthcare funding (CHC). The County Council awaits a decision on 500 individuals who have been referred for CHC to NHS Surrey and 34 other PCT's.</p>	<p>There is a lack of provision for individuals with high support needs to have their health needs met locally.</p>	<p>disabilities</p> <p>Improved assessment, diagnosis and treatment experience and service access through joint work on individuals with high support needs, autism, Asperger's and other specific conditions e.g. Prader Willi</p>	<p>To jointly work with strategic suppliers to develop new services local to Surrey, where appropriate.</p> <p>To develop a joint commissioning infrastructure, including multi-agency partnership and local delivery groups to undertake multi-agency assessment and review of individuals to include community health support</p>
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<p><b>Recommendation 4: Transport</b>                  By 1 April 2015 we will deliver £2m efficiencies by reviewing the transport needs of individuals as part of their supported self-assessment. This will maximise each individual's benefit entitlement, address areas where there has been historic double-funding, and promote independence.</p>			
Fact(s)	Issue(s)	Outcomes sought	Action(s)
<p>Transport is purchased on an ad-hoc basis, at high cost (circa £3.6m per annum), with little</p>	<p>The coordination of travel is patchy; transport costs are high in both the County Council in-house services and Personal Care and Support.</p>	<p>A shift from historical double funding transport arrangements within residential care services</p>	<p>Develop a policy to be co-designed with people who use services and their carer's and families to ensure equitable</p>

<p>equity of access or provision.</p> <p>There is little access to accessible and supported public transport.</p>	<p>There are individuals receiving mobility allowance and having transport provided through ASC</p>	<p>Support individuals and families to maximise the benefit entitlement to promote independence.</p>	<p>access to travel and transport provision.</p> <p>Work with providers and individuals to ensure through the review process that people are claiming the correct benefits Support people to use public transport wherever possible, including a range of support tools such as “transport buddy’s”</p>
<p><b>How we will deliver the efficiencies</b></p> <p>This recommendation focuses on stopping double funding and through reassessment maximising an individual’s benefit entitlement.</p> <p>In 2012/13 we will establish the degree of double funding for transport for individuals currently in residential care. We will deliver £0.8m reduction in transport costs by identifying individuals in (24hr) residential care that continue to be in receipt of mobility allowance and will cease historical double funding.</p> <p>In years 2013/14 and 2014/15 we will deliver £1.2m efficiencies by targeted individual assessment to identify their entitlement to mobility allowance, maximise benefits and remove a significant proportion of the transport cost from the County Council.</p>			<p><b>Efficiencies</b></p> <p><u>PVR savings target</u>  <u>12/13 = £0.8m</u>  <u>13/14 = £0.6m</u>  <u>14/15 = £0.6m</u></p>

**Recommendation 5: Transition**

We will influence how services are planned and delivered for young people with learning disabilities by working with children, schools and families to identify individuals earlier, jointly understand and assess needs, and facilitate service developments that support personalisation.

We will ensure people with a learning disability over the age of 65, and those with early onset dementia, are supported to access, through existing pathways (e.g. Dementia pathway), a range of services that best meet their assessed needs.

Fact(s)	Issue(s)	Outcomes sought	Action(s)
<p>In Surrey there are 380 young people (18 –25) allocated to the transition team and a further 269 people under the age of 18 with named link worker in transitions team.</p>	<p>There has been a lack of joined up processes between children’s and adult services</p> <p>Lack of understanding of future needs by adults services</p>	<p>There will be a revised multi-agency Transition Strategy and protocol that reflects issues specific to learning disabilities.</p> <p>A better understanding of the needs of young people entering the adult social care system</p>	<p>To review and update the current Transition Strategy and protocol to ensure it is up-to date on learning disability specific issues.</p> <p>Ensure that the Adult Social Care Transition team are involved at 9-year reviews (conducted at the age of 14)</p>
<p>Lack of joined up local provision for young people in transition</p>	<p>Young people are placed out of area for college provision and accommodation.</p>	<p>Good local provision for children in transition</p>	<p>Improve links and join up commissioning intentions for young people to facilitate the introduction of personalised support packages for 18-24 year olds</p>
<p>Surrey provides support to 400 people</p>	<p>Reassessment work undertaken during the SCCP found that several older people</p>	<p>People with a learning disability supported to</p>	<p>Work jointly with older people services to ensure they are</p>

<p>with learning disability over the age of 65+. Of these 12 individuals are aged 90+, 73 individuals are between 80 – 89 and 315 are aged 65 – 79.</p> <p>People with Down’s Syndrome are at high risk of developing dementia and the prevalence of dementia in people with other forms of learning disability is about 4 times higher than the general population.</p>	<p>in PLD service wanted quieter future services. This was particularly pertinent where residential homes comprised service users with mixed ages and abilities.</p> <p>Individuals with learning disability and dementia do not have access to the Surrey dementia pathways</p>	<p>access older people’s services as would any other older person</p> <p>People with learning disability and dementia access dementia pathways</p>	<p>accessible to people with learning disabilities. Our Pilot service at Park Hall will inform future options.</p> <p>Work with strategic providers to develop partnerships with older peoples services including day, community and accommodation options to support the needs of older people with learning disabilities The Cobham project is a local exemplar</p> <p>Link Learning Disability and Dementia Partnership Boards.</p> <p>Work with dementia services to ensure pathways are accessible to people with learning disability.</p>
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<p><b>Recommendation 6: Respite</b>                      We will cease to commission respite and short breaks in residential services where people permanently live, as the Care Quality Commission considers it poor practice.</p>			
Fact(s)	Issue(s)	Outcomes sought	Action(s)
<p>At present the County Council purchases respite care for 225 individuals totalling 7,500 overnight stays each year.</p>	<p>Family carers and individuals, especially younger people, do not feel it is right to access services where people are living in permanent homes. Individuals living in these services have also told us that they find it difficult when people are placed as they can be unsettled and disruptive.</p>	<p>People receive respite in a range of provisions separate to existing residential homes to enable family carers to continue caring for their family member.</p>	<p>Cease to commission respite and short breaks in residential services where people permanently live</p>
<p>Respite provision is limited to in-house, some health provision and two external providers.</p>	<p>Individuals have also said that they would like to do fun activities and go on holiday with friends as an option than being in a traditional unit, which they can sometimes find boring.</p>	<p>A market offering innovative and affordable respite options across the county for people who have a personal budget to choose and buy respite when they need it.</p>	<p>Introduce new options working with new entrants to the market, such as Surrey hotels, leisure providers, holiday camps with support (e.g. Butlins), and shared lives schemes (a break where individuals stay with another family at their home)</p>

<p><b>Recommendation 7: Quality assurance (including workforce and safeguarding)</b>                      We will implement a standard approach to quality assurance and contract monitoring across services commissioned for people with learning disabilities.</p>			
Fact(s)	Issue(s)	Outcomes sought	Action(s)
<p>There has been a lack of a consistent approach to Quality Assurance and contract monitoring.</p>	<p>Feedback suggests that whatever services are provided it is critical that quality and safeguarding individuals is robustly monitored so that they can be assured that the individuals are safe and well looked after (quality and continuity of workforce)</p>	<p>A standard approach to quality assurance to support the effective commissioning of services in the future</p> <p>Good use of Quality Checkers, people with learning disability who are trained and have reviewed services in past.</p>	<p>Redesign the specification for services commissioned for people with learning disabilities, which will be incorporated into the standard contract terms and conditions used by the County Council. This will focus specifically on ensuring staff training, management continuity and multi-agency safeguarding procedures are reviewed and understood.</p> <p>Adopt the following tools to assist quality assurance and contract monitoring:</p> <ul style="list-style-type: none"> <li>- ASCOT (which is a nationally recognised outcomes framework) tailored by the County Council in consultation with user groups to monitor user experience whilst visiting Registered Care Homes and Home Based Care providers</li> </ul>

			<ul style="list-style-type: none"> <li>- Survey/feedback programmes</li> <li>- Compliments and Complaints processes for non-registered services including day activities</li> <li>- Further develop the Quality Checkers approach</li> </ul> <p>Develop an 'account holder model' to ensure that providers have a named officer responsible for ensuring periodic contract review and links with the County Council. This officer would work with Quality Assurance, Safeguarding, Procurement to ensure that site visits are up to date, act on recommendations for future improvements and coordinate follow up visits.</p>
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<p><b>Recommendation 8: Information and communication</b>                  We will improve sources of accessible information relating to services and support for people with learning disabilities.</p>			
Fact(s)	Issue(s)	Outcomes sought	Action(s)
Information currently available to people	Without good accessible information people cannot be supported to make	Information relating to people with learning	Review existing sources of information held by the County

<p>with learning disabilities and their family carers does not explain self directed support, how to use a personal budget and what accommodation and support options are available.</p>	<p>informed choices</p>	<p>disabilities is easy to find, in an accessible format and is up-to-date.</p>	<p>Council and partners, specifically relating to:</p> <ul style="list-style-type: none"> <li>• personal budgets and supported self assessment</li> <li>• accommodation options</li> <li>• day activities</li> <li>• respite opportunities</li> <li>• transition</li> <li>• health services</li> </ul> <p>We will make better use of the Learning Disability Partnership Board website and 'Surrey Information Point'</p>
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<p><b>Recommendation 9: Stronger partnerships</b>                  We will shape and develop the existing market of services in response to our ambition for personalisation by working with our partners, including family/carer groups, The Learning Disability Partnership Board, Surrey Care Association, health colleagues, advocates, and Borough/Districts</p>			
Fact(s)	Issue(s)	Outcomes sought	Action(s)
<p>The current market in Surrey displays the following features:</p> <ul style="list-style-type: none"> <li>• heavy dependency on residential care</li> </ul>	<p>Individuals with a learning disability do not have a wide choice of affordable options of accommodation, care and support, day activities, and respite.</p>	<p>A market developed in collaboration with all partners able to respond to an increasing number of individuals using a</p>	<p>To co-design a new joint learning disability strategy for Surrey</p> <p>To review where Telecare has the potential to deliver positive outcomes for people with learning</p>

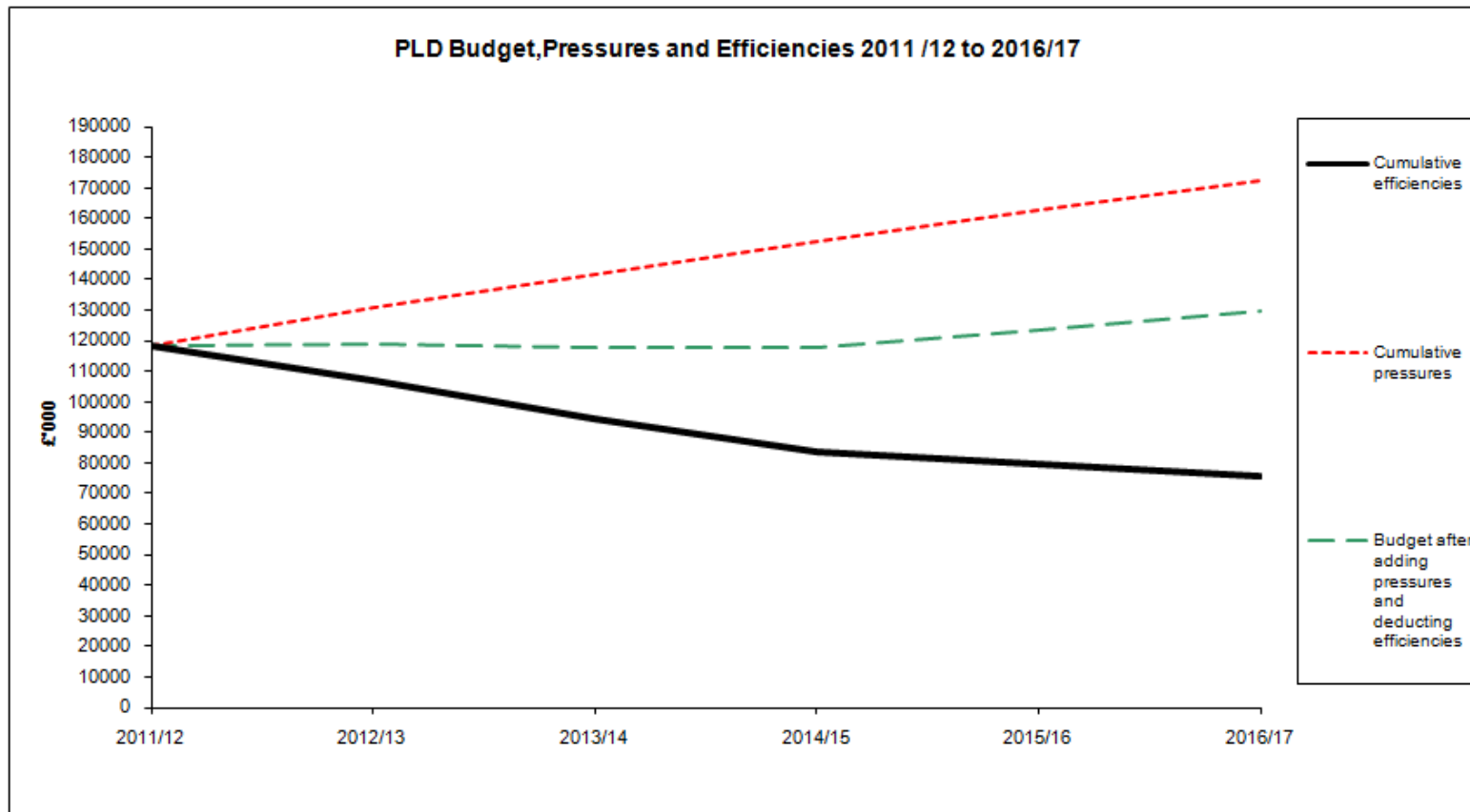


<ul style="list-style-type: none"> <li>• a predominance of service provision in East Surrey, both residential and supported living prevalence</li> <li>• few providers of day activities outside the County Council</li> <li>• few in-county providers of services for young people in transition</li> <li>• limited choice of providers able to effectively support individuals with behaviours that challenge</li> <li>• untapped potential among existing providers of services e.g. Boroughs/Districts, smaller local market entrants</li> <li>• opportunities to utilise technology e.g. Telecare</li> </ul>		<p>personal budget to access services</p>	<p>disabilities; focusing specifically on its use in the context of supported living and choice to be remain at home. This will include dual support for older carers.</p> <p>Work with Districts and Boroughs to develop locally accessible community services for people with learning disabilities.</p>
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**Efficiencies to be delivered**

106. The following four charts illustrate the context of the pressures facing the learning disabilities budget over the coming five years and the management actions already in place, and the additional actions recommended through this PVR, that address them. The charts use draft figures per the budget report to Cabinet dated 31/01/12.

107. Chart One below, shows the escalating cost and volume pressures over the period 2012-17 (top line). These are addressed by existing management actions incorporated into the MTFP, together with the PVR efficiencies, to deliver the budget at the level shown by the middle line.



108. Chart 2 below shows the budget monitoring position against the PLD policy line at the 31/12/011, and the management actions that are addressing the projected expenditure pressure.

Adult Social Care Policy Line	Month Data	YTD Data	Full Year Budget	Projected Year-End Outturn	Projected Outturn Variance	Management actions to address the projected overspend and incorporated into MTFP
			11/12 £'000	11/12 £'000	11/12 £'000	
<b>People with Learning Disabilities (PLD)</b>						
Nursing General			424	476	51	To date £1.2m of Learning Disabilities savings have been made and reported against other policy lines leaving £1.9m forecast overspend. This is being addressed as follows: 1) Additional demographic and transition volumes are incorporated into the 2012/13 MTFP 2) These volumes are then managed through off - setting cost and price efficiencies in the MTFP through: - LD PVR recommendations focussing on person centred planning: Personalised Support, Personalised Accommodation and Transport - Optimising Transition pathways - Control of care package inflation - Working with Strategic Suppliers - Strategic review of in - house services - Telecare - Correct application of CHC guidance - Preventative savings
Nursing Dementia			230	226	(4)	
Residential General - External			73,867	73,065	(802)	
Residential Dementia - External			149	81	(68)	
Residential In-House Provision			4,314	4,977	663	
Supported Living / Homecare - External			13,856	16,512	2,655	
Supported Living / Homecare In-House Provision			640	616	(24)	
Direct Payments			6,006	8,090	2,084	
Day Care - External			1,644	1,581	(62)	
Day Care In-House Provision			5,940	6,040	100	
Respite Care			491	542	51	
Transport Services			784	1,173	389	
Other Care - External			8,942	7,144	(1,798)	
Other Care In-House Provision			1,335	1,187	(148)	
<b>Total People with Learning Disabilities</b>			<b>118,624</b>	<b>121,712</b>	<b>3,087</b>	

**Note: monitoring position for month 9 for PLD policy line - excludes cost and budgets for PLD - OP**

109. Chart 3 below presents the estimated budgeted impact of cost and volume changes for 2012/13 and the efficiencies savings plans in place to address them, of which the PVR recommendations form part.

People with Learning Disabilities Supported by ASC	Financial Year	Budget (gross) to support these people per the MTFP £'000	Projected Cost per MTFP including cost and volume assumptions £'000	Cost and volume pressures to be addressed £'000	Savings and efficiency plans to address the cost and volume pressures (£'000)																														
<p>There are 3,375 people supported by ASC receiving 3,900 costed services (individuals may have more than one service and some services are not costed care packages)</p>	<p>2012/13</p>	<p>118,900</p>	<p>130,400</p>	<p>11,500</p>	<p>People that meet eligibility requirements must be supported, so the number of people supported cannot be reduced, but the ways in which support is provided can be managed to contain costs and volume pressures.</p> <table border="0"> <tr> <td>Strategic Shift from Residential to Community</td> <td>1,372</td> </tr> <tr> <td>Absorption of Demographic Pressures</td> <td>306</td> </tr> <tr> <td>Telecare Efficiencies</td> <td>307</td> </tr> <tr> <td>Maximising Income through Partnership Arran</td> <td>1,714</td> </tr> <tr> <td>Optimisation of Block Contract Rates</td> <td>18</td> </tr> <tr> <td>Optimisation of Spot Care Rates</td> <td>2,242</td> </tr> <tr> <td>Optimisation of Transition Pathways</td> <td>858</td> </tr> <tr> <td>Section 256 Client Group Savings</td> <td>331</td> </tr> <tr> <td>Learning Disabilities Public Value Review</td> <td>2,000</td> </tr> <tr> <td>Strategic Supplier Review</td> <td>1,000</td> </tr> <tr> <td>Preventative Savings through Whole Life Syste</td> <td>883</td> </tr> <tr> <td>General In-House Efficiencies, including Shad</td> <td>238</td> </tr> <tr> <td>Apply Resource Allocation System more cons</td> <td>147</td> </tr> <tr> <td>Home Based Care Retender</td> <td>57</td> </tr> <tr> <td><b>Total efficiencies</b></td> <td><b>11,472</b></td> </tr> </table>	Strategic Shift from Residential to Community	1,372	Absorption of Demographic Pressures	306	Telecare Efficiencies	307	Maximising Income through Partnership Arran	1,714	Optimisation of Block Contract Rates	18	Optimisation of Spot Care Rates	2,242	Optimisation of Transition Pathways	858	Section 256 Client Group Savings	331	Learning Disabilities Public Value Review	2,000	Strategic Supplier Review	1,000	Preventative Savings through Whole Life Syste	883	General In-House Efficiencies, including Shad	238	Apply Resource Allocation System more cons	147	Home Based Care Retender	57	<b>Total efficiencies</b>	<b>11,472</b>
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110. Chart 4 below shows the PVR efficiency recommendations over 2011 to 2015 i.e. including efficiencies already made in 2011/12.

<b>Summary PVR Savings Recommendations</b>									
						<b>Profiled LD Commissioning Strategy and MTFP Efficiencies</b>			
		<b>Count against £8.1M PVR target</b>	<b>Count against existing MTFP targets</b>	<b>Total</b>	<b>11/12</b>	<b>12/13</b>	<b>13/14</b>	<b>14/15</b>	<b>Total</b>
<b>PVR Rec. No.</b>	<b>Recommendation</b>	Estimated £ M	Estimated £ M	Estimated £ M	Estimated £ M	Estimated £ M	Estimated £ M	Estimated £ M	Estimated £ M
	11/12 Management actions: Transfer of Commissioning, Social Care Change Programme/NHS Campus re-provision	1.20		<b>2.10</b>	2.10				2.10
	Adjust for 11/12 one - off savings			<b>-0.90</b>		-0.90			-0.90
<b>1</b>	Personalised Support	2.00		<b>2.00</b>		0.30	1.70		2.00
<b>2</b>	Personalised Accommodation	2.40		<b>2.40</b>		0.45	0.98	0.98	2.40
<b>1</b>	Short Term Breaks	0.50		<b>0.50</b>		0.10	0.20	0.20	0.50
<b>4</b>	Transport Needs	2.00		<b>2.00</b>		0.80	0.60	0.60	2.00
	<b>Sub Total PVR</b>	<b>8.10</b>	<b>0.00</b>	<b>8.10</b>	<b>2.10</b>	<b>0.75</b>	<b>3.48</b>	<b>1.78</b>	<b>8.10</b>
<b>2</b>	Commissioning strategy (Supported Living)		0.70	<b>0.70</b>					0.7
<b>1</b>	Prevention work (Older People)		0.50	<b>0.50</b>					0.5
	New Commissioning arrangements (strategic supplier review)		1.00	<b>1.00</b>					1.0
	New Commissioning arrangements (strategic supplier re - commissioning)		1.00	<b>1.00</b>					1.0
	Strategic shift in types of placement		5.00	<b>5.00</b>					5.0
	<b>Sub Total PVR actions supporting existing MTFP efficiencies</b>	<b>0.00</b>	<b>8.20</b>	<b>8.20</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>8.20</b>
	<b>Total efficiencies</b>	<b>8.10</b>	<b>8.20</b>	<b>16.30</b>	<b>2.10</b>	<b>0.75</b>	<b>3.48</b>	<b>1.78</b>	<b>16.30</b>
	<b>Cost of Implementation - revenue Delivery Team</b>	<b>1.11</b>							

## Improving Performance

111. The first Adult Social Care Outcomes Framework (ASCOF), covering the year 2011/12 was launched in March 2011. The ASCOF is not a national performance management tool and as such there will be no national targets set against any of the measures.
112. There are however two learning disability measures that are reported on an annual basis through the ASC CAR (Adult Social Care Combined Annual Return):
- 112.1 Proportion of adults with learning disabilities in paid employment
  - 112.2 Proportion of adults with learning disabilities who live in their own home or with their family
113. Both measures are collected through the AIS system and are reliant on the practitioner inputting this data. The information should be updated at annual review. There are no local targets for these measures and they are achieved by practitioners working with individuals to help them live independently.
114. It is hoped that the PVR recommendation to undertake a targeted programme of re-assessment and review of people with learning disabilities will impact positively on both recording, data quality and performance levels of both measures.

## Implementing the recommendations from the Review

115. The PVR team is recommending a one-off investment of £1.1m in order to generate recurring savings building to £8.1m.
116. This investment will fund dedicated additional social care practitioners to work with individuals and their family/carers to take forward the personalisation agenda. It is recommended that this process is project managed and overseen by the PLD Commissioning Team.
117. Dedicated social care practitioners will conduct individual assessment, review and support planning enabling identification of accommodation and support needs, specifically undertaking:
- 117.1 A targeted programme of re-assessment and review of people with learning disabilities over the next three years (this to include multi-agency assessment of people having complex needs and expensive packages, as well as Continuing Healthcare)
  - 117.2 The transfer of skills to develop Surrey's own skills and capacity in the long-term to plan support effectively, creatively and cost-effectively, working together with individuals and their family/carers
118. Establishing this additional team is crucial as a large proportion of the PVR savings and LD-related efficiencies in the MTFP are dependent on

the work of this dedicated team. It is necessary that individual assessments are comprehensive and consider current and future options for other services including day services, respite and transport requirements. The timescale for this work is three years.

119. The PVR team has built on existing partnerships. Linked to the specific recommendation to create additional capacity is the need to work jointly with Health to assess the needs of people who may have specific needs such as challenging behaviour, autism and profound and multiple LD.
120. Implementation will be managed through ASC Implementation Programme and progress will be reported monthly to ALT, quarterly to Members Reference Group and the PVR Steering Board.
121. In addition, there will be regular feedback to various groups and forums including the Surrey LD Partnership Board, the Surrey Carers Association and the Local Area Forums. Furthermore, regular updates will be published on the LD Partnership Board website.

<b>Conclusions:</b>
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### **Financial and value for money implications**

122. The PVR will deliver efficiencies projected over the course of the medium term financial plan (MTFP). The recommendations under the different work streams are expected to deliver savings generating a total of £8.1m by 2014/15. In addition the PVR will contribute savings as part of the Medium Term Financial Plan (see MTFP 2011-15 page 56).

### **Equalities Implications**

123. An Equalities Impact Assessment (EIA) has been completed for the PVR overall and individual EIAs have been completed for each of the recommendations.
124. The EIA identified that the PLD PVR could have a negative impact on minority or excluded groups and a full EIA was completed. The EIA made the following recommendations:
  - 124.1 Identify which recommendations will require an EIA.
  - 124.2 For additional EIAs ensure that accessibility is monitored.
  - 124.3 Be aware of any relevant legislation that may impact on the recommendations.
  - 124.4 When recommendations resulting from the Public Value Review for people with learning disabilities are implemented in a way that established processes are followed to ensure no negative impact on minority groups.
125. The EIA has been discussed by stakeholders, including individuals using services, parent/carers, and partner organisations. The key areas

identified will contribute to an action plan to be presented to the Directorate Equalities Group in Adult Social Care, which will monitor the action plan as part of the PVR implementation.

**Risk Management Implications**

126. The key risks identified during the course of this PVR are summarised below:

<b>Risk</b>	<b>Mitigating action(s)</b>	<b>Risk level</b>
Destabilise the provider market	Relationship Management with key providers  Regular engagement and feedback from Surrey Care Association  Ongoing review of key services, active discussion with providers about service development	High
Government policy change – transport – DWP changes	Early notification and planned action, phased implementation	Medium
Lack of social work capacity	Programme and project management, clearly allocating resources to meet work requirements, realistic workplan	Medium
Lack of investment by providers in new service developments	Wide provider base, 'recycling' existing capital assets to develop new services	Low
Local opposition to changes - history of “failed starts” - in-house resistance to change – “why haven’t we done this before”?	Commitments need to be supported by action, evidence of recent completed projects despite lengthy delays and opposition	Low
Financial pressure - formula funding share from 13/14 - the economic climate impacting on all sectors	Lobbying from Councillors to central government	Medium
Health - Strength of partnership working - health and social care bill and changes to	Ongoing engagement with NHS, some NHS colleagues already moved to SCC to make joint working easier, changes to NHS require new	Medium



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commissioning infrastructure	ways of working which the County Council is well placed to assist with	
Safeguarding and quality assurance - backdrop of Winterbourne View	Developing QA team, relationship management approach and regular contact with key providers	High
Lack of understanding by ALL stakeholders	Clear communication strategy and clarity about intended outcomes before starting projects; information in an accessible format  Mental Capacity Act Best Interest process, Court of Protection and County Council processes allow for individuals without capacity to be supported	Medium
Project variables - The timescale - The “unknown” i.e. assessed needs of individuals escalate/de-escalate - The creation of alternatives	Realistic project planning and resource allocation	Medium
Shortage of affordable accommodation options	Relationship Management with key providers  Regular engagement and feedback from housing authority partners  Ongoing review of vacancies and stock	Medium
Ordinary residence	Ongoing monitoring of inbound and outbound ordinary residence transfers of funding to ensure that net position remains the same	High

127. The PVR risk register will continue to be monitored as part of the implementation plan.

**Implications for the Council’s Priorities or Community Strategy**

128. This PVR has played an important role towards identifying actions that contribute to the Surrey Strategic Partnership Plan’s priorities, namely to

improve learning, health and employment outcomes for children and young people, particularly for the vulnerable and disadvantaged.

### **Climate change/carbon emissions implications**

129. The County Council attaches great importance to being environmentally aware and wishes to show leadership in cutting carbon emissions and tackling climate change.
130. This PVR makes recommendations that will deliver a wider range of local services for local people. In particular it seeks to reduce dependency on high carbon output transport and lead a strategic shift toward a needs-led, more efficient use of vehicles to support individuals and groups, and greater use of public transport.

### **Legal implications/legislative requirements**

131. There is a risk that renegotiating existing contractual arrangements may lead to dispute. It is acknowledged that as we make changes there will be an initial challenge (from providers reviewing contract terms, from family/carers resisting change, and staff considering the implications of proposed changes on their employment terms (TUPE or not TUPE). However, the shift overall from contractual relationships on a larger scale to Individual Placement Agreements and person centred services, should in the medium term result in fewer challenges. Learning from other projects and pilot services for the PVR has demonstrated greater satisfaction among individuals, their families and providers.

### **Corporate Parenting/Looked After Children implications**

132. There are a small number of young people coming through Transition who are Looked After. For this group Surrey County Council have corporate parenting responsibility, including the development of a Pathway (Transition) plan at 16 years old. These young people are mostly placed in Residential Schools or with Foster Carers both in Surrey and out of County. They are generally young people with very high support needs, and are likely to require Adult Social Care support for the rest of their lives. Most of these young people are held within the Children with Disabilities Teams. There is also a small cohort of young people who are vulnerable and Looked After but need a greater level of support than that provided by the Leaving Care legislation.
133. A number of measures have been put in place to ensure young people with learning disabilities who have been Looked After are identified early, their needs jointly assessed and services and support are developed in a person centred way.
134. Named Link workers from the Transition Team meet regularly with the Children with Disabilities Teams and all of the 4 Looked After Children Teams. This is to ensure young people coming through Transition who are likely to be eligible for Adult Social Care are considered in a timely way. This includes Identification and planning of local community support and appropriate access to Education, Training, Employment,

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Financial advice, and Housing and Leisure opportunities. These detailed arrangements are recorded in the Support Plan and the Pathway Plan that dovetail.

135. This planning is especially important for young people who may not have any or little family involvement and could include consideration of Advocacy support for young people if required.
136. Regular meetings with the Child Care Support Team (Transition Development Manager and Transition Team Manager) take place to forward plan for Looked After Young People who's needs require a complex placement which are often provided by the private and voluntary agencies or residential school sector.
137. Pathways are currently being considered for young people who require a greater level of support than the Leaving Care legislation. This is a joint piece of work between Children's Service and Adult Social Care and is being taken forward through the Transition Governance Group, chaired by the Assistant Director of Children, Schools and Families.
138. This group of young people will be identified prior to 16 and will receive support from a Leaving Care Service Personal Advisor as well as being allocated to the appropriate Adult Social Care team.

### Section 151 Officer commentary

139. Corporate Finance officers have been closely involved in the PVR and its linkage to the Medium Term Financial Plan, and confirm that all material, financial and business issues and risks have been considered and addressed.

### Recommendations:

140. That Select Committee endorses the recommendations set out in this report and agree that implementation of the PVR action plan should start immediately after Cabinet on 27 March 2012.

### Next steps:

The proposed recommendations will become the new Joint Strategy for People with Learning Disabilities 2012-2015

The proposed recommendations will form part of the Adult Social Care Implementation Programme

Delivery of recommendations will be tracked by the ASC Implementation Board and progress will be reported monthly to the Adults Leadership Team

Progress will be reported quarterly to the PVR Steering Board and the Member Reference Group and the Learning Disability Partnership Board

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**Sources/background papers:**

- [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_093377](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_093377)
- [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4009153](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4009153)
- Leader's report to Cabinet, Cabinet 29 June 2009
- Leading the Way: changing the way we do business, Cabinet 14 July 2009
- Public Value Reviews methodology, July 2009
- Health Inequalities & people with learning disabilities in the UK: 2011, Implications and Actions for Commissioners, Sue Turner, Carol Robinson

**Consultees:**

Internal:

PVR Steering Board

Cabinet Member

Member Reference Group: Cllrs Sally Marks, Fiona White, Margaret Hicks,  
Mel Few, Tony Samuels

Adult Social Care Select Committee

Health Overview and Scrutiny Committee

Sarah Mitchell, Strategic Director for Adult Social Care and Health

Corporate Leadership Team

Adults Leadership Team

Adult Social Care Staff

Unison

Procurement

Children, Schools and Families Services

External:

LD Partnership Board

Valuing People Now Implementation Board, local Valuing People Groups

Autism Partnership Board

NHS Surrey

Surrey and Borders Partnership NHS Foundation Trust

Users and carers

District and Boroughs

Surrey Care Association

Individual providers: independent and non-for-profit

Partner organisations from the voluntary sector