



**Health and Adult Social Care Overview and Scrutiny Panel
Task and Finish Group
Scrutiny Review – Report
October 2010**

MODERNISATION OF ADULT SOCIAL CARE

Plymouth City Council

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INTRODUCTION

The Health and Adult Social Care Overview and Scrutiny Panel scrutinises matters relating to health and public health and hears the views of local residents, with a view to improving health services, reducing health inequalities and improving the health of local residents. The panel also scrutinises the impact of the Council's own services and of key partnerships on the health of its population.

Three reports were presented to the Cabinet in August 2010 requesting permission to consult on proposals regarding the modernisation of Adult Social Care services.

Cabinet made recommendations to the Health and Adult Social Care Overview and Scrutiny Panel to consider the proposals at the beginning of the consultation and review them in light of outcomes at the end of the consultation process prior to them being presented to Cabinet in November. The Health and Adult Social Care Overview and Scrutiny panel reviewed the proposals and requested permission from the Overview and Scrutiny Management Board to set up a task and finish group to review the consultation process. This report summarises the scrutiny of the proposals.

The Council is required to take account of the recommendations contained within this report when making its decisions with regard to the modernisation of Adult Social Care Services within the City.

The findings and recommendations of this report represent the majority view of the Task and Finish group.

We would like to extend our thanks to the members of the Health and Adult Social Care Overview and Scrutiny Panel for their commitment in conducting this review. We would also like to thank the officers who took part in the review process.



Councillor Steven Ricketts, Chair



Councillor Mark Coker, Vice Chair

SUMMARY OF PROPOSALS

Modernisation of short break services for people with a learning disability

A short break is defined as “a session or more of care and support that enables a disabled or vulnerable individual to spend time away from the person(s) who provide them with regular and substantial care. This includes the provision of short breaks of day, evening and weekend activities as well as overnight stays. Such breaks can be provided in the individuals’ own home or in another setting.” (Valuing People Now)

Plymouth City Council currently provides residential facilities for carers of adults with learning disabilities in the following facilities:

Residential unit	Beds available	Occupancy 2008/09	No of people registered
Welby	10	83%	34
Colwill	10	81%	52

Welby has been providing a planned short break service for people with learning disabilities for over 20 years. It offers a city wide service, has 10 beds and the occupancy figures show that the demand is mainly for weekend breaks for carers. However, in recent years Welby has increasingly responded to requests to provide accommodation at short notice as a result of carers’ breakdown or breakdown of other long-term care arrangements, especially for people with high support needs and challenging behaviour.

Colwill Lodge has been in operation since 1990 and is a purpose-built facility providing a city wide service for people with a profound learning disability and complex physical and health needs that require high levels of personal care.

The proposals for short break services link directly into the Council’s corporate objectives around supporting users and carers and promoting independence (Corporate Improvement Priority (CIP) 3 Helping People to Live Independently and CIP 14 Providing Better Value for Money. The proposals around Welby Community Unit suggested that budget savings could be realised whilst ensuring no decrease in the amount of short breaks available. It was estimated that the full year financial saving will be approximately £400k per annum.

The way short breaks are offered to users and carers in the city require changes, particularly in light of a number of national strategies and policies including Putting People First and Valuing People Now. Both of these strategies promote person-centred planning and self-directed support. They emphasised the need to support people’s independence and offer a wider range of innovative and alternative support than currently exists so that users and carers can exercise more choice and control over how they are supported. Proposals for consultation included –

- The decommissioning of the Welby Community Unit.
- Increased capacity at the Colwill Lodge facility.

- Further development of personal budgets and the re-provision of residential respite and short breaks.

Fairer contributions policy, charging within a personalised system

Original Fairer Charging Guidance (2003) was designed for an era of traditional local authority social care provision where people received services arranged by a local authority. Plymouth City Council responded to this guidance and last reviewed its charging policy in 2007. The charging approach that has evolved includes a mixture of standard flat rate charges that vary according to the type of service and the provider.

Under the current charging scheme, income from charging contributes approximately 8% of the funding available for non-residential care services in Plymouth. Community service users contributions to care costs in 2009/10 were £3,300,000. About half of all service users do not contribute any direct funding to their care costs due to their low income and less than 1% contribute the maximum amount currently capped at £270 per week.

The fairer charging policy was based in new national strategies for both Carers and Putting People First. These strategies emphasised the need to significantly increase opportunities for people to have greater choice and control by introducing individual budgets and expanding direct payments. The proposals linked directly to the Council's corporate objectives outlined in CIP 3, Helping People to Live Independently and CIP 14, Providing Better Value for Money.

The Council is required to make changes to the charging policy under the Putting People First agenda, there were however some discretionary elements which form part of the consultation process, these were –

- The removal of disability related benefits from assessable income.
- Whether maximum contribution should be set at 100% of the personal budget.
- What transitional support ought to be put in place to help those people whose contributions have changed.
- How best to inform people of the change and how it will affect service users.

Modernisation of older peoples' services

Plymouth City Council currently provides residential facilities for Older People in the following facilities:

Residential Home	Bed availability	Bed occupancy
Frank Cowl House	Total 22 Current Occupancy 8 Long stay 12 Short stay	92.75%
Stirling House	Total 28 Current Occupancy 18 Long stay 6 Short stay	97.5%
Lakeside (specialist Dementia care facility)	29 long stay 1 Short stay	94.96%

National strategies have emphasised the need to maximise independence, offer a wide range of alternatives to support older people and carers whilst promoting choice and control. In November 2009 Cabinet agreed to the re-provision of alternative respite services within the city, and changing the registration of Frank Cowl House and Stirling Residential Units to short-stay facilities.

Short Stay provision is usually arranged as interim accommodation whilst longer term plans are established to meet the individual's housing needs e.g. where certain adaptations need to be carried out to the person's own home prior to their return.

Over the last 4 years key partnerships have been developed with independent sector care providers and PCC Housing Strategy Team to deliver a range of options for people in relation to short stay provision and there is a good supply of this type of accommodation within the city.

This change of registration has been implemented through changing the use of a long-stay bed to short-stay when a vacancy has arisen. The proposals presented to Cabinet in July 2010 confirmed the Council's continued direction of travel and would include-

- Decommissioning Frank Cowl House
- Re-provisioning the current long term residential care in a new extra care scheme in Devonport.

SCRUTINY APPROACH

Task and Finish Group Objectives

The Group was asked to –

- Review and form an initial view of proposals at the beginning of the consultation period.
- Consider results of the 12 week consultation period.
- Review position regarding proposals and make recommendations to the Health and Adult Social Care Overview and Scrutiny Panel in light of consultation results.

Membership

The Task and Finish group had a cross-party membership comprising the following Councillors –

- Councillor Ricketts (Chair)
- Councillor Coker (Vice Chair)
- Councillor Delbridge
- Councillor Viney
- Councillor Bowie

For the purpose of the review, the joint task and finish group was supported by –

- Giles Perritt, Head of Policy, Performance and Partnerships
- Lisa Woodman, Community Services Business Support Officer
- Ross Jago, Democratic Support Officer

Methodology

The task and finish group convened on two occasions to consider evidence and hear from witnesses on the 24 August 2010 and 4 October 2010.

Members of the Task and Finish group aimed to review and make recommendations on the proposals in relation to -

- the modernisation of older peoples' services against the Council's short-term agenda and long-term vision for the future care and support of older people;
- the changes proposed to Adult Social Care charging policy and its impact on service users;
- the proposals around changing the future model of short breaks for people with a learning disability;
- the consultation process for the three proposed service changes to ensure that all stakeholders have had sufficient opportunity to respond to consultation activity and their views are taken into account;

- the financial and resource implications (including staffing and land) with regard to the proposals;
- the impact on the overall health objectives of the city;
- how the proposals impact on the vision for Plymouth to become "one of Europe's finest, most vibrant waterfront cities, where an outstanding quality of life is enjoyed by everyone."

The Work Programme Request (PID) is attached as Appendix 1.

Members of the group considered background papers on the "Putting People First" agenda, reports of shared planning events a DVD on the Putting People First agenda and the results of the consultation process.

The group have carried out informative visits to extra care schemes, Frank Cowl House and the Welby Community Unit to meet with staff and service users. Information was captured on how residents have found the consultation process and how they viewed the proposals.

Background information

The task and finish group heard representations from –

- Julia Penfound, Head of Modernisation Adult Social Care
- Debbie Butcher, Commissioning Manager, Adult Social Care
- Jo Yelland, Project Lead – Putting People First.

Background material made available to the group included:

- Cabinet Papers of the 13 July 2010
- Department of Health Putting People First: a shared vision and commitment to the transformation of Adult Social Care (2007)
- Department of Health Fairer Contributions Guidance: Calculating an Individual's Contribution to their personal budget (2009)
- Department of Health fairer charging policies for home care and other non-residential social services: guidance for Councils with Social Services responsibilities (2003)
- Putting People First Strategy
- Valuing People Now Strategy
- Briefing papers on consultation results
- Notes of the Task and Group meetings

KEY ISSUES ARISING FROM EVIDENCE

Short Breaks for people with learning disabilities.

- The consultation had shown that users and families wanted Welby to remain open, however families wanted to discuss alternatives for short breaks and respite care. Families and carers wanted reassurance that short breaks would continue and were keen to discover what could be available if Welby did close.
- The facilities at Welby are outdated and are not fully DDA compliant. People with complex physical disability needs cannot be supported at the unit
- There was further consultation activity to take place in order for all stakeholders to respond, a webpage had been set up and the questionnaire was available on the site.
- The proposals for alternative respite arrangements were positively received and many services users hoped to explore these alternatives further once decisions had been made.
- Respite was sometimes cancelled due to emergencies, users were becoming more interested in personalised budgets to take more control of the services they required and along with increased flexibility avoid last minute cancellations.
- The implications of an unexpected increased demand in the need for short respite breaks would be dealt with by commissioning from the private, independent sector. There is a private market providing excellent services more efficiently than the Local Authority.
- Local Authority overheads were much higher than in the private sector which in the main was due to the pay and conditions of the public sector.
- The cost of the Welby is currently in the region of £800,000 per annum. It was anticipated that £400,000 per annum could be saved by closing Welby Community Unit and providing alternative respite options and increased capacity at Colwill.

Recommendations

<i>To the Overview and Scrutiny Management Board –</i>	
R.1	The Task and Finish group recommend to Cabinet that the proposals regarding the decommissioning of the Welby Community Unit alongside the increased capacity at the Colwill Lodge facility and further development of personal budgets and the re-provision of residential respite be approved.
R.2	The group felt that the Welby building was not fit for purpose and the costs associated with its maintenance were not value for money. It was accepted by the panel that the forward direction with relation to personalisation gave control to service users and their families and noted the enthusiasm for alternative respite arrangements as expressed through the extensive consultation process.

Fairer contributions policy, charging within a personalised system

- Older people struggled to identify their spending on disability related expenses
- Assessment for disability related expenses took a great deal of officer time and there were further costs to take into account in the assessment process.
- The removal of the Disability related expenses would make the system simpler, easier to explain and will allow people to work out their contributions by themselves.
- The majority of consultees believed that disability related benefits/expenses should be removed from the financial assessment process.
- Local Authorities across the country are removing contribution caps, currently 1800 service users in Plymouth pay a charge for their services of that number 355 pay the maximum contribution of £270.
- The cap has to be related to the cost of nursing and residential provision, this is required to be under constant review and costs of are likely to increase.
- The majority of Councillors on the Task and Finish group felt that the removal of the cap would penalise those who had made provision for there retirement.
- The majority of responders (37%) agreed that where people could afford to pay a contribution that this should be against 100% of the personal budget. However this was is not the case for people with a Learning Disability (or their carers) with a majority of responders (61%) wanting the council to subsidise services for them irrespective of ability to pay.
- Through the consultation service users have expressed a desire to have simple information on eligibility and charging.

Recommendations

<i>To the Overview and Scrutiny Management Board -</i>	
R.3	The Task and Finish group recommend to Cabinet that Disability Related Benefits are removed from assessable income and therefore the Disability Related Expenses are removed from the financial assessment process to reduce bureaucracy and simplify the process.
R.4	The maximum contribution should not be set at 100% of the personal budget and a cap on contributions should remain.
R.5	A transitional period of 12 months and support from social care officers should be implemented to help people whose contributions change.
R.6	Information provided to service users should focus on eligibility and charging and should be in simple terms and plain English. One to one advice must also be available for those service users whose contributions are likely to change.
R.7	The consultation process had been extensive and properly carried out.

Modernisation of older peoples' services

- The service received 8 completed questionnaires out of a possible 80. The returned forms indicate that people who have stayed at Frank Cowl House are generally happy with the service they received. It was thought that the low return rate was due to short stay residents, who, unlikely to return to Frank Cowl House decided not to take part in the consultation.
- Three events at a local Devonport venue were arranged on 10th, 13th and 18th August. At the first event two residents were represented by their families. One family carer felt that the service at Frank Cowl House was not of a good standard and had mixed views about the time their family member stayed at the unit. The second resident was represented by family who were very vocal about wanting their relative remaining at Frank Cowl House but acknowledged that Extra Care Housing would be a good alternative to residential care.
- The Building was outdated and currently does not meet inspection standards there was a lack of en suite bathroom facilities and a lack of wheelchair access to the current toilet provision. The quality of care at Frank Cowl House was excellent despite the poor quality of the facilities.
- There was concern from some members of the group that the consultation process had “bombarded” some of the residents within Frank Cowl House and that they struggled with the concept of extra care and what it could mean for them.
- Consultation was continuing and the Adult Social Care team were planning a further engagement opportunities for families in the consultation process. Consultation had been extensive but there had been little feedback from families.
- The de-commissioning of Paternoster House was successful and residents decided to take advantage of extra care.
- There would be financial implications if Frank Cowl House remained open which translated into approximately £480,000 per annum efficiency savings not being realised.
- The extra care facility would provide forty apartments, a restaurant and 24 hour domiciliary care staff.
- Apartments have been identified for Frank Cowl House residents should they wish to move, no permanent resident of Frank Cowl House will be forced to move.

Recommendations

<i>To the Overview and Scrutiny Management Board-</i>	
R.8	The Task and Finish group recommend to Cabinet that the future direction for residential care for older people is extra care facilities.
R.9	Facilities within Frank Cowl are outdated and the costs of keeping the building open are unsustainable and not value for money.

R.10	It was considered that there had been sufficient consultation with users and their families but that Adult Social Care should provide them with a further opportunity to engage before the end of the consultation process.
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SUMMARY OF RECOMMENDATIONS

The following recommendations are commended to the Overview and Scrutiny Management Board for approval.

R.1	<p>The Task and Finish group recommend to Cabinet that:</p> <ol style="list-style-type: none"> 1. The proposals regarding the decommissioning of the Welby Community Unit alongside the increased capacity at the Colwill Lodge facility are approved 2. Further development of personal budgets and the re-provision of residential respite are approved. <p><i>(Subject to further consultation received before the end of the consultation period)</i></p>
R.2	<p>The group felt that the Welby building was not fit for purpose and the costs associated with its maintenance were not value for money. It was accepted by the panel that the forward direction with relation to personalisation gave control to service users and their families and noted the enthusiasm for alternative respite arrangements as expressed through the extensive consultation process.</p>
R.3	<p>The Task and Finish group recommend to Cabinet that Disability Related Benefits are removed from assessable income and therefore the Disability Related Expenses are removed from the financial assessment process to reduce bureaucracy and simplify the process.</p>
R.4	<p>The maximum contribution should not be set at 100% of the personal budget and a cap on contributions should remain.</p>
R.5	<p>A transitional period of 12 months and support from social care officers should be implemented to help people whose contributions change.</p>
R.6	<p>Information provided to service users should focus on eligibility and charging and should be in simple terms and plain English. One to one advice must also be available for those service users whose contributions are likely to change.</p>
R.7	<p>The consultation process had been extensive and properly carried out.</p>
R.8	<p>The Task and Finish group recommend to Cabinet that the future direction for residential care for older people is extra care facilities.</p>
R.9	<p>Facilities within Frank Cowl are outdated and the costs of keeping the building open are unsustainable and not value for money.</p>
R.10	<p>It was considered that there had been sufficient consultation with users and their families but that Adult Social Care should provide them with a further opportunity to engage before the end of the consultation process.</p>

Appendix 1



Request for Scrutiny Work Programme Item

1	Title of Work Programme Item	Modernisation of Adult Social Care
2	Responsible Director (s)	Director for Community Services, Carole Burgoyne
3	Responsible Officer Tel No.	Pam Marsden Assistant Director for Community Services (Adult Social Care) 307344
4	Aim	<p>With regard to proposed changes to services for older people provided from Frank Cowl House, Stirling House and Lakeside; proposed services changes involving Welby and Colwil Lodge and proposed changes to charges for non-residential adult social care services the review panel will:-</p> <ul style="list-style-type: none"> • Review and form an initial view of proposals at the beginning of the consultation period. • Consider results of the 12 week consultation period. • Review position regarding proposals and make recommendations to the Health and Adult Social Care Overview and Scrutiny Panel in light of consultation results.

5	Objectives	<p>To review the proposals in relation to the modernisation of older people’s services against the Council’s short-term agenda and long-term vision for the future care and support of older people.</p> <p>To examine the changes proposed to Adult Social Care Charging policy and its impact on service users.</p> <p>To review proposals around changing the future model of short breaks for people with a learning disability.</p> <p>To review the consultation process for the three proposed service changes to ensure that all stakeholders have had sufficient opportunity to respond to consultation activity and their views are taken into account.</p> <p>To review financial and resource implications (including staffing and land) with regard to the proposals.</p> <p>To review the impact on the overall health objectives of the city.</p> <p>To review how the proposals impact on the vision for Plymouth to become "one of Europe’s finest, most vibrant waterfront cities, where an outstanding quality of life is enjoyed by everyone."</p>
	Benefits	<p>The review will raise awareness across the city as to whether the proposals will deliver fair and equitable outcomes for services for service users and staff.</p>
	Beneficiaries	<p>Adult social care service users and Carers. Staff Plymouth City Council and its Partners Local Community</p>
6	Criteria for Choosing Topics	<p>Area of potential risk</p> <p>Issue of service users interest and public concern, service delivery.</p> <p>Level of impact, impact for specific communities (vulnerable)</p>

7	Scope	<p>Services identified as provided at Frank Cowl House, Stirling House, Lakeside, Welby and Colwill as outlined in Cabinet reports of the 13 July 2010.</p> <p>The discretionary elements of the fairer charging policy as outlined in the Cabinet report of the 13 July 2010.</p>
	Exclusions	<p>Other Adult Social Care services provided from other facilities in Plymouth.</p> <p>Other charging policies not contained within the cabinet report of the 13 July 2010 and non discretionary elements of the fairer charging policy.</p>
8	Programme Dates	August – October

	Timescales	Milestones	Target Date for Achievement	Responsible Officer
		Initial meeting of review panel	August	Ross Jago
		Visit to Frank Cowl House / New extra care facility	August/September	Ross Jago
		Visit to Welby and Colwill	August/September	Ross Jago
		4 session review panel over 2 weeks	August/September	Ross Jago
		Session 1 Proposals over Frank Cowl House		
		Session 2 Proposals Regarding Welby		
		Session 3 Proposals regarding Fairer Charging Policy		
		Session 4 Recommendations		
		Final report to Health and Adult Social Care Overview and Scrutiny Panel	29 October 2010	

<p>9</p>	<p>Links to other projects or initiatives / plans</p>	<p>All three proposals link to the Council’s corporate objectives outlined in Corporate Improvement Priority 3 (helping people to live independently) and Corporate Improvement Priority 14 (Providing better value for money)</p> <p>Cabinet paper (ref: C 61 05/06 29/11/05) “Residential Care: Proposals to modernise older peoples’ services 2005-2015.”</p> <p>Department of Health Putting People First: a shared vision and commitment to the transformation of Adult Social Care (2007)</p> <p>Department of Health Fairer Contributions Guidance: Calculating an Individual’s Contribution to their personal budget (2009)</p> <p>Department of Health fairer charging policies for home care and other non-residential social services: guidance for Councils with Social Services responsibilities (2003)</p> <p>Putting People First Strategy</p> <p>Valuing People Now</p>
<p>10</p>	<p>Relevant Overview and Scrutiny Panel</p>	<p>Health and Adult Social Care</p>
<p>11</p>	<p>Lead Officer for Panel</p>	<p>Giles Perritt</p>
<p>12</p>	<p>Reporting arrangements</p>	<p>Health OSP – 29 July 2010 Overview and Scrutiny Management Board – Chairman’s Approval Cabinet – 16th November 2010</p>
<p>13</p>	<p>Resources</p>	<p>Staff time Some costs associated with visits from the panel’s budget.</p>
<p>14</p>	<p>Budget implications</p>	<p>It is anticipated funding will be identified within existing budgets.</p>
<p>15</p>	<p>Risk analysis</p>	<p>Not proceeding with this review would mean that proposals would not receive adequate scrutiny before being considered at Cabinet.</p>
<p>16</p>	<p>Project Plan / Actions</p>	<p>Project plan to be prepared by panel</p>