

Budget Proposals 2012/13: Major Decision: Combined Impact Assessment: Initial Review (Part 1)

Business Unit	Adult Social Care Services	Proposal:	Reduce Expenditure on Clients with a Learning Disability
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The council and its partners are facing a significant challenge in the savings it needs to make over the next couple of years. This Impact Assessment Initial Review has been developed as a tool to enable business units to:

- Fully consider the impact of proposed changes on the community
- Be the basis for engagement with those potentially affected
- Ensure clarity on the extent of saving that can be made during 2011/12 commencing for 1 April
- Justify the Council's decision making process if challenged

This initial review will allow Councillors and members of the public to understand proposed changes so that they are best placed to provide their feedback.

Following this initial review and any consultation / engagement activity you have undertaken you must complete a Part 2 Review which is the second part to this Combined Impact Assessment. Together the whole impact assessment will evidence that you have fully considered the impact of your proposed changes and carried out appropriate consultation on those changes with the key stakeholders.

Name:	Trudy Corsellis	Position:	AD – Planning & Performance
Business Unit:	Operations Directorate - TCT	Department:	Business Planning & Performance
Date	2nd September '11		

Summary from Overall Proposal (Updated as required)

Proposals – Outline	Savings 2012/13		Implementation Cost Include brief outline + year incurred	Delivery In place 01/04/12 If earlier or later state date	Risks / impact of proposals <ul style="list-style-type: none"> Potential risks Impact on community Knock on impact to other agencies/partners/departments 	Type of decision*		
	Income £ 000's	Budget reduction £ 000's				Internal	Minor	Major
<ul style="list-style-type: none"> Reduce services for LD clients with multiple services Reduce LD high cost packages of care Reduce packages of care with clients at risk of offending Rationalise in-house services (or reduce use of independent sector usage) Manage use of respite care 	0	110 250	Implementation costs mainly covered by in-house staffing costs. Some additional external facilitation support costs may be incurred as this is a contentious area.	10/11 09/11 04/12 04/12	<ul style="list-style-type: none"> Due to level of contention expected these schemes are being classed as major as they will need careful management and implementation Due to risk involved and potential for cost shunting, no further action is being taken at this point in time for cost savings associated with clients at risk of offending – but TCT is working closely with partner agencies to see if costs can be reduced Services will be withdrawn from clients which will provide equity in service provision with other groups To release funding, the excess capacity generated will necessitate the closure of at least one in-house unit 			√

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	Income £ 000's	Budget reduction £ 000's				Internal	Minor	Major
Savings/Costs	0	360						

Overall Saving 2011/12	£250k which is already incorporated into the above figure
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Stage 1: Impact Assessment

No	Question	Details
1.	Additional details of proposed change – If required	Ideally the savings generated for LD clients should be in the region of £1m and so further work is required to understand how the additional funding can be realised. In addition, extra costs arising from changes to Ordinary Residency Rules are being experienced. Care Homes de-registering and moving to a “supported living” status compounds this problem.
2.	Who will this affect?	The majority of LD clients – especially as many have multiple services.
3.	How will it affect them?	Packages of care will reduce in line other client groups. E.g. residential clients will no longer be able to receive day services at a different venue – their care home will be expected to provide the variety of day care required. Calculation of care package costs will be subject to the Resource Allocation System (RAS) and a fee banding structure which focus clearly on personal outcomes. Costs shall also be subject to the Choice, Cost and Risk Policy which could mean a greater number of clients being placed in residential care as costs to care for them within their own homes are deemed prohibitive and exceed the 20% threshold. (Please note this threshold is likely to reduce to 10% or lower in future years and will be subject to OSC consultation. It is deemed a substantial variation.)
4.	Which vulnerable groups, if any, will be specifically affected?	LD clients and their families.

No	Question	Details
5.	Will the proposed change make people vulnerable who might not be considered as such now?	Yes – reduced level of care provided to current clients. Preventative services unlikely to given to new clients (and existing clients) with lower level needs that do not meet Fair Access to Care substantial/critical criteria.
6.	What, if any, alternative provision available to those affected?	Moving away from traditional care and focussing on each individual's outcomes should hopefully mitigate the costs of any unnecessary care being provided e.g. how we help them achieve the 3 most important things for them.
7.	How many people do you think will be affected?	The majority of the 450 LD clients.
8.	Knock on impact to any other agency / voluntary sector group?	Reduction in the number of staff employed by dom care agencies. Closure of at least one in-house day service to rationalise resources and maximise occupancy levels. (Other option is to maintain the number of in-house services and reduce reliance on independent sector. This potentially restricts choice and is not the preferred option.)
9.	Any implementation / set up costs?	May be required to provide external facilitation, i.e. similar to that offered to Ocombe residents and their families.

Stage 2: Engagement

No	Question	Details
10.	Who do you need to consult / engage with?	Providers, clients, families and the public in general so they too understand the size of the challenges ahead.
11.	Are there any specific groups / agencies that will need to be consulted?	SPOT and Mencap – these two organisations are currently organising events to raise awareness in an attempt to limit service reductions for this client group.
12.	Initial proposals for consultation / engagement?	Awareness raising on: <ul style="list-style-type: none"> • Size of challenge and managing expectations • Support planning and outcome focused care, i.e. the 3 most important things to achieve for the client • Skill mix and differing roles of frontline teams and care staff – especially if in-house service closures expected • Housing requirements for this client group (& physical disability clients) as many younger clients no longer wish to live with their parents, preferring greater independence

No	Question	Details																																																		
		Public budget consultation has taken place. Public meetings were held as well as questionnaires sent to a “viewpoint” panel and also to members of the public.																																																		
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		<u>Would you support a proposal to review the delivery of learning disability services through new partnership arrangements? (£360k)</u>																																																		
		<table border="1"> <thead> <tr> <th rowspan="2">Venue</th> <th colspan="2">Yes</th> <th colspan="2">No</th> <th rowspan="2"></th> </tr> <tr> <th>Count</th> <th>%</th> <th>Count</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Westlands</td> <td>5</td> <td>50%</td> <td>5</td> <td>50%</td> <td>10</td> </tr> <tr> <td>T.C.C</td> <td>11</td> <td>55%</td> <td>9</td> <td>45%</td> <td>20</td> </tr> <tr> <td>Paignton</td> <td>13</td> <td>76%</td> <td>4</td> <td>24%</td> <td>17</td> </tr> <tr> <td>Brixham</td> <td>34</td> <td>69%</td> <td>15</td> <td>31%</td> <td>49</td> </tr> <tr> <td>Dunboyne</td> <td>2</td> <td>29%</td> <td>5</td> <td>71%</td> <td>7</td> </tr> <tr> <td>Total</td> <td>65</td> <td>63%</td> <td>38</td> <td>37%</td> <td>103</td> </tr> </tbody> </table>					Venue	Yes		No			Count	%	Count	%	Westlands	5	50%	5	50%	10	T.C.C	11	55%	9	45%	20	Paignton	13	76%	4	24%	17	Brixham	34	69%	15	31%	49	Dunboyne	2	29%	5	71%	7	Total	65	63%	38	37%	103
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		<p>Review support to clients with learning disabilities to make sure that clients do not receive the same care from different services. (Potential saving: £110,000)</p> <table border="1"> <thead> <tr> <th></th> <th>Questionnaires</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>No</td> <td>4</td> <td>15%</td> </tr> <tr> <td>Yes</td> <td>23</td> <td>85%</td> </tr> <tr> <td>Grand Total</td> <td>27</td> <td></td> </tr> </tbody> </table>			Questionnaires	%	No	4	15%	Yes	23	85%	Grand Total	27	
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13.	Consultation already started?	TCT staff are fully aware and the difficulties with closing Occombe has raised the profile of LD clients is general.													
14.	Resources available	Considerable resources required to manage this change process.													

Stage 3 Agreed Next Steps

No	Action	Next Step	Decision
15.	Proceed with consultation / engagement?		
16.	Modify proposals for change.		
17.	Not to proceed with proposed changes?		

Further Information:

Submission by: Helen Toker-Lester

Area of Support covered: Learning Disability

Date of Submission: 21st December 2011.

Who the consultation was with and when consultation happened.	How many people attended?	What feedback was provided?	Where were the results of feedback reported to?	What has been done to mitigate any issues / negative impact?
23 rd March 2011 ARC Meeting- Presentations to providers	Approximately 25 providers of mainly residential care.	Providers acknowledged that there will be an impact of cost savings nationally. They were keen that communication is ongoing with them to enable them to plan business activity appropriately.	To the Learning Disability Partnership board initially. And later to Council.	Reviews regarding duplication of services should be concentrated on a home by home basis so that providers know what the likely impact of reassessment will be on their own business. It would be helpful to publish a list of addresses indicating when reviews will take place.
4 th July 2011 Finance report to SPOT	Approximately 15 people who are members of SPOT and National Mencap representatives also attended.	SPOT and Mencap are very worried about the impact of savings on people who have a learning disability. They fear isolation of individuals and vulnerabilities regarding the way that people may be in a residential care home 24/7. They are worried	The Learning disability Partnership Board received feedback from SPOT.	Consideration should be given as to the impact of people and their vulnerabilities. A report regarding the impact of savings should go to the safeguarding Board, with a recommendation to implement peer quality reviews of residential care. Informal opportunities for

		about whether people will miss their friends and who would identify safeguarding issues, especially as CQC do not monitor services as much anymore.		people to keep in touch with friends needs to be established as part of the contract monitoring of care homes.
8 th September 2011, Presentation and Finance report to LDPB.	28 people attended the Partnership Board on the 8 th September.	A presentation about the budget position. This has been attached to the minutes. After the presentation there was a discussion. Everyone agreed it will be difficult to make savings and make sure people stay safe. Jo Fox from Mencap asked if there could be a presentation about the new RAS at the next meeting. It was agreed that this was a good idea. People requested that the Broader Forum Group be set up.	Reported to the LD programme board.	The Broader Forum Group took place in October and the Terms of reference established for meetings in the New Year. (see below for more details)
July-September 2011 Choice exercise with people attending day care.	This involved 132 people with learning disability who attend TCT day care. People attending Torquay & Hollacombe CRCs took part in choice exercise to obtain a clearer picture of the activities they want to do. With the support of the Assistant Service	The information gathered identified those activities most valued by individuals and looked at the outcomes achieved in each case. These were then prioritised and put into a "Service Prospectus" to show what services the day centres	Reported to the LD programme board, the management team of TCT and the Council. Information collated is also shared with the TCT board.	Information on personal preferences was used to shape the supply of activities as part of the day services reorganisation within the Care Trust.

	<p>Managers, each person was presented with the range of activities on offer, & asked to choose what he or she “would like to do”, “might like to do”, or “did not want to do”.</p> <p>People attending Fairwinds did not take part in this particular exercise, as they do not have the capacity to participate in this way. Using knowledge about their likes/dislikes, & information from staff, parents, & carers, a timetable of activities was recently drawn up, & they now enjoy a wide range of activities.</p>	<p>will provide as a total service rather than three very separate sites where there was some duplication.</p>		
<p>3rd October Mencap savings event. - Presentation given.</p>	<p>This was a large meeting with over 50 attendees made up of people who have a learning disability, family carers, SPOT and Mencap members.</p>	<p>Presentations were given by SPOT and Mencap to set the national picture. TCT presented on savings and key areas to be covered in the coming year. People were informed about the Broader Forum Group and how to contact representatives. Concerns were mainly about carers losing day care, and the isolation of individuals.</p>	<p>Reported to LDPB in November, Council representative also attended this meeting.</p>	<p>The work around avoiding the duplication of services should not impact on carers, the reassessments must take into account carers and their needs and call carers will still be offered a carer assessment.</p>
<p>Meeting with Chief</p>	<p>2 members of local</p>	<p>Local Mencap had</p>	<p>Reported To Council via</p>	<p>It was following this</p>

executive of Torbay Care Trust and Local Mencap representatives.	Mencap attended	prepared a list of questions that were returned with a point by point written response. (Attached)	the LD Programme Board.	meeting that the representatives were invited to be part of the Broader Forum Group.
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Number of clients where needs are re-assessed.

Re assessment of individual services takes place as part of our statutory duty when we review people and their needs. All individuals with a learning disability will be reassessed at least once over the next 12 months. During this process we will be ensuring robust adherence to our policy of Cost choice and Risk, ensuring people are eligible for services if they are new referrals, and also making sure that we apply the Resource allocation system or RAS to all cases. In some cases this will mean a reduction of support where needs have reduced or where alternative more costs effective services can be provided.

Numbers of individuals reviewed in the LD team this year to date is 445.

Future consultation planned – with who and when

Correspondence to be circulated in the New Year includes:-

Easy read version of key points for consultation (for people who have a learning disability and their carers)

Provider letters

Dates to meet providers as follows....

23rd January 2012: Residential Care providers.
24th January 2012: Day Care Providers.
25th January 2012: Supported Living providers.

Broader Forum Group dates

The first date will be the 13th January in the New Year The BFG is a group that will run every month, (2nd Friday in the month to be reviewed after 4 months ; it will be no more than 15 people and should last 2 hours.)

People to attend are representatives from:

- “Vocal” - 2 people.
- Learning Disability Partnership Board- 2 people.
- Older family carers Mencap.-1 person.
- Health watch- 2 people.
- Commissioning 2 people.
- Council -1person.
- Local Mencap – 2 people.