

DECISION-MAKER:	HEALTH OVERVIEW AND SCRUTINY COMMITTEE		
SUBJECT:	BUDGET PROPOSALS – INTEGRATED COMMISSIONING UNIT		
DATE OF DECISION:	27 NOVEMBER 2014		
REPORT OF:	CABINET MEMBER FOR HEALTH AND ADULT SOCIAL CARE		
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STATEMENT OF CONFIDENTIALITY

None

BRIEF SUMMARY

The budget proposal for reviewing Learning Disability Residential Placements is focussed on improving outcomes for people with learning disability by developing bespoke housing solutions within the city. The policy direction and imperative to offer more personalised forms of care continues to be a national driver as set out in the Care Act 2014.

The review of Housing Related Support (Supporting People) and other commissioning contracts is to identify areas where efficiencies can be made whilst minimising impact on residents. The plan for rehabilitation and reablement review is a key priority within the Better Care Southampton Plan and is key to achieving the required outcomes. Some savings are expected to be achieved through greater integration and reduction of duplication. The proposals are still being developed through work with a range of stakeholders and so implications are not yet available.

RECOMMENDATIONS:

- (i) Health Overview and Scrutiny Committee notes the budget proposals

REASONS FOR REPORT RECOMMENDATIONS

1. There is a national requirement, following Winterbourne View Hospital findings, for a review of current placements for people with a learning disability with complex needs, placements made out of area and those at risk of admission. A consequence of moving people to more bespoke accommodation will release savings. In the Priorities Survey 2013 reviewing contracts was amongst the most common residents' suggestions for savings. The rehabilitation and reablement review is a key priority within the Better Care Southampton Plan and is key to achieving the required outcomes.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. The development of the Better Care Southampton plan was undertaken with a wide range of stakeholders to identify the top priorities. Through this a range of transformational approaches were considered and rehabilitation and reablement was prioritised as one of the areas that will achieve significant change
Duplications and inefficiencies exist, such as use of multiple contracts with same providers, mixed use of contracts and grants. There is a need to avoid unnecessary costs and move to lower cost solutions. Contracts have been reviewed to identify those for focus

DETAIL (Including consultation carried out)

3 Learning Disability Residential Placements HASC 2

- 3.1 This is a 2 year project to rehouse 58 people with Learning disability and complex needs, who are currently in high cost residential placements out of the city. The intention is to develop bespoke housing solutions for each individual working with a range of housing associations within the city. This is not a service reduction but a project to move people from residential placements to individual community placements. The Learning Disability Housing project will be delivered through selected housing associations, by working in partnership with the commissioning agencies to support the individuals housing needs. It will also ensure dedicated care management and advocacy for each individual and their carers.
- 3.2 Following the Winterbourne View Hospital findings, the Government issued requirements to local authorities and health services. These requirements include a review of current hospital placements for people with a learning disability with complex needs, placements made out of area and those at risk of admission. Southampton City Council and Southampton City Clinical Commissioning Group (SCCCG) has taken this opportunity to review all current placements of complex individuals to ensure the most appropriate housing solutions for those individuals considered at highest risk are being identified.
Another requirement set by Government was that by April 2014 each area needs to have also developed a joint plan to ensure high quality care and support services for all people with learning disabilities or autism and mental health conditions or behaviour described as challenging, in line with best practice.
- 3.3 Many individuals with a learning disability who have complex needs are currently cared for in residential care settings. This type of service provides support in communal arrangements. As a result, personalised services are difficult to deliver. Individuals with complex needs benefit from bespoke service designs to appropriately support their physical, social and psychological needs. It is recognised that individuals' health and wellbeing can be more effectively supported if the person has control over who, where and how they live (DOH, 2007 Department of Health: Services for people with learning disabilities and challenging behaviour or mental health needs).
- 3.4 A total of 58 individuals across the CCG and Council were identified from the joint review who may benefit from rehousing outside of residential care settings. This is in line with the City Council's plan to reduce reliance on residential care and in more appropriate support settings.

- 3.5 Savings will be achieved through:
- Reduction in the need for high cost residential placements
 - Enabling service users to share staff teams where appropriate thereby reducing costs
 - Reducing the number of out of city placements thereby reducing staff costs in terms of travel and time when assessing and reviewing service users
 - Developing a wider range of housing solutions for the future.

3.6 These are out of area services and so there is no impact on Southampton City Council staff. The temporary recruitment of staff to enable the project to proceed has been built into the costs.

3.7 This work is being undertaken in conjunction with Southampton City Clinical Commissioning Group (CCG). Cabinet approved the joint work with the CCG to meet these needs and to develop a Section 256 agreement to enable the transfer of £1,500,000 to support the development of housing for this group in December 2013. The planned efficiency saving for this work for SCC is £750k, from annual spend of £3,327,328 (2013/14 baseline)

4. **Housing Related Support (Supporting People) HASC 5**

4.1 Supporting People provides housing related support services, mainly through contracts with voluntary sector agencies, but including in-house provision particularly for older people.. Support is provided to homeless people (including young people and teenage parents); women fleeing domestic violence; people with learning disabilities and mental health problems; and older people in sheltered housing and at home. Up to 2,500 people receive support at any one time. Support focuses on helping people to maintain their accommodation for longer, to stay safe in the community, and to promote their independent living skills. It underpins statutory services for people in the community.

4.2 The review aims to protect housing related support services to vulnerable people by focusing on achieving better value for money across contracts. The impact on individuals will be limited by focusing on the contracting arrangements and rationalising administration costs. Support will continue to be targeted to ensure it is supporting the achievement of wider strategic priorities of the authority. While most services have previously been tendered, there is room for further negotiation on prices for the future.

Negotiations with providers will commence in November 2014. By working with providers using key information e.g. hours provided, hourly rates etc. we will look to investigate opportunities to rationalise and ensure appropriate provision and funding arrangements from all potential agencies involved in client welfare e.g. Housing Benefits claims through the Department of Work and Pensions. Where providers are not willing to negotiate risk assessments will be carried out to ascertain when providers can be changed. Any such contracts will not be extended. Support services will continue to be targeted to ensure they are supporting the achievement of the wider priorities of the authority. This includes ensuring that services better support statutory service provision, and continue to prevent people from having to move into institutions including residential care. The programme will rationalise its administration by reducing IT costs and the collection of monitoring data.

4.3 The key intention of the proposal is to provide better value for money.

Negotiations are not intended to impact negatively on individuals. Housing related support will be protected by focussing core activities, and will continue to support vulnerable people living in the community. The Supporting People Programme will continue to focus on supporting vulnerable people to remain in their own accommodation and maximising their independence, and enable those individuals to take responsibility for their decision making.

4.4 Total efficiencies planned are £480k from a 2015/16 net controllable budget of £7,306,500

5. **Review existing commissioning contracts to make further efficiencies HASC 1 (£100k)**

5.1 This is part of an ongoing piece of work to review all contracts held to identify areas for efficiency, reduce duplication and ensure value for money.

5.2 In the Priorities Survey 2013 reviewing contracts was amongst the most common residents' suggestions for savings. Overall, 41% of all respondents made suggestions for improving efficiency, showing that it is an area which is important to residents.

6. **Strategic review of rehabilitation and reablement services HASC 4 (£400k)**

6.1 The strategic review of options for rehabilitation and reablement services (HASC 4) will look at the whole system including health services and those provided by the council. The savings are expected to be achieved through greater integration and reduction of duplication. The proposals are still being developed, through work with a range of stakeholders.

6.2 Evidence highlights the importance of effective rehabilitation and reablement that intervenes early to prevent problems developing and supports people to regain and maintain their independence improves outcomes for the individual and reduces ongoing costs. Enabling speedy discharge from hospital reduces the need for ongoing care. A significant number of older people deteriorate in hospital as a result of time spent in bed, falls and infections and, for those who are mentally frail, disorientation and diminished cognitive functioning. Such deteriorations often result in increased social care spend. Thus, in some health and social care systems, over 50% of all admissions into residential and nursing home care come directly from hospital.

6.3 A full stakeholder consultation will be undertaken with staff, customers and carers on the proposed options in the future. At this stage the full complement of staff working within the SCC services have been highlighted for information. There is no clarity on the staff numbers who may be implicated in the final proposal.

6.4 The rehabilitation and reablement review is a key priority within the Better Care Southampton Plan and is key to achieving the required outcomes including to significantly reduce permanent admissions to residential and nursing homes. The aim is to achieve a 12.3% reduction in admissions in per capita terms over 2014/15 and sustain and improve on this in subsequent years. Also to increase the percentage of older people still at home 91 days post discharge into reablement services

7 **Review of Public Health Services HASC 3 (£400k)**

7.1 The savings will be achieved through a review and refocus of Public Health

services, based on the prioritisation of Children's Centres. This will increase the level of Public Health funding to protect this vital service area. This review will not impact on front line provision and will be derived from reduced management and overheads costs.

RESOURCE IMPLICATIONS

Capital/Revenue

- 8 Proposed savings:
- 8.1 Review existing commissioning contracts to make further efficiencies HASC 1 £100k
- 8.2 Learning Disability Residential Placements HASC 2: £750k, from annual spend of £3,327,328 (2013/14 baseline)
- 8.3 Review of Public Health Services HASC 3: £400k, from expenditure guide 2015/16 of £15,050,000
- 8.4 Strategic review of rehabilitation and reablement services HASC 4 £400k
- 8.5 Housing Related Support (Supporting People) HASC 5: £480k from a 2015/16 net controllable budget of £7,066,000

Property/Other

- 9. None

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

- 10. Care Act 2014, legislative requirement from April 2015

Other Legal Implications:

- 11. None.

POLICY FRAMEWORK IMPLICATIONS

- 12. Alignment with Health and Wellbeing Strategy and Southampton Better Care plan

KEY DECISION? Yes

WARDS/COMMUNITIES AFFECTED:

All

SUPPORTING DOCUMENTATION

Appendices

1.	None
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Documents In Members' Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality Impact Assessment (EIA) to be carried out.	Yes
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Other Background Documents**Equality Impact Assessment and Other Background documents available for inspection at:**

Title of Background Paper(s)

Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)

1.	None	
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