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Special Overview and Scrutiny Management Committee

Wednesday, 29th November, 2017 at 5.00 pm

MEMBERS' ROOM DOCUMENTS

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Members

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MEMBERS' ROOM DOCUMENT

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6 CALL-IN OF EXECUTIVE DECISION CAB 17/18 19659 - FUTURE OF THE KENTISH ROAD RESPITE SERVICE (Pages 1 - 20)

- 1. Monitoring Executive response to 14 September 2017 OSMC recommendations.
- 2. Monitoring Executive response to 9 November 2017 OSMC recommendations.

Tuesday, 21 November 2017

SERVICE DIRECTOR, LEGAL AND GOVERNANCE

Overview and Scrutiny Management Committee: Holding the Executive to Account

Scrutiny Monitoring – 9 November 2017

Date	Portfolio	Title	Action proposed	Action Taken	Progress Status
14/09/17 Housing and Adult Care		Proposed Closure of Kentish Road Respite Service	That the Cabinet Member removes the proposed closure date of 31 October and reconsiders the timeframe for the closure of Kentish Road Respite Centre at a meeting of Cabinet.	The proposed closure date of 31 October 2017 was lifted at a meeting of full Council on 20 September 2017 and the future of Kentish Road Respite Centre is being considered at a Cabinet Meeting on 14 November 2017.	Complete
			2) That, to inform the proposed Cabinet decision, the report to Cabinet includes a reassessment of the financial business case associated with the closure of Kentish Road Respite Service.	The report to Cabinet includes a reassessment of the financial business case associated with the proposed closure (paragraphs 34 to 39 and Appendix 1 to the report).	Complete
Page 1			That, if Cabinet agree to postpone the closure, a communications and transition plan is developed and published to support the process.	A media statement was issued following the full Council meeting on 20 September 2017 and an update was published on the council's website on 5 October 2017 at http://www.southampton.gov.uk/news/article.aspx?id=tcm:63-396018 A letter was sent to all carers of individuals being supported at Kentish Road on 18 October 2017 confirming opening times for the scheme until the end of November 2017 and the date of the Cabinet decision. Information regarding the alternative respite provision has been published on	Complete
				the council's website and has been sent out to carers (see also item 7 below). A transition plan template has been developed (attached), which can be adapted to take account of individual	

Agenda Item 6

Date	Portfolio	Title	Action proposed	Action Taken	Progress Status
				needs and requirements to ensure an effective transition.	
Page 2			4) That, if Cabinet agree to postpone the closure, the Cabinet Member ensures that every effort be made to adequately staff Kentish Road Respite Service whilst it remains open.	All reasonable endeavours have been taken to staff the scheme pending determination of its future, as set out in paragraphs 29 to 31 of the Cabinet report.	Complete
			5) That the Cabinet Member clarifies and communicates to carers and service users the message about respite care at Kentish Road being available during weekends in October to those in the process of transitioning to alternative provision, or have not yet agreed an alternative provision.	A letter was sent to all carers of individuals being supported at Kentish Road on 18 October 2017 confirming opening times for the scheme until the end of November 2017 and the date of the Cabinet decision.	Complete
			6) That the Committee are provided with a briefing paper outlining the current position as it relates to the individuals that are still using Kentish Road, with regards to: Completed and outstanding	This is set out in paragraphs 25 and 26 of the Cabinet report. In summary: • All assessments have been completed; • All care and support plans have	Complete
			 assessments; Completed and outstanding care and support plans; The number that have not received 	 been drafted; The assessment and draft care and support plan were sent out with a covering letter and booklet with details of alternative respite 	
			 an offer of alternative provision; The number that have accepted offers of alternative provision; 	 options by 29 September 2017; Suitable alternative provision has been identified for all 30 people who continue to use Kentish Road; 	
			 The number that have received an offer but have not reached agreement with the Council with regards to alternative provision. 	 7 people have agreed to the alternative and 13 have agreed this in principle, but have not signed the support plan; 	
			It is recommended that, where practical, external validation is provided of the statistics requested and that the briefing paper	10 people have not reached agreement with regards to alternative provision.	

Date	Date Portfolio Title		Action proposed	Action Taken	Progress Status
			provides the Committee with an explanation of the stages that need to be followed from assessment to completing the transition.	The care and support plans of the 10 people who have not reached agreement with regards to alternative provision have been independently reviewed by the Principal Social Worker at Portsmouth City Council. She considers that the alternatives offered are appropriate and sufficient to meet individuals' assessed needs.	
				The stages that need to be followed are: (1) Assessment completed (2) Care and support plan drafted for	
				alternative respite provision	
				(3) Agreement to care and support plan	
Page				(4) Transition to alternative respite provision, in accordance with the transition plan and care and support plan.	
е 3			7) That information clearly identifying the alternative respite provision available, including capacity and facilities, and the various needs that they are able to support is provided to the Committee and is circulated to the carers of individuals that use Kentish Road Respite Centre.	This is available on the council's website at http://www.southampton.gov.uk/health-social-care/adults/respite-options.aspx and has been published as a Members' Room Document to inform the Cabinet decision on 14 November 2017.	Complete
			8) That the Cabinet Member circulates to the Committee the definition that Southampton City Council is working to, as it relates to the users of Kentish Road Respite Service, for the term 'suitable alternative provision'.	There is not a legal definition for 'suitable alternative provision' contained in the Care Act 2014, associated Regulations or statutory guidance. This would be determined as part of the assessment and planning phase. Any alternative needs to meet the unmet eligible need. The council is required to take into account the wishes and feelings of the individual and carer but can also take into account	Complete
				resources, in accordance with the council's Adult Social Care and Support	

Date	Portfolio	Title	Action proposed	Action Taken	Progress Status
			9) That the Committee are provided with:	Planning Policy. The care and support plans of the 10 people who have not reached agreement with regards to alternative provision have been independently reviewed by the Principal Social Worker at Portsmouth City Council. She considers that the alternatives offered are appropriate and sufficient to meet individuals' assessed needs. The legal requirements are set out in	Complete
Page 4			 A summary of the legal requirements placed on the Council with regards to engaging with service users and carers and ensuring that their views are taken into consideration. An overview of the approach to engaging with service users and carers that the Council has employed as it relates to the proposed closure of Kentish Road Respite Service. 	paragraph 45 of the Cabinet report. In terms of engaging with individuals during the assessment process, the Equality Act 2010 requires reasonable adjustments to be made to support an individual's involvement in the assessment. Under the Care Act 2014 the council should take reasonable steps to agree how needs are met with the individual/carer. Any plan should be person centred with an emphasis on the individual having a reasonable opportunity to be involved. The council should also provide information in a way that is meaningful to the person and ensure the person has the support and time to consider the options available to meet the needs. The Care Act also requires that if an individual has a 'substantial difficulty' in being involved, then an 'appropriate person' should be identified to facilitate their involvement. 'Substantial difficulty' includes	

Date	Portfolio	Title	Action proposed	Action Taken	Progress Status
				understanding relevant information; retaining that information; using or weighing that information as part of the process; and communicating the individual's views, wishes or feelings.	
				The individual being assessed must consent or, in the case of mental incapacity, the council must be satisfied that the 'appropriate person' will act in the individual's best interests.	
				Where it is not possible to identify an 'appropriate person' an independent advocate is appointed.	
Page 5				The steps taken to facilitate an individual's involvement in the assessment as set out above are recorded on the assessment form.	
				The Principal Social Worker for Portsmouth City Council stated that she could see the opinions of relatives in all of the assessments and that the assessments and support plans have been completed with the client, where possible, with the parents/relatives involved.	
				She has recommended that some of the care and support plans be updated to include all of the choices that have been offered to meet the assessed need since September 2017.	
			10) That a review of Weston Court is undertaken that explores the opportunities and potential of the site to deliver a respite	Following a review, the community centre that adjoins Weston Court will now also be available for the scheme's use and,	Complete

Date	Portfolio	Title	Action proposed	Action Taken	Progress Status
			service complete with facilities that enable service users to socialise.	following a consultation, the wider Weston Court community is looking forward to welcoming and engaging with people receiving respite at Weston Court. The new care provider, Way Ahead, has a good track record of engaging with people using their services and the wider community to provide a vibrant service.	
Page 6			11) That the Committee is provided with the Administration's current position with regards to the potential use of Weston Court as a facility to accommodate those recently discharged from hospital.	Prior to the proposal to close Kentish Road, it was often not fully utilised. The new scheme at Weston Court will have the ability to provide short stay respite to people being discharged from hospital, for example where there is a delay in setting up a suitable package of care at home. This is expected to be at times when Weston Court is not being used to provide respite for people living with a learning disability There is not expected to be overlapping use, but if this were to arise we would work with the provider, and potential clients, to ensure that their needs were compatible with each other and that those needs can be managed within Weston Court. If there is increased choice of provision in the market or more people choose to take up direct payments or shared lives in the future, then the capacity of Weston Court to support people being discharged from hospital may increase. The use of the Weston Court Scheme will be in accordance with its registration with the Care Quality Commission to provide short stay replacement care.	Complete
			12) That, prior to the closure of the service, officers seek to facilitate the development of	The council has met with Choices Advocacy to progress this and a meeting	Complete

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			'friendship groups' for Kentish Road service users.	with Mencap is scheduled for 14 November.	
				The council has explored the Friendship Group model that Hampshire County Council used following a closure of one of its services, and understand what worked well and what could be improved. The possibility of respite providers running social events is also being explored.	
Page 7				These ideas will be explored and developed further by a focus group for people living with a learning disability and their carers. This will be wider than the Kentish Road group (although they would be a priority group to invite), as maintaining and developing friendships is a key element of the challenge that individuals living with a learning disability face.	
			13) That the Cabinet Member continues to discuss the future use of the Kentish Road facility with the charities that have expressed an interest in the service, and reports progress back to the OSMC.	Progress will be reported back to the Overview and Scrutiny Management Committee at its meeting on 9 November 2017.	

Key element to be addressed:	Action/s:	Completed by:	When:	Signed off by:
Planning	Care Act assessment and support plan sent to carer/individual for approval			
	Information on new service provided to carer/individual.			
	Opportunity provided for carer/individual/advocate to visit the service			
Page	Social worker has made referral to new service with consent from carer/individual			
© ∞	Social worker has shared their Care Act assessment of the individual with the new service			
	New provider has completed their individual assessment by meeting with individual, carer/advocate (if appropriate)			
	New provider has agreed they can meet the individual's needs			
	Agreement between, individual, carer, social care and provider as to the number of further visits that need to be arranged between the carer/individual and the new service. These to include different times of the day and including participation in activities and for some an			

	overnight stay.
	Funding approval sought for additional
• • • • • • • • • • • • • • • • • • • •	costs as necessary to support transition.
Care needs assessment/ New provision	All relevant support plans and risk assessments from Kentish Road have been shared with the provider with permission from carer/individual
	New service demonstrate they have support plans and risk assessments in place that meet the individual's needs (be clear on any high risk areas e.g. epilepsy/choking/community safety) and are approved by individual, carer/advocate
	All involved staff at the service have read/signed and can demonstrate that they understand the care and support arrangements of the individual they are supporting
	Key areas of health have been referred to Community Learning Disability Team for assessment if required (e.g. occupational therapy/speech and language therapy/physio etc.) ensuring carer/individual is aware and in agreement
	Carer and individual being supported have copies of the support plans and risk assessment from the new service and

provided with the opportunity to request changes to these if needed.

Information is shared from the new service with individuals in an easily accessible format, appropriate to the individual's method of communication

New provision shares key information with individuals/families, this includes areas such as communication/complaints and compliments/sharing information about changing needs/health concerns/safeguarding policy/confidentiality/booking policy.

Agenda Item 6

Appendix 6

Overview and Scrutiny Management Committee – 9 November 2017

Recommendations relating to the discussion on the future of the Kentish Road Respite Service:

OSMC Recommendation	Executive Response
That the Cabinet Member investigates why expressions of interest in operating the supported respite provision at Weston Court from Mencap and the Rose Road Association were not referred to the Cabinet Member prior to the determination of the operator.	The council and Integrated Commissioning Unit did not receive any expression of interest from Mencap or the Rose Road Association in providing a residential respite service at Weston Court, prior to the determination of the operator. At a meeting on 14 August 2017, Mencap and the Rose Road Association expressed an interest in the future use of the Kentish Road site, but not to take over the service in its current form.
That, at the 14 November 2017 meeting, Cabinet withdraw the report and keep the Kentish Road Respite Service open.	
3. That, if the report is not withdrawn from the Cabinet meeting, anonymised information is provided for the 14 November 2017 Cabinet meeting outlining the costs to the Authority relating to the individuals that have transitioned from Kentish Road Respite Service to permanent placements since the resolutions made by Cabinet on 16 December 2014.	These data are set out in figure 1 below. As stated in the Cabinet report, it was inevitable that some people using Kentish Road would need to move to permanent care placements as their needs increased, their carers became unable to provide the support needed at home, or people became independent and moved into their own homes. These permanent placements are funded by a different budget for which separate provision is made.
4. That, if the report is not withdrawn from the Cabinet meeting, a comprehensive and fully costed assessment, that clearly identifies the assumptions that the cost savings are predicated on, is provided for the 14 November Cabinet meeting.	Annendix 1 to the Cahinet report sets

Kentish Road in the first year.

This has been based on completed assessments. In the ten cases where agreement has not been reached on the proposed alternative to Kentish Road, the figure used is for the alternative that an individual's social worker has deemed to be appropriate. In these cases, standard rates have been used. as follows: Shared Lives £57, Weston Court £190, Rose Road Association £277 (excluding 1-1 support), other residential respite care £250. For the second year, the total number of respite nights needed by 13 individuals is expected to reduce by an average of 2.5 nights, following a further review of their needs. One individual is also forecast to require less 1-1 support once settled in a new placement. For the third year, the forecast includes 5 individuals receiving respite through shared lives rather than a residential alternative. In the opinion of the Principal Social Worker at Portsmouth City Council, who carried out an independent review of the care and support plans, the Shared Lives option does not appear to be considered as a positive option by many of the client's families. She states her belief that the potential for Shared Lives has not been realised by the relatives. Her view also is that the council has at times been over-generous when assessing respite needs.

If the annexe at 32B Kentish Road is developed as proposed, this would cost an estimated £30,000 to the capital programme. The new care provider would be able to offer its services to those receiving respite care elsewhere and people could choose to spend their personal budget on respite care at 32B as an alternative to the care package in place at the time. This would not impact on the overall budget position for respite care.

Figure 2 below summarises the savings

forecast to be associated with closure of the current service at Kentish Road (based on the budgeted cost of £453,000 per year, although the scheme has significantly overspent its budget in 2015/16 and 2016/17).

- 5. That, if the report is not withdrawn from the Cabinet meeting, information is provided for the Cabinet meeting that explains:
 - i. How the proposed closure of the Kentish Road Respite Service will lead to better outcomes for service users;
 - ii. The measurements that are being used to determine 'better outcomes';
 - iii. How the removal of the Kentish Road Respite Service will improve choice for adults living with a learning disability in Southampton.

i. The proposed closure will over time lead to greater choice of respite options in Southampton for people living with learning disabilities and their carers.

By law, people cannot use a direct payment to purchase care and support from the council. A key objective in the council plan is to increase the take up of direct payments.

The benefits of direct payments are best summed up by Think Local Act Personal

(www.thinklocalactpersonal.org.uk), a national partnership of more than 50 organisations committed to transforming health and care through personalisation and community-based support.

They state, "Personalisation is fundamentally about better lives, not services. It means working with people, carers and families to deliver better outcomes for all. It is not simply about changing systems and processes or individualising funding through personal budgets and direct payments, but includes all the changes needed to ensure people have greater independence and enhanced wellbeing within stronger, more resilient communities."

The Cabinet Report dated 9 December 2014, setting out the basis of the original decision and referred to in the Cabinet paper for 14 November 2017 gave further details on the rationale for the proposed closure and have reproduced below.

The following are excerpts from the evidence base on direct payments:

Exploring the Temporal Aspects of Direct Payments, (Arksey and Baxter 2012)

https://www.mencap.org.uk/learning-disability-explained/research-and-statistics/social-care-research-and-statistics

'Direct payments can give people more flexibility, choice and control over their life.'

Nolan, Ann and Regan, Colm. 2003-05. "Direct Payments Schemes for People with Disabilities, A new and innovative policy approach to providing services to disabled people in Ireland. https://www.independentliving.org/docs6/bray200305-sum.pdf

'The available evidence suggests strongly that for those who do/can avail of direct payments their capacity to choose and control needed services is greatly increased. This, in turn, can lead to greater autonomy and capacity to achieve independent living'

'Depending on the particular model utilised, direct payments have contributed to challenging and ending isolation as they significantly reduce segregation in care for many individuals with a disability.'

Direct Payments: The Impact on Choice and Control for Disabled People, Scottish Government 2000 http://www.gov.scot/Publications/2000/10/51fc94b4-02b4-48b1-bf01-f1f307b9fd95

'Direct payments can dramatically increase the choice and control recipients exercise over their own lives, particularly when contrasted with

limitations imposed by some local authority-provided services.'

'They can promote social inclusion.'

'Recipients identified very few, if any, disadvantages to direct payments. Direct payments can lead to a more efficient use of social work resources, while improving the quality of support to clients. '

The current service provided at Kentish Road, although valued by many, is rated by the Care Quality Commission as requiring improvement and is operating from 1960s buildings that are tired, not fit for purpose and in need of refurbishment.

Shared Lives, direct payments, the new scheme at Weston Court and the new scheme being proposed for the Kentish Road Annex all offer high quality care and support tailored to meet individual needs with a focus on helping people to achieve their goals and supporting independence, wherever appropriate.

- ii. Individuals' needs will be reviewed at least on an annual basis, along with their progress towards meeting their individual goals. There is also an annual sample survey of individuals and their carers which informs the councils return to NHS Digital (known as the Adult Social Care Outcomes Framework [ASCOF]).
- iii. The current arrangement with the council respite service with a capacity to provide 2,920 nights per year is akin to a monopoly provider taking all of the business.

The Care Act requires local authorities to help develop a market that delivers a wide range of sustainable high-quality care and support services that will be available to their communities.

The Care Act states that a diverse market is one in which people using social care and support services and their carers have "a variety of high quality providers to choose from who (taken together) provide a variety of services," and the statutory guidance to the Act goes on to say that this means the market should include a variety of different providers and different types of services, and that this should represent a genuine choice of service type.

Keeping most of the council's investment in respite service provision tied up in the maintenance and operation of Kentish Road restricts its ability to fulfil this obligation.

Figure 1: Total cost of care and support for individuals who have been supported to move to permanent placements

		Total care package				
Client	Placement	Weekly cost	Annual cost			
Α	Shared lives	£497.00	£25,844.00			
В	Shared lives	£372.24	£19,356.48			
С	Shared lives	£1,074.88	£55,893.76			
D	Shared lives	£441.89	£22,978.28			
Е	Supp living	£764.78	£39,768.56			
F	Supp living	£1,565.89	£81,426.28			
G	Supp living	£251.32	£13,068.64			
Н	Supp living	£275.49	£14,325.48			
I	Nursing/res	£1,000.02	£52,001.04			
J	Nursing/res	£1,220.80	£63,481.60			
K	Nursing/res	£685.72	£35,657.44			
L	Nursing/res	£1,303.26	£67,769.52			
M	Nursing/res	£745.41	£38,761.32			
Total		£10,198.70	£530,332.40			

Figure 2: Savings forecast to be associated with the proposed closure

		Total			
	2017/18	2018/19	2019/20	2020/21	
Year 1	£35,000	£69,000			£104,000
Year 2		£45,000	£91,000		£136,000
Year 3			£62,000	£123,000	£185,000
Year 4				£62,000	£62,000*
Total	£35,000	£114,000	£153,000	£185,000	£487,000

*The balance of £123,000 is forecast to be saved in 2021/22

Appendix: Recommendations and reasons from Cabinet Paper dated 9 December 2014

(The full paper available is available online at

http://www.southampton.gov.uk/modernGov/documents/s23943/Future%20of%20the %20respite%20service%20for%20adults%20with%20learning%20disabilities.pdf and is referenced in the paper for the decision on 14 November)

RECOMMENDATIONS:

- (i) To consider the responses received during a public consultation into the future of respite services for adults with learning disabilities conducted between 24 July and 23 October 2014, outlined in Appendix 1.
- (ii) To note the intention to move the provision of respite care towards individual packages of care that make increased use of direct payments through a range of alternative options including shared lives and short breaks.
- (iii) To note that the needs of current service users will be thoroughly reviewed prior to and following their moves to ensure that these needs continue to be met and to reduce any impact on their wellbeing.
- (iv) To authorise a phased closure of Kentish Road beginning with supporting clients with lower needs, followed by those with higher needs to access alternative respite options with a clear focus on more personalised support being accessed and resulting in the eventual total closure of the Kentish Road service by April 2015
- (v) If the proposals are agreed to undertake a 45 day consultation with affected staff with a view to minimising or avoiding compulsory redundancies.
- (vi) To delegate authority to the Director, People following consultation with the Cabinet Member for Health and Adult Social Care to do anything necessary to give effect to the proposals in this report.

REASONS FOR REPORT RECOMMENDATIONS

- 1. Traditional respite services have been matched to individuals instead of individual packages of care tailored to meet personal preferences and lifestyle. Kentish Road is a bed based service that offers planned and emergency respite for up to 8 people at a time. Users have limited choice about when to receive their respite and who else will be using the service at the same time. Increasing incidences of users with higher level needs requiring increasing amounts of respite limit the capacity available to other users.
- 2. The need to move towards more personalised forms of care, where individuals can exercise more choice and control over the support and services they access is a priority both locally and nationally. In concert with this, the requirement to offer direct payments to individuals is national policy. The council currently performs in the bottom three of all councils nationally around this performance

indicator, with our take up rate of direct payments currently standing at only 6% compared to a national average of 21.03% (data taken from Ascof outcome (1c(2) 2013/2014). The policy direction and imperative is to offer more personalised forms of care and in particular to offer direct payments and this continues to be a national driver as set out in the Care Act 2014 becoming a legislative requirement from April 2015.

- 3. There is significant evidence nationally that direct payments support people to have increased choice, control, flexibility and an improved quality of life. They can provide bespoke solutions for unique needs which then improve outcomes for individuals. Improved outcomes can have a cost benefit by reducing the need for other services. Direct Payments cannot be used to purchase council run services.
- 4. The longer term viability of Kentish Road may be at threat even if no changes are made. This is due to an expected increase in the uptake of direct payments and evidence of people using their direct payment to purchase less traditional, more creative care solutions such as employing personal assistants, paying for community based activities or supported holidays. In the 14-18 years age group of those with a learning disability, who in the past may have been expected to access Kentish Road when they become an adult, the uptake of direct payments has increased from 12% in 2009/10 to 32% in 2014/15 and this trend is expected to continue over the next few years, particularly in light of the right to request a personal budget and focus on more personalised services brought in by the Children & Families Act 2014 and the Care Act 2014.
- 5. The statutory requirement to consult with service users, their families and other stakeholders has been fulfilled and although the overwhelming response from families was to keep Kentish Road open (77%), their comments have helped to ensure that all relevant factors have been taken into consideration.
- 6. Evidence from discussion with service users, their families and carers and with experienced social care practitioners shows that the development of services for individuals with the highest needs and most challenging behaviour will take time. It will also be important that users and their carers are confident in and comfortable with these alternatives. A phased approach supports this period of transition. A full Equality and Safety Impact Assessment has been carried out to identify the potential impact and mitigation of these proposals on servicer users and their carers and is attached as Appendix 2 for consideration.
- 7. The current provision of respite at Kentish Road is not the most cost effective way of providing respite. The 2014/15 unit cost, based on current occupancy, of an overnight stay at Kentish Road is £219 compared to an average cost of £53 for an overnight stay provided through the Shared Lives scheme.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

8. The alternative option of keeping Kentish Road open to continue to provide services in the same way was considered and rejected for the reasons set out above. The current service does not meet the requirement to increase choice and

control and promote individual approaches, nor does it provide best value which is a significant consideration within the current financial climate.

9. Consideration was given to a redesign of the current service. This option was rejected because it is not likely to support the full development of personalised care and the increased use of direct payments.