

STOCKPORT COUNCIL

REPORT TO EXECUTIVE MEETING – SUMMARY SHEET

Subject: Modernising the Learning Disability Service

Report to Executive Meeting

Date: 25th September 2006

Report of: (a) *Executive Councillor (Adults and Health)*

Key Decision: (b) **NO** / **YES** (Please circle)

Forward Plan General Exception Special Urgency (Tick box)

Summary:

This report updates the Executive on progress on work to modernise the learning disability service in Stockport and an analysis of some of the identified issues that still need to be addressed. It also asks the Executive to approve a wide ranging consultation process with service users, their carers and staff as well as the placing of a Prior Information Notice (PIN) in a number of journals to allow for a period of consultation with prospective providers.

Comments/Views of the Executive Councillor: (c)

This report is the start of the next phase of our strategy for modernising the learning disability service. I believe it contains proposals that could considerably enhance the quality of life of many of those currently supported through our learning disability tenancies. As a first step I endorse the recommendation that these proposals should go for further consultation with users, carers and the staff affected, and that preliminary discussions should take place with potential service providers.

Recommendation(s) of Executive Councillor: (d)

I would ask the Executive to accept the three recommendations outlined in the attached report.

Relevant Scrutiny Committee (if decision called in): **(e)** Adults and Communities Scrutiny and Health Scrutiny

Background Papers (if report for publication): **(f)**

Report from Corporate Director attached

Contact person for accessing background papers and discussing the report

Officer: Terry Dafter
Tel: 07800618757

'Urgent Business': (g) **YES** / **NO** (please circle)

Certification (if applicable)

This report should be considered as 'urgent business' and the decision exempted from 'call-in' for the following reason(s):

The written consent of Councillor _____ and the Chief Executive/Monitoring Officer/Corporate Director - Business Services for the decision to be treated as 'urgent business' was obtained on _____/will be obtained before the decision is implemented.

Report of: Corporate Director, Adults & Communities

Report to: Executive

Date: 25/09/2006

Subject: Proposals to modernise the Learning Disability Services.

1. Introduction

- 1.1 The Executive will be aware of the long standing need to modernise the Learning Disability Service and the range of work that is under way to address management and financial problems.
- 1.2 The SLDP provides an accommodation service which comprises a tenancy network, registered care home and a respite unit. The tenancies are let by social, private and council landlords. The partnership also purchases significant support in out of area residential and nursing homes and support to people in their own homes.
- 1.3 The service users within the accommodation service have a range of needs: some have relatively low level requirements involving staff calling in on a patch team basis while others exhibit complex and challenging behaviour involving full staff cover on a 24 hour a day 7 days a week basis. The model of care is a good one but there is an over-reliance on this approach which results in a lack of diversity in the overall pattern of services provided. This is outlined more thoroughly in Section 3.
- 1.4 The current financial projection for the Stockport LD partnership (SLDP) anticipates a spend of around £14.6m pounds in 2006-07. The substantive budget is £13.6m though it is anticipated that further work through the year on modernising the service will contribute towards reducing this overspend.

2. Purpose of this Report

- 2.1 This report updates the work that has been undertaken with respect to the accommodation service and seeks approval to issue a Provisional Indicative Notice through the European Journal, Community Care and the Health Service Journal. This would ask for expressions of interest from suitable experienced organisations to discuss possible ways in which they could work in partnership with the Council to better deliver aspects of the service. More importantly alongside this is the intention to start an extensive dialogue with service users, carers and members of staff during October and November about the future of the service. A formal user reference group to consider views and the possible range of options would also be established.

3. Rationale underpinning the decision to review the learning disability service.

3.1 For some time now it has been recognised that the model of service currently delivered in Stockport is based on an approach that was adopted and seen as best practice around the time of the closure of long stay hospitals. It should be noted that the model is still a good practice one in that people with a disability are supported in housing that is part of a local community and the staffing input is established in the light of their specific needs. The issue is that a review of our provision in relation to our comparators demonstrated that Stockport has a relatively high level of supported accommodation and along with this a high level of tenancy provision as a proportion of the overall options available. There is therefore a lack of user choice about how they might wish to be supported: a knock-on effect of this can be that if the tenancies are not able to offer support then it can be difficult to find alternative options other than a placement in residential or nursing care outside the borough. Again while this specialist provision can be appropriate it does involve someone leaving their local neighbourhood and living a long distance from family and carers. This offers specific challenges in enabling them to return.

3.2 The actual breakdown of the tenancies is as follows:

Number of tenants in a tenancy	Number of tenancies	Number of places
1	9	9
2	4 patch	8
2	8 Not patch	16
3	15	45
4	19	76
5	6	30
6	8	48
8	2	16
	73	248

The review suggests that we have a current model where the majority of people are supported in tenancies with 4 or fewer people. A possible model where tenancies supported 5 or more people or where blocks of individual flats were used could offer an alternative model of care that was equal or better in terms of quality and could possibly be more cost effective.

3.3 As well as a predominant reliance on a single model of support (supported tenancies) Stockport relies on 2 major providers the Council and PCT. There is as a consequence a lack of diversity in providers and consequently a lack of user choice about who might provide support. A number of local authorities contacted in the North West have a range of independent sector provider as well as the Council and the PCT.

3.4 The reliance on either Council or PCT tenancies or spot purchased care home support reduces options for users who wish to live in Stockport. Most specifically there is very little alternative provision such as:

- 3.4.1 Specialist extra care sheltered housing. This is where a group of people with a learning disability live in a sheltered housing unit with dedicated care and support provided on an individual basis.
- 3.4.2 Core and cluster where one fully staffed 24 hour residence acts as a base to support neighbouring tenancies where less support is needed. The fully staffed base provides on-call support: this works well for people who cannot live fully independent lives and may need occasional back up support from the staff base.
- 3.4.3 Use of assistive technology where monitoring and environmental controls are used to support people with moderate needs who do not require a permanent staff presence but are at some risk which can be managed through the technology which is linked to a local staff base.
- 3.4.4 Key Ring schemes where someone is provided with free accommodation in return for offering support to people living in the same locality (within around 10 minutes walking distance) encouraging a community model of support across the whole scheme.
- 3.4.5 There is also a lack of specialist services for people with autism and older people with dementia and a learning disability. Currently people frequently have to leave Stockport and be placed in a specialist unit often many miles away. There are providers who are skilled in offering these service locally.

4. **Next steps**

- 4.1 As noted above a significant modernisation programme is already under way. Reviews have been completed of all tenancies, all out of area placements and targeted users in community settings currently living with families who are likely to need future services. The use of transport has been analysed, rotas and the management structure changed and progress made in making the tenancy network more responsive and cost effective. Users who might have a need for day services have also been identified
- 4.2 It is anticipated that there may be some financial efficiencies gained as a result of this process if for example the size of some of the tenancies are reconfigured or if new ways of delivering a service are identified. It is difficult to be more specific at present however in terms of providing precise figures as there is a need first to undertake the consultation process and gain a clearer understanding of the options that might be available and acceptable. Any savings would probably only be realised over future years and given the pressures on the budget already (through transitions for example) there will be a need to ensure that sufficient capacity is maintained to meet present and future demands.
- 4.3 There is a need in any event to improve the diversity and range of providers and service models that are currently available. To this end agreement is needed to advertise on behalf of the Council and PCT and the Supporting People Commissioning Body for interested and suitably experienced

organisations, in order to develop our community based, supported living services for people with Learning Disabilities. The service to be commissioned jointly by Adult Social Care services the Supporting People Programme and the PCT. (It should be noted that the PCT have been closely involved with the exercise to date and fully support the recommendations set out in this report.) Providers will need to have had experience of supporting adults with a learning disability. We will also require some providers who have had experience of supporting adults with complex needs, working with service users who have learning disabilities and dementia, supporting adults with a learning disability in sheltered housing, core and cluster, key ring and Homeshare models.

- 4.4 In order to discuss the requirements of the Service, and to assist in the developmental process, it is the intention of the Council to meet with interested providers by appointment in late 2006. In the advert we will be asking interested parties to write, giving a brief summary of their experience in providing services to people with a Learning Disability, the length of time they have been involved with the service, the nature of that service and details of contracts in which they are currently involved.
- 4.5 It is important to stress that this is very much a first step in terms of exploring possible other options for delivering care. If as a result of this exercise it is evident that there is a potential for other providers to become involved then a more formal tendering exercise could be considered. This would also require extensive consultation with users and carers, as well as staff and trade unions. The Council has a clear commitment to involvement at all levels when such outsourcing is being considered and would of course be aware of TUPE rights, pension issues and other important HR matters that would need to be addressed as part of such an exercise. Given the analysis of the current position however this approach could well offer greater choice for service users in terms of models of care provided.

5. Recommendations

- 5.1 The Executive is asked to:
1. Note the changes set out so far to modernise the learning disability service
 2. Approve the continuation of the extensive consultation exercise with all key stakeholders that is already under way.
 3. Agree the recommendation to place an initial Prior Information Notice (PIN) in appropriate outlets (Community Care, Health Service and European Journal).