AGENDA ITEM NO 11



REPORT NO IJB 24/20

ANGUS HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 24 JUNE 2020 LEARNING DISABILITY PRIORITY IMPROVEMENTS REPORT BY GAIL SMITH, INTERIM CHIEF OFFICER

ABSTRACT

This report provides an update to the Integration Joint Board (IJB) on the current position in relation to the implementation of Learning Disability priority improvements. These are intended to address current challenges facing the service and to implement efficiency and sustainability actions in response to inflationary, demographic, and capacity demands. Our aim is to deliver sustainable services into the future within available resources. The IJB approved the progression of a range of actions over a 3 year period in January 2018 (report no IJB 16/18). An update report was brought to the IJB in December 2018 (report no 97/18), June 2019 (report no 41/19) and December 2019 (report no 81/19). A briefing update on the review of overnight support was also sent to members in August 2019. This report provides a further update detailing progress against priority improvement actions.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board: -

- (i) Notes the progress made since the last update in December 2019, the current issues and how these are being addressed.
- (ii) Approves the revised financial assumptions from this improvement programme and consolidates this into the IJB's strategic financial plan.
- (iii) Approves the development of an updated learning disability improvement plan.
- (iv) Requests and updated Improvement Plan to be presented at the meeting of the IJB on 26 August 2020;
- (v) Seeks further progress reports on a 6 monthly basis.

2. BACKGROUND

On 10 January 2018 the IJB approved a service-wide approach to current and future priorities for the learning disability service until March 2021 (report no. IJB 16/18). This report incorporated the priority areas previously agreed by the IJB in relation to learning disability accommodation in May 2016 (report no. IJB 48/16) plus the developments regarding learning disability respite services in October 2017 (report no. IJB 62/17). An update was brought to the IJB in December 2018 (report no 97/18) and a further update was brought to the IJB in June 2019 (report no 41/19). A briefing update on the review of overnight support was also sent to members in August 2019. A further update in relation to progress on learning disability improvements was brought to the IJB in December 2019 (report no 81/19). The COVID 19 pandemic has impacted on the rate of progress of the learning disabilities improvements programme. This paper provides an overview of the current situation. The savings targets for 20/21 have been updated to reflect this impact.

3. DEMOGRAPHIC PRESSURES

Due to current and anticipated demographic demand and capacity issues, further improvement work is required to ensure that the service is delivered as efficiently as possible, enabling resources to be directed to the areas of most urgent need and addressing current and future service delivery requirements. Some of the main pressures are outlined below:

3.1 Autism

Autism is a lifelong condition with a spectrum of need which varies greatly from individual to individual and is very unique to each person. Adults known to local authorities who have a learning disability and/or autism have been rising steadily year on year. The 2018 statistics collated by Learning Disability Statistics Scotland (LDSS) illustrate that the national rate of adults with a learning disability who have autism is 18.7%, whilst the Angus rate is 23%. This ranks Angus 9th highest of the 32 local authority areas. Statistics in relation to children and young people indicate that the numbers of children being diagnosed with autism continues to increase at a fast rate.

As at May 2020, the learning disability service has 104 adults with autism known to the service. This is approximately 21.5% of the adult learning disability case load. 24 individuals have autism but no learning disability. All other individuals have autism and a learning disability. The 24 individuals with autism and no learning disability receive support from the learning disability service as there is no appropriate service provision within adult services to meet their needs. They are therefore placed across various adult service groups, with learning disabilities supporting the majority of autism cases and also supporting those with the most acute and complex needs.

The last full year analysis of annual costs of providing support to people who have autism within the adult learning disability service relates to financial year 2018/19 and is as follows:

| Annual cost – Autism with no Learning Disability | £176k |
|--|---------|
| Annual cost – Autism and a Learning Disability | £4,127k |
| Total annual cost | £4,302k |

This equates to **38%** of the budget that the learning disability service allocates for third parties such as day care, residential and support and care.

There is currently only a small number of individuals nationally that present with very extreme challenging behaviour, learning disability and acutely complex autism. In Angus, there are active cases that have the following characteristics:

- Support with all aspects of personal care, toileting, dressing, meal preparation and feeding.
- Extreme challenging behaviour, requiring several nurses for any interactions and additional staff during the frequent periods of agitation and distress.
- Nursing staff would be required to continually monitor, often through an observation window, as a physical presence can cause physical distress, resulting in heightened emotional state and physically challenging behaviours.
- Those with significant and complex autism with associated sensory issues may not be able to tolerate wearing any form of clothing. This results in clothing constantly being removed and shredded. This clearly has a huge impact on an individual's physical and mental health and how they can be managed and supported.
- Such sensory issues can also affect an individuals' tolerance of the environment resulting in, for example, an individual removing all floorcoverings and furnishings such as the bed and bathroom fixtures such as the toilet. Intolerance can lead to the removal of plaster board, mortar between bricks, radiators, sockets, light fittings and skirting boards.
- Such individuals are likely to require specialist assessment and treatment via the UK's specialist unit within NHS England. Following this, they are likely to require specifically commissioned bespoke environments in order to meet the sensory challenges and a significant support package provided by a group of consistent, suitably trained and suitably equipped staff.

The Angus Council and AHSCP joint Transitions Group is currently gathering information to develop future support pathways for children, young people and adults with autism in Angus and will be progressing a solution to mainstream autism needs. Within the learning disability service complex autism cases are progressed via the review of high cost care packages and out of area placements. Work has commenced on scoping an accommodation specification for the most complex group of individuals.

3.2 Support and Care

Table 1 illustrates the total support and care planned hours for learning disabilities by financial year. There has been an ongoing decrease in the amount of support and care hours allocated to care packages since 2017/18. This is attributed to the review of high and low cost care packages demonstrating that any growth has been mitigated by this. The more preventative work that is carried out within the learning disability service, the less likely it becomes that a high cost residential package will be required. For example, more innovative, local solutions are being identified that can better meet the needs of the individual. It is an example of cost mitigation where newly emerging assessed needs are being met in a more efficient and person centred way.

The majority of existing care packages have been reviewed which has resulted in £352k of savings over the last two years. Ongoing scrutiny of new packages continues with a view to preventing high cost care packages where possible and ensuring future cost mitigation.

Table 1

Total support and care planned hours for learning disabilities in a financial year

| | 18 - 64 | 65 -74 | 75 - 84 | 85+ | Total | % Year on Year change | % Cumulative |
|---------|---------|--------|---------|-----|--------|-----------------------|----------------------------------|
| 2016/17 | 349364 | 21211 | 5185 | 0 | 375760 | - | Change between 2016/17 – 2019/20 |
| 2017/18 | 350772 | 21167 | 5239 | 0 | 377178 | 0.4% | |
| 2018/19 | 336385 | 23214 | 5005 | 0 | 364604 | -3.3% | -3.0% |
| 2019/20 | 307220 | 33052 | 6736 | 0 | 347008 | -4.8% | -7.7% |

3.3 Personal Care

Table 2 illustrates the total personal care planned hours for learning disabilities by financial year. The increase in personal care hours has been attributed to the introduction of Free Personal Care for Under 65's. We continue to monitor this for further growth.

Table 2

Total personal care planned hours for learning disabilities in a financial year

| | Total | % Year on Year change | 9/ Cumulative Change between |
|---------|-------|-----------------------|--|
| 2017/18 | 96772 | - | % Cumulative Change between 2017/18- 2019/20 |
| 2018/19 | 95576 | -1.2% | 2017/16- 2019/20 |
| 2019/20 | 99684 | 4.3% | 3.1% |

3.4 Ageing Carers

The Learning Disability Statistics Scotland (LDSS) data for 2018 reports that there are 217 adults with a learning disability in Angus living with a carer. Our data collection methods on carer age are incomplete. As a result of this, we only hold dates of birth for half of the carers known to us. Data collection methods are currently being reviewed to ensure this information will be fully captured. From the 100 carers whose age is known, 53% are aged 55 and over. The impact of this is the increasing likelihood that people with a learning disability who currently live with and rely on family carers are at risk of a breakdown in care provision. It is projected

that on average, 3 individuals annually will require a support package of 18 hours per week due to ageing carers. It is estimated the impact of this will be approximately £50k per year.

3.5 High and Low Cost Packages

Tables 3 and 4 illustrate the cost of non-residential and residential high cost care packages and the impact the learning disability improvement plan has made to these. Priorities have included a review of high cost residential placements with a view to these becoming non-residential. It also aimed to reduce existing packages. Children transitioning into the service are an ongoing demographic pressure which is estimated at approximately £150k per annum. The learning disability improvement plan review of packages has resulted in a saving of £259k in financial year 19/20. This is largely as a result of the reduction in high cost residential packages shown in Table 4, and also as a result of the shift in moving people into the community evidenced in the increase in non-residential packages shown in Table 3.

All out of area placements have been reviewed (July 19 – December 19) and options are currently being explored in relation to the potential repatriation of some of these individuals back to Angus. This includes identifying alternative appropriate local accommodation and the identification of care providers that can deliver the required specialist support services as these individuals have significant complex needs. Research is also being progressed to identify options for those individuals with autism who have behaviours that significantly challenge services.

In December 2019 one individual was returned to Angus from a high cost, out of area specialist residential placement. This individual was accommodated within an existing block contract utilising existing void hours. This will result in a significant saving of £107k per annum to be taken in financial year 2020/21. Another individual has moved from residential care into their own tenancy but chose not to return to Angus. Ordinary residence is currently being pursued which will reduce local costs.

Table 3 - Non Residential Packages

| Approx. Package Cost Per Week (£) | Number of service users 17/18 | Number of service users 20/21 | Difference |
|--------------------------------------|-------------------------------|-------------------------------|------------|
| Over £2k | 12 | 11 | -1 |
| Over £1k | 51 | 54 | 3 |
| £650-£1k | 21 | 30 | 9 |
| Total | 84 | 95 | 11 |

Table 4 - Residential Packages

| Approx. Package Cost Per Week (£) | Number of service users 17/18 | Number of service users 20/21 | Difference |
|--------------------------------------|-------------------------------|-------------------------------|------------|
| Over £2k | 12 | 7 | -5 |
| Over £1k | 6 | 11 | 5 |
| £650-£1k | 22 | 13 | -9 |
| Total | 40 | 31 | -9 |

Data requirements have been identified to provide evidence of emerging demographic change. This will provide a clearer picture in relation to capacity and demand issues and identify the levels of complexity and/or enablement and trends related to demographic information. This will inform best use of resources. This is a priority as current data available to the learning disability service requires improvement. This work has now commenced.

4. CURRENT POSITION

Prior to the COVID 19 pandemic, good progress was being made advancing the learning disability improvements and a Development Officer was dedicated to progressing these. Due

to COVID 19, the Development Officer post was required to support front line activities and project work has been delayed.

The Development Officer met with a range of providers prior to the COVID 19 pandemic and arrangements were in place to view a number of accommodation models for people with autism and complex needs. This work is currently delayed due to COVID 19. In light of current restrictions imposed due to the COVID 19 pandemic and likely further future restrictions, there may be an impact on future accommodation design and staffing models.

The programme overachieved on financial savings for financial year 19/20 but the future financial position remains increasingly challenging. The current savings target attached to the learning disability improvement programme for financial year 2020/21 has been reduced to reflect the impact of the COVID 19 pandemic and the complexities of social distancing requirements and the impact of this on planned improvements. Savings identified within existing packages were primarily focussed on a reduction of social care hours. This may no longer be achievable within the original timescales following an extensive period of lockdown. However, people have coped by using community supports and technical solutions. This provides an opportunity to explore some of these alternative approaches to support going forward.

4.1 Accommodation

- The transition arrangements for the resettlement to community placement of one remaining long stay hospital patient has halted due to the individual no longer being assessed as ready for discharge.
- Building work on the replacement of the Gables Residential Care Home in Forfar should now have commenced. However, the impact of the COVID 19 pandemic has meant that all construction activity has been ceased. Many construction companies have also had to furlough staff resulting in the delay in project negotiations. Building warrant amendments require to be submitted and these are currently being progressed. We are liaising with Caledonia Housing to find out how quickly they anticipate construction work can commence once restrictions are eased.
- A contract has been agreed with Tus Nua Care regarding a direct award to provide residential respite for adults with learning disabilities. The direct award contains a condition requiring Tus Nua to make the property at 23 Holyrood Street, Carnoustie, accessible for wheelchair users and those who require the use of a hoist. Planning permission for an extension to the building to facilitate this has been approved but delayed due to COVID 19. It is anticipated that this will be cost neutral and contained within existing budgets.
- To date we have scoped the number of individuals who are funded out of area, and reviews for these individuals have now begun. Visits to other areas have been undertaken to look at examples of good practice to inform our thinking. Small groups of individuals who have similar support requirements have been identified and work has commenced looking at suitable models of accommodation and care for those small groups of individuals with similar needs. Some local resources have been assessed as not fit for purpose. For the group of individuals with Autism, complex need and behaviours that challenge, new accommodation needs to be considered as preferred option. This is to ensure that the environment is best suited to this group, as the wrong environment is a common cause for placement breakdown. This would also allow the creation of a resource that would be fit for purpose and ensure the design is flexible enough to accommodate future need. Capital funding would be required to support this. Any future building works would be reliant on the availability of capital funds and inclusion in Angus Council's capital plan. Some individuals have moved on to alternative accommodation, thus creating an opportunity to develop a supported accommodation model for people that have been identified as requiring this type of housing.

4.2 Residential and Non-Residential Care

- The implementation of enhanced housing management has been progressed by the Development Officer. Meetings with the relevant providers have taken place. Enhanced housing management was already in place for the majority of supported accommodation projects and a review of this has shown it is still current and being implemented. One provider will now progress the implementation of this in conjunction with the review of the block contract.
- Reviews have commenced for all high cost out of area packages. Cases have been identified for further in depth review and once complete will be presented at the High Cost Care Panel for ratification. There has been a shift in focus from the review of low cost to high cost care packages resulting in an overachievement of the 2019/20 savings target for high cost care packages with work ongoing to ensure the 2020/21 savings target is achieved. The savings target for 2019/20 was £200k but the achieved saving was £259k. Work has commenced to research the use of Technology Enabled Care solutions, identifying good practice models that enable individuals to become more independent and subsequently to require less staff support. The costs of any equipment and the potential impact of this equipment on staffing resources is currently being explored to identify any potential efficiencies.
- In relation to the review of low cost care packages £14k was achieved in 2018/19 the full target saving. A provisional target of £25k was assigned to the review of low cost packages in 2019/20 and 2020/21. However, upon completion of the review the actual saving achieved in 2019-20 was £8k. As the review is now complete, no further savings from low cost care packages are likely to be achieved unless the use of technology enabled care is enhanced to support any reduction in physical support hours.

5. ENGAGEMENT

Engagement is important to ensure all stakeholders are effectively involved in the planning, development, delivery and continuous improvement of services. We have a duty to empower those receiving public services by involving them in the design and delivery of services and we know that good quality services should be designed with and for people and communities. By working with stakeholders we aim to ensure the range of services which are delivered reflect local needs and priorities. Engagement is therefore key to updating the Learning Disability Improvement Plan and our approach to this has been informed by the National Standards for Community Engagement.

Throughout March and April 2020 we had planned to deliver 4 engagement events across Angus, one each in Forfar, Arbroath, Montrose and Carnoustie. These should have been open to all members of the public, as well as parents, carers, supported people, staff and a variety of stakeholders in order to provide an opportunity for people to be engaged and involved, to be listened to and to have their views and opinions heard. They were planned to encourage open, honest discussions and a range of materials such as a presentation and an information and feedback sheet (available in user friendly formats) were developed to support these sessions. These events were publicised on the AHSCP website, facebook and intranet. Unfortunately due to the COVID 19 pandemic these events were cancelled.

Prior to the cancellation of the engagement events, several events were held for key staff. A survey was made available to all members of the public and staff on the AHSCP website. Supported people, carers and family members were also sent individual letters inviting them to the planned engagement events. The letter included a link to the survey which they were invited to use to feedback their views. The survey was available for several weeks and 58 responses were received prior to the survey closing. Due to social restrictions caused by the COVID 19 pandemic we are unable to reschedule face to face events. The survey has therefore be reopened and stakeholders have been informed and encouraged to provide feedback to inform the draft improvement plan.

This approach has supported individuals and communities to be at the heart of service planning, delivery and review and to have the opportunity to be involved in the planning, development, delivery and continuous improvement of services.

Feedback from the engagement activities will be used to inform a draft of an updated Learning Disability Improvement Plan that will be brought to the IJB board in August 2020. In line with the national engagement standards, it is intended that the draft plan will then be available to the general public and all key stakeholders for further comment prior to being finalised.

6. FINANCIAL IMPLICATIONS

The overall financial planning environment over the coming years is extremely challenging and it is vital that the AHSCP use all available resources as effectively and efficiently as possible. The learning disability priority improvements are focussed on actions to mitigate the current and future challenges that the service is facing and to meet the growing pressures on a sustainable basis from limited resources. Specific pressures include containing the effect of inflationary pressures and managing the increased demographic pressures on service delivery.

As noted in other IJB reports (e.g. report 21/19, Strategic Financial Plan), the IJB still needs to resolve funding issues associated with complex / shared care packages with NHS Tayside. Due to the COVID 19 pandemic the savings target associated with the review of high cost care packages has been reduced from £183k in 2020/21 to £92k to reflect the complexities of social distancing requirements and the impact of this on progressing planned improvements. An assessment of the financial benefits is illustrated in Table 5 below.

Table 5

| Financial Commitments as at May 20 | 2019/20 | 2020/21 | 2021/22 | Total 2020-22 |
|------------------------------------|---------|----------------|---------|---------------|
| | £k | £k | £k | £k |
| Demographic growth | 300 | 200 | 200 | 400 |
| Inflation | 420 | 420 | 420 | 840 |
| Total | 720 | 620 | 620 | 1240 |
| Financial Benefits as at May 20 | 2019/20 | 2020/21 | 2021/22 | <u>Total</u> |
| | £k | £k | £k | £k |
| Overnight Support | 110 | 39 | 0 | 39 |
| Review of high cost care packages | 259 | 92 | 180 | 272 |
| Review of low cost care packages | 8 | 0 | 0 | 0 |
| Review of block contracts | 40 | 40 | 40 | 80 |
| College Support | 35 | 0 | 0 | 0 |
| Total | 452 | 171 | 220 | 391 |
| | | | | |
| Overall Financial Position | | <u>2020/21</u> | 2021/22 | <u>Total</u> |
| | - | £k | £k | £k |
| Annual Shortfall | - | 449 | 400 | - |
| Cumulative Shortfall | - | 449 | 849 | 849 |

^{*} Inflation is projected at 3%

The intention is that the learning disability priority improvement programme is to help the service and the IJB manage pressures associated within learning disabilities. From the table above it can be seen that the current financial position remains challenging. Good progress is being made although this does not cover all the identified pressures. Ultimately the shortfall in the

table above is a constituent part of the overall shortfalls that the IJB is currently projecting for the duration of the Strategic Financial Plan as described in report 15/20.

These figures will be used to inform future iterations of the IJB's Strategic Financial Plan.

7. CONCLUSIONS

The learning disability priority improvement actions continue to be progressed in order to address current challenges facing the service and to implement efficiency and sustainability actions in response to inflationary and demographic challenges. This paper highlights the impact of the COVID 19 pandemic on the improvement programme and the financial saving targets. It highlights the current position and seeks approval for the revised financial assumptions within this paper and the development of an updated learning disability improvement plan which reflects our future priorities.

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