

# Agenda



## Cabinet Member for Adult & Community Services

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Date: Friday, 18 March 2016

Time: 10.00 am

Venue: Cabinet Member's Office

To: Councillor P Cockeram

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Item		Wards Affected
1	<u>MTRP Business Cases Decisions 2016-17</u> (Pages 3 - 28)	All Wards

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# Report

## Cabinet Member for Adult and Housing Services

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### Part 1

Date: 18 March 2016

Item No: 1

**Subject** MTRP Business cases decisions 2016-17

**Purpose** To agree the proposed business cases for 2016- 17

**Author** Chris Humphrey

**Ward** All

**Summary** The business cases included in this report were developed by the adult social care team supported by the BIP team to meet the budget reduction requirement for the financial year 2016-2017. However the nature of the change will mean that some of the work spans 2 or 3 years

All of the complex work contained in the business cases will be delivered as projects and will be monitored through the governance structure within the People Portfolio. Progress will then be reported against qualitative and quantitative objectives and targets as contained in the individual business cases attached.

There will be a reduction in the staff count as a result of some of the proposals outlined in the business cases; the detail is as follows-

- Rationalisation of the Internal Mental Health Service- 4 FTE
- Development Officer Post- 1FTE
- Internal Supported Living- 1FTE
- Homecare 3FTE

**Proposal** To agree to progress the business cases as detailed in this Report

**Action by** Chris Humphrey

**Timetable** Immediate

Scrutiny has been consulted on the business cases and appropriate engagement and timely consultation with stakeholders will take place as part of implementation to ensure that the impact on individuals is recognised and understood.

**Signed**

## Background

The Social Services and Wellbeing Act Wales will come into force on the 6th of April 2016. The Act is the largest single piece of legislation undertaken by Welsh Government. Ministers describe the Act as a once in a lifetime transformation of social care.

However, the Act is about much more than Social Services, It is about the well-being of all citizens. The Act focusses on how those who plan, organise and deliver services should work with all people. Therefore the legislation is relevant to all areas of the Local Authority, Health, Police and the third sector. The key underpinning principle of the Act is the empowerment of citizens and the primacy of individuals and families looking for their own solutions in their own communities. Social Services should be a last resort when adults cannot safely sustain their well-being without intervention.

To meet these challenges social care has to be delivered in a different way and the savings and changes included in the business cases will help to drive the change. The business cases set out within this report are essentially concerned with implementation of the act, ensuring equity of service provision and promotion of independence but will also ensure sustainability of social care by reducing costs

The business cases included in this report were developed by the adult social care team supported by the BIP team to meet the budget reduction requirement for the financial year 2016-2017.

All of the complex work contained in the business cases will be delivered as projects and will be monitored through the governance structure within the People Portfolio. Progress will then be reported against qualitative and quantitative objectives and targets as contained in the individual business cases attached.

<b>SSA06</b>	<b>Review &amp; Reconfigure Third Sector Contracts</b> - To review contracts with third sector organisations to identify opportunities for improved delivery.	<b>£ 250 , 000</b>
<b>SSA03</b>	<b>Promoting Independence - LD Service Development and Reviews</b>	<b>2017-18 £531, 000</b>
<b>SSA02</b>	<b>Reassessments in Mental Health</b> - Continuation of current reassessment of packages	<b>£200,000</b>
<b>SSA12</b>	<b>Rationalisation of internal Mental Health Day Service Provision.</b>	<b>£120, 000</b>
<b>SSA01</b>	<b>Appraisal of internal supported living facilities</b>	<b>£25, 000</b>
<b>SSA14</b>	<b>Improving the efficiency of Homecare and Extracare service</b>	<b>16-17-£114, 000 2017-18-£90, 000</b>

There will be a reduction in the staff count as a result of some of the proposals outlined in the business cases; the detail is as follows; it is hoped that these reductions in staff numbers will be achieved either through natural turnover of staff or Voluntary Redundancy.

- Rationalisation of the Internal Mental Health Service- 4 FTE
- Development Officer Post- 1FTE
- Internal Supported Living- 1FTE
- Homecare 3FTE

## **Financial Summary**

The financial summary is as MTRP informal cabinet briefing 18<sup>th</sup> December 2015

## **Risks**

The council has faced decreasing budgets over a number of years and all services have been reduced as a result. Adult social care is a statutory service and has tried to work creatively within the budget constraints to continue to offer service to a reduced number of service users using a range of options-it currently outsources 90% of the direct service provision.

The risks to each individual business case are outlined within the pack and mitigation included where possible. Part of the work in 2015-16 has been to explore risk and staff ability to work with and manage a higher level of risk.

## **Links to Council Policies and Priorities**

The proposals are based on the approach outlined in the Corporate Plan, the MTRP and they link to the Adult Social Care Commissioning Strategy which outlines the direction of travel for adult social care in Newport.

## **Preferred Option**

To formally agree the proposals as outlined in the individual business cases attached at Appendix A

## **Comments of Chief Financial Officer**

The savings included within this report are as agreed in the budget report. In order to realise the full year savings, work to implement will need to start at the earliest opportunity, this includes savings that have been deferred into 2017/18. One-off costs, including redundancies, as detailed in the business cases, will be funded from the Invest to Save reserve

## **Comments of Monitoring Officer**

It is noted that the business cases the subject of the Report are a direct result of the proposed implementation of new legislation which comes into force in April, the Social Services and Wellbeing (Wales) Act 2014. This legislation which aims to transform social care imposes duties upon Welsh authorities and will present many challenges. It is noted from the Report that it is anticipated that the job cuts can be realised through voluntary redundancies and natural staff turnover. If this is not the case then Council policies relating to redundancies and redeployment must be adhered to.

## **Staffing Implications: Comments of Head of People and Business Change**

There are potential direct staffing implications as a result of this report. In line with the Council's MTRP proposals have been made in a number of areas to deliver on the savings target for 2016/17. The intention is to manage this through a process of voluntary redundancies and redeployment opportunities where possible. For all proposals with direct staffing implications appropriate consultation will need to be held with staff and trade unions and in line with the Council's policies.

## **Comments of Cabinet Member**

These proposals detailed in the business case are fully supported.

## **Equalities Impact Assessment**

All relevant proposals have a completed FEIA

## **Consultation**

Scrutiny have been consulted on the business cases and appropriate engagement and timely consultation with stakeholders will take place as part of implementation to ensure that the impact on individuals is recognised and understood.

Dated: 18 March 2016

## Medium Term Revenue Plan Proposals - Business Case – SSA06

<b>Service Area</b>	Social Services
<b>Proposal Title</b>	<b>Review and reconfigure Third Sector Contracts</b>
<b>Version</b>	7
<b>Proposal Summary Description</b>	<p>Social Services commission 20 organisations within the 3<sup>rd</sup> sector to provide a range of preventative and community based support services for vulnerable people in Newport.</p> <p>However, there has not been a review of these services for a considerable amount of time, meaning that some services may no longer meet the needs of Newport's population.</p> <p>The way in which services have previously been commissioned, has led to some services being duplicated across the sector.</p> <p>This proposal will look to review these services and remodel how they are commissioned, in order to:</p> <ol style="list-style-type: none"> <li>1. eliminate duplication</li> <li>2. ensure value for money</li> <li>3. streamline our commissioning processes</li> <li>4. ensure we meet our statutory obligations</li> <li>5. ensure synergy across the sector</li> <li>6. continue to meet the requirements of Contract Standing Orders</li> </ol>
<b>Impact on Performance</b>	<p>Some commissioned services offer low level preventative support that stop people needing social work intervention. If these services were to not exist, then there would likely be an increase in the number of referrals to our duty social work teams.</p> <p>Most commissioned services are operating at capacity, and operational teams are finding it challenging to refer into services due long waiting lists. This means that service users are not always getting the support they need, when they need it.</p>
<b>Impact on FTE Count</b>	<p>There may be an impact on staffing within voluntary organisations, as some contracts we have with providers may change.</p> <p>Providers, who are currently delivering services, may find themselves not providing the same service post April 2016, due to service</p>

	reconfiguration and competitive tendering. This may have an impact on staff employed within the 3 <sup>rd</sup> sector.
<b>Impact on other Service Areas</b>	<p>There may be an impact on other service areas that commission services from the same 3<sup>rd</sup> sector organisation e.g. Supporting People. This review will need to ensure a joined up approach with such areas and partner organisations. As part of this work, the project team will look at the implications and mitigate where possible.</p> <p>The review could also have a detrimental impact on the cross sector partnership working if we decide to make any changes to our 3<sup>rd</sup> sector mental health services. The review of these services is currently being led by ABUHB on a Pan Gwent basis. However, as this project has stalled, we need to agree whether or not to include these services in this review. These services total £327,596 or 25% of the total expenditure across the 3<sup>rd</sup> sector, per annum. If we do not include these services, we may not meet our savings target for 2016/17.</p>
<b>Impact on Citizens</b>	<p>Following service reconfiguration and competitive tendering, some services may change slightly depending on if new providers enter the market.</p> <p>New service models may mean that citizens receive services in a different way.</p>
<b>Delegated Decision (Head of Service/Cabinet Member/ Cabinet)</b>	Cabinet

<b>Savings (£)</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
	250,000	0	0

<b>Implementation Costs (- £)</b>			
<b>Revenue – Redundancy/Pension</b>	0	0	0
<b>Revenue – External consultants</b>	0	0	0
<b>Revenue - Other</b>	0	0	0
<b>Capital – Building related</b>	0	0	0
<b>Capital - Other</b>	0	0	0
<b>Implementation Cost - Total</b>	0	0	0

**Current Position**



## **Current expenditure**

We currently commission £1.29 million of services across 20 organisations in the third sector. Services commissioned broadly fall into the following service categories:

\*Some organisations provide services across different service categories (however there are only 20 organisations providing services in the 3<sup>rd</sup> sector that we commission)

## **Internal services**

There are some internal services that have recently been developed such as the Community Connectors service that will be considered within the context of this review to ensure there is no duplication.

We have new legal requirements in the new Social Services and Well Being (Wales) Act, however there are different approaches that can be taken in order to meet these requirements e.g. do we continue to commission an independent advocacy service or do we utilise social workers and our own staff to deliver this function. This review will identify solutions to such issues.

### **Phase 1**

Phase 1 of the third sector review was implemented in 2014/15 (for 2015/16 savings) and involved asking all 3<sup>rd</sup> sector providers to identify efficiencies within their existing contracts.

### **Phase 2**

This phase involves considering 3 options to achieve the targeted change

## **Key Objectives and Scope**

The scope of the project is to review all 3<sup>rd</sup> sector contracts that are commissioned by social services

### **Objectives**

1. **Eliminate duplication** – currently a service user may have multiple organisations supporting them, with multiple visits from different providers, delivering similar services
2. **Ensure value for money**
3. **Streamline our commissioning processes** – by having multiple contracts with the same provider,
4. **Ensure we meet our statutory obligations** - the new Social Services and Wellbeing (Wales) Act places new duties on local authorities in relation to the 3<sup>rd</sup> sector\*. We need to ensure we commission effective services to meet our new legal obligations
5. **Ensure synergy across the sector**
6. **Ensure we can meet the growing demand**

*\*Local Authorities must promote the availability of care, support and preventative services from third sector organisations, as well as promoting the development of social enterprises*

## **Options considered**

**Option 1 – Reduce all contracts**

**Option 2 – Decommission some contracts to achieve savings**

<b>Option 3 – Remodel service provision across the 3<sup>rd</sup> sector based on service categories</b>	
<b>Key Proposal</b>	
<b>Recommended option – Option 3</b>	
<b>Required Investment</b>	
<ul style="list-style-type: none"> <li>• Commissioning and Contracts Team (Inc. Brokerage).</li> <li>• Support to deliver from the business improvement team</li> <li>• Support from operational social work teams</li> <li>• Business Wales to help facilitate a consultation event</li> <li>• Procurement team to tender for new services</li> </ul>	
<b>Key Risks</b>	
<ol style="list-style-type: none"> <li>1. Challenges from third sector agencies who may be reluctant to change</li> <li>2. Smaller organisations who may struggle to compete against larger, more experienced organisations in competitive tendering</li> <li>3. Complaints from service users and/or carers from potential changes in provision</li> <li>4. Consultation with service users and carers has not taken place due to extremely tight timescales</li> <li>5. Changes will need to be politically acceptable due to political alliance with some organisations across the city</li> <li>6. Timescale in which change has to be implemented in order to realise service redesign and efficiency savings</li> </ol>	
<b>High Level Milestones and Timescales</b>	
Speculative notice issued	October 2015
Procurement Gateway Board approval as to process	October 2015
Provider Meetings	October 2015
Specification & squid completed	October 2015
Tender completed for sign off including Legal	October 2015
Tender issued on Bravo e-portal and noticed on Sell2Wales	October 2015
Closing Date for receipt of tenders	January 2015
Tenders opened	January 2015
Qualification/squid evaluated by (this could include a consensus meeting for questions that are weighted and therefore need to be scored)	January 2015
Method Statement issued to Project Team	January 2015
Final consensus meeting and assessment	January 2015
Report with recommendations approved to be approved by the Procurement Gateway Board	January 2015
All tenderers informed whether successful or not	January 2015
Initial Contract Meetings	February 2016
Implementation 'Go Live' Date	May 2016
<b>Fairness and Equality Impact Assessment completed</b>	
Yes	

## Medium Term Revenue Plan Proposals - Business Case – SSA03

<b>Service Area</b>	Adult Social Services
<b>Proposal Title</b>	<b>Promoting Independence – LD Service Development and Reviews</b>
<b>Version</b>	<b>9</b>
<b>Proposal Summary Description</b>	<p>As a further continuation of the Promoting Independence and Choice projects, to update the re-assessment of LD service users within the community, incorporating reviews of existing provision and development of wider market and community options.</p> <p>The updated reviews will concentrate on the social aspect of current care packages with a focus on outcomes for service users promoting independence and choice.</p> <p>This will complement the prevention and early intervention agenda by promoting independence and avoiding more costly interventions in the future.</p> <p>One of the key themes is to re-direct currently commissioned services to community solutions and to enable people with learning disabilities to capitalise on their own purchasing power.</p>
<b>Impact on Performance</b>	<p>There will be a positive impact on performance as this proposal renews focus and will ensure the attainment of review targets.</p> <ul style="list-style-type: none"> <li>• Continuation of the modernisation of LD services with a sustainable operating model</li> <li>• Continued focus on independence – closing cases when an individual no longer has an eligible need should be seen as a success</li> <li>• Maintains focus on needs of citizens and their carers and ensures equality between all adults who receive care</li> <li>• Lower cost</li> <li>• Increase in choice, flexibility and range of provision for service users, families and carers</li> <li>• Sets framework for deploying resources to achieve objectives making best use of all sectors</li> <li>• Efficiency and innovation</li> <li>• Development of local and community based provision</li> </ul>
<b>Impact on FTE Count</b>	None

<b>Impact on other Service Areas</b>	<p>This proposal is complementary to / has links with other service plans and strategies: Adults Commissioning Strategy – Social Care and Wellbeing Act</p> <p>Continued development of the transitions process in partnership with Children &amp; Family Services will be required. Continued development of a more joined up approach re: commissioning the voluntary / third sector.</p> <p>Development of local and community based provision</p>
<b>Impact on Citizens</b>	<p>There will inevitably be a short term impact on service users and their families, many of whom will have accessed the same services for a prolonged period of time. Any changes to this routine will be unsettling and may be subject to opposition.</p> <p>It is important, therefore, to ensure that appropriate time is built into the project plan to enable staff to work individually with service users and their families on their outcomes.</p>
<b>Delegated Decision (Head of Service/Cabinet Member/ Cabinet)</b>	Cabinet Member

<b>Savings (£)</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
	0	531,000	0

<b>Implementation Costs (- £)</b>			
<b>Revenue – Redundancy/Pension</b>	0	0	0
<b>Revenue – External consultants</b>	0	0	0
<b>Revenue - Other</b>	<p>Invest to Save one social worker post to deliver savings</p> <p>External resource to deliver all SS programme £150K</p>	0	0
<b>Capital – Building related</b>	0	0	0
<b>Capital - Other</b>	0	0	0
<b>Implementation Cost - Total</b>	0	0	0

<b>Current Position</b>
<p>During 2014, NCC undertook a systematic process of reassessment of service users, applying the eligibility criteria consistently for the receipt of a range of services for which they were deemed eligible against the current criteria. The process was primarily focussed on the modernisation of day services, a 2014-15 MTRP project,</p>

but impacted across the wider LD care and support sector.

The support packages for these service users now need to be reviewed and as part of this work the team will identify eligibility for 1-1 hours and the number of shared hours received within residential and supported living accommodation. Our model of support for service users within 24/7 accommodation and for those living in the community will also need to further develop and continue the modernisation agenda established in the previous projects. Some service users are already accessing a range of alternative activities including volunteering and accessing their own holidays. It is vital that initiatives like these continue to be promoted.

Once the updated reviews have been completed, people living in residential and supported living accommodation will be encouraged and supported to purchase alternative services, accessing other integrated community based activities. The aim of this work is to diversify provision to enable service users to have more choice in what they do and what services they access. It is anticipated that the on-going progress to further independence will continue for many of these service users.

The work to date has enabled residential and supported living providers to explore further opportunities for service users including identifying other community based alternatives. This ethos needs to become further embedded in our approach to meeting the needs of people with learning disabilities.

It has been identified from savings already made that the proposed budget reduction is both achievable and proportionate, given that the eligibility of service users has already been tested as a cohort. This work has already resulted in a reduction or change of service for many users. The continuation of this work will provide additional savings to meet the target £531,000.

Service users will be reviewed for both their current eligibility and the support levels that can realistically be achieved through an outcome focussed approach. This project is a continuation of two successful projects that have been delivered - 'eligibility' and High Cost placements' - putting structures and financial modelling tools in place that have enabled financial benefits to be clearly identified. Key to success is governance, accountability and the capacity of the team to deliver. Relevant to this business case is also the potential impact of the new Social Care & Well Being Act due to be introduced in April 2016. Some of the key elements which relate to this Business case are:

- Co-production – involving users and carers in the design and operation of services
- Promote Social Enterprises, co-operatives, user led services and the Third Sector
- Promoting well -being and supporting outcomes that help to achieve these outcomes

#### **Eligibility**

- focus on enabling services – not a deficit model of care – meeting personal outcomes within the well-being framework
- Person centred – co-productive
- Eligibility status based on individual need and not on the person
- Focus on people's strengths and abilities as well as on needs and barriers
- Eligibility is distinct from financial assessment

#### **Direct Payments**

- Must be made available in all cases where they enable personal well-being outcomes to be achieved
- Must explore all options for supporting individuals to make a direct payment (overcoming capacity issues re employment, etc.)

### **Key Objectives and Scope**

The aim of the project is to ensure equity of service provision across adult services and to further develop support models for adults with learning disabilities and their carers. This will be achieved by updating the assessment and review process, ensuring that service users can maximise their independence, and exercise choice by using their own purchasing power to access community and social opportunities. The review and move towards independence and choice will reduce the cost of services to the authority delivering the saving as outlined above.

The key objectives are:

- Reassessing and reviewing in line with eligibility
- Remodelling the service provision for service users
- Working with external providers to create a new and more cost effective model for service delivery
- Continuation of training and awareness for front line staff in the implementation of the new SSWB Wales Act

The enhanced focus on prevention and early intervention will ensure that individuals can access services at an appropriate level to meet their needs, will support carers in their caring role and prevent crises from arising. Directing resources at 'preventative' activities and/or early intervention will ultimately be better for our service users and their carers, as it maintains independence and brings benefits to the service by reducing cost.

### **Options considered**

#### **Option 1:**

Continue the current provision

#### **Option 2:**

Progress the on-going review and reassessment of all LD clients and identify and support alternative services to meet their needs.

- To review current placements to release the saving
- To update the assessment of Learning Disabled service users using an outcome focussed approach to promote independence and choice.
- To identify opportunities for collaboration with the private and third sectors to develop a wider range of opportunities for service users.

### **Key Proposal**

#### **Option 2:**

Progress the on-going review and reassessment of all LD clients and identify and support alternative services to meet their needs.

### **Required Investment**

- Project management support
- Capacity in Adult Social Services to continue the reassessment and review of all learning disability service users

The delivery of this business case proposal is reliant on implementation from within the ALD Team (interconnected to implementation of SSA11, SSA01, SSA03 and potential impacts of SSA09). To successfully achieve these objectives, the ALD Team will require 1 x FTE Social Worker on a fixed term 12 month contract from January 2016. This will be applied for from 'Invest to Save' funding as to achieve this significant level of interconnected savings is only possible with an investment in resource due to the scale of assessment and implementation required.

**Key Risks**

Lack of capacity within the staff team to update assessments and support service users to identify alternative provision. The team will also need to incorporate applications to the Court of Protection for tenancy, finances and other related issues to ensure that the council meets the requirements of the Supreme Court Judgement (Cheshire West Case ). This is to be considered in line with other service delivery changes (see required investment and links to SSA11, SSA03 and potential impacts from SSA09)

- Not enough capacity in the voluntary / third / private sector to fill the gap in services
- Opposition from service users and families
- Managing change for individuals – particularly those who have already experienced prior review and reduction in services
- Negative publicity for the Local Authority
- Resistance from some internal and external stakeholders
- Challenge explaining programme to stakeholders in the context of efficiency
- Familiar services are likely to change
- Increase in complaints and appeals

**High Level Milestones and Timescales**

- Continue the process of re-assessments with service users Sept 15 – April 16
- Discussions with external providers Sept 15 - Nov 2016
- Identify alternative provision Sept 15 – Nov 16
- New services in place 1st April 2017

**Fairness and Equality Impact Assessment completed**

Yes

<b>Service Area</b>	Adult & Community Services
<b>Proposal Title</b>	<b>Reassessments in Mental Health - remodel of services for people with mental health conditions.</b>
<b>Version</b>	<b>9</b>
<b>Proposal Summary Description</b>	To reduce the number of people dependant on mental health services by embracing Social Services and Well-being (SSWB) Act 2016. The act sets out to significantly reduce the dependency on adult social care by, amongst other things, investing in services to support well-being for people with a mental health condition. This proposal is challenging and will require a significant change in the way the authority provides care to people with enduring mental health conditions. This is a continuation of reassessments completed and achieved within 15/16.
<b>Impact on Performance</b>	The performance of the authority will improve as service users are supported to gain greater independence choice and control over their lives.  The authority will also be able to meet its duties as set out in the Social Services and Well-being Act. If the authority does not make these changes it will be acting unlawfully.
<b>Impact on FTE Count</b>	None
<b>Impact on other Service Areas</b>	By embracing the reduction in dependence as defined by the new SSWB Act, other areas of service provision across the authority will be impacted by potential increase in number of visits / contacts i.e. community services.
<b>Impact on Citizens</b>	There will inevitably be an impact on service users whose services and packages of care change. It is important, therefore, to ensure that appropriate time is built in to enable staff to work individually with service users on alternatives, re-provisioning and re-ablement back to independent living in line with their identified needs and outcomes.
<b>Delegated Decision (Head of Service/Cabinet Member/ Cabinet)</b>	Cabinet Member

<b>Savings (£)</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
	200,000	0	0

<b>Implementation Costs (- £)</b>			
<b>Revenue – Redundancy/Pension</b>	0	0	0



<b>Revenue – External consultants</b>	0	0	0
<b>Revenue – Other</b>	0	0	0
<b>Capital – Building related</b>	0	0	0
<b>Capital – Other</b>	0	0	0
<b>Implementation Cost - Total</b>	0	0	0

### Current Position

*'It may seem logical that if people can break down or become ill, then they can also overcome their problems and recover. Yet providers of mental health services often fail to emphasise such positive possibilities for people with mental health problems—particularly those with the most severe diagnoses. Psychiatric services often emphasize maintenance rather than recovery, and many survivors report that receiving a psychiatric label has been severely detrimental to their efforts to lead a worthwhile and enjoyable life and contribute to others.*

#### **THE RECOVERY VISION FROM MENTAL HEALTH SERVICES AND RESEARCH : A BRITISH PERSPECTIVE**

Newport City Council (NCC) and partners are currently working towards delivery of an outcome model of care based on the recovery model. This has been successful, and there is a flow through of new individuals who access care for a limited time and then exit the service.

Some service users will remain within the system as despite on-going efforts, their mental health conditions are enduring. However as a general principle a recovery star model is adopted and successful.

There are a number of service users who are maintained by NCC. These are individuals who have been in contact with the service for many years and have not recently been given the appropriate access to the recovery support that they need. For some people, recovery will be limited. These include those who are receiving social care services under section 117 of the Mental Health Act.

Projects in 2014/15 and 2015/16 were established to promote independence and choice for service users within Adult Social Services. These projects were designed to ensure services were sustainable and they met the vision as set out in the NCC's adults Commissioning Strategy.

As a precursor to this business case, service users who access day services have been reviewed for both their current eligibility and what care levels could be realistically achieved if care becomes outcome focused (Day Opportunities Phase 2). High cost placement reviews have also taken place (Reassessment Mental Health) to achieve initial savings in 15/16. These processes have indicated that further savings can be made, if the service as a whole moves to an outcome model of care, and reflects the ethos of the Social Services and Well-being Act. NCC now needs to review the eligibility of all people funded through Mental Health budgets to ensure that care is outcome focused and focuses on wellbeing.

### Key Objectives and Scope

The Adult Services Commissioning Strategy sets out a clear vision for the promotion, independence and wellbeing of citizens and their families through effective services.

This business case will involve:

- Developing a programme of support for service users to enable them to regain independence, including those people who have become 'stuck in the system'. The objective of which will be to reduce dependency on adult social care services including both community and residential provision.
- Work to develop community provision that focuses on recovery and not just

maintenance

This will enable:

- People who have recovered and no longer need/are eligible for mental health services to access alternative provision in the community.
- A reduction in the number of mental health service users accessing commissioned services through effective reassessment including those who can be discharged from the authorities obligations under section 117 as they have recovered.
- As a result savings of 200K can be made from a total budget of 1.5M by
- A significant reduction in residential placements and care packages
- A further review of high cost placements to ensure that outcomes are achieved with consideration of best value through more effective provider negotiations, and following regular reassessment and contract management reviews for each case.
- A continued investment will be required to manage the process and ensure that standard practice is adopted across the service.
- In conjunction with this, alternative service proposals can be further explored through community connector links to be available to people who are no longer eligible.

#### **Options considered**

Remodelling the approach to accessing mental health social care service.

#### **Option 1 – ‘Salami Slice’ Services**

There is potential to reduce provision by cutting services without remodelling the approach to actual delivery of the services.

The Council has a statutory duty to provide care and this will continue once the new act is fully implemented. The Council also has an obligation under section 117 of the Mental Health Act to provide care to people who have been detained as a consequence of their mental ill health.

Option 1 will put the authority at risk of acting unlawfully by not providing care at the point of need to those who are eligible.

#### **Option 2 - Radical remodelling of services.**

It is in the interest of the authority to develop opportunities for the well-being of people with a mental health condition, to ensure that services can be reduced or ended. This is better for the individual and will reduce the dependency on NCC. It is also something that is required by the SSWB Act.

It is realistic to achieve sustainable savings with a radical rethink of how services are provided on this model. It should be noted, that this significant budget reduction in real terms is only achievable by a radically remodelled service, that results in current service users become less dependent on traditional social care provision. NCC will need to think and act differently, from senior managers through to those staff working on the front-line.

This will involve the authority as a whole, investing resource in well-being of people with a mental health condition, including those who have enduring mental health conditions.

#### **Key Proposal**

Remodel the way NCC and the community as a whole provides services for people with a mental health condition to reflect the Social Services and Well-being Act.

Actively promote the ethos of the Social Services and Wellbeing Act to the private

and thirds sector as an opportunity to develop low cost and micro payment service alternatives for people who no longer have an eligible care service.

#### **Required Investment**

- Focused effort from social workers to identify how service users can individually and collectively be supported to recover.
- Support from the business improvement team to manage the programme
- Support from contract and commissioning to manage the Community Investment into services that meet the needs of people with a mental health need who are not eligible for a service.

#### **Key Risks**

The scale of the remodelling is significant and will require the organisation as a whole to support the operational mental health teams as well as the business improvement teams. Will require a significant change in culture of both NCC staff and wider health partners.

A very significant reduction in budget over 2 years will require project to be given the right level of senior sponsorship from both NCC and health

#### **High Level Milestones and Timescales**

- Public consultation in line with MTRP consultation process
- Development and implementation of a plan to remodel service provision
- Go live April 2015 in line with the Act.

#### **Fairness and Equality Impact Assessment completed**

An initial assessment has been completed and will be reviewed as the proposal develops.

### **Medium Term Revenue Plan Proposals - Business Case SSA12**

**Service Area**

Adult & Community Services

<b>Proposal Title</b>	<b>Rationalisation of Internal Mental Health Day Services Provision</b>
<b>Version</b>	<b>8</b>
<b>Proposal Summary Description</b>	As an extension of the existing 'Promoting Independence and Choice' Programme carry out a review of internal mental health day service provision.
<b>Impact on Performance</b>	Through implementation of the preferred option, the mental health day service will continue to be available for people with an eligible need. Relocation will enable Day Services as a whole unit to perform more effectively and efficiently from one site (Brynglas).
<b>Impact on FTE Count</b>	3.62 FTE (filled/vacant)
<b>Impact on other Service Areas</b>	By embracing the reduction in dependence as defined by the new Social Services and Wellbeing Act (SSWB), other areas of service provision across the authority will be impacted by potential increase in number of visits / contacts i.e. community services.
<b>Impact on Citizens</b>	Increased number of people with a mental health condition not eligible for service therefore utilising services and opportunities within the community.
<b>Delegated Decision (Head of Service/Cabinet Member/ Cabinet)</b>	Cabinet Member

<b>Savings (£)</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
	120,000	0	0

<b>Implementation Costs (- £)</b>			
<b>Revenue – Redundancy/Pension</b>	125,000	0	0
<b>Revenue – External consultants</b>	0	0	0
<b>Revenue - Other</b>	0	0	0
<b>Capital – Building related</b>	0	0	0
<b>Capital - Other</b>	0	0	0
<b>Implementation Cost - Total</b>	0	0	0

<b>Current Position</b>
Mental Health Day Services are currently delivered from a traditional building base, Kensington Court. The service is available for people with a mental health condition who have an eligible need including a small proportion of forensic referrals and people with a sectioning order. Newport is the only local authority in the Gwent area that provides services in this way. Other local authorities have increased levels of alternative provision, or commissioning with the third sector.
Through Day Opportunities Phase 1, all day services budgets (Learning Disabilities,

Mental Health and Older People) are now combined (15/16). However, current manpower for Kensington Court can be separated out as £191k. Additional supplies and services spend attributed to Kensington Court result in a total budget position of £218k. Current manpower is 11 employees (8 FTE).

As part of a separate continuing project, Modernisation of Day Opportunities Phase 2 a further budget reduction of £270k (reduction in manpower of circa 14FTE Day Services employees) is agreed for implementation by 31<sup>st</sup> March 2016, following agreement February 2015. This is achievable following the completion of reassessments of service users across all day service client groups (learning disabilities, older peoples and mental health services):

- Reduced level of daily attendance
- Application of critical and substantial levels for eligibility
- Re-provision to outcome focused / more suitable alternatives through modernisation of service and promoting independence
- Recovery methods where appropriate
- Community based alternatives where there is not an eligible need

### **Key Objectives and Scope**

Following the approach to centralise and standardise service delivery across internal day services and client groups, including the closure of Ringwood House and relocation of older peoples day services to Brynglas Adult Training Centre (ATC) from Parklands Residential home (Day Opportunities Phase 1); a similar approach is now required for the delivery of mental health day services.

### **Options considered**

Option 1 – Relocation and Reduction of Kensington Court Service

Preferred option

Additional to the savings identified as part of Day Opportunities Phase 2, further savings would be available by maintaining the internal mental health service and relocating to Brynglas ATC annexe. Following the development of services at Brynglas ATC, specifically for people with profound multiple learning disabilities, the annexe building is vacant.

Alternative city centre locations have been researched and considered but are not viable. A preferred alternative city centre location of Charles Street Community Learning Centre (CSCLC) was also considered. Capacity would be available at CSCLC as it is likely to see a significant reduction in courses and accommodation uptake due to reduced funding for Coleg Gwent. Relocation to a city centre venue would improve accessibility for people as Kensington Court is situated in a residential area outside of the city centre. Other support services are also within proximity of CSCLC. However, due to changes in the provision and services at CSCLC, this option is not preferred at the present time.

The preferred option of relocating to Brynglas ATC would bring all day services onto one site, meaning extra resilience and opportunities within staff teams and rationalise the additional support services such as transport and catering. Part of the existing service located at Kensington Court is a smaller section of the Older Peoples Day Service. As part of Day Opportunities Phase 1 it has already been confirmed that the remaining service users, on completion of older peoples reassessments, will transfer to the group at Brynglas ATC to create a more viable and vibrant group at one location.

This option would also result in a reduction in the number of posts required. This would mean that, in addition to the savings made from Day Opportunities Phase 2, there would be additional savings of £84,122 made by the deletion of the following posts. Due to the consultation of Day Services as one staff group, these deletions do not necessarily relate directly to Kensington Court where more than 1 (like for like)

post exists across the whole service:

- 1 x FTE Day Services Manager post (£36,965)
- 0.84 FTE Cook (£16,060)
- 0.43 FTE Kitchen Assistant (£7,361)
- 0.54 Caretaker (£9,202)
- 0.81 Administration Assistant (£14,534)
- Residual supplies and services budget for 2016/2017 would be used for essential improvement and modernisation work at Brynglas ATC Annexe and would then be reduced based on the profiled of the £120k total into 2017/2018
- The total savings target for Day Opportunities Phase 2 and Review of Internal Mental Health Day Services of (£390k) £270k and £120k would be achieved through both projects collectively

The relocated service will focus on recovery and rehabilitation of service users and move away from the historical, long term reliance on traditional services.

Those identified as not having an eligible need through the reassessment process will be supported to access community located services through Community Connector engagement.

It is proposed that this option is progressed at the same time as, and as an extension of Day Opportunities Phase 2 (October 2015). All staff within day services are pooled as one collective team, and will already be formally consulted as part of the service wide restructure for Day Opportunities Phase 2. If consultation on the Mental Health Day Service relocation is delayed to April 2016, this would result in a 3<sup>rd</sup> phase of formal consultation and restructure for the staff group (following first phase October 2015 for April 2015 implementation).

#### **Option 2 – Closure of Kensington Court (£120k)**

This option is not feasible.

The full closure of Kensington Court would bring an additional saving (post Day Opportunities Phase 2 restructure) of £190k. Sign posting to community services would apply to some service users although re-provision to alternatives would also need to be considered for those with a more substantial level of need. Re-provision costs would reduce initial savings attached to closure of Kensington Court and an enhanced level of commissioning with the third sector would be required to support for re-provisioning and move on of existing service users. This would reduce potential savings to £120k.

#### **Key Proposal**

Option 1 - To centralise all internal day service provision by the relocation of the mental health day service to Brynglas with a focus for mental health on recovery and rehabilitation.

#### **Required Investment**

BIPT Resource  
Service Manager Delivery and Implementation  
HR resource

#### **Key Risks**

Relocation and re-provision of mental health day services would pose risks and challenges for service users with a serious health condition and those who have been sectioned under the mental Health Act. Service users have already been consulted as part of Day Opportunities Phase 1 and the reassessment process about

changes to service approach, delivery and renewed emphasis on recovery and rehabilitation.

Other sections of the authority need to respond accordingly to increased demand on community connector and community based services. This is highlighted in all areas of change within Social Services in relation to the new Social Services and Well Being Wales Act, 2014 and the agenda for prevention and well-being services, and that services are only provided by social services where they 'can and can only' be met by the social services.

Inherent in this proposal is the need to promote and support community based provision and this would require voluntary and community sector to develop alternative options for service users who do not have an eligible need as identified through the assessment and review process. There is a risk that the MTRP proposals to review and rationalise Third Sector funding may impact on the development of new opportunities available for those service users

Capacity of HR team to support proposals.

#### **High Level Milestones and Timescales**

Staff consultation commences 8<sup>th</sup> October 2015 (in line with Day Opportunities Phase 2)

Notification to service users 9<sup>th</sup> October 2015

Staff consultation concludes 30<sup>th</sup> November 2015

Staff notice periods January – 31<sup>st</sup> March 2016

Service relocation for 1<sup>st</sup> April 2016

It is proposed that this option is progressed at the same time as, and as an extension of Day Opportunities Phase 2 (October 2015). All staff within day services are pooled and will be formally consulted as part of the service wide restructure for Day Opportunities phase 2. The delay of the Kensington Court relocation would result in a 3<sup>rd</sup> phase of formal consultation and restructure for the staff group. The timelines and savings profile are adjusted and brought forward accordingly to progress in line with Day Opportunities Phase 2.

#### **Fairness and Equality Impact Assessment completed**

Yes

<b>Service Area</b>	Adult & Community Services
<b>Proposal Title</b>	<b>Appraisal of Internal Support Living Staffing</b>
<b>Version</b>	<b>9</b>
<b>Proposal Summary Description</b>	To review the Management structure of Supported Living.
<b>Impact on Performance</b>	Services should improve as a result of the proposal
<b>Impact on FTE Count</b>	1 FTE
<b>Impact on other Service Areas</b>	Services should improve as a result of the proposal
<b>Impact on Citizens</b>	Services should improve as a result of the proposal
<b>Delegated Decision (Head of Service/Cabinet Member/ Cabinet)</b>	Cabinet Member

<b>Savings (£)</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
	25,000	tbc	tbc

<b>Implementation Costs (- £)</b>			
<b>Revenue – Redundancy/Pension</b>	25,000	0	0
<b>Revenue – External consultants</b>	0	0	0
<b>Revenue - Other</b>	0	0	0
<b>Capital – Building related</b>	0	0	0
<b>Capital - Other</b>	0	0	0
<b>Implementation Cost - Total</b>	25,000	0	0

<b>Current Position</b>
<p>Supported living schemes provide homes for adults who have learning disabilities, allowing people to live as tenants within the community. The council currently commissions places with various partners across the city as well as having a small in house service.</p> <p>The council's Supported Living Agency is a registered service (with CSSiW) which comprises of four tenanted houses (two owned by Charter; two Newport City Homes). Each person has their own tenancy with the relevant housing association. The team of city council residential services officers' support the tenants 24/7; the degree of support will differ from tenant to tenant depending upon their individual needs.</p>
<b>Key Objectives and Scope</b>
<ul style="list-style-type: none"> <li>To restructure the management team within the in house Supported Living Agency</li> </ul>
<b>Options considered</b>
<ol style="list-style-type: none"> <li>Status quo – continue with current structure.</li> <li>Review the management structure</li> </ol>



<b>Key Proposal</b>
Review Management Structure
<b>Required Investment</b>
£25k 'Invest to Save' monies may be required to support the implementation of the proposal
<b>Key Risks</b>
Services should improve as a result of the proposal – no key risk identified
<b>High Level Milestones and Timescales</b>
1. Consultation with staff to commence December 2015
<b>Fairness and Equality Impact Assessment completed</b>
NA

**Medium Term Revenue Plan Proposals - Business Case SSA14**

<b>Service Area</b>	Adult & Community Services
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<b>Proposal Title</b>	<b>Improving the efficiency of our Reablement and Homecare Service</b>
<b>Version</b>	<b>3</b>
<b>Proposal Summary Description</b>	<p>During 2014 -15, the in house domiciliary care service was restructured and an upgrade to a hosted system (Ezitracker) for the management of the service was undertaken.</p> <p>Over the forthcoming year, the focus of work will be to ensure the service can report on the utilisation of the service on the same basis as external providers and ensuring that the focus is on using the upgraded system to efficiently deploy management and care staff.</p>
<b>Impact on Performance</b>	Implementation of the Ezitracker system will improve the efficiency of the service by removing manual and duplicative processes and also allow more efficient deployment of staff, with additional capacity being utilised for additional re-ablement work; within Extracare schemes, the domiciliary care service will be brought into line with service allocation across the city.
<b>Impact on FTE Count</b>	3 FTE
<b>Impact on other Service Areas</b>	None
<b>Impact on Citizens</b>	Potential for more capacity within reablement service; within Extracare schemes, service to tenants will be brought into line with service allocation elsewhere and with ironing and laundry service withdrawn unless identified care need.
<b>Delegated Decision (Head of Service/Cabinet Member/ Cabinet)</b>	Cabinet member

<b>Savings (£)</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
	114,000	90,000	0

<b>Implementation Costs (- £)</b>			
<b>Revenue – Redundancy/Pension</b>	75,000	TBC	0
<b>Revenue – External consultants</b>	0	0	0

<b>Revenue – Other</b>	0	0	0
<b>Capital – Building related</b>	0	0	0
<b>Capital – Other</b>	0	0	0
<b>Implementation Cost - Total</b>	75,000	TBC	0

### Current Position

The in-house domiciliary care service was restructured during 2014/15. The nature of the service was changed as part of this so that across the community a re-ablement service is now provided, with long term packages of care provided by the council's in-house team in the four Extracare schemes only.

The restructure coincided with an upgrade of the Ezitracker Management System which once fully implemented will allow more efficient deployment of care staff, produce utilisation data on same basis as external providers and should enable the management team to be deployed to undertake brokering of care packages to reduce pressure on social work teams.

At present within Extracare schemes, the level of care and support provided is potentially in excess of that allocated to other recipients of domiciliary care with tasks such as laundry, ironing and night time support provided where there is not an eligible need.

### Key Objectives and Scope

1. To utilise the upgraded Eezitracker system to more efficiently deploy care staff, ensuring there is additional reablement capacity.
2. To produce data to accurately report contact time metrics, on same basis as external providers.
3. To ensure that service is allocated consistently in Extracare as it is for other service users across the city
4. To review and implement new arrangements across the service to ensure improved contact time.

### Options Considered

Option 1

### Key Proposal

#### Option1

To fully implement the upgraded management system (Eezitracker) including the use of hand held devices for care staff. This will allow care staff to go direct to their service users, not needing to collect rotas daily from the civic centre. Further the system will calculate travel claims reducing administration/monitoring.

Development of performance metrics allowing capacity/utilisation comparison with external providers and to highlight where further efficiencies can be achieved. This will identify staff capacity that can be utilised for reablement work referred from community based social workers or reductions in staffing.

Implementing the system to reduce the amount of management time required to intervene in rotas and cover arrangements, allowing them to have greater role brokering packages of care for noncomplex contracts. This will mean less reliance upon social work team and that service users will be brokered out in a more timely way.

Undertake reviews of care plans for Extracare tenants to ensure that there is an eligible need for service, in line with allocation elsewhere. It is likely that this will have

<p>an impact on quantity of laundry and ironing that is currently provided in the schemes.</p>
<p><b>Required Investment</b></p>
<p>See separate already approved business case for hand held devices that required for implementation of Ezitracker.</p>
<p><b>Key Risks</b></p>
<p>Implementation of Ezitracker – this has taken longer than expected and further delays will impact on progress.</p> <p>Changes to travel arrangements and recent changes in legislation for non-office based staff could require changes to Travel and Subsistence Policy are required in order to implement the changes.</p> <p>Extracare schemes – implementation of new rotas took place in 2013/14 to focus care around care packages. Whilst bringing service allocation in line with other service users is equitable, further changes to staffing will need consultation with Linc and the tenants.</p>
<p><b>High Level Milestones and Timescales</b></p>
<p>Implementation of Ezitracker January - May 2016.  Review of Reablement team to ensure improved contact time  Reviews of care plans Extracare tenants to be undertaken by April 2016  Discussions and consultation with Linc and tenants following outcome of reviews April/May 2016  If appropriate consultation with night time staff Extracare to begin Summer 2016  Implementation of new Extracare staffing in two schemes to reflect outcome of care plan reviews Autumn 2016  Implementation of new Extracare staffing in two further schemes Spring 2017</p>
<p><b>Fairness and Equality Impact Assessment completed</b></p>
<p>Yes</p>