

Decision Maker: Adult and Community PDS Committee

Date: 30th November 2011

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **UPDATE ON RESTRUCTURE - ASSESSMENT AND CARE
MANAGEMENT TEAMS IN ADULT AND COMMUNITY
SERVICES**

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Ward: Borough- wide

1. Reason for report

As requested by PDS on 25th January 2011 this report informs Committee of the changes in performance resulting from the new structure designed to improve the response to service users agreed by the Executive on 8th December 2010.

2. **RECOMMENDATION(S)**

The PDS Committee is asked to note the progress towards achieving the objectives of the assessment and care management restructure, which were:

- a. Improve the speed of response in terms of assessment and care packages
- b. Provide advice and guidance to people not meeting the Fair Access to Care Services (FACS) criteria
- c. Embed the Reablement service to support people to regain their independence
- d. Explore and increase the joint pathways with the NHS

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Excellent Council.
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Financial

1. Cost of proposal: N/A Costs are already in the budget
 2. Ongoing costs: Recurring cost. Staffing costs as set out in 4 below
 3. Budget head/performance centre: Assessment and Care Management (825)
 4. Total current budget for this head: £4,855,480
 5. Source of funding: Existing budget includes £232,200 externally funded from the PCT and DoH.
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Staff

1. Number of staff (current and additional): 120 approx
 2. If from existing staff resources, number of staff hours:
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Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is not applicable.
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Borough-wide services to Bromley residents, currently over 10,000 people receive social care services at a gross cost of £48,809,280.
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

3.1 The new structure based on the Customer Journey (Appendix 1) was agreed by Executive at their meeting of 8th December 2010 and was implemented on 18th April 2011.

It was designed to improve the performance of the assessment and care management service to:

- provide a faster response to those people contacting care services for assistance
- ensure those not meeting the criteria for Fair Access to Care Services (FACS) are given advice and guidance so that they can access appropriate support
- promote independence, choice and control for service users and carers
- improve speed of response to all service users and carers
- offer a re-ablement service to promote independence and reduce expenditure
- provide younger adults with a physical disability and older people a seamless care management service.
- increase the opportunities for joint work and integrated care pathways with NHS services

3.2 This approach is consistent with the requirements of the recent Government guidance on the transformation of adult social care (LAC(DH) 2009 1) and meets the Council's Core Operating Principles, Portfolio Plan, Building a Better Bromley and ACS Business Plan objectives.

3.3 Prior to the restructure there were duplications by care management and occupational therapy staff resulting in longer waiting times for assessments. The teams were divided by age rather than need with three separate duty teams responding in slightly different ways (Appendix 2). The table below shows the majority of service users and carers were assessed within 28 days meeting the required target but with acceptable waiting times for packages falling just below the end of year target.

Table 1 Assessment Timescales for previous year

	National Indicator	2010/ 11 Target	2010/ 11 Actual
Acceptable waiting times for assessment (within 28 days)	NI 132	90%	96.3%
Acceptable waiting times for care packages	NI 133	95%	91.1%
Carers receiving needs assessment or review and a specific carer's service, or advice and information.	NI 135	25%	31.6%

Restructure

- 3.4 The new structure is streamlined and supports the customer journey (appendix 3). The implementation was successful and staff were involved through-out the process. During the development stage front line staff were seconded into the various projects being managed by the Supporting Independence in Bromley (SIB) Project Manager to ensure they acquired the knowledge and skills needed to work within the new structure. They were also involved in reference groups and were joined by their colleagues providing opportunities for staff to contribute in determining how the new teams would operate.
- 3.5 The new structure was implemented over a two week period to coincide with the opening of the library and offices at the Walnuts. This minimised disruption to staff who were moving from the Old Town Hall and ensured the service remained open during this period thus minimising the impact on service users, carers and partners.
- 3.6 The SIB Project Team and Senior Management visited Partnership Boards where statutory and voluntary partners, services users and carers were present to provide details of the new structure and implementation date.
- 3.7 All Service Users directly affected by the new structure were prepared for the changes by their allocated worker and were advised of the contact details of their new team and worker prior to the implementation date.
- 3.8 A range of National Indicators have ceased to be recorded due to a new Outcomes Framework being introduced, this means we are collecting data and monitoring differently from 2011/12 (This is covered in the ACS mid year performance report presented on the same agenda). The table below reflects the new outcomes and early indications are that we are now assessing and confirming services within 10 days for 72% of people who make contact with Adult Social Care.

Table 2 Assessment Timescales for current year

Outcome 3: Ensuring that people have a positive experience of care and support	2011/12 Target	Quarter 1	Quarter 2
% of people who make contact with Adult Social Care who have their service confirmed within 10 working days.	New	69%	72%
Carers receiving needs assessments or review and a specific carer's service or advice and information	25%	28.68%	27.66%
My Life Portal total number of visitors	New	1893	2523

Short Term Intervention

- 3.9 The Contact and Assessment Team (COAT) is co-located with our telephone answering service, Bromley Social Services Direct (BSSD). Together they provide an effective universal service giving information, advice and guidance to those who can meet their needs from mainstream services along with a proportionate assessment of need. This has reduced the number of people unnecessarily going through a full assessment. Where a full assessment and further support is required the team refers to either re-ablement or the complex care team.

3.10 The My Life Web Portal is designed to provide information, advice and guidance regarding available support and services. The benefit of instant information being available for people is part of the universal offer. The portal, which includes a website and information regarding mainstream services, equipment, support available from care services and how to make contact, was introduced in May with an official launch being held the week commencing 31st October 2011. As can be seen from the table above there were 2523 visits to the site since going live in May. The Portal is still being fully developed and the impact in terms of reducing demands on BSSD are therefore yet to be realised and are being closely monitored.

3.11 The Princess Royal University Hospital Care Management team continue to assess in-patients and arrange services for those needing them on transfer from hospital, with many people being transferred directly to the Reablement Team described below. The team has also taken on the role of single point of contact for all out of borough hospital referrals ensuring consistency of approach. With the additional responsibilities the team has managed to maintain their low delayed discharge cost of between £2,000 and £5,000 per year.

3.12 The Reablement Team provides a combination of assessment and personal assistance to those who would usually be provided with domiciliary care. This active service promotes independence and assists people to regain confidence, including those with high levels of need. As can be seen from the table below the service is showing improvements in outcomes for service users since April this year in the numbers of people who remain at home and who leave re-ablement with no ongoing service. This service is currently under review.

Table 3 Reablement

Key national and local indicators:	10/11 Actual	11/12 Quarter 1	11/12 Quarter 2	11/12 Target
Proportion of older people (65 plus) who were still at home 91 days after discharge from hospital into re-ablement/rehabilitation	221/278 (79.5%)	80.97%	n/a	80%
%age of people leaving re-ablement having no ongoing care package.	NEW	101 70.63%	144 72.73%	New

3.13 The Community Assessment and Rehabilitation Team (CART) has been strengthened and works alongside the Re-ablement, Hospital, COAT and Complex Care Teams to provide specialist rehabilitation to enable people to continue to live at home. The work of this team remained unchanged in terms of the restructure but it was recognised that strengthening the team with additional posts would support the future plans to reduce the intermediate care bed capacity based at Orpington Hospital. As can be seen by the table below there has been significant improvements in the length of days a patient remains in an intermediate care bed since 2008.

Table 4 Intermediate Care

Length of stay(days)	2008/09	2009/10	2010/11
Orpington	39	42	33
Elmwood	39	42	30

Complex Care

- 3.14 Some people referred to adult social care have complex and variable needs which require a flexible service, regular contact and interventions. Usually this is associated with complex health needs. The Complex Care Teams are based in the East and the West of the borough to maximise joint work with the GPs and the community NHS staff in Bromley Healthcare.
- 3.15 This service includes specialist staff such as Stroke Care Co-ordinators, Consultant Lead Practitioners, Drug and Alcohol Team Care Managers and Care Management from the Physical Disabilities and Sensory Impairment Team (PDSI) so that people receive assessments, ongoing support and reviews by staff with the relevant specialist knowledge.
- 3.16 There are further opportunities to develop services for those with complex needs. Work is progressing with Bromley Healthcare to explore options for an integrated service with District Nurses and other community NHS staff working alongside care management staff. Through these developments it is believed that we will be better placed to meet complex needs in a more cost effective manner avoiding duplication of effort and resources.
- 3.17 The Review and Brokerage Team became the Co-ordination Team in the restructure and has the combined functions of completing the annual reviews for stable packages of care, Brokerage for services, managing care placements, support planning and direct payments for those receiving a funded service.
- 3.18 The team leads on encouraging the take up of direct payments for those who want to use and seeks innovative ways of meeting needs through the support planning process so that there is a wider range of services available to all. There has been an increase in the take up of direct payments and but more work is needed if the 40% target is to be reached. All new service users are being given the option to use a direct payment to purchase the support they require.

Table 5 Direct Payments

Key national and local indicators:	10/11 Actual	11/12 Quarter 1	11/12 Quarter 2	11/12 Target	12/13 Target	13/14 Target
Of the people who are eligible for a direct payment; the percentage who did receive a direct payment.	NEW	210 (12.4%)	349 (20.5%)	40%	45%	50%

- 3.19 Despite more face to face reviews and the changes to the charging policy the team have managed to improve on the numbers of reviews from 87.4% (7225) in 2010/11 to a projected end of year figure of 98.9% (4085). Work is underway to consider more efficient ways of managing the workload of the team to ensure that the service is responsive to service users.
- 3.20 Adult Safeguarding remains the responsibility of all teams; the complex care teams are responsible for those cases requiring detailed assessment and those with complex issues requiring a longer term intervention. The new structure has provided opportunity for consistency of approach in safeguarding and it is currently being reviewed to ensure most effective use of resource.

Conclusion

There are improvements in information and advice being given at the front door resulting in people being more appropriately directed to mainstream services. Fewer people being referred and assessed go on to receive services and there is an increase in service users leaving reablement with no services. With the reablement assessment process comes

confidence that the service user is provided with an accurate service to meet needs and there is a positive impact on the domiciliary care budget and there are fewer admissions in to care homes. There is an increase in personal budgets and the take up of direct payments is beginning to show signs of improvement.

3.21 There are challenges in terms of the new processes and this has directly impacted on fewer carers assessments being recorded and completed in the COAT. There are also concerns regarding the number of people receiving a direct payment although this is an area that has shown some improvement.

3.22 The service is undergoing a review to consider whether additional efficiencies can be achieved in terms of fine tuning processes and integrating with Health.

4. POLICY IMPLICATIONS

Promoting the Independence of Adults and Older People is one of the key objectives set out in the Council’s strategy “Building a Better Bromley”. Promoting choice, personalisation and Independence is the overall aim of the ACS Portfolio Plan. The new structure will improve performance on these objectives as well as those set out in the Government’s White Paper “Equity and excellence: Liberating the NHS”, in particular building partnership and integration with NHS community services.

5. FINANCIAL IMPLICATIONS

5.1 Efficiency savings in management costs of £39k per annum has been achieved by this restructure.

Non-Applicable Sections:	Legal, Personnel
Background Documents: (Access via Contact Officer)	Transforming Adult Social Care Local Authority Circular(DH) (2009) 1 White Paper “Equity and excellence: Liberating the NHS” 2010 “Assessment and Re-ablement Service” report to A&C PDS 29 th September 2009 “Supporting Independence in Bromley Programme - Changes to Care Management Arrangements” Report to A&C PDS and A&C Portfolio Holder 21 st Sept 2010 “Proposed Restructure – Care Management and Assessment” Report to Executive 8 th December 2010