Report No.	
ACS 12005	

London Borough of Bromley

Agenda Item No.

**PART 1 - PUBLIC** 

Decision Maker:	Adult and Community Policy, Development and Scrutiny Committee		
Date:	26 <sup>th</sup> January 2012		
Decision Type:	Non-Urgent	Non-Executive	Non-Key
Title:	UPDATE ON RE-AE	BLEMENT SERVICE	
Contact Officer:	Tricia Wennell, Head of Assessment and Care Management - Care Services Tel: 020 8313-4140 E-mail: tricia.wennell@bromley.gov.uk		
Chief Officer:	David Roberts - Assistant Director - Adult and Community Services		
Ward:	Borough- wide		

#### 1. <u>Reason for report</u>

This report gives the Policy Development and Scrutiny Committee an update of the performance of the Re-ablement Service. The Re-ablement Service is designed to reduce the demand for domiciliary care by improving the health and well-being of older people so that they are able to manage their activities of daily living and to achieve a saving as a result.

# 2. RECOMMENDATION(S)

2.1 The Policy Development and Scrutiny Committee is asked to consider the performance of the service and comment on the level of savings being achieved and forecast.

# Corporate Policy

- 1. Policy Status: Existing policy.
- 2. BBB Priority: Supporting Independence.

# <u>Financial</u>

- 1. Cost of proposal: N/A
- 2. Ongoing costs: Recurring cost. £927,330
- 3. Budget head/performance centre: ACS Care Services Reablement Services
- 4. Total current budget for this head: £1,079,530
- 5. Source of funding: Adult and Community Services Protfolio Budget

## <u>Staff</u>

- 1. Number of staff (current and additional): 30 FTE reablement service.
- 2. If from existing staff resources, number of staff hours:

## <u>Legal</u>

- 1. Legal Requirement: Statutory requirement. NHS and Community Care Act 1990, National Assistance Act 1948, Local Authority Circular LAC DH 2010 6
- 2. Call-in: Call-in is not applicable.

## Customer Impact

 Estimated number of users/beneficiaries (current and projected): Borough-wide services to Bromley residents currently over 8, 000 people receive social care services at a gross cost of £48,809,280. 893 people have used the reablement service since March 2010

## Ward Councillor Views

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

## COMMENTARY

The Re-ablement Service was developed in Bromley to reduce spend on domiciliary care and promote the independence of adults and older people. It had proved successful in other Local Authorities and delivered savings. The report on Assessment and Reablement Service to the 29<sup>th</sup> September 2009 ACS PDS Committee set out the business case for the service that was forecast to make savings in the second year of operation.

Care assistants, known as facilitators, work with individuals to encourage and support them to recover their confidence and ability to manage their own activities of daily living such as washing, dressing and going to bed. These staff work alongside the service users rather than carrying out these tasks for them.

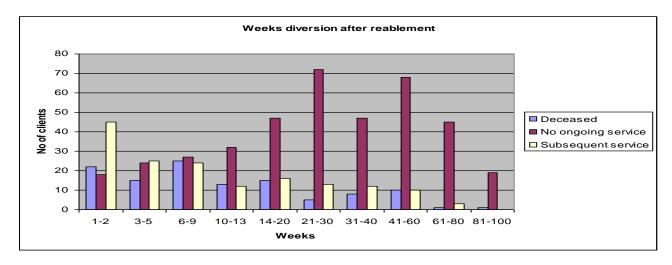
The service can last up to six weeks, and in exceptional cases can last longer. No charge is made for the service due to government regulation.

A review has been carried out by an independent expert on Reablement who played a leading role with the Department of Health in the implementation and evaluation of this service as it was established across England and Wales.

The draft report of the review shows that the service is working well and is based on sound assumptions, judging that the outcomes generated by the service are amongst some of the better levels seen across England. A number of helpful recommendations and observations to improve the service and its efficiency have been suggested, such as extending the service to people with existing packages of domiciliary care (rather than just new service users) and streamlining the existing performance management framework.

#### **Current Performance**

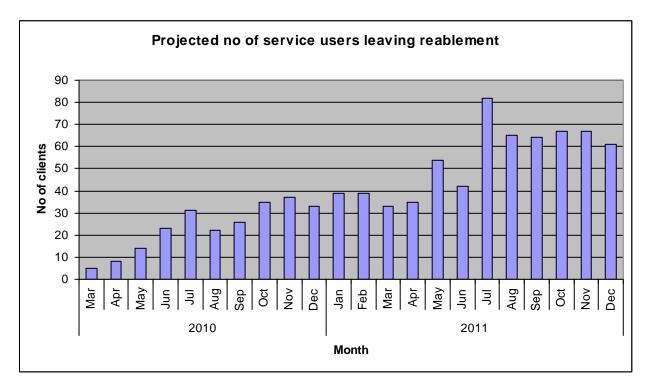
The long term impact with the number of people needing or not needing care services after starting reablement is shown in Table 1. This demonstrates that the reduction in service requirement does last. Some authorities have found that the impacts can last up to two years with benefits for individuals and budgets. These figures are drawn from all those who have used the service rather than from a cohort so the numbers do vary from week to week.



#### Table 1 Individual impact of Reablement

The table below shows the total number of service users going through re-ablement from when it was set up in February 2010. As expected the number of service users going

through re-ablement has increased as planned, although it has not quite achieved the level of 70 people each month as anticipated in the business plan. There was an increase in the summer of 2011, due to the implementation of the new structure in care management and assessment teams, but this has not reached the original target level. We are reviewing the performance to assess whether the model needs to be changed with a lower target or whether there are practical steps that can be taken to achieve the target level.



## Table 2 Numbers of people finishing reablement

Table 3 below gives the total hours provided to individual service users, from 18/4/2011, indicating that most people receive a service in the 14 hours to 60 hours bands. This reflects a number of people who are diverted from needing support fairly quickly with a service lasting about two to three weeks and those who have a service of about six weeks, sometimes needing a double handed package.

The average contact hours per completed package of reablement is 29 hours which is lower than the average in a recent study by the Department of Health which had a range from 35 hours to 99 hours with an overall average of 60 hours.

There are a few instances when people have needed larger packages to achieve an improvement in their independence. Those requiring double handed care due to a substantial need often require three to four visits a day and so as you would expect there are a few people with packages well above the Bromley average of 29 hours. Assisting carers who are supporting people with high levels of disability does result in improvements that benefit the carer as well as the service user and also reduce costs. It should be noted that the number of admissions to care homes has reduced in this financial year and the use of reablement for people with high levels of need has played a part in this success.

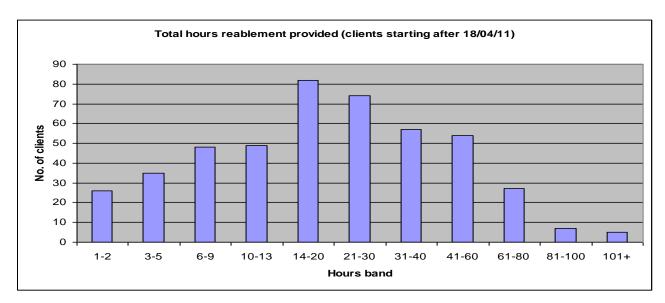


Table 3 Total size of reablement package provided to individuals

Table 4 below shows the service users by age group with the highest number in the 81 to 90 years category and a significant number over 91 years. The case example in Appendix 1 does show the benefit of the service to a lady in her 101<sup>st</sup> year. This age profile reflects that of service users.

Advanced age is no barrier to the benefits of re-ablement, it is quite striking that in the 91 to 100 age group almost half regain their independence to the extent that they no longer require services.

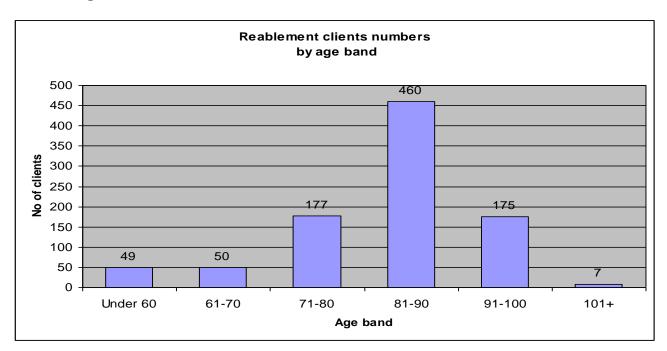


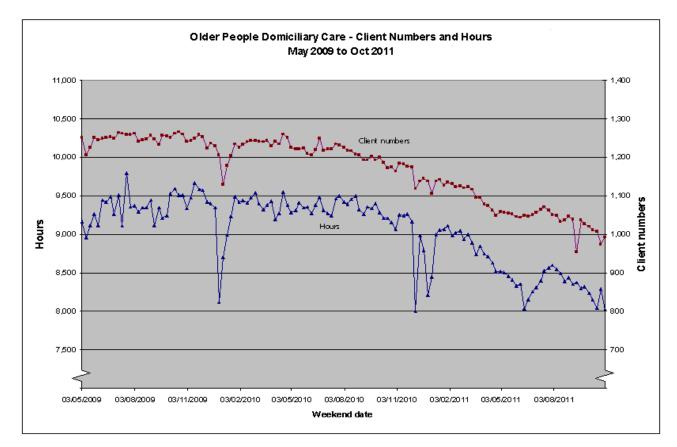
Table 4 Age Bands of Service Users

The outcomes for the service users going through reablement are shown in Table 5 below. As you can see 617 services users (69%) who went through reablement received no ongoing services at the end.

#### Table 5 Outcomes from Reablement

Outcome	Number
No ongoing service required	617
Ongoing Care Package	250
Deceased	26
Total	893

Table 6 shows the total number of service users aged over 65 years in receipt of a domiciliary care service or using a Direct Payment along with the number of hours of domiciliary care provided. Both lines have a downward trend over the period that reablement has been in operation.



#### Table 6 Domiciliary Care Numbers of Service Users and Hours

## 4 POLICY IMPLICATIONS

Promoting the Independence of 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. Reablement is designed to achieve these goals and the high level of people leaving the service with no requirement for ACS services demonstrates that these goals are being achieved.

### 5 FINANCIAL IMPLICATIONS

The business model for the service, based on an establishment of 25 fte facilitators, assumed that £300k savings could be delivered in 2011/12 through implementation of the Reablement service, which increases to £500k in 2012/13. The model made certain assumptions around how the service would operate, including the number of clients using the service (70 per month), the number of hours each client would receive in reablement (average of 28 hours), the numbers that would be successfully reabled and therefore would have no ongoing care package or would require a reduced service, the expected length of diversion from a subsequent care package (1 year) and the average saving per client that could be achieved (£2,620).

Re-ablement savings are being delivered against the budget but the full £300k has not yet been achieved due to the slow start. The latest budget monitoring figures project a saving in 2011/12 of £47k with full years of £438k. The number of people going through re-ablement is increasing and in the longer term officers are confident that further savings will be delivered.

Reablement is expected to reduce spend on domiciliary care, but two other factors may offset potential savings which are the increase in numbers of older people needing a service and that domiciliary care expenditure increases as services are diverted from the use of care homes.

Non-Applicable Sections:	Legal, Personnel
Background Documents: (Access via Contact Officer)	NHS & Community Care Act 1990 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 ACS PDS 29 <sup>th</sup> September 2009 "Supporting Independence in Bromley Programme" Report to ACS PDS 22 <sup>nd</sup> June 2010 "Supporting Independence in Bromley Programme - Changes to Care Management Arrangements" Report to A&C PDS and A&C Portfolio Holder 21 <sup>st</sup> Sept 2010 "Proposed Restructure – Care Management and Assessment" Report to Executive 8 <sup>th</sup> December 2010 Prospective Longitudinal Study, Appendix E, CSED Department of Health 2011

# **Appendix 1**

## Case Example

Mrs R is 101 and lives with her daughter. She received reablement when discharged from hospital in October 2010 and subsequently had a care package of 3 visits per day of 30 minutes at a cost of £179.97 per week.

14 months later she was admitted to hospital and on discharge home reablement started with a recommendation of double handed care for transfers, e.g. from bed to chair. The Re-ablement service increased her mobility and confidence so that she only needed a package of support of 4 visits a day of 30 minutes, single handed, costing £239.96 per week.

It is quite clear that but for Reablement that she would have been placed in a care home at a cost of £450 per week and lost her independence and her opportunity to continue to live with her daughter.

## Comments from service users and carers received so far this year (2011/12)

- "I cannot praise the Re-ablement staff too highly for the consideration, courtesy, warmth and efficiency with which they have treated my husband and me. They have taken an enormous load off my shoulders at a time when I did not really know how I could go on. They have gone out of their way (and worked beyond their normal hours) to help us both. I only wish it didn't have to end." (Mr D)
- "I just wanted to write on behalf of my husband and I to thank the team for all that they did to help us. The Re-ablement team took a seamless handover and supported us during difficult times. Every single member of the team was amazing. This is a service to be truly valued." (Mrs H2)
- "The ladies you have sent to me for the last few weeks have really cheered me up. They were like a breath of fresh air and nothing seemed to bother them. I could not have managed without them, especially in the first few weeks." (Ms D)
- "I have just returned from 2 visits, Mr C and Mr H. Both have said how wonderful the girls have been and Mr H has said JW is so nice he will miss her when his reablement time is finished; they both asked me to send there thanks to the management."
- "Thank you from Ms S, to the staff in the Re-ablement department for the marvellous work they did for her. Ms S claims not to be progressed so far for independence without their help."
- "I would like to express our very sincere thanks for the excellent service you have given us in recent weeks. Your people stepped in immediately and visited Mr H three times a day and saw to his needs." (Mrs H1)
- "I found all members of the team that attended me helpful, efficient and very pleasant. It was a pleasure to have them in my home to aid me in my recovery." (Ms T)
- "A big thank you to the Re-ablement carers, who helped throughout my first six weeks back at home, when I was very vulnerable and frail. They were very jolly, chatty and bright. Thank you." (Mr R)