

# North Tyneside Council Supplementary Report to Cabinet

**Date: 12 August 2013**

## ITEM 7(e)

Title: Learning Disability  
Independent Supported  
Living Services –  
feedback from carers

**Portfolio(s):** Elected Mayor  
Adult Social Care

**Cabinet Member(s):** Norma Redfearn  
Councillor L Spillard

**Report from Directorate:** Community Services

**Report Author:** Jacqui Old

(Tel: (0191) 643 7003)

**Wards affected:** All

### PART 1

#### 1.1 Purpose:

The purpose of this report is to inform Cabinet of the views and direct feedback from the North Tyneside Cornerstone Carer Reference Group about proposed changes to Independent Supported Living (ISL) services for people with learning disabilities.

This report relates to a further report for the Cabinet meeting of 12 August 2013 - Changes to Learning Disability Supported Living Services – Update.

#### 1.2 Recommendation(s):

It is recommended that Cabinet:

- (1) Note the views and responses expressed in this report in sections 1.5.
- (2) Agree that the Adult Social Care, Health and Wellbeing Sub Committee of Overview and Scrutiny continue to monitor this work as it develops, and
- (3) Receive further feedback from the Cornerstone Reference Group in future reports about changes to ISL services in North Tyneside.

#### 1.3 Forward Plan:

It has not been practicable to give 28 days notice of this report. However, it is required to be considered without the 28 days notice being given because of the urgency to include the views of carers directly impacted by the proposed changes to ISL services in North Tyneside.

## 1.4 Council Plan and Policy Framework

This report is directly in support of:

- The 2010 - 2013 Sustainable Community Strategy – Priority Two and the current Council Strategic Plan, and
- The 2012 – 2015 Council Strategic Plan - Priority One; Sustaining our front line Council services within the Council, but only spending what we can afford.

## 1.5 Information:

### Background

- 1.5.1 A report was presented to Cabinet on 10 June 2013 updating on the current position with the implementation of the model to review those individuals in learning disability supported living services and the model of service delivery. This highlighted some serious concerns that had been raised by family carers and service providers on this topic. From this it was agreed to enter into further dialogue about the proposed changes with carers and family members of people currently using ISL services.
- 1.5.2 Feedback about the proposed changes to ISL services has been coordinated through a self directed carer representative group called the Cornerstone Carer Group (CCG). Council Officers and the Lead Cabinet Member for Adult Social Care have continued to work with the CCG through a smaller reference group of members of the CCG.

### Views of the Cornerstone Carer Reference Group

- 1.5.3 This section details the direct views of the Cornerstone Carer Reference Group (CCRG).

The CCRG believe that it is important that the key views and concerns of the group should be clearly documented and considered by Cabinet in order to avoid any misunderstanding during the decision making process.

The group are keen to communicate that they are committed to working with Adult Social Care and the Council to provide a mutually acceptable process for the changes.

The original plan involves geographical clustering of houses followed by a commissioning process that involved tendering by approved providers and decisions on 80% cost 20% quality basis.

The Group have identified a number of significant risks to Service Users and the Council if this procedure were to be followed.

- It has never been documented or explained in detail, so it is impossible to provide effective feedback on it.
- It has never been tabled for review during our working sessions and thus our working sessions cannot be considered “Consultation” on the proposal.
- The consultation process for the original model was not effectively targeted to the appropriate people and should therefore not be considered acceptable i.e. it remains invalid.

- One key message on record from the original flawed consultation was that concerns were raised about continuity of care. These concerns have not been taken into account in the original proposal.
- The use of tendering in the proposal completely conflicts with the principles of personalisation and choice and in doing so conflicts with the Government agenda.
- The model is finance driven and gives no consideration to service user views or user based quality standards.
- No evidence has been provided to show that savings identified in Business Plan A18 can actually be made. The group believes the business plan would not stand independent scrutiny as an effective business plan. The Business Case gives no consideration of risk to either Council or Service Users.
- Enforced change of Service Provider is a likely outcome of the original model. This is viewed as unacceptable by the CCRG for reasons outlined in the previously supplied 18 page document "Feedback to the Council and their Representatives on Documentation Supplied to the Group".
- This proposal is understood to remain central to the Social Services Service Provider Selection Strategy but is viewed by the group as being unacceptable as the primary process and should be taken off the table.

#### 1.5.4 The Future

Whilst certain of the Cornerstone's Seven Proposals are around operational issues, there are key aspects which go beyond these and require full scrutiny and endorsement. The CCRG's proposals reflect and impact on the key issues below and should be considered as part of the ISL contract:

- a. Personalisation;
- b. Choice;
- c. Incompatibility of anonymous tendering vs personalisation and choice;
- d. Continuity of Care;
- e. Minimum change and disruption;
- f. Fair review process;
- g. User and carer involvement;
- h. A care quality specification designed in conjunction with carers; and
- i. There needs to be an agreed fair and impartial appeals process developed.

#### 1.5.5 In Particular

Proposal 5 of the Seven Proposals has been accepted in principle by Social Services. In line with personalisation, this gives the Service User the choice of Provider including the option of continuity with their existing Provider if this is preferred. This is significantly different from the original Social Care Strategy outlined in 1 above and thus further work needs to be carried out to clearly document this change.

This must apply equally to those in Council commissioned services, those with personal budgets, and those setting up new services.

#### 1.5.6 Summary

In summary, whilst significant progress has been made in our joint meetings with Social Services, the group feels that the strategy needs significant further refinement followed

by full consultation of the final proposal with impacted parties, before it is fully endorsed by the Cabinet.

It is imperative that a document is produced which clearly sets out the principles, process and desired outcomes that all parties can sign off and present to Cabinet.

For future Cabinet reports the CCRG would hope to be able to agree a joint report with Adult Social Care. In the event of non-agreement, or divergence of views, we would wish to be able to table our own report.

This position has been endorsed by the Provider's representative on the CCG as follows-

"The Providers stand in complete agreement with the carers and families that the choice of Provider should rest with the person/people being supported and their family. This has been enshrined in good practice for at least 15 years and personalisation should reflect this. The cluster commissioning model as initially suggested in which a local group of houses are grouped together for commissioning purposes is not acceptable to Providers. Providers do not want to take on new work in the face of any opposition from people and their families".

#### 1.5.7 Proposal

In order to enable savings to be identified as soon as possible, the two stage review process, as identified in proposal 2 of 7 from the Group, should be restarted whilst the details of the commissioning element are further developed. Subsequent commissioning of services should await the development and Cabinet Endorsement of a mutually agreed commissioning strategy.

#### Officer Comment

#### 1.5.8 Framework Agreement and Quality – In June 2012 Cabinet authorised the Head of Adult Social Care to commence a procurement process for new supported living and community support Framework Agreements.

Framework Agreements enable the Council to select from a range of providers to deliver a particular service.

As part of this stage of procurement, 45 providers applied to join the Framework to provide ISL services. There were 27 providers eventually selected to join the Framework. This means that 18 providers did not meet the minimum threshold set by the Council and therefore the Council will not currently directly procure from those organisations for ISL services.

It is the 27 providers that form the ISL Framework, which could be asked by the Council, to complete a mini-tender exercise for the new ISL support services.

As outlined in Section 1.5.3 above, there still remains concern over the criteria that will be used in mini-tendering and if quality, as defined by the person receiving services and their carer, will be sufficiently weighted.

Council Officers and representatives from the CCRG have established a sub group to look at the developing a quality criteria that can be used in the second stage to evaluate mini-tenders.

1.5.9 Personalisation - Where a person wishes to receive support or care from a provider not part of the Framework or successful in the mini-tendering exercise, they can do so by taking the allocated amount in their Personal Budget and managing this directly, as a Direct Payment. This is in line with national policy. However as stated in Section 1.5.3 above, carers have expressed concern about this.

Continuity of Care – This has been one of the key areas of concern for carers and remains a key priority for the Officer team. It is our primary aim to do everything we can to maintain continuity of care where this is the user choice, so as to minimise any adverse impact on the person receiving services.

Many carers have told us that they want to stay with the same provider. Where people wish to do this but that provider is not successful in the mini tendering exercise or any alternative sourcing process or any subsequent negotiation by the Council, it is possible that people may be asked to consider changing their current provider.

We have committed to developing with carers, a fair and impartial appeals process. This will be available as a backstop to review the situation before any move is made towards changing provider.

As part of engagement, we have heard from some carers who are keen to look at changing their current service provider.

1.5.10 Efficiencies – Officers have supplied a paper to the CCRG outlining how the projected savings aligned to the proposed changes were calculated. Carers have requested further information about this and the Officer team have committed to continuing to refine this information for the Group.

1.5.11 Further Information – The Officer team fully acknowledges and appreciates that there are elements of the changes that are as yet unknown. These relate to the outcomes following personal reviews, agreement of Personal Budget amounts and prices for services. The team is committed to continue to work in an open and honest way with the CCRG, everyone using ISL services and providers, to manage these unknowns and is committed to a consistent and transparent review process.

1.5.12 Next Steps – It is proposed that regular updates be submitted to Cabinet that report on the progress of the changes to ISL services in North Tyneside. These updates should include the direct views of the CCRG. This recommendation is in line with recommendation (2) from the report presented to Cabinet on 12 August 2013 Changes to Learning Disability Supported Living Services – Update.

## **1.6 Decision options:**

The following decision options are available for consideration by Cabinet/Council/officer:

### Option 1

1.6.1 Cabinet can review and note the views expressed and feedback received in this report in relation to the additional report submitted on 12 August 2013 Cabinet meeting - Changes to Learning Disability Supported Living Services – Update.

### Option 2

Cabinet can ask that further work is done to develop carer feedback or Council responses.

Option 1 is the recommended option.

### **1.7 Reasons for recommended option:**

Option 1 is recommended for the following reason:

- Views are taken directly from the North Tyneside Cornerstone Carer Reference Group and have been agreed as complete for this report.

### **1.8 Contact officers:**

Scott Woodhouse, Strategic Commissioning Manager – Learning Disability and Mental Health – Tel 643 7082

Alison Campbell, Finance Business Manager – Tel 643 7038

Haley Hudson, Senior Manager Strategic Planning, Partnerships and Business Transformation, tel. (0191) 643 7008

### **1.9 Background information:**

This report relates to a further report for the Cabinet meeting of 12 August 2013 - Changes to Learning Disability Supported Living Services – Update.

## **PART 2 – COMPLIANCE WITH PRINCIPLES OF DECISION MAKING**

### **2.1 Finance and other resources**

Within the Authority's CEI Programme there is an efficiency of £500k for 2013/14 and £500k for 2014/15 against the locality based commissioning model. The £500k for 2013/14 is based on a 6 months effect of the introduction of the proposal during the financial year.

If there are delays in the implementation of the programme this would have an impact of approximately £80k for each month's delay.

This is part of an overall strategy for efficiencies in Adult Social Care. If there are delays or this is not implemented this would place pressures elsewhere in the system or on other services.

### **2.2 Legal**

The legal implications are set out in paragraph 2.2 of the substantive report and paragraph 2.5 (Equalities and Diversity Section) of this report.

### **2.3 Consultation/community engagement**

In March 2013 the CCG raised significant concerns that they had not been informed of the consultation events and did not understand the proposed changes. As a result, the CCG met on

two occasions in May 2013 with a number of Council Officers and Councillors in order to raise their concerns.

The issues raised were accepted by Council Officers and it was agreed that further work was needed. The Council agreed to halt the process. The following table presents the subsequent communication and engagement with families and carers, most of which was suggested or requested by members of the CCG or CCRG.

<b>Methods of engagement</b>	<b>Context</b>
Information sessions	ALL parents/carers were sent a letter to advise them about information sessions that were being held to discuss with people the changes to ISL services. A total of 10 sessions were held on 30 <sup>th</sup> /31 <sup>st</sup> May and 3 <sup>rd</sup> June 2013. People were able to request alternative times if they could not make the sessions.
Telephone helpline	Within the letter to all parents/carers, there was an offer of a telephone helpline that they could ring between office hours.
Meet with other carers	All parents/carers were advised of the CCRG and their next meeting.
Newsletters	A newsletter has been produced which will be circulated to all providers and ISLs houses to keep people un to date about the progress that is being made.
Website	Relevant documentation about proposed ISL changes are now available on the Council website.

## **2.4 Human rights**

There are no human rights implications arising from this decision.

## **2.5 Equalities and diversity**

To comply with the Authority's Equality Duty the Authority must have due regard to the impact of any proposals may have on those with protected characteristics as defined by the Equalities Act 2010. In fulfilment of that obligation it is necessary to undertake consultation with those affected by any proposals to change services and to take those consultation responses into account when making any decision in relation to those services.

## **2.6 Risk management**

Risks attached to the health and adult care are held on the Council's risk registers at all levels i.e. Corporate Strategic, Directorate Strategic and Operational. They are managed as part of the Council's normal risk management process and are owned across the Community Services and Public Health directorates.

## Community Services Directorate Strategic

- Responding to needs of adults at risk – medium, owned by Jacqui Old, Head of Adult Social Care

## Community Services Operational

- Personalisation agenda may result in increased costs – high, owned by Jacqui Old, Head of Adult Social Care.

### **2.7 Crime and disorder**

There are no crime and disorder implications arising from this decision.

### **2.8 Environment and sustainability**

There are no environment and sustainability implications arising from this decision.

### **PART 3 - SIGN OFF**

- Strategic Director(s)  X
- Mayor/Cabinet Member(s)  X
- Chief Finance Officer  X
- Monitoring Officer  X
- Strategic Manager Policy, Partnership, Performance, And Communication  X