

ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE:
26 NOVEMBER 2013

JOINT REPORT OF WEST LEICESTERSHIRE CLINICAL
COMMISSIONING GROUP AND THE DIRECTOR OF ADULTS AND
COMMUNITIES

HEALTH SHORT BREAKS FOR PEOPLE WITH LEARNING DISABILITIES

Purpose of Report

- 1 To provide the Adults and Communities Overview and Scrutiny Committee with an update on the progress of the Learning Disabilities Health Short Break Pilot Peripatetic Project and set out the findings in the context of future adult social care and health short break strategy development.
- 2 The Committee are asked to note the progress of the project and support the Learning Disabilities Programme Board's work in its development of a new integrated short breaks strategy.

Policy Framework and Previous Decisions

- 3 The current short breaks strategy (2008-2013) was developed in partnership with Leicester City Council, Rutland County Council and what at the time was, two local Primary Care Trusts (PCTs). The strategy identified two main ways that short breaks were provided:
- 4 Services are directly provided by the Councils or are commissioned from independent and third sector organisations.
- 5 A NHS service is provided by Leicestershire Partnership NHS Trust (LPT) and is available to people with learning disabilities from all three local authority areas.
- 6 The three Clinical Commissioning Groups (CCGs), formerly the PCTs, with responsibility for Leicester, Leicestershire and Rutland agreed to review the current residential bed based NHS provision for short breaks commissioned from LPT and pilot a peripatetic model of service to offer more choice as part of the strategy.

Current provision across Health and Social Care

- 7 The predominant model for the delivery of short breaks across health and social care is the provision of bed based residential care services. In addition, adult social care also provides short breaks through the Shared Lives Service.
- 8 Across health and social care there are seven locations offering a bed based provision with a total of 43 beds. Of these, four are provided by Leicestershire

County Council (Melton, six beds, Wigston, six beds, Hinckley, 10 beds and Coalville, six beds) and three by LPT (Rubicon Close, five beds, the Gillivers, formerly Tournament Road, five beds and The Grange, five beds) through a commissioning arrangement by the CCGs.

- 9 There were 4,143 nights available in 2012/13, with an occupancy level of 82% through LPT.
- 10 It is estimated that 216 people accessed the Council's short break residential provision in 2012-2013 at an occupancy level of approximately 76%.
- 11 Approximately 65 people accessed the Council's Shared Lives Service for short breaks.
- 12 Spend on short breaks is outlined below:

Organisation	Description	Cost
Leicestershire County Council	Bed based provision	£1,456,000 ¹
	Shared Lives Service	£29,210
	Sub total	£1,485,219
Health bed based provision contribution by CCG	East and Rutland	£290,560
	West	£587,408
	Leicester City	1,178,075
	Sub Total	£2,056,043
	Grand Total	£3,541,262

Peripatetic model

- 13 The remit of the peripatetic service was to deliver a health short break in a community setting. This could be in a person's own home or elsewhere in the community. Qualified nurses aligned to the residential bed based service undertook nursing tasks in community settings where required health tasks could not be delegated to unqualified staff. The family carer did not have to be "absent" in order to receive the short break. For example, if a family wished to go on an outing together in order to attend a wedding or a trip to the cinema, the peripatetic model would provide support for the person with learning disabilities thereby enabling the family carers to enjoy the experience without the additional caring pressures. The break offered could be from two hours at a time to several days.
- 14 The pilot ran from April 2013 until September 2013. The CCG's have agreed to continue funding the service until March 2014 as part of the exit strategy for the pilot. The current bed based residential health short break service is continuing to run unchanged with users being offered the pilot service in addition to their allocated service.

¹ amount to be treated with CAUTION, it is based on an estimate of £1,000 per week, work is ongoing to extract costs of short breaks from residential services

Eligibility Criteria for a Learning Disability Health Short Break

- 15 As part of the Health short breaks review, a clearer definition of a learning disabilities Health short break was agreed with all stakeholders. An eligibility criterion for the service has also been developed for use in 2014/15. Those with learning disabilities entitled to a Health short break that have complex needs and/or challenging behaviour are most likely to require this service. Those with learning disabilities with no significant health needs have other short break service options commissioned by local authorities. The eligibility criteria for a learning disability short break is a person:
- who lives in Leicester, Leicestershire or Rutland;
 - resides with an unpaid carer;
 - who is over the age of 18 years;
 - who has a multiple and profound learning disability;
 - who has a learning disability with significant challenging behaviour;
 - who has a learning disability with significant physical health care needs;
 - may have some additional complex social care needs;
 - whose needs cannot be met in an alternative local setting.

Uptake of the project

- 16 All families of the current 62 users of the bed based service were offered access to the peripatetic pilot service in addition to their scheduled bed based service. No families wished to participate at first but after much engagement from LPT staff, 14 families registered for the pilot. This included two people who are using adult social care services for the first time having come through the transition from children's services.
- 17 Of the 14 who registered interest, seven families received the service:
- Family 1 had approximately 450 hours. However this was only background support and the peripatetic staff were able to carry out other work whilst being available should this individual require immediate support;
 - Family 2 had 80 hours over 12 weeks;
 - Family 3 had 132 hours over 12 weeks;
 - Family 4 had 50 hours over 12 weeks;
 - Family 5 had 36 hours over 12 weeks;
 - Family 6 had 15 hours over 12 weeks. 18 hours were planned but the individual concerned was ill for one visit;
 - Family 7 had 98 hours over 12 weeks.
- 18 Of the seven participating families two are ordinarily resident in Leicestershire – families 3 and 4.
- 19 In total, 861 hours of support were delivered across the seven families, of which 182 hours were delivered to County residents representing 21% of the total support offered.

Spend on the peripatetic pilot

- 20 Transformation funding from CCGs was approved for the project of £168,000 for 2013/14. This was to provide a facilitated engagement exercise and a pilot peripatetic service to increase the choice to users of how the service was delivered. £114,500 has been used to staff the peripatetic service and £12,062 has been used to fund the carers' organisation CLASP (the Carers Centre [Leicestershire and Rutland]) to assist with the engagement exercise. Each family who received the peripatetic service did so in addition to their bed allocation for the financial year.

The Engagement Process

- 21 It is important to note that at this stage an engagement process including a pilot of the peripatetic service has taken place and not a full consultation process. The purpose of this engagement process was to introduce the peripatetic service to carers to find out if this service was something they would like to access in the future. All families were given the opportunity to feedback on the service in the form of a questionnaire and in face-to-face conversations with staff. Feedback from all those who took part in the peripatetic pilot was positive - no negative answers to the questionnaires were received.
- 22 Previous projects reviewing the LPT residential bed based health short break service continue to affect the way current carers view any proposals for change. Early feedback suggests that the bed based option is valued by carers and is not something that they want to change or lose.
- 23 Although the pilot has now been concluded users of the short break service will still be offered the opportunity to access the peripatetic service until the end of March 2014.
- 24 The full engagement report (attached as Appendix A) has been circulated to carers and it is clearly recommended in the report that service users would like to see this new service offered as well as the current residential service.
- 25 Engagement has been undertaken with the Learning Disabilities Partnership Boards in Leicester City and Rutland and the Learning Disabilities Better Health Group for Leicester, Leicestershire and Rutland.

Governance structure

- 26 The project is operated through a multi-stakeholder board. This includes representatives from health and social care, Healthwatch, self advocates and carers. It reports to the Strategic Contract Performance meeting held between the LPT and the CCGs. It has a structure whereby one of the workstreams is led by carers of current users and they have funded assistance from CLASP to gain their full engagement in the work.
- 27 The project reports to the Integrated Commissioning Board through the Learning Disabilities Programme Board which has delegated responsibility for the oversight and development of the short breaks strategy.

Recommendations from the Learning Disability Programme Board

- 28 A proposal for the future of the peripatetic service was presented to the Learning Disabilities Programme Board on 28 October 2013. The Board identified concerns regarding the cost of the service relative to the number of users and the unrealistic expectations that were being raised for families. It would not be financially sustainable to support the current bed based model and existing allocations to families in addition to a peripatetic model. No financial efficiencies were evidenced.
- 29 The Board recommended further scoping work is carried out to understand the need of current and future users and explore models of short break provision under an integrated health and social care offer.

Next Steps

- 30 The findings from the pilot will be presented at the Boards outlined on page 2 of the Engagement Report, as set out in Appendix A, to inform future strategies on short breaks across health and social care for people with learning disabilities.
- 31 The Learning Disabilities Programme Board, as a delegate board of the Integrated Commissioning Board, will undertake additional scoping work on the need and provision of short breaks across Leicestershire.
- 32 The existing bed based provision provided by Health and the County Council will continue until appropriate alternatives are developed. There will be no change to short breaks services without full engagement with families and those who use the service.

Background papers

Short Breaks Strategy:

http://www.leics.gov.uk/index/social_services/asc_support/social_care_disabilities_and_sensory_loss/learning_disability/how_can_we_support/where_you_live_and_short_breaks/having_a_break/short_breaks/ld_shortbreaks.htm

Circulation under the Local Issues Alert Procedure

None.

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List of Appendices

Appendix A - Engagement report – Health short breaks for people with learning disabilities

Relevant Impact Assessments

Equal Opportunities Implications

- 33 LPT undertook an equality analysis on the Learning Disability Health Short Breaks – pilot peripatetic model. This was a standing agenda item at each bi-monthly joint project board meeting and at the last two meetings no members highlighted any updates to be added.

Partnership Working and Associated Issues

- 34 The short breaks strategy is being overseen through the Learning Disability Programme Board, after delegation from the Integrated Commissioning Board. The membership of the Learning Disability Programme Board includes the County Council and the CCG's. In addition, the Learning Disability Programme Board oversees the administration of the Pooled Budget, through a Section 75 agreement. The Pooled Budget includes all adults with a learning disability who are eligible for joint funding for services from health and adult social care.
- 35 The development of a new integrated short breaks strategy will need to incorporate the challenges of the CCG's having responsibility for services across Leicester, Leicestershire and Rutland. Due regard will be given to the impact of an integrated strategy on the provision of health short breaks to people who are ordinarily resident in Leicester City and Rutland.