NASS
Northamptonshire
Adult Social Services

Adults Social Care Briefing – 6th November 2018

Anna Earnshaw - Exec Director Adults, Communities & Wellbeing

Content

- Legal Context
- Financial Overview
- Service Overview
- Service Development
- Risks and Challenges
- Discussion

Adult Social Services - Our legal Framework

- Care Act 2014 Replaced & revoked
  - 15 areas of Primary legislation
  - 24 areas of Statutory legislation
- Mental Health Act 1983
- Mental Capacity Act 2005
- Human Rights Act 1998
- Community Care Regulations 2003
- Serious Crime Act 2016

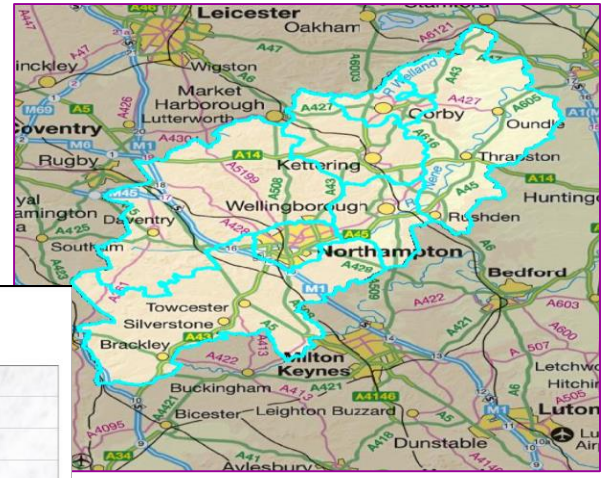
Adult social care – Care Act Duties

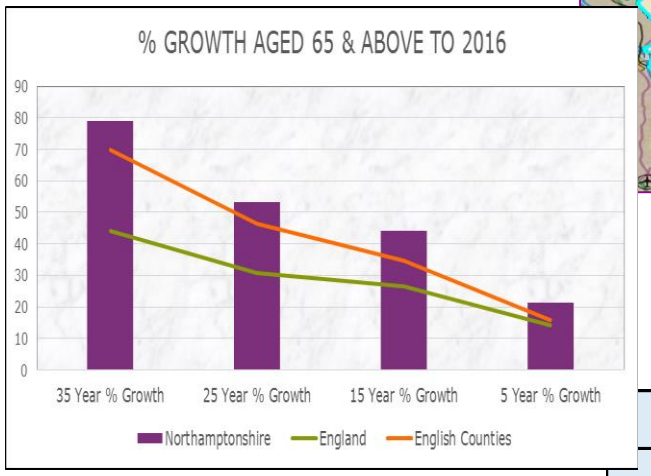
Northamptonshire Adult Social Services

- Making sure people know about services & Signposting
- Protecting the vulnerable
- Meeting eligible needs
- Developing care markets and choice
- Providing assessments
- Helping people to support themselves

Northamptonshire Overview

- The Northamptonshire adult population 567,900.
- Over 65s - 117,400 (2015 JSNA) rising to 135,697 by 2020.
- Rise in this age group is 21.3% over the last 5 years.
- The County currently has 8,000 registered dementia sufferers
- Over 65 growth driven by South Northamptonshire, East Northamptonshire and Daventry (all in top 5 for 5 year % growth in the 326 BDU authorities) and our most rural areas.
- The Over 75s present a significant pressure in our hospitals
- 50% of over 75s Live alone creating care challenges when their health or frailty declines





Growth between 2012-2016		
Age Band	Northants Change	Avg. County Council Change
0-17	5%	2%
18-64	2%	1%
65-74	18%	13%
75+	9%	7%
Total	5%	3%

Our Customers by Care Type

Primary Support Reason	17/18
Physical Disability - Personal Care Support	3959
Support with Memory & Cognition	2320
Support for Social Isolation or Other Support	216
Learning Disability Support	1927
Mental Health Support	240
Physical Disability - Access & Mobility Only	110
Substance Misuse Support	2
Support for Dual Impairment	15
Support for Hearing Impairment	4
Support for Visual Impairment	33
Support to Carer	4
No Relevant Long Term Support Reason	198
Transitions	480
Grand Total	**9508**

- Majority of Customer receiving personal care over 65
- Memory and Cognition – dementia
- 500 Childrens transitions
- Physical disability clients low but some of most complex

Our Current Customers Volumetrics

- 16,000 contacts annually via Customer Contact Centre (CSC)
- On average 7,000 people receiving support
- 10,000 receive care at some point in year
- On average 1500 RIP
- 49% (4,000) referred on to service for assessment via Community or CSC
- 51% (4,200) referrals direct from hospitals.
- Age split 60% over 65 and 40% YA
- But 48% total spend over 65s and 52% YA

65 +		
Care Package Type	YTD clients	Active clients
Residential care	1,371	1,305
Nursing care	543	506
Community Care Packages	2,695	2,466
Total	**4,609**	**4,277**

Under 65s		
Care Package Type	YTD clients	Active clients
Residential care	356	353
Nursing care	52	52
Community Care Packages	2,467	2,431
Total	**2,875**	**2,836**

Priority Areas of Current Focus

People are living longer with more complex needs that require vital care, support and protection from adult social care – this creates significant pressure in the over 75s frail and elderly and learning disability clients (where life expectancy has doubled since 1950) and the need for market development.

Improved planning, processes and pathways of integrated care will achieve better outcomes at a lower cost for our population. Accommodation strategy & planning will be a priority for sustainability.

Demand from our hospitals is leading to long delays in discharge (DTOCs), long stays and poor outcomes for our elderly

Reduced unnecessary over 75 admissions and delays and help maintain or return people to their own homes.

Joint system locality based Intermediate care offer to be finalised and implemented in phased locations – based on meeting local need.

Reductions in admissions and Home First Principle will reduce delays and improve outcomes.

Capacity and Skills we need to invest in the capacity for proactive intervention, prevention and community based care too much reactive work in a crisis

clear evidence that crisis reviews and unplanned reviews leads to higher cost

Need for more strategic commissioning - joint long term planning for the population needs and jointly commissioned pathways of care and provision supporting integrated delivery now and in future.

This will achieve greater economy of scale, better outcomes and citizen experience and more choice for people

Budget 2018-19

	Gross Exp Budget £m	Total Income Budget £m	Net Budget £m
Meeting Personal Care Needs			
Older People	92,315	-28,834	63,482
People with Learning Disabilities	79,783	-6,028	73,756
People with Physical Disabilities	24,545	-3,636	20,910
People with Mental Health Problems	11,885	-1,916	9,969
Other services to meet personal care needs	1,516	-5	1,511
Equipment	4,523	-4,044	479
Capitalisation	-900	0	-900
Total Meeting Personal Care Needs	**213,668**	**-44,462**	**169,206**
Intervention and Preventative Services	**9,190**	**-5,344**	**3,846**
Carers	**764**	**-750**	**14**
Staffing and other Costs			
Operational Teams	15,663	-2,090	13,573
Other costs	6,237	-4,586	1,651
Total Staffing and other costs	**21,900**	**-6,676**	**15,224**
Non Adult Social Care Budgets	**350**		350
Total Budget	**245,872**	**-57,233**	**188,640**

Care package Costs

65 +							
Care Package Type	YTD clients	Active clients	Spend to current month*	Projected annualised Spend	Average cost per week		
					Top 5%	Mid	Bottom 5%
Residential care	1,371	1,305	£6,044,867	£39,744,312	£1,069	£583	£404
Nursing care	543	506	£2,482,721	£15,947,081	£1,429	£597	£457
Community Care Packages	2,695	2,466	£6,714,704	£31,020,944	£1,201	£216	£5
Total	**4,609**	**4,277**	**£15,242,291**	**£86,712,337**	**£1,250**	**£338**	**£6**

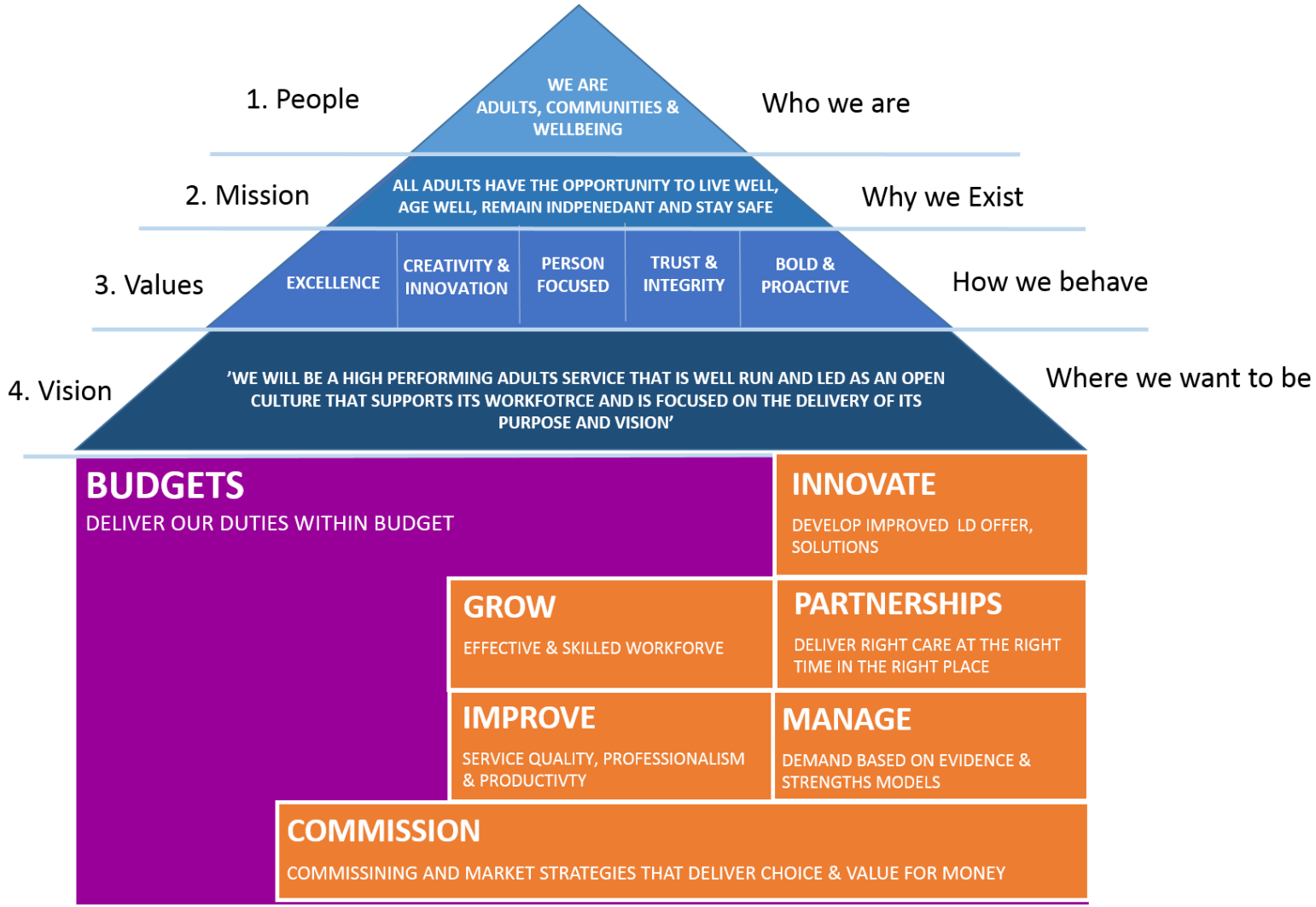
Under 65s							
Care Package Type	YTD clients	Active clients	Spend to current month*	Projected annualised Spend	Average cost per week		
					Top 5%	Mid	Bottom 5%
Residential care	356	353	£3,387,986	£23,155,245	£3,057	£1,177	£210
Nursing care	52	52	£476,368	£3,332,211	£2,844	£1,192	£262
Community Care Packages	2,467	2,431	£12,493,538	£67,099,975	£2,835	£339	£15
Total	**2,875**	**2,836**	**£16,357,893**	**£93,587,430**	**£2,942**	**£418**	**£16**

*Data taken from commitment report - 23/05/2018

An additional £8 million is spent by the Health Pooled budget which is not reflected in the figures above.

The Big build

- Working with LGA national advisors and consultants to target financial, service and process improvement.
- Set of targeted improvement plans for each area.
- Use of best practice and ADASS national and regional advice & Models.
- CQC nationally directed system review with feedback end June 18.
- Newton Europe national improvement offer review and feedback.



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Additional Slides

Services descriptions (1)

Making sure people know about services & Signposting

Customer Service Centre (CSC)

Signposting, advice and information and initial eligibility assessments.
All safeguarding screening, referrals & review

50,000 contacts annually and 10,000 onward referrals

Protecting the vulnerable

Safeguarding

We have a duty to safeguard and ensure that providers deliver good quality services and we maintain professional practice. This team monitors and investigates any reported concern.

6000 alerts annually and 900 provider investigations

Providing assessments

Services descriptions (2)

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Assessment & Care Management

Assessment and support planning. Initial assessment of need and eligibility. Ongoing planned and unplanned reviews. Relocations on provider failure.
Clients: Older People, Mental Health, Learning disabilities, Physical Disability.

9,400 people formally assessed in 2017-18

Health Partnership Team (HAT)

Hospital based Social Care Assessment teams supporting formal assessments, multi-disciplinary discharge & case management, support planning and long term care placements

4,000 referrals and 1200 formal assessments 17-18

Transitions

Supporting the care pathway for children turning18 and coming to adult social care for ongoing support. The team works with the child, family and CFE to assess need, identify outcomes and plan future Support.

Mental Health Service

Assessment, care management and Crisis liaison service via Approved Mental Health Professionals (AMHP) and joint arrangements with health.

240 clients + Crisis interventions

CHC (Continuing Health Care Team)

The CHC team review cases where there are primary health care needs as well as social care – teams apply national guidance to assess and negotiate who should pay for services

Deprivation of Liberty (DOLs)

We have a legal duty to ensure that any restraint and restrictions that amount to a deprivation of liberty (typically hospitals and care homes) are in the person's best interests.

3,600 outstanding reviews.

Meeting eligible needs

Services descriptions (3)

NASS Northamptonshire Adult Social Services

Care & Nursing Homes
Residential based care for Older People and learning disability with longer term care needs

3150 clients in care

Home (Domiciliary) Care
County wide community based home care helping people to stay in their home with assistance

Day Services
Community day centres – external providers and in house specialist dementia and Learning Disability services

Rehabilitation and Respite Care
Support for carers and families through short term care placements providing respite from caring. Avoids the escalation of need into long term placements outside the family.
3607 clients over 2017-18

Carers
Support and advice for Adults and Young carers and assessment of any eligible needs that need to be met through social care to allow the carer to meet their own outcomes.
70,000 carers in Count including 10,000 young carers

Extra Care & Assisted Living
Supported living for Older People and LD providing community based care with support in their own home – providing the ability to remain independent but scale support as needed.

Short Term residential services
Step down or step up reablement & accommodation for younger adults with learning disabilities following a crisis or hospital stay

Learning, training and employment
In house and external day services, training and life skills for Learning Disability clients to equip them with independent living skills and reduce long term care costs

Equipment
Community equipment, Assistive technology and sensory devices for visually or hearing impaired clients

Services delivered through a mix of in house services and external frameworks and contracts.

Helping people to support themselves

Services descriptions (4)

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Crisis Response Team (CRT)
Hospital admissions avoidance & Discharge to Assess (at home) services to support recovery and avoid long term hospital stays, deterioration and long term care.

Rehabilitation, step down & Respite centres
Shaw PFI Specialist Care Centres and OCS Step down beds for post hospital recovery & rehabilitation

Voluntary Sector Support
Crisis support contracts, community support services and community connectors to facilitate support in peoples own homes.

Community Occupational Therapy (COT)
Help post hospital recovery, rehabilitation, adaptions assessment. Post falls support and adaptation assessment

Mental Health Crisis
Psychiatric liaison support to avoid hospital admission or escalation of a crisis working with community health partners

Equipment
Community equipment, Assistive technology and sensory devices for visually or hearing impaired clients supporting independent living.

Short Term Assessment & Reablement Team (START)
Reablement and recovery support following a crisis (e.g. after a fall) or hospital stay. Community requests from GP, family or service users

Community Opportunities
Training, employment and life skills for younger adults to help them live independent lives and gain employment opportunities. Reduces longer term & formal care cost.

Holistic Intermediate Care Team (HICT)
Dementia specialist home Care to avoid admissions and help recovery after a hospital stay

Developing care markets and choice

Services descriptions (5)

Commissioning
Market strategy development, planning and oversight to ensure a wide choice of good quality viable providers across the County to meet current and projected needs of social care clients

Contract Management
Contract management and compliance monitoring, performance management and provider payment validation and monitoring. Reporting and MI on providers.

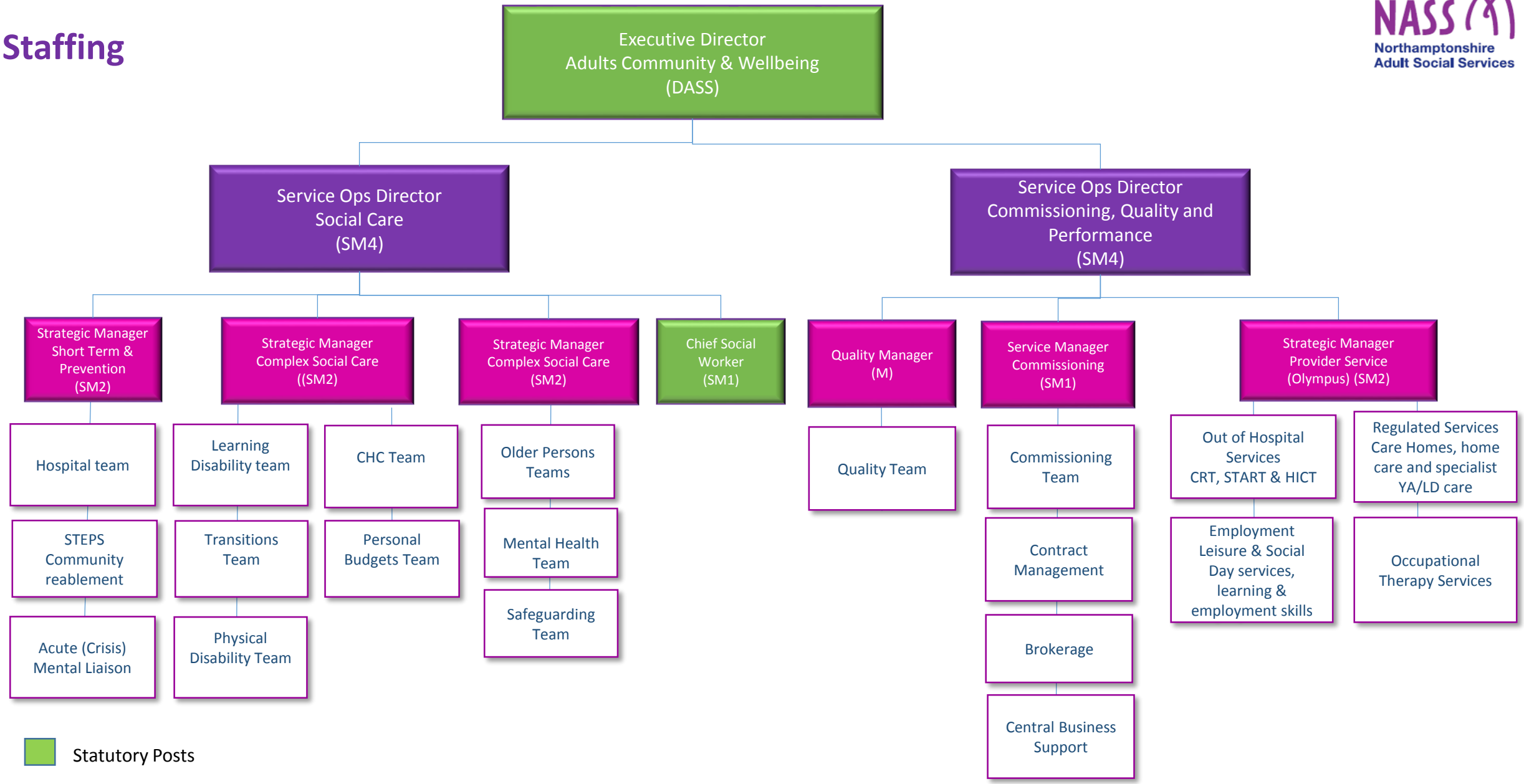
Quality and Improvement
Provider investigations, quality monitoring and visits. Support for providers where improvements are required or where market or CQC failure requires action. Relocations of clients in the event of closure.

Brokerage
Identification of providers and solutions to deliver packages of care and fulfil support plans. Negotiations with providers on fees and placements.

Business Support
Contract management administration, payment processing and financial transactions.
Care management and assessment team support – initial call screening, casework processing, Administrative support.

Performance and Systems
Service team providing performance information and MI, managing systems for in house service rotas. Complaints and Local Ombudsman cases

Staffing


Executive Director
Adults Community & Wellbeing
(DASS)
Service Ops Director
Social Care
(SM4)
Service Ops Director
Commissioning, Quality and
Performance
(SM4)
Strategic Manager
Short Term &
Prevention
(SM2)
Strategic Manager
Complex Social Care
((SM2)
Strategic Manager
Complex Social Care
(SM2)
Chief Social
Worker
(SM1)
Quality Manager
(M)
Service Manager
Commissioning
(SM1)
Strategic Manager
Provider Service
(Olympus) (SM2)
Hospital team
STEPS
Community
reablement
Acute (Crisis)
Mental Liaison
Learning
Disability team
Transitions
Team
Physical
Disability Team
CHC Team
Personal
Budgets Team
Older Persons
Teams
Mental Health
Team
Safeguarding
Team
Quality Team
Commissioning
Team
Contract
Management
Brokerage
Central Business
Support
Out of Hospital
Services
CRT, START & HICT
Employment
Leisure & Social
Day services,
learning &
employment skills
Regulated Services
Care Homes, home
care and specialist
YA/LD care
Occupational
Therapy Services
Statutory Posts