



INTEGRATION JOINT BOARD

Date of Meeting	11 June 2019
Report Title	Learning Disability Service Review
Report Number	HSCP.19.031
Lead Officer	Sandra Ross
Report Author Details	Sandra Ross Chief Officer sanross@aberdeencity.gov.uk
Consultation Checklist Completed	Yes
Directions Required	Yes
Appendices	A. Direction to Aberdeen City Council

1. Purpose of the Report

- 1.1. The purpose of this report is to seek approval from the Aberdeen City Integration Joint Board (IJB) for the implementation of a programme to support the further integration of Learning Disability Services in Aberdeen City.

2. Recommendations

- 2.1. It is recommended that the Integration Joint Board:
- a) Approve the implementation of the proposed programme, including the award of a call-off contract to the preferred Service Provider under the HealthTrust Europe (HTE) "Consultancy and Advisory Services Framework Agreement" and the expenditure of £91,575, and;
 - b) Make the Direction at Appendix A and instructs the Chief Officer to issue the Direction to Aberdeen City Council



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3. Summary of Key Information

- 3.1 There are significant pressures on the Learning Disability service due to increasing service demand and requirements for complex / intensive care packages. More young people with complex physical and chronic health needs are surviving into adulthood and this is increasing the number of transitional cases, which causes a recurring additional cost pressure each year. At the opposite end of the age spectrum, the number of people with learning difficulties living into older age is increasing, which means we are providing more complex and expensive services to clients.
- 3.2 Team managers and staff are facing challenges in delivering services due to the number of clients requiring support. Adult Support and Protection referral levels have increased over last 9 months (10 to 12 per week). The staff are working long hours and frequently need to reschedule their workloads due to emergency situations or urgent service requirements for clients.
- 3.3 Staff sickness levels; short term and long term, have increased over the last 2 years and this is linked to the teams workloads.
- 2017 - 281 absence days with 42% being due to psychological reasons/stress.
 - 2018 - 381 absence days with 54% being due to psychological reasons/stress.
 - 2019 - Currently 4 staff on long term sick leave.
- 3.4 This increase in demand as also impacted on the budget realisation, with an overspend on £2.6 million in financial year 2018/19. This is due to increasing complexity of packages, out of area placements where we cannot provide the appropriate services or accommodation and increasing numbers of referrals. Many of the providers are struggling to provide services as a result of the increase in clients' needs and are seeking above-inflation uplifts to compensate for the additional staffing required for complex packages. It is not uncommon for a learning disabilities package to cost anywhere between £100,000 to £250,000 per annum.
- 3.5 The service is co-located in the Len Ironside Centre and whilst work has been undertaken to integrate both the Health and Social Care teams, there



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is still much work to do in order to address some long standing cultural and systems issues. The issues highlighted in paragraphs 3.1 to 3.4 mean that capacity does not currently exist to drive out the benefits of an integrated approach.

- 3.5 In order to respond to these long standing issues and support the integration of this team, a review was undertaken by a company that specialises in achieving significant, sustainable advances in performance whilst simultaneously achieving real savings in the health and social care sector.
- 3.6 The result of this review showed improvements could be made, by defining an Aberdeen City HSCP Learning Disability Service “Way”. This would include co-produced service standards, expectations for the service and individual roles and the development and installation of a full suite of management reports, along with a skills matrix and training needs analysis. This will help to define a capacity plan to show the required resource and capacity within the service. It is proposed the implementation of the activities will help manage and control the unpredictability of the services workload and create a management information system fit for the future.

It is proposed that this programme will realise benefits such as,

- capacity gained for staff to deal with clients on waiting lists,
 - capacity gained for transition service planning,
 - clear and equitable objectives, workloads and expectations for all staff,
 - CPD-accredited behavioural and training workshops with 1:1 coaching enabling culture change and,
 - ACHSCP Learning Disability Service “Way” of working developed
 - Improved working environment for staff,
 - Reduction in unplanned absence of staff.
- 3.7 The implementation programme will take a total of 12 calendar weeks to complete. This short, sharp duration will create an instant impact within the service, providing the service the opportunity to direct resource to work strategically on transition planning and future demand of the service.



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4. Implications for IJB

4.1. Equalities

It is believed that there will have a positive impact on clients with a learning disability who are supported by the Partnership.

4.2. Fairer Scotland Duty

There are no direct implications for our Fairer Scotland Duty as a result of the recommendation in this report.

4.3. Financial

The total fees payable to the Service Provider will be £79,875 plus VAT, plus expenses in line with HealthTrust Europe Framework guidelines, set at a maximum of £11,700.

The partnership had recently agreed to appoint additional staff in the Learning Disability service to support service delivery. This was to be funded by reducing the costs of some of the packages commissioned with suppliers out of area. It has not been possible to fill these posts and it is proposed to use this budget to cover the costs indicated above. The company have estimated that savings will be generated once robust structures and management information systems are in place; through reduced sickness, reallocation of resource and more efficient working. The project will release a volume of resource between 7.5 – 7.9 WTE, which has a payroll value of £345,946. If agreed that this resource will be redirected to provide additional capacity to the service to support the service.

4.4. Workforce

The purpose of this project is not to reduce headcount within the service but to invest in the service to be able to release capacity for strategic and service development. The Chief Officer has engaged with the staff and will continue to do so. The staff partnership and trade unions will be involved throughout this process.

The discussions that have already taken place with staff have indicated that they are in support for an instant change method. Staff have already



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been involved with the initial study. Although there are differences of opinion and some are more sceptical than others, overall staff are appreciative of 'something being done'.

4.5. Legal

This report is requesting the IJB to direct Aberdeen City Council to commission the service from the company. The preferred Service Provider is a Framework Supplier on the HealthTrust Europe (HTE) "Consultancy and Advisory Services Framework Agreement" which is designed to support the NHS and other Public Sector Organisations in offering a simple, compliant route for the procurement of a range of expert consultancy services. It allows for a direct call-off as is proposed here.

Call-Off Terms and Conditions which are part of the above Framework Agreement will be utilised and advice will be provided by the Council's C&PS Legal Team.

5. Links to ACHSCP Strategic Plan

- 5.1. This report links closely with our personalisation and prevention strategic aims. This programme will enable the workforce to shape a holistic service approach, giving the clients a more personalised service. Also creating the capacity to work on avoidable demand in the long term may help the prevention of urgent care provision for some of our transition services clients.

6. Management of Risk

6.1. Identified risks(s)

The service is currently managing a risk related to these issues. Maintaining safe /effective services and safe working for staff has been on Risk Register since 24th May, 2018. This is monitored and reviewed on a weekly basis.



6.2. How might the content of this report impact or mitigate these risks:

We are hoping that the implementation of this programme will release capacity as soon as September to begin to progress the strategic work needed for future demand in the service. The released capacity and the development of clear and equitable objectives, workloads and expectations



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for all staff will begin to impact on the staffing related issues within the service.

Approvals	
	Sandra Ross (Chief Officer)
	Alex Stephen (Chief Finance Officer)