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Learning Disability Life Course Project - High Level Business Case

This is a draft high level business case and is the first of the documentation that must be prepared as part of the Council's TEG & EMB Approval process. It will be used to provide an overview of the project and to obtain co-operation and by in from key partners.

Project Name	This is a multi agency project to secure new integrated health and social care pathways for Learning Disabilities	Programme Name	Care & Commissioning
Directorate :	Cheshire East Council Adults, Children & Families Services & Cheshire East Education and Health partners	Portfolio Holder:	Janet Clowes
Service:	Learning Disabilities	Senior Responsible Owner (SRO):	Lorraine Butcher

Description of Project

This project will ensure a major whole system review of **Learning Disability and Autism Spectrum Disorder (ASD)** support and provision. We will work with partners to take a whole life (birth to death) view of individual and carer needs, service requirements, and efficient use of the public funding that will secure new **integrated** pathways of care. The project is clearly identified in the councils three year plan under:

Priority 2: 'Developing affordable and sustainable local models of care for vulnerable children and adults'

For the purpose of clarity within this document, we will refer to 'Learning Disability' as a description to cover a broad range of conditions and needs eg Autism, Downs Syndrome and Challenging Behaviour. Where a piece of work is undertaken that relates to a specific condition, this will be made clear.

The **objectives** of this project;

To review, redesign and commission services for children and adults with learning disabilities to ensure that value for money, person centred care, planning and support meets now and future needs.

1. By the end of November 2013 we will have a picture of need and will understand our population, what works and what doesn't from their viewpoint.
2. By November 2013, options will be considered and a decision taken by partners on the future of Adults pooled budget from April 2014
3. By April 2014 have considered and implemented all other actions identified within the Winterbourne Stock take action plan and Learning Disability self assessment
4. To complete a commissioning review by the end of May 2015, base-lining current provision, identifying gaps and redesigning future provision together to inform future commissioning.
5. By June 2014 there will be joined up, community adult services (learning disability services provided by health and adult social care) situated together in locations that meet need identified.
6. By September 2014, Cheshire East can produce and provide an Education, Health and Care plan for individuals from birth to 25 that demonstrate a meaningful and positive difference to the outcomes of children and young people with SEN and/or disabilities and their families through listening to service users.
7. By June 2015, new commissioned support will be in place supported by all partners working together to understand the needs and views of our service users.

Background

In Cheshire East we have 2,490 children in education with a learning disability and 1,299 adults. As the number of individuals with complex needs increases, as does their life expectancy, the financial pressure will grow rapidly.

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This is a growing client group nationally and locally, with increasingly complex needs over longer lifetimes. Intense medical and care needs mean that support costs for some individuals are estimated to reach £10million over their lifetime, creating a significant pressure on budgets, in particular for health, social care, housing, education and benefits.

We aim to re-design current arrangements to achieve the following:

- More early intervention aimed at building confidence and independence for individuals from an early age
- A focus on building support and capacity in families, carers and the wider community
- Ensure a wide range of care and support services are involved planned and delivered using a whole life course approach, leading to forward thinking investment decisions, better quality outcomes and value for money. For example, building whole life-course housing.

This project is driven by this growth and complexity in need and the drive to ensure maximum efficiency and effectiveness across the range of specialist and non-specialist services in place to support those who have a learning disability in Cheshire East. The local authority and our two Clinical Commissioning Groups have agreed to a whole system review that will find ways of managing the growing cost of provision in this area maximizing independence and support in ordinary settings.

This project recognises the inter dependencies with statutory requirements such as Winterbourne View, the confidential inquiry into premature deaths of people with learning disabilities, the Children and Families Bill and the Care Bill. These all call for;

- An improved experience for those with a learning disability, offering greater choice and control
- Improved support to families and carers
- Improved partnership and integrated working arrangements
- Improved knowledge about those with a learning disability, their families and carers
- A focus on need, wellbeing and having the right support in place
- Opening up new methods of support that contributes to improved outcomes
- Personalisation
- Effective safeguarding arrangements.

The most significant changes arising from the Children and Families Bill to the existing SEN Code of Practice are to be introduced in September 2014. These changes are far reaching and introduce a fundamental shift in assessment and the way children and young people's needs will be identified and supported. For the first time ever, parents will be given the power to control personal budgets for their children with severe, profound or multiple health and learning needs - meaning they can choose the expert support that is right for their child, instead of local authorities (LAs) being the sole provider. The biggest reform of SEN for 30 years will also force education, health and social care services to plan services together by law - so when their children are assessed, parents will be assured they will get full provision to address their children's needs. There is a need for extensive development work with service and school staff, which this project will support.

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Whilst we believe this review would enable us to connect separate streams of public funding to better effect and secure more public value, we anticipate this will be matched by an improved holistic approach to supporting and meeting individuals' needs by enhancing their life chances and quality of life. This project will consider the full life course of those with a learning disability to ensure we address the conflicts and tensions presented by transition from children's support to adults support across the system.

Cheshire East is one of a reducing number of Local Authority areas to have a formal Adult Learning Disability Pooled Budget Agreement in place between the Council and the two Clinical Commissioning Groups for the area. Spend on adult social care and health through the pooled arrangement was approximately £43m at outturn 2012-13.

An individual with learning disabilities will receive support from a wide range of services throughout their lifetime, including children's social care, health, education, adult social care, housing, benefits, and adult supported employment. In addition they may receive support from one or more community or voluntary organisations. This project will improve this support to ensure a joined up system which meets need for this vulnerable group.

Scope and objectives

This project will include

- A whole system commissioning review of all those who have a learning disability and those with Autistic Spectrum Conditions and the support to them in Cheshire East from birth to end of life.
 - Use of the Self Assessment Framework and Autism Self Assessment Framework to gain an understanding of the population and will build on this to develop an excellent contribution to the Joint Strategic Needs Assessment, this will then be used to provide an overarching needs assessment across the Care and Commissioning Programme. Key aspects of our approach include
 - A full analysis of the services currently providing, using pathway mapping to identify what is working well and what isn't and what will be needed in the future to meet need.
 - The analysis, review, redesign and planning of joined up provision and will seek to improve the experience of users, families and carers by identifying and reducing the number transactions, reducing bureaucracy and having the support in place that matches identified need. This in turn will lead to a reduction in greater need and crises points arising in the future.
 - The project will include all specialist and none specialist education, health and social care support for those who have a learning disability.
- The work necessary to address the statutory requirements arising from the Children & Families Bill and Care Bill and those actions arising from the Winterbourne View Stock take.
- The analysis of the workforce and resources required to meet future need which will include putting in place joined up teams who can respond directly to the needs of the population

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We will do this through:

- A detailed partnership led approach to developing a needs analysis for Cheshire East, looking at individual's needs but also family and carer needs
- Customer-journey mapping across the life-course
- Resource flows through different services throughout an individual's lifetime, leading to detailed resource mapping including community and voluntary sector support
- Exploring data sharing needs across service providers
- Development of options for redesigned support and services, including tackling significant issues such as building housing suitable for an individual's whole life.
- The ability to join up funding as well as practice across Health, Education and Social Care in a Single Plan (0 – 25 years of age) will promote effective investment decisions from the earliest possible age.
- A detailed analysis of our workforce across the partnership across children and adults to identify what's needed where to meet future need effectively and efficiently through joined up provision

Once the work of this project has been implemented we want to see the following **outcomes for people with learning disabilities and their families and carers:**

- All people with a learning disability are identified and needs across arrange of spectrum are met
- Services are person centred and improved
- They have the support needed to help them gain the life skills and education they need to thrive.
- Independence is maximised through opportunities in education, employment, choice and relationships
- Children and young people with a learning disability get a good start in life, and are prepared for and can make their own choices education, work and relationships.
- Equipped to live independent, self-sufficient lives, are supported by their communities and realise their particular talents and abilities.
- Access to good physical health is available and maintained.

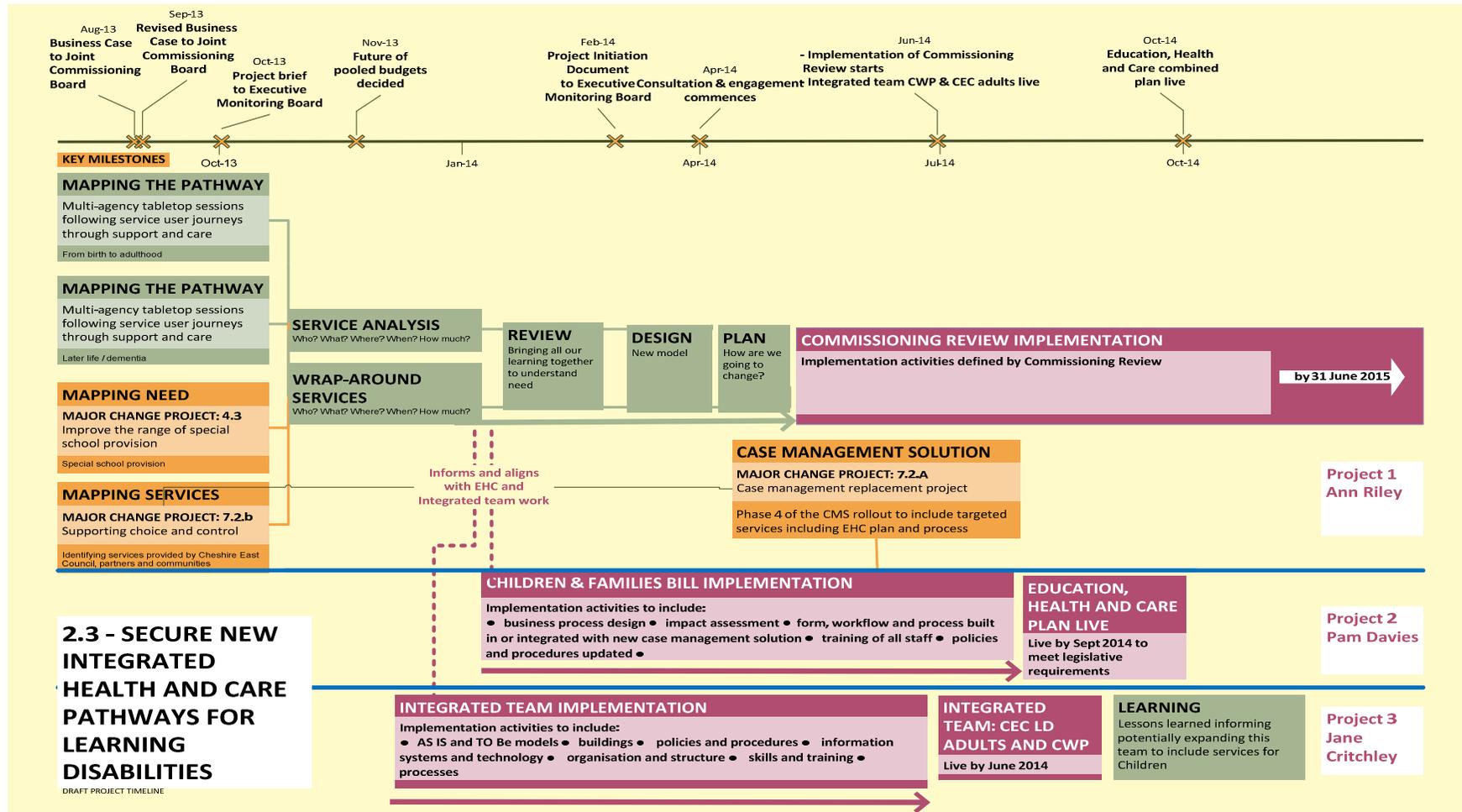
See also the measured benefits that we have included at page 7.

Context:

This project is one of a number of projects operating under the Councils Care and Commissioning portfolio to achieve the Council's 3 year Plan. It has identified the links and dependencies with other projects within this portfolio.

The draft timeline for completion is shown below at **Diagram 1**, and a high level project plan has been produced to support this project.

Diagram 1



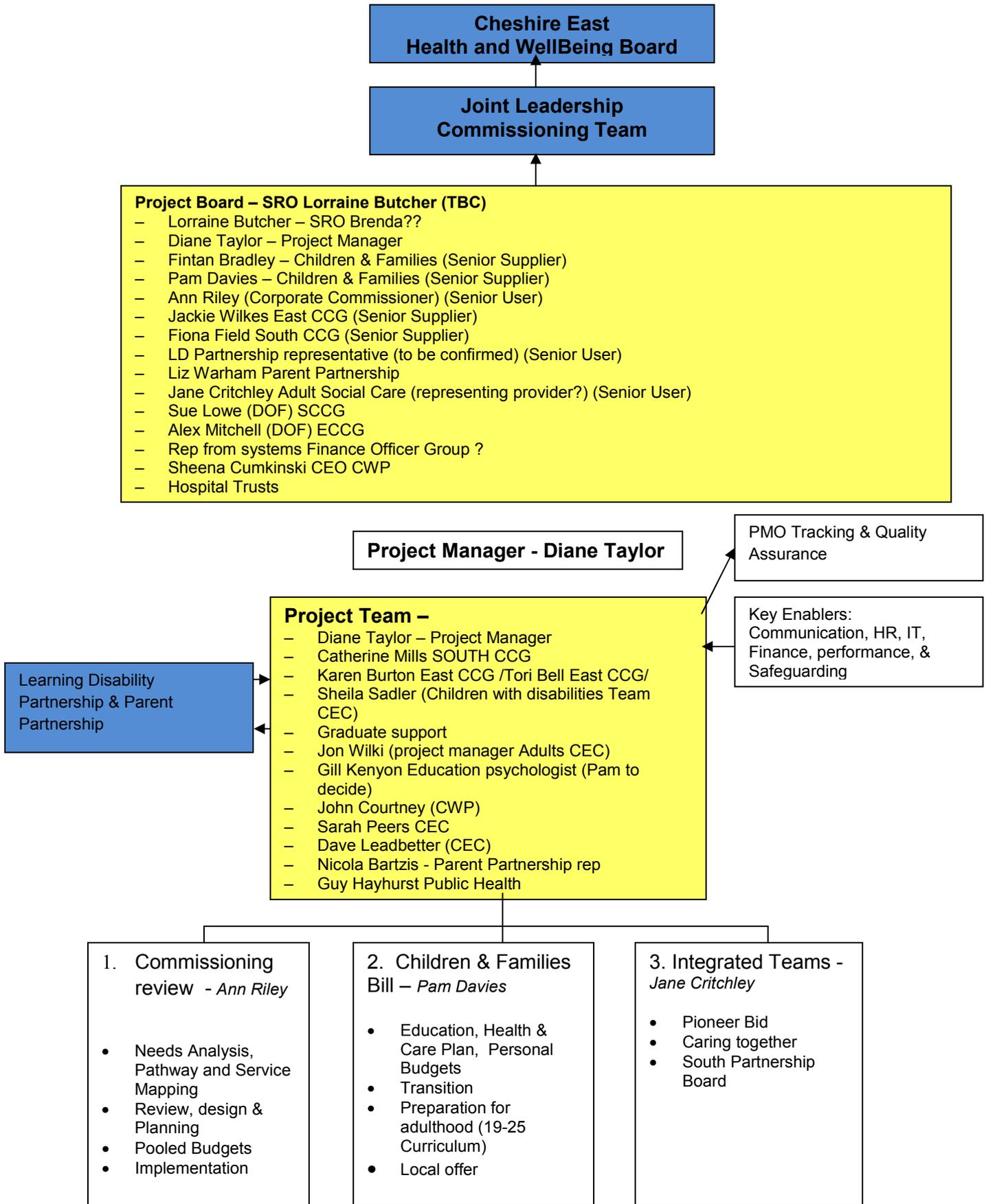
Benefits of the Project:

Benefits	Measured outcomes
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Need identified and understood and used effectively	
<p>All people with a learning disability are identified and needs across a range of spectrum are understood early enough to prevent crises points later on in life.</p>	<ul style="list-style-type: none"> • 100% of services/support available mapped out and in a format that is easily understood by all. • Relevant data available and collected. The targets nationally and locally determined in every required data set (e.g. age / complexity / Autism diagnosis / BME etc). • 100% of people accessing/using learning disability service/support are known and patient experience is captured • 100 % of commissioned practice and contracts can provide evidence of improved practice, based on match to needs analysis
Improved experience throughout life	
<p>Services are person centred and provide a better experience of care and support for service users, their families and carers through the offer of a seamless integrated approach</p>	<p>Through a user experience tool;</p> <ul style="list-style-type: none"> • 65% of existing clients will report an improved experience in their new pathway / packages of support • Increased rates of satisfaction from parents/carers of children and adults with learning disabilities • 70% of service users report that their thoughts and views had been considered in developing the services or support that they receive
<p>More people with a learning disability get a good start in life; have the support they need to help them gain the life skills and education to equip them to live independent, self sufficient lives, supported by their communities.</p>	<ul style="list-style-type: none"> • Increase in the number of those with learning disability receiving support that enables them to lead independent lives. • Increase in the number of people with learning disabilities in education, training and employment • Increase in the % of those with a learning disability participating fully in community activity
<p>More service users, their families and carers of disabled people are able to make informed decisions and genuine involvement about their health and care</p>	<ul style="list-style-type: none"> • LD specific services: 100% of services involving people with learning disability and families in recruitment/ training and monitoring of staff including advocates. • Learning Disability Partnership and Parent Partnership are operating efficiently with the LA and its partners, attendance at events is increased by 50% • There is clear evidence that providers of LD services involve family carers in service development. There is clear evidence that such involvement has led to service improvement.
Partnership and joined up working demonstrates effectiveness and efficiencies	
<p>Well-established and monitored strategy, service pathways and multi-agency involvement across Education, Health and Social Care. There is evidence of very clear transition services or functions that have joint scrutiny and ownership</p>	<ul style="list-style-type: none"> • 100 % of commissioned practice and contracts can provide evidence of improved practice, based on the use of patient experience data, and the review and analysis of complaints • 100% of health and social care commissioned services for people with

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Progress	
Is this an existing Project/Programme	Yes See context and diagram on pg 6
Do you any Governance arrangements in place?	Yes See diagram below, although these are subject to change

Learning Disabilities Life Course project – Project Governance Structure



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Financial Investment Resources:

Expenditure	Year 1 (£000)	Year 2 (£000)	Year 3 (£000)
Revenue Investment	100k	30K	0
Capital Investment *	25K	10K	

Savings	Year 1 (£000)	Year 2 (£000)	Year 3 (£000)
Revenue Savings	TBC	TBC	TBC
Capital Receipts	0	0	0

*Capital Investment breakdown (if known)

Expenditure	2012/13 £000	2013/14 £000	2014/15 £000	2015/16 £000	Total £000
Land/Building Purchase					0
Professional Fees (External)					0
Contracted Services					0
ICT Hardware					0
Software Licences					0
Furniture, Plant , Equipment					0
Capitalized Staffing Costs					0
Grants & Loans (Given)					0
Other Costs					0
Total Expenditure	0	0	0	0	0
Income					
Grants					0
Developer & Other Contributions					0
Revenue Contribution					0
Other					0
Total Income	0	0	0	0	0
Capital Receipts					
Prudential Borrowing					0
Total Funding	0	0	0	0	0

Resources to Support: For each option identify the likely resources that will be needed in each year.

Resource Type	Year 1 (Number of Days)	Year 2 (Number of Days)	Year 3 (Number of Days)	Name of Person Consulted in Corporate Area
Additional staffing resource to deliver project- please specify role	1 x Project manager 1 x Graduate Trainee Graduate mainly working on the implementation of the Single Plan			D Oakeshott Pam Davies
HR	Discussion with Dinah in relation to: <ul style="list-style-type: none"> • Provision of workforce data in various combinations – Probably needed late 2013 • Restructuring – i.e. support to manager as they revise or create new Job Descriptions, person Specs, and then advising on the process as it may involve a selection process to new posts and potential redundancy. The complication is working across different employers who will have their separate procedures. Therefore time consuming project to reach agreement on how to proceed, involve the unions etc. First half 2014 • Training needs analysis and design and delivery of training. Meeting planned with Lisa. • Recruitment Watch approval sought to recruit an additional HR Officer due to the demands of this project 			Dinah Robertson Anne Joule Lisa Burrows
Procurement	<ul style="list-style-type: none"> • Procurement activities outside of systems procurement required to complete the project could potentially include short term consultancy pieces of work such as work with stakeholders. The requirements will depend on the resourcing strategy, to be defined at GATEWAY 2 • An outcome of this project would likely include a framework approach to commissioning higher cost placements. We would need some procurement expertise to enable this. • Dependent on the findings of the commissioning needs analysis, we may need to re-commission and this will need procurement support 			Jackie Gray
Legal	To ensure all those involved in the project are aware of legal implications of redesign proposals.			Iolanda Puzio
Finance	Financial input within this project will come from all key partners <ul style="list-style-type: none"> • Also may need some resource to identify unit costing of future packages of support in ensuring pooled budget arrangements are managed • Contribution from Systems Finance Officers Group to Project Board. • Implementing personal budgets linked to Health, education and care plans 			Steve Wilcock Sue Lowe (SCCG), Alex Mitchell (ECCG) Dave Leadbetter Patrick Roden Pam Davies
ICT & Performance	<ul style="list-style-type: none"> • Taking forward integrated teams will need input from ICT – all partners to ensure compatibility of systems. • It is hoped that the project will highlight the need to develop a revised approach to ongoing needs analysis to inform future commissioning. • Performance input will be required to meet different statutory returns and new commissioning needs. Already involved in the 			Lydia Rafferty Bev Harding/Sue

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Any cost associated with this should be captured within the Financial investment resources table.

Planning Implications: Does the project require planning permission? Please comment on pre application advice and any planning issues

Not at this stage

Risks: The main risks or threats that would prevent delivery of the project Corporate Risk Register ref:

Lack of clarity of existing services and their effectiveness and an understanding of the views and knowledge of key stakeholders thus that we don't understand where things are already working well or gaps in provision means that we are unable to sufficiently map the user journey and identify crisis points resulting in failure to improve user experience and efficiencies	CR6 – Evidenced decision making CR11 – Commissioning and service delivery chains CR16 - Intervention CR17 – Vulnerable Care
Risk that Governance structure is not clear leading to lack of accountability and ownership such that inappropriate decisions are made and the project fails to deliver its objectives.	CR 3 - Strategic Leadership & Management CR14 - Business Planning resource
The project fails to address and reflect the government requirements in improving the wellbeing of those who have a learning disability, causing failure to achieve inspection standards, safeguard users and improve user experience	CR7 - Reputation
Risk that overstretched capacity of senior management and loss of operational knowledge leads to insufficient contribution to the project, delaying timescales and actioning implementations such that individual objective timescales are not met.	CR9 - Workforce
Partners do not commit to joint working due to insufficient resources/poor partnership working/lack of understanding such that we are unable to integrate teams and other integrated approach for effective joint working, failing to improve user experience and achieve efficiencies.	CR8 – Public Sector Effort CR19- Intervention

- *Significant Comments: Please outline any further points relevant to the project that need to be highlighted.*

- This project will be crucial in ensuring the implications of the Children's Bill (the Education Health and Care Plan), the Care Bill actions from the Winterbourne View Stock take and will incorporate the care services development programmes within our two CCG's.
- This project will also help us to adopt a community budgeting approach to reviewing and improving support and care for children, young people and adults with learning disabilities. We have applied to be part of the Public Service Transformation Network which will enable us to:
 - co-design improvements with input from government
 - draw upon the learning from other community budget areas.
 - share our learning through an established network - we understand that very few partnerships have adopted a whole life-course approach to support for learning disabilities, so our findings will be relevant to many areas.
- Our continued commitment to safeguarding the vulnerable children and adults in Cheshire East is significant throughout this project.