

## **The Vale of Glamorgan Council**

### **Cabinet Meeting: 20 November, 2017**

### **Report of the Cabinet Member for Social Care, Health and Leisure**

### **National Collaborative Commissioning: Integrated Health and Social Care Programme - Annual Report**

#### **Purpose of the Report**

1. To update Cabinet members of the ongoing development of the National Collaborative Commissioning Integrated Health and Social Care Programme.
2. The report describes the Integrated Health and Social Care Commissioning Programme, which has been awarded Welsh Government "Invest to Save" funding. This was intended to support improved efficiency in both cost and quality of residential placements for younger adults with either Learning Disabilities or Mental Health problems.

#### **Recommendations**

It is recommended that Cabinet:

1. Notes the work that has been completed to date.
2. Notes that concerns remain regarding the overall value (cost and quality) of the Vale of Glamorgan Council utilising the Framework outlined in the Programme.
3. Supports the ongoing involvement of the Vale of Glamorgan Council to contribute to the regional response regarding any potential future use of this Framework.
4. Refers this report to the Healthy Living and Social Care Scrutiny Committee for its consideration.

#### **Reasons for the Recommendations**

1. To ensure that Members continue to exercise effective oversight of important programmes that the Social Services Directorate are involved with.
2. To ensure knowledge around the planned programme of work within the National Collaborative Commissioning Integrated Health and Social Care Programme and associated concerns when considering best value in relation to both cost and quality for the residents of the Vale of Glamorgan.

3. Enable the Council to continue to explore options for cost effective, high quality placements for vulnerable adults with mental health issues or learning disabilities.
4. To ensure Healthy Living and Social Care Scrutiny Committee scrutiny members are aware of and can consider the developments in this key area.

## **Background**

3. The South East Wales Improvement Collaborative (SEWIC) 'Brokerage' placement finding service was established in 2012 to match service users with providers of long term placements for service users with mental health problems, learning disabilities or physical disabilities. There are typically low numbers of these high cost placements. The service runs on behalf of the nine South East Wales local authorities and reports to the SEWIC Programme Board of Directors of Social Services.
4. The Care Assurance and Performance System (CAPS) was developed by NHS Wales Commissioning Collaborative for Mental Health and Learning Disability Services to manage the external provision of secure hospital and rehabilitation services across Wales, and has been running for a similar time as the SEWIC 'Brokerage' Service. The issues faced by the NHS in Wales that led to the development of CAPS have been mirrored within Social Care, these include:
  - Insufficient quality and safety of placement choices;
  - Increasing demand and complexity of presenting individuals; and
  - Increasing costs within a largely independent sector market driven economy.
5. The South East Wales Adults Brokerage Service has also found:
  - Service users' needs are becoming much more complex;
  - Service providers are not adequately skilled or equipped to meet complex needs;
  - There is an over-provision of 'general' needs supported accommodation;
  - Specialist services are not local enough and this is a primary factor for individuals / family members when needing to access a placement;
  - Service providers' business models do not support recovery and progression;
  - New ways of commissioning social care services are required; and
  - Social care services need to be procured based on supporting independence and move on.
6. SEWIC has collaborated with NHS Wales on the enhancement of the existing Care Assurance Performance System (CAPS), with the aim of integrating the commissioning and quality performance management of high cost low volume placements.
7. Working with NHS Wales Informatics Service (NWIS), NHS Wales and SEWIC were awarded a grant from the Welsh Government Health Technology and Telehealth Fund (HTTF) in April 2014. This funding has facilitated the enhancement of the CAPS system from a 'database' of patient and provider information into CCAPS (Commissioning Care Assurance and Performance System); a tool to support the ongoing care, treatment and support of those within non NHS Wales or local authority care settings.

8. CCAPS allows direct access to the system by Care Managers, Commissioners and Providers (with appropriate security controls) across Health and Social Care. It is proposed that such an enhanced system will be a key enabler between NHS Wales and SEWIC, working together to deliver opportunities from an Integrated Commissioning Improvement Collaborative initiative.
9. The collaborative programme is procured on a national basis with the Ministerial expectation that all NHS Wales organisations and all Local Authorities across Wales will utilise CCAPS to commission their placements for this cohort of service users.
10. Cabinet was informed of the CCAPS programme in April 2016, with a view that once the Vale of Glamorgan Council could establish clear advantages to the use of the Framework that we would seek permission to commission all future placements using this mechanism.

## **Relevant Issues and Options**

11. The Integrated Health & Social Care Commissioning Programme board was established in September 2015. It commenced a procurement process for a 'Collaborative National Framework for younger adults (18-64 years) in Mental Health and Learning Disability Care Homes and Care Homes with Nursing'.
12. All 22 Welsh local authorities confirmed approval to be named on the Official Journal of the European Union (OJEU) notice with all 7 health boards, early in 2016. Therefore, we can utilise the CCAPS Framework should we choose to do so, but as a local authority we are not mandated to do so.
13. To date, the Vale of Glamorgan has not placed anyone via the Framework, and this is echoed across all Welsh Local Authorities with no placements being made via CCAPS by any Local authority. CCAPS has reported that there have been 28 placements via NHS organisations in the year since the service was launched.
14. Officers within the Social Services Directorate have actively engaged in all events and meetings in relation to this Programme. The Head of Resources Management and Safeguarding also represented the Region at meetings of the Programme Board. We are one of only 14 local authorities who have signed up to gain access to the CCAPS database and attended training to ensure we can use the system if deemed appropriate.
15. We have worked regionally with our partners, Cardiff Council and Cardiff and Vale UHB regarding this programme. It has been agreed by all partners that we will operate collectively regarding our decision to use the Framework, or not, subject to the necessary approvals.
16. A detailed exercise commenced with NHS Shared Services Partnership over the summer of 2016, analysing our referrals and requests for placements. Due to the specialist nature of this type of placement we have very few (less than five a year for the last three years) where we seek this type of new placement for individuals with complex learning disability, we rarely request residential placements for younger people with mental health problems.
17. The original plan was that once CCAPS was launched 1st October 2016, all new placements would be made utilising the Framework and then on review, existing placements would be entered onto the Framework. The vision was to equalise the market and improve quality of placements.

18. Cardiff and Vale Local Authorities have historically worked closely together regarding Learning Disability services. A joint post across both Local Authorities was in place until April 2017, this ensured that commissioning had been conducted jointly and as a result the authorities had a positive working relationship with providers and were also able to negotiate acceptable rates for placements.
19. We are advised that a number of providers in the Region did apply to enter onto the National Framework, but latest information has shown that because there was no increase in the volume of placements through the Framework and providers noting that Local Authorities are not using the framework to commission, they have not fully engaged with the Framework.
20. There are reported to be less providers on the Framework since the last refresh exercise than there were originally, and it is noted that a further 'refresh' exercise where the national team encourages providers to apply to go on the Framework is planned for November, where successful organisations will be active on the Framework from April, 2018.

### **Resource Implications (Financial and Employment)**

21. The desktop exercise completed over the Summer months of 2016 evidenced that utilising the Framework would not provide any savings on our costs of placement. The national team has repeatedly advised that through their robust audit and monitoring we would see an improvement in quality and that we should not focus solely on cost.
22. When an individual's assessed needs indicate that a placement is required, we are able to access the CCAPS database to check availability and to establish costs if we utilised the Framework versus the fee rate we have been able to negotiate. To date, we have not found a placement to be less costly through the Framework. In one case the cost was similar however in all of the others it would have been more expensive to place through the Framework.
23. The national CCAPS team suggest that we are not comparing the same costs, however, we have endeavoured to understand how CCAPS rates are calculated and there is a lack of clarity regarding this. As a consequence, the number of Local Authorities engaging is extremely low, with information showing that no Local Authority has placed an individual via the Framework since its launch in October 2016.
24. As a member of the SEWIC region, the Vale of Glamorgan Social Services Department benefits from programme management across nine local authority areas. Our contribution for the project team supporting the Adults Brokerage Hub and CCAPS Programmes currently totals £6,054 per annum. It has been agreed that we will continue to be involved and invest in the programmes but this continues to be a discussion point for Directors of Social Services within the SEWIC region.
25. The CCAPS programme has requested additional funding to provide ongoing monitoring staff hosted via NHS Shared Services Partnership, but to date the Region has not agreed to invest any further into the programme management either through core budgets or through intermediate Care Fund (ICF) Grant monies.
26. Without clear evidence that there are efficiencies in terms of cost of placement, officers would not be seeking Cabinet approval to solely commission this type of placement via this Framework.

27. The team supporting the CCAPS programme in relation to quality monitoring is well resourced in comparison with our own contract monitoring teams. Therefore, the improved capacity to monitor providers would be a welcome addition. However, there are concerns that with this robust auditing of providers in this specialist area there are inequities introduced when the same level of quality monitoring is not available to other high volume, lower cost placements for other client groups.

### **Sustainability and Climate Change Implications**

28. There are no sustainability or climate change implications in relation to this report.

### **Legal Implications (to include Human Rights Implications)**

29. In addition to the issues set out in this report, further work needs to be undertaken before referrals are made in relation to the Data Protection implications and contractual arrangements in relation to the project.

### **Crime and Disorder Implications**

30. There are no crime and disorder implications as a direct result of this report.

### **Equal Opportunities Implications (to include Welsh Language issues)**

31. Commissioning of care services has to ensure that they are accessible to all those eligible to receive them and this will require Equalities Impact Assessments to be carried out, where appropriate.
32. No significant adverse impact is anticipated on citizens. However, where citizens with a learning disability or a functional mental illness are placed in high cost low volume placements then a greater assurance of quality should be experienced. The placing authority should also have greater confidence that they are receiving value for money.
33. The IHSCCP program has identified the need to complete work on Equalities Impact Assessment and have engaged with Centre for Equalities and Human Rights regarding this.

### **Corporate/Service Objectives**

34. The work outlined in this report addresses the following corporate objectives outlined in the Corporate Plan 2016 - 2020:
- Wellbeing Outcome 1: An Inclusive and Safe Vale
  - Objective 2: Providing decent homes and safe communities
  - Action : Provide appropriate accommodation and support services for particular vulnerable groups.

### **Policy Framework and Budget**

35. This is a matter for Executive decision by Cabinet.

### **Consultation (including Ward Member Consultation)**

36. There are no matters in this report which relate to an individual ward.

## **Relevant Scrutiny Committee**

37. Healthy Living and Social Care

### **Background Papers**

None.

### **Contact Officer**

Suzanne Clifton, Head of Service

### **Officers Consulted**

Lance Carver, Director of Social Services

Tim Cousins, Information Manager (Lawyer) Democratic Services

Gaynor Jones, Operational Manager, Commissioning and Information

Linda Woodley, Operational Manager, Learning Disabilities and Mental Health

### **Responsible Officer**

Lance Carver, Director of Social Services