#### LONDON BOROUGH OF HARROW

Meeting: Overview and Scrutiny Health & Social Care Sub Committee

Date: 19<sup>th</sup> September 2002

Subject: Review of Certain Learning Disability Services by the Audit

Commission

Responsible

Chief Officer: Director of Social Services

Ward: All

Enclosure: Appendix 1 – Final Draft Report and Appendix 2 - Action Plan

## 1. **Summary**

1.1 The Audit Commission have reviewed several aspects of the Council's service to people with a learning disability. The report contains recommendations which have been responded to in an action plan

# 2 Recommendations

2.1 Accept Audit Report and endorse the Action Plan.

# 3. Relevant Previous Decisions

3.1 There has been no previous report on this matter.

# 4. Relevance to Corporate Priorities

This report is relevant to the Council's objective of improving the quality of health and social care in Harrow.

# 5. Background Information

- 5.1 For the past few years there has been increasing pressure on the Councils budget for purchasing day and residential care for persons who suffer from learning disabilities and especially those with cognitive disabilities such as autistic spectrum disorders and Aspergers disease. Additionally, the National Performance Assessment Framework for Social Services demonstrated that Harrow was not performing well on the cost of its residential care for people with learning and cognitive disabilities.
- 5.2 In the Summer of last year the Director of Social Services asked District Audit to undertake a review of the services provided by the Council with particular reference to the increasing cost of residential care services. The purpose of the review was to

establish that the Council's provision of such services was as cost effective as possible and that they were delivered in a way that maximised the benefits of clear objectives and partnership working.

- 5.3 The service review was completed in the Spring of this year and the final draft report was delivered in July. The report will be finally agreed on completion of the Action Plan (Appendix 1 and Appendix 2).
- 5.4 The scope and objectives for the review were agreed with officers and with Member input. They are set out in detail on pages 2 and 3 of the report. It is noted in this section of the report that the scope included a review of the transition arrangements for young people with learning or cognitive disabilities who were leaving the education system and whose future care would be the responsibility of the Social Services or the local health services. In relation to budget pressures this is a crucial area where decisions and plans made can have a life long impact on the services offered to the young person.

In addition to testing the robustness of these arrangements the report provides a "health check" on the Council's arrangements to deliver services with its partners to meet these needs. The cost of services was also considered but it would have required more time than that allocated to have undertaken a fully bench marked survey of the comparative costs between this Council and other Councils.

- 5.5 The report conclusions are summarised in pages 3 to 5. The detailed findings are presented in the "detailed report" which follows the main report. The response to the recommendations is at Appendix 2. This appendix identifies actions that have or will be taken to progress the reports' main recommendations.
- 5.6 Overall the report identified the following issues:

### **Strengths**

- Good relationships between the statutory agencies and with the voluntary agencies.
- Establishment of the Learning Disability Partnership Board (LDPB) presents an opportunity to move the agenda forward.
- The Harrow Learning Disability Team (HLDT) which is a joint Harrow Primary Care Trust (PCT) and Social Services team has good working relationships, enjoys the benefits of co-location and offers a single point of entry to services.

#### Weaknesses

- Lack of effectiveness in implementing the Joint Investment Plan (JIP) and absence of costed targets.
- Need to plan future service provision for people with cognitive disabilities.
- Confused management arrangements in the HLDT, with no clear operational policy, leading to unclear decision making and planning. There is a need for greater performance management in the team.

- Eligibility criteria for services requires updating to take account of changes in demand.
- The HLDT could be more effective in addressing child protection issues and other issues arising from disability, alongside a risk assessment system which needs to be in place.
- Inadequate finance and activity information system, and not utilising the potential of the Learning Disability Register.
- 5.7 The service review identified a number of significant areas of concern about the robustness of the arrangements to deliver good quality services to people with learning and cognitive disabilities. Most of these were already known to the management of both the SSD and the PCT and action is being taken to address them. The commissioning of this service review was an early step in the work to recover the position.
- 5.8 Fuller details of the action being taken appears in the response to the recommendations which is contained within the action plan. Overall the key initiatives in response to the issue identified are:
  - A comprehensive review of the working of the HLDT which will be focussed on achieving a person centred planning approach for users and carers. This is to be facilitated by the independent Government supported, National Development Team. This will start in September 2002.
  - The creation of a new integrated Children with Disabilities Team by April 2003. This team will bring together a range of services for children and young people with disabilities and will initially be managed by the Children and Families Service.
  - As part of the two projects outlined above there will be a complete review of the "transition arrangements". A "Transition Champion" is being appointed by the LDPB.
  - The Government requires a complete review of all eligibility criteria for social services to adults, to be completed by April 2003. This is known as the Fair Access to Care Scheme. Eligibility criteria for services will be based on the assessed threat to independence and will apply equally across all disability groups. Work on this project has already started.
  - Planning for services for people with a cognitive disability will be incorporated into the needs analysis work which is currently being undertaken as part of the LDPB's preparation of a commissioning strategy.
  - The Department is actively addressing the need for more effective performance management in all areas. The need for an effective management information system is well recognised and it is planned to have reached a decision about the procurement of a new system by the end of the year.

# 6. <u>Consultation</u>

6.1 This matter has not been subject to prior consultation. The issues within the Report will be considered by the Learning Disability Partnership Board which includes User and Carer representation.

# 7. Finance Observations

7.1 No observations

# 8. <u>Legal Observations</u>

8.1 No observations

### 9. Conclusion

- 9.1 It is recognised by senior management in both the SSD and the PCT that the effectiveness of the service provided by the HLDT has not fully kept pace with new statutory demands, new expectations from service users, and has not met the challenge of managing this demand within an increasingly constrained budget situation.
- 9.2 A 'recovery plan' is in place and the Service Review Report and the response to it identifies the actions that will be taken.
- 9.3 The introduction of the Government White Paper Valuing People which sets out "a new strategy for learning disability for the 21<sup>st</sup> Century" and with it the creation of LDPBs marks a sea change in the development of people with learning and cognitive disabilities and their carers.
- 9.4 Overall, the services currently provided by the Council and the PCT to people with a range of disabilities have many strengths, not least a highly skilled and committed work force. The Department is confident that it will bring about the reforms need to ensure that strong organisational arrangements will maintain and enhance the quality of the service.

# 10. Background Papers

10.1 None

### 11. Author

11.1 David Burnell

**Head of Community Care**