

Risk Management

Risk	Mitigation
Infrastructure funding transferred to Harrow Council is insufficient to meet future needs	<ul style="list-style-type: none"> • A detailed analysis of the capacity required clearly based on the number and location of people transferring is being developed. • The fit of the current services to the strategic direction of Harrow Council is being evaluated to inform judgements about the commissioning and contracting capacity required. • Current Harrow PCT commissioning capacity for these groups of people is being identified to be included in the resource agreed for transfer.
Total cost of individual care packages post April 2009 exceeds the amount agreed over a period of time e.g. 1-2 years	<ul style="list-style-type: none"> • People whose costs can be expected to increase e.g. people at risk of dementia; people with a history of increased costs through challenging behaviour, are being identified and increased costs estimated to then agree the treatment of future costs • All current costs in individual care packages funded by Harrow PCT are being identified i.e. day care and transport as well as accommodation. • Previous mortality trends in the S28A cohort indicate an average of 2 deaths a year and annual cost saving of £50k per individual for reinvestment. • An audit of S28A contracts has been undertaken and risks identified for mitigation. A similar Audit will be undertaken for people who fall under Continuing Care, Old Long Stay or Campus Re provision. A risk already identified is that the Old Long Stay people are placed by Harrow PCT without any service contracts. Work will be undertaken to understand and mitigate this risk prior to transfer.
Costs agreed at one point of time in 08/09 have changed by April 09	<ul style="list-style-type: none"> • People whose needs are expected to change before April 09 have been identified, and reviews are underway to understand and agree the implications for the funding to transfer. It will not be possible for the current Council budget for Learning Disability to accommodate these costs.
People currently receiving Continuing Health Care funding but whose assessment shows they have social care needs may object to the transfer and use the statutory appeals process to challenge the transfer.	<ul style="list-style-type: none"> • Accessible information will be made available to people about: the policy background to this transfer; the process of assessment and appeal; the continuation of current services until comprehensive reviews and individual planning indicates otherwise; the availability of benefits advice to maximise income alongside the client contribution assessment (these were key messages from the Learning Disability Partnership Board) • Harrow PCT will need to undertake consultation with their patient group and their advocates before any

Appendix 2

	<p>transfer can take place.</p> <ul style="list-style-type: none">• Advocacy support will be made available to people (another key message from the Partnership Board).• A first stage appeals hearing will be scheduled by Harrow PCT to ensure timely completion in February / March. This is an extremely challenging timescale and it is unlikely that this will be achieved by 1 April.• The London Strategic Health Authority is being engaged to ensure that second stage i.e. final appeals to the SHA can be scheduled in a timely manner.
<p>People who are currently funded through Old Long Stay funding may similarly object to this transfer following assessment. There is no statutory appeals process for these people as there is around Continuing Health Care funding, but there could be a reputational risk for Harrow Council.</p>	<ul style="list-style-type: none">• Support, information and advice will be offered as described in 8.3.4• Harrow PCT are taking legal advice on the consultation and assessment requirements if these people are to be included in this transfer.