NORTH YORKSHIRE COUNTY COUNCIL

Care & Independence Overview & Scrutiny Committee

12th November 2012

Progress report on Complex Needs Placements by the Corporate Director of Health and Adult Social Care

1. Purpose of the report

1.1 To report on progress made by Health and Adult Services (HAS) in identifying and reviewing placements of individuals with learning disability who have complex needs.

2. Background

2.1 A report was presented to Care & Independence Overview and Scrutiny Committee in May 2011 which identified the need to focus on placements of people with a learning disability with complex needs, in particular those placed out of the North Yorkshire area. An update was provided at the mid cycle briefing in January 2012.

2.2 The report identified some of the disadvantages and risks associated with these placements in particular the difficulties for both families and assessment staff to keep in contact and monitor the quality of care, as well as the high costs of the placements.

2.3 In 2011 a 'Panorama' programme exposed serious incidents at Winterbourne View, a specialist private hospital for people with learning disability, which has resulted in significant levels of scrutiny by central government and regulating agencies to minimize risks and develop an improvement framework for the future.

2.4 The final report by the Department of Health on Winterbourne is expected imminently; however a number of reports have already been produced and although the incidents took place in a health facility, they identify issues which potentially relate to all out of area placements; these include lack of appropriate monitoring, lack of forward planning, limited contact with relatives and assessment staff etc.

3. Progress on action by HAS

3.1. Health and Adult Services have set up a robust programme management process to map the current position in respect of complex needs placements, reassess placements and stimulate the development of local services.

3.2 The mapping exercise aims to provide a clear baseline on which to identify location, costs, timeline of reviews and covers individuals placed in either registered residential care or supported accommodation; this is now close to completion. Some of the complexities surround the need to clarify commissioning

responsibilities between HAS and the NHS as many individuals with complex needs have health and social care needs and are jointly funded by both agencies.

3.3 We have identified approximately 240 individuals with learning disability in residential care of which 111 are in placements costing over £1,000 per week. We have identified approximately a further 330 individuals in supported living accommodation, the costing exercise for this group is still in progress.

3.4 We have set up a county wide Complex Needs Team which has begun to reassess priority cases where a previous review identified a need for change or concern has been expressed regarding cost or quality of placements.

3.5 We have in place brokers in each of our areas who negotiate the cost of each new placement and undertake a best value exercise as each re- assessment has been completed.

3.6 We are in the process of stimulating the market to increase the availability of local services and where necessary encouraging quality services. We have been able to secure a property in Harrogate which is currently been developed by a Housing Association and are in discussion with housing and care providers regarding potential new developments in Skipton, Harrogate, Selby, Filey and Colburn.

3.7 New services will minimise the need for future placements out of area as well as potentially being options for people returning to North Yorkshire.

3.8 We are also engaged in a regional exercise with other local authorities to jointly address providers with placements from several local authorities in the region. This is supported by the Association of Directors of Adult Social Services (ADASS).

3.9 Finally we are in discussion with NHS colleagues to undertake some of this work jointly; this has been made more difficult by the extensive re-organisation of the NHS and especially commissioning arrangements.

3.10 The work to re-assess people with complex needs is extraordinary sensitive. Staff from HAS need to ensure individuals and their families are given clear options; the Mental Capacity Act 2005 requires us to undertake very thorough assessments of individuals who lack capacity to consent, undertake Best Interest meetings and involve advocates to ensure proposed moves are beneficial to individuals.

4. Recommendations

6.1 Members are asked to note the content of this report and the steps that have been put in place.

6.2 A further report advising of the progress in addressing the needs of people with complex needs will be presented to a future committee meeting.

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28th October 2012