

Learning Disability Services Efficiency Project



Delivering savings
in learning
disability services



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Introduction

In 2011 the Local Government Association launched the Adult Social Care Efficiency (ASCE) Programme which aimed to share new, innovative and more efficient approaches to delivering adult social care. Fifty four councils took part in the three year programme, working on forty four projects. The LGA worked alongside these councils sharing emerging lessons and providing evidence of cashable savings across a range of transformational initiatives and approaches. The findings were reported in three publications, which can be found on the LGA website at <http://www.local.gov.uk/childrenadultsfamilies>.

The ASCE Final Report, published in July 2014, reported that councils were finding it particularly challenging to make savings in learning disability (LD) services. This supports other national findings which report that spend in other areas of adult social care has been falling or standing still over recent years, whilst the spend on services for adults with learning disabilities has continued to rise (£5.14 billion in 2010/11; £5.17 billion in 2011/12; £5.23 billion in 2012/13; and £5.35 billion in 2013/14 budgets)¹. Despite this rise Scope, in 2013, estimated that social care for working age disabled adults is underfunded by £800 million².

In 2012/13 just over 30% of all of the expenditure on adult social care was spent on services for adults with learning disabilities, which represent a significant proportion of total spend. The Treasury expects local councils to find annual efficiencies of 3%³, therefore no area of spend within adult social care will be exempt.

To support councils in identifying the efficiency savings required the LGA, in 2014, launched the Learning Disability Services Efficiency (LDSE) Project. The project follows the model used for the ASCE programme where councils were given a grant to fund an external diagnostic of the service that is used to inform an efficiency plan that aims to deliver the savings required while achieving the desired outcomes for service users. Council's efficiency plans will be delivered to autumn 2016 and findings will be shared throughout the duration of the project for the benefit of the sector.

Following an open bidding process, five councils were selected to participate in the project. These are the London Borough of Barking and Dagenham, Cumbria County Council, Darlington Borough Council, Kent County Council and Wiltshire Council. The participating councils met for the first time in November 2014. This report outlines the initial position of these councils and any early lessons emerging from them. It also builds on the findings from the ASCE programme and other recent sources to draw out some initial messages for the sector.

¹ National Adult Social Care Intelligence Service (NASCIS)

² Scope, Fernandez et al, 2013.

³ HM Treasury, Autumn Statement 2013.

Background and context

A learning disability is defined by Mencap as having a reduced intellectual ability and a difficulty with everyday activities⁴. In England in 2011 an estimated 905,000 adults had learning disabilities⁵. Councils are experiencing around 2-3% per annum growth in the number of new service users who have a learning disability or are within the autism spectrum and requiring help and support. The majority of new users are transitioning from children's to adult services, therefore most are already known to the local authority and the vast majority will already have been receiving substantial help from children's services prior to their transition.

Managing this growth in demand presents a significant challenge to many councils as well as to users and carers. For those transitioning from children's services at the age of 18⁶, family carers and young people have become familiar with the services, approach and culture of children's services. The approach adopted by adult social care is often quite different, with managers looking to offer services that build resilience, promote independence and seek to reduce the need for statutory social care services.

Demand is also seen to come from new users who come in to contact with adult social care services when family carers are no longer able to provide the support required or at a time of crisis. This is particularly relevant as life expectancy of adults with learning disabilities is increasing and family carers are becoming more elderly or die with adult dependents.

The LGA estimates that learning disabilities account for 44% of the increasing demographic pressure experienced by local authorities. Research undertaken by the Centre for Disability Research at Lancaster University on behalf of Mencap concludes that there will be 'sustained growth' in the need for social care services for adults with learning disabilities between 2009 to 2026, with an estimated average annual increase of 3.2%. They also estimate that approximately 25% of new entrants to adult social care with learning disabilities will belong to minority ethnic communities and by 2030 the numbers of adults aged 70+ using social care services for people with learning disabilities will more than double⁷.

There are many policy changes approaching that will affect the lives of young people and adults with learning disabilities. The two pieces of legislation of greatest significance are Part 3 of the Children and Families Act 2014, which focuses on Special Educational Needs and Disability and is due to be implemented in September 2014, and Part 1 of the Care Act, which focuses on the care and support of adults which is due to be implemented in April 2015.

Importantly, the Children and Families Act 2014 introduces a system of support which extends from birth to 25, through the development of coordinated assessment and single Education, Health and Care Plans; improving cooperation between partner agencies; and

⁴ Mencap <https://www.mencap.org.uk/about-learning-disability/about-learning-disability>

⁵ Source: www.ihal.org.uk/numbers/howmany/laestimates/

⁶ New legislation in children's services has raised the age to 25 for which there must be a shared Education, Health and Care Plan – Children and Families Act 2014

⁷ Centre for Disability Research, Lancaster University: Estimating Future Need for Adult Social Care for People with Learning Disabilities in England. March 2013.

giving parents and young people greater choice and control over their support. Preparation for adulthood is a key element of the reform.

Part 1 of the Care Act pulls together threads from several other different Acts into a single framework for care and support. It reforms how the law works, with a focus on person-centred practice and outcomes, putting people in control of their care and support. It highlights the importance of preventing and reducing needs, putting people in control of their care and it putting greater emphasis on the role of carers in that process.

In addition to the increase in demand and new legislation, councils are also facing an increase in the complexity of need of users. Advances in healthcare over the recent past, means that those with medical conditions who may have historically died in childhood are now surviving and living with those conditions. Life expectancy for people with learning disabilities is also increasing. As adults live longer they are experiencing more complex health and social care needs, which now need to be met by those working in adult social care to ensure that they achieve the best outcomes possible.

There are other challenges for adult social care when looking to help adults with learning disabilities. The costs of care, especially residential care, are much higher for adults with learning disabilities than for people with similar needs from other groups e.g. older people with dementia. This is in part because staff pay levels are higher, but also the profit margin by which these homes operate tend to be higher – in part to manage the risk of voids. This is still the case even when the services are provided by charitable organisations and other not-for-profit companies.

Sharing lessons to date

The LGA ASCE Programme Final Report identified a number of ways in which councils were making efficiencies in learning disability services by reducing costs and reducing demand for services. These included:

Reducing costs:

1. using a fairer pricing tool to identify the real costs of a person's care linked to their personal care needs;
2. the development of a tool to support Open Book Accounting. This has been developed in Yorkshire and Humberside by Wakefield Council. It has been particularly helpful in establishing the true cost of high care-need placements;
3. using new models of community housing to offer communal living for adults who might otherwise be in residential care;
4. linked to the above; moving adults from residential care to cost effective community based housing with support models;
5. using Direct Payments as the method to help people use a personal budget in a creative way to improve outcomes and reduce costs;

6. developing an approach which focuses on paying for outcomes which promote independence. A good example of this approach is seen in Croydon Council seen on page six;
7. transferring services to a social enterprise (Suffolk) or a trading company (Croydon) who have savings targets to deliver;
8. reducing the amount of day care available and offering personal budgets to enable people with moderate needs to access local community based services as an alternative. Evidence suggests that this approach may have improved outcomes but it did not always result in efficiency savings;
9. working with the NHS to ensure that Continuing Health Care Costs are met by them.

In addition to these approaches, which have looked to find a better way of agreeing a fair price for care or producing new services at a lower cost, councils continue to find ways of saving money through interventions that will reduce demand. These include:

Reducing demand:

1. promoting independence of customers through schemes that assist adults into employment or into community activity where there is little or no direct cost to the council;
2. working with the NHS to develop programmes which assist people with challenging behaviours to look to reduce their care needs over time;
3. using assistive technology to help adults with learning difficulties to live more independent lives e.g. replacing night staff with technology in supported living schemes;
4. managing transitions through early interventions for younger people to set them on a path of learning to live more independently;
5. developing the equivalent of a “reablement service” (where there is a focus on training people for independent living) for adults with learning disabilities.

Case studies from Tameside and Croydon Councils and the open book accounting software from Wakefield in the first ASCE report illustrate some of these approaches.

Learning disability services in Croydon

Croydon aimed to focus specifically on learning disability services to develop a model that delivered better outcomes for users at lower costs.

In early 2012 the council invited Alders to undertake a critical challenge of the service at the time in order to inform a new model of delivery.

Before the challenge, Croydon had already undertaken a number of reviews of higher-cost packages of care and made substantial savings. There had been a significant shift in expenditure from residential care to direct payments for service users and many of these now lived in the borough in supported accommodation. There was already an assistive technology adviser in post with a brief to ‘normalise’ the use of the technology to help

people live more independent lives. Croydon also had good working arrangements with NHS colleagues, particularly on the more complex cases. This was not a poorly run service.

The challenge showed Croydon that they had scope to reduce the number of more expensive packages of care costing over £1,500 per week. Over half (56 per cent) of placements were in residential care and placed out of the borough. Thirteen per cent of those placements were for older people (aged over 65) for whom an older person's care home may have been a more appropriate option. The diagnostic found that many of the high costs came from placements that were made in a crisis, particularly when an ageing carer had died or could no longer cope. The practice was not assisting people to progress or helping them to find ways of developing more skills towards independence.

It was acknowledged that there needed to be much 'smarter' plans to support people on this journey. There was a requirement for greater access to therapeutic help for those cases where there are challenges in managing the care. Finally, in common with many councils, Croydon's single biggest challenge in social care was how to meet the costs of younger adults coming through from children's to adult services. This warranted special attention.

Croydon developed a plan to address these challenges. A significant cultural shift was needed to ensure that the service was based on the principle of promoting independence. The council adopted the mantra of 'progression not just maintenance'.

Croydon reduced its spending further with the following activities:

- extending the review programme for high cost packages
- developing a strategy for out-of-borough placements
- developing a 'progression pathway' that was integrated into the review process
- identifying those people who were receiving more services than were required to meet their needs, including those receiving 24/7 packages; those in residential care who were also receiving day care; and those making transitions to older people's services
- extending the deployment of assistive technology.

As part of the culture change programme front-line practitioners and commissioners began working more closely together to achieve the best outcomes for customers. They connected the knowledge about the customers' needs with the available services in the local market, creating new services where required. The whole team collaborated to offer the best service option that would promote independence. They then looked for consistency in approach across the service.

A more recent development in Croydon has been the creation of a local authority trading company which has taken on most of the provision that was previously managed within the council. The trading company shares the philosophy and direction set out by the council of helping to create efficient and effective services through promoting independence. The company has given managers a good understanding of the costs of their services and they are incentivised to find efficiency savings in their day-to-day delivery. Managers look for innovative and creative solutions with their customers, for instance addressing the difficult issue of providing transport for disabled people by working with Transport for London. The company has already contributed to the council's savings.

Counter to the trend seen in other local authorities, the service has achieved a balanced

budget and met the demographic pressures that it has experienced over the last two years.

The review undertaken in Tameside produced a comprehensive list of actions undertaken to reduce spend in this area:

Reducing costs in learning disability services in Tameside

Tameside undertook a review of its learning disability service as part of their full savings review of adult social care. Despite new pressures from users transitioning from children's to adult services, the council reduced spend by over 5 per cent over the three years. It has produced a comprehensive list of actions undertaken over the period to reduce spending in this service area, which may prove a helpful checklist for councils that are exploring how to reduce or manage their costs in learning disability services. The actions include:

- reviewing all placements for costs and the service delivered
- moving a number of people each year from more expensive out-of-borough residential placements to local supported accommodation
- radically reviewing the local offer of supported accommodation, including offering some larger-scale services where costs are reduced because of the higher volumes of people being supported
- extending the use of assistive technology in supported housing schemes for adults with learning disabilities and replacing the need for night staff
- transforming day care services, working with local sports and countryside services, among others, to offer a broader range of activities
- wider use of direct payments
- applying for ordinary residence for people who were placed in their own accommodation in other authorities
- reviewing care packages in the community
- reviewing employment services
- reviewing transport arrangements, including eligibility.

On-going challenges

While the practical approaches and initiatives set out above have been proven to deliver efficiency savings, Councils in the ASCE programme and more recently the LDSE project reported that the following challenges remain in seeking to bring down costs and reduce demand for services:

1. how do you get all providers to come to the table to discuss the real cost of care (for both residential care and housing with care)?
2. can you ensure that all housing based models are more efficient than the equivalent of residential care costs?
3. can housing with support providers be encouraged to "promote independence" when some of the schemes appear to do the opposite?

4. should users and carers be offered “choice” when there are lower cost ways of meeting someone’s needs?
5. how do you deal with transport and transport costs particularly within day care?
6. is closing down day care centres and offering personal budgets a lower cost way of meeting people’s needs?
7. what role can direct payments play in either reducing costs or reducing demand?
8. is there an equivalent to “intermediate care” / “reablement” service that can assist adults with learning disabilities?
9. can the NHS play a helpful part in developing behavioural programmes which will reduce demand?
10. can we move to a more outcome based model that promotes independence and reduces costs?

These are some of the challenges facing the councils participating in the LDSE Project.

A summary of each area, detailing their current position, the project objectives and how they are seeking to address these challenges is given in the next section.

A summary of each pilot site after six months of the programme

London Borough of Barking and Dagenham

Barking and Dagenham have set a vision for their learning disability services which is delivered under the banner of “Fulfilling Lives”:

The aim is “to ensure that people can live independently and safely with access to independent travel, mainstream activities, high quality day provision, training, support and health care and to receive their social care support as close to home as possible.” The vision is under-pinned by user and carer engagement, formally through the Learning Disability Partnership Board, which involves the CCG, mental health colleagues, providers and users and is a subset of the Health and Well Being Board and also through the LD service.

A target has been set for all services in Barking and Dagenham to find savings in the region of 15-20%⁸. Already £250,000 has been found from managing underspends and vacancies in the service. At present only 18% of the adult social care budget is spent on services for people with learning disabilities, which is much lower than average.

There is a new leadership in Barking and Dagenham and they have a political philosophy

⁸ Barking and Dagenham Council has declared that it has to find £53 million savings over the next three years across all service areas.

that supports a model of care which has a focus on helping people to support themselves, where this is feasible.

Barking and Dagenham already has the second highest number of registered learning disabled people in London. The Council commissioned the London Metropolitan University to help them understand the current and future trends for the learning disability services in the Borough. In 2012 3,275 adults with a learning disability have been identified, of which 698 have a moderate or severe disability and are likely to need services from the council. This is likely to rise by 529 people in the next ten years of which 132 people will have eligible care needs. It is likely that a high percentage of this group will be from the Black and Minority Ethnic Communities as this reflects the changes of population within the Borough.

The Council run two in-house day centres one of which caters for people with moderate needs and the other for people with higher care needs. There is also a contract with a voluntary organisation that run a single day care centre. There is an aim to reduce the use of the day care centres and to replace this with more employment and community-based options.

Despite the long history in Barking and Dagenham of the use of direct payments (especially the use of personal assistants (PAs) there is not really an alternative market developed to help support adults with a learning disability in the community. As a result there has been a relatively low take up of Direct Payments in the Borough, especially given the high take up in all other client groups. The service aims to develop a balance in ensuring that there are community based options for the younger group of service users whilst still recognising that many older users have become reliant and dependent on traditional day care.

In order to make the changes that Barking and Dagenham require to deliver their “Fulfilling Lives programme” they have undertaken the following actions:

- created a political vision for adult care (as above)
- ensured that their market position statement reflects the future needs of the service
- pump-primed some local social enterprises through an innovation grant to assist in increasing the number of opportunities for adults with learning disabilities in the Borough.
- started extensive communication with family carers to look at the obstacles for them in using PAs – this is likely to lead to a new training programme to help PAs assist adults with learning disabilities
- developed a plan to close one of the three day centres
- piloted in-house apprenticeships and traineeships at a local college for adults with learning disabilities
- reviewed the current supported-living arrangements in the Borough (which house 130 service users) in order to promote the new policy direction – particularly the take up of direct payments.

The next phase of the programme will include a renewed effort with local colleges to help people into employment; further emphasis on the use of PAs which will include better

information and advice and more training to assist PAs; and work with colleagues from the council's leisure services to increase opportunities for younger adults.

They continue to consider the challenges of how to increase use of public transport to reduce the costs of the current passenger transport services.

Finally, to help staff work better with carers and to develop their model of promoting independence Barking and Dagenham have offered "a courageous conversation" training course. They expect that this will give staff a wider set of skills in helping carers to see beyond the traditional services to new opportunities for adults with learning disabilities.

Darlington Borough Council

Darlington Council's adult social care services for adults with learning disabilities is a continuous service from cradle to grave comprising two teams covering people from birth up to age 25 and those aged 26 plus. Their aim is to enable disabled people to have a better life; to give a voice to families and carers; to work together to challenge and beat discrimination; to have staff that offer continuity from birth to end of life for service users and carers and to ensure that there is a seamless service at any transition.

The Council has begun working with Alder Advice to achieve three outcomes:

- an understanding of the cost effectiveness and value for money of existing models of support
- the development of a plan, created in partnership with service users and carers that sets out future intention
- An understanding of how assistive technology can contribute to an individual's independence and reduce overall costs.

Darlington Council has looked at the predicted demand for services over the coming years⁹, They could see that there would be 1,519 people between the age of 18 and 64 who needed services in 2014 which would slightly reduce to 1,502 by 2018. On the other hand there were 417 adults over the aged of 65 with a learning disability which would increase to 452 by 2018. Just over 600 of these individuals were currently known to Darlington Social Services of whom 123 were under the age of 17 (69 of these were 13-17). In addition there were 51 carers aged over 65 and 2 over 90 years of age.

⁹ Data from the *National Adult Social Care Intelligence Service (NASCIS)*

What we know about our individuals and their carers

Age band	Numbers of Learning Disabled People	Carers aged 65+
0-4	0*	0
5-12	54*	0
13-17	69*	0
18-64	402	48
65-74	53	0
75-84	25	1
85+	3	2
Total	606	51

* Under 18s are listed by primary need on Carefirst e.g. cerebral palsy, autism but may also have other impairments.



They set six main objectives for their programme:

- to generate financial savings through improved use of existing housing options
- to understand the potential of increased use of assistive technology to maintain an individual's independence
- to give greater choice and independence for individuals
- to deliver an improved quality of service
- to increase societal contributions and employment prospects for adults with learning disabilities
- to delay the requirements for additional social care services in later life.

Work began in July 2014. By October 2014 the following has been achieved:

- 115 reviews have been completed with a clear support plan with a focus on outcomes that will assist people in finding greater independence.
- A new housing matrix has been developed to gather information on the needs of all of these individuals so that housing needs can be matched to resources.
- The use of assistive technology has been built into the assessment process – which is now being widely used by social workers.

The new housing needs matrix is seen as a critical part of the success of this project so that a link can be clearly made between someone's personal needs and the type of accommodation that is required to meet those needs. This will both inform current provision but also enable planning for the future (particularly younger adults coming through transition).

Darlington can already show savings from their early work and cited a couple of case studies to demonstrate this:

Case Study One

Andrew is a gentleman who has spent the majority of his life in institutional care – hospital then residential care. He was assessed as having the skills needed to move into supported accommodation. He has since moved into Extra-Care in his own flat. This has enabled him to increase his independence, develop social interaction and removed the requirement for individualised 1:1 support.

100% care provision to Basic Tenancy Support
Saving to council - £6,648 per annum

Case Study two

Linda lived with her parents until their deaths. She married and moved into a flat with her husband who became abusive. She became reclusive and was prone to financial abuse, isolation and self-neglect. She had support from health services and was eventually referred to Darlington Borough Council. She voluntarily entered residential care because of the lack of life skills and needs associated with self-neglect.

Linda re-acquired skills quickly and it was recognised that she was ready to move. She moved into her own flat in Extra-Care. Linda now receives tenancy support three hours per week rather than 24/7 support she was getting in residential care.

Linda has gained confidence, increased independence and freedom and developed good relationships.

100% support provision to Basic Tenancy Support
Saving to council - £15,668 per annum

In Darlington, learning disabled individuals and their carers regularly contribute their views through the Learning Impairment Network and via their social workers. A number of themes emerged from an Open Space event held as part of the LDSE work with Alder Advice:

- peer support for people moving out of family home.
- put people in contact with each other via share email lists.
- two way feedback of progress and ideas between professionals and the Learning Impairment Network.
- importance of avoiding labelling people.
- building on links and relationships from Open Space Event and networks

Alders Advice completed their fieldwork in November 2014 which included extensive interviews with staff from the Council and partners, and case file audits which highlighted areas of excellent social work practice. The initial report was received in December 2014 which contained 55 recommendations across 11 key areas for the Council to consider going forward.

The next step in the process is for the recommendations to be prioritised and action planned for the implementation of the recommendations in terms of improving outcomes, efficiency, and cost savings.

Darlington will continue to work with a strong focus on outcomes for adults with learning disabilities that can improve their independence in the right housing options.

Cumbria County Council

Cumbria is another council facing significant financial challenges in the coming years. They have already delivered £80 million of savings but have a similar figure to find in the coming three years. There has already been a reduction in the workforce but despite a proposed increase in council tax of 1.99% for 2015/16 there are still an estimated 1800 jobs to be lost within the council. Many budgets have been top sliced but there will need to be a more radical change to deliver the required savings over the coming period.

The Joint Strategic Needs Assessment (JSNA) reports that there are an estimated 9000 adults with learning disabilities living in the county with 1,900 receiving services from adult social care. The council spend around £45 million in this service area and have a pooled budget for packages over £50k per annum with the NHS (approx. £20m) with contributions of 61% from the local authority and 39% from the CCG. There is a risk share in place based on contributions and last year they reported £400,000 overspend.

Cumbria has in recent years restructured across the county to lose a specialist learning disability team to have generalist practitioners. The council have now reconsidered this position and are moving back to a specialist care management and assessment service from April 2015.

Cumbria has worked with Alder Consultancy to help develop their thinking in this service area, looking to review the packages of support that people receive, linked to the "progression model". There is an expectation that a number of people will be re-assessed and moved from residential care to more cost effective community support options; they will develop the use of assistive technology and develop a set of short term services to help people gain greater independence. In addition all high cost placements will be reviewed to examine the costs of the services and the outcomes that are being achieved. A target of £2.5 million savings will have to be found from these actions over the next 3 years.

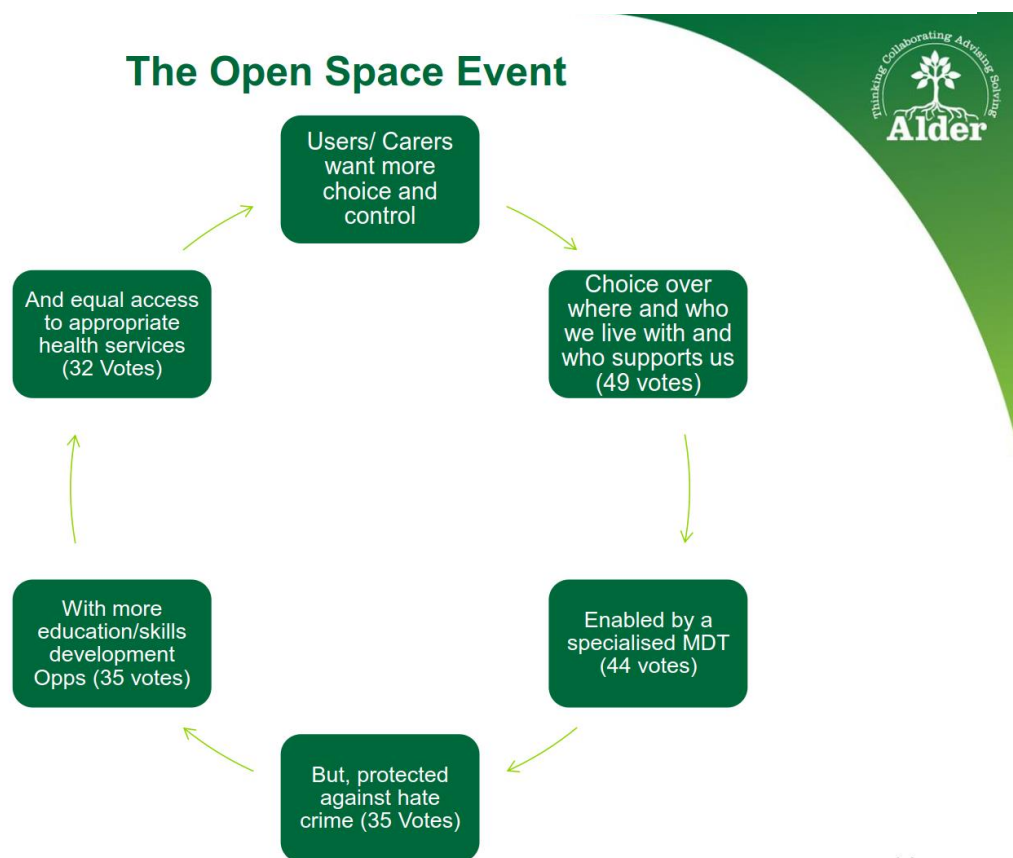
In planning for the future, Cumbria are looking at models of extra-care housing for older people to operate for adults with learning disabilities in a cost effective core and cluster model. Discussions are already underway with a number of housing providers to see how this can be progressed.

Cumbria has held a number of events to share their new vision with front line staff, providers, customers and their carers. Alder facilitated an 'open space' event in Cumbria

and 50% of the people who attend were people with a learning disability. As part of that day 20+ areas of discussion were identified by the group and at the end people were able to vote what their top priorities were:

1. Be able to choose where I live, who I live with and who supports me
2. Have a specialist service to support me (social work team)
3. More access to leisure and work opportunities
4. Feel free from the risk of hate crime

The diagram below gives a picture of what this looks like:



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The council aim to address the points above in the LD Strategy which will be published later in 2015 or through the re-tender of services in the next 18 months. A new commissioning strategy is being drafted with a strong focus on accommodation and support plans. Meetings have taken place with local providers to help take forward the new plans. They are also exploring outcome based contracts for the future based on the progression model. The council also aims to have a specialist social work team in place by April.

Following the Winterbourne View work it is now standard practice in Cumbria to carry out enhanced reviews whenever there is a change in circumstances or a review is due. In addition to this the adoption of the progression model and the quality of life questionnaire enables people to contribute more to the assessment process and look at what they can (or could do) rather than what they can't.

A framework of providers is in place that is able to meet the needs of those people that don't fit into 'ordinary' services. Providers are identified through mini competition tender process and are required to state how they would support the particular needs of an individual which are identified within an 'individual service specification'. This is a person centred document produced by the people who know the individual and includes input from family and the person where appropriate or if they wish to contribute.

Kent County Council

The programme in Kent continues to be developed through the partnership between Kent County Council and Newton (Europe). The focus within their learning disability services is to:

- develop a pathway to independence programme
- to increase use of assistive technology
- to increase use of the Shared Lives Service
- to re-shape the local provider market to develop more cost effective supported housing options.

Kent has launched a "Pathway to Independence Programme" which supports the delivery of the enablement model to people with learning disabilities. It aims to increase people's independence and enable them to move on from traditional social care support, so they can live and participate in their community.

The Pathways to Independence pilot started in April 2013 at Dover, Thanet, Dartford, Gravesham and Swanley Community Learning Disability Teams.

The project objectives are to:

- focus on short term interventions
- support people to develop their skills, community participation and presence
- produce cost savings to support Kent County Councils financial plan
- reduce community support packages
- improve health and wellbeing
- increase opportunities for employment, and getting ready for work
- reduce the number of people requiring traditional services.

One of the existing in house providers -The Independent Living Scheme, was used to pilot the model.

Case study one

Someone who has benefited from the pilot is a gentleman in his early 50s who lives with his elderly mother. He has cerebral Palsy and is profoundly deaf with moderate learning disabilities. He was receiving a lot of support from his family so it was hard to assess his

level of understanding and potential for future independence.

He had not been left on his own since his adult years, other than when his mother was in the garden, and had never held a budget or had to manage household tasks as the family were concerned about his mobility and his ability to understand complex issues.

The outcome of the 12 week service identified that he was happy to be left on his own for short periods of time and he actually enjoyed the experience while it lasted. We were able to talk about his future and help him understand how he could help his aging mother around the house in little ways, such as preparing small snacks.

The assessment also showed us his understanding of finances from observing others e.g. using a bank, writing cheques, withdrawing money and paying bills. This knowledge was previously unknown to us, yet that knowledge showed his ability to include himself in day to day life and the interest he had in participating, by observation, in all aspects of his life.

He feels proud of himself, knowing that if anything were to happen to his mother he would, with the appropriate level of support, be able to manage and it has been lovely to see his confidence grow.

Kent is also looking to further develop their work in the use of assistive technologies for this service area. A 10 month pilot was undertaken in East Kent to establish the need and potential benefits for service users. The pilot established that:

- telecare needs for LD service users are different to those with a physical disability or older people who have social care needs
- need to ensure that service users, family, and carers were happy to use the equipment and trusted it to help them
- an excellent working relationship was needed between the OT and the installation engineer to ensure that the right equipment was identified and installed and that relationships with the service user were maintained
- need to identify a flexible range of equipment for people with learning disabilities
- a real desire amongst practitioners to roll the pilot out further to benefit a larger number of service users.

Kent is also expanding its Shared Lives programme so that it appeals to a greater number of vulnerable adults who want to live with hosts in a home environment. This includes:

- expanding the scheme to people with dementia
- increasing the number of respite arrangements for shared lives
- building on our existing work with people with mental health issues
- exploring more day care and respite placements across all client groups
- re-shaping local provision.

The design model and process for moving service users already in a residential setting into alternate models of care is under development. Critical decision points will include:

- the method of engagement with key stakeholders involved in the process
- prioritisation of cases
- link with the transition services
- effectiveness of purchasing process
- commissioning Strategy for Support and Housing Providers and if the procurement process is required the letting strategy and contract model
- the design model to increase demand and capacity for Shared Lives service.

Wiltshire Council

In Wiltshire there are 1,325 adults with a learning disability who receive services from the council. Of these adults 306 have a learning disability with autism. The group can be subdivided into 620 adults with complex needs and 771 service users with more moderate needs. Last year there were 110 safeguarding alerts for this group. Wiltshire has 309 people in residential care homes (plus an additional 8 in nursing homes) of whom 102 are placed out of the county.

In 2012/13 the Council allocated £38m to meet the needs of adults with learning disabilities, however over £42 million was actually spent by the service. Wiltshire Council has protected Adult Social Care budgets and is undertaking a rebasing exercise for LD budgets as part of the efficiency project.

Wiltshire appointed Red Quadrant to assist them with meeting the challenges of how to manage the service within budget. The assessment undertaken by Red Quadrant reinforced the conclusions of the 2013 Market Position Statement, reiterating that:

- there was a very immature local provider market – too many services helping people with moderate needs and not enough geared up to help people with complex needs
- the South West Fair Pricing Tool that the county has been using needed amendment to reflect the Care Act
- once people received a service there was a low priority given to reviews of that service and the outcomes being delivered, unless safeguarding concerns were raised. This was particularly challenging as many of the packages of care had been set up in a crisis – resulting in high cost and high levels of care which might have been reduced on review
- the costs of services were higher than they should be when considering similar councils. They concluded that the Council were buying too much provision often due to high cost/high staffing models being used by some providers which did not match with the needs of customers
- Red Quadrant also found significantly different practices between the community teams across the county with better outcomes from the specialist teams than the generalist locality teams. They also found that data quality was poor
- on a positive note they found that Wiltshire had good controls over who received services (lower numbers than comparator authorities).

Wiltshire has agreed an action plan to address the issues identified. The action plan

includes the following points:

- all assessment and care management work for adults with learning disabilities will be handled by specialist teams
- the assessment process will be revised to focus on outcomes and all staff will be trained to use the new tool. A six monthly cycle will be introduced for reviews
- a new brokerage process will be put in place to make payments and agree costs. This will be centrally located within the county
- there will be an improved data quality system with information on all service users maintained in a timely fashion
- there will be a new approach to budget profiling linked to how the needs of people with complex needs are being met
- there will be a review of the resource allocation meetings to ensure costs are linked to needs and outcomes identified
- they would introduce tapered payments for some packages of care – linked to outcomes for all people with complex needs
- there would be a new supported living framework in the county which would be regularly reviewed
- there would be a dialogue with providers on how they could reduce their costs by working with the Council, linked to further conversations with local providers about what types of service would be required in the future
- there would be discussions with the Clinical Commissioning Group about a new Intensive Crisis Support Service in the county
- there would be a review of the process to help people get Direct Payments
- there would be a review of the policy on respite care
- there would be a development of the fairer pricing tool for use in the county
- all of this would be overseen by a new Project Board who would manage the delivery of these actions.

Importantly, all services in Wiltshire are underpinned by person centred planning and user, carer and stakeholder engagement, including a Partnership Board co-chaired by the Head of Service and a customer and supported by a third sector organisation.

Learning Disability Services Efficiency - The next steps

All five of the councils above will spend the next year developing their services through the actions described above. The LGA will look to capture the learning from these actions and a further report will be published in summer 2015. It aims to help all councils look at how they might consider where costs can be reduced and how savings can be made in this key service area.

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