# ADULT AND PUBLIC HEALTH SERVICES PORTFOLIO DECISION SCHEDULE



Monday, 31 January 2011

at 10.00 am

in Committee Room A, Civic Centre, Hartlepool

Councillor G Hall, Cabinet Member responsible for Adult and Public Health Services will consider the following items.

#### 1. KEY DECISIONS

No items

#### 2. OTHER ITEMS REQUIRING DECISION

No items

# 3. ITEMS FOR INFORMATION

- 3.1 Commission On Funding Of Care And Support *Director of Child and Adult Services*
- 3.2 Hartlepool Vulnerable Adults Protection Committee Quarterly Statistics & Update *Director of Child and Adult Services*
- 3.3 Mental Health Day Services *Director of Child and Adult Services*

#### 4. REPORTS FROM OVERVIEW OF SCRUTINY FORUMS

No items

# 5. LOCAL GOVERNMENT (ACCESS TO INFORMATION) (VARIATION) ORDER 2006 EXEMPT ITEMS

Under Section 100(A)(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business on the grounds that it involves the likely disclosure of exempt information as defined in the paragraphs referred to below of Part 1 of Schedule 12A of the Local Government Act 1972, as amended by the Local Government (Access to Information) (Variation) Order 2006

#### 6. **KEY DECISION**

No items

### 7. OTHER ITEMS REQUIRING DECISION

No items

#### 8. ITEMS FOR INFORMATION

8.1 Autism Spectrum Conditions Collaborative Framework Agreement (Paragraph 3) – *Director of Child and Adult Services* 

# ADULT AND PUBLIC HEALTH SERVICES PORTFOLIO

Report To Portfolio Holder 31 January 2011



**Report of:** Director of Child and Adult Services

**Subject:** COMMISSION ON FUNDING OF CARE AND

**SUPPORT** 

### SUMMARY

### 1. PURPOSE OF REPORT

To inform the Portfolio Holder for Adult and Public Health Services of the work being undertaken nationally by the Commission on Funding Care and Support.

#### 2. SUMMARY OF CONTENTS

The report provides information about the work of the Dilnott Commission, which has been established to review future funding of care and support.

#### 3. RELEVANCE TO PORTFOLIO MEMBER

The Portfolio Holder has responsibility for adult social care services.

#### 4. TYPE OF DECISION

Non Key

### 5. DECISION MAKING ROUTE

Adult and Public Health Services Portfolio - 31 January 2011

#### 6. **DECISION REQUIRED**

The Portfolio Holder for Adult and Public Health Services is asked to note the work of the Commission and to receive further reports as the work progresses.

# ADULT AND PUBLIC HEALTH SERVICES PORTFOLIO

Report To Portfolio Holder 31 January 2011



**Report of** Director of Child and Adult Services

**Subject** COMMISSION ON FUNDING OF CARE AND

SUPPORT

#### 1. PURPOSE OF REPORT

1.1 To inform the Portfolio Holder for Adult and Public Health Services of the work being undertaken nationally by the Commission on Funding Care and Support.

#### 2. BACKGROUND

- 2.1 Thanks to better lifestyles and improvements in health care, people are now living much longer than in previous generations. This is something to be celebrated, but it does mean more people need care and support, and they often need it for longer periods of time.
- 2.2 The Government is thinking about how the increasing number of people needing care and support should be looked after, and how the services that they need should be paid for. This is why, in July this year, the Government set up this independent Commission which is required to make recommendations for all adults in England, by July 2011.
- 2.3 By care and support, the Commission means all the things which help people stay active and independent, lead fulfilling lives, and build meaningful relationships. Care and support helps people do the everyday things that most of us take for granted like getting out of bed, dressed and into work and being able to see our families and friends. Some support comes from government, but families and communities play an equally valuable role.

#### 3. WHY REFORM IS NEEDED

- 3.1 The current social care system is a means-tested system, which means that only those with high levels of need and low ability to pay for themselves qualify for support from the Government. This means many people have to pay for their social care themselves and rely heavily on family and friends for support. Many of those who have to go into a care home need to sell their homes to pay for their care and this can be seen as unfair
- 3.2 At the moment, people don't really understand how the social care system works and think that it will all be free when they need it like the NHS. The system is also complicated to use, and the services don't always work very well together.
- 3.3 People are living much longer than before which means that pressures on the system are going to increase. For example, over the next 20 years the number of people over 90 years of age is expected to nearly treble and the number of people with learning disabilities is expected to increase by 30%.

#### 4. WHAT THE COMMISSION WILL DO

- 4.1 The role of the Commission is to recommend to the Government how best, as a society, we pay for care and support in the future. This is not easy, as it means looking at all the different ways in which people support themselves and are supported by the state, including the adult social care system, disability benefits, housing support, health care and prevention services.
- 4.2 The aim is to create a care and support system which as far as possible is:
  - Built for the long tem
  - Fair to everyone
  - Offering people choice
  - Good value for money
  - Easy to use and understand
- 4.3 It is also intended that the new system promotes the well-being of individuals and families, and that it recognizes the valuable contributions of everyone involved in care and support, including individuals, carers, families, professionals and volunteers.
- 4.4 The work of the Commission will involve making some tough decisions which is why a wide range of people, including experts and representatives of organisations that work with older people, carers or disabled people are involved and helping directly with this work.

4.5 The Commission will also look at what the public and those using services have already told the Government about care and support; and we will be doing more work from January – July 2011 to understand different people's views. A Call for Evidence which closed on 28 January 2011 sought to sæk views of experts on future funding models and there will be further opportunities to contribute to the work of the Commission in coming months.

#### 5. RECOMMENDATIONS

5.1 The Portfolio Holder for Adult and Public Health Services is asked to note the work of the Commission and to receive further reports as the work progresses.

CONTACT OFFICER: Jill Hamson, Assistant Director (Commissioning)

# ADULT AND PUBLIC HEALTH SERVICES PORTFOLIO

Report to Portfolio Holder 31 January 2011



**Report of:** Director of Child and Adult Services

Subject: HARTLEPOOL VULNERABLE ADULTS

PROTECTION COMMITTEE QUARTERLY

STATISTICS & UPDATE

### **SUMMARY**

### 1.0 PURPOSE OF REPORT

To present the Safeguarding Vulnerable Adults statistics from April to December 2010 and report on the progress of the Safeguarding Action Plan.

#### 2.0 SUMMARY OF CONTENTS

This report provides information concerning Safeguarding Vulnerable Adults statistics. It outlines information relating to trends and provides an update on the Safeguarding Action Plan covering the period from April to December 2010.

# 3.0 RELEVANCE TO PORTFOLIO MEMBER

The Local Authority holds the lead responsibility for Adult Safeguarding.

#### 4.0 TYPE OF DECISION

Non Key

#### 5.0 DECISION MAKING ROUTE

Adult and Public Health Services Portfolio – 31 January 2011

### 6.0 DECISION(S) REQUIRED

The Portfolio Holder is asked to note the contents of the report.

**Report of:** Director of Child and Adult Services

Subject: HARTLEPOOL VULNERABLE ADULTS

PROTECTION COMMITTEE -

QUARTERLY STATISTICS & UPDATE

#### 1. PURPOSE OF REPORT

1.1 To present safeguarding vulnerable adults statistics from April to December 2010 and report on progress of the Safeguarding Action Plan. The quarterly statistics are attached at **Appendix A**.

### 2. BACKGROUND

2.1 This is the sixth report to the Portfolio Holder following a request for a regular submission of information about trends, activity and challenges.

#### 3. TRENDS

- 3.1 In the reporting period there were 187 alerts identifying possible cases of abuse or neglect brought to the attention of the Duty Team with 89 referrals being raised for further action following screening under safeguarding procedures.
- 3.2 The remaining 98 alerts required no further action in terms of safeguarding procedures as some matters were dealt with via care management or commissioning services whilst other issues raised were managed via providing information and advice or simply redirecting people to services in the community.
- 3.3 Of the alleged victims of abuse / neglect approximately 21% of people were under the age of 65; 27% were between the age of 65-79 and 52% were aged 80 or over. There were twice as many women than men referred.
- 3.4 Care homes continue to be the most common locations of abuse. Neglect and acts of omission and physical abuse were the most frequent causes. The perpetrators of abuse have been for the most part other service users or paid carers.
- 3.5 In comparison to the first three quarters of last year the number of safeguarding referrals this year has decreased by 47, which is approximately 34%.

- 3.8 In relation to Deprivation of Liberty Safeguards (DoLS), the figures for the period 1 April 2010 to 31 December 2010 are as follows:
  - Local Authority DOLS referrals 61 (41 urgent, 19 standard and 1 third party referral.)
  - NHS Hartlepool DOLS referrals 5 (4 urgent, 1 third party referral)
- 3.8.1 Regarding the 61 Local Authority referrals: 43 were granted, 17 were not granted, and 1 is pending. In relation to the 5 NHS Hartlepool referrals: All were approved.
- 3.8.2 In the year period from 1 April 2009 31 December 2010 the DoLS referrals were:
  - Local Authority DOLS referral 26 (all of which were urgent)
  - NHS Hartlepool DOLS referrals 8 (all of which were urgent)
- 3.8.3 Regarding the 26 Local Authority referrals: 18 were granted, 8 not granted. In relation to the 8 NHS Hartlepool referrals: 5 were granted and 3 were not approved.
- 3.8.4 Identifying trends regarding DOLS is very difficult due to this being a new area of work and we currently only have data for just over a year. However, what has become evident is that we are seeing a continued request for repeat assessments for people who are already subject to Deprivation of Liberty Safeguards.

# 4. CONTINUOUS IMPROVEMENT - UPDATE ON SAFEGUARDING ACTION PLAN

- 4.1 The Teeswide Safeguarding Vulnerable Adults Board has now appointed a Business Manager to support the work of the Board in reviewing policies, procedures and work programmes to safeguard vulnerable people across the whole of the Tees area.
- 4.2 With the appointment of the new Business Manager the work programme is progressing and Hartlepool Safeguarding Adults Committee has representatives on all of the four sub groups.
- 4.3 Members of the four Teeswide Local Involvement Networks have agreed to recruit two volunteers to attend a Reference Group linked to the Teeswide Vulnerable Adults Safeguarding Board. The group, which will be made up of carers and users of services, will be tasked to give opinions on matters such as publicity material, awareness raising material, consultation on policy and procedures and training.
- 4.4 The Hartlepool Director of Child and Adult Services has recently been appointed as the chair for the Teeswide Safeguarding Board following the retirement of the previous chair. The Strategic Lead for Safeguarding and Vulnerability and the Acting Assistant Director of

- Operations have attended Board meetings to represent Hartlepool Adult Protection Committee.
- 4.5 The Policies and Procedures Subgroup presented a draft of the revised Safeguarding Interagency Policy to the Teeswide Board in November 2010. The content of the policy was agreed by the Board subject to the completion of work needed on the formulation of roles and responsibilities and clarification around statutory agencies. It was agreed that a broader consultation with the wider public was needed in relation to the policy and an action plan is to be formulated to roll out the policy which will take this into account.
- 4.6 An information sharing protocol has now been developed between the Fire Service and Hartlepool Borough Council to share information about potentially vulnerable people. The neighbouring Local Authorities are also exploring the potential of introducing.
- 4.7 Regarding Workforce Training and Development, the sub group have ensured that the delivery of the Intermediate Safeguarding Training is underway, with five courses being delivered from September 2010 to March 2011. This group is also reviewing the E-learning provisions and working on the development of an Advanced Training Programme. A draft proposal has been developed regarding this matter.
- 4.8 The Information, Engagement and Involvement Subgroup of the Teeswide Safeguarding Board has met on three occasions and members are concentrating on the membership and terms of reference, with the overall aim of exploring how we can improve the involvement of service users in the safeguarding process and in planning and monitoring the group. Work is in progress to develop joint guidance on information sharing with service users and their carers and exploring how the department can find out how satisfied those involved with the safeguarding arena feel about the quality of the support they receive.
- 4.9 A system for the recording of lessons learned from case audits has been established and is influential in the identification of training needs of staff and the development of training across all of the sectors to improve the safeguarding of adults and to promote best practice.
- 4.10 The Head of Service continues to attend Multi Agency Public Protection Arrangements (MAPPA) meetings to assist with the management of people at high risk of causing significant harm to vulnerable people and possibly staff to ensure risks are minimised through effective communication, risk assessments and risk management within a multi agency forum.
- 4.11 Close links between safeguarding, complaints, contract compliance and Deprivation of Liberty Safeguards processes have been established. Robust networks are in place to ensure a seamless safeguarding

- process across the operational; and commissioning arms of the Local Authority with close links to care homes and third sector providers.
- 4.12 Meetings with all care home providers have taken place on an individual basis in order to develop closer working relationships and thereby reduce the risk of significant harm to vulnerable adults living within residential / nursing accommodation. This work has focused upon improving preventative measures, information sharing and developing systems for the improvement of recording.
- 4.13 The Social Care Officers working alongside Community Matrons and aligned to a cluster of care homes has strengthened operational practice across health and social care and now potential and emerging risks are more proactively managed. It is reasonable to suspect that this and other strategies implemented throughout the year can account for the reduction of safeguarding referrals in this financial year.
- 4.14 To further strengthen links and improve protection arrangements the three Social Care Officers being managed from within the Safeguarding Team from January 2011.

#### 5. SERIOUS CASE REVIEW

- 5.1 Hartlepool Vulnerable Adult Protection Committee continues to monitor the recommendations arising from the Serious Case Review. The Local Authority has completed all of their recommendations and work is ongoing in relation to some minor action(s) for NHS Hartlepool. It is expected all work will be completed and ratified at the next meeting of the committee in February 2011.
- 5.2 Once the work is finalised findings / lessons learned from the Serious Case Review will be shared Teeswide in accordance with procedures.

#### 6. FINANCIAL IMPLICATIONS

6.1 There are no financial implications arising from the report.

### 7. RECOMMENDATIONS

7.1 Report be noted

Contact Officer:
John Lovatt
Head of Service (Adult Social Care)

		1 April – 30 June	1 July – 30 Sept	1 Oct - 31 Dec
	Physical abuse	13	11	7
o O	Financial abuse	3	4	2
√snq	Sexual abuse	4	6	1
ted /	Neglect and acts of omission	10	12	8
Suspected Abuse	Psychological	0	2	6
Sus	Discriminatory	0	0	0
	TOTALS	30	35	24

### 1 April – 30 June 2010

- A further 17 referrals were also reported within this period however, the classifications are still pending.
- 19 NFA discussions were also recorded for this period.

# 1 July - 30 September 2010

- A further 3 referrals were also reported within this period however, the classifications are still pending.
- 36 NFA discussions were also recorded for this period.

### 1 Oct – 31 December 2010

- A further 4 referrals were also reported within this period however, the classifications are still pending.
- 43 NFA discussions were also recorded for this period.

	1 April – 30 June	1 July - 30 Sept	1 Oct - 31 Dec
Vulnerable adults subject to previous referral/s	9	9	12
Vulnerable adults placed by another Authority	1	0	1
Self Funders	0	4	2

		1 April – 30 June	1 July – 30 Sept	1 Oct – 31 Dec
	Physical Disabilities - Older People (65 & over)	17	20	12
	Physical Disabilities - Adults (18-64)	0	3	1
Vulnerable Adult Client Group	Mental Health - Older People (65 & over)		5	6
jt G	Mental Health - Adults (18-64)		2	1
Clier	Learning Disabilities - Older People (65 & over)	0	0	1
dult 0	Learning Disabilities - Adults (18-64)	6	3	2
le Ac	Older People (65 & over)	0	1	0
erab	HIV / AIDS Adults (18-64)	0	0	0
/uln/	Sensory Loss	0	0	0
	Carer	0	0	0
	Substance misuse & Drugs	0	0	0
	Adults	0	0	0
	TOTALS	30	34	23

# July 2010 - September 2010

• 1 Client Group is unknown.

# October 2010 - December 2010

• 1 Client Group is unknown.

Date - 01 April 2010 - 31 December 2010					
		1 April – 30 June	1 July - 30 Sept	1 Oct – 31 Dec	
	Social Services Department	8	5	5	
	Care Home Provider	11	13	12	
	Care Home with Nursing Provider	10	7	4	
	Home Care Provider	1	0	1	
	Friend/Neighbour	0	0	0	
ral	Relative		0	0	
	Health Professionals (Community based)	1	4	0	
	Health Professionals (Hospital based)	0	0	0	
efer	Self or persons formal advocate	0	0	0	
of R	CSCI	0	0	0	
Source of Referral	Probation Service	0	0	0	
So	Police	0	0	1	
	Other Service User	0	0	0	
	Housing Support Provider	0	0	0	
	Other Local Authority	0	0	0	
	Department of Works & Pensions	0	0	0	
	Other-please name individually 3x Supported Living 1x Voluntary Organisation 1x Unknown	0	4	1	
	TOTALS	31	33	24	

April 2010 – June 2010

• One referral was reported by more than one source July 2010 - September 2010

• The sources of referral for 2 cases are unknown.

			1 July – 30 Sept	1 Oct – 31 Dec
	Care Home – Permanent Temporary	12	7	4
	Care Home with Nursing – Permanent - Temporary	9	16 0	10 1
nse	Day Care Unit	0	0	0
Location of Abuse	Relative's Home	0	0	0
ation	Users Own Home	4	7	4
Loc	Hospital	0	1	0
	Supported Living	4	3	2
	Public Place	0	0	0
	Other (please list)	0	0	2
	TOTALS	30	34	24

<u>July 2010 – September 2010</u>

• The location of abuse for one referral is unknown to date.

		1 April – 30 June	1 July – 30 Sept	1 Oct - 31 Dec
	Friend/Neighbour	0	2	1
_	Other Service User	16	11	4
trato	Paid Carer or Health Worker	5	12	11
Alleged Perpetrator	Partner	0	2	0
ed Pe	Relative	0	2	1
llege	Volunteer	0	0	0
<	Trader	0	0	0
	Unknown	9	5	5
	Self	0	0	0
	Paid Housing/Other Worker	0	1	1
	Social Care Directed Care Staff	0	0	1
	TOTALS	30	35	24

		1 April – 30 June	1 July – 30 Sept	
	White – British	30	33	24
	White- European	0	0	0
it	Asian-India	0	0	0
Ethnicity	Asian-Pakistan	0	0	0
ŭ	Asian-Bangladesh	0	0	0
	Asian- Chinese	0	0	0
	Asian-Vietnamese	0	0	0
	African	0	0	0
	Caribbean	0	0	0
	Other ethnic group (please name)	0	0	0
	Not Known	0	2	0
	TOTALS	30	35	24

		1 April – 30 lune		1 July 20 Coat	idac oc – dinc i	4 Oct 94 Box	100 - 31 Dec
		F	M	F	M	F	M
	18 - 19	0	0	0	0	1	0
	20 - 29	0	0	0	1	1	0
	30 - 39	1	1	1	0	0	0
	40 - 49	0	1	1	1	0	0
<u>e</u>	50 - 59	2	1	2	2	0	2
Age	60 - 64	0	0	0	0	0	0
	65 - 69	3	0	1	1	2	0
	70 - 79	5	1	6	0	5	0
	80 - 89	6	4	11	3	5	4
	90 - 99	4	1	3	0	3	1
	100+	0	0	0	0	0	0
		21	9	25	8	17	7
	TOTALS	30	0	3	3	2	4

		1 April – 30 June	1 July – 30 Sept	1 Oct – 31 Dec
	3.1 Existing service provision reducing risk of further harm	0	0	0
	3.2 New Community Care Assessment & Services	1	2	0
	3.3 Removed from Property/Service	0	0	1
lan	3.4 Counselling, support & advocacy	0	0	0
utcomes for Alleged Victim/protection Plan	3.5 Management of access to alleged perpetrator 3.5a Management of access to finance		3	1
otec	3.6 Action under Mental Health Act	0	0	0
m/pr	3.7 Declaratory Relief		0	0
d Vict	3.8 Appointeeship/Receivership	0	0	0
llege	3.9 Civil Action	0	0	0
for A	3.10 Unwilling to co-operate with Protection Plan/advice	0	0	0
mes	3.11 Crime prevention/security advice	0	0	0
Outco	3.12 Other (please specify) NFA x 13 Increase Monitoring x 7 NFA x 12 Increased Monitoring x 5 Refused Services x1 NFA x 8 Increased Monitoring x 5 Refused services x 2	20	18	15
	3.13 Review of Self Directed Support	0	1	0
	3.14 Move to Increase/Different care	0	3	1
	TOTALS	22	29	18

# <u>April 2010 – June 2010</u>

• 25 out of 47 remain open from this period

# <u>July 2010 – September 2010</u>

- 17 out of 35 Remain open from this period
- 11 of the cases closed within this quarter have carried open form previous quarters.

# October 2010 - December 2010

- 9 out of 24 remain open from this period
- 15 out of the 18 cases opened and closed within the same period. 1 cases had more than one outcome
- 1 of the cases closed within this quarter has carried open form previous quarters.

		1 April – 30 June	1 July – 30 Sept	1 Oct – 31 Dec
	4.1 Criminal Prosecution/Caution	0	0	1
	4.2 No further legal action following Police investigation	0	0	0
	4.3a Disciplinary action	1	10	5
9	4.3b Refereed to ISA	0	5	0
Servi	4.4 Action by Commissioning/Placing Authority	0	0	0
tion/\$	4.5 Action by CSCI		0	0
r Alleged Perpetrator/ Organisation/Service	4.6 Action by Healthcare Commission		0	0
	4.7 Carer's Assessment offered		0	0
rator/	4.8 Management action – supervision, training etc.	0	4	0
erpet	4.9 Counselling/support	0	0	2
led Pe	4.10 Removed from property/service	3	1	0
Alleg	4.11 Community Care Assessment & Services/Case Review	3	0	0
s for	4.12 Action under Mental Health Act	0	1	0
Outcomes fo	4.13 Management of access to vulnerable adult	0	1	0
Outc	4.14 No Further Action	7	6	3
	4.15 Other Other x 7 Continuing Monitoring x 2 Other x 4 Continuing Monitoring x 2	10	9	6
	TOTALS	24	37	17

# April 2010 – June 2010

• 23 out of 47 remain open from this period

# <u>July 2010 – September 2010</u>

- 17 out of 34 Remain open from this period
- Some the cases closed have more than one outcome for the Alleged Perpetrator

# October 2010 - December 2010

- 9 out of 24 remain open from this period
- 15 out of the 18 cases opened and closed within the same period. 1 cases had more than one outcome
- 1 of the cases closed within this quarter has carried open form previous quarters.

# **Case Conclusions**

	April – June	July – September	October –
	2010	2010	December 2010
A1-Physical-Substantiated	7	7	3
A2-Physical-Partly Substantiated	3	2	0
A3-Physical-Not Substantiated	0	1	1
A4-Physical-Not	0	2	0
Determined/Incondusive	O	2	0
B1-Sexual-Substantiated	1	2	0
B3-Sexual-Not Substantiated	4	4	0
C1-Emotional/Psychological-	2	0	6
Substantiated		V	0
C2- Emotional/Psychological-	0	0	1
Partly Substantiated	Ŭ	Ů	'
C3-I Emotional/Psychological -	0	0	0
Not Substantiated			
C4- Emotional/Psychological -Not	0	0	0
Determined/Incondusive			
D1-Financial-Substantiated	1	1	0
D3-Financial-Not Substantiated	0	3	1
D4-Financial-Not	3	6	0
Determined/Incondusive			· ·
E1-Neglect-Substantiated	9	6	2
E3-Neglect-Not Substantiated	1	3	2
E4-Neglect-Not	1	1	0
Determined/Incondusive		,	•
Total	32	38	16

Not Determined/Incondusive	4	9	0
Not Substantiated	5	11	4
Partly	3	2	1
Substantiated	20	16	11
Total	32	38	16

# ADULT AND PUBLIC HEALTH SERVICES PORTFOLIO

Report To Portfolio Holder 31 January 2011



**Report of:** Director of Child and Adult Services

**Subject:** Mental Health Day Services

# **SUMMARY**

### 1. PURPOSE OF REPORT

To update the Portfolio Holder regarding the commissioning of mental health day services.

#### 2. SUMMARY OF CONTENTS

The Portfolio Holder approved an exception to contract procedure rules in September 2010 allowing existing contracts to be extended until September 2011 to allow for new mental health day services to be commissioned jointly with NHS Hartlepool.

#### 3. RELEVANCE TO PORTFOLIO MEMBER

The Portfolio Holder is responsible for adult social care services, including services commissioned for people with mental health needs.

### 4. TYPE OF DECISION

Non key

### 5. DECISION MAKING ROUTE

Adult and Public Health Services Portfolio – 31 January 2011

#### 6. DECISION REQUIRED

The Portfolio Holder is asked to note the contents of the report and the proposed way forward.

1

**Report of:** Director of Child and Adult Services

**Subject:** Mental Health Day Services

#### 1. PURPOSE OF REPORT

1.1 To update the Portfolio Holder regarding the commissioning of mental health day services.

### 2. BACK GROUND AND COMMISSIONING INTENTIONS

- 2.1 A Commissioning Strategy for day services for people with mental health needs was developed and agreed by the Mental Health Local Implementation Team (LIT) in 2007 and set out the strategic direction of modernised day services that would enable joined up working across the town. This was reinforced at a visioning event in 2008.
- 2.2 It was agreed that the funding for the three existing services commissioned by Hartlepool Borough Council and provided by MIND, Artrium and PROP (value circa £150K) and funding invested by the PCT in day service provision within Tees Esk & Wear Valleys NHS Foundation Trust (value circa £100K) would be re-invested in the new 'Moving Forward Day Services' model of delivery.
- 2.3 The Board of NHS Hartlepool approved the proposed way forward in November 2009. The funding for day services within Tees Esk & Wear Valleys NHS Foundation Trust (£100K) was withdrawn from the contract and has been held within the PCT until new services were commissioned.
- 2.4 There have been delays in progressing with the tender process due to changes in staffing, a need to review the model due to the implementation of personalisation and a change in strategic direction both regionally and nationally.
- 2.5 The model has also been reviewed from a financial perspective following the announcements of cuts to Local Government funding. A revised model was agreed which reduced the PCT contribution from £100K to £75K (delivering a 25% saving for NHS Hartlepool) while also achieving the 5% savings target for adult commissioning budgets within the Council as part of the Year 3 Service Delivery Option Review.

#### 3. CURRENT POSITION

- 3.1 Hartlepool Borough Council has three contracts in place with Hartlepool Mind, Peoples Relief of Pressure (PROP) and The Artrium, which have been extended until 30 September 2011.
- 3.2 In order for the tendering process to be completed and for new contracts to be in place from 1 October 2011, the tendering process needs to start at the end of January 2011.
- 3.3 NHS Hartlepool has not yet agreed a budget for 2011/12 so funding for mental health day services has not been approved at this stage.
- 3.4 The current funding from Hartlepool Borough Council is subject to a Service Delivery Option Review and a 5% saving needs to be delivered.

#### 4. PROPOSED WAY FORWARD

4.1 A tender will be issued at the end of January 2011 for social care funded mental health day services, utilising the funding currently available within Hartlepool Borough Council (with a reduction in the financial envelope to contribute to the required Service Delivery Option Review savings target).

#### 5. **RECOMMENDATION**

5.1 That the Portfolio Holder notes the report, the changes to funding available and the proposed way forward.