

## **Cabinet Committee on Performance Improvement**

Meeting to be held on Thursday, 12 September 2019

### **Report of the Head of Service, Social Care Service (Health)**

#### **Part I**

Electoral Divisions affected:  
All Divisions

### **Improvement in Occupational Therapy Performance and Disabled Facilities Grant Activity**

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#### **Executive Summary**

This report details the development of the Occupational Therapy service within Adult Social Care at Lancashire County Council, and demonstrates the improvements seen in timeliness of assessments and the increase in Disabled Facilities Grants recommendations over recent years. The report also demonstrates the positive benefits of Occupational Therapy in adult social care, and innovation possibilities for the future.

#### **Recommendation**

The Cabinet Committee on Performance Improvement is asked to note the report and the improvements seen in the performance of the Occupational Therapy Service.

#### **Background**

Prior to 2008, the NHS in Lancashire delivered all moving and handling, and equipment and adaptations assessments in behalf of the Council. The decision was then taken to trial bringing the service back in-house. This was completed in 2013 with both the Central Lancashire and the North Lancashire Occupational Therapy services being delivered by Lancashire County Council, and a partnership arrangement remaining in East Lancashire with the NHS under 'Section 75' arrangements, whereby the NHS complete up to 100 Occupational Therapy assessments per month on behalf of Adult Social Care.

Occupational Therapists take a whole-person approach to both mental and physical health and wellbeing of people, enabling individuals to live as independently as possible. This includes working with people to use new or better techniques for the task they need to undertake, and/or by adapting their home environment through the provision of equipment or adaptations.

There were 20 full time equivalent Occupational Therapist posts across County within Adult Social Care in 2014. The existing waiting lists for assessments had also been transferred into the county council from the NHS, and work was undertaken to start to reduce these with varying degrees of success; the challenges in part, due to capacity.

Within the Passport to Independence transformation programme in Adult Social Care, the redesign of the Reablement service put Occupational Therapy at the heart of its leadership in 2016. At the same time, the new Improved Better Care Fund monies offered the opportunity to enhance the overall Occupational Therapy establishment to better match demand. The number of Occupational Therapists was increased from 20 to 40 full time equivalent posts within Adult Social Care. 10 Occupational Therapists posts were sited in Reablement, and 30 in the Community Occupational Therapy service. Although this report touches on the Reablement service, in the main it concentrates on the remit of the work within the community Occupational Therapy service.

In addition to the Occupational Therapists in post across Adult Social Care, the decision was made some years ago to expand the number of staff who could assess for and commission community equipment. Using a Trusted Assessment and competency based framework, all Social Care Support Officers have been trained to assess for lower level less complex equipment items (i.e. mostly items contained in the 'Retail Model' such as grab rails and raised toilet seats), and give people a 'prescription' which they can use at any number of local retailers, usually specific mobility retailers, but also a number of pharmacies across the County.

### **Community Occupational Therapy Service**

Through Passport to Independence, dedicated Occupational Therapy leadership was created in the form of a County Occupational Therapy Manager; this was important for the profile of the service, and in ensuring that the professional registration and continuing professional development requirements of the service are met, alongside a lead for Occupational Therapy practice and performance.

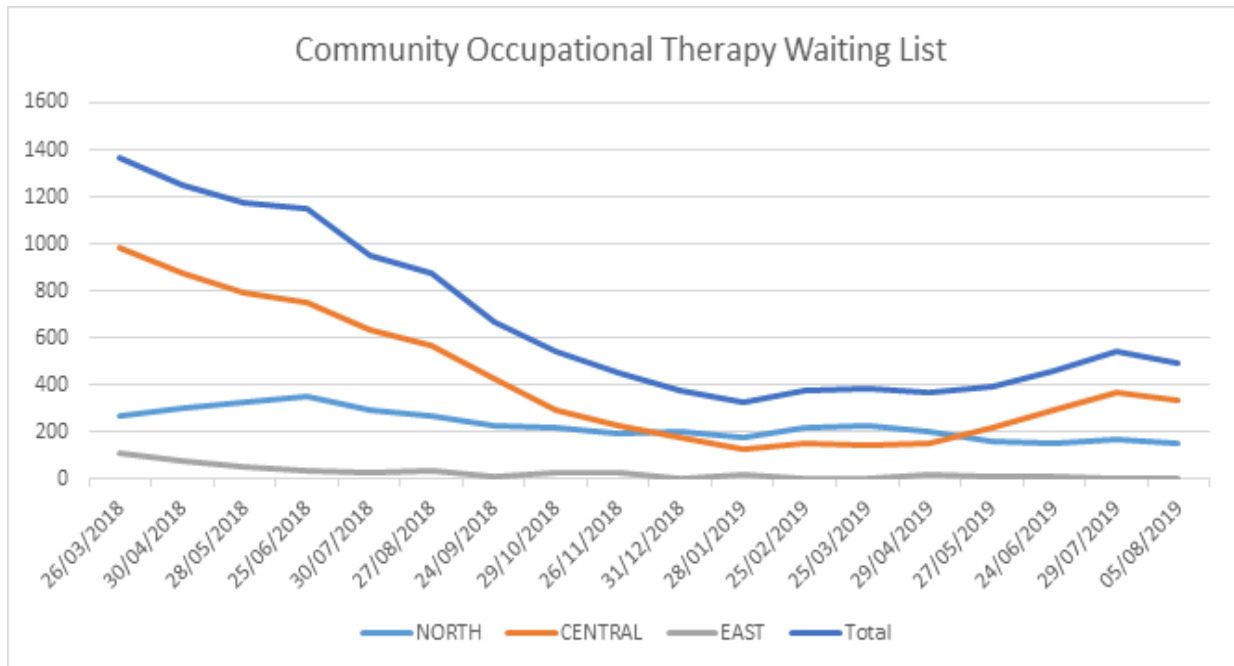
The improvements in the practice and processes the teams operate to, are evident in the performance now seen from the service. High quality outcomes remain a key priority, and this is borne out in the 2018/19 feedback data relating to the service of 25 complaints and 195 compliments, a ratio of almost 1:8.

### **Timeliness of Occupational Therapy Assessment**

Although work on the Occupational Therapy waiting lists had been undertaken with the teams several times since they transferred across from the NHS, the inconsistency of leadership within social care for the Occupational Therapists across

the years prior to 2017/18, meant that short term focus gained results but that these were not maintained.

The following graph shows the significant improvement in timeliness of assessment from March 2018 onwards, with the number of people awaiting assessment across County standing at 1363 at March 2018 and, through the focussed work undertaken, reducing to 497 as at 5<sup>th</sup> August 2019. This work is continuing with the aim of the service reaching their 'business as usual' target to see everyone within 28 days of referral.



Where a referral is categorised as a high priority, the Occupational Therapy service is now able to see people on average within 7 days. In order to achieve the performance seen so far around the reduction in waiting times and in the number of people awaiting assessment, a robust action plan was produced in 2018 which set out new screening processes to be followed, data cleansing of the waiting lists, recruitment to new posts and initially some additional overtime hours for defined numbers of assessments.

The implementation of the action plan saw a rapid reduction in people awaiting assessment, plus a significant change in the timeliness of assessments. Significantly increased numbers of people are now seen within 28 days, with the service working hard to achieve all people being seen with this timescale as a business as usual Key Performance Indicator.

The current performance relating to the longest waiting time to be assessed by a Lancashire County Council Occupational Therapist is shown in the table below:

Area	Longest Wait (as at 5 <sup>th</sup> August 2019)
North Lancashire	13 weeks
Central Lancashire	15 weeks
East Lancashire (this relates to those people referred to and assessed by a county council Occupational Therapist only, not those referrals sent to the NHS as part of the section 75 agreement)	1 week

The current performance is a significant improvement on the average waiting times of just over 12 months seen at March 2018.

### **Community Equipment Activity and Spend**

The provision of equipment to support people to live as independently as possible, is one possible outcome of both an Occupational Therapy assessment, and of a Social Care Support Officer assessment. Occupational Therapists and Physiotherapists working for the NHS also provide community equipment following their assessments.

Community Equipment provision is broadly split into three categories in Lancashire:

- Simple items of equipment that are available for general purchase, and not provided by Health or Social Care as an outcome of an assessment
- 'Retail Model' equipment that is provided via a prescription (and is also available for general purchase) following an assessment by Occupational Therapists, Social Care Support Officers or Physiotherapists
- Complex equipment that is provided on a 'loan' basis to people following assessment by an Occupational Therapist or Physiotherapist. The equipment is provided via an organisation called MedEquip who have the contract across health and social care for Lancashire.

#### Retail Model Equipment

The Retail Model has been operating in Lancashire for nearly 10 years, and sees a large amount of activity which gives service users more choice and flexibility around the equipment recommended to them. There is a defined list of equipment that is agreed across health and social care and which follows the national model.

Following assessment, the individual receives a prescription which can be redeemed via a number of participating retailers across Lancashire. They have the option to receive the standard equipment specification funded by either Lancashire County Council or the NHS (dependent upon the item) or if they wish they can pay a 'top up' amount on top of the value of the prescription to buy the same piece of equipment but a model that more suits their own lifestyle and home environment.

The average annual spend by Lancashire County Council for social care community equipment contained within the Retail Model is £2.03m. The high volume items tend to

be items such as perching stools, raised toilet seats, commodes and toilet frames, and grab rails.

### Complex Community Equipment

Many larger items of community equipment such as hoists, specialist chairs or beds are loaned to service users across Lancashire for as long as they need them. Once items are no longer required, they are returned to MedEquip, specially cleaned, decontaminated and refurbished as appropriate and loaned to the next person assessed as requiring this type of equipment.

These items of equipment, used to support people with more complex moving and handling needs are assessed for by Occupational Therapists and Physiotherapists, with all items categorised with regard to whether they are funded by the NHS or social care.

Lancashire County Council currently spends around £1.3m per year on complex equipment to support people to live as independently as possible, and to ensure that they are moved and handled in a way that is safe and least restrictive.

### **Minor Adaptations**

Minor adaptations are small scale adaptations to peoples' home environment that enable them to move around and outside their home as independently as they can.

For example, external rails outside peoples' doors, or additional bannister rails to support people to climb the stairs without the assistance of a carer (or to make it safer if the person is being assisted), or small ramps to replace steps would fall into this category.

Minor adaptations are adaptations under £1000, that fall into the remit of Adult Social Care rather than larger adaptations which would fall into the scope of the Disabled Facilities Grant, which is administered by the District Councils.

Currently Home Improvement Agencies deliver this element of our statutory work across all the district areas. The 2018/19 spend on minor adaptations was £1.025m rising from £956,369 in 2017/18, with the highest volume adaptation being internal rails.

A recent piece of innovation work has been undertaken with the Home Improvement Agencies, to enable them to undertake a 'trusted assessment' where they are visiting people either as part of their home improvement work or for a commissioned minor adaptation. If during the visit they identify that an additional piece of equipment is required within a defined list, they are able to issue and fit this which avoids the need for these cases to be referred into the Occupational Therapy service for further assessment, thereby reducing delays for the customer.

The county's Disabled Facilities Grant group has defined the thresholds where minor adaptations stop and Disabled Facilities Grants start. This has not only resulted in a more consistent approach across the county and clear compliance with the Care Act,

but reduces both Occupational Therapists and their managers time in processing 'exception' cases.

### **Disabled Facilities Grant**

The Disabled Facilities Grant is allocated each year to Lancashire County Council as the upper tier authority. It is passported through to the District Councils in line with their nationally defined individual allocations.

The Disabled Facilities Grant is a means tested grant to install adaptations such as ramps, wet rooms or other changes to the person's home environment to enable disabled adults to live as independently as possible. (Disabled Facilities Grant is also available to children, but this report concentrates on adults aged 18 and above).

The process for accessing a Disabled Facilities Grant is via an Occupational Therapist assessment, who will make a recommendation to the District Council for a Disabled Facilities Grant adaptation to take place. The District Council will undertake the means test, and if eligible, schedule the works in with the individual.

Some years ago, due to the staffing capacity within the Occupational Therapy service, lower numbers of recommendations were being made for Disabled Facilities Grant, and some District Councils reported that they were struggling to spend their allocation across the year. Due to the longer wait times for an assessment from an Occupational Therapist, people were therefore waiting much longer than would be wanted for an adaptation to take place.

As the Occupational Therapy service has worked through the waiting list and is now in a much better performing position, it can be seen in the table below that the numbers of Disabled Facilities Grant recommendations sent to the Districts each year has improved significantly, moving from just 812 in 2014/15 to 2814 in 2018/19. The volume of 886 recommended so far in 2019/20 already surpasses the full year total of 2014/15.

Referral Numbers for Disabled Facilities Grants:

	<b>Central</b> (Preston, Chorley, South Ribble, West Lancs)	<b>East</b> (Burnley, Pendle, Rossendale, Hyndburn & Ribble Valley)	<b>North</b> (Lancaster, Morecambe, Fylde, Wyre)	<b>Area Not Recorded</b>	<b>Total DFG referrals</b>
<b>2014/2015</b>	262	334	196	20	<b>812</b>
<b>2015/2016</b>	518	590	510	37	<b>1655</b>
<b>2016/2017</b>	720	570	531	53	<b>1874</b>
<b>2017/2018</b>	758	678	742	51	<b>2229</b>
<b>2018/2019</b>	1299	768	687	60	<b>2814</b>
<b>2019/2020 (to 5/8/19)</b>	291	242	328	25	<b>886</b>

The higher numbers of referrals from the Lancashire County Council Occupational Therapists have contributed to significant increases in the actual numbers of Disabled Facilities Grants completed by the Lancashire district councils as shown in the table below:

Disabled Facilities Grants completed:

Lancashire 12 Districts	DFGs Completed
2016/17	1711
2017/18	2117
2018/19	2608

Some of the Districts have accumulated carry forwards in their Disabled Facilities Grant monies, which offers opportunities for flexibilities in application of the Grant. In addition social care capital schemes have been identified in two of the districts, which are being considered for support.

### **New Initiatives and Possibilities**

There are many new initiatives in place both within adult social care and in collaboration with the District Councils to broaden access to Disabled Facilities Grant within the regulations, reduce hand-offs between services, avoid delays and increase peoples' independence and choice. These include:

- Within the Lancashire County Council Moving with Dignity project the Single Handed Care Team have now commenced, undertaking assessments with people who are identified for more than one carer per visit, with a view to reducing the number of carers through innovative use of the latest equipment and most up to date moving and handling techniques. Enabling people to become more independent this also releases care capacity back into the market alongside being a more cost effective way of delivering care and support.
- To support the more timely recommendation of Disabled Facilities Grant to the District Councils, new 'fast track' procedures are being trialled around some standard adaptations such as wet rooms, whereby an Occupational Therapy assessment is not needed if a Social Care Support Officer has undertaken a recent assessment and all the relevant information is included. These are sent directly through to the Districts, who contact an Occupational Therapist if there are any issues.
- District Councils and Lancashire County Council's Occupational Therapy services have agreed a joint Disabled Facilities Grant prioritisation criteria with the emphasis on reducing acute hospital admissions and facilitating discharge
- District Councils have agreed to the expansion of provision of Disabled Facilities Grant items, resulting in a consistent set of equipment and items that are provided across the County. For example ceiling track hoists and wash dry toilets are now provided via Disabled Facilities Grants across all districts, representing a cost saving to Social Care and could help to facilitate initiatives such as Single Handed Care.
- In keeping with current good practice guidance, wider use of Disabled Facilities Grant discretionary grants has been discussed and promoted through the county Disabled Facilities Grant group. Eight districts now have discretionary grants, these are required to address local need and typically remove means testing for low value grants plus the raising of the upper limit above £30,000 for high value

grants, in circumstances where it is necessary. This helps people get the support they need more quickly and reduces cost pressures on other parts of the system. In addition, fewer people drop out of the system for financial reasons.

- An event is being planned in the near future bringing together Lancashire County Council, District Councils and other partners, to look at best practice and innovation in the use of the Disabled Facilities Grants elsewhere and explore the possibilities and benefits for the people of Lancashire.

## **Conclusion**

It can be seen that there has been significant improvement in the performance of the Occupational Therapy service in terms of more timely assessments, improved wait times, and in people getting more timely access to both community equipment and Disabled Facilities Grant adaptations that make a difference to their independence and quality of life. This is a result of a combination of factors:

- significant investment to increase the number of qualified Occupational Therapists employed by the council;
- increased leadership capacity within the Occupational Therapy service;
- improvements in productivity and business processes;
- improvements in partnership working with district councils, private sector equipment providers and the NHS.

The work underway to grip and achieve the performance improvement so far will continue, ensuring that people are seen in a timely way, and high quality outcomes are realised for people that support their optimum independence, choice and control.

Occupational Therapists have a key role in adult social care, in maximising peoples' independence and reducing their need for formal support, and further opportunities to focus their skills in the right place during peoples' contact with social care will continue to be explored.

In addition, there is also potential for wider innovation and collaborative work with District Councils and other partners to explore the possibilities around the use of Disabled Facilities Grants to further benefit the people of Lancashire.

## **Consultations**

N/A

## **Implications:**

This item has the following implications, as indicated:

## **Risk management**

There are no key risks to outline for noting.



## List of Background Papers

Paper

Date

Contact/Tel

None

Reason for inclusion in Part II, if appropriate

N/A