

WARDS AFFECTED Type in Ward

FORWARD TIMETABLE OF CONSULTATION AND MEETINGS: Social Services and Personal Health Scrutiny Committee Cabinet

10th March 2004 15th March 2004

Proposed arrangements for developing an Integrated Learning Disability Services in Leicester

Report of the Corporate Director of Social Care and Health

1. Purpose of Report

- 1.1 This report sets out an initial project plan for the lead commissioning and integration of social services and NHS budgets and services for people with learning disabilities within Leicester City.
- 1.2 A small working party of senior officers from Leicester City Council, Leicestershire County Council, Rutland County Council, the Primary Care Trusts and Leicestershire NHS Partnership Trust have met to draw up an initial timetable and project plan to complete these tasks. This work has been informed by the work done through lead commissioning and integration projects from other local authorities.
- 1.3 This report was submitted to the Professional Executive Group (comprising Director & Chief Executives for local authorities at the NHS).
- 1.4 The planned date for the City Council to take on responsibility for the lead commissioning of all Social Care and Health and NHS budgets is 1st April 2005. The integration of services is expected to be completed within a few months of this date.

2. Summary

2.1 The proposed model would be for separate lead commissioning, pooled budgets and integrated provision for Leicester City Council with Leicestershire County Council and Rutland County Council sharing a common agreement. A combined partnership lead commissioning arrangement between Rutland and Leicestershire would probably be required and the model for integrated provision will need to take account of local circumstances within each local authority area.

- 2.2 The respective Learning Disability Partnership Boards, as advisory bodies, would play a key role in influencing commissioning decisions, and this would be built into the structure for lead commissioning across the three local authorities.
- 2.3 A key decision will be to consider (and consult on) at an early stage which NHS learning disability services should transfer across to local authorities under the new arrangements. The Professional Executive's Group view is that it would be helpful to exclude from the present proposals both the Assessment and Treatment Unit (but not the linked crisis and outreach services) and the management of Consultant Psychiatrists. All other NHS services including specialist nurses, psychologists and therapists should be included in the consultation process for integration into one Learning Disability service for Leicester City and one for Leicestershire County and Rutland combined.
- 2.4 It is proposed to develop a project structure similar to that used for the Adult Mental Health Integration Project. Appendix 'A' sets out the model, building on the existing Project Executive Group Structure.

3. Recommendations

3.1 Scrutiny Committee is recommended to:-

- (a) Express its view on the proposed arrangements for developing an Integrated Learning Disability Services in Leicester
- (b) Note and support the arrangement that the City Council takes on the lead commissioning responsibilities with integrated services from 1st April 2005 onwards.

3.2 Cabinet is recommended to:-

- (a) agree the direction of travel as outlined in the project plans on learning disability services in the City.
- (b) agree that the City Council takes on the lead commissioning responsibilities from 1st April 2005 onwards.

4. Headline Financial and legal Implications

4.1 Financial implications (Colin Sharpe, Head of Finance)

As this paper is setting out a direction of travel, the detailed financial implications have not yet been determined. This detailed financial work will form a key part of the project management arrangements over the next year. However, the project will need to be achieved within the City Council's current Learning Disabilities budgets, together with the resources transferred from the NHS and the generation of other external income.

The Council's total spending on learning disability services in 2002/03 was £15.5m, which after income of £6.4m from the NHS, Preserved Rights Grant and other sources, resulted in a net cost of £9.1m. The total spending and external income will increase substantially as the Council takes on the lead commissioning of services currently funded and arranged by the NHS.

4.2 Legal (Guy Goodman, Assistant Head of Legal Services – Tel. 252 7054).

The development of an integrated service will require the Council and partner agencies to enter an appropriate agreement under section 31 of the Health Act 1999. As an integrated provider the Council will take on responsibility for the discharge of some health services functions and any accompanying staff and property. There will be significant legal issues for the Council

5. Report Author/Officer to contact:

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DECISION STATUS

Key Decision	No
Reason	N/A
Appeared in	No
Forward Plan	
Executive or	Executive (Cabinet)
Council	
Decision	



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SUPPORTING INFORMATION

1. Introduction

- 1.1 This report outlines initial work undertaken to develop a project plan for lead commissioning and integrated provision for learning disability services. The project group set up to do this work has now met on three occasions. Information has been collected from Oxfordshire, Derbyshire, North Yorkshire and York, Dudley, Walsall and Sandwell. Information from Lincolnshire and Barnsley is awaited.
- 1.2 It builds both on the experience of work on lead commissioning within the Gorse Hill Project, information from other areas and the experience gained through the Mental Health Integration Project.

2. Scope of Project

- 2.1 The project work proposed is based on the assumption that a decision has been already taken by the partners, following the National Development Team Consultancy, that the respective local authorities should take on lead commissioning and integrated provision and that detailed work required is designed to meet this objective. In other words from the outset other options (including the 'do-nothing' option through to the option of the development of a single integrated Learning Disability Care Trust) would not form part of a detailed options analysis.
 - 2.2 The proposed model would therefore be for separate lead commissioning, pooled budgets and integrated provision for Leicester City Council, Leicestershire County Council and Rutland County Council. A partnership lead commissioning arrangement between Rutland and Leicestershire would probably be required and the model for

- integrated provision will need to take account of local circumstances within each local authority area.
- 2.3 Within the City it is proposed that an Executive Board be established to oversee the effective management of pooled budgets and strategic service development. The respective Partnership Boards, as advisory bodies, would play a key role in influencing commissioning decisions, and this would be built into the structure for lead commissioning across the three local authorities.
- 2.4 A key decision will be to consider (and consult on) at an early stage what NHS learning disability services should transfer across to local authorities under the new arrangements. The Professional Executive Group's recommendation is that it would be helpful to exclude from the present proposals both the Assessment and Treatment Unit (but not the linked crisis and outreach services) and the management of Consultant Psychiatrists.

3. Structure of the Proposed Project

- 3.1 It is proposed to develop a project structure similar to that used for the Mental Health Integration Project. Appendix 'A' sets out the model, building on the existing Project Executive Group Structure. The importance of the respective Partnership Boards acting as the key advisory groups to the development of the project is built into the structure. Appendix 'B' illustrates the links to be gained through linking together the work of the Project Executive Group and Partnership Boards. Project Executive Group membership already includes at least one representative from the statutory agencies from each Partnership Board.
- 3.2 Effective leadership of the project will be critical. The existing Project Executive Group, continuing to meet on a monthly basis, will provide overall leadership, but it is considered important that a single project sponsor is agreed at Director or Chief Executive level. It would be logical for this role to be undertaken by a Director of Social Services and it has now been agreed that the Director of Social Services for Leicestershire will undertake this role on behalf of all the partners.

4. Project Infrastructure

- 4.1 The experience of other projects and the Mental Health Integration Project strongly indicates that to achieve new lead commissioning arrangements by 2005 a robust project management approach will be required, with dedicated project management time required to lead and co-ordinate the work.
- 4.2 The role of the existing post of Integrated Commissioning Manager was originally designed to take on this brief and it is proposed that the postholder therefore becomes the project manager. It is already clear that there is not capacity for the post holder both to undertake all of his existing duties as they have developed and the project management role. It is proposed therefore to create either a full-time or part-time Commissioning Officer (full-time, around £28 to £30k) to work to the post holder, along with .5 clerk. Further work is required to analyse the level of support required and the outcome of this will be reported to the meeting. It is proposed that the overall cost agreed should be shared equally between Primary Care Trusts, the Partnership Trust, Leicestershire County Council and Leicester City Council plus contribution from Rutland County Council. The estimated part-year costs for this year are £20k maximum if a full time post proved essential.

- 4.3 The simplest approach to employment would be for the Integrated Commissioning Manager to remain based and employed within MRH PCT. Line management arrangements for the project are to be confirmed by the Project Executive Group and Project Sponsor.
- 5. Timetable and Phasing of Project
- 5.1 The project would be divided into 3 main phases:
- 5.2 **Phase 1** Project Initiation through to gaining support from the Health and Social Care Community including political endorsement for the preferred model for lead commissioning and integrated provision. The Project Initiation stage would include:
 - setting out a shared vision for future service provision and aims and objective for the new services
 - key assumptions
 - roject risks
 - project organisation and structure
- 5.3 **Phase 2** Consultation
- Phase 3 Implementation: phased implementation has been adopted in some areas with for example, lead commissioning arrangements (including pooled budgets) being established first, with integrated management and services following on. Further work will be required to establish the best approach for the Leicester, Leicestershire and Rutland communities, although early thinking is that there would distinct advantages in introducing integrated community learning disability teams under single line management at the same time as lead commissioning. Integration of day and residential services would then follow on from this, although such phasing could create operational difficulties in particular for the Leicestershire Partnership NHS Trust.
- 5.5 The timetable (which is tight given the complexities of the project and the Human Resources and finance implications) is proposed as follow:

September 2003: Project Executive Group agrees to project proposal.

 February/March 2004 Report to local authority Cabinets, PCT and LPT Boards to seek endorsement of project

and timetable.

Report to Partnership Boards. Project Manager role agreed.

Project Initiation Proposal agreed and project structure and groups established. Potential timetable and phasing for implementation of lead commissioning and integrated provision to be identified.

 April 2004: Phase 1 of the Project completed with specific proposals agreed by the respective partners for detailed consultation with key

stakeholders and staff.

• July/ August 2004: Outcome of consultation considered and

final proposals and timetable for

implementation agreed.

• September-December

2004:

Work on detailed plans for implementation leading to Partnership agreement being

signed in December 2004.

December 2004-March

2005:

Preparation for implementation, potential

shadowing of new pooled budget

arrangements.

April 2005: Partnership Agreement and

commencement of new lead commissioning arrangements. (Integration to follow on, as

per agreed timetable)

In order to administer pooled budgets and oversee performance management issues for the Council and NHS, it is planned that a Professional Executive Board will be established comprising of the Director of Adult Services and a Director from each of the City Primary Care Trusts. Members of this Board will also sit on the Learning Disabilities Partnership Board. The Professional Board will have executive and delegated powers to manage the pooled budgets and oversee the strategic commissioning aspects of Council and NHS budgets and services

6. Financial, Legal and other implications

See financial and legal implications in paragraph 4 in the covering report.

7. Other Implications

OTHER IMPLICATIONS	YES/NO	Paragraph References Within Supporting information
Equal Opportunities	Yes	Throughout report
Policy	Yes	Throughout report
Sustainable and Environmental	No	
Crime and Disorder	No	
Human Rights Act	Yes	Throughout report
Elderly/People on Low Income	Yes	Throughout report

8. Background Papers – Local Government Act 1972

"Valuing People" White Paper 2001.

9. Consultations

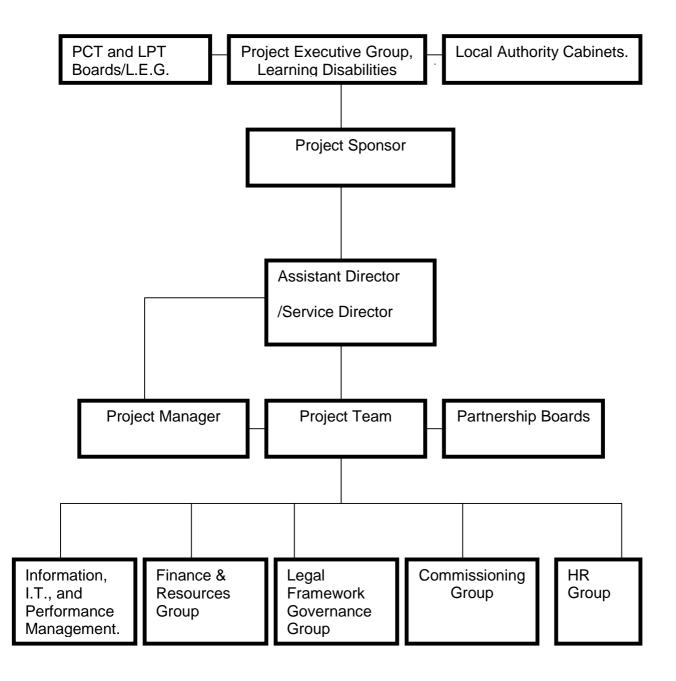
Consultations have been carried out with Primary Care Trusts, Leicestershire Partnership Trusts, Leicestershire County Council and Rutland County Council.

10. Report Authors

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Appendix A

Project Structure to establish lead commissioning and integrated service provision for adults with learning disabilities across Leicester City, Leicestershire & Rutland County Councils



Project Structure

	Membership / Leads	Role, Terms of Reference
Group / Individual		
Project Executive Group (meets monthly)	Director of Social Services Leicester City Council Leicestershire County Council Rutland Chief Exec, MRH PCT Chief Exec of Leics Partnership NHS Trust	 To provide overall leadership of project To oversee process of change To monitor progress to verify milestones To ensure full participation of all key stakeholders To sign off key documents
Project Sponsor		 To oversee project performance. To ensure integration with other elements of Health and Social Care community strategy, including links with S.H.A, SSI and Valuing People Support Team To provide effective leadership throughout the Project To establish and monitor the Project's Budget. To establish Project's accountability framework To ensure effective communication.
Project Manager		 To provide support to Project Leader To work equitably across the 3 Local Authorities, L.P.T. and PCTs To co-ordinate the work of the Project Team and the respective sub groups To facilitate key aspects of the project and monitor progress against the plan To provide regular progress reports and discussion papers To progress chase range of tasks being undertaken by individuals or groups supporting the project

0	Membership / Leads	Role, Terms of Reference		
Group / Individual				
Project Team (Monthly or more frequently if required)	Lead: Assistant Director/Service Director or equivalent. Project Manager Director of Learning Disabilities, LPT. Joint Commissioning Manager, MRH PCT SSD leads- Leicester City, Rutland, Leicestershire	 To provide overall co-ordination for the project To oversee the work of the Project Manager and progress chase if necessary To agree reports to the P.E.G. To advise the P.E.G. on an effective communication strategy between partner agencies, staff and stakeholders To develop and implement agreed consultation processes 		
Finance & Resources Group	Lead: Project Manager Leicester/Leicestershire/Rutl and Finance Leads, PCT Finance Head (s), Director of Finance LPT, Resources and Property Leads	 Budget split Pooled Budget arrangements Resources/ Office Accommodation Property 		
Information, IT., and Performance Management.	Lead: Project Manager, Heads of Performance Management/Service Evaluation, LAS, LPT Rep., PCT's rep, Operational Managers.	 Information Requirements and IT systems. Performance Management Information, P.I.'s etc. Service Evaluation. 		
HR Group	Lead: Project Manager, Leicester, Leicestershire Rutland HR leads LPT HR Lead PCT rep Operational Managers	 Workforce development, training and skill mix Conditions of Service issues Recruitment and Retention Procedures and Policies Personnel split 		
NB : HR Group and Legal Framework Group will need to combine at key stages re transfer issues (Secondment, TUPE etc)				
Legal Framework / Governance Group	Lead: Project Manager City, Rutland and Leicestershire solicitors PCT solicitors LPT solicitors 1 Senior Rep each from City and County PCT's, Local Authorities and LPT	 Governance framework Partnership Agreement 		

Group / Individual	Membership / Leads	Role, Terms of Reference
Commissioning Group	Lead: Project Manager 1 rep from each L.A. 1 PCT rep each from City and County PCTs 1 LPT rep.	 Philosophy and Values Purpose of Service Service objectives and features Eligibility criteria Structure of service /locality teams Transition issues Single Assessment process

