

Report of; Deputy Director Adults and Health

Report to; Director of Adults and Health

Date: 12 April 2017

Subject: Occupational Therapy Service for the Leeds Recovery Service

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Summary of main issues

1. Leeds Recovery Service is a new model for the delivery and co-ordination of short term services to provide a cost effective intervention, in the most appropriate setting for each person, to improve independence and reduce demand for long term social care support. It brings together established services and enhances them with dedicated Recovery Hub bed bases.
2. To optimise the benefit of the recovery model, therapy input is required over 7 days and extended hours. Options of how this should be provided have been considered and a preferred model identified.
3. Financial resource for the 7 day dedicated therapy support to the Recovery Service has been identified.

Recommendations

4. That the Director of Adults and Health approve the establishment of 5FTE new posts for registered Occupational Therapists to work a 7 day rota, 8am to 8pm to provide therapy support to the Recovery Service.
5. That the Director of Adults and Health approve the establishment of a 0.61FTE Disability Team Manager to develop, line manage and provide professional supervision to the team.

6. That the Director of Adults and Health approve the recurrent spend of £271,490 for the purpose of creating a dedicated Occupational Therapy Team for the Recovery Service.
7. Implementation will be by the Disability Service Manager from 2nd May 2017

1. Purpose of this report

- 1.1 To describe the requirements and proposed model for the Occupational Therapy element of the Leeds Recovery Service
- 1.2 To seek agreement for the establishment of 5 Occupational Therapist posts and a 0.61FTE Disability Team Manager to deliver 7 day a week Occupational Therapy within the Leeds Recovery Service

2. Background information

- 2.1 Leeds Recovery Service is a new model for the delivery and co-ordination of short term services to provide a cost effective intervention, in the most appropriate setting for each person, to improve independence and reduce demand for long term social care support. The service model is consistent with a strength based approach to social care, providing the appropriate short term support for a person who is experiencing day to day difficulties to regain their daily living skills and reconnect to the support around them
- 2.2 The model includes two existing services Skills for Independent Living (SkILs) the in house home care reablement service and Assisted Living Leeds which delivers community equipment and telecare. A third element of the model, to provide Recovery beds as part of the City's intermediate care strategy, is under development.
- 2.3 The assistive technology services are well established and funded from the Better Care Fund Arrangement and delivered in partnership with Leeds Community Healthcare. Both services operate 7 days a week, with Tele Care having the ability to provide a full response 24 hours a day.
- 2.4 The SkILs service was established as a city wide reablement service in 2011 and has continued to develop. A delegated decision was taken in June 2016 to implement a new service model which is designed to improve flow in the health and social care system, provide a better service to customers and to offer career progression for the staff in the service.
- 2.5 The new model includes the service being fully operational 7 days a week from 8am to 8pm and for referrals to be responded to within 4 hours with the service itself developing the reablement plan to support the person to achieve their maximum potential and their personal goals.
- 2.6 Funding from the NHS has been secured to open a "Recovery Bed" base at The Green which is currently a residential care home provided by Leeds City Council. The Green is due to be decommissioned as a care home from the end of June 2017 and will re- open in November 2017 providing 37 recovery beds as part of the community intermediate care offer in the city. These beds will be used to support hospital discharge where the person is unable to be supported at home, including by reablement , and also to prevent people from needing admission to an acute hospital bed. The recovery beds will also provide a function related to the "Discharge to Assess" process.

- 2.7 Plans are being developed to bid for NHS funding to deliver recovery beds in other parts of the city on the same basis.

3. Main issues

- 3.1 To optimise the benefit of the recovery model, therapy input is required to assess and develop rehabilitation plans for individuals who need that from a registered health professional, but also to provide support and guidance to the Support Workers in the bed base and in SKiLs.
- 3.2 In order to support the Skills service in their new model of delivery, a timely response from a registered worker is needed 7 days a week between 8am and 8pm. The main requirement for this will be related to risk assessments for the safe delivery of support, including moving and handling, in the home environment. This includes supporting decision making in relation to the need to arrange for the transfer of the person to a different location. The Recovery Bed base will also need to have 7 day access to advice and support from registered staff particularly at the point of admission.
- 3.3 A report to DLT in November 2016 considered the options to create a team of 5 therapists to work on a rota pattern over the 7 days and covering 8am to 8pm. A team consisting of 5 OTs or having a mixed team of OTs and physiotherapists were considered.
- 3.4 Options of the Council directly employing 2 physiotherapists as part of the team, or asking a health partner to second physiotherapists into the role, were considered. Each of these has complexities related to the Council's ability to provide the appropriate professional supervision to physiotherapists and the difference in the pay, particularly at top of scale, for therapists employed by the Council and the NHS.
- 3.5 While both occupational therapy and physiotherapy will benefit people who are using reablement and recovery beds, occupational therapy is the discipline with a focus on occupational performance related to the daily activity that people want or need to do. Occupational Therapists are also skilled in carrying out moving and handling risk assessments in domestic settings and putting plans in place to reduce the risk including through use of equipment.
- 3.6 A robust occupational therapy response over the 7 days and extended hours could be supported by physiotherapy and nursing accessed as needed for each individual. A proposal is being developed for how physiotherapy and nursing will be sourced to support the Recovery Service.
- 3.7 The Council already employs Occupational Therapists in Adults and Health, with smaller services in Environment and Housing and Children's Services. All these services operate Monday to Friday 8.30 to 5pm. The ASC OT service has 29 registered staff across 3 grades. They receive 9,000 referrals a year and high waiting lists had built up in 2016 which was managed through an action plan and has now been reduced to 90 unallocated pieces of work. The workload needs continual oversight by managers to prevent delays in assessment re occurring.
- 3.8 It has been acknowledged that there is insufficient resource within the current OT service to deliver a 7 day service to the Recovery Service and still maintain good

performance in responding to other referrals. Consultation was undertaken with the Trades Unions and the registered Occupational Therapy staff in ASC in May 2016 regarding providing temporary out of hours support to the SkILs service at the point it moved to 7 day working, until long term arrangements were established. The TU response on behalf of the staff group was that the staff group were unwilling to provide this. A small number of staff expressed interest in an opportunity to work a rota over 7 days but the majority view was that this was not an option they would consider.

- 3.9 Resources are now available (see 4.4 below) to allow ASC to create a new dedicated team of 5 OTs to support the Recover Service. Appendix 1 provides the rota pattern for these posts. This is a significant step forward in the delivery of 7 day services to support system flow.
- 3.10 The current OT service has 3.62FTE Disability Team Managers. The full time managers have teams of 13 staff each and also provide professional supervision to OTs in Environment and Housing and a 3rd sector organisation. There is no capacity for them to also manage the new OT Recovery Team.
- 3.11 Funding available will allow for the recruitment of a 0.61 FTE PO6 team manager with a specific role to develop and manage the OT Recovery Team. This post will report to the Disability Service Manager and will work 3 days a week with a one day overlap with the existing Disability Team Manager who works 3 days a week.
Appendix 2

4. Corporate considerations

4.1 Consultation and engagement

- 4.1.1 The Trade Unions have been advised that funding has been identified to develop the OT service in order to support colleagues in both SkILs and the recovery bed bases who are working over 7 days. The response from TU is that they are happy for the OTs to be informed, but requested further meetings as the proposal progresses.
- 4.1.2 The proposal for the development has been discussed with the existing Adults and Health Occupational Therapy Service and no comments have been received from them.
- 4.1.3 A written briefing was provided to the Trades Unions on 16 March and the Unison Convenor requested a meeting which was held on 31 March 2017. With clarification regarding the management arrangements, the rota pattern, the enhancements applied and the access the team would have to community equipment during weekends and evenings, the convenor expressed support for the proposals. The GMB convenor has also provided verbal agreement to the proposals.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 An Equality Impact Assessment screening tool has been undertaken and has indicated that an EIA does not need to be carried out. There are no adverse effects on any particular groups of people related to this service change.
- 4.2.2 With regard to the workforce, this proposal creates an opportunity for Occupational Therapists who work for the Council to work in a role that offers a different pattern of working which may fit better with their personal circumstances. Equally these

posts create an opportunity for Occupational Therapists who prefer to work a rota over 7 days to take up a post with the Council.

4.2.3 The creation of additional posts in the Occupational Therapy service will lead to external recruitment, either for these particular posts or to back fill any successful internal applicants. This creates an opportunity for the Council to attract Occupational Therapists from a wider range of backgrounds than the current profile of the service.

4.2.4 The introduction of an Occupational therapy Service which operates 7 days a week and till 8pm will allow people in Leeds and their family carers to have a more responsive service that can meet their personal requirements regarding the most appropriate time of service delivery.

4.3 Council policies and best council plan

4.3.1 This service development will contribute to National Indicator 142, the percentage of vulnerable people supported to achieve independent living.

4.3.2 Best Council Plan 2015 – 20; this service development contributes to the Better Lives programme and to the Breakthrough project of Making Leeds the Best Place to Grow Old.

4.4 Resources and value for money

4.4.1 The resources available are a recurrent £200k investment in the Occupational Therapy budget from 17/18 which has been identified from the Council Tax precept. In addition £86,580 was included in the costs for delivering the 37 beds at The Green to fund Occupational Therapy.

4.4.2 The £86,580 is only available from November 2017. Recruitment cannot commence until late April and is likely to take at least 3 months so the slippage on the £200k available from April 2017 will be used to cover the cost of the team as they come into post prior to November 2017.

4.4.3 Any pressures on the funding of this team will be managed within the context of the overall staffing budget in this service area.

4.4.4 The cost of employing 5 OTs, (2 Senior OTs and 3 Community OTs), including on costs and enhancements for the required rota pattern is £233,442 per annum

	Grade	SCP	Top of Scale	FTEs	Basic	NI	Super	Total
Senior OT	PO3	38-41	41	2	81,852	8,762	12,769	103,383
OT	PO1	33-36	36	3	106,652	10,915	16,639	134,206
Total								237,588

4.4.5 One 0.61FTE PO6 Disability Team Manager, as described in 3.11 above, would cost £33,902 including on costs.

4.4.6 All post would be recruited in line with current Leeds City Council job descriptions and payscales for Occupational Therapists. This recruitment will provide an opportunity to recruit staff from a more diverse background.

4.4.7 The total cost of the proposal is £271,490 with recurrent funding of £286,580 available, as described in 4.4.1.

4.5 Legal implications, access to information, and call-in

4.5.1 This is a Key Decision and subject to call in.

4.6 Risk management

4.6.1 The creation of this specific team of OTs is required to reduce risks to customers and staff in the new Recovery Service.

4.6.2 The risk of not being able to recruit Occupational Therapists to work a 7 day a week rota and extended hours will be mitigated by ensuring a wide circulation of the posts to Occupational Therapists including to NHS Trusts where 7 day working is more embedded.

5 Conclusions

5.1 The Recovery Service requires 7 day a week extended hours support from registered therapists in order to maximise the benefit to customers, ensure flow is maintained and to support staff working in bed bases and in customers homes

5.2 Options in how this should be provided have been considered.

5.3 The proposed model for the therapy support needed is by the establishment of a team of 5FTE Occupational Therapists working a rota over 7 days 8am to 8pm. This team to be supported by a 0.61FTE Disability Team Manager.

6 Recommendations

6.1 That the Director of Adults and Health approves the establishment of 5FTE new posts for registered Occupational Therapists to work a 7 day rota, 8am to 8pm to provide therapy support to the Recovery Service.

6.2 That the Director of Adults and Health approve the establishment of a 0.61FTE Disability Team Manager to develop, line manage and provide professional supervision to the team.

6.3 That the Director of Adults and Health approve the recurrent spend of £271,490 for the purpose of creating a dedicated Occupational Therapy Team for the Recovery Service.

6.4 Implementation will be by the Disability Service Manager from 2nd May 2017

7 Background documents¹

7.1 None

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.