



**Report of Deputy Director of Adults and Health**

**Report to Director of Adults and Health**

**Date: 17/3/21**

**Subject: Request to create 6 additional Occupational Therapy posts to the existing structure.**

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has consultation been carried out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Will the decision be open for call-in?	<input type="checkbox"/> Yes <input checked="" 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**

**1. Main issues**

- The Council is currently reviewing and redesigning home care services to be based on a 'wellbeing model' of service delivery which offers co-production of person-centred care and wrap around health and care support and support in their local communities.
- It is proposed that two Community Occupational Therapists (PO1) are employed to support the project and embed the reablement principles within the new home care model of Community Wellbeing Teams.
- There are a large number (over 700) of people who are in receipt of home care and have two carers to support them, often with moving and handling.
- It is proposed to employ 2 Senior Occupational Therapists (PO3) to work as a dedicated team to review these cases, to reduce the packages down to one carer with the use of assistive technologies and equipment.
- Due to current demand on the Occupational Therapy service this additional work is not possible within the existing resources so the creation of 4 additional posts to support the two new developments is needed.
- In the three area Disability Teams there is currently a backlog of cases awaiting assessment. In October 2019 there was a piece of work carried out on Demand and Capacity in the Disability Teams and the conclusion was that there was not

enough resource to deal with the number of new referrals coming into the team. The creation of 2 community Occupational Therapy posts (PO1) would enable the area Disability Service Teams to reduce the backlog and then add to the area resource to ensure that new assessments are completed within 28 days.

## **2. Best Council Plan Implications** (click [here](#) for the latest version of the Best Council Plan)

- Making the best use of resources, by reducing spend on home care
- Health and Wellbeing – working as a system to ensure people get the right care, from the right people, in the right place

## **3. Resource Implications**

- 2 Senior Occupational Therapists (PO3) at top of grade is £98,454 for the single handed care team
- 2 Community Occupational Therapists (PO1) at top of grade is £85,204
- Due to current demand on the Occupational Therapy service this additional work is not possible so the creation of four additional posts is needed.
- There is likely be increased demand on the Leeds Community Equipment Budget if equipment is recommended to reduce the carers to one
- 2 Community Occupational Therapists (PO1) at top of grade is £85,204, to work on reducing the backlog of assessments
- The cost is £268,862. In the first year it is intended that funding for these posts will be contained within existing budgets, but it has been agreed that this can be met from reserves if this cannot be achieved. A review of this position will be taken prior to the budget setting period for 2022/23 to determine whether this level of OT's is required and any necessary ongoing funding identified at that time. An option of reduction by natural turnover will be adopted if it is determined that the increased level of support isn't required at that time

## **Recommendations**

The Director of Adults and Health approves –

- a) The creation of 6 Occupational Therapy posts.
- b) 2 Senior Occupational Therapists to work on reducing the number of care packages that have 2 carers.
- c) 2 Community Occupational Therapists to support the development of the new Well Being Teams.
- d) 2 Community Occupational Therapists to reduce the backlog of assessments.
- e) The cost of £268,862.
- f) Implementation will be by the Disability Service Manager.

## **1. Purpose of this report**

- 1.1 To outline the need for an additional six Occupational Therapy posts to support two areas of work within Adults and Health, namely the development of the Community Wellbeing Teams and for Single handed care assessments.

## **2. Background information**

- 2.1 The Council is currently reviewing and redesigning home care services to be based on a 'wellbeing model' of service delivery which offers co-production of person-centred care and wrap around health and care support and support in their local communities. The changes also supports the NHS Ageing well principles and those of Discharge to Assess.
- 2.2 One of the key aims is the implementation of reablement principles and strengths-based approaches, with a focus on promoting independence.
- 2.3 It is proposed that two Community Occupational Therapists are employed to support the project and embed the reablement principles within the new home care model of Community Wellbeing Teams.
- 2.4 There are a large number (over 700) of people who are in receipt of home care and have two carers to support them, often with moving and handling. These customers often have not had a recent moving and handling review and it is likely that with the provision of equipment and/or different methods the care could be reduced to one carer.
- 2.5 Due to the specialist nature of moving and handling assessments it is recommended that Senior Occupational Therapists are recruited to these posts.
- 2.6 Due to current demand on the Occupational Therapy service this additional work is not possible so the creation of two additional posts is necessary.
- 2.7 In the first year it is intended that funding for these posts will be contained within existing budgets, but it has been agreed that this can be met from reserves if this cannot be achieved. A review of this position will be taken prior to the budget setting period for 2022/23 to determine whether this level of OT's is required and any necessary ongoing funding identified at that time. An option of reduction by natural turnover will be adopted if it is determined that the increased level of support isn't required at that time.
- 2.8 There is currently a backlog of assessments for Occupational Therapists. This is currently 612. In October 2019 there was a piece of work carried out on Demand and Capacity in the Disability Teams and the conclusion was that there was not enough resource to deal with the number of new referrals coming into the team.
- 2.9 The majority of the referrals in the backlog require an assessment by an Occupational Therapist with some experience, and as such 2 Community Occupational Therapists (PO1) are recommended to work across the 3 community teams to reduce the backlog.

### **3. Main issues**

#### **Community Wellbeing Teams**

- 3.1 The Council is currently reviewing and redesigning home care services to be based on a 'wellbeing model' of service delivery which offers co-production of person-centred care and wrap around health and care support and support in their local communities. The changes also supports the NHS Ageing Well principles and those of Discharge to Assess.
- 3.2 It is proposed that 2 Community Occupational Therapists (PO1) are employed to support the project and embed the reablement principles within the new home care model of Community Wellbeing Teams.
- 3.3 One of the key aims is the implementation of reablement principles and strengths-based approaches, with a focus on promoting independence.
- 3.4 The Occupational Therapists use a Person-Environment-Occupation Performance model which considers the person and their environment and what tasks they need to do, and how the structure of those tasks needs to be adapted. In this way a person's well-being and quality of life can be improved by enabling people to do activities that need and want to do.
- 3.5 The Occupational Therapists will undertake assessments with people when they first join the pilot, and review them as necessary, during their involvement. They will also work with the care staff to promote and support reablement as a core function of the new service.

#### **Single Handed Care**

- 3.6 There are a large number (over 700) of people who are in receipt of home care and have two carer staff to support them, often with moving and handling.
- 3.7 It is proposed to employ 2 Senior Occupational Therapists to work as a dedicated team to review these cases, to reduce the packages down to one care staff member with the use of assistive technologies and equipment.
- 3.8 Due to the specialist nature of moving and handling assessments it is recommended that Senior Occupational Therapists are recruited to these posts. The Occupational Therapy team will initially focus on:
  - people who have been discharged from hospital, with a new package of care, where there are two carer staff members
  - where a care provider is requesting an additional care staff member to support a package of care
  - where an Occupational Therapist is requesting a tracking hoist a full review of the care package needs to be undertaken
- 3.9 The Occupational Therapists will work closely with ART for the hospital discharge customers and will undertake reviews at 4 weeks which has been determined given the acuity of individuals now leaving hospital, especially those who have experienced Covid 19, to be the most optimal and beneficial timescale for post hospital discharge reviews.
- 3.10 The pilot will be regularly reviewed to determine the savings made towards the homecare BAP.

## **Backlog**

- 3.11 In October 2019 there was a piece of work carried out on Demand and Capacity in the Disability Teams and the conclusion was that there was not enough resource to deal with the number of new referrals coming into the team.
- 3.12 The majority of the referrals in the backlog require an assessment by an Occupational Therapist with some experience, and as such 2 Community Occupational Therapists (PO1) are recommended.

## **Corporate considerations**

### **4. Consultation and engagement**

- 4.1 Trade Unions have been informed about the plans to recruit to these posts and that the work cannot be done by the existing staff teams.
- 4.2 Disability Team Managers and Occupational Therapists have been informed about the plans as the staff will be recruited from existing staff, and then external staff recruited to graduate posts which will become vacant.
- 4.3 The Head of Service and Service Delivery Manager of Leeds Equipment Service are aware of the work towards single handed care and that there is a risk of an increased demand on that budget.

### **5. Equality and diversity / cohesion and integration**

- 5.1 An equality, diversity, cohesion and integration template has been completed as part of this work and is attached.

### **6. Council policies and the Best Council Plan**

- 6.1 Making the best use of resources, by reducing spend on home care.
- 6.2 Health and Wellbeing – working as a system to ensure people get the right care, from the right people, in the right place.

### **7. Climate Emergency**

- 7.1 At Full Council on 27 March 2019, Leeds City Council passed a motion declaring a Climate Emergency. In addition, the Leeds Climate Commission have proposed a series of science based carbon reduction targets for the city so that Leeds can play its part in keeping the increase in global average surface temperatures to no more than 1.5°C.
- 7.2 Environment and Sustainability considerations were taken into account while developing the specification. Provisions are included which advises that the service will work with suppliers to ensure that they assist Leeds City Council to achieve their carbon reduction targets and reducing emissions across its fleet and operations.
- 7.3 In terms of specifics for this contract, the reduction from two to one carers may reduce or eliminate the need for additional transport to the customer's home. This impact is carbon positive in as much as they are removing the need for unnecessary journeys.

## **8. Resources, procurement and value for money**

- 8.1 The two Senior Occupational Therapists will cover city wide and work as a team.
- 8.2 Their input will focus on reducing care packages where there are 2 carers and contribute to the Home Care Budget Action Plan.
- 8.3 Assessments of new packages, for people being discharged from hospital, will be done within two weeks of discharge so people do not get reliant on having 2 carers.
- 8.4 When a provider requests an additional carer an assessment will be done to see if alternative methods, or the provision of equipment would negate the need for the second carer.
- 8.5 In the first year it is intended that funding for these posts will be contained within existing budgets, but it has been agreed that this can be met from reserves if this cannot be achieved. A review of this position will be taken prior to the budget setting period for 2022/23 to determine whether this level of OT's is required and any necessary ongoing funding identified at that time. An option of reduction by natural turnover will be adopted if it is determined that the increased level of support isn't required at that time.

## **9. Legal implications, access to information, and call-in**

- 9.1 There are no legal or access to information implications, and the decision is not subject to call-in.

## **10. Risk management**

- 10.1 There is a risk of pressure on the equipment budget, and therefore the care package cannot be reduced from two carer staff to one in a timely way, if there is a delay in providing the equipment.
- 10.2 There is a risk that the vacancies created by existing staff moving into these posts cannot be recruited to, thereby causing additional pressure on the existing Disability Services Teams.
- 10.3 As the well-being teams develop and referral numbers increase there may be a need to increase the number of Occupational Therapists supporting them.

## **11. Conclusions**

- 11.1 With increased demand on the Home Care budget, and the need to achieve the budget action plan the creation of 2 Senior Occupational Therapy posts will have an immediate impact in saving money.
- 11.2 As the Community Well-being teams develop the input of 2 Occupational Therapists will help the teams to implement reablement principles and strengths-based approaches, with a focus on promoting independence, into all the work that they do.
- 11.3 The creation of 2 Community Occupational Therapy posts to reduce the backlog in the short term, but will, in the longer term give more resource to deal with the referrals as they come in.

11.4 In the first year it is intended that funding for these posts will be contained within existing budgets, but it has been agreed that this can be met from reserves if this cannot be achieved. A review of this position will be taken prior to the budget setting period for 2022/23 to determine whether this level of OT's is required and any necessary ongoing funding identified at that time. An option of reduction by natural turnover will be adopted if it is determined that the increased level of support isn't required at that time.

## **12. Recommendations**

The Director of Adults and Health approves –

- a. The creation of 6 Occupational Therapy posts.
- b. 2 Senior Occupational Therapists to work on reducing the number of care packages that have 2 carers.
- c. 2 Community Occupational Therapists to support the development of the new Well Being Teams.
- d. 2 Community Occupational Therapists to reduce the backlog of assessments.
- e. The cost of £268,862.
- f. Implementation will be by the Disability Service Manager.

## **13. Background documents<sup>1</sup>**

13.1 None.

## **14. Appendices**

Equality Assessment.

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<sup>1</sup> 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.