

## **Scrutiny Board Adult Social Care**

### **Inquiry into the Future Provision of Domiciliary Care and Reablement Services**

#### **Comments for inclusion into proposed Executive Board Report in July 2011**

#### **Introduction**

At the June 2010 Adult Social Care Scrutiny Board meeting members expressed their desire to conduct an inquiry into the provision of Domiciliary Care and Reablement Services to the residents of Leeds. The development and review of both service areas is planned during 2010/11 and beyond as part of the overall modernisation of adult social care services. Therefore it was appropriate for the Scrutiny Board (Adult Social Care) to conduct an inquiry at this juncture in order to influence decision making and assist with policy development which will ensure effective service delivery and value for money.

The outline of the Inquiry was reported to Executive Board on 3<sup>rd</sup> November, where it was confirmed that any recommendation arising from the Inquiry would inform the Director of Adult Social Care's report to Executive Board planned for July 2011.

The Inquiry was undertaken by a working group consisting of the following Members;

Councillor Hanley (Chair)  
Councillor Chapman  
Councillor Cleasby  
Councillor Sharon Hamilton  
Councillor Kendall  
Joy Fisher (co-opted member)

The working group has received and discussed a large amount of information, covering the following;

- Methods of domiciliary provision
- Local demand for homecare
- Proposed new methods of delivery, including plans for a city-wide Leeds Reablement Service by April 2011
- The role of reablement Early Implementer sites
- A number case studies, providing a snapshot of the way reablement is helping people live more independently
- Where assistive technology services in Leeds fit into this broader framework.
- The cost of in house provision – comparison in terms of cost and quality to external provision.
- Details of current inefficiencies in the way the in-house services are being provided, how easily and realistically these issues can be rectified, what has been done so far and what have been the results/improvements.

This report presents the observations, conclusions of the working group for endorsement by Scrutiny Board (Adult Social Care)

## **Observations, Conclusions and Recommendations**

The working group acknowledges the continuing challenges for Leeds in meeting the needs of adults with social care needs in terms of ensuring financial sustainability and meeting the requirements of an aging population.

In the same way as Scrutiny Board (Adult Social Care) has stated that the 'do nothing option' is not an option for the future of residential care, the working group is clear that the current arrangements for public sector homecare are not sustainable. In fact the futures of both service sectors are inextricably linked. Having received substantial information and case study evidence, the working group has firmly reached the conclusion that the direction of travel with regards to domiciliary care and the Community Support Service, (which includes the development of reablement services), must be as detailed in the report to Executive Board dated 3<sup>rd</sup> November 2010. That is, the policy of promoting independence and the shift away from traditional task based and long term services moving towards modern personalised choice based services.

The concerns of the working group therefore, are not over the strategies for the future delivery of homecare services in Leeds but ones in relation to the costs of in-house provision when compared to that provided by the independent sector.

Our Inquiry has confirmed the continuing challenges for Leeds in addressing inefficiencies in the way in-house services are being provided, in order to ensure homecare services are able to meet demand in a sustainable manner. Our summation of the issue is simple; If care at home continues to be the desired option for older people as opposed to care provided in long term residential settings, why should someone with a personal budget have to pay more for a local authority service, (if that is their preferred service provider) when it can be bought at a cheaper rate independently?

To put into perspective, the in-house service represents 61% of the market in terms of cost, but only 36% in terms of volume. The difference in the cost of delivered care hours between the in-house service and independent sector provision is the different in staffing costs, not just in terms of pay levels but in efficiency levels. The working group received evidence of 'lost care time' (approximately 20%) due to sickness absence or periods where staff were not being used. If a 90% productivity target was met an increase of between 2,000 and 3,250 care hours could be achieved, per week, based on current provision. The working group supports the setting of a 90% productivity target.

Sickness continues to be a contributory factor to productivity rates; the working group therefore supports the initiatives used to drive down absence rates.

The working group supports the review of staff rotas and working patterns and would expect the Directorate to undertake meaningful dialogue with staff and trade unions in the drawing up and implementation of solutions.

The working group supports the standardisation of employee contracts to ensure that all contain a flexibility clause.

The Working Group is of the view that the current costs differential between Independent providers and Council in house provision for Domiciliary Care should be robustly investigated to assure value for money. Any attempts to simply move In house providers onto Reablement tasks, without this investigation will result in less than best value.

A report should come back to Scrutiny detailing the investigation and the Departments subsequent planned actions.

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