

		AGENDA ITEM 7
		PAF/23/14
Committee:	People and Families Scrutiny Committee	
Date:	4 September 2014	
<u>Outstanding Items</u>		
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Purpose of the Paper:

The last time **Occupational Therapy** (OT) was considered at Scrutiny was February 2013. This update to the People & Families Scrutiny Committee is with regard to progress with the District/Borough/City Councils and on improvements to the service.

Background

In 2010 there were 794 people waiting for Occupational Therapy assessments over 28 days. There were long waiting times for people to access adaptations within their homes in some cases over 18 months. There was little flexibility in the way that the leadership at the time were able to respond to the way they delivered Occupational Therapy with 80% of Occupational Therapists employed by ECC. Pathways for people to access services were fragmented.

OCCUPATIONAL THERAPY SERVICES

The former Community Wellbeing and Older People Policy & Scrutiny Committee conducted an in-depth review on Occupational Therapy services culminating in a final report with recommendations being presented to the Committee and the Cabinet Member in April 2011. The final report can be found at: [OT Service Review - 14 April 2011](#).

Subsequent reports and updates were received by that Committee at its meetings in:

- October 2011
- April 2012
- January 2013
- February 2013

One of the recommendations from the OT review related to the Disabled Facilities Grant (DFG), and the Committee conducted a separate follow-up review of the DFG, publishing a report in May 2012, which can be found here: [DFG Review - May 2012](#).

The Committee is receiving an update on OT services as part of its work programme to update Members on developments within the service since the former Scrutiny Committee received its last report 17 months ago.

Occupational Therapists (OTs) in social care maximise the number of people living independently in the environment of their choice. OTs do this by: the promotion of health and wellbeing through occupation; enabling people to participate in everyday life; enhancing people's ability to engage in activities they want to, need to or are expected to and modifying the environment to better support their occupational engagement.

OTs' unique skills and training in all aspects of rehabilitation, recovery and enablement make them well positioned to support and enable front line staff to embed a reabling culture throughout the organisation and with partners. They focus on targeted interventions to maximise independence and minimise the need for longer term support, thereby reducing the costs on social care budgets.

They are well placed to recommend assistive technology and the removal of environmental disabling barriers. OTs work with people to re-engage with their local communities, networks and leisure activities to reduce social isolation and maintain health and wellbeing.

In order to support ECC to discharge the requirements of the Care Act, OTs have a key role to play in prevention and early intervention through their expertise relating to aids, assistive technologies and adaptations that help people maintain or regain their independence and delay or prevent the onset of longer term dependency on social care support and health service interventions.

OTs can contribute to the following Essex County Council's corporate outcomes:

- People in Essex can live independently and exercise control over their lives.
- People enjoy good health and wellbeing.
- People have aspirations and achieve their ambitions through education, training and lifelong learning.

Progress with district, borough & city councils (disabled facilities grants)

Disabled facilities grants are awarded by the district, borough and city councils under the Housing Grants, Construction and Regeneration Act 1996. The Act states that the housing authorities are required to consult with the social services authority before it approves the grant application, to satisfy themselves that the proposed works are necessary and appropriate. The works will usually facilitate access into and within the disabled occupant's dwelling (eg widen doors and install ramps, install a stair lift or a level access shower).

An ECC officer met with every district, borough or city council regarding the throughput of referrals from Essex County Council (ECC) regarding applications for disabled facilities grants. This is because some of the councils had reported a reduction in the number of referrals. Following these meetings, the officer attended the Essex Housing Officers Group (EHOG) in late 2013, along with OTs representing the Countywide Assessment and Review Team (CART, formerly the Commissioned Workflow Team). The meeting heard all council areas report a significant improvement in the flow of referrals. The ECC attendees advised that a Senior Occupational Therapist would be the point of contact for the councils. There are four Senior OTs, one per quadrant (North - Colchester & Tendring, Mid - Chelmsford, Braintree & Maldon, West - Harlow, Epping Forest & Uttlesford, South - Basildon, Brentwood, Castle Point & Rochford). The officers

outlined that the majority of referrals are likely to come from CART. The district, borough and city councils know they can liaise directly with their OT regarding any issues, eg throughput, quality and standards. One of the CART Senior OTs attends the quarterly EHO meeting.

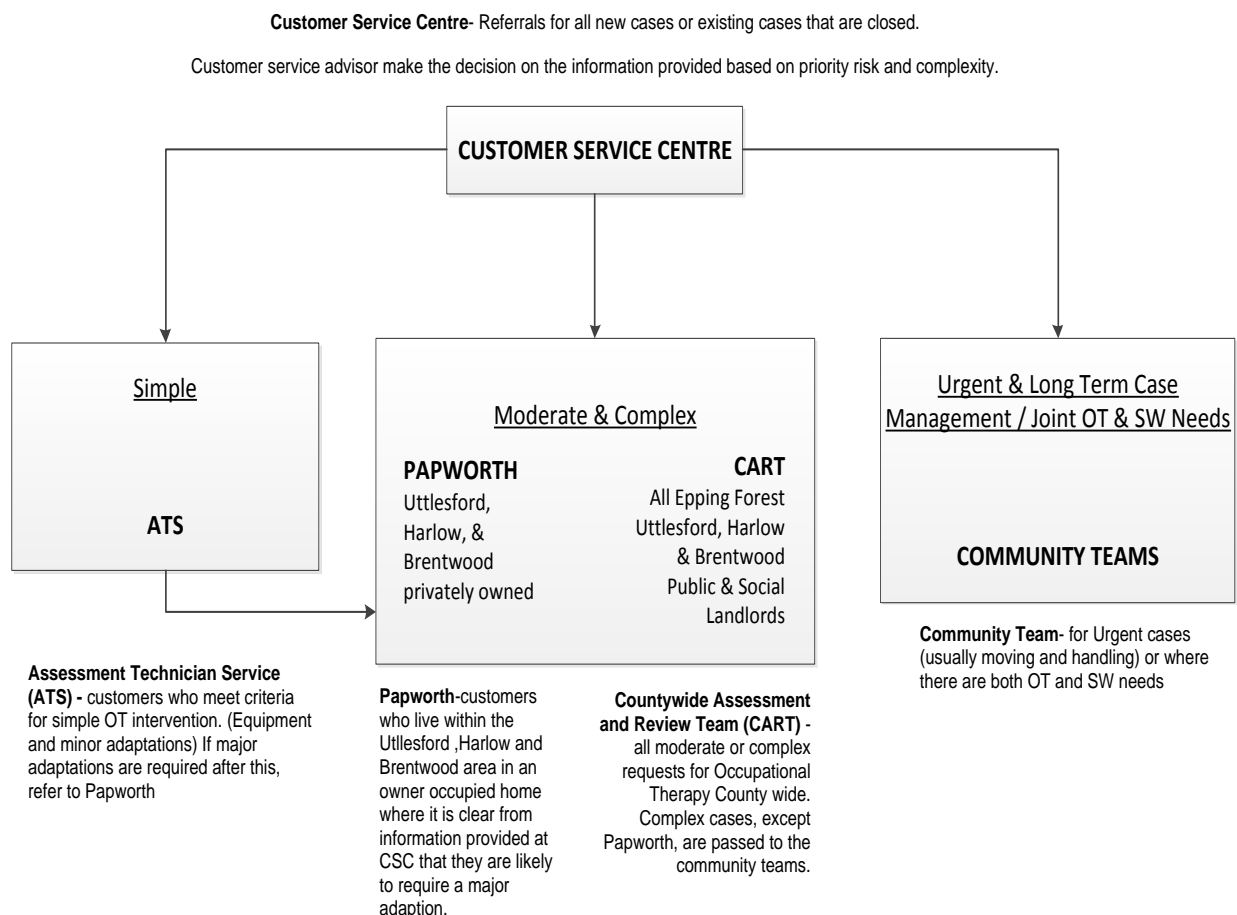
The Basildon Borough Council (BBC) pilot for DFG was extended to September 2013. ECC seconded an OT to BBC enabling quicker assessments to take place. Following the end of this pilot, all moderate cases are dealt with by CART.

Papworth Trust Home Improvement Agency process started on 7 January 2013. Referrals for disabled facilities grants are passed to the Papworth Trust for the Harlow and Uttlesford areas from the Customer Service Centre.

Improvements in the OT Service

The OT pathways have been redesigned as part of the Adult Customer Journey. See diagram below.

OT PATHWAYS



The flow of referrals from the Customer Service Centre (formerly Essex Social Care Direct) is as follows:

- Simple cases are sent to Essex Cares Assessment Technician Service.

- Urgent cases (usually but not always involving moving and handling difficulties) are sent to the community teams.
- Cases requiring long term involvement are sent to the community teams.
- Cases where a joint response is needed from both a social worker and an OT are sent to the community teams.
- Complex cases are sent to the Community Teams.
- Moderate cases are sent to CART.

The Assessment Technician Service target is to complete their initial visit within four working days. Their performance in this area has significantly improved and at the time of writing this report, they are meeting this target in 99.1% of the time.

The Community Teams target is to complete assessments within 28 working days. They are meeting this target. In the three months from April - June 2014, they completed 626 assessments. There are currently 8 people from the Community Teams waiting for their OT assessment.

CART's target is to complete assessments within 28 days. They are meeting this target. CART allocates cases to self-employed OTs and ECC OTs completing overtime. Approximately 600 cases have been allocated per month. There are currently four people waiting for their OT assessment.

Early indications are that the OT Pathways are effective. This is evidenced by:

- Greenfields have dealt with all referrals sent direct from CSC (success).
- Papworth Trust have dealt with all referrals sent direct from CSC (success).
- Social Workers requiring an OT to work jointly with them have been able to identify OTs in the Community Teams (success).
- Urgent OT cases have been allocated within 10 days to OTs in the Community Teams (success).
- CART have a process in place to filter referrals daily and transfer complex cases direct to community teams (success).

Community Equipment Budget

In the first quarter of 2014-15, 37,286 items of equipment have been provided at a cost of £2,272,697. This includes community equipment, assistive technology and minor adaptations.