1.0 EXECUTIVE SUMMARY

1.1 The purpose of the report is to provide a summary and update on the improvement and development of the Learning Disability Day Services.

1.2 The Service Manager for Registered Services has continued to be involved with the reviewing and implementation of improvement plans throughout all Council operated services. There is evidence that the appropriate improvements are incrementally improving grades following being assessed by the Care Inspectorate.

1.3 All externally commissioned services in line with the Service Choices agenda will be subject to new reviews of Service provision in conjunction with Commissioning team. This will seek to ensure that the Council are in receipt of best value and that they are providing positive and outcome based interventions to everyone in receipt of supports and intervention.

1.4 It is envisaged that Adult Care services will provide and commission modern and person centred Day Services which are socially inclusive and provide positive personal outcomes. In order to provide meaningful activities and be participative they have to be inclusive of evenings and weekends.

1.5 In achieving the above it is essential that there is greater consistency and standardisation across all services in line with the demands of our service users, families and carers and the Care Inspectorate. This process has begun and is ongoing and the Care Inspectorate are supportive of the progress being made to this juncture.

1.6 Recommendations

It is recommended that the Community Service Committee notes:

a) The ongoing process and development of modern and person centred Day Service Resources throughout Argyll and Bute regardless of whether they are internally or externally sourced.

b) The improved grading of Learning Disability Day Services following Care Inspectorate inspections.
2.0 INTRODUCTION

2.1 The last major policy driver in relation to Learning Disability and which had implications for Day Services was the “Same as You” (2000). The Keys to Life and Self Directed Support legislation are the two major pieces of Legislation which are likely to affect and impact the Learning Disability population at the present time.

2.2 The Service Manager for Registered Services continues to work alongside the Learning Disability Day Services ensuring that they were not only meeting the needs of their client group but that they were planning and implementing changes and modernising their services. Work has been undertaken to ensure services are well prepared for Care Inspectorate visits, able to meet the challenges of Self Directed Support and develop services which continued to be viable and offer flexible and dynamic services beyond the traditional Day Service model. This flexibility is supported by the recent changes to staff terms and conditions which allows for aligning staff to the needs and aspirations of service users.

3.0 RECOMMENDATIONS

It is recommended that the Community Service Committee notes:

a) The ongoing process and development of modern and person centred Day Service Resources throughout Argyll and Bute regardless of whether they are internally or externally sourced.

b) The improved grading of Learning Disability Day Services following Care Inspectorate inspections.

4.0 DETAIL

4.1 ASIST (Cowal)

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ASIST continues to achieve acceptable standards following Care Inspectorate inspections was graded as all 4’s under the 4 themes inspected. The most recent Inspection took place on 26th May.2015 and the feedback would clearly
indicate that the service is incrementally improving and developing and it is hoped that the grading will reach 5’s in the future.

4.2 **Phoenix (Bute)**

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Phoenix was most recently inspected on 3rd March 2015 and has again seen the grades increasing in line with the improvement plan and the implementation of Standardised Paperwork. The progress has continued in an upward trend with the grades again being lifted to five’s across three inspected areas and a four for environment following a Care Inspection on 3rd March 2015. These improved grades demonstrate positive progress in light of the previous inspection in January 2013 which resulted in grades of 2 across all inspection themes and ten requirements.

4.3 The manager of the Phoenix and ASIST service is presently undertaking a specific piece of work standardising documentation and installing a shared IT drive across all Argyll and Bute Council Learning Disability Day Services before extending this to all Argyll and Bute Council’s Older Peoples regulated services. This work is envisaged to be complete by April 2016.

4.4 In conclusion it is evident that both services are moving in the right direction and the staff teams in both services are working to achieve positive outcomes for their service users.

4.5 **Lorn Day Service (Oban)**

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The Lorn Day Service in Oban was inspected on 23rd January 2015 and achieved grading’s of an adequate standard. The service was graded on the themes inspected as achieved 3’s across all themed areas, with several recommendations and requirements. Anticipated improvements in the grades have not been realised as yet and they remain disappointing and frustrating for this service. The Lorn Service will be focussing on the required changes and diversifying. This will involve the service modernising the support it offers and move away from the historical perception of how it is used and defined.

4.6 Since the last inspection a staff development day has been held which attempted to allow the staff team to begin to take ownership and be more involved and participative in the growth and development of the service. Although this has not
yet been reflected in improved grades, there has been more vibrancy and urgency about implementing changes which will hopefully better meet the needs of service users and be reflected in future inspections. A comprehensive Development and Action Plan has been developed to guide these changes. The standardisation process noted above and the adoption of the new Care and Support Plans within this unit are key areas for the action plan.

4.7 **Woodlands Day Centre (Campbeltown)**

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Woodland Day Centre was inspected in March 2015. The inspection was positive with grades of 5’s being achieved across all themed areas of the inspection. The service has a stable and longstanding group of service users and staff team. The staff team are confident with regards the engagement process with service users and families and carers. The service has in place confident and diligent management and staff group. Whilst the service has received positive grades it has recognised it would benefit from becoming more community inclusive and more dynamic. This is an area which the Unit Manager and the staff are aware of and will take forward developments and change through the Unit’s Improvement Plan.

4.8 **Lochgilphead Day Service**

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Lochgilphead Day Service was last inspected by the Care Inspectorate on 28th and 29th August 2014 with an expected inspection in August 2015. The service previously had received two 6’s in their areas of themed inspection. The grades for Lochgilphead remain more than satisfactory achieving one 6(excellent), one 5(very good) and two 4’s (good). Some of the rationale for some of the fours was for issues relating to building related issues which have been addressed and actioned in line with the Action Plan submitted to the Care Inspectorate.

4.9 **Greenwood (Campbeltown)**

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The Greenwood service received an intensive inspection from 26th through 28th
May 2014. This inspection resulted in 2’s across all themed areas and a significant amount of requirements, recommendations and areas of improvement. An Action Plan was developed and immediately tackled and resolved the significant and most concerning areas of practice and policy and procedures.

4.10 Due to the concerning levels of grades a significant input and investment in time was made within the Greenwood service in conjunction with the Unit Manager and the support team. The intervention focused on ensuring basic and fundamental practice and procedural issues were addressed.

4.11 A comprehensive Inspection was conducted on 13th and 14th May 2015 and the progress and improvements have been significant. The grades across all four themed areas were lifted from 2s (Weak) to 4’s (Good). The management and staff team within the Service continues to seek improvement and development to build on the progress to date.

4.12 All the services continue to benefit from working closer together. The standardisation process has also progressed beyond the standardisation of Care Plans and Systems which are now in place to each service now working with person centred plans reflecting an outcome based approach and a shared IT drive embedded into each service. A next step for the service is to improve structures for staff and management to connect with Social Work colleagues and share goals and aspirations. The target for the standardisation process is for all services to attain in future Inspections at least 5’s (very good) across all themed areas.

4.13 As a provider, Argyll and Bute Council aspires to provide very good and excellent services across all quality themes in line with our Care Inspectorate inspections. The majority of our Learning Disability Day Services are attaining a minimum of 4’s (good) which although acceptable should be viewed as a baseline for improvement. Those services still to attain that level are subject to focussed improvement activity and we will seek to request another Care Inspection when the Action and Improvement plan have been embedded into the service.

4.14 In ensuring that our services maintain and retain their positive grades it has been necessary that a systematic approach has been developed which ensures that the services are continuously and routinely revisiting and updating their self-assessments and working alongside the Service Manager (Resources) through their regular meetings. Monthly reporting mechanisms have also greatly assisted the review and development of the services and the continuation of regular and mandatory attendance at Unit Managers have allowed for mutual sharing, learning and improvement across all internally operated services.

5.0 FUTURE AND ONGOING WORK

5.1 Meetings have been held and are currently ongoing between the Day Service Management teams and their aligned Area Social Work Teams. There is a need to not only improve relationships but to facilitate the interface and understanding of respective roles and remits. These ongoing meetings are a
pre-requisite to generating increased understanding and should seek to offer direction and establish future service provision and flexibility.

5.2 Development days are planned to be taking place between Health professionals and Social Work working across the Learning Disability field. There is a need with Health and Social Care Integration to increase our understanding of role and remit but to generate improved and more effective working relationships. These two development days are planned to take place in September 2015 over two separate days.

5.3 Strategic Finance is aware that the rates currently being applied across the Day Services are unlikely to be competitive in the SDS market. There is recognition that our internally operated services have significant financial overheads which the third sector providers do not have. Work is ongoing to establish new rates across all Internal Day Services. In doing so we require to implement a rate for our services which is competitive giving weight of their considerable overheads and additional expenditures. It is also noted that the Third Sector would not be able to provide a building based service at the rates they currently charge. Cognisance has to be given to the demography and communities in which our Day Services operate when considering the balance of building based or community based services.

5.4 Stakeholders Days throughout all the Council Day Services have been established and taken place. They have been beneficial in developing and offering direction to the services based on service user/ carer feedback. The development of co-production across all services will continue to be beneficial in establishing and modernising the services. Stakeholders Days involving all partners and agencies should now be viewed as the norm and be planned to be held on regular and consistent basis throughout the year as they inform, direct and modernise and develop these services. These carefully planned events would not require any external input or intervention and they would be coordinated and planned by each Day Services Management Team.

5.5 The management teams in some Services will benefit from additional training in areas such as Leadership and Management. This training will also focus on developing understanding of individual service budgets, budget control and management and developing and growing the relationships with the Strategic Finance team. Overall control of staffing allocations and posts needs to have input from the unit managers and cannot be decided remotely otherwise the units are not being staffed efficiently. Learning Disability Day Services have a mixture of one to one; shared and group supports and this is a challenge and requires detailed staff resource planning.

5.6 The Service will also review the charging policy and how it applies to the budgets of learning disability services and the application of the criteria for applying waivers to ensure parity or uniformity and develop proposals for a consistent Transport Policy in place across all of Argyll and Bute.

5.7 The Service Manager for Registered Services is currently involved in working in partnership with the Commissioning Team to evaluate Enable, who are externally commissioned Day Service for Helensburgh and Lomond.
consultation with the Commissioning Team, it is necessary to look at all providers and to ascertain whether they are providing best value to the council. The Council is aware in some areas of Argyll and Bute Council there exists significant staffing and resourcing issues for some providers. Significant work is required in our more rural areas to develop and grow the health and social care workforce in partnership with our local colleges and providers. There is a need to ensure that all internal and external providers are developing and fostering greater understanding and working more cooperatively together. Recently providers meetings were initiated in all areas of the council in order that shared practice and cooperation are at the forefront of our practice going forward and all providers continue to meet the needs and expectations of service users.

5.8  At the present time a scoping exercise has been requested from all operational teams with a view to identifying the number of service users currently in out of authority placements, those in internal placements or at home but whose arrangements are at risk of breaking down. This will help identify known individuals who may require additional or new resourcing/packages over the next 1, 3 and 5 years. This exercise will hopefully provide the health and social care partnership with data and information which will inform and offer direction with regards future provision. An initial report should be available in the autumn of 2015. This will allow the partnership to project expenditure and look towards potential efficiency savings in the future.

5.9  Training - The Unit Managers, across Learning Disabilities and Older People, recently compiled a comprehensive list of training which was felt to be of value and necessary to the development of the services. Within Learning Disability Services the initial priority training will be on Risk Assessment which can be internally sourced. The other significant training and knowledge gap within the staff teams is on the specialist area of Autism. Scottish Autism, who are active throughout Argyll and Bute Council, have been asked to provide costings to provide training around Autism and to support the development of Autistic Champions in each service /area. They would develop and harness this group’s skills and knowledge and support and improve how we engage more successfully with our service users on the Autistic Spectrum. This partnership would additionally provide evidence of our commitment towards the National Autistic Strategy and develop a strong and skilled workforce able to meet the needs of those affected by ASD.

5.10  Future Efficiencies - Recent discussions have taken place between Learning Disability and Older Peoples colleagues with regards the challenges and possible solutions driven by the future need for service efficiencies. This was a positive and energising process and although only in its infancy and start of a process it requires to be rolled out to all areas to ascertain how the various services can make savings and work differently, more cooperatively and still maintain high levels of positive outcomes and interventions for our service users across different client groups.

6.0  CONCLUSIONS

6.1  The Learning Disability services continue to demonstrate significant improvement in their respective grading’s and feedback from the Care Inspectorate has on the whole been positive and reflects that the services are
on the right path. The standardisation process has clearly allowed us to demonstrate that we now have services which are person centred and utilising an outcome based approach.

6.2 The daycare service will work to improve structures and opportunity for meeting with Area Team Social Work colleagues in order that the support they offer continues to develop, grow and diversify away from providing outputs and delivering customised, individual commissioned services which are person centred and outcome driven.

6.3 Recent developments and improvements within Day Services have been focused on improved grading which has been an intensive, but necessary, piece of work. It is envisaged that with a better understanding of outcome driven intervention and supports the Learning Disability Services can develop and grow to meet the needs, hopes and aspirations of those we support.

7.0 IMPLICATIONS

7.1 Policy

None.

7.2 Financial

None.

7.3 Personnel

None

7.4 Equal opportunities

The improvements outlined in this paper support the council’s policy on Equalities.

7.5 Risk

Positive inspection gradings support the council’s management of reputational risk.

7.6 Customer Service

More person centred approaches to support services improve outcomes for service users.

Cleland Sneddon
Executive Director of Community Services

Cllr Mary Jean Devon
Policy Lead - Health and Social Care Integration

29 July 2015

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