

HAMPSHIRE COUNTY COUNCIL

Report

Committee/Panel:	Children and Families Advisory Panel
Date:	13 October 2020
Title:	Children & Families Occupational Therapy Update
Report From:	Director of Children's Services

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Purpose of this Report

1. The purpose of this report is to inform Members of the current position with the Childrens and families Occupational Therapy Service (CFOTS) in terms of staffing, finance and performance, and to inform of plans for the development of the service for 2020/2021.

Recommendation

2. That the Children and Families Advisory Panel note the contents of the update report.

Executive Summary

3. Between January 2019 and March 2020, staffing pressures in the service were a significant issue within the team due to vacant posts, the maternity leave of two staff members and difficulties with recruitment and retention of staff. Increased referrals into the service led to waiting times increasing to approximately 24 months by March 2020. Due to many families awaiting a service, and due to staffing vacancies, there was an underspend in both the equipment and staffing budgets in 2019/20.

Following a LEAN review (this is a method which creates an efficient process flow by eliminating non-value adding activities) led by the transformation practice, the introduction of dedicated administrative staff and recruitment of temporary support staff, together with a reduction in referrals during the lockdown period there has been a positive impact upon case work with administrative staff and OT assistants being better able to support qualified OTs and thereby increasing throughput. The waiting time for allocation of

cases to staff members has decreased during the pandemic to 4 months as at September 2020. Work is ongoing to formulate a strategy for the completion of ongoing and future home assessment visits, most of which were carried out virtually during the lockdown period (though more face to face work is being undertaken now).

Contextual information

- Children and Families Occupational Therapy Service (CFOTS) makes a valuable and effective contribution to Children's Services priorities by maximising independence, ensuring safe care and appropriate housing for disabled children living with their families. OT intervention supports carers and helps maintain family situations and care packages by supporting informal and paid carers (including foster carers) with issues such as safe moving and handling and creating an environment that meets families' needs. Sensory services were transferred to CFOTS in 2012; this includes children with visual or hearing impairments. There is an increase in request for sensory processing profiles to support families.

Finance

5. Quarter 4 position for 2019/2020.

H2978 - Joint Equipment Store	Budget	Actual YTD	Year End Variance
Contribution to Adult Services	£155,000	£154,576	-£424
Income from Health	-£77,000	-£77,288	-£288
Aids & Equipment	£110,000	£62,535	-£47,465
H2978 Total	£188,000	£139,823	-£48,177

Capital expenditure	£250,000	£137,802	-£112,198
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H9079 - Equipment & Adaptations	Budget	Actual YTD	Year End Variance
Aids & Equipment	£56,000	-£36,680	-£92,680
H9079 Total	£56,000	-£36,680	-£92,680

H9341 - CWD - OT Service - Staffing	Budget	Actual YTD	Year End Variance
Total Employee Costs	£409,000	£367,423	-£41,577
Transport Related Expenditure	£16,000	£15,674	-£326

H9341 Total	£425,000	£383,097	-£41,903
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6. Though underspent for 19/20, the staffing budget is forecast to be overspent for 20/21 given additional staff (assistants) across the County which are not funded (though the new x1 FTE admin post is funded). Recruitment is underway for a full time OT to cover the Basingstoke and Andover area. The service is down by 1fte who is on maternity leave.
7. Spend on Aids and Adaptation and Capital Expenditure are both underspent for 19/20 due to reduced staffing capacity and inability to keep up with the referral rate. With the recent increased staffing capacity, spend should increase accordingly.
8. Equipment spend remains lower in 2019/2020, due to ongoing staffing shortages and the requirement for Health funded items to be aligned with Adults Health and Care. Education (SEN) funding remains an issue with finance sections within Education and Hampshire Equipment Service stating they are insufficiently funded. (see Section 14 for more detail)

Performance

9. Covid-19 together with the recently increased staffing capacity has created an unexpected impact on waiting times and efficiencies. The commencement of Virtual Visits and working has enabled staff to work more flexibly across all areas and has enabled the service to cover for the vacancy in the north of the County. There are currently reduced referrals for the service and consequently therapists have concentrated on the waiting list. However, it was expected there would be a “surge” in referrals when restrictions are lifted, and we are starting to see this now. Other efficiencies are evident now that OT time is focused on case work following the introduction of OT admin who are now sitting within CFOTS and with the agreement for temporary OT Assistants, started March / April 2020. This has enabled qualified OTs to move away from admin and unqualified duties. The waiting time has reduced from 24 to 4 months during the period of the pandemic. District Council colleagues are either furloughed or have been redeployed to cope with other demands of their service and this has enabled CFOTS workers to focus on assessments and increase the referrals to District Councils, (as opposed to conducting joint work with those staff. This will have to be resumed as business returns to ‘normal’.)
10. CFOTS has worked on a LEAN process, the focus of which was on throughput of the waiting list and value-added changes to reduce waiting list times for families, largely by removing inefficiencies and streamlining all CFOTS processes. The LEAN review identified a number of areas to improve throughput of OT assessments and focus on non-OT tasks by others. OT assistants (OTAs) have been recruited temporarily to cover OT vacancies -

the timeline on OTAs being fully operational in all four areas and is expected August 2020, considering start dates of all staff and training. There has already been a positive impact from initial findings, with OT specific Admin and OT assistants arranging pre-assessment information with a view to completing some OT duty tasks with OT oversight. The OTA posts are temporary for a 12 month period. Consideration will be given towards the end of the 12mth period as to whether OTA posts should be retained on a permanent basis, given the continued difficulty of recruiting qualified OTs. This would potentially reduce the risk of a return to high waiting times for assessment and intervention.

11. Informal discussion between CFOTs and Adult and Health colleagues indicates some of the potential issues for recruitment and retention:
- There is a nationally recognised shortage of OT workers.
 - It is difficult to recruit in North Hampshire due to boundaries with other counties (Surrey and Berkshire in particular pay more)
 - Health and Adult services are progressing with the apprenticeship scheme to 'home grow' therapists. The first course intake will be in September 2020 and Childrens Services aim to be part of the apprenticeship scheme to help to recruit more OTs.

Consultation and Equalities

12. Not applicable.

Other Key Issues

13. Hampshire Equipment Store (HES)

There were delays in the provision of equipment due to Covid-19 pressures. The priority during this period was hospital discharges and the prevention of hospital admission. However, equipment required for children at risk within their own homes, and those requiring support for hospital discharge, was prioritised. The timeliness of provision of equipment has not only returned to normal, but has improved due to some recent process changes.

The equipment service running costs are jointly funded between Health and Children's Services (C&F branch) at £78k each. The SEN service does not contribute to the running costs, but they do draw on HES for new equipment that cannot be borrowed from existing stock. This would be paid for (on a spot-purchase basis) from different strands within SEN (mainstream physical disabilities, early years, and *some* special educational needs schools).

The equipment service provides maintenance, storage, delivery, and collection/cleaning on all products for children aged 0-18. This includes meeting needs within education (mainstream and special schools) and children's equipment within children's own homes. HES have fed back that the funding

made available is insufficient for the service provided, despite two increases in recent years. Feedback from Health OTs (or private assessors commissioned by parents) assessing children's education equipment needs indicates that the criteria and how they are applied locally are too complex, and that children are not necessarily being provided with the equipment they have been assessed as needing to support their education. This has led to HES asking for commissioners to consider alternative models of working, including pooling of budgets (Children's Social Care, Education, and Health). This is an area that needs further work between SEN and C&F branches in terms of being more joined up.

Childrens Services and Commissioners within health remain outside of the Hampshire Equipment Stores joint contractual agreement (S75) between Adult social care and Health Commissioners. The HES funding issues will be taken forward by the Joint Commissioning Group, and the considerations about better linking with SEN / Education is being taken forward by a working group to inform the JCG.

14. Local council pilot and Better Care Fund

There remains disparity across HCC as to how the District Councils use the Better Care Fund. Councils and Housing Associations have used BCF or Asset management to fund Housing OT workers, but it remains unavailable to Childrens services, stating the cases fall outside of their remit, and that social care cases are too complex and time consuming for them to manage.

In regard to Disabled Facilities Grants and HCC top-ups, due to a recent court ruling there is a possibility that DFG top-ups may be subject to review.

15. Working with Health

OTs have regularly commented that access to health records in a timely way would increase throughput and efficiencies. CFOTS now have full access to the Care and Health Information Exchange (CHIE.) This has provided verification of medical situations / diagnoses in a timely manner. This App has been shared with DCT TMs who also find awaiting health records an issue.

Joint working with health has improved following meeting with Solent Therapy Services. Solent Health are not commissioned to assess children without physical disabilities or if they have a need for bed provision which is linked to behavioural needs alone. This falls to CFOTS for assessment and equipment provision pathway includes input from either the sleep clinic or sleep service to ensure all behavioural techniques have been trialled and a highly specialised bed provision is the only solution for a child. CFOTS have not been able to directly refer to the sleep service, but do offer home visits, analyse sleep diaries, and provide sleep programmes for families. However, it has been agreed that from now on, OTs will be able to refer on to the sleep service when DCT are not involved.

16. Learning & Development

CFOTS were working towards taking on students, however all placement discussion with colleagues and WFD conversations linked to OT apprenticeships have stopped at this current time. Agreement has been given to pursue OT apprentice students in the first instance working with colleagues in adult services.

Conclusions

17. The service has continued to be affected by staffing issues, the wait for children to be allocated a therapist has improved during the pandemic and there is a need to think of the “new normal” and to continue reducing waiting times. The Children and Families Management Team and the Departmental Management Team have now endorsed the continued use of OT assistants for the remainder of this financial year whilst the current OT establishment is understaffed.
18. There continue to be concerns about recruitment and retention of staff, exacerbated by the lack of therapists within the UK. Meanwhile the Children and Families Management Team and the Departmental Management Team have endorsed the service’s intention to proceed, together with Workforce Development , on developing an apprenticeship route and confirmed that apprenticeship placement can be offered within the service to support this approach.
19. That members note the plan for work to be undertaken by the Special Educational Needs (SEN) service and the Children and Families branch to review the arrangements for accessing equipment, and the funding levels.

REQUIRED CORPORATE AND LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	yes/no
People in Hampshire live safe, healthy and independent lives:	yes/no
People in Hampshire enjoy a rich and diverse environment:	yes/no
People in Hampshire enjoy being part of strong, inclusive communities:	yes/no
OR	
<p>This proposal does not link to the Strategic Plan but, nevertheless, requires a decision because:</p> <p><i>NB: Only complete this section if you have not completed any of the Strategic Plan tick boxes above. Whichever section is not applicable, please delete.</i></p>	

NB: If the 'Other significant links' section below is not applicable, please delete it.

Other Significant Links

Links to previous Member decisions:	
<u>Title</u>	<u>Date</u>
Direct links to specific legislation or Government Directives	
<u>Title</u>	<u>Date</u>

Section 100 D - Local Government Act 1972 - background documents	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

EQUALITIES IMPACT ASSESSMENT:

1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

2. Equalities Impact Assessment:

See guidance at <http://intranet.hants.gov.uk/equality/equality-assessments.htm>

Insert in full your **Equality Statement** which will either state:

- (a) why you consider that the project/proposal will have a low or no impact on groups with protected characteristics or
- (b) will give details of the identified impacts and potential mitigating actions