# Nottingham City Health and Wellbeing Board Commissioning Sub-Committee 26 July 2023

Report Title:	Occupational Therapy and Adaptations business case				
Lead Officer(s) / Board Member(s):	Richard Groves, Head of Access and Prevention				
Report author and contact	Richard Groves, Head of Access and Prevention				
details:	Richard.groves@nottinghamcity.gov.uk				
Other colleagues who have provided input:					
Subject to call-in: Yes	⊠ No				
Key Decision: Yes	⊠ No				
Criteria for a Key Decision:  (a) ☐ Expenditure ☐ Income ☐ Savings of £750,000 or more, taking account of the overall impact of the decision and/or					
City  Yes No	nunities living or working in two or more wards in the				
Type of expenditure:					
Total value of the decision:	£449,895.00				
Executive Summary:					
additional posts in Occupationa	cilities grant (DFG) to secure funding of £449,895 to create all Therapy, equivalent to the current proportion of work cupational Therapists supporting use of the DFG.				
This decision aims to establish a posts within Occupational Therap	a case to increase the number of full time equivalent (FTE) by for the creation of:				
<ul> <li>1 Principal Occupational 7</li> <li>1 Team Manager.</li> <li>4 Occupational Therapists</li> <li>3.5 Occupational Therapy</li> </ul>	S.				
Citizen benefits  • People will spend less tim	e waiting for preventative equipment.				

People are supported to improve their health and wellbeing in the short term, and

- plan for maintaining these improvements in the long term
- People live in homes that meet their needs, with access to equipment for managing their day to day activities more independently.
- People are less reliant on formal social care services, with the least restrictive support provided.

#### Community benefits

• People can engage with their local communities for longer, providing and accessing community support where they choose to.

The proposed new structure will create clarity and evenness in the responsibilities of Managers as well as providing an opportunity to develop multi agency vision and strategy through the creation of the Principal Occupational Therapist as a joint opportunity with Nottingham City Care. The creation of a Principle OT to work alongside the Principal Social Workers, and across community health services as well as the local authority, will also create practice leadership capacity that will enable more focus on joint working, contributing towards the priorities agreed by the Place Based Partnership.

In Nov 22 the waiting list for Adults Occupational Therapy stood at 690 cases with 555 waiting over 28 days and non-urgent referrals waiting up to 6 months for review by an Occupational Therapist.

In Nov 22 the number of people waiting for adaptations was 367 with the oldest wait being 18 months. Additional resource is required to reduce the waiting list and manage waiting times going forward.

There would continue to be reviews of staff capacity, demand, and inflation to ensure best value and most effective use of the DFG with any underspends on staffing being available for adaptations and associated costs. It is unlikely that all posts will be recruited to quickly allowing for interim reviews of the approach. The service will also be able to utilise vacancies across Adult Social Care should for example the need for OT's directly working on DFG/adaptations work reduce; for example, the service is currently commissioning an external supplier of OT's to deliver strengths based reviews.

The Disabled facilities Grant has continued to see underspend each year allowing for the potential to capitalise the grant to reduce waiting lists.

Does this report contain any information that is exempt from publication? State 'No' or complete the following
No.

**Recommendation(s):** The Sub-Committee is asked to:

Consider endorsement of the decision to capitalise on the Disabled Facilities Grant to increase Occupational Therapy capacity prior to Portfolio Holder decision.

# The Joint Health and Wellbeing Strategy

Aims and Priorities	How the recommendation(s) contribute to meeting the Aims and Priorities:			
Aim 1: To increase healthy life expectancy in Nottingham through addressing the wider determinants of health and enabling people to make healthy decisions	This proposal supports aims 1 and 2 through timely occupational therapy assessment that supports the ability to reduce, delay and prevent the need for health and social care input.			
<b>Aim 2:</b> To reduce health inequalities by having a proportionately greater focus where change is most needed	The creation of a Principal Occupational Therapist to work across services supports the ambition of the BCF to deliver integrated approaches to health			
Priority 1: Smoking and Tobacco Control	and social care.			
<b>Priority 2:</b> Eating and Moving for Good Health				
Priority 3: Severe Multiple Disadvantage				
Priority 4: Financial Wellbeing	-			

# 1. Reasons for the decision

The waiting list for Occupational Therapy Assessment is currently at 690 adults and 45 children with an average waiting time of 6 months and 555 citizens having had to wait over 28 days for an assessment.

aspiration to give equal value to mental and physical health:

The resource requested is based upon the number of staff/equivalent cost per locum or per assessment it will take to reduce the waiting list and hold it within acceptable tolerances (less than 28 days).

The waiting list is equivalent to 393 citizens waiting for an assessment for Adaptations. The number of unallocated pieces of work continues to be a concern with most referrals into the service waiting over 28 days. This impacts on the experience of citizens as well as the risk of deterioration during the waiting period.

# 2. Other options considered and rejected

#### 1. Do nothing

Capacity continues to outweigh demand with considerable pressure on the existing Management structure to deliver from within limited confines. Occupational Therapy is a key preventative measure and a failure to meet further demand will create additional pressure on Social work team as well as financial burden on the council.

#### 2. Create an Interim capacity to reduce the waiting list

There is every likelihood that once the interim facility came to its natural end then demand for the service would increase. An interim facility only goes as far as to address the short term solution and does not create the foresight needed to safeguard the council's future financial position through preventative action. There is also no guarantee that we would be able to recruit to temporary positions and the continued use of agencies remains questionable in light of the current financial climate. This solution also does not address issues around accountability amongst appropriate numbers of Managers within the team.

#### 3. Risk implications

This decision proposes a temporarily higher than national average fee drawn from the Disabled Facilities Grant, when considering combined fees from OT assessment and adaptions. The Disabled Facilities Grant is a finite resource, increased demand, inflation and future pay awards could limit availability for adaptations without proper management. Continuous review and audit will be required to demonstrate best value and efficiency. The Adults Transformation programme will begin this work, moving to business as usual upon completion of the programme. Biannual audits will be carried out to demonstrate effective and proportionate use of the Disabled Facilities Grant.

# 4. Financial implications

Finance partner (Hayley Mason, Strategic finance Business Partner) has been consulted as part of the business case and will be asked to provide full narrative prior to decision.

The DFG is a recurring capital grant in the Better Care Fund. Unspent fund is carried forward each year. The business case outlines usual spend and subsequent unused grant.

#### 5. Legal implications

Any use of HRA funding, or change in use of HRA funding, needs to be in accordance with any requirements or restrictions imposed by the Council and be an appropriate use of HRA funding.

This Business Case sets out an initial way of using the DFG in order to fund staff working on DFG funded cases. The potential use of funding in this manner is subject to complying with various statutory requirements in the use of DFG funding, primarily the Housing

Grants, Construction and Regeneration Act 1996 and the Housing Renewal Grants (Services and Charges) Order 1996. Unlike the 1996 Order, which specifies that reasonable and necessary fees can be charged for prescribed activities (including technical and structural surveys, planning and design, etc), this proposal is to top-slice the DFG. It is, therefore, not as easy to show that the proposed use of funding is in accordance with the statutory requirements.

Foundations are the National Body for Disabled Facilities Grants and Home Improvement Agencies. They are contracted by the Department of Levelling Up, Housing and Communities to oversee the national network of HIAs. In discussions with Foundations, this proposal has been challenged in how it complies with the requirements imposed on the use of the DFG fund. Foundations have accepted that this proposed use of the DFG is the start of a process that is part of a Transformational Programme. As such, the approach and figures will be subject to ongoing review and analysis, throughout the programme, to ensure that the Council can evidence that this is an appropriate use of DFG funding. Foundations noted that charges made by HIAs, in the main, range from 9% - 15% of the DFG funding. Foundations also accepted, however, that at the start of a Transformational Programme, higher funding is often required and can frequently lead to enhanced efficiencies in due course.

Foundations have also offered to support the Council in the journey it is on in relation to this work, and so will remain an informed critical friend throughout the process.

On the basis of the information in the report, and the discussions with Foundations, this appears to be an appropriate use of DFG funding, subject to the ongoing review and analysis mentioned above, and will support the Council in meeting its statutory obligations.

Legal Services will continue to support the team and this programme.

Anthony Heath, Senior Solicitor, Contracts and Commercial, 2nd March 2023

# 6. Procurement implications

N/A

### 7. Equalities implications

No new EDI is required as the proposal is to increase capacity for existing roles; and/or, interim locum/agency use could be accessed while recruitment is underway as per usual cover arrangements.

# 8. Any further implications

# 9. List of background papers relied upon in writing this report (not including published documents or confidential or exempt information)

N/A

10.	<b>Published documents</b>	referred to	in	this	report

N/A