

**DERBYSHIRE COUNTY COUNCIL**

**CABINET MEMBER**

**14 September 2016**

**Report of the Strategic Director for Adult Care**

**TEMPORARY OCCUPATIONAL THERAPY SERVICE MANAGER POST**

**ADULT SOCIAL CARE**

**1. Purpose of the Report**

To seek approval to recruit a Service Manager (Occupational Therapy) for two years to co-ordinate occupational therapy service development.

**Information and Analysis**

The contribution of occupational therapy is increasingly significant due to increased awareness of the contribution that Occupational Therapists (OT's) can make to personalisation, integration and strength based approaches to responding to need. While the majority of OT's are employed by health in hospital and community settings, Derbyshire employs OT's in both Adult Care and Children's services to enable them to discharge their statutory duties, particularly in relation to equipment, adaptation and safe manual handling practices. To date OT's have not been fully able to deploy their core professional skills and strengths around engaging and supporting individuals to maximise their independence, choice and control and have focussed more on activity relating to Disabled Facilities Grant (DFG), the provision of aids to daily living and manual handling.

Some of the drivers for change in the deployment of OT include:

- The Care Act focus on prevention in the form of advice and information, simple equipment, re-ablement and strength based approaches which promote wellbeing through assisting the person to deploy or make better use of their own existing or potential strengths and resources.
- The potential to lead and shape short term rehabilitative interventions such as re-ablement, ensuring that individuals are supported with bespoke programmes of time limited intervention which will maximise their potential for self-care.

These areas for development have a high level of interdependency and cannot be delivered without the engagement of all the key partners including OT services in hospital, community and adult care settings. Issues such as timely discharge from hospital are dependent on speed of assessment, the quality of the home environment including safe access to facilities, access to equipment and the availability of skilled care resources. In addition, the Better Care Fund (BCF) brings together under one single funding stream pooled health and social care monies that cover our statutory responses for a range of responses including equipment, assistive technology, wheelchairs and housing adaptations via the Disabled Facilities Grant (DFG). The need to develop more creative approaches to using this money combined with the interdependencies between equipment spend and expenditure on domiciliary care make this a key area for OT management oversight.

In addition, while there may be some specialism within the profession, OT's are all trained to the same standards and there is an opportunity to review the demarcation's between the roles of OT's in acute, community and adult care settings so that duplication of activity and poor client/patient experience/outcomes can be reduced.

Current work that impacts on DCC and partner's deployment of OT resources include:

- **Prevention:** The need to provide advice/information and simple equipment including that to enable people to remain in their own home as long as safely possible is a key area for occupational therapists. Recent deployment of OT resource to Call Derbyshire has been positive but a formal structure needs to be developed to review and coordinate this with wider OT response across all partnerships.
- **Safe (single) handling:** This project has been established to deliver safe (single) handling through reviewing care packages where 'double ups' in staff are the norm and by replacing one of two carers with equipment and/or better techniques to improve dignity for the individual, reduce care costs and increase availability of domiciliary care staff.
- **Housing:** OT's are active in advising housing partners on designs of schemes (including extra-care) to ensure they meet lifelong homes standards and require minimum future alteration to cater for the needs of people with significant disabilities. They recommend minor and major adaptations delivered through the DFG in partnership with the design team and district and borough councils.

- **Derbyshire £ (simple adapts or alternative to support Hospital Discharge):**
  - This work is currently on-going with partners from health, the design team, district and borough councils including the Derby City Council to identify current top 5 equipment/adaptation issues that may contribute to delayed transfers of care (DTC), review existing delivery structures, identify gaps and implement appropriate service response.
- **Re-ablement/Short term services:** OT's are increasingly involved in re-ablement services and OT input is required in the review of short term domiciliary services.
- **Integrated approaches with key partners:** All the areas of activity identified above require coordinated responses within DCC and other key stakeholders. The cornerstone of this is establishing shared understanding of roles including unique contributions and where these overlap through opportunities for joint training, placements/rotation and secondments across key partners. Work is being undertaken with Derby University to deliver consistency in professional support training and placement requirements and issues. An OT Core project meeting with Derby City, DCHS and the acute hospital to address such issues across the south of the authority has recently established and there is potential to extend this to the whole county.

#### **OT current management and leadership arrangements:**

- OT's are currently deployed in and managed through the generic Prevention and Personalisation (P and P) teams. There are 2 OT senior practitioners who provide professional support to the disabled children service and their Paediatric OT (POT) colleagues.
- There are 2 qualified OT's in the generic Service Manager group and their ability to contribute to the agenda described above is constrained by their other commitments.
- To effectively co-ordinate this work a dedicated service management post is required. This will strengthen our OT and other responses within DCC and our capacity to engage and work in conjunction with acute health and community health, housing and other key partners.
- It is proposed to create a service manager post (temporary 2 years ring fenced to existing OT qualified service managers) to provide a dedicated OT management input on all the current initiatives.

## **2. Financial Considerations**

It is proposed to appoint one 37 hours grade 13 service manager post for two years. Costs including on-costs will be £47,486 - £51,554 pa. This will be funded from the Budget Cuts Priming Reserve.

## **3. Social Value Considerations**

In considering the award of this contract work will be undertaken during the lifetime of the contract with the successful supplier where appropriate, to capture and deliver social value initiatives.

## **4. Other Considerations**

In preparing this report the relevance of the following factors has been considered: Legal and Human Rights, Human Resources, equality of opportunity, health, environmental, transport, property, crime and disorder considerations.

## **5. Key Decision**

No

## **6. Is it required that the Call-in period be waived in respect of the decisions being proposed within this report?**

No

## **7. Officer's Recommendation**

Approve the recruitment of a Service Manager (Occupational Therapy) for two years to co-ordinate occupational therapy service development.

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