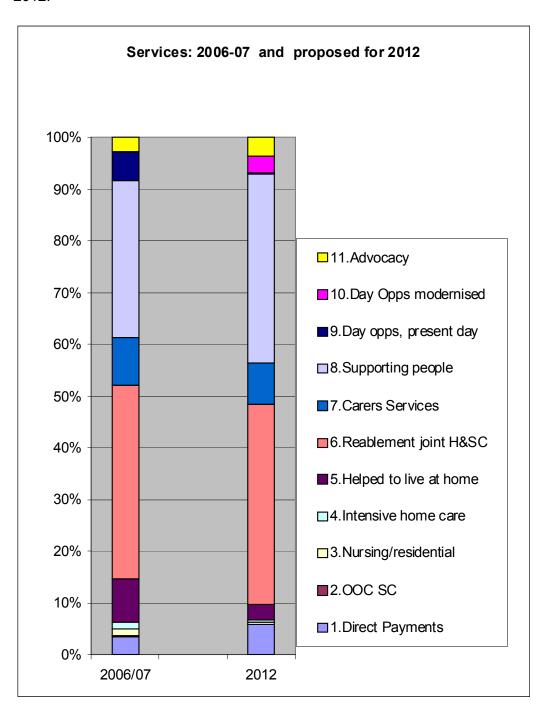
Current and future services for adults with physical disabilities

Overview

The bar chart below compares the current pattern and levels of services for adults with physical disabilities with the proposed future models of service by 2012.



Appendix 8

Details of proposed service levels for proposed higher performing services

Direct payments

Increasing the number of people receiving direct payments or personalised budgets by 28% a year – from 88 currently to 236 in 2011-12. This would match the proportionate level achieved by the highest performing comparator area.

N.B. This number includes those with direct payments or personalised budgets receiving intensive homecare and those with less intensive needs who are helped to live at home. Only those **not** in receipt of direct payments or personalised budgets are included in the numbers in respect of intensive home care and help to live at home shown below.

Out-of-county placements

Through the development of specialist local services, the number of social care out-of-county placements should fall from the current 10 to 3 by March 2010.

Nursing and residential care

The comparator area achieving the lowest use of nursing and residential care secures 1.91 places per 10,000 population, compared with Herefordshire's 3.04. Community-based living options should eliminate the need for residential care, but the current level of nursing home placements will need to continue – resulting in an overall reduction from 32 places to 16.

Intensive home care

The number people receiving intensive home care packages not secured by means of direct payments or personalised budgets should fall from 34 to 18.

Help to live at home

The number of people receiving less intensive support to live at home not secured by means of direct payments or personalised budgets should fall from 216 to 124.

Community-based reablement service

All users should have access to a reablement programme. Taking into account the estimated 5% in need and the national target of a 5% reduction in hospital admissions, there should be an increase from 975 to 1,590 in the number of people assessed and receiving step down/step-up intermediate care.

Services for carers

Based on national good practice and the increased number of assessments of users, services should be provided for 33% more carers – from 245 to 326.

Supporting People

To emulate the best performance in comparator areas, meet cost-effectively in their own homes and communities the non-care needs of people with intensive care needs, and improve preventative capacity and low-level case management, the number of people supported by *Supporting People* funding should rise from 792 to 1,500.

Buildings-based day opportunities

A much-reduced number of people, comprising some existing users with complex needs, should need buildings-based day opportunities – down from 144 to 11.

Community-based day opportunities

Modern and flexible, community-based day opportunities, maximising the use of personalised budgets and invalidity benefit, should be provided for 141 people (there are none at present).

Advocacy

To emulate performance in the high-performing authorities and meet the 5% estimated increase in need, double the number of people should receive personal advocacy - from 72 to 144.