

Business Case Assurance Group: Concept paper template

Title of the scheme	SLT, OT and PT additional capacity to meet demand (D&C)
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<p>Executive Summary <i>(1 page maximum)</i> Include:</p> <ul style="list-style-type: none"> • What is the case for change? • What solution(s) is being proposed? • What is the expected impact? 	<p>Speech and Language Therapy (SLT) and Occupational Therapy & Physiotherapy is a priority for the NEL BCYP (Babies, Children and Young People) programme due to the current pressures.</p> <p>Barking and Dagenham is a deprived borough with high needs. Despite the high needs, Children therapy services have not seen an increased in funding over the last decade to meet the current needs and demand safely. The current demand outstripped the current capacity and therefore impacting on children and young people accessing therapy services in a timely way.</p> <p>The Demand and Capacity Modelling in the therapy services have reviewed the current demand and activities in order to safely meet the needs of our CYP in Barking & Dagenham. This was an intensive piece of work where the total expected activities required, sessions and hours required matched against the staffing requirement to deliver a safe service.</p> <p>Therefore, the proposal is to agree the OBC to fund the gap in funding for both SLT and OT&PT services in order safely meet the increased needs, acuity, complexity and demand/pressure on the service.</p> <p>The impact of the service being underfunded are as follows:</p> <ul style="list-style-type: none"> • Long waiting times for CYP accessing therapy services. • Poor health outcomes for CYP in Barking & Dagenham • B&D not meeting its statutory obligations on SEND and EHCP impacting on SEND inspections including reputational risks to the partnership. • Increased Health Inequalities • Cost of long-term care due to lack of timely early and preventative therapy interventions. • Workforce challenges with recruitment & retention due to high caseloads

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Version: 24 April 2023. Next review due: End July 2023

Sponsoring Chief Officer, Senior Responsible Officer endorsement

Please add details of the sponsoring chief officer, senior responsible officer (SRO) once they have **endorsed** the concept paper, including date of discussion and endorsement. Please note, SRO and CO must have signed this off before it is submitted.

Role	Name	Job title	Email address	Date of endorsement
Chief Officer	Charlotte Pomery	Chief Officer	Charlotte.pomery@nhs.net	
SRO	Sharon Morrow	Director of Partnership Impact and Delivery Barking & Dagenham	Sharon.morrow2@nhs.net	

Other leads

Add details of other leads (within NHS NEL and the wider integrated care system) who have taken part in discussions to develop the concept paper. Please note, these are optional but recommended.

Role	Name	Job title	Email address
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Director of Education	Jane Hargreaves	Commissioning Director Education and SEND Area Board Chair	Jane.hargreaves@lbbd.gov.uk
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(add more rows as required)

Section 1: SCHEME OVERVIEW

Title of the scheme	SLT, OT and PT additional capacity to meet demand (D&C)
A brief overview of the scheme Include: <ul style="list-style-type: none"> the purpose and objectives of the scheme, including benefits to residents how the scheme supports the North East London Health and Care Partnership to reduce health inequalities how it will deliver the objective, plus any interdependencies consideration of any impact on other existing service providers implementation timelines and considerations 	<p>The OBC is to support the findings of the Demand and Capacity modelling that has been completed on Therapies provisions (SLT, OT and PT) to meet the current demand and high needs/acuity and complexity of CYP in Barking and Dagenham.</p> <p>The current population modelling as part of the SEND Needs Assessment in Barking & Dagenham shows a growth in the 0-25 years population of 10.3% between 2021-31. This will result in increased SEND needs requiring timely therapy (SLT, OT&PT) interventions.</p> <p>The total number of pupils in B&D (primary, secondary & special schools combined) on an EHC Plan is projected to rise from 1,041 in 2018, to 1,844 in 2025 and then to 3,015 by the year 2035. Furthermore, based on this model, the total number of pupils on SEN support over the same period is also predicted to rise from 4,917 in 2018 to 5,443 in 2025 and again to 6,255 by 2035. The number of B&D pupils on EHC Plans or SEN support is projected to rise over the period in question. The increase for EHC Plans is 189.6%, which far outstrips the GLA projected increases for school age cohorts within the borough. However, the projected increase in the number of school pupils in the borough accessing SEN support is predicted to increase by 27.2% over the same period.</p> <p>Due to the current challenges and faced with increased demand and needs in the service, a demand and capacity modelling of the service was completed to establish the gap of resources and the resource required to safely meet the needs of the CYP in Barking & Dagenham. The SLT team has a caseload of over 2900 CYP at any one time and a budgeted staffing level of 28.57 WTE (including the therapy lead) to meet the demand. This means that staff has been holding a higher caseload with complex children to deliver SLT interventions including provisions in EHC plans.</p> <p>Similarly, physiotherapy and Occupational therapy hold a caseload of over 1000 CYP combined with a staffing of qualified therapists of 3 physiotherapist and 1 occupational therapist, excluding the therapy lead.</p>

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Due to the high caseload level together with high complexity, needs and acuity of CYP, it has been challenging to meet the increased demand on the service with significant gap in commissioned resources.

The Demand and Capacity Modelling in the therapy services have reviewed the current demand and activities in order to safely meet the needs of our CYP in Barking & Dagenham. This was an intensive piece of work where the total expected activities required, sessions and hours required matched against the staffing requirement to deliver a safe service.

The OBC proposes to increase the capacity within therapy provisions in order to meet the current demand and pressure on the service. The additional therapy resources will ensure that the service is able to deliver a safe service and meet the obligations under EHCP and SEND. CYP will be able to have timely access to therapy provisions and do not have to wait longer to access services. The increased capacity in therapy provisions will ensure:

- All CYP get support that reflects their ambitions and improved their health outcomes.
- All CYP are getting timely and effective support locally, with a focus on early interventions and preventions. This means an enhanced universal offer.
- All CYP have a consistent and excellent experience with timely access to therapy interventions to meet their needs.

Therapies is a priority across NEL and to ensure that BCYP in NEL get the best start in life and the best place to grow up. SEND is a priority across NEL and in Barking & Dagenham. The proposal supports the NEL in tackling health inequalities in B&D where CYP will have timely access to therapy interventions in improving the health outcomes and wellbeing of our children and young adults and reducing the cost of long-term care. The additional funding will also ensure that CYP have got early access and support of appropriate therapeutic interventions and to reduce developmental delays due to speech, etc.

Based on the D&C, there is a gap of 10 WTE in SLT which equates to a shortfall of **£689,490**.

Speech and Language Workforce Requirement				
Staffing	Banding	Budgeted WTE	Requirement based on D&C	GAP/Variances
Integrated Therapy Lead	8a	1	1	0
Pathway Leads/Senior SLT	7	8.37	12.37	-4
SLT	6	9.4	15.4	-6
SLT	5	5	5	0
SLT Assistant	4	4.8	4.8	0
Total		28.57	38.57	-10

For Occupational and Physiotherapy, there is a gap of 4 WTE with a shortfall of **£234,307**.

OT and PT Workforce Requirement				
Staffing	Banding	Budgeted WTE	Requirement based on D&C	GAP/Variances
Therapy Lead	8a	1	1	0
Occupational Therapist	7	1	1	0
Occupational Therapist	6	0	1	-1
Occupational Therapist	5	0	1	-1
Physiotherapists	7	2	2	0
Physiotherapist	6	1	2	-1
Physiotherapist	5	0	1	-1
Rehab Assistants	4	2	2	0
Rehab Assistant	3	1	1	0
Total		8	12	-4

The proposal of additional funding in the Therapy services will complement the existing services which is currently under a block contract to increase its capacity to meet the current demand and pressure on the service. This will also support the health and social care economy where the additional resources will support CYP in education/schools and will enable the development of a comprehensive universal offer where all CYP can benefit. In return this will improve the health outcomes of our CYP and will be aligned to the NEL priorities and the Best Chance Strategy commitment in Barking and Dagenham.

Implementation Timeline

Once the funding has been approved, the new roles will be established, and the service can start the recruitment process straight away. It is critical to start the recruitment process immediately due to the current national challenges with therapies recruitment. However, in B&D, we have been able to successfully recruit into these roles by ensuring that there is a clear career development pathway, ability of staff to work within an integrated health services including Neurodivergent pathways.

North East London

It is expected that with the approved funding and depending on the notice period, staff will start in Q4. This is on the premise that recruitment process starts in October 23. Interviews to take place in Nov-Dec.

Strategic Fit

Mark an X against the following national and local system priorities that this concept paper supports which you will be required to expand on in section 2 below:

National:

- | | |
|--|---|
| • improving outcomes in population health and healthcare; | X |
| • tackling inequalities in outcomes, experience and access; | X |
| • enhancing productivity and value for money; and | X |
| • helping the NHS to support broader social and economic development | X |

North East London:

- | | |
|---|---|
| • To work with and for all the people of north east London to create meaningful improvements in health, wellbeing and equity; | X |
| • Children and young people – to make NEL the best place to grow up; | X |
| • Mental health – to improve the mental health and well-being of the people of NEL | |
| • Employment and workforce – to create meaningful work opportunities for people in NEL | |
| • Long-term conditions – to support everyone living with a long-term condition in NEL to live a longer, healthier life | |

Other

Section 2: SCHEME INFORMATION

The information entered below should be concise – one to three sentences per point is sufficient. The aim is to support the Business Case Assurance Group to conclude that the concept should be taken forward for development into a full business case.

Strategic

Please summarise:

- the rationale for this concept and how it supports NHS NEL to deliver its priorities and strategic objectives (this should underpin the strategic fit indicated above)

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- the health, wellbeing, and equity benefits expected as a result of this concept quality and equality impact assessments undertaken (see appendix A – EIA screening tool)
- discussions with partner organisations and other stakeholders in the development of the concept, and feedback received
- if the proposal is not NEL-wide, the reasons for this
- how this concept supports NHS NEL to meet its green plan
- any impact on other existing service providers
- risks or issues if this concept was not to progress

The proposal fits with the strategic direction of the NEL priorities. The proposal will ensure that CYP are having timely access to therapy provision in Barking and Dagenham without long wait. It will also improve the health outcomes of our younger population and tackling health inequalities. It fits within the Core20 plus 5 agenda in improving the health of BCYP. The proposal is also aligned with the Barking and Dagenham Best Chance Strategy and the NEL BCYP and NHSE priority area.

The proposal has been discussed with the Best Chance Delivery Group membership, The SEND Area Delivery Group, the Director of Education, NELFT, the ICB and the DCO. There is an acknowledgement of historic gap in therapy provisions in B&D where commissioned resources did not meet service demand and current pressures. Covid-19 has made these challenges and pressures more apparent where we are seeing an increased number of children with speech delays and therefore impacting on their development.

There is no impact on existing service providers. The proposal will instead increase the capacity of the current health offer which will benefit the CYP in Barking & Dagenham and the Placed Based Partnership.

By providing additional staffing resources this will ensure that NEL ICB in B&D will:

- improve outcomes for CYP with complex needs by ensuring that they receiving timely assessments/reassessments.
- Tackle inequalities in outcomes, experience and access, through working with the local partners NELFT/LBBD/NELICS will continue to explore any inequalities in experience and waiting times and aim to work with key partners.

There are several critical risks if the proposal is not progressed. They are:

- Increased wait time and CYP not accessing timely support.
- Not meeting statutory obligations under SEND and increased Tribunal cases.
- Not meeting EHCP provisions and delays
- Increased backlog of cases including inappropriate referral for ASD diagnostic, therefore impacting on other part of the health system
- Increased complaints and reputational risks
- Poor Health Outcomes for our BCYP, increased Health Inequalities and increased cost of long term care

Economic

Please summarise:

- how this concept offers optimum value for money, which might include financial return on investment or qualitative benefits
- the social and economic benefits to the wider ICS (for example, relating to community development, environment, employment)
- any other options considered to meet the need to which this concept responds and why they have been discounted

The proposal is economically viable as it will complement the current service and provision in order to bridge the gap. The ask is for additional clinical capacity in the current service to meet the current demand and pressures in the service. By investing and bridging the current gap, this will ensure that CYP are accessing timely therapy provisions and reducing avoidable developmental delays which will otherwise have long term health implications. Therefore, investing in the therapy services where there will be enough capacity in the system will ensure that the service can have a comprehensive universal offer as well as Targeted and Specialist provisions and by doing this, it will reduce the cost of long-term care.

Commercial (Contracts)

Please summarise:

- where relevant, if there are existing suppliers (including NHS Providers) of services within NEL that can deliver this concept
- where relevant, the procurement route being considered (if known at this stage)
- where relevant, current contracts affected by this concept

NELFT is the current provider of SLT, OT and PT in Barking and Dagenham. The service is commissioned under a Block Contract. The D&C modelling has been completed and the proposal is to bridge the resource gap in the existing service in order to meet the current pressures, acuity, complexity and demand on the service.

There is no requirement for a procurement process.

Financial

Please summarise:

- the estimated financial investment required (including whether recurrent or non-recurrent, duration, and any funding stream identified at this stage)
- any estimated contributions from system partners, either financial or in-kind
- any workforce changes or requirements expected from this concept

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- any estimated direct and indirect system financial impacts expected from this concept
- any other financial impact expected from this concept at this stage

The table below illustrates the financial investment required on a recurrent basis to meet the current demand based on the Demand and Capacity modelling. The local data and population modelling show the growth and the needs of the population in B&D and higher support for CYP with SEN and EHCPs.

Based on the D&C, there is a gap of 10 WTE in SLT which equates to a shortfall of **£689,490**.

SLT Costing for 10 WTE			
Band	Post	WTE	Total Annual Cost
7	0	4.00	303,733
6	0	6.00	385,757
Total		10.00	689,490

The additional funding will increase the staffing of SLT with a caseload of approx. 3000 CYP from 28.57 WTE to 38.57 WTE.

For Occupational and Physiotherapy, there is a gap of 4 WTE with a shortfall of **£234,307**.

OT and PT Costing for 4 WTE			
Band	Post	WTE	Total Annual Cost
6	0	2.00	128,586
5	0	2.00	105,721
Total		4.00	234,307

The current qualified staffing in OT and PT do not represent the number per capita CYP in B&D needing OT and PT support. The team consists of only 1 qualified OT and 3 qualified PT for the whole cohort of CYP requiring OT and PT interventions including MSK provisions in Barking & Dagenham. The current caseloads of approx. 1000 CYP. The proposal is to increase the clinical capacity with 2 additional qualified OT and PT respectively in order to meet the current demand on the service.

The total shortfall in the commissioned capacity across SLT, OT and PT (£689,490 + £234,307) is **£923,797**

Management

Please summarise:

- how residents will be involved in the further development of the concept
- the timeline for this concept (subject to the approval of a full business case) going live

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- expected KPIs and key outcomes for this concept once implemented, as the basis for measuring success

Patients experience and engagement is at the forefront in further developing and enhancing the service, provisions and offers. The service will lead on co-producing and co-designing the care pathways and offers with our patients, CYP and patient representatives. There is already engagement within the service with the patient experience team and young carers.

We are estimating for recruitment to start in Oct 23 subject to approval and for start to start coming into posts in Q4 and Q1 (24/25). This will be subject to recruitment and onboarding of staff depending on notice period, etc.

The key expected KPIs for the service are:

1. Waiting times and Length of Time for CYP to be seen- RTT targets and categorisation of P1, P2 & P3
2. Number of CYP accessing universal offer and not requiring Targeted and specialist support (Early Intervention & Prevention)
3. Education workshops
4. Patient Experience and CYP meeting the goal attainment as per the therapy plan
5. Friend and Family Test (FFTs)

If you have identified any Conflicts of interest in relation to this concept paper, please list below, including mitigations:

Name and role	Conflicts	Mitigating actions
N/A	N/A	N/A

Document version control (for use by SRO)

Add rows as required	Version #	Status	Date	Notes
The status for the final entry should read: 'Submission for review and endorsement'	V1.2	In draft	19.09.23	
	V1.3	Draft Review	20.09.23	

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Business Case Assurance Group (BCAG) outcome

Date of meeting	Outcome and notes