

## QUARTERLY SERVICE REPORT

# ADULT SOCIAL CARE, HEALTH & HOUSING

Q1 2018 - 19 April - June 2018

**Executive Member:** 

Councillor Dale Birch

**Director:** 

Gill Vickers

15<sup>th</sup> August 2018 V6

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## Key

#### Actions

G	Action is on schedule	В	Action has been completed
A	Action may fall behind schedule	NA	Action is no longer applicable
R	Action is behind schedule	-	Not yet updated

#### **Performance indicators**

G	On, above or within 5% of target
A	Between 5% and 10% of target
R	More than 10% from target

#### Section 1: Where we are now

#### Director's overview

During this quarter we have continued to see further reductions in the number of people needing long-term care and have delivered a £356k contribution towards our full year savings target. However, we have also had a stark reminder of how sensitive care costs are to the combined pressures created from new demand, changes in needs, market conditions and changes in the profile of the numbers of people we are supporting. Following a sustained 7 month run of reducing care costs, we have seen a sudden sharp overall increase in June, resulting in a £478 forecast overspend. A large proportion of the overspend in due to the cost of care packages for just 4 clients. We are looking at options to minimise the risk of any further overspend and to manage this down over subsequent months. However this will become more challenging as we start to feel the effect of seasonal pressures across the health and care system in quarters 2 and 3.

While the situation is worrying, this confirms that our transformation programme is tackling the right things such as: greater investment in early help and prevention services to enable vulnerable people of all ages to remain safe and as independent as possible; developing alternative support options in the local care market and improving the join-up between Council services, partners and across the wider health and care system.

#### Highlights and remedial action

#### **Good performance**

Public Health indicators including the number of community groups worked with by Public Health to develop their support to local residents; the number of people accessing online Public Health and the number of people actively engaged with Public Health social media channels have all exceeded targets and are performing well.

LGA Digital Innovation Programme –Bracknell Forest Council was one of a handful of successful bids to be awarded funding from the LGA Digital Innovation Programme. This is a high profile national programme which is providing seed funding for local authorities to conduct initial research to identify innovative solutions to increase the use of digital technology in adult social care

#### **Areas for improvement**

<u>L030 Number of lifelines installed in the quarter</u> - Forestcare have had an installer vacancy for the past few months following the promotion of one of the installers. We have also mobilised 2 large contracts which our remaining installers have been supporting on. We have now recruited another installer who will work to increase the target overall next quarter

- 4.6.01 Review the model of providing DAAT services and implement any improvement identified We are currently undertaking a review of the group programme working with our service user forum. Any changes will be implemented during quarters 2 & 3.
- 4.6.02 Review the effectiveness of the Breaking Free online element of the DAAT service by monitoring the number of people accessing the service in this way and the outcomes achieved Only 3 cards have been activated so far this year as we ran out of stock and had to wait for new supplies to be sent through.
- <u>7.1.11 Whole life disabilities service design proposal and options produced</u> This has been reprioritised to reflect the dependency on the agreed timescales to design and implement the new People Directorate.

7.1.20 Develop and implement a shared lives scheme - A strategic meeting of the Adult Transformation Team, Commissioning and Operational Leadership for learning disabilities took place to consider the business case for shared lives and plan next steps. The meeting concluded that further consideration is needed before a plan for the service can be effectively planned. Further work on the specification for the scheme is required before the plans for this can be agreed

#### **Audits and Risks**

No audits were identified this quarter.

There were no significant changes to the risk register this quarter.

#### **Budget position**

Revenue Budget

The quarter one forecast for the department overall is an overspend of £0.371 million. The largest area of expenditure is purchased social care and this is currently showing an overspend of £0.478 million. The transformation programme contains a number of initiatives designed to close this gap but the forecast is based on current costs (i.e. future savings are not included until they have been realised).

Provider uplifts for sleep-ins and other community services outside the framework contract are still being negotiated although the risk around this has reduced due to the recent Court of Appeal outcome on 13<sup>th</sup> July 2018 (overturning the court ruling last year that care workers should be paid the national minimum wage for every hour of a sleep-in-shift). Whilst the risk may have reduced an estimate of this cost has been included in the forecast and it remains a risk to the budget position. In addition, two key care home providers have been red-flagged due to safeguarding concerns. This will reduce capacity in the local market and is likely to increase the cost of new placements.

#### Capital Budget

The largest capital budget relates to the loan to Downshire Homes for the purchase of property. It is expected that at least a further 20 properties will be purchased in the financial year.

An initial budget for project costs in relation to the redevelopment of Heathlands into a 64 bed care home is also included in this year's budget. This is a joint scheme with the CCG and if it proceeds this will be a significant scheme with a value of approximately £10 million.

#### Adult social care sickness absence

Work is continuing between HR and ASC to ensure accuracy of sickness absence recording on the new iWorks system which has been implemented in Q2.

## **Section 2: Strategic Themes**



## Value for money

Action	Due Date	Status	Comments
1.2 The cost, quality and delivery me 2019	chanism of	all servi	ces will be reviewed by
1.2.19 Design and implement a People Directorate that brings Adult Social Care, Health & Housing and Children, Young People & Learning services into a single directorate structure (T)	31/03/2019	G	Directorate designate has been appointed to lead the work to align Adult Social Care, Health & Housing and Children, Young People & Learning services into a single directorate structure. Work is in progress to recruit to the new tier 2 assistant director level senior management structure.
1.2.20 Joint commercial development and early help function (T)	31/03/2019	0	Plans are on track to design and implement the joint commercial development and early help function.
1.2.21 Joint commissioning and transformation function (T)	31/03/2019	G	Plans are on track to design and implement the joint commissioning and transformation function. The Assistant Director for Joint Commissioning and Transform has initiated a strategic review of the current commissioning functions as part of the 'analyse' phase of the organisation and service redesign work.
1.7 Spending is within budget			
1.7.22 Adult Social Care 2018-19 transformation savings commitments delivered (T)	31/03/2019	A	The ASCH&H Transformation programme has delivered a £356k (full year equivalent) reduction in long-term provided care costs during the first quarter which is ahead of profile. The risk of planned savings being severely impacted by demand pressures has increased in M3 following the first increase in provided care costs for 7 months. Contingency arrangements are in place to manage down the risk of a continued over- spend.



## People live active & healthy lifestyles

Action	<b>Due Date</b>	Status	Comments
4.3 Comprehensive public health pro			
including smoking cessation, weight		nt and sex	•
4.3.01 Enhance the emotional health and wellbeing of children and young people through the commissioning of online counselling structured sessions in schools and interactive social media projects (E)	31/03/2019	G	The uptake of online counselling continues to grow and the waiting times remain consistently lower than 2 hours.
4.3.06 Continue to develop and deliver the offer of support to resident run community groups with the aim of building community resilience	31/03/2019	G	The number of community groups being supported by Public Health has exceeded targets. The social prescribing service has been launched.
4.3.07 Ensure a range of effective health improvement services are available, including support for weight management, physical activity and a refocused programme aimed at reducing smoking	31/03/2019	G	There are now seven accessible physical activity sessions available each week. Health improvement services are now fully integrated with health social prescribing in order to provide a more holistic service.
4.3.08 Develop a strong range of digital services aimed at supporting healthy and active lives, with a particular emphasis on social media based innovation	31/03/2019	G	Access to the Public Health Portal and Public Health Facebook community is exceeding targets.
4.3.09 Enhance the emotional health and wellbeing of children and young people through the commissioning of online counselling as well as projects aimed at reducing stigma and increasing emotional literacy	31/03/2019	G	As well as the success of online counselling Public Health have delivered a number of mental health focused session in school and with youth organisations.
4.4 Personal choices available to allo	w people to	live at ho	me are increased
4.4.12 Develop personal housing plans for customers who face homelessness	31/04/2018	В	This was completed as part of the Homeless Reduction Act 2017 that came into force on 3rd April 2018.
4.4.13 Provide capital funding to the Holly House scheme to secure accommodation for young single homeless people	31/03/2019	G	Funding provision is complete and the refurbishment of the accommodation is well on the way and timelines on target for completion
4.4.14 Increase the accommodation available for people with learning disabilities (E)	31/03/2019	G	Ongoing
4.4.15 Implement new overpayment recovery contract to minimise impact on individual's financial position	31/03/2019	G	Contract awarded for 2 years to Reigate and Banstead

4.4.16 Further developments towards personalised health and care (T)	31/07/2018	has been promandate by Integrated Contents to contents and the company of the CCG health care in scope included evelopments authority led assessor and management the East Bern footprint. The strategic enable people that a personal head irect payments enable people greater choice over how the health care in the contents and the care in the contents and the conte	levelop an perating model continuing function. The les the t of a local trusted d care at function for kshire CCG is will provide a labler to number of lare receiving a lath budget and lent. This will let to have far ce and control leir continuing needs are met.
4.4.17 Develop new housing options for older people	31/03/2019	Care System and partners Housing LIN research into Care for vuln including ad disabilities a people. The review is duwith the ICS Support Man Group during meetings will then taken	nd older first draft of this e to be shared Care & ket Steering g July. Initial th ICS partners e place, considerations nell Forest o take
4.4.18 Develop new housing options for people with learning disabilities	31/03/2019	and partners Housing LIN research into Care. The fir review is dur with the ICS Support Mar Group during meetings wir will then take	n, the council s commissioned to undertake a commissioned to undertake a commissioned to undertake a commission this et a fact of this et to be shared Care & Care

4.6 Integration of council health serv is increased	ices care pa	thways fo	or long term conditions
4.6.01 Review the model of providing DAAT services and implement any improvement identified	31/03/2019	A	We are currently undertaking a review of the group programme working with our service user forum. Any changes will be implemented during quarters 2 & 3.
4.6.02 Review the effectiveness of the Breaking Free online element of the DAAT service by monitoring the number of people accessing the service in this way and the outcomes achieved	31/03/2019	A	Only 3 cards have been activated so far this year. However we ran out of stock and had to wait for new supplies to be sent through. Since the service was commissioned there has been a steady increase in the number of cards activated each year as follows: 2015/16 = 15 2016/17 = 23 2017/18 = 37
4.6.10 Identify suitable venues across Bracknell Forest in community services such as GP surgeries and libraries in order to make substance misuse services more accessible (E)	31/03/2019	A	We are now delivering a substance support group on a monthly basis at a supported accommodation project. We are currently developing a 6 week abstinence based programme which will be delivered from a community venue.
4.6.11 Support the delivery of services which promote independence, reduce delayed transfers of care and develop hospital avoidance schemes	31/03/2019	6	Bracknell has a home first policy which is supported by Discharge to assess beds, Hospital to Home services, and the connections hub, further work will continue through the various Frimley ICS working Groups.
4.6.12 Integrated health and care workforce development plans produced and approved by all partner organisations (STP) (T)	31/03/2019	0	Workforce development plans are in the process of being developed and work continues across Frimley STP footprint to develop health and social care roles fit for the future.
4.6.13 Integrated models of care delivery hubs (STP) (T)  4.7 Accessibility and availability of n	31/03/2019	<b>(3)</b>	A local strategy and operational group has been established locally to drive the delivery of local Integrated care delivery services. This is linked to the enhanced Intermediate care services which will go live in August 2018.

4.7.06 Develop and deliver a new 31/03/2019 The next Network Group G community network to support individuals Meeting will take place at with Mental Health needs gain the Open Learning Centre independence through engaging with on Friday, 6th July 2018 community assets and resources (E) The Project Board is now providing seed funding to the local organisations most accessed by the Network for the benefit of improving what the Network can offer supported individuals and their carers in the community to achieve their recovery goals. Sport in Mind have received £5,000 to guarantee five additional sports sessions a week for one year in Bracknell Forest as of the beginning of the 2018/19 financial year. The main focus of Network's development during Q1 has been around the drafting and approval of the executive summary document detailing the 2nd tranche of Network development. Areas of Network expansion covered in the document include Adult psycho-education sessions. Older Adults maintenance groups for Cognitive Stimulation Therapy (CST), Minor Cognitive Impairment (MCI), Cognitive Behavioural Therapy for Carers (CBT), Individual Placement and Support (IPS) scheme, Network Peer-to-Peer scheme, further integration of the BFCN into the CMHTs and the Bracknell Forest Mental Health Forum. All of these will be co-produced with supported individuals and their carers as well as practitioners from the Bracknell Forest Community Mental Health Teams. All of the activities mentioned above are have an effect in reducing likelihood of supported individuals needing future secondary mental health

intervention and bed-based provision, as seen from the

ICMHT Care Co-ordination			uced waiting list for IHT Care Co-ordination.
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Ind Ref	Short Description	Previous Figure	Current figure	Current Target	Current Status
OF1c2a	Percentage of people using social care who receive direct payments (Quarterly)	44.3%	45.3%	37.8%	G
L278	Percentage of adult social care records in the Adult Social Care IT System that contain the person's NHS number (Quarterly)	98.5%	98.6%	98%	G
L279	The number of young people who are newly engaging with KOOTH (the online counselling service for young people) (cumulative - new plus existing registrations by end of year) (Quarterly)	2,361	2,612	2,150	<b>©</b>
L280	The % of young people who receive a response from KOOTH (the online counselling service for young people) within 2 hours (Quarterly)	100%	100%	100%	G
L309	Number of community groups worked with by Public Health to develop their support to local residents (Quarterly)	77	87	73	G
L310	Number of people accessing online Public Health services via the Public Health portal (Quarterly)	8,234	2,359	800	G
L311	Number of people actively engaged with Public Health social media channels (Quarterly)	2,423	2,542	2,400	G



## A clean, green, growing and sustainable place

Ind Ref	Short Description	Previous Figure	Current figure	Current Target	Current Status
NI181	Time taken in number of days to process Housing Benefit or Council Tax Benefit new claims and change events (Quarterly)	4 days (5.82 days ytd)	7 days	8 days	G
L178	Number of household nights in B&B accommodation (Quarterly)	583	607	754 per quarter	G
L312	Number of families that have been in non self contained accommodation for over 6 weeks at quarter end (Bed & Breakfast) (Quarterly)	0	Not able to report*	0	-
L313	Number of families that have been in non self contained accommodation for over 6 weeks at quarter end (Non Bed & Breakfast) (Quarterly)	11	Not able to report*	14	-

<sup>\*</sup>Due to a change in the IT module (required as change in legislation, Homeless Reduction Act 3<sup>rd</sup> April 2018) that we use to record homeless and temporary accommodation data, we are unable to report this indicator in Q1.



## Strong, safe, supportive and self-reliant communities

Action	<b>Due Date</b>	Status	Comments
6.6 Prevention of harm, reduce crime	and disord	er and ma	ike the town centre safe
6.6.02 Prevent harm to victims, offer support to children and manage perpetrators by holding monthly multiagency meetings to co-ordinate the support and response for repeat and/or standard/medium/high risk cases of Domestic Abuse	31/03/2019	<b>6</b>	These meetings take place each month and referrals are routinely referred in by police.
6.6.03 Work with our partners to respond to problem locations where crime and disorder are causing disruption to residents, businesses and our community while also ensuring that support is offered to residents who are at risk of exploitation	31/03/2019	G	These meetings take place monthly and referrals are received in from all partners who have challenging cases that need a multiagency approach. The team's data analyst also routinely analyses the data to identify any problem locations that need a response.
6.6.07 Ensure that support is offered to residents who are at risk of exploitation	31/03/2019	<b>G</b>	There are a number of multi-agency groups that respond to child victims who are at risk of the different types of exploitation and ensure that the support is matched to the level of risk. There is also a strategic group which covers all exploitation to children that steers the programme of work and ensures that we are using best practice and maximising safeguarding. A new strategic programme of work supporting victims of Modern Slavery and Exploitation has begun and 180 frontline BFC and partner staff were trained in June on how to identify, refer and support victims. Additional training for more staff as well as Councillors is planned. Support to any victims identified will be given by Thames Valley Partnership who have recently been commissioned by the Police and Crime Commissioner. The Strategic Group will ensure that the CSP develops a robust response to modern slavery including

6.6.04 Support regular multi-agency offender management meetings to prioritise intervention with offenders who commit the most crime and cause most harm to the community	31/03/2019	support and disruption.  The IOM multi-agency meeting continues to operate successfully, Coordinated and lead by Laura Wright TVP & Justin Whitlock BFC. Panel meeting are held monthly, leads and practitioners liaise daily to deliver a robust service to this identified prolific cohort, targeting intervention to the 'Seven Pathway' approach to reducing recidivism. These pathways are 1.
		Case Management & Transition 2.Accomadation 3. ETE 4. Health 5. Substance Misuse 6. Families 7. Finance, Benefits & debt.
6.6.05 Lead on Prevent, having strategic oversight of the action plan, co-ordinating referrals to the Channel Panel and supporting workforce training	31/03/2019	Prevent Steering Group meets three time a year and is attended by the Head of Counter Terrorism Policing South East. Channel Panels are scheduled monthly to co-ordinate interventions and safeguarding to any potential referrals. However, if a referral doesn't meet Channel threshold, good practice is employed and a safeguarding review is carried out to identify other existing vulnerabilities and appropriate referrals are made. Work has begun on developing the next Prevent Plan and Strategy (2019 - 2122) for BFC in line with the new Counter Terrorism Bill and Contest Strategy.
6.6.06 Work with the Lexicon, tenants and partners to ensure that the town centre is a safe place to be enjoyed by all	31/03/2019	Monthly meetings take place to address any problem issues in the town centre. These are attended by police, some tenants, BFC and the Lexicon. It is a very pro-active group which has achieved good results. Public order, criminal damage and violence are routinely monitored through the Community Safety Partnership each quarter

Ind Ref	Short Description	Previous Figure	Current figure	Current Target	Current Status
L030	Number of lifelines installed in the quarter (Quarterly)	246	186	230 per quarter	R
L031	Percentage of lifeline calls handled in 60 seconds in the quarter (Quarterly)	97.7%	97.73%	97.5% per quarter	G
L185	Overall crime (Quarterly)	4,969	1,595	Reduction on 2017/18 in line with CSP	-
L316	Forestcare - % of Lifeline demos within 7 days of customer request (Quarterly)	100%	98%	95% per quarter	G

## **Section 3: Operational Priorities**

Action	Due Date	Status	Comments
Adult Social Care Health & Housing			
7.1.10 Use monthly budget monitoring reports to identify and address any emerging overspends promptly	31/03/2019	В	Systems and processes are in place to review the monthly budget monitoring report to identify and track emerging issues and recovery actions.
7.1.11 Whole life disabilities service design proposal and options produced (T)	30/09/2018	A	This has been reprioritised to reflect the dependency on the agreed timescales to design and implement the new People Directorate. A revised timescale for this action needs to be agreed as part of the People Directorate work programme. The scope of the new Learning Disabilities Approaching Adulthood team has been extended to include all customer groups transitioning from Childrens Service to Adults
7.1.12 Implementation of social prescribing operating model (T)	30/09/2018	G	Service now in place.
7.1.13 Working with the Clinical Commissioning Group to further develop an Integrated Care approach (T)	31/03/2019	<b>G</b>	Partnerships are in place to deliver Integrated Decisions Making Services which will eventually support Local integrated Decision Making Hubs. Multi agency meetings take place on a bi monthly basis The Enhanced Intermediate Care Service which is going live in August is based on the principals of integration.
7.1.14 Review and evaluate effectiveness of the care practice quality assurance panels (T)	30/06/2018	G	Senior managers review all care plans to ensure there is oversight and equity of service delivery
7.1.15 Review and evaluate the impact of the conversations approach to care management practice and ensure it is delivering the expected benefits (T)	30/06/2018	0	Audit now completed recommendations have been incorporated into an action plan which will be implemented during the next quarter.
7.1.16 Review and evaluate the new connections support function and	31/05/2018	G	Review and evaluation completed and outcomes

	<u> </u>	1	
community connector role to determine development requirements (T)			will feed into the future developments toward the people directorate.
7.1.17 To reduce delayed transfers of care and hospital admissions, deliver an enhanced intermediate Care Service 7 days per week. (T)	31/03/2019	G	7 day service in place.
7.1.18 Enhanced community intermediate care service model implementation completed (T)	30/09/2018		Go live date agreed 01.08.2018
7.1.19 Develop business case to support redevelopment of Heathlands to provide at least 44 bed space EMI scheme and 20 bed Discharge to Assess (D2A)	30/09/2019	ď	Joint business case for the CCG capital contribution has been produced and submitted to NHSE in June 2018. An Executive decision report is on track to be produced for September 2018 to obtain sign-off to start the next stage of the programme.
7.1.20 Develop and implement a shared lives scheme (T)	31/12/2018		A strategic meeting of the Adult Transformation Team, Commissioning and Operational Leadership for learning disabilities took place to consider the business case for shared lives and plan next steps. The meeting concluded that further consideration is needed before a plan for the service can be effectively planned. This includes an assessment of the feasibility of delivering a service that is able to overcome the challenges that existing external services have had in identifying placements for adults with complex needs.
7.1.21 Development and implementation of plan for the Personal Assistant (PA) market (T)	31/03/2019	<b>©</b>	A project has been initiated to develop the local Personal Assistant (PA) market, in order to offer people in receipt of Direct Payments from the Department, greater choice about how they arrange their own care and support. The existing Personal Assistant market in Bracknell Forest is relatively immature, so over the last quarter, work has been undertaken to

			analyse and understand the local market and to work with existing and potential new organisations to develop a more comprehensive offer for both Directly employed and Self-employed PAs. This work will be continuing over the next quarter. In tandem with this, work is continuing within the department, to ensure that practitioners are cognisant of the support options available in the PA market when developing care plans with individuals. Work is also being undertaken to review the different ways that a managed (Directly employed) PA service could be developed – in house and / or through a commissioned organisation.
7.1.22 Review of the Domiciliary Care Gainshare Model (T)	30/10/2018	G	A narrative review of the Community Based Support framework has taken place in Q1. This has involved meeting with all providers and a number of stakeholders to consider the implementation of the framework and consider opportunities for improvements. A meeting with providers will take place in July to share the findings of this review and plan activity. At the same time a project team has been put in place within the council to review internal processes and lead on making agreed changes.
7.1.23 Develop a new Market Position Statement and work with voluntary sector to identify gaps (T)	31/12/2018		The aim of the Market Position Statement is to signal the council's business intentions and form the basis for discussions between the local authority and the local market (including voluntary and community sector) to respond to the

			changing needs of the local population. The new Market Position Statement is in the process of development with the next steps to include engaging with local providers through a series of workshops. These workshops will aim to full understand the pressures within the market, implications of policy changes, resource pressures, and potentials opportunities available to work collaboratively. Intelligence gathered through this process will be used as a foundation to formulate a document to support future commissioning arrangements.
7.1.24 Strategic partner identified to collaborate on the development of a strategic solution that meets Council's ambition for a digital care and wellbeing marketplace (T)	30/06/2018	B	A strategic partner has been identified that has the capability to meet the Council's requirements. This cannot be progressed at this stage because of dependencies on defining future marketplace requirements to support the personal health budgets. There is also a dependency on strategic priorities to align Childrens and Adults online offer as part of the work programme to create a new People Directorate. The current Bracknell Help Yourself digital platform has seen steady growth in usage with an average of 450 unique hits per week

Ind Ref	Short Description	Previous Figure	Current figure	Current Target	Current Status
L033	The % of customers receiving the correct amount to benefit (Quarterly)	-	96.7%	98%	G

## **Section 4: Staff Sickness**

Section	Total staff	Number of days sickness	Quarter 1 average per employee	2018/19 Projected annual average per employee
DMT	5	17.5	3.50	14.00
Adult Social Care	213	643	3.02	12.08
Commissioning & Resources	28	41	1.46	5.86
Housing	80	108.5	1.36	5.43
Public Health	25	10.5	0.42	1.68
Department Totals (Q1)	351	820.5	2.34	
Totals (18/19)	351	820.5		9.35

Comparator data	All employees, average days sickness absence per employee
Bracknell Forest Council 17/18	7.03 days
Public Sector employers 2017	8.50 days

Source CIPD: Health & Wellbeing Survey May 2018

## **Annex A: Financial information**

ADULT SOCIAL CARE HE	ALTH & HO	DUSING BU	JDGET MC	NITORING	- MAY 201	18	
	Original Cash Budget	Virements &	Current approved cash budget	Spend to date	Department's Projected Outturn	Variance Over / (Under) Spend	Movement This month
	£000	£000	£000	%	£000	£000	£000
Discostore	(220)	57	(200)	213%	(0.4)	175	175
Director Commissioning	(326) 745	(73)	( <mark>269)</mark> 672	15%	(94) 619	(53)	
Adult Social Care							
Purchased Adult Social Care							
Adult Community Team (ACT)	5,060	0	5,060	20%	5,632	572	572
Community Team for Mental Health (CMHT)	1,220	0	1,220	5%	1,130	(90)	
Community Team for Mental Health Older Adults (CMHTOA)	4,916	(25)	4,891	14%	4,721	(170)	•
Community Team for People with Learning Disabilities (CTPLD)	9,786	0	9,786	3%	9,902	116	116
Directly provided Adult Social Care Equipment	110	0	110	72%	2	(447)	(117
Intermediate Care	119 1,264	(269)	119 995	30%	1,007	(117) 12	12
Community Network	181	(209)	182	12%	130	(52)	
Glenfield	290	1	291	17%	278	(13)	
Waymead	730	2	732	15%	716	(16)	•
Breakthrough	166	1	167	13%	143	(24)	
Emergency Duty Service	59	4	63	520%	60	(3)	
Care Management and Operational	1 201	200	1 404	170/	1 401	0	0
ACT CMHT	1,201 767	280 2	1,481 769	17% 15%	1,481 854	0 85	0 85
CMHTOA	594	2	596	20%	825	229	229
CTPLD	1,069	4	1,073	21%	1,070	(3)	
Connections Hub	251	(73)	178	16%	195	17	17
Safeguarding	266	100	366	19%	332	(34)	
Chief Officer budgets	404	0	404	0%	329	(75)	
	28,343	30	28,373	•	28,807	434	434
Early Help & Communities							
Housing Strategy	560	3	563	7%	468	(95)	(95
Housing Options	418	(64)	354	-25%	241	(113)	
Supporting People	559	66	625	15%	618	(7)	
Housing Benefits Administration	415	3	418	-54%	393	(25)	
Housing Benefit Payments	(55)	0	(55)	-2,816%	-63	(8)	
Community Safety	216	1	217	-22%	217	0	0
Drugs and Alcohol Advice Team	0	0	0	0%	0	0	0
Forestcare	18	5	23	227%	96	73	73
	2,131	14	2,145		1,970	(175)	(175
Public Health							
Public Health	3,965	0	3,965	11%	4,007	42	42
Grant Funding	(4,050)	0	(4,050)		(4,050)		0
Business Intelligence	173 88	283 <b>283</b>	456 <b>371</b>	-9%	446 <b>403</b>	(10) 32	(10 32
TOTAL ASCHH	30,981	311	31,292		31,705	413	413
Adjustment for Public Health ring-fence						(42)	
TOTAL ASCHH EXCLUDING PUBLIC HEALTH						371	- -
Memorandum item:							
Devolved Staffing Budget			15,543	15%	15,954	411	411
Non Cash Budgets							
Capital Charges	404	0	404		404	0	0
IAS19 Adjustments	2,304	0	2,304		2,304	0	0
Recharges	2,934	0	2,934		2,934	0	0
	5,642	0	5,642		5,642	0	0

## **Capital Budget**

Cost Centre Description	Budget	Expenditure to Date	Estimated Outturn	Carry forward to	(Under) / Over Spend	Current Status
				2018/19		
	£'000	£'000	£'000	£'000	£'000	
HOUSING						
Help to Buy	240.0	0.0	240.0	0.0	0.0	
BFC My homebuy	166.4	-2.0	166.4	0.0	0.0	
Heathlands	500.0	0.0	500.0	0.0	0.0	
Downshire Homes	9,254.7	343.0	9,254.7	0.0	0.0	One property purchased
Edenfield - Stonewater Housing Development	233.0	0.0	233.0	0.0	0.0	
Holly House	450.0	0.0	450.0	0.0	0.0	
Disabled Facilities Grant	1,510.7	55.2	865.0	645.7	0.0	
TOTAL HOUSING	12,354.8	396.3	11,709.1	645.7	0.0	
Percentages		3.2%	94.8%		0.0%	
ADULT SOCIAL CARE						
Care housing grant	4.5	0.0	0.0	4.5	0.0	
Community capacity grant	451.3	225.3	50.0	401.3	0.0	£45k earmarked for Waterside Park.
ITreplacement	79.6	0.0	0.0	79.6	0.0	To be used for LAS enhancement
TOTAL ADULT SOCIAL CARE	535.4	225.3	50.0	485.4	0.0	
Percentages		42.1%	9.3%		0.0%	
TOTAL CAPITAL PROGRAMME	12,890.2	621.5	11,759.1	1,131.1	0.0	
Percentages		4.8%	91.2%		0.0%	

## Annex B: Annual indicators not reported this quarter

#### **Council Plan indicators**

Ind. Ref.	Short Description					
4. Peo	ple live active and healthy lifestyles					
OF1f	The number of adults with a mental health problem in paid employment a % of adults in contact with secondary mental health services	Q2				
NI155	Affordable Housing supply (Annually)	Q4				