

QUARTERLY SERVICE REPORT

ADULT SOCIAL CARE, HEALTH & HOUSING

Q2 2018 - 19
July - September 2018

Executive Member:
Councillor Dale Birch

Director:
Nikki Edwards






Date completed 07/11/18

Contents




Section 1: Where we are now	3
Section 2: Strategic Themes	7
Value for money	7
People live active & healthy lifestyles	8
A clean, green, growing and sustainable place	14
Strong, safe, supportive and self-reliant communities.....	15
Section 3: Operational Priorities	18
Section 4: Staff Sickness	22
Annex A: Financial information	23
Annex B: Annual indicators not reported this quarter	25

Key

Actions

	Action is on schedule		Action has been completed
	Action may fall behind schedule		Action is no longer applicable
	Action is behind schedule	-	Not yet updated

Performance indicators

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

Section 1: Where we are now

Director's overview

This is my first commentary as Executive Director People. It has been interesting to read and understand performance across the new Directorate although still reported as two separate Directorates.

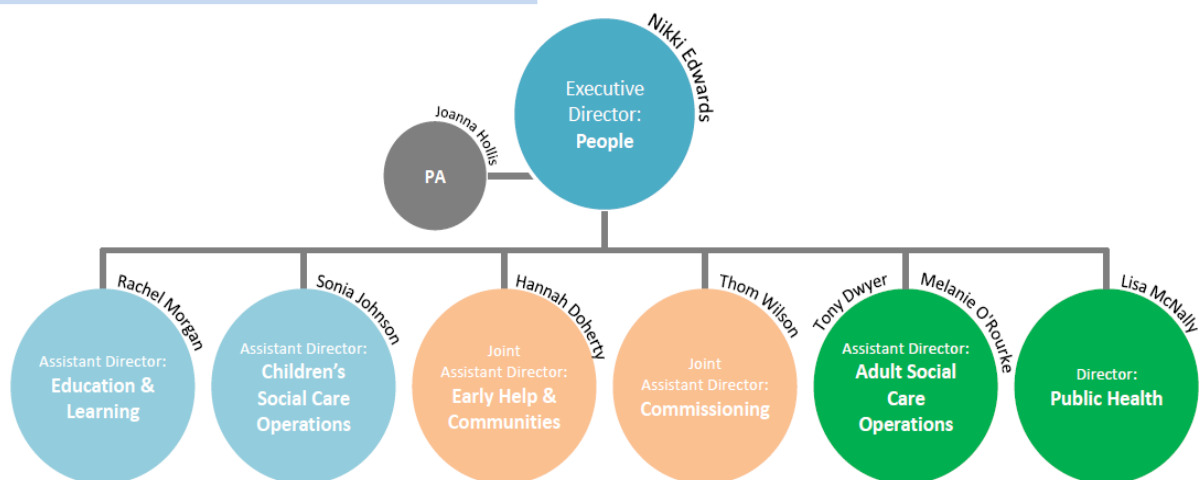
We have aligned the leadership team with three staff stepping up into new roles. I am really pleased that we have been able to secure quality, skills and a local contextual knowledge in doing this.

The structure diagram below highlights Assistant Director (AD) roles for the interim period until permanent roles are appointed to. The adverts will be published shortly. I am really pleased to announce that Sonia Johnson steps up to Interim AD Children's Social Care operations. Hannah Doherty step's up to Interim AD Early Help and Communities. Finally that Melanie O'Rourke and Tony Dwyer step up as a job share into the AD Adults Social care operations role. These colleagues join Lisa McNally, Thom Wilson and Rachel Morgan as the permanent directorate team members.

This is hugely exciting and gives us a real opportunity to align services and create a dynamic new Directorate.

People Directorate Structure

Tier 1 – Tier 3 Structure



Highlights and remedial action

Good performance

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 (similar to 4.3.09) - Uptake and utilisation of Kooth remains good, with excellent feedback. Also working with CCG to ensure the next version of the Local Transformation Plan includes a significant focus on prevention.

4.3.06 Continue to develop and deliver the offer of support to resident run community groups with the aim of building community resilience - The Community Expo event was held in Q2 which brought together many of the resident run groups we are supporting. Very well attended and, on the basis of excellent feedback, another event is planned for the Spring 2019. Our Community Development work is also shortlisted as a finalist in the LGA Digital Innovation Programme.

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 - The #MovingCan physical activity campaign, run in collaboration with the Integrate Care System (ICS), led to a significant increase in visits to our 'Get Active' webpage and increased uptake of our 'Fit for All' community groups (focused on increasing fitness, strength and balance). New groups have been opened to accommodate increased demand.

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 - Uptake of all digital services and portals remains high.

OF1b2A Percentage of people using social care who receive direct payments – figures showing a 1.3% increase on previous quarter and are 5.5% above target.

Areas for improvement

L178 Number of household nights in B&B accommodation - The Homelessness Reduction Act 2017 came into force in April 2018. The fluctuation in numbers is also as a result of the effects of changes arising from the legislation; due to a higher number of approached to the Local Authority since April.

NI181 Time taken in number of days to process Housing Benefit or Council Tax Benefit new claims and change events – figures showing 9 days against target of 8 days; year-to-date position is 8.12 days

1.7.22 Adult Social Care 2018-19 transformation savings commitments delivered - The ASCH&H Transformation programme has delivered in-year savings of £798k in long-term provided care costs at Month 6. Extrapolation of this suggests that in-year savings by the end of the year will be £977k. However, this is offset by in-year pressures of £461k

4.6.01 Review the model of providing DAAT services and implement any improvement identified - The work on reviewing and revising the group programme has been completed. The new programme will commence on 6th November.

7.1.11 Whole life disabilities service design proposal and options produced - 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. This is in line with the evolving People Directorate.

7.1.21 Development and implementation of plan for the Personal Assistant (PA) market - Over the last quarter, Information and Awareness raising sessions have been held between the agency responsible for provision of self-employed PAs and the Adult and Learning Disability Teams. This has highlighted some concerns and limitations on the extent and ability of the current commissioned PA service to meet the needs of the Department in the medium term. As a consequence, over the next period the project is to be re-evaluated, to ascertain whether the assumptions in the original Business case are still relevant.

7.1.23 Develop a new Market Position Statement and work with voluntary sector to identify gaps - Progress has been made, however some milestones' are now behind schedule. The council is continuing to engage with service providers across all sectors as we improve the way that we commission services. For example meetings are taking place as part of a review of the way that the council works with voluntary and community sector organisations, and this will feed into the development of the Market Position Statement.

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 two forecast is a £0.089 million overspend which is an improvement of £0.282 million from the prior quarter. The largest area of expenditure is purchased social care which currently shows an overspend of £0.730 million. This includes inflationary increases given to community care providers in August. The threat of additional costs from the court ruling on sleep-ins and the national minimum wage has receded following a decision by the Court of Appeal, though there is a further appeal by trade unions.

Additional funding of £240 million for winter pressures in social care nationally was recently announced by the Government. At the time of writing we have not heard how much of this funding will be for Bracknell or whether there will be conditions attached to its use. Therefore, this potential funding is not included within the forecast.

The overspend on purchased social care is largely offset by underspends elsewhere. In particular, there is an underspend in Housing Benefits due to the level of overpayments identified, and staff vacancies in Adult Social Care and Housing operations, as well as at senior management level.

There is also currently a forecast underspend on the Public Health Grant of £0.472 million. This underspend is ring-fenced and so does not form part of the forecast outturn.




Capital Budget

The largest capital budget relates to the loan to Downshire Homes for the purchase of property to provide accommodation for homeless families. Eight properties have been purchased this financial year and 16 more are in progress.

Section 2: Strategic Themes










Value for money







Action	Due Date	Status	Comments
1.2 The cost, quality and delivery mechanism of all services will be reviewed by 2019			
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		The People Directorate is now in place with a single Executive Directorate and management team. Recruitment to remaining permanent posts is expected to be in Q3. Further work will focus on alignment and integration of functions to ensure all opportunities of new structure can be realised.
1.2.21 Joint commissioning and transformation function (T)	31/03/2019		Development of the joint commissioning function remains on track. There is currently a Rapid Improvement Team identifying improvements and making changes to commissioning approaches. Consultation on future structures is expected to begin in Q3.
1.7 Spending is within budget			
1.7.22 Adult Social Care 2018-19 transformation savings commitments delivered (T)	31/03/2019		The ASCH&H Transformation programme has delivered in-year savings of £798k in long-term provided care costs at Month 6. Extrapolation of this suggests that in-year savings by the end of the year will be £977k. However, this is offset by in-year pressures of £461k

People live active & healthy lifestyles




Action	Due Date	Status	Comments
4.3 Comprehensive public health programmes aimed at adults and young people, including smoking cessation, weight management and sexual health are in place			
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		Uptake and utilisation of Kooth remains good, with excellent feedback. Also working with CCG to ensure the next version of the Local Transformation Plan includes a significant focus on prevention.
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		The Community Expo event was held in Q2 which brought together many of the resident run groups we are supporting. Very well attended and, on the basis of excellent feedback, another event is planned for the Spring 2019. Our Community Development work is also shortlisted as a finalist in the LGA Digital Innovation Programme.
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		The #MovingCan physical activity campaign, run in collaboration with the Integrated Care System (ICS), led to a significant increase in visits to our 'Get Active' webpage and increased uptake of our 'Fit for All' community groups (focused on increasing fitness, strength and balance). New groups have been opened to accommodate increased demand.
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		Uptake of all digital services and portals remains high.
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		Uptake and utilisation of Kooth remains good, with excellent feedback. Also working with CCG to ensure the next version of the Local Transformation Plan includes a significant focus on prevention.

4.4 Personal choices available to allow people to live at home are increased			
4.4.12 Develop personal housing plans for customers who face homelessness	31/04/2018		All clients who approach us who are Eligible, threatened with homelessness within 56 days (prevention duty)/ are homeless (relief duty) are issued with Personal Housing plans. These are reviewed regularly based on the housing need and the actions arising from them. I carry out a random monthly Audit of this on Abritas and pick 10 clients on the system either under prevention or relief duty and check there is a copy of the personal Housing Plan attached to the file notes. I record these on a simple spreadsheet.
4.4.13 Provide capital funding to the Holly House scheme to secure accommodation for young single homeless people	31/03/2019		Capital funding now provided and good working relationships continue
4.4.14 Increase the accommodation available for people with learning disabilities (E)	31/03/2019		We are working with a registered provider to secure accommodation required.
4.4.15 Implement new overpayment recovery contract to minimise impact on individual's financial position	31/03/2019		Overpayment contract awarded to Reigate & Banstead council for 2 years.
4.4.16 Further developments towards personalised health and care (T)	31/07/2018		Action completed.
4.4.17 Develop new housing options for older people	31/03/2019		A review of Housing & Care opportunities has now been completed and handed over to the Integrated Care & System. Local authority and health representatives have met to discuss recommendations and will be shaping and communicating a plan in Q3.
4.4.18 Develop new housing options for people with learning disabilities	31/03/2019		A review of Housing with Care has now been completed and handed over to the Integrated Care & System. Local authority and health representatives have met to discuss recommendations and will be shaping and communicating a plan in Q3.
4.6 Integration of council health services care pathways for long term conditions is increased			








4.6.01 Review the model of providing DAAT services and implement any improvement identified	31/03/2019		The work on reviewing and revising the group programme has been completed. The new programme will commence on 6th November.
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 total of 13 cards have been activated in quarter 2 which is the highest number in any quarter since the service commenced. 63.6% of the people that activated cards listed alcohol as their main substance of choice, 18.2% drugs and 18.2% reported using drugs and alcohol. 54.5% of the cards were activated by females and 72.7% of the cards were activated by people classing themselves as white British. 80% of the people activating cards had completed treatment and it would be fair to assume that they are using Breaking Free Online as a tool to prevent relapse. 61.9% of the access to the online service was outside of normal operating hours and the busiest day for access was Mondays.
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 new outreach service will commence in Sandhurst during quarter 3. We are still providing an outreach service in Ascot. Our health and wellbeing nurse is providing a weekly drop in at one of then local community churches.
4.6.11 Support the delivery of services which promote independence, reduce delayed transfers of care and develop hospital avoidance schemes	31/03/2019		Discharge to Assess (Home First) in place and the system are looking at how community hospital beds can be utilised as step down beds over the winter period.
4.6.12 Integrated health and care workforce development plans produced and approved by all partner organisations (STP) (T)	31/03/2019		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)	31/03/2019		Enhanced ICS now in place. Action completed.

4.7 Accessibility and availability of mental health services for young people and adults is improved

<p>4.7.06 Develop and deliver a new community network to support individuals with Mental Health needs gain independence through engaging with community assets and resources (E)</p>	<p>31/03/2019</p>		<p>The number of requests for Network support received during Q2 18/19 was 49. (September: 19, August: 13, July: 17). The majority of these came from the Community Mental Health Team (CMHT), Common Point of Entry (CPE) and the Community Mental Health Team for Older Adults. The Network's waitlist currently stands at 6-8 weeks (down from peak of 13 weeks). Currently the aggregate active caseload across the three Network Recovery Facilitation staff is forty nine cases at any one time. To increase this capacity, an additional Recovery Facilitator has been recruited. It is hoped they will be able to start for the Network by late November 2018.</p> <p>As part of the work to promote the Network to a wider audience, Network staff attended the Bracknell and Wokingham College Freshers Fair with a stand. At the Fair, staff spoke to 100+ students about the Network and mental health issues. The Development Manager also gave a presentation about the Network to the CCG event: "Mental Wellbeing and You" at the Morgan Centre in Crowthorne. 50+ individuals attended and the presentation was well received.</p> <p>The BFCN will have a presence at the Carer's Lunch being held at Easthampstead Baptist Church on Friday, 5th October 2018.</p> <p>The next Network Group Meeting will take place at the Open Learning Centre on Friday, 5th October 2018 at Bracknell Forest Open Learning Centre. There will be talks from Bracknell</p>
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		<p>Forest Council Libraries as well as a BFCN-run craft event to promote craft activities in the community. Since the rollout of Universal Credit, the Bracknell Forest Jobcentre Plus (JCP) customer base has changed considerably with JCP staff noticing a marked increase in customers with mental health issues. Working with Lucy Bowman, JCP Partnership Manager – Bracknell and Slough, the Development Manager will attend a Mental Health Forum at the Bracknell JCP on Wednesday, 3rd October 2018 to encourage closer working between Adult Social Care and Bracknell Jobcentre.</p> <p>The first of the Adult Psycho-Education test sessions focus on Anxiety Management. The Development Manager and Clinical Team Lead have developed the session's syllabus and learning materials. Twenty-six individuals currently or previously known to secondary mental health services in Bracknell Forest have been identified as suitable to attend one the two test session arranged to take place at Coopers Hill Community Centre on Monday, 1st October 2018 and Thursday, 4th October 2018.</p> <p>Eleven Individuals, who have made a successful recovery through the support of the Network and the wider CMHT, have been identified to take part in the testing of the Network's Peer-to-Peer scheme. The Senior Recovery Facilitator will contact the individuals later in October 2018 to ascertain if they would like to engage with the Peer-to-Peer scheme.</p> <p>The next Mental Health</p>
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			<p>Forum will take place on Thursday, 11th October 2018 between 11:30-14:00 at Easthampstead Baptist Church.</p> <p>All of the activities mentioned above are having an effect in reducing likelihood of supported individuals needing future secondary mental health intervention and bed-based provision, as seen from the reduced waiting list for CMHT Care Co-ordination.</p>
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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)	45.3%	46.6%	41.0%	
L278	Percentage of adult social care records in the Adult Social Care IT System that contain the person's NHS number (Quarterly)	98.6%	98.5%	98%	
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)	2,612	2,779	2,150	
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%	
L309	Number of community groups worked with by Public Health to develop their support to local residents (Quarterly)	87	108	73	
L310	Number of people accessing online Public Health services via the Public Health portal (Quarterly)	2,359	4,239	1,600	
L311	Number of people actively engaged with Public Health social media channels (Quarterly)	2,542	2,640	2,500	

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)	7 days	9 days (8.12 days ytd)	8 days	
L178	Number of household nights in B&B accommodation (Quarterly)	607	838	754 per quarter	
L312	Number of families that have been in non self contained accommodation for over 6 weeks at quarter end (Bed & Breakfast) (Quarterly)	Not able to report*	0	0	-
L313	Number of families that have been in non self contained accommodation for over 6 weeks at quarter end (Non Bed & Breakfast) (Quarterly)	Not able to report*	3	14	




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

Strong, safe, supportive and self-reliant communities















Action	Due Date	Status	Comments
6.6 Prevention of harm, reduce crime and disorder and make the town centre safe			
6.6.02 Prevent harm to victims, offer support to children and manage perpetrators by holding monthly multi-agency meetings to co-ordinate the support and response for repeat and/or standard/medium/high risk cases of Domestic Abuse	31/03/2019		These meetings take place each month and referrals are routinely referred in by police and other partners.
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		These meetings continue to be well attended with a good flow of referrals from partners. A PPSG (Partnership Problem-Solving Group) information card has been drawn up to clarify the work of the group and how to refer.
6.6.07 Ensure that support is offered to residents who are at risk of exploitation	31/03/2019		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 support and disruption.




<p>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</p>	<p>31/03/2019</p>		<p>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</p> <ol style="list-style-type: none"> 1. Case Management & Transition 2. Accommodation 3. ETE 4. Health 5. Substance Misuse 6. Families 7. Finance, Benefits & debt.
<p>6.6.05 Lead on Prevent, having strategic oversight of the action plan, co-ordinating referrals to the Channel Panel and supporting workforce training</p>	<p>31/03/2019</p>		<p>Prevent Steering Group meets three times 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 - 2022) for BFC in line with the new Counter Terrorism Bill and Contest Strategy.</p>
<p>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</p>	<p>31/03/2019</p>		<p>These meetings continue to take place monthly and are well-supported and effective. Issues such as town centre ASB, cycling in the town centre and problem individuals are discussed with actions put in place to resolve them.</p>

Ind Ref	Short Description	Previous Figure	Current figure	Current Target	Current Status
L030	Number of lifelines installed in the quarter (Quarterly)	186	231	230 per quarter	
L031	Percentage of lifeline calls handled in 60 seconds in the quarter (Quarterly)	97.73%	97.78%	97.5% per quarter	
L185	Overall crime (Quarterly)	1,595	3,183	Reduction on 2017/18 in line with CSP	-
L316	Forestcare - % of Lifeline demos within 7 days of customer request (Quarterly)	98%	97%	95% per quarter	


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		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		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. This is in line with the evolving People Directorate.
7.1.12 Implementation of social prescribing operating model (T)	30/09/2018		Service continues and has been integrated with other programmes such as smoking cessation to provide a wider ranging, holistic offer of health improvement support to residents.
7.1.13 Working with the Clinical Commissioning Group to further develop an Integrated Care approach (T)	31/03/2019		The CCG has agreed to progress the development of an integrated continuing health care trusted assessor model and BFC has been given the mandate by the East Berkshire system leaders to lead the development of an integrated operating model proposal. The CCG have also secured support from NHSE or this initiative
7.1.14 Review and evaluate effectiveness of the care practice quality assurance panels (T)	30/06/2018		The Quality Assurance and Monitoring Panel in each of Adult Social Care area have been reviewed. Some changes have been

			made to ensure consistency and quality and the Quality and Assurance Panels are continually under review
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		The conversations approach has evidenced a reduction in demand for new people requiring long term support. Action now completed.
7.1.16 Review and evaluate the new connections support function and community connector role to determine development requirements (T)	31/05/2018		Review where this function best sits. No change
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		The performance for the 2 nd quarter has seen an improvement.
7.1.18 Enhanced community intermediate care service model implementation completed (T)	30/09/2018		Now in place – Action completed.
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		The design proposal is being adjusted in response to pre-planning advice received from planners. A draft business case document has been produced but cannot be finalised until adjustments to the design proposal have been completed and revised costings are available. This information is expected to be available in November.
7.1.20 Develop and implement a shared lives scheme (T)	31/12/2018		This objective is no longer taking place. Further analysis of the opportunity that it presents demonstrated insufficient confidence in the business case when compared with the investment of staff time and money to create the service.
7.1.21 Development and implementation of plan for the Personal Assistant (PA) market (T)	31/03/2019		Over the last quarter, Information and Awareness raising sessions have been held between the agency responsible for provision of self-employed PAs and the Adult and Learning Disability Teams. This has highlighted some concerns and limitations on the extent and ability of

			the current commissioned PA service to meet the needs of the Department in the medium term. As a consequence, over the next period the project is to be re-evaluated, to ascertain whether the assumptions in the original Business case are still relevant.
7.1.22 Review of the Domiciliary Care Gainshare Model (T)	30/10/2018		A considerable amount of work is continuing in relation to the Community Based Support framework. A work shop in July shared findings of a review with providers and agreed priorities for improvement. The commissioning team is continuing to work with providers to make improvement. These have included improvements to monitoring and contract management during Q2.
7.1.23 Develop a new Market Position Statement and work with voluntary sector to identify gaps (T)	31/12/2018		Progress has been made, however some milestones' are now behind schedule. The council is continuing to engage with service providers across all sectors as we improve the way that we commission services. For example meetings are taking place as part of a review of the way that the council works with voluntary and community sector organisations, and this will feed into the development of the Market Position Statement.
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		Action completed

Ind Ref	Short Description	Previous Figure	Current figure	Current Target	Current Status
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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%	97.2%	98%	

Section 4: Staff Sickness

Section	Total staff	Number of days sickness	Quarter 2 average per employee	2018/19 annual average per employee
DMT	3	0	0	0
Adult Social Care	213	461	2.16	10.66
Commissioning & Resources	28	60.5	2.16	6.14
Housing	80	114.5	1.43	5.08
Public Health: Shared	7	0.5	0.01	0.38
Public Health: Local	10	0.5	0.01	1.38
Business Intelligence	10	0	0	0.7
Department Totals (Q2)	351	637	1.81	1.81
Totals (18/19)	351	1460.5		8.32

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

Comments:

327.5 days were attributable to Long Term Sickness. 8 members of staff were off on long term sick during the quarter. 3 of these are still off sick, 2 within Mental Health and 1 in Housing

The figure excluding Long Term Sickness is 0.88 per employee for Quarter 2

Annex A: Financial information

ADULT SOCIAL CARE HEALTH & HOUSING BUDGET MONITORING - AUGUST 2018							
	Original cash budget	Virements & budget c/fwds	Current approved cash budget	Spend to date %age	Department's projected outturn	Variance over / (under) spend	Movement this quarter
	£000	£000	£000	%	£000	£000	£000
Director	(326)	(274)	(600)	221%	(552)	48	(127)
Commissioning	745	(85)	660	45%	638	(22)	31
Adult Social Care							
<i>Purchased Adult Social Care</i>							
Adult Community Team (ACT)	5,060	143	5,203	56%	5,860	657	85
Community Team for Mental Health (CMHT)	1,220	7	1,227	30%	1,151	(76)	14
Community Team for Mental Health Older Adults (CMHTOA)	4,916	42	4,958	40%	4,857	(101)	69
Community Team for People with Learning Disabilities (CTPLD)	9,786	88	9,874	25%	10,124	250	134
<i>Directly provided Adult Social Care</i>							
Equipment	119	40	159	111%	33	(126)	(9)
Intermediate Care	1,264	(56)	1,208	83%	1,003	(205)	(217)
Community Network	181	1	182	31%	130	(52)	0
Glenfield	290	3	293	45%	278	(15)	(2)
Waymead	730	7	737	39%	704	(33)	(17)
Breakthrough	166	2	168	37%	156	(12)	12
Emergency Duty Service	59	14	73	990%	79	6	9
<i>Care Management and Operational</i>							
ACT	1,201	252	1,453	53%	1,406	(47)	(47)
CMHT	767	7	774	45%	826	52	(33)
CMHTOA	594	6	600	62%	690	90	(139)
CTPLD	1,069	7	1,076	46%	1,061	(15)	(12)
Connections Hub	251	(71)	180	53%	187	7	(10)
Safeguarding	266	101	367	24%	326	(41)	(7)
Chief Officer budgets	404	(231)	173	42%	263	90	165
	28,343	362	28,705		29,134	429	(5)
Early Help & Communities							
Housing Strategy	560	9	569	27%	468	(101)	(6)
Housing Options	418	(61)	357	-13%	240	(117)	(4)
Supporting People	559	66	625	38%	612	(13)	(6)
Housing Benefits Administration	415	3	418	-23%	361	(57)	(32)
Housing Benefit Payments	(55)	0	(55)	421%	-259	(204)	(196)
Community Safety	216	1	217	39%	214	(3)	(3)
Drugs and Alcohol Advice Team	0	2	2	10,025%	2	0	0
Forestcare	18	11	29	-409%	158	129	56
	2,131	31	2,162		1,796	(366)	(191)
Public Health							
Public Health	3,965	3	3,968	21%	3,496	(472)	(514)
Grant Funding	(4,050)	0	(4,050)	50%	(4,050)	0	0
Business Intelligence	173	281	454	42%	454	0	10
	88	284	372		(100)	(472)	(504)
TOTAL ASCHH	30,981	318	31,299		30,916	(383)	(796)
Adjustment for Public Health ring-fence						472	514
TOTAL ASCHH EXCLUDING PUBLIC HEALTH						89	(282)
Memorandum item:							
Devolved Staffing Budget			15,741	52%	15,619	(122)	(533)
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 2018/19	(Under)/ Over Spend	Current Status
	£'000	£'000	£'000	£'000	£'000	
HOUSING						
Help to Buy	240.0	0.0	0.0	240.0	0.0	Eight properties purchased, 16 in progress
BFC My homebuy	166.4	-2.0	0.0	166.4	0.0	
Downshire Homes	9,254.7	2,222.0	8,254.7	1,000.0	0.0	
Edenfield - Stonewater Housing Development	233.0	0.0	233.0	0.0	0.0	
Holly House	450.0	225.0	450.0	0.0	0.0	
Disabled Facilities Grant	1,510.7	218.8	655.2	855.5	0.0	
TOTAL HOUSING	11,854.8	2,663.8	9,592.9	2,261.9	0.0	

Percentages 22.5% 80.9% 0.0%

ADULT SOCIAL CARE						
Heathlands	500.0	44.0	200.0	300.0	0.0	
Community capacity grant	455.8	11.4	50.0	405.8	0.0	
IT replacement	79.6	0.0	40.4	39.2	0.0	
TOTAL ADULT SOCIAL CARE	1,035.4	55.4	290.4	745.0	0.0	

Percentages 5.4% 28.0% 0.0%

TOTAL CAPITAL PROGRAMME	12,890.2	2,719.2	9,883.3	3,006.9	0.0
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Percentages 21.1% 76.7% 0.0%

Annex B: Annual indicators not reported this quarter

Council Plan indicators

Ind. Ref.	Short Description	Quarter due
NI155	Affordable Housing supply (Annually)	Q4
OF1e	The number of adults with learning disabilities in paid employment as a % of adults with learning disabilities who received a long-term service (Annual)	Q4