



PERSONALISATION  
ANNUAL REPORT

Version 4 July 2009

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## **1. Introduction**

- 1.1 This is the 2008/9 Annual Report of the Personalisation Programme (formerly Transforming Adult Social Care). It reports progress on the programme from the approval of the Project Initiation Document in summer 2008 until June 2009.
- 1.2 This programme of work in Bracknell Forest is the Council's response to the personalisation agenda, set out in "Putting People First", the multi-agency concordat launched in December 2007, which sets out a vision for adult social care for the next decade and beyond. Personalisation is the term that is increasingly used as it reflects the need for change in the wider community, rather than just within Adult Social Care.

## **2. Background**

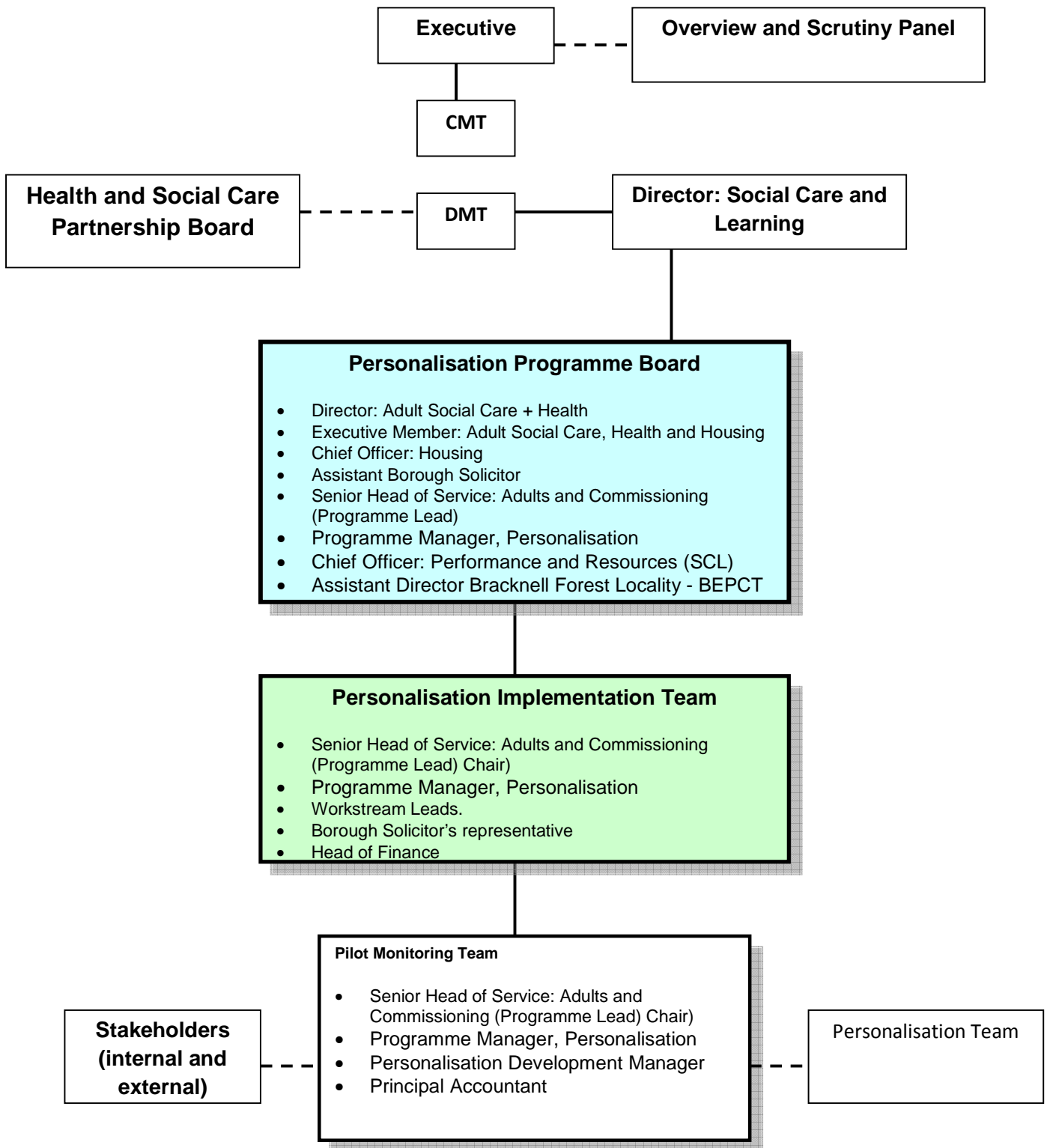
- 2.1 The "Putting People First" Concordat set out the shared agreement between Government, Local Government and their partners for how people with additional support needs should be supported. It clearly sets the agenda for change in a number of key areas:
  - Choice and control for adults with support needs
  - Information and advice for people with support needs, regardless of who pays for the support
  - Support that promotes independence
  - Universal services
  - All stakeholders working together to shape communities
  - Cost effective, quality, outcome focused support
- 2.2 The Local Authority Circular DH 2008(1), Transforming Adult Social Care, demands that people be supported to understand the money and community resources available to them and will be encouraged to use these imaginatively to meet their needs. Councils need also to ensure that the supply and type of support that people need and want to buy. Creating capacity in the community and enabling natural support networks are integral planks to this agenda.
- 2.3 Bracknell Forest Council approved an approach to personalisation and the associated programme of work including the pilot in summer 2008. This report is a progress update on that report and a look forward to future developments.

### **3. National Progress**

- 3.1 One year on since the first round of the Social Care Reform Grant (SCRG), the Department of Health is continuing to work with its partners and councils to identify barriers to implementation, and provide examples of where it works. Through the “Personalisation Toolkit”, developed by CSIP, councils can share examples of best practice. In summer the Department of Health published a Green Paper, “Shaping the future of care together”, based on the principles in “Putting People First”.
- 3.2 Published in autumn 2008, the IBSEN evaluation of the national individual budget pilots presents the positive benefits and the challenges of making personalisation a reality for people who need support to live their lives. The research showed a significant increase in positive outcomes for most people with a learning disability, with a mental health problem or with a long term condition. One of the key findings suggested many older people and their carers did not want the additional burden that they associated with planning and managing their own support. Additional guidance has been developed by DH to address the implementation of self-directed support for older people. This guidance will be adopted during the pilot in Bracknell Forest.
- 3.3 According to DH, in the first year of the SCRG significant progress has been made by some Councils. The expectation is that progress will accelerate significantly during 2009/10. The 2011 target for self-directed support, National Indicator 130, is that 30% of individuals who are being supported will be taking advantage of self-directed support. The transformation agenda is supported by regional improvement and efficiency agencies, the local government National Director of Social Care Transformation and Joint Improvement Partnerships.

### **4. Programme Governance**

- 4.1 Following the Local Authority Circular (DH)(2008) 1 : Transforming Social Care, a Project Initiation Document (PID) for implementing personalisation in Bracknell Forest was developed by Zoë Johnstone, Programme Lead. The PID was approved in June 2009 following which the Project Implementation Team and the Programme Board were constituted.
- 4.2 The programme of work has eight workstreams, each having a lead officer. The Programme Manager took up post in September 2008.



————— Accountability

- - - - - Information and Consultation

## **5. Bracknell Forest Personalisation Pilot**

- 5.1 Bracknell Forest Council has committed to run a pilot study to test a personalised approach for a specified number of adults who meet the social care eligibility criteria and who would currently receive either services or a direct payment. A personalised approach will enable people and their family or informal support networks to have greater control over the type of support that is provided and the way in which it is delivered.
- 5.2 The project will be evaluated; lessons learned will inform the full implementation of the personalisation programme of work.
- 5.3 The pilot will be delivered by the Personalisation Implementation Team, sponsored by the Personalisation Programme Board and monitored by the Personalisation Pilot Monitoring Group. The seven-month pilot commenced on the 1st July 2009. The Programme Board approved the Project Initiation Document for the pilot in February 2009.
- 5.4 The principle objectives of the project are:
- To redefine the current care management processes across Adult Social Care to a system which facilitates self directed support
  - To test the Supported Self-Assessment Questionnaire and Resource Allocation System
  - To allow analysis of the choices that individuals made and the support they required to inform future commissioning and community capacity building
  - To create a resource to champion and support the move to personalised social care
  - To allow analysis of the impact of self-directed support on carers
  - To highlight legal, risk management and safeguarding implications to inform the TASC programme of work
  - To allow analysis of the impact of self-directed support on joint working
  - To ensure that new IT and financial monitoring systems allow the recording of self-directed support and outcome based commissioning

- To allow analysis of spend on current provision versus personalised support to facilitate projection/mapping of future need
- To provide significant evidence to support the implementation of whole system change across Adult Social Care; delivering better outcomes to individuals living in Bracknell Forest
- To allow analysis of the impact of new ways of working on back office staff.

5.5 The pilot aims to support a minimum of 40 individuals through the pilot split between care groups as follows:

- 3 older people with Mental Health problems
- 7 people with Long Term Conditions
- 5 people with Mental Health problems
- 25 older people

In addition, any referrals made to the Autistic Spectrum Disorder Virtual Team will be considered for the pilot.

\*Self-directed support is already in place for people with a learning disability

5.6 It is proposed that people selected should include –

- a representative sample of people in terms of the Bracknell Forest demographic, including both new and re-referrals, with varying support needs
- at least a representative sample of people from BME groups

All people approached to take part in the study will be informed that it is a pilot and will need to expressly agree to take part in the pilot.

5.7 Self-directed support and personal budgets are already in place for adults with a learning disability. In order to build on and share the learning that has taken place it is proposed that two part-time members of staff from the learning disability team join the team of Personal Facilitators.

5.8 An evaluation model has been developed; it outlines the methodology for gathering information and conducting the evaluation of the pilot. Five lines of inquiry will form the basis of the evaluation of the Personalisation Pilot:

- experiences and outcomes for people taking part in the pilot, and their carers
- Testing of the personalisation procedures
- Flexibility of support options and capacity within the community
- Implications for Council and other services
- Cost-effectiveness in comparison with standard approaches

## **6. Transforming the workforce**

### Progress

- 6.1 A new Personalisation Team has been created to take forward the development of self-directed support. The Personalisation Development Manager, who took up post on The 1st June, leads the team. In addition to managing the team this role will also work to develop capacity in the community for the benefit of all care groups.
- 6.2 The Personal Facilitator role has been developed to support individuals to complete the self-assessment questionnaire and to plan and broker their support. The post was evaluated and was the subject of consultation with staff and trade unions before being advertised nationally.
- 6.3 Three permanent Personal Facilitator positions were successfully recruited to and will be joined by 1.2 fte Facilitators currently employed in the Community Team for People with a Learning Disability. The posts will be filled on 6th July 2009 with the postholders initially working on the pilot.
- 6.4 A training programme for the Personal Facilitators is under development. The comprehensive programme will be delivered in the fortnight commencing 13th July.
- 6.5 To support the programme a TASC Programme Assistant post has been advertised; the postholder will engage with individuals to participate in the development of our approach to personalisation.



- 6.6 A staff champion has been appointed in the Community Mental Health Team to take a specific role in promoting awareness and developing expertise in personalisation within the mental health teams in Bracknell Forest. This member of staff has extensive knowledge in the use of direct payments in mental health and will follow the broader national personalisation developments in mental health and understands the issues and challenges. They will also report to the LIT on progress in that specific area. Champions have also been sought from other teams.

#### Future Developments

- 6.7 The Department of Health published a workforce strategy document in April 2009, "Working to Put People First: The Strategy for the Adult Social Care Workforce in England". One of the key themes to this strategy is workforce remodelling to respond to the personalisation agenda - ensuring the right workforce with the right skills are able provide the care and support that people want.
- 6.8 Together with workforce partners, the current workforce strategy will be reviewed to ensure the six "key themes" priorities of Putting People First are incorporated:
- The effective leadership of local employers in workforce planning
  - Ensuring effective recruitment, retention and career pathways
  - Workforce remodelling and commissioning to achieve service transformation
  - Workforce development
  - More joint and integrated working between social, health care and other sectors
  - Regulation for quality in services as well as public assurance
  - A significant amount of work has already been achieved on a number of these priorities. The Adult Workforce Strategy group will ensure this positive work continues to deliver the Putting People First strategy over the coming years.
- 6.9 To undertake a project in partnership with Skills for Care looking at skills needed by the workforce to deliver the personalisation agenda. The project will particularly focus on the skills needed by people other than social workers. In order to deliver this project the Council have been awarded £70,000 by Skills for Care.

## **7. Policies and Procedures**

### Progress

- 7.1 To aid understanding and develop ownership of the processes this work has been tasked to staff working in the pilot. The framework for policies and procedures is being developed and will be available when the staff in the Personalisation Team take up their posts.
- 7.2 The Council took part in a Research in Practice for Adults (RiPfA) Self-Directed Support 360 project. The aim of the project was to bring together teams from authorities at different stages to share learning and to inform national best practice.

### Future Developments

- 7.3 The following are areas for future work
- The pathways and interface between Intermediate Care and longer term self-directed support – to be undertaken during the pilot
  - A process for validating supported self-assessments which needs to be light touch to reflect the spirit of personalisation
  - To clarify links with Community Care Assessments and Single Assessment Process
  - To ensure that the processes within self-directed support clarifies the relationship of the Supported Self-Assessment and professional assessments
  - To work with other fund holders to develop approaches to self-directed support
  - To develop an appeals process in relation to the self-assessment and Resource Allocation System
  - To further develop approached to Person Centred Planning and to embed them in practice

## **8. Communicating the Programme**

- 8.1 The Communications Strategy for the programme was approved by the Board in June. The strategy highlights key messages, audiences and risk for the programme. The action plan detailing progress is shown below.

<b>Date</b>	<b>Event/method</b>	<b>Target audience</b>	<b>Lead officer/s</b>	<b>Status</b>
Early January	Workshop – to discuss pilot and recruitment.  Feedback to be circulated via email.	Staff	Zoë Johnstone, Lynne Lidster and Caroline Little	completed
March 2009	Job vacancy advert in newspapers, Boris and on the BFC and jobs go public website	Wider community, staff	Zoë Johnstone, Lynne Lidster and Paul Young	completed
April 2009	Provider Workshop	Providers, partners and voluntary sector	Zoë Johnstone & Lynne Lidster	completed
September 2009	TASC Newsletter	Staff, partners and providers	Zoë Johnstone  Lynne Lidster & Kaylee Godfrey	
Summer 2009	Presentation about the pilot to groups	Members	Glyn Jones and Zoë Johnstone	
June/July	Team meetings about the pilot  Confidential focus groups	Staff	Zoë Johnstone, Lynne Lidster,  Ilona Cowe & Derek McCarthy	completed
July 2009	Voluntary Sector Forum AGM	Voluntary Sector organisations	Zoë Johnstone  Lynne Lidster	completed
July 2009	Personal facilitators and team manager to meet teams	Staff	Zoë Johnstone, Lynne Lidster and personal facilitation team	completed

September 2009	Develop holding statements for press to be used if needed	Wider community	Zoë Johnstone Lynne Lidster Kaylee Godfrey	
September 2009	DVD	All stakeholders particularly individuals and families	Zoë Johnstone Lynne Lidster Kaylee Godfrey & Derek McCarthy	
September 2009	Forest Views & Town and Country	Staff & all other stakeholders	Zoë Johnstone Lynne Lidster Kaylee Godfrey	
Autumn	Staff workshops	Staff	Zoë Johnstone and Lynne Lidster	
September 2009	Launch of Pilot – stories in local newspapers and on local radio	Wider stakeholders	Zoë Johnstone Lynne Lidster Kaylee Godfrey	
September 2009	Launch of the pilot – Event for families	Residents requiring support	Zoë Johnstone, Lynne Lidster and Personalisation Team	
July - December	<p>During the launch</p> <ul style="list-style-type: none"> <li>• Staff - team meetings and updates on BORIS.</li> <li>• Managers' Forum</li> <li>• Providers – email asking for feedback from the pilot.</li> <li>• Residents requiring support – regular case reviews</li> </ul>	Staff, providers, residents requiring support	Zoë Johnstone, Lynne Lidster ,  Kaylee Godfrey and personalisation team	

February 2010 - after evaluation	<ul style="list-style-type: none"> <li>• Staff - team meetings and updates on BORIS.</li> <li>• All residents – article in Town &amp; Country about individual budgets. Press release issued to the local media.</li> <li>• Providers – email with feedback from the pilot.</li> </ul>	All	Zoë Johnstone, Lynne Lidster and Personalisation Team. Kaylee Godfrey	
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## 9. Commissioning

### Progress

9.1 A workshop was held with providers in April at the Grange Hotel in Bracknell; over 100 providers attended it from all sectors. The purpose of the event was to raise awareness of:

- Personalisation agenda nationally and in Bracknell Forest
- Self-directed support and personal budgets
- The impact of personalisation on providers
- What providers might need to change to market themselves to individuals
- National best practice examples from other providers

The event was chaired by Research in Practice for Adults; speakers at the event included national providers, officers from BFC and the DH regional transformation team. A conference report is available including feedback from participants.

9.2 A provider has been secured to provide independent advocacy for individuals who are taking part in the pilot. The need for independent advocacy is vital to ensure that individuals are supported to voice their needs and aspirations for their future. Advocacy is particularly important when considering the needs of the most vulnerable people and those without family carers or friends to make their voice heard. An advocacy strategy and a community engagement plan are in development.

9.3 The Learning Disability service is in the process of awarding framework contracts or community support. The tender process is completed and recommendations will be submitted to the Executive for approval in June.

## Future developments

- 9.4 In collaboration with Corporate Procurement and Legal Services, the tender exercise for flexible community-based support is underway. The new framework agreements will replace the existing domiciliary support, meals on wheels and domestic support service contracts. Soft market testing with existing providers has taken place. The tender will be undertaken on the basis of "lots"; the agreements are expected to result in more flexible and a wider range of options to be available to people.
- 9.5 The small grants (grants under £5,000) criteria will be updated for 2010/11 to ensure that grants support the development of self-directed support.
- 9.6 Work will continue with providers to find tailored solutions to meet the needs of individuals.
- 9.7 Further developments include:
- To further develop approaches to Person Centred Planning, and embed them in practice across the sector.
  - To clarify the roles of independent advocacy
  - To explore and develop options for independent brokerage
  - To work with providers to develop a range of affordable and flexible support options

## **10. Modernising In-house services**

### Progress & future developments

- 10.1 The Launch of Green Machine, a Community Interest Company, took place in February and now 8 people are employed. Work is focusing on obtaining contracts.
- 10.2 Breakthrough (Supported Employment Service) moved to a town centre location in Charles Square location in December in order to increase accessibility for individuals.

- 10.3 Carers' Service for people with a learning disability: A feasibility study was commissioned from Surveyors to accommodate Carers' Service (overnight breaks and daytime respite) on the Waymead site. Surveyors and Corporate Property Services reported to Steering Group 12th March 2009 with potential options. Those options have now been scrutinised and further developed. An options paper will be discussed at Adult Management Team / Departmental Management Team and once the preferred supported option is clear a business case will be drafted for Corporate Management Team for approval in July.
- 10.4 Revised CQC registration for Waymead is being submitted, to reflect extended options for individuals.
- 10.5 The modernisation of In House Home Support has seen the creation of a Long Term Conditions specialist team, now due for evaluation, an increase in community-based support for people with dementia and an increase in reablement. The teams continue to focus on developing services that promote reablement, independence and community care and support.
- 10.6 Consultation and discussion around the modernisation of services for older people continue. A Service Manager has been appointed to lead the developments and will take up post in July.
- 10.7 The modernisation programme for the supported living at Glenfield House, for working age adults with mental ill health, is moving forward and encompasses early facilitation of self-assessment and personal budgets once the pilot, new process and systems are implemented.

## **11. Managing and reporting performance**

### Progress

- 11.1 Local Area Agreement Targets for National Indicator 130 (expressed as people self-directing their support per 100,000 of population) for 2008/9 and the following 2 years were set against a baseline of 220 per 100,000 and were as follows:

Baseline: 220 per 100,000 (2007/8)  
242 per 100,000 (2008/9)  
266 per 100,000 (2009/10)  
292 per 100,000 (2010/11)

- 11.2 Under the new definition, Bracknell Forest reported an 2008/9 outturn of 8.15% for NI 130, the indicator which measures self directed support and direct payments. This places us 33rd out of a list of 136 council's who reported 2008/9 data on this indicator, which is better than the draft England average of 6.5% and South East average of 5.7%.

#### Future developments

- 11.3 The target for all councils is 30% of all people receiving community-based support to be achieved by March 2011. Based on the numbers of people receiving community based support in 2008/9, this equates to 1,215 people in Bracknell Forest by March 2011, an increase of 869 people. A work stream has commenced to develop a profile for this for the coming months

## **12. IT**

#### Progress

- 12.1 The first phase of the procurement of the Adult Social Care IT systems Replacement Project was completed with preferred supplier, LiquidLogic, appointed April 2009. The solution is a flexible user friendly system with staff using web forms and on / off line access to information for staff to enable mobile working to and to support the shift to reducing office space. It also provides easier and faster access to information through more structured forms and to management information for staff at the point of entry.
- 12.2 The budget has been secured for the implementation of the supplier solution and the second phase of the project is underway. The contract has been signed and the Project Initiation Document and initial project plan has been approved.

#### Future developments

- 12.3 The second phase of the project will be completed with "go live" due for January.
- 12.4 A review of the IT requirements of In House Home Support and the Replacement of the Webroster system will be completed by April 2009.
- 12.5 Review of the impact of the Personalisation pilot on the new IAS system. Outcomes of the pilot will be assessed against the functionality of the IAS system after go live to identify with the supplier what changes will need to be made to the system to reflect the new ways of working for Adult Social Care.



## **13. Resource Allocation System and Supported Self Assessment Questionnaire**

### Progress

- 13.1 The “In Control” model for the development of the Resource Allocation System (RAS) was reviewed and adapted use by BFC. Specific service and support budgets to be allocated through the RAS have been determined, which subject to review during the pilot. The provisional RAS has been modelled and evaluated by comparing an individual’s current cost compared to the calculated RAS allocation. 29 individuals whose current support costs differ significantly from the potential RAS allocation have been re-evaluated.
- 13.2 The supported self-assessment questionnaire (SAQ) has been developed and has been tested using a desk-top exercise which involved staff completing SSAQs using information about 189 people who are currently supported by Adult Social Care. It captures information about carers about the support needs of carers to enable them to remain in their caring role. The questions have been weighted to enable the calculation of the RAS allocation.

### Future Developments

- 13.3 An easy read guide to explain the RAS and SSAQ is being developed.
- 13.4 A methodology for calculating people’s contribution to the support costs needs to be developed for use during the pilot.
- 13.5 Following evaluation of the personalisation pilot the following tasks will be undertaken:
- Review and finalise total service and support budgets to be included in RAS
  - Review and finalise SSAQ and RAS score weighting
  - Consider whether transitional budget protection arrangements are required to protect individuals whose RAS allocation is significantly lower than the cost of the support they are Integrate RAS /SSAQ into ASC IT systems
  - Develop appropriate financial management and accounting arrangements for Personal budgets
  - Produce detailed manual and associated documentation for RAS
  - Costs for in-house services and supports

## **14. Creating Capacity within the Community**

### Progress

- 14.1 A Reference and Information Sharing group to take forward community capacity building is well established. The group has terms of reference, a council-wide membership plus partners from other sectors. It has been agreed that these meetings will be used to focus the priorities of the group and to plan and discuss ideas that can facilitate community capacity growth and links. One area of discussion will be an information day / workshop for local businesses and providers etc. To help take this agenda forward the newly appointed Development Manager will play a role in undertaking the work to build capacity within the community.
- 14.2 An internal group has been formed of officers in the Council who undertake development work as part of their role. This group will co-ordinate and undertakes the actions for this workstream.
- 14.3 The CSIP project to engage people from BME groups in the development of the personalisation agenda locally has been completed and evaluated by CSIP. Isabel Fernandez-Grandon, Community Mental Health Team, led "It's Up To You" - the project for Bracknell Forest. The project focussed on people from the traveller community with Mental Health problems – giving individuals a "test" individual budget. One individual, also caring for a relative with a long-term condition, purchased a washing machine with her budget – this has had a positive impact on the family, especially the mental health of the individual due to greater ease of her caring role. A more detailed evaluation looking at outcomes for the individuals is being prepared locally. The Council match-funding to the bid is to be used to support the development of a community group – a need that has been identified by the individuals participating in the project and other members of the community. The objective of the group will be to enable individuals to get easier access to support and information and also to participate in the wider Bracknell Forest community.

## Future developments

14.4 The priorities for the workstream are to:

- Co-ordinate and communicate the work that is currently taking place to create capacity in the community.
- Gather information about the resources that are available to people in the community - not just for people who are eligible for support from Adult Social Care but also as preventative activities or support and for individuals who fund their own support.
- (With the Commissioning workstream) to engage with providers to create flexible support options for people to access.
- Develop a mechanism for finding out what support options and activities are not currently available in the community that need to be developed.

## **15. Budget**

	Social Care Reform Grant	Actual/Projected Spend
Year 1 2008/9	119,000	73,000 (46,000 agreed carry forward)
Year 2 2009/10	279,000 + 46,000 carried forward = 325,000	317,000 (8,000 to be carried forward)
Year 3 2010/11	346,000 + 8,000 carried forward = 354,000	354,000

In addition to the Social Care Reform Grant the Council have been successful in bids with Skills For Care (£70,000) and Improvement and Efficiency South East (£15,000) to develop a Timebank.

## 16. Action Plan

### RAS/SAQ Workstream

Action	Lead	Due date
Finalise draft of self-assessment questionnaire	Zoë Johnstone /Paul Clark	Completed
Determine number of individuals to be included in pilot	Zoë Johnstone	Completed
Need to determine representative make-up of pilot group, covering demographics and care groups	Zoë Johnstone	Completed
Estimate amount of support time each participant will require based on their care group *	Zoë Johnstone	Completed
Consider inclusion of people with Learning Disabilities – if just for testing of SAQ/RAS	Zoë Johnstone	Completed
Develop RAS & pilot draft	Zoë Johnstone /Paul Clark	Completed
Develop individual contributions policy for use during the pilot	Zoë Johnstone /Paul Clark	August 2009
Develop easy read guide to self-assessment and the Resource Allocation System	Zoë Johnstone	September 2009
Review and finalise RAS	Zoë Johnstone /Paul Clark	Ongoing through pilot and following evaluation

\*IB pilots showed that people had more contact time with support coordinators over the 6 month pilot.

Workforce Planning Workstream

<b>Action</b>	<b>Lead</b>	<b>Due date</b>
Determine the role of the Facilitator	Paul Young	Completed
What, specifically, is the facilitator responsible for?	Paul Young	Completed
What proportions of the Facilitators' role will be spent doing different tasks?	Paul Young	Completed
Complete Job Evaluation	Paul Young	Completed
Recruit Personal Facilitators and Manager	Paul Young	Completed
Job Description and Person Specification to be developed	Paul Young	Completed
Decide where to advertise vacancies. Jobs Go Public and/or Community Care?	Paul Young	Completed
Determine usage of Skills for Care money	Paul Young	Completed
Deliver required training	Paul Young	Completed
Develop training programme for Facilitators. To include: working with BME groups, working with different groups of individuals (depending on Facilitators' backgrounds), giving consistent advice (barrier for older people), safeguarding (Berkshire Safeguarding Procedures)	Paul Young	Completed
Provide a work-base for the Facilitator team	Paul Young	Completed
Develop management arrangements for the Facilitator team.	Paul Young	Completed
Develop Workforce Strategy in response to "Working to put people first"	Paul Young	Following evaluation of the pilot
Undertake project in partnership with Skills for Care	Paul Young	March 2010

### Policy & Procedures Workstream

<b>Action</b>	<b>Officer</b>	<b>Due date</b>
Develop outline framework for procedures based on those in place for people with learning disabilities*	Zoë Johnstone / Lynne Lidster	Completed
Determine role of facilitation	Paul Young	Completed
Determine pathways into the pilot and to specialist assessments and support	Zoë Johnstone / Lynne Lidster	Completed
Develop personalisation policies and procedures following the pilot	Zoë Johnstone / Lynne Lidster	Following evaluation of pilot

\* To then be developed by the facilitator group.

### IT & Performance Management Workstreams

<b>Action</b>	<b>Officer</b>	<b>Due date</b>
Develop performance monitoring and management arrangements for the pilot	Mark Gittins	August 09
What new information/data will need to be collected in the pilot, including that for evaluation purposes?	Mark Gittins	Completed
What performance indicators need measuring during the pilot? Which NIs? Any others?	Mark Gittins	Completed
How will information/data be collected?	Mark Gittins	completed
How will information/data be recorded? SWIFT?	Sandie Slater	completed
Who will monitor performance and the impact on	Mark Gittins	completed

PIs during the pilot?		
Develop team targets and profiles for NI 130	Mark Gittins	September 2009
Go live for new IAS system	Sandie Slater	January 2010

### Community Capacity Building & Commissioning Workstreams

<b>Action</b>	<b>Officer</b>	<b>Due date</b>
Create capacity within the community	Mira Haynes/ Nick Ireland	Ongoing
Co-ordinate and communicate the work that is currently taking place to create capacity in the community	Mira Haynes/ Nick Ireland	Ongoing
Gather information about what resources are available to people in the community - not just for people who are eligible for support from Adult Social Care but also for as preventative activities or support and for self-funders	Mira Haynes/ Nick Ireland	Ongoing
Develop a mechanism for finding out what support options and activities are not currently available in the community that need to be developed	Mira Haynes/ Nick Ireland	Ongoing
How do we link with the NHS? – How do we work with people who have NHS funding?	Mira Haynes/ Nick Ireland	During pilot
Engage with providers to create flexible support options for people to access	Mira Haynes/ Nick Ireland	Ongoing
Determine role of advocacy	Jane Bremner	completed

Commission advocacy for use during the pilot	Jane Bremner	completed
Contribute to the development of a local User-led Organisation	Sarah Scales	December 2010
Develop a strategy for Information and Advice		October 2010

### Communication Workstream

<b>Action</b>	<b>Officer</b>	<b>Due date</b>
Develop Communications Plan for pilot	Kaylee Godfrey	completed
Communicate pilot to current staff – develop methods and determine frequency	Kaylee Godfrey	completed
Liaise with trade unions	Paul Young	Initial discussions held - ongoing
Communicate pilot to providers - RIPFA bid for working with providers, possibly to run an event (through use of Provider Forums?)	Kaylee Godfrey	ongoing
Communication with people taking part in the pilot – develop materials and guidance for staff that are accessible for all	Kaylee Godfrey	ongoing
Communication about participation with BME people with mental health problems - CSIP Project	Isabel Fernandez-Grandon/ Kaylee Godfrey	completed
Develop Implementation Plan for Engagement Strategy	Sarah Scales	November 2009
Further actions re communication – see section 8 of this report	Kaylee Godfrey	Ongoing



### Evaluation Methodology

<b>Action</b>	<b>Officer</b>	<b>Due date</b>
Develop evaluation tool	Caroline Little	completed
Undertake evaluation of pilot	Lynne Lidster / Derek McCarthy	During and following pilot

### Implementation Team

<b>Action</b>	<b>Officer</b>	<b>Due date</b>
Develop transparent criteria for the selection of individuals to be included in the pilot*	Zoë Johnstone	Completed
Careful attention to the needs and barriers to participation for older people (given evidence in the IBSEN report) – look at case studies in briefing <i>Making Personal Budgets Work for Older People – Developing Experience</i> .	Implementation Team	ongoing
Specifically target involvement of BME people with mental health needs – lead by Isabel Fernandez-Grandon, BME Community Development Worker, Berkshire NHS Trust. Funding of £2000 has been secured for this work from the Care Services Improvement Partnership.	Isabel Fernandez-Grandon	Ongoing throughout pilot
Develop ongoing risk register and mitigating actions	Lynne Lidster/ Caroline Little	Completed
Part of the purpose of the pilot is to test risks so that the final programme plan is better informed – what are these risks that need testing?	Lynne Lidster/ Caroline Little	completed
What are the risks to people taking part in the pilot? Consider safeguarding implications.	Facilitation Team	Ongoing
Develop a framework for quality assurance	Lynne Lidster/ Facilitation Team	Throughout pilot

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## 17. Risks to the Programme

### RISK LOG

INTERNAL/EXTERNAL ELEMENTS THAT AFFECT THE PROJECT AND ACTIONS YOU WILL TAKE TO MITIGATE IMPACT

INTERNAL/EXTERNAL ELEMENTS THAT AFFECT THE PROJECT AND ACTIONS YOU WILL TAKE TO MITIGATE IMPACT

ID	Date Raised	Date Last Updated	Description	Impact (1-5) 1-low 5-high	Probability (1-5) 1-low 5-high	Risk Rating Impact x probability	What are you going to do about it?	Raised By (initials)	Status (Open/ Closed)
1.	February 09	28.07.09	Current workforce resistant to change	4	3	12	Ongoing communication with staff and recruitment of staff champions from existing teams  Further staff workshops to be held focussing on progress and the process of change	Imp Team	Open

ID	Date Raised	Date Last Updated	Description	Impact (1-5) 1-low 5-high	Probability (1-5) 1-low 5-high	Risk Rating Impact x probability	What are you going to do about it?	Raised By (initials)	Status (Open/ Closed)
2.	February 09	05.06.09	Not enough people in the community wanting to be part of the pilot	5	3	15	Review Communication Strategy – develop promotional leaflet & DVD & hold an event with families  Recruit to the staff champion role from existing teams	Imp Team	Open
3.	February 09	09.02.09	Over commitment of staff resources	4	4	16	Monitor progress/delays and escalate difficulties to Programme Board when needed	Imp Team	Open
4.	February 09	05.06.09	Lack of provider flexibility	4	3	12	Hold provider workshop with RiPfa 24 <sup>th</sup> April (Completed)  Ongoing dialogue with providers  Host workshop run by Voice Marketing	Imp Team	Open

ID	Date Raised	Date Last Updated	Description	Impact (1-5) 1-low 5-high	Probability (1-5) 1-low 5-high	Risk Rating Impact x probability	What are you going to do about it?	Raised By (initials)	Status (Open/ Closed)
5.	December 08	03.08.09	Delay in development and approval of the ASC Contributions Policy as a result of new guidance from Department of Health	5	3	15	Communication with Board Members  Policy under development	Imp Team	Open
6.	March 09	31.03.09	Potential that existing staff ask for their grades to be re-evaluated	1	4	4	Communicate with unions	Imp Team	Open
7.	March 09	05.06.09	Risk to DSB should grant funding for Personal Facilitators and Personalisation Development Manager cease	4	1	4	Workforce development and modernisation to meet the Personalisation agenda	Prog Board	Open
8.	March 09	05.06.09	RAS Allocations differing from assessment of needs	5	3	15	Desktop exercise followed by revisiting weightings	Imp Team	Open
9.	June 09	05.06.09	Vacant posts in Corporate Comms Team resulting in lack of support for Comms Strat.	4	4	16	Discuss resource requirement and potential solutions with Interim Head of Communications	Imp Team	Open

ID	Date Raised	Date Last Updated	Description	Impact (1-5) 1-low 5-high	Probability (1-5) 1-low 5-high	Risk Rating Impact x probability	What are you going to do about it?	Raised By (initials)	Status (Open/ Closed)
10.	August 09	06.08.09	Outbreak in Swine Flu delays programme	4	2	8	Monitor sickness and report potential delays	Prog Board	Open

## Closed Risks

11.	December 08	21.05.09	Delay in some aspects of the modernisation of services	2	5	10	Recruit to Service Manager post (This post will be filled in June 2009)	Imp Team	Closed
12.	February 09	05.06.09	Insufficient resources to deliver CCB programme of work	5	3	15	Recruit to 0.5 Development Manager post (post was filled on 01.06.09)	Imp Team	Closed
13.	December 08	05.06.09	Partial or total unsuccessful recruitment to facilitator team	5	2	10	Advertise the post widely (posts will be filled on 1st July 2009)	Imp Team	Closed
14.	February 09	28.07.09	Delay in the recruitment of the Facilitator Team	4	1	4	Negotiate delay in the start of the pilot	Imp Team	Closed
15.	December 08	21.05.09	Delay in some aspects of the modernisation of services	2	5	10	Recruit to Service Manager post (This post will be filled in June 2009)	Imp Team	Closed