



Performance Monitoring Report

for

Adult Social Care & Health

**Third Quarter 2009/10
October-December 2009**

Portfolio holder: Councillor Dale Birch
Director: Glyn Jones

Section One: Executive Summary

Introduction by the Director of Adult Social Care and Health

This quarter saw the formal publication in November of the Performance Rating on Bracknell Forest Adult Social Care by the Care Quality Commission (CQC).

The rating system has changed from the star based system in 2008, when Bracknell Forest Council was 3 stars. The new system is a four band system with departments performing: Poorly; Adequately; Well or Excellently.

Bracknell Forest was judged to be Performing Well.

The judgement is based on ratings for seven outcomes which CQC assess. The table below sets out the component ratings.

Delivering Outcomes	Grade Awarded
Improved health and emotional well-being	Performing Well
Improved quality of life	Performing Well
Making a positive contribution	Performing Well
Increased choice and control	Performing Excellently
Freedom from discrimination or harassment	Performing Well
Economic well-being	Performing Excellently
Maintaining personal dignity and respect	Performing Well
Overall Grade Awarded for Delivery of Outcomes	Grade 3: (Performing Well)

There are recommendations for improvement which the Council has responded to by presenting an Action Plan to the Executive. The full rating is on the Council's website at <http://www.bracknell-forest.gov.uk/living/liv-community-care.htm>.

As always, there is much activity to report on and the department continues to ensure that appropriate support is provided to those who need it.

The quarter included the future development of the pilot for Personalisation with all care groups fully represented. The Spring will see the evaluation in full swing with detailed recommendations following that analysis.

Budget preparation has been an important part of Quarter 3 developments, culminating in the consultation in the budget consultation in December.

Work on the implementation of a new IT system for Adult Social Care (IAS) is taking up considerable time as one would expect. It will 'go live' in Quarter 4.

Finally, can I record my thanks to all the staff both Bracknell Forest Council and private and voluntary sector providers who did such a good job in the inclement weather. I was very impressed by the dedication shown.

Glyn Jones, Director of Adult Social Care & Health

Adults and Commissioning

Learning Disabilities

Individuals are now selecting their preferred providers from the providers who are part of the framework contract.

Through joint work with colleagues in Children Young People & Learning, the Transition policy has been reviewed, and will be submitted for Executive approval early in 2010.

A review of Breakthrough, the in-house supported employment service, has identified some issues in relation to capacity; capacity needs to be flexible in order to respond to changing demand, as people exercise the choice afforded them through the implementation of the personalisation agenda. Options have been identified and will be addressed through the Personalisation Implementation Plan following the evaluation of the pilot.

Mental Health

Berkshire Healthcare NHS Foundation Trust have commenced a major project to determine the future configuration of services in the light of the economic situation. It is entitled New Generation Care

Safeguarding

A joint project with Local Authorities and NHS organisations in East Berkshire to align the Safeguarding Procedures and Serious Untoward Incident procedures has commenced.

Commissioning

The Dementia Adviser Steering group has been established, chaired by the Chief Officer: Adults and Commissioning. This will monitor the demonstration pilot funded by the Department of Health to implement the national dementia strategy

An Interim Head of Joint Commissioning has taken up post, and a work programme has been agreed jointly with the Assistant Director for Bracknell Forest from NHS Berkshire East.

Personalisation

The profile of referrals required for the pilot has been achieved, which means we have experiences from all care groups which was considered crucial. Several people have now had their support plans approved. The creative approaches that have been supported have resulted in some very positive outcomes for the individuals and their families, who are proving to be very positive advocates for this approach.

Team targets for 2010/11 have been determined.

Older People and Long Term Conditions

Community Support & Well-being

Downside Resource Centre

The Downside centre building has closed due to health and safety concerns around the water supply. However, staff continue to provide a service working from Heathlands and utilising a variety of community settings.

Heathlands Day Centre

The centre was able to support an additional three people with moderate to severe dementia during the 3rd quarter. Heathlands took an active role in the transport review with a view to reducing the amount of time that service users spend each day travelling to and from the centre.

Community Support & Well-being / Long Term Conditions

The arrangement with Bracknell Forest Homes to utilise a flat at Barnett Court got underway in this quarter. Changes to the rotas will allow for an expansion in the number of people that can be supported and the team continues to address the need to reduce unallocated hours.

Community Support & Well-being / Dementia

Changes to rotas along with transfers to outside agencies have allowed for an increase in numbers of people supported remaining at home. Feedback on quality of care provided continues to be very positive.

Community Support & Well-being staff have promoted the use of Telecare and a staff member has attended a course around its use for people with dementia.

Transfer of one LTC care worker to the dementia team, along with a re-configuration of the staff rotas has enabled us to increase the number of people currently being supported, while at the same time reducing the unallocated hours. So there are demonstrable improvements.

Heathlands Residential Home

Heathlands have implemented the Malnutrition Universal Screening Tool (MUST) as part of the new CQC regulatory framework, along with improved prevention and infection control procedures and in line with policies aimed at promoting diversity and equality, sexual orientation is now treated as an integral part of the assessment process.

Staff continue to volunteer their time for fund-raising events. Funds are then used to enhance the well-being of residents, i.e. providing a Christmas gift for each person, providing for outings and for entertainment within the home. Heathlands received donations from the Asian community in honour of Eid-al-Adha and has been given 14 tickets for a Christmas pantomime by John Nike.

Older People and Long-term Conditions Team

The OPLTC have contributed to the Personalisation Pilot transferring existing cases on to the Personalisation Pilot.

A family and carer support worker employed by the Stroke Association has joined the team and will provide advice and assistance to users and carers. They will coordinate feedback on the Stroke Strategy which will be approved in Q4. Work with

GPs and community groups has continued with the aim of increasing awareness around prevention and sign-posting to available services.

The team have recently supported the independence of two severely disabled people through provision of specialist access systems, thereby enabling them to screen callers and remain safe in their own homes. Staff also used a person-centred package of support combined with telecare to enable an elderly couple with complex needs to remain together in their own home.

Staff from across the department underwent training on the changes to Continuing Health Care, which became effective on 1/10/09 and on how to complete a CHC check-list. The team will now complete the latter during all reviews for people in nursing homes and for people with complex behavioural needs living in 24 hour residential care.

The Business Support Team

The team have been able to support the Bridgewell Centre by providing administrative cover. The team's manager continues to be heavily involved with the training and testing for the new IT system for Adult Social Care (IAS) and the team has committed considerable resources to the forthcoming implementation.

Community Response and Reablement (CR&R)

Community Response and Reablement

The review of performance and quality reporting for CR&R has been completed and a performance and quality report has been presented to the Intermediate Care Partnership Board who has agreed the recommendations and reporting format.

Data collection has been set up to enable a detailed review of Speech and Language Therapy needs across CR&R.

The quarter saw on-going training for staff on 'front desk' to ensure adherence to Fair Access to Care (FACS) criteria and ordinary residence.

Work has commenced on care management processes within teams and ongoing work on how caseload management is addressed.

Sally Palmer has started as the new Head of CR&R.

The Bridgewell Centre

A review of the GP Service Level Agreement has been signed and agreed ensuring improvement to the admissions and discharge process. A robust process is in place to ensure adherence to the requirements under the 'Prevention and Control of Infection in Care Homes'.

The centre has targeted the use of agency staff in order to assist with maintaining financial stability.

Ladybank

Ladybank has implemented and trained all staff in the use of MUST (Malnutrition Universal Screening Tool). Successful recruitment has led to a reduction in the use of agency staff and agency costs.

Emergency Duty Team (EDT)

All EDT Approved Mental Health Practitioners (AMHPs) have completed the statutory requirements for legal update training

EDT management have set up quarterly meetings with senior police officers to enhance partnership working.

The EDT contract continues to be reviewed and will be taken to other unitaries for comments on completion.

Other

Drugs and Alcohol Action Team (DAAT)

The Family and Friends group now have a formal constitution and held their first AGM. The Service User Forum has been established and a new name has been chosen by people who use the service - Support for People Using Dangerous Substances (SPUDS), they will meet on a monthly basis.

Following the withdrawal of the current prescribing organisation an interim service has been put in place in lieu of a more permanent solution being found.

Staff from the current provider have TUPE transferred to the new provider of the Psycho-social Intervention Service and the new service will commence 4 January 2010.

Carers

The Carer's Emergency Respite scheme has been well received and new weekly carer's surgeries are being held at the Look-In each Friday. The addition of the family and carer support worker employed by the Stroke Association will serve to improve advice and assistance to those caring for people who have experienced strokes.

Following the launch of the PCT Carers Respite Grant, 14 carers have received funding to provide short breaks from caring, examples have included art classes, practical help and transport.

Partnership Working

A revised Continuing Healthcare Protocol is about to be signed with Berkshire East PCT and will include a joint six month review of all checklists submitted.

The Community Support & Development Service Manager has joined the Joint Strategy Group of the Strategic Health Authority and is working with both the Stroke Association and Bracknell Forest Voluntary Action on delivery of the Stroke Strategy.

Performance and Resources

ICT

Extensive work has continued on the introduction of a new case management system for Adult Social Care, in particular Data Migration.

The Training Programme has been in place since November 2009 and incorporates both Recording and Viewing courses for staff. To date

Recording Courses

- 8x 3 day Recording Course completed
- 60 staff received the training
- 7 courses still to complete before end of February 2010
- 40 staff still expected to attend until end of Feb 2010

2 hour Viewing Sessions

- 14 sessions scheduled for Jan/Feb 2010
- 14 courses remain to be completed before end of February 2010
- 68 staff expected to attend until end of February 2010
- 118 staff still expected to attend

Finance

The main activity in the last quarter has been monitoring the 2009-10 budget and finalising preparations for 2010-11. The expenditure reductions agreed by CMT in the last period to contain the Council's overall expenditure for the current year within budget are being closely monitored and are on target to be achieved. In addition to these planned savings, other expenditure reductions have occurred against the unpredictable demand led services that are expected to generate significant cost reductions. More information on this is set out in the Financial Summary at Annex B.

The Executive's budget proposals for 2010-11 have now been published and include provision to fund the anticipated increase in costs arising from demographic growth and the on-going costs of existing clients. A number of expenditure reductions are also proposed and plans are being put in place to ensure their implementation.

The main pieces of developmental work progressed this period continue to relate to the pilot arrangements around extending self directed support, in particular in testing and refining the Resource Allocation System, and the ongoing work associated with the implementation of the new Adult Social Care IT system. This has involved further detailed staff training, and accelerated work around data migration from current systems and making preparations for new system set ups. In addition to these items, so preliminary costing work has commenced around the financial implications of free homecare for some people as set out in the Personal Care at Home Bill and the consultation on the new Contributions Policy has begun.

Human Resources

The first meeting of the Berkshire group of InLAWS (Integrated Local Area Workforce Strategy) was held resulting in opportunities for collaboration on workforce issues across Berkshire. This incorporates the workforce requirement of 'Putting People First'.

Further work has been undertaken in preparation for the Vetting and Barring Scheme. This includes reviewing the recruitment papers to ensure they are compliant with the scheme requirements. There HR team has seen a high level of HR support on casework during the period.

Performance and Governance

In addition to day to day performance tasks, the Performance team has supported the routine Performance Action Group meetings with the Community Mental Health Team and the Community Team for People with Learning Disabilities. The team have continued to work on data quality and supported preparation for the implementation of the new Integrated Adult System. A Carers Survey has been undertaken which has involved developing and sending a survey out to over 700 carers in Bracknell Forest.

Section Two: Progress against Service Plan

Annex C provides details of performance against relevant National Indicators this quarter, as well as an update on the operational risks identified in the Service Plan. The original Social Care & Learning Service Plan for 2009/10 contained 69 detailed actions to be completed in support of the 13 Medium-Term Objectives. Of these, 21 have been assigned to the new Adult Social Care & Health Department (including two which have been assigned to both new departments).

Annex C also provides information on progress against each of these detailed actions; all actions were achieved or on target at the end of Quarter 3 (✓), with none causing concern (✗).

Section Three: Resources

Staffing

The roles and induction arrangements for the personal facilitators under the personalisation pilot are being reviewed. As a result, any gaps identified can be incorporated for future appointments. Work has commenced on the Skills for Care Project in assessing the impact of the personalisation agenda on the support functions. This will involve assessing the competencies and skills required for the posts.

The first meeting of the Berkshire group of InLAWS (Integrated Local Area Workforce Strategy) has met. This will identify how the plans and strategies to implement personalisation and the 'Putting People First' agenda will be maintained. The group had good representation with 5 of the 6 Berkshire authorities in attendance. The objective of the session was to investigate areas where the unitaries could work together to resolve common workforce issues. The three key areas identified were:

1. Relationships with Health/PCT
2. Leadership development across the workforce - wider workforce was discussed to include PVI
3. Market development - ensuring we have the right people with the right skills available in the market - to include traineeships/ recruitment processes etc.

Further cross Berkshire discussions will be had to identify opportunities to share good practice and collaborate where gaps are identified.

As part of the InLAWS project a self assessment has been undertaken within Bracknell Forest against the key themes of 'Putting People First':

1. Leadership
2. Recruitment, retention and career pathways
3. Workforce remodelling and commissioning
4. Workforce development
5. Joint and integrated working between social and health care and other services
6. Workforce regulation – assuring public safety and raising standards of care in the social care workforce

These will form some of the actions under the future workforce strategy.

Due to the recent high level of HR case work a training need was identified for the role of an investigating officer. A training session has been held on investigating officer training. This has seen attendance from a selection of managers across the department and will ensure a higher degree of confidence in undertaking investigations as and when they are required.

Although recruitment activity has slowed down prior to the Christmas period there has still been 10 recruitment activities. This includes the appointment to the Head of Adult Safeguarding. This has proved a particularly difficult post to fill and, following two unsuccessful attempts, a local agency assisted the process. This resulted in an appointment being made. A review of the recruitment process has been undertaken

which will result in a stream lining of certain aspects of the process. This will be rolled out early 2010. Plans are being made to attend a social worker recruitment day at Buckinghamshire New University. This will assist in promoting Bracknell Forest for newly qualified social workers.

The work in preparation of the Vetting and Barring Scheme continues in time for the schemes introduction from July 2010. This includes reviewing recruitment procedures and ensuring communications on the scheme throughout the council and through our workforce partners.

The council are currently undertaking a job evaluation project which involves measuring and evaluating posts within departments. This will see the involvement of staff within the department over the coming months.

Budget

See Annex B for more detailed information on:

Revenue Budget

Annex B1	Summary financial position
Annex B2	Budget virements
Annex B3	Budget variances
Annex B4	Summary of in-year savings by service area

Capital Budget

Annex B5	Summary financial position and scheme status and target
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Revenue

Current approved budget

The 2009-10 budget reported in the last period was £24.720m. The cash budget controlled by the Department amounted to £22.189m with £2.531m of recharges from other Departments and accounting adjustments.

As reported last month, the disaggregation of the Performance and Resources (PAR) budgets that support both Adult Social Care and Health and Children Young People and Learning Departments was underway so that financial information could be reported correctly under the new Council structure. This work is now complete and is summarised below, together with other virements relating to the restructure and other changes in budget responsibilities.

Table: Current approved budget (incorporating PAR)

Item	Amount £'000s
Approved cash budget last period	22,189
<u>Changes this period:</u>	
Electricity and gas allocations	12
Employer national insurance allocations	-1
One-off costs in modernising in-house homecare service	29
From CYPL for Director, Chief Officers and Personal Assistant.	166
Re-allocation of costs from PAR	1,397
Current budget this period	23,792

Provisional outturn

The last report set out that the Council was facing significant pressures, mainly as a result of the change in the economy, with significant reductions in income from investments and leisure services and therefore a range of in-year savings were agreed. These pressures have increased during the period which has necessitated a second review of budgets and identification of further savings. The Department, including the relevant PAR budgets, are now managing savings of £0.488m, as set out below in the following table.

Table: Current approved budget (incorporating PAR)

Budget Theme	Amount £m
Managed savings on Devolved Staffing Budgets	0.138
Managed savings on operational, non-pay expenditure	0.120
Residential support	-0.100
Non-residential support	0.100
Additional PCT funding	0.120
Prior year adjustments	0.110
Total	0.488

Other monitoring information forecasts a number of significant changes as costs have generally reduced and amounts of external income increased. The most significant areas relate to individuals with Learning Disabilities as follows:

- Additional income of £0.280m is now anticipated from the Primary Care Trust as new individuals receive financial support for their health needs. This almost compensates for the £0.330m of PCT income previously withdrawn.
- The rate of increase in new clients and the average cost of support have both been lower than forecast when the budget was set. This reduces the previous cost forecast by £0.215m
- The impact of outstanding costs from 2008-09 were previously over stated by £0.150m

The overall year end outturn forecast, including the savings plan items is for an under spending of £0.968m which is an increase of £0.812m on the amount reported in the last period.

Capital

Current approved budget

The 2009-10 budget remains unchanged from the last period at £0.844m.

Provisional Outturn

A number of schemes are now being finalised with greater certainty now being available on probable costs and for one scheme, the feasibility study into options around the Carers Accommodation Strategy, a saving of £0.037m is anticipated.

Complaints received

No. Rec'd Q3	Nature of complaints	Action taken and lessons learned
1	Complaint regarding care received in residential care.	Complaint being investigated.
1	Complaint received from family regarding poor communication received and lack of continuity re staff involved.	Reasons given regarding 'changeover' of staff and regular contact ongoing. Monitoring in place with line manager.
1	Complaint regarding discharge from residential care into hospital.	Complaint is being investigated.
1	Complaint in respect of discharge from nursing home into hospital.	Complaint is being investigated.
1	Ombudsman	Ombudsman declined involvement until complaint fully investigated.

So far this year, a total of 10 complaints have been received in Adult Social Care.

Compliments Received

29 compliments were received during the 3rd quarter. 19 of these were received by the Community Response and Reablement Team, 5 for Older People & Long Term Conditions, 4 for Personalisation and 1 for Performance & Resources for good PC reporting and progress made on financial assessments.

Internal audit assurances

No internal audit reports were issued with a limited assurance opinion this quarter.

Section Four: Forward Look

Adults and Commissioning

Learning Disabilities

A report requesting approval for a Nominations Agreement with Windsor Housing will be presented to Executive. This will support the work on the re-provision of registered care homes, in line with the previously agreed LD Strategy and will represent significant progress in assisting people lead ordinary lives.

Mental Health

The plan following the Supporting People review of Mental Health contracts to further develop the support provided to individuals living at Glenfield, and to other people in the community, will be agreed, and implementation commence.

Safeguarding

A review of relevant local residential care homes and nursing homes will commence to ensure that all are complying with the requirements of the Deprivation of Liberty Safeguards.

Subject to usual checks, the new Head of Adult Safeguarding will take up post on 8th March 2010.

Specific training tailored for Senior Managers and the members of the BF Safeguarding Adults Partnership Board will be implemented in March .

Commissioning

A Joint Commissioning model has been drafted and will be further developed for approval by the Council and the PCT.

The Head of Joint Commissioning is leading on the work to establish the impact on the Council of the Government's initiative to introduce Free Personal Care

Personalisation

The initial pilot ends at the end of January, and the three month evaluation will commence. This will then inform, amongst other things:-

- Policy and procedure developments
- Workforce strategy
- Communications strategy
- Commissioning plans

Other

A bid was made against the PSA16 Innovations Fund for staff to address the key areas of accommodation and employment for:-

- Adults with mental health issues
- Adult with learning disabilities
- Care leavers
- Offenders

The bid was shortlisted, and will be presented to the Regional panel on 25th January.

Older People and Long Term Conditions

Community Support and Well-being

A proposal will go to the Executive in January recommending a review of day service provision as part of the Personalisation Agenda.

Downside Resource Centre will continue to provide a service from Heathlands for the next few months. Owing to these additional demands, coupled with the possibility of a wide ranging review of day service provision as a whole, no additional targets have been agreed for the next quarter.

The In house Community Support & Well-being / Long Term Conditions will use the recently agreed changes to staff rotas in order to double the number of support workers available during periods of highest demand and will continue to support the use of Barnett Court to reduce admissions to long-term care.

Community Support & Well-being / Dementia will sustain the recent increase in people supported through changes to rotas and transfer of some people back to external provider in line with the team's original ethos and will continue to deliver a high standard quality assurance programme.

An inspection of both services is due in Q4.

Older People and Long Term Conditions

The OPLTC Team will continue to work with the Personalisation Pilot in order to identify the best means of meeting the targets set for moving people from traditional methods of assessment and service delivery to supported self-assessment and individual budgets.

The implementation of the new IT system (IAS) will place considerable additional demands on resources during the third and fourth quarters of 2009-10 as in addition to the lengthy training involved, there will continue to be considerable pressure for systems testing and data-cleansing.

Business Support Team (BST)

The BST will continue to play an important role in the implementation of IAS, with staff taking on the additional data cleansing necessary to support the successful migrations of data from SWIFT to the new data-base.

Community Response and Reablement

Community Response and Reablement

The Implementation of the IT system is a key challenge as reflected new electronic record – IAS – across the team, including writing processes for the team, staff training on using the system, and maintaining data input following 'go-live' in Q4.

Implement changes to performance and quality report for the Intermediate Care partnership Board prior to implementation of IAS system.

Review of the data collected by Speech and language service within CR&R and work with Community Health Services to ensure value for money in relation to the demand for the service.

Review the Falls Service within CR&R and having in place an action plan on what is needed to start running the falls clinic and falls programme

Review Front desk contact with memory clinic to support dementia strategy and dementia care pathway

The Bridgewell Centre

A leaflet will be developed promoting the service and will be circulated within the local health economy. The aim is to improve direct referrals from the community thereby reducing or avoiding hospital admissions

A complete audit of staff training needs has been undertaken and staff are booked to attend various sessions commencing 2010.

Ladybank

All staff will receive mandatory safeguarding and fire training.

Emergency Duty Team (EDT)

Specialist training days have been booked to be delivered February 2010. All EDT staff to be trained up to level 1 & 2 Child and Adult Safeguarding. A review of the rota within EDT will enable a more visible management presence when team is on duty. Work will be undertaken with ICT to develop a more robust EDT database.

EDT will 'go live' with Windsor and Maidenhead data base for both children and Adults in February 2010.

Other

Drugs and Alcohol Action Team (DAAT)

Following establishment of the SPUDS Group (Support for People Using Dangerous Substances) they will be working to develop their own constitution. The aim is that the group will work with the DAAT and service providers in order to undertake reviews of service provision as well as providing advice and information for people new to services. The group will be supported by the newly recruited Community Development Worker.

The DAAT will submit the treatment plan for 2010/2011 in January 2010. The final plan will be submitted in March following assessment by a regional panel including members from the National Treatment Agency, Department of Health, Government Office South East and the Home Office.

A range of documents are under development and will be sent out for consultation to partner agencies prior to submission. All new documents to be published on Bracknell Forest Website.

Performance and Resources

ICT

The final round of user testing on the new Adult Social Care IT system is scheduled for mid January. Final preparation for the go live shut down weekend is in the planning stages and on schedule for go live.

Finance

More detailed monitoring will be required to check that the measures implemented to ensure the Council's budget does not over spend deliver the expected outcomes.

The expenditure reductions proposed for the 2010-11 budget will be reviewed to ensure they are on target for implementation, together with an assessment of whether any other significant budget risks exist.

Work will also be ongoing around the extension of self directed support, where in particular, the outcomes from the consultation to implement the new proposed Contributions Policy will need to be reviewed and decisions taken on the new Policy. Further systems set-up, training and data migration activities will be undertaken around the new Adult Social Care IT system as well as designing new budget monitoring reports.

Human Resources

Key areas for HR during quarter 4:

- Continue to focus on opportunities through the Integrated Local Area Workforce Strategy (InLAWS) project.
- Preparation for the implementation of the Vetting and Barring Scheme
- Supporting management through the organisational change protocol
- Skills for Care project

Performance and Governance

Tasks in the coming quarter include supporting the preparation of Service Plans, working with the Corporate Centre on the development and delivery of PARIS (the new performance management system), continuing to work with the implementation of the new Integrated Adults System and undertaking an Equipment Survey with users of the service.

Property

The accommodation strategy for the department will be taken forward as part of the Council's Corporate Accommodation Strategy including a review of the occupation and use of the town centre offices.

Annex A: Staffing information

Staffing Levels

	Establishment Posts	Staffing Full Time	Staffing Part Time	Total Posts FTE	Vacant Posts	Vacancy Rate
Adult Social Care and Health	318	210	93	233.93	15	4.71
Performance & Resources	88	59	23	75.02	6	6.81
Department Totals	406	269	116	308.95	21	5.17

Staff Turnover

For the quarter ending	31 December 2009	2.14
For the year ending	31 March 2010	8.58

Total turnover for BFC, 2008/09: 13.7% excluding schools
 Total turnover for local authorities in nationally 2007/08: 15.2%
 (Source: Chartered Institute of Personnel and Development survey 2008)

Sickness Absence

Staff Sickness

Section	Total staff	Number of days sickness	Quarter 2 average per employee	Projected annual average per employee
Adult Social Care and Health	303	864	2.85	11.40
Performance & Resources	82	68.5	1.19	4.78
Department Totals (Q2)	385	932.5	2.42	
Projected Totals (09/10)	406	3730		9.18

Comparator data	All employees, average days sickness absence per employee
Bracknell Forest Council 08/09	5.7 days
All sectors employers in South East 2008 (Source: Chartered Institute of Personnel and Development survey 2008)	7.6 days

Adult Social Care and Health – The number of sickness absence in the quarter incorporates 11 instances of long term sickness absence. This equates to 442 days (51.15%) of the total absence for the quarter. These cases are being dealt with under the absence management arrangements. If you deduct the long term sickness absence from the totals, then this equates to an average of 1.44 days absence per quarter.

Annex B: Financial information

Annex B1 (ASC&H)

ADULT SOCIAL CARE AND HEALTH DEPARTMENT - NOVEMBER 2009									
	Original Cash Budget	Virements & Budget C.Fwds	NOTE	Current Approved Budget	Spend to Date %	Variance Over/(Under) Spend	Variance This Period	NOTE	Variance Supported by CMT
	£000	£000		£000	%	£000	£000		£000
ADULT SOCIAL CARE AND HEALTH DEPARTMENT									
Director	516	70	c, d	586	19%	0	0		0
	516	70		586	19%	0	0		0
CO - Adults and Commissioning									
Mental Health	1,870	-64		1,806	59%	0	0		0
Learning Disability	8,022	-616	b	7,406	56%	-465	-645	z	180
Commissioning	404	54		458	58%	0	0		0
	10,296	-626		9,670	57%	-465	-645		180
CO - Older People and Long Term Conditions									
Physical Disability	2,158	24	b	2,182	78%	90	90	s	0
Older People	8,984	507	a, b	9,491	71%	-50	-50	4	0
Drugs Action Team	34	56		90	114%	0	0		0
	11,176	587		11,763	73%	40	40		0
CO - Performance and Resources									
Leadership and Support Team	0	198	e	198	0%	0	0		0
Information Technology Team	0	191	e	191	37%	-25	-25	s	0
Property and Admissions	0	103	e	103	54%	0	0		0
Performance Management	0	172	e	172	143%	-5	-5	s	0
Finance Team	0	509	e	509	74%	-25	-25	s	0
Human Resources Team	0	112	e	112	70%	0	0		0
	0	1,285		1,285	45%	-55	-55		0
In year savings target	0	488	e	488	0%	-488	-152	f	-336
TOTAL ASC&H DEPARTMENT CASH BUDGET	21,988	1,804		23,792	62%	-968	-812		-156
TOTAL RECHARGES & ACCOUNTING ADJUSTMENTS	2,531	344		2,875	0%	0	0		0
GRAND TOTAL ASC&H DEPARTMENT	24,519	2,148		26,667	55%	-968	-812		0
Memorandum items:									
Devolved Staffing Budget				10,444		-25	-25		0

Annex B1 (PAR)

PERFORMANCE AND RESOURCES BRANCH - NOVEMBER 2009									
	Original Cash Budget	Virements & Budget C/Fwds	NOTE	Current Approved Budget	Spend to Date %	Variance Over/(Under) Spend	Variance This Period	NOTE	Variance Supported by CMT
	£000	£000		£000	%	£000	£000		£000
<u>PERFORMANCE AND RESOURCES BRANCH</u>									
Leadership Team and Support	0	0	a	0	0%	0	0		0
Office Services	94	-94	a	0	0%	0	0		0
Information Technology Team	524	-524	a	0	0%	0	0		0
Admissions and Property Team	442	-442	a	0	0%	0	0		0
Performance Management and Governance Team	432	-432	a	0	0%	0	0		0
Finance Team	937	-937	a	0	0%	0	0		0
Human Resources Team	374	-374	a	0	0%	0	0		0
School related expenditure	259	-259	a	0	0%	0	0		0
	3,062	-3,062		0	0%	0	0		0
In year savings target	0	0	a	0	0%	0	107		-107
TOTAL BRANCH CASH BUDGET	3,062	-3,062		0	0%	0	107		-107
TOTAL RECHARGES & ACCOUNTING ADJUSTMENTS	0	0		0	0%	0	0		0
GRAND TOTAL PAR BRANCH	3,062	-3,062		0	0%	0	107		-107
Memorandum items:									
Devolved Staffing Budget				0		0	0		0

Adult Social Care and Health Virements and Budget Carry Forwards

Note	Total	Explanation
	£'000	
		<u>DEPARTMENTAL CASH BUDGET</u>
	201	Changes approved last period
		<u>Structural Changes Fund</u>
a	29	Up to £0.084m one-off redundancy costs associated with the modernisation of home care were agreed by the Employment Committee in December 2008. £0.049m has previously been released and a further £0.029m has also now been released from the Structural Changes Fund relating to some late redundancy charges and previously miscoded amounts.
		<u>Inter committee virements</u>
		Budget requirements have now been confirmed for the new electricity and gas contracts and the impact on employer national insurance contributions from staff car park charges that have previously been held in the Corporate Contingency.
b	12	Electricity and gas allocations
c	-1	Employer national insurance allocations
		<u>Departmental re-organisation</u>
d	166	The budget for some management costs in ASCH is currently held within CYPL to reflect the previous Departmental structure. Funds have now been transferred to reflect current organisational set up.
e	1,397	A number of budget virements have been processed to reflect the new Departmental Structure that requires the re-allocation of budgets to and from Performance and Resources budgets.
	1,804	Total
		<u>DEPARTMENTAL NON-CASH BUDGET</u>
	2,531	Amount approved last period
		<u>Revised recharges from other Departments</u>
f	344	Recharges from other Departments have been recalculated to reflect current year usage and also the new Departmental structure.
	2,875	Amount agreed last month.
	2,875	Total

Performance and Resources Virements and Budget Carry Forwards

Note	Total	Explanation
	£'000	
		<u>BRANCH CASH BUDGET</u>
	280	Changes approved last period
		<u>Departmental re-organisation</u>
a		A number of budget virements have been processed to reflect to new Departmental Structure that requires the re-allocation of Performance and Resources budgets.
	140	From CYPL for Chief Officer and Personal Assistant.
	70	From CYPL for transfer in responsibility for Local Safeguarding Children's Board.
	-2,155	Re-allocation of costs to CYPL
	-1,397	Re-allocation of costs to ASCH
	-3,062	Total
		<u>BRANCH NON-CASH BUDGET</u>
	0	Total original budget
	0	Total

Adult Social Care and Health Budget Variances

Note	Reported variance	Explanation
	£'000	
		<u>DEPARTMENTAL BUDGET</u>
1	-156	Amount reported last period - ASCH.
	-57	Amount reported last period through PAR.
		<u>Second in-year savings plan</u>
		A second package of in-year savings measures have been agreed by CMT. This is divided between CYPL and PAR to reflect the set up when the savings were agreed. Further details are set out in the in-year savings Annex.
1	-40	ASCH related
1	-55	PAR related
		<u>CO - Adults and Commissioning</u>
2	-280	A £0.330m forecast over spend has previously been reported against Learning Disability as a result of the PCT reviewing eligibility to Continuing Health Care funding for high cost service users. However, since then, the PCT has agreed funding for new clients which will result in an extra £0.280m funding being received.
2	-215	In addition, throughout the year, forecasts have been made in respect of the rate of increase in cases anticipated in the Purchasing Plan through transition clients, older carers and reviews that are likely to result in cost increases as needs of some clients increase. Whilst there have been cost increases, it is now clear that this will be at a lower rate than expected when the budget was set. Furthermore, there have been numerous changes to the profile of service users within residential accommodation and supported living which have resulted in an overall reduction in anticipated costs.
2	-150	A final variance is reported on the impact of prior year bills that have yet to be paid. As a result of a review of the impact that provisions for 2008-09 liabilities will have in the current year it has become apparent that the estimated costs for certain residential contracts have previously been overstated and will be £0.150m lower. This over estimate affects approximately 60 people with gross costs of around £4m.

Note	Reported variance	Explanation
	£'000	
		<u>CO - Older People and Long Term Conditions</u>
3	90	The overall number of people with Physical Disabilities receiving funding for support needs through a direct payment has not changed significantly, with approximately 50 people choosing by this method. However changes to the support needs of individuals has significantly changed and overall net expenditure which is forecast to exceed budget by £0.090m.
4	50	The Department provides a range of support to older people and their carers in the community to enable them to live at home and avoid more expensive and (for the service user) less desirable residential care. There has been significant pressure on these budgets, in particular short term residential respite care which has shown a significant increase in forecast costs compared to 2008/09. Net overall costs on respite care have increased by £0.040m compared to last year and other related costs - such as Aids and Adaptations are also contributing to a pressure of £0.050m in total.
4	-100	As a consequence of a reduction in the number of older people being accommodated in residential and nursing home placements, there is expected to be a £0.077m cost reduction against these budgets. Furthermore, a number of other budgets, including direct payments and homecare are also showing smaller reductions.
		<u>CO - Performance and Resources</u>
5	-55	A number of savings are anticipated in Finance, Performance and Governance, and IT Teams. The saving in Finance and Performance and Governance mainly relate to staffing, with non-staffing savings occurring in IT.
	-968	Grand Total Departmental Budget
		<u>DEPARTMENTAL NON-CASH BUDGET</u>
	0	No variances to report
	0	Grand Total Departmental Non-Cash Budget

Performance and Resources Budget Variances

Note	Reported variance	Explanation
	£'000	
	-107	<p><u>BRANCH BUDGET</u></p> <p><u>In-year savings plan</u></p> <p>Amount agreed last period</p> <p><u>Departmental re-organisation</u></p> <p>All variances previously reported under PAR are now included in returns for CYPL and ASCH.</p>
	50	CYPL
	57	ASCH
	0	Grand Total Branch Budget
		<u>BRANCH NON-CASH BUDGET</u>
	0	No variances to report
	0	Grand Total Branch Non-Cash Budget

Adult Social Care and Health (now incorporating PAR)

In year savings

Note	Total	Explanation
	£'000	
		<u>DEPARTMENTAL CASH BUDGET</u>
	-336	Amount reported last period - CYPL.
	-57	Amount reported last period through PAR.
		<u>Second in-year savings Plan</u>
		<u>CO – Adults and Commissioning</u>
	-40	Managed savings on Devolved Staffing Budgets
		<u>CO - Performance and Resources</u>
	-15	Managed savings on Devolved Staffing Budgets across a number of Teams.
	-40	Managed savings on operational, non-pay expenditure. This relates to building maintenance.
	-488	Total

Annex C5

Adult Social Care and Health Capital Monitoring										
2009-10 monitoring at 30 November 2009										
Cost Centre Description	Approved Budget for the year	Cash Budget 2009/10	Expenditure to date	Current commitment	Amount left to Spend	Estimated Total Funding Required for the year	Cash Budget 2010/11	(Under) / Over Spend against approved budget	Key Target for 31 March	Current status of the project including changes to Cash Profile
	(£'000)	(£'000)	(£'000)	(£'000)	(£'000)	(£'000)	(£'000)	(£'000)		
Schemes commenced prior to 2009/10										
ASC - Care Management Replacement Programme	472.4	392.3	238.3	117.5	154.0	392.3	80.1	0.0	New system live.	Data migration in progress. Go live planned for February
Adult Social Care IT Infrastructure	44.7	20.0	0.0	0.0	20.0	20.0	24.7	0.0	In progress.	Business case being prepared
ASC - Electronic Social Care Record	94.8	94.8	94.0	0.0	0.8	94.8	0.0	0.0	Complete.	Corporate Services managed project. Implementation by February
ICT projects	612.0	507.1	332.3	117.5	174.8	507.1	104.8	0.0		
CAPITAL PROGRAMME - DEPT CONTROLLED [schemes b/fwd from prior year(s)]	612.0	507.1	332.3	117.5	174.8	507.1	104.8	0.0		
Percentages			65.5%	23.2%	34.5%	100.0%		0.0%		
Schemes commenced 2009/10 and rolling programmes										
Improving the Care Home Environment	1.3	1.3	0.1	0.0	1.2	1.3	0.0	0.0	In progress.	Requirement investigation and prioritisation.
Carers Accommodation Strategy - Feasibility	42.0	42.0	0.0	0.0	42.0	5.0	0.0	-37.0	Complete.	Feasibility study complete.
Mental Health Grant	134.0	50.0	0.0	0.0	50.0	50.0	84.0	0.0	In progress.	Requirement investigation and prioritisation.
Social Care Grant	50.4	40.0	41.0	3.6	0.0	40.0	10.4	0.0	In progress.	Requirement investigation and prioritisation.
Improvements and capitalised repairs	4.7	4.7	5.1	0.0	0.0	4.7	0.0	0.0	In progress.	Requirement investigation and prioritisation.
Adult Social Services	232.4	138.0	46.2	3.6	93.2	101.0	94.4	-37.0		
CAPITAL PROGRAMME - DEPT CONTROLLED [current year schemes]	232.4	138.0	46.2	3.6	93.2	101.0	94.4	-37.0		
Percentages			33.5%	2.6%	67.5%	73.2%		-15.9%		
CAPITAL PROGRAMME - DEPT CONTROLLED [all schemes]	844.3	645.1	378.5	121.1	268.0	608.1	199.2	-37.0		
Percentages			58.7%	18.8%	41.6%	94.3%		-4.4%		

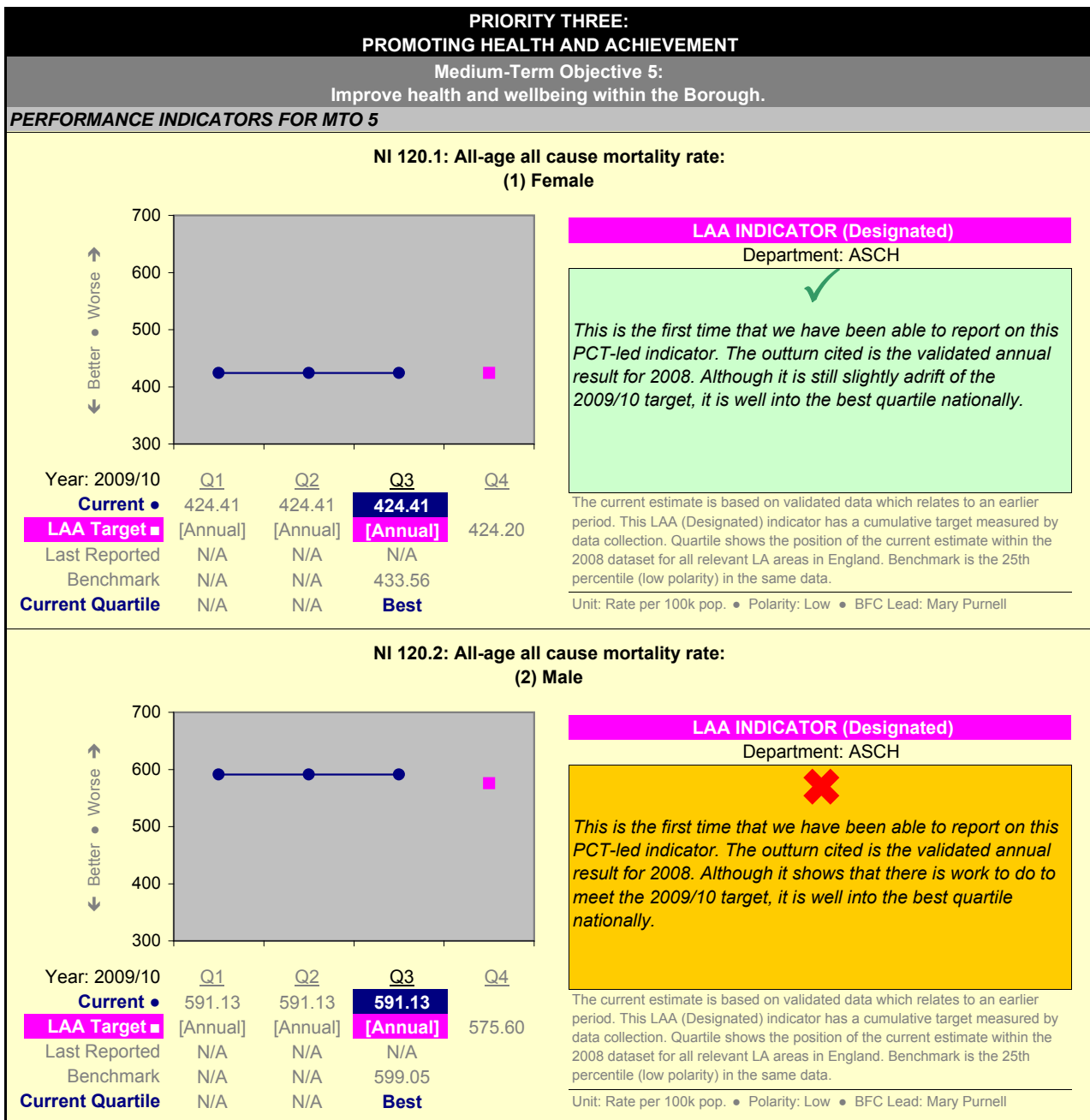
Annex C: Corporate strategic risks owned by Director of Adult Social Care & Health

RISK SHORT NAME	LINK TO MTOS	RISK SCORE	ACTION ALREADY IN PLACE	FURTHER ACTION TO ADDRESS RISK	TARGET DATE	PROGRESS ON FURTHER ACTION TO ADDRESS RISK	COMMENTARY
Demand led services	5, 6, 7 & 9	B2	<p><u>Older People</u></p> <ul style="list-style-type: none"> Purchasing Plan for Older People's Health and Social Care sets out the assumptions and approach to delivery of services. This includes estimates of population ages through to 2025 based on ages of current population to determine demand for services. This includes projections of numbers of people requiring residential care places. extra – care housing, support at home. etc. 	<p><u>Older People</u></p> <ul style="list-style-type: none"> Projections in Purchasing Plan for Older People to be updated annually <p><u>Mental Health</u></p> <p>Economic downturn could impact on numbers of residents with mental health issues and increase level of domestic abuse. Demand levels are being monitored.</p>	Ongoing	<p>✓</p>	<p>This will be achieved by 31/3 using 08/09 figures. Indications to date are an increase in OP ongoing support.</p>

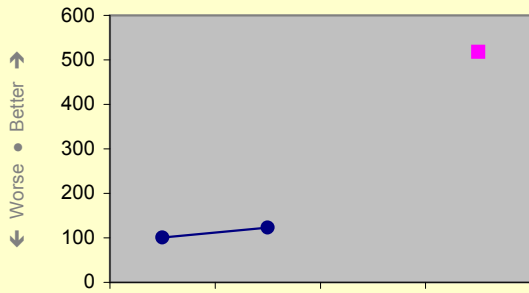
Transforming Adult Social Care risks (main risks are not enough people in the community wanting to be part of the Transforming pilot, over commitment of staff resources and RAS Allocations differing from assessment of needs	C4	<u>Transforming Adult Social Care</u> Communication strategy being reviewed including development of promotional DVD and holding an event with families, recruitment to the staff champion role from existing teams. To address staff resource risk, monitoring of progress/delays and escalate difficulties to Programme Board as appropriate. To address RAS, desktop exercise followed by revisiting weightings	Ongoing	✓	Monitoring ongoing
		<u>People with Disabilities</u> <ul style="list-style-type: none"> Transition Policy for People with Disabilities covers policy for young people with learning disabilities, disabilities or complex needs as they approach adulthood and responsibility moves from 	Ongoing	✓	Monitoring ongoing.

			<p>Children's Services to Adult Community care Services.</p> <ul style="list-style-type: none"> • Impact of transition on budgets considered at DMT as part of budget pressures discussions <p><u>Packages of Care</u></p> <p>Continued close monitoring of the revenue budget and projected costs around costed packages of care will remain in place. Early warning in relation to changes in demand and projected spend will be highlighted as soon as they become apparent.</p>				<p>Undertaken for 09/10 budget build.</p> <p>This is being done and reported in budget variations. Workload by ASC Management team.</p>
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Annex D: Performance against Indicators, Actions and Risks



NI 123: Stopping smoking



LAA INDICATOR (Designated)

Department: ASCH

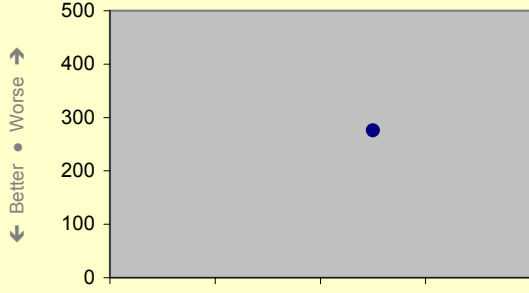
This is the first time that we have been able to report on this PCT-led indicator. The numbers represent actual quitters rather than rates. These quarterly outturns are only available a quarter in arrears.

Year: 2009/10	Q1	Q2	Q3	Q4
Current	101	123	N/A	
LAA Target	[Annual]	[Annual]	[Annual]	518
Last Reported	N/A	N/A	N/A	
Benchmark	N/A	N/A	N/A	
Current Quartile	N/A	N/A	N/A	

The current estimate is based on validated data which relates to an earlier period. This LAA (Designated) indicator has a cumulative target measured by data collection. Quartile and benchmarking information is not currently available for this indicator.

Unit: Rate per 100k pop. ≥16 yrs • Polarity: High • BFC Lead: Mary Purnell

NI 39: Rate of hospital admissions per 100,000 for Alcohol Related Harm



CAA Indicator (non-LAA)

Department: ASCH

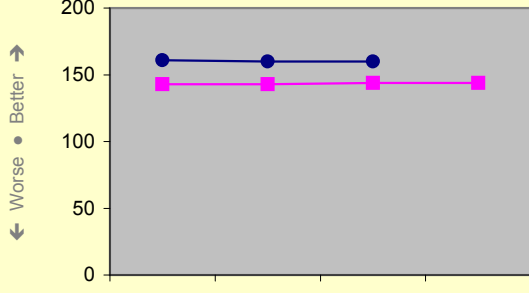
This is the first time that we have been able to report on this PCT-led indicator. The current estimate shows the position at June 2008. Updated figures will be available for Quarter 4.

Year: 2009/10	Q1	Q2	Q3	Q4
Current	N/A	N/A	276.0	
Local Target	N/A	N/A	N/A	N/A
Last Reported	N/A	N/A	N/A	
Benchmark	N/A	N/A	332.2	
Current Quartile	N/A	N/A	Best	

The current estimate uses validated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection. Quartile shows the position of the current estimate within the latest available dataset for all relevant LA areas in England. Benchmark is the 25th percentile (low polarity) in the same data.

Unit: Rate per 100k pop. • Polarity: Low • BFC Lead: Mary Purnell

NI 40: Number of drug users recorded as being in effective treatment



CAA Indicator (non-LAA)

Department: ASCH

Latest available figures show 160 people in treatment. This means that we are exceeding the target of 143 by 17 people (12%).

Year: 2009/10	Q1	Q2	Q3	Q4
Current	161	160	160	
Local Target	143	143	144	144
Last Reported	143	143	143	
Benchmark	N/A	N/A	95	
Current Quartile	N/A	N/A	Best	

The current estimate is based on latest available data which relates to an earlier quarter. This CAA indicator has a complex cumulative target measured by data collection. Quartile shows the position of the current figure within the 2008/09 dataset for all relevant LAs in England. Benchmark is the 75th percentile in the same figures.

Unit: Number • Polarity: High • BFC Lead: Mira Haynes

NI 113.1: Prevalence of chlamydia in under 25 year olds:

(1) Percentage of the resident population aged 15-24 accepting a test/screen for chlamydia



CAA Indicator (non-LAA)
Department: ASCH/CYPL

No data is yet available for this sub-indicator, but data on the substantive part is now available (see NI 113.2 below).

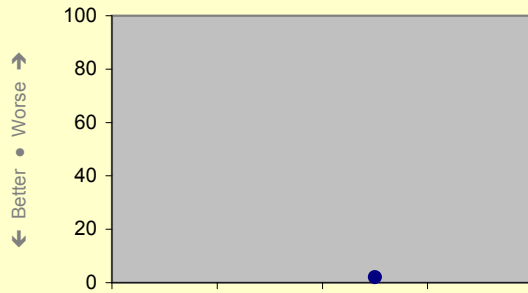
Year: 2009/10	Q1	Q2	Q3	Q4
Current ●	N/A	N/A	N/A	N/A
Local Target ■	N/A	N/A	N/A	N/A
Last Reported	N/A	N/A	N/A	N/A
Benchmark	N/A	N/A	N/A	N/A
Current Quartile	N/A	N/A	N/A	N/A

No estimated outturn is currently available for this indicator. No outturn on this indicator has yet been formally reported or recorded. Benchmarking and quartile information is not currently available for this indicator.

Unit: % ● Polarity: High ● BFC Lead: Mary Purnell

NI 113.2: Prevalence of chlamydia in under 25 year olds:

(2) Number of positive diagnoses for chlamydia in the resident population aged 15-24 years



CAA Indicator (non-LAA)
Department: ASCH/CYPL

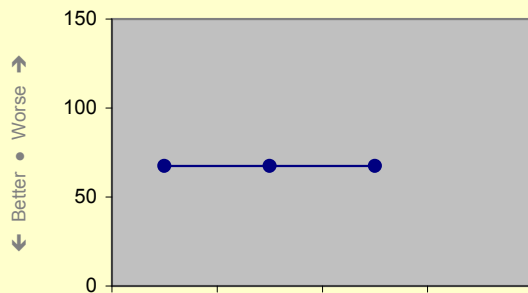
This is the first time that we have been able to report on this PCT-led indicator. The outturn cited is for the 12-month period to June 2008.

Year: 2009/10	Q1	Q2	Q3	Q4
Current ●	N/A	N/A	2	N/A
Local Target ■	N/A	N/A	N/A	N/A
Last Reported	N/A	N/A	N/A	N/A
Benchmark	N/A	N/A	N/A	N/A
Current Quartile	N/A	N/A	N/A	N/A

The current estimate is based on validated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection Quartile and benchmarking information is not currently available for this indicator.

Unit: % ● Polarity: Low ● BFC Lead: Mary Purnell

NI 121: Mortality rate from all circulatory diseases at ages under 75



CAA Indicator (non-LAA)
Department: ASCH

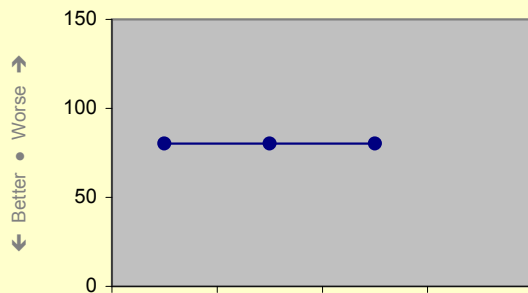
This is the first time that we have been able to report on this PCT-led indicator. The outturn cited is the validated annual result for 2008.

Year: 2009/10	Q1	Q2	Q3	Q4
Current ●	67.5	67.5	67.5	N/A
Local Target ■	N/A	N/A	N/A	N/A
Last Reported	N/A	N/A	N/A	N/A
Benchmark	N/A	N/A	65.0	N/A
Current Quartile	N/A	N/A	Third	N/A

The current estimate is based on validated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection Quartile shows the position of the current estimate within the 2008 dataset for all relevant LA areas in England. Benchmark is the median (low polarity) in the same data.

Unit: Rate ● Polarity: Low ● BFC Lead: Mary Purnell

NI 122: Mortality from all cancers at ages under 75



CAA Indicator (non-LAA)
Department: ASCH

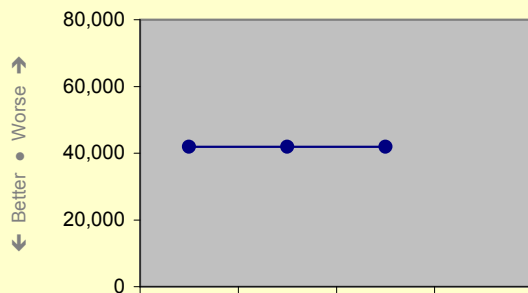
This is the first time that we have been able to report on this PCT-led indicator. The outturn cited is the validated annual result for 2008.

Year: 2009/10	Q1	Q2	Q3	Q4
Current ●	80.3	80.3	80.3	
Local Target ■	N/A	N/A	N/A	N/A
Last Reported	N/A	N/A	N/A	N/A
Benchmark	N/A	N/A	98.2	
Current Quartile	N/A	N/A	Best	

The current estimate is based on validated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection Quartile shows the position of the current estimate within the 2008 dataset for all relevant LA areas in England. Benchmark is the 25th percentile (low polarity) in the same data.

Unit: Rate ● Polarity: Low ● BFC Lead: Mary Purnell

NI 134: The number of emergency bed days per head of weighted population



CAA Indicator (non-LAA)
Department: ASCH

This is the first time that we have been able to report on this PCT-led indicator. The outturn cited is the validated outturn for 2007. The 2008 outturn is not yet available.

Year: 2009/10	Q1	Q2	Q3	Q4
Current ●	41,894	41,894	41,894	
Local Target ■	N/A	N/A	N/A	N/A
Last Reported	N/A	N/A	N/A	N/A
Benchmark	N/A	N/A	N/A	N/A
Current Quartile	N/A	N/A	N/A	

The current estimate is based on validated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection Quartile and benchmarking information is not currently available for this indicator.

Unit: Number of bed days ● Polarity: Low ● BFC Lead: Mary Purnell

ACTIONS IN SUPPORT OF MTO 5

		<u>Due Date</u>	<u>Owner</u>	<u>Comments</u>
5.1	Develop and implement a comprehensive health strategy for the Borough with partners, which identifies clear priorities and actions to address local health inequalities and to improve health and wellbeing.			
5.1.1	Develop a local stroke strategy and purchasing plan to ensure good use of grant monies from Department of Health.	May 2009	ASCH	✓ <i>Following further consultation, final strategy is complete with an agreed purchasing plan.</i>
5.1.2	Develop a clear pathway for agency responses to the national end of life strategy through work with the PCT.	Mar 2010	ASCH	✓ <i>A local subgroup has been formed to develop local EOL care options as well as contributing to Berkshire East.</i>
5.2	Work with health partners to secure more outpatient and diagnostic facilities in the Borough.			
5.2.1	Work in partnership with the PCT to develop an urgent care centre within Bracknell as a response to the PCT commissioning plan.	Mar 2011	ASCH	✓ <i>ASC is part of urgent care programme board. Urgent care centre will be part of Healthspace.</i>
5.4	Produce an annual report on public health.			
5.4.1	Work with partners to produce the Joint Strategic Needs Assessment (JSNA).	Oct 2009	ASCH	✓ <i>In progress and due to be presented to Executive shortly.</i>

Medium-Term Objective 7:
Seek to ensure that every resident feels included and able to access the services they need.

ACTIONS IN SUPPORT OF MTO 7

	<u>Due Date</u>	<u>Owner</u>	<u>Comments</u>
7.5	Implement a disability equality scheme and gender equality scheme, and implement the Council's race equality scheme.		
7.5.1	Mar 2010	ASCH CPS CXO CYPL ECC	✓ ASCH: In progress. CPS: Proceeding satisfactorily. Both the DES and GES have been extended to September 2011 and will be refreshed. CXO: In progress. CYPL: In progress. ECC: In progress.
7.8	Work within Bracknell Forest Partnership to show continuous improvement in equalities and diversity in the Council and its services, and achieve the equivalent of Level 3 of the Equality Standard.		
7.8.1	Mar 2010	ASCH CPS CXO CYPL ECC	✓ ASCH: Reported separately within PMR. CPS: EIAs published this quarter for access to the democratic process and public engagement, heating plant maintenance procurement and registration services. CXO: Ongoing. CYPL: Reported separately within PMR. ECC: We published EIAs in the quarter for Emergency Plan Policy, Forest Care Lifeline and Homelessness Service.

PRIORITY FOUR:
CREATE A BOROUGH WHERE PEOPLE ARE, AND FEEL, SAFE

Medium-Term Objective 8:
Reduce crime and increase people's sense of safety in the Borough.

PERFORMANCE INDICATORS FOR MTO 8

ACTIONS IN SUPPORT OF MTO 8

	<u>Due Date</u>	<u>Owner</u>	<u>Comments</u>
8.5	Reduce the number of people, particularly young people, abusing drugs and alcohol.		
8.5.1	Sep 2009	ASCH	✓ Completed.

Medium-Term Objective 9:
Promote independence and choice for vulnerable adults and older people.

PERFORMANCE INDICATORS FOR MTO 9

NI 130: Social Care clients receiving Self Directed Support

Year: 2009/10	<u>Q1</u>	<u>Q2</u>	<u>Q3</u>	<u>Q4</u>
Current	7.2	7.3	8.2	TBC
LAA Target	[Annual]	[Annual]	[Annual]	
Last Reported	N/A	N/A	N/A	
Benchmark	N/A	N/A	N/A	
Current Quartile	N/A	N/A	N/A	

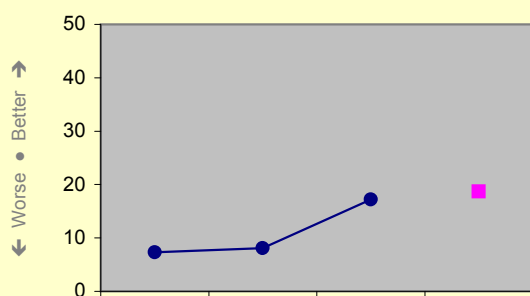
LAA INDICATOR (Designated)
Department: ASCH

This indicator represents the numbers of adults and carers receiving self-directed support across the year as a percentage of clients receiving community-based services and carers receiving carer's services aged ≥18. The target for all LAs is 30% of all relevant people, to be achieved by March 2011.

The current estimate is based on unvalidated current data. This LAA (Designated) indicator has a complex cumulative target measured by data collection. Benchmarking and quartile information is not currently available for this indicator because the definition has recently changed from a rate per 100,000 population to a percentage of relevant people.

Unit: % • Polarity: High • BFC Lead: Zoë Johnstone

NI 135: Carers receiving needs assessment or review and a specific carer's service, or advice and information



LAA INDICATOR (Designated)
Department: ASCH

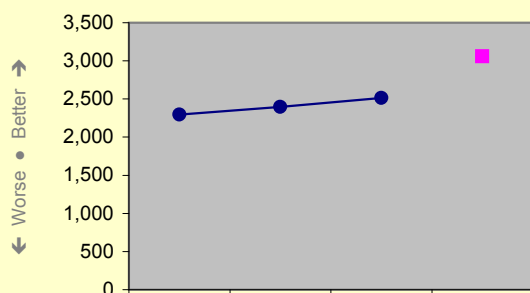
This is a cumulative indicator where the total builds across the year, and the target will be met. A workstream is well underway to ensure that all carers and joint assessments taking place are correctly recorded within each care group. Targets have also been set for each care group.

Year: 2009/10	Q1	Q2	Q3	Q4
Current	7.3	8.1	17.2	
LAA Target	[Annual]	[Annual]	[Annual]	18.7
Last Reported	16.4	16.4	16.4	
Benchmark	N/A	N/A	19.1	
Current Quartile	N/A	N/A	Second	

The current estimate is based on unvalidated current data. This LAA (Designated) indicator has a cumulative target measured by data collection. Quartile shows the approximate position of the current figure, on a YTD basis, within the 2008/09 dataset for all relevant LAs in England. Benchmark is the approximate 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Mira Haynes

NI 136: People supported to live independently through social services (all adults)



LAA INDICATOR (Designated)
Department: ASCH

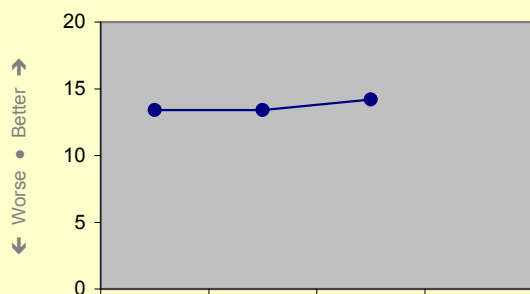
Following a change in definition, there is highly unlikely that this indicator target will be met. Discussions have taken place with the Audit Commission and GOSE to try to renegotiate the target, with no success. It is worth noting that the council's published outcome for this indicator in 2008/09 was 16th in the country.

Year: 2009/10	Q1	Q2	Q3	Q4
Current	2,295	2,395	2,515	
LAA Target	[annual]	[annual]	[annual]	3,060
Last Reported	N/A	N/A	N/A	
Benchmark	N/A	N/A	N/A	
Current Quartile	N/A	N/A	Best	

The current estimate is based on unvalidated current data. This LAA (Designated) indicator has a complex snapshot target measured by data snapshot. Quartile shows the approximate position of the current figure, on a YTD basis, within the 2008/09 dataset for all relevant LAs in England. Benchmark is the approximate 75th percentile in the same data.

Unit: Rate per wghtd 100k pop • Polarity: High • BFC Lead: Zoë Johnstone

NI 146: Adults with learning disabilities in employment



LAA INDICATOR (Designated)
Department: ASCH

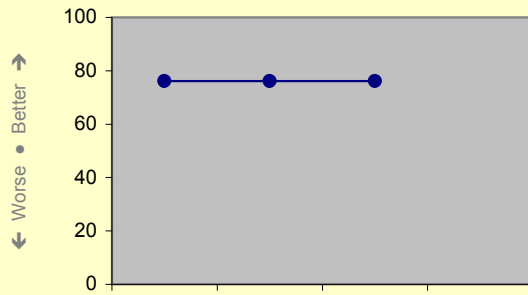
The LAA target has now been negotiated at 14.6% for 2010/11, and we are in line to meet this target.

Year: 2009/10	Q1	Q2	Q3	Q4
Current	13.4	13.4	14.2	
LAA Target	[annual]	[annual]	[annual]	TBC
Last Reported	14.2	13.4	13.4	
Benchmark	N/A	N/A	9.7	
Current Quartile	N/A	N/A	Best	

The current estimate is based on unvalidated current data. This LAA (Designated) indicator has a complex cumulative target measured by data collection. Quartile shows the position of the current estimate within the 2008/09 dataset for all relevant LAs in England. Benchmark is the 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Nick Ireland

NI 124: People with a long-term condition supported to be independent and in control of their condition



Year: 2009/10	Q1	Q2	Q3	Q4
Current	76.2	76.2	76.2	N/A
Local Target	N/A	N/A	N/A	N/A
Last Reported	N/A	N/A	N/A	N/A
Benchmark	N/A	N/A	78.8	
Current Quartile	N/A	N/A	Second	

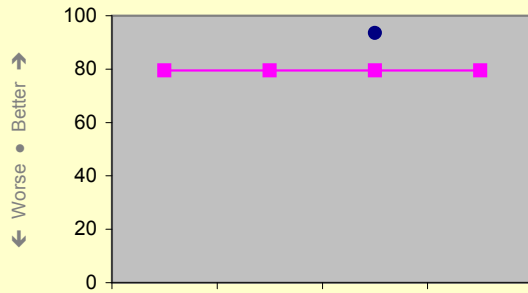
CAA Indicator (non-LAA)
Department: ASCH

This is the first time that we have been able to report on this PCT-led indicator. The outturn cited is the validated outturn for 2007/08. The 2008/09 outturn is not yet available.

The current estimate is based on validated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection Quartile shows the position of the current estimate within the 2007/08 dataset for all relevant LA areas in England. Benchmark is the 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Mary Purnell

NI 125: Achieving independence for older people through rehabilitation/intermediate care



Year: 2009/10	Q1	Q2	Q3	Q4
Current	N/A	N/A	93.5	N/A
Local Target	79.5	79.5	79.5	79.5
Last Reported	N/A	N/A	N/A	N/A
Benchmark	N/A	N/A	85.0	
Current Quartile	N/A	N/A	Best	

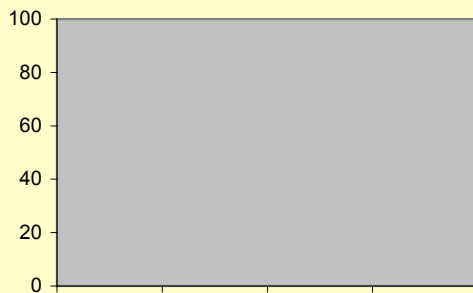
CAA Indicator (non-LAA)
Department: ASCH

Following work to collate the discharges from 1 July, the figure for 91 days status for October and November is 93.5%. The 2009/10 target for this indicator is 82% which means that we are exceeding target.

The current estimate is based on outdated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection Quartile shows the position of the current figure within the 2008/09 dataset for all relevant authorities in England. Benchmark is the 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Mira Haynes

NI 127: Self reported experience of social care users



Year: 2009/10	Q1	Q2	Q3	Q4
Current	N/A	N/A	N/A	N/A
Local Target	[Deferred]	[Deferred]	[Deferred]	[Deferred]
Last Reported	N/A	N/A	N/A	N/A
Benchmark	N/A	N/A	N/A	N/A
Current Quartile	N/A	N/A	N/A	N/A

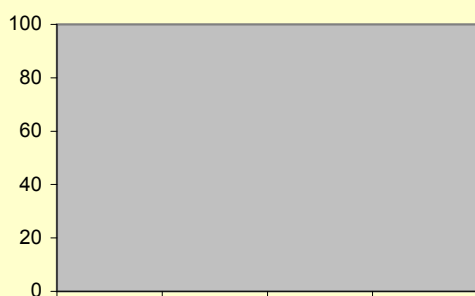
CAA Indicator (non-LAA)
Department: ASCH

Introduction of this indicator has been deferred by central government, and its final technical definition is still awaited.

No estimated outturn is currently available for this indicator. This CAA indicator has a snapshot target measured by survey. No outturn for this indicator has yet been formally reported or published. Benchmarking and quartile information is not currently available for this indicator.

Unit: % • Polarity: High • BFC Lead: Mira Haynes

NI 128: User reported measure of respect and dignity in their treatment



CAA Indicator (non-LAA)
Department: ASCH

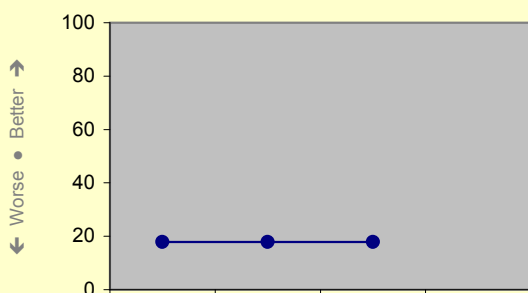
Introduction of this indicator has been deferred by central government, and its final technical definition is still awaited.

Year: 2009/10	Q1	Q2	Q3	Q4
Current ●	N/A	N/A	N/A	
Local Target ■	[Deferred]	[Deferred]	[Deferred]	[Deferred]
Last Reported	N/A	N/A	N/A	
Benchmark	N/A	N/A	N/A	
Current Quartile	N/A	N/A	N/A	

No estimated outcome is currently available for this indicator. This CAA indicator has a snapshot target measured by survey. No outcome for this indicator has yet been formally reported or published. Benchmarking and quartile information is not currently available for this indicator.

Unit: % • Polarity: High • BFC Lead: Mira Haynes

NI 129: End of life care -- access to appropriate care enabling people to be able to choose to die at home



CAA Indicator (non-LAA)
Department: ASCH

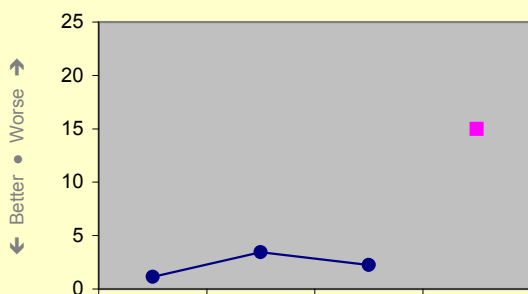
This is the first time that we have been able to report on this PCT-led indicator. The outcome cited is the validated outcome for 2007. The 2008 outcome is not yet available.

Year: 2009/10	Q1	Q2	Q3	Q4
Current ●	17.8	17.8	17.8	
Local Target ■	N/A	N/A	N/A	N/A
Last Reported	N/A	N/A	N/A	
Benchmark	N/A	N/A	18.2	
Current Quartile	N/A	N/A	Worst	

The current estimate is based on outdated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection. Quartile shows the position of the current figure within the 2007 dataset for all relevant authorities in England. Benchmark is the 25th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Mary Purnell

NI 131: Delayed transfers of care



CAA Indicator (non-LAA)
Department: ASCH

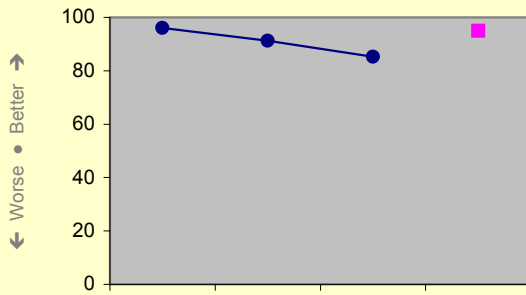
Performance in Quarter 3 was 2.25 delayed transfers per 100,000 adult population. This is below the target maximum (where lower is better) and well into the best quartile nationally.

Year: 2009/10	Q1	Q2	Q3	Q4
Current ●	1.15	3.46	2.25	
Local Target ■	[Annual]	[Annual]	[Annual]	15.00
Last Reported	N/A	N/A	N/A	
Benchmark	N/A	N/A	5.85	
Current Quartile	N/A	N/A	Best	

The current estimate is based on unvalidated current data. This CAA indicator has a complex cumulative target measured by data collection. Quartile shows the position of the current outcome, on an approximate YTD basis, within the 2008/09 dataset for all relevant LAs in England. Benchmark is the 25th percentile (low polarity) in the same data.

Unit: Rate per 100k pop. ≥18 yrs • Polarity: Low • BFC Lead: Sally Palmer

NI 132: Timeliness of social care assessment (all adults)



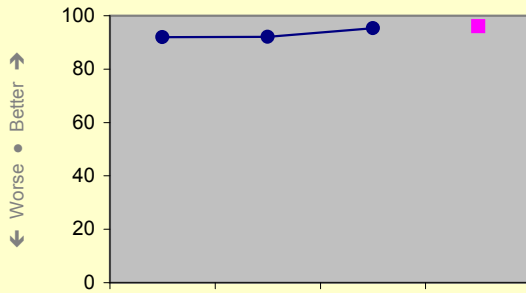
CAA Indicator (non-LAA)
Department: ASCH

Current performance has been compromised due to work on the implementation of the new IT system. This will be rectified as go-live exception reports are tidied, and the annual target is likely to be met.

The current estimate is based on unvalidated current data. This CAA indicator has a complex cumulative target measured by data collection. Quartile shows the position of the current estimate within the 2008/09 dataset for all relevant LAs in England. Benchmark is the 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Mira Haynes

NI 133: Timeliness of social care packages following assessment



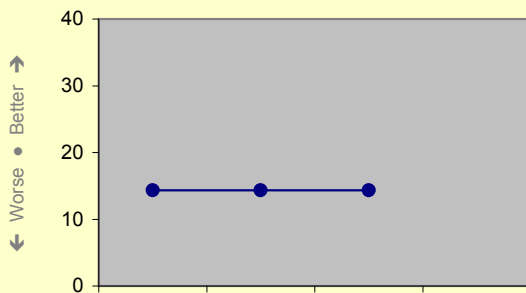
CAA Indicator (non-LAA)
Department: ASCH

Performance has improved due to data validation. This indicator is expected to hit target.

The current estimate is based on unvalidated current data. This CAA indicator has a complex cumulative target measured by data collection. Quartile shows the position of the current estimate within the 2008/09 dataset for all relevant LAs in England. Benchmark is the 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Mira Haynes

NI 137: Healthy life expectancy at age 65



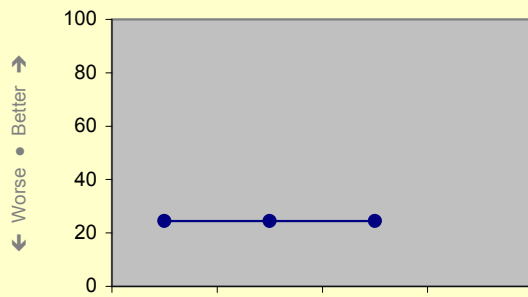
CAA Indicator (non-LAA)
Department: ASCH

This is the first time that we have been able to report on this PCT-led indicator. The outcome cited is the validated outcome for 2001. No updated data has yet been made available by government.

The current estimate is based on validated data which relates to an earlier period. This CAA indicator has a cumulative target measured by data collection. Quartile shows the position of the current figure within the 2001 dataset for all relevant LAs in England. Benchmark is the 75th percentile in the same data.

Unit: Number of years • Polarity: High • BFC Lead: Mira Haynes

NI 139: The extent to which older people receive the support they need to live independently at home



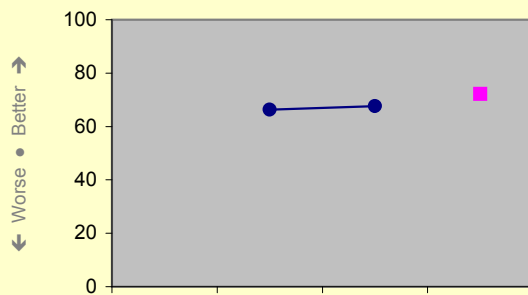
CAA Indicator (non-LAA)
Department: ASCH

This is the final adjusted figure from the 2008 Place Survey. The national dataset is now available for comparison, as detailed in the figures provided here. A Place Survey workshop was held with BFP in December, where actions were identified. These are currently being validated by these partnerships for inclusion in a joint action plan.

The current figure uses validated final data. This CAA indicator has a snapshot target measured by survey. The 'last reported' figure is from the Place Survey (October 2008). Quartile shows the position of the current figure within the 2008 figures for all local authorities in England. Benchmark is the 25th percentile in the same figures.

Unit: % • Polarity: High • BFC Lead: Mira Haynes

NI 145: Adults with learning disabilities in settled accommodation



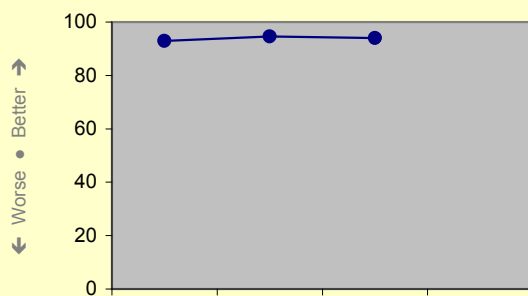
CAA Indicator (non-LAA)
Department: ASCH

✘
Currently there are 211 people in settled accommodation, which translates to 67.6% against a quarterly target of 70.0%. Further developments are anticipated with the re-provision project which would see settled accommodation exceed target. The details will be the subject of an Executive decision in March, and significant improvements will be achieved.

The current estimate is based on unvalidated current data. This CAA indicator has a complex cumulative target measured by data collection. Quartile shows the position of the current estimate within the 2008/09 dataset for all relevant LAs in England. Benchmark is the 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Nick Ireland

NI 149: Adults receiving secondary mental health services in settled accommodation



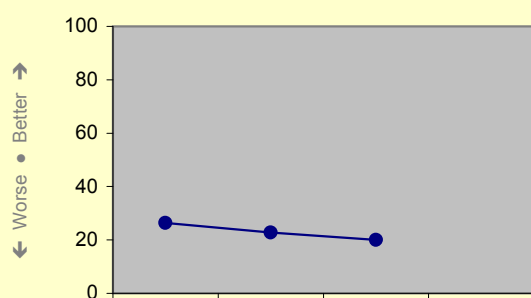
CAA Indicator (non-LAA)
Department: ASCH

Current performance of 94.0% exceeds last year's performance of 80.7%. This has been attributed to more robust data recording.

The current estimate is based on unvalidated current data. This CAA indicator has a complex cumulative target measured by data collection. Quartile shows the position of the current estimate within the 2008/09 dataset for all relevant LAs in England. Benchmark is the 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Tony Dwyer

NI 150: Adults receiving secondary mental health services in employment



CAA Indicator (non-LAA)
Department: ASCH

Performance is broadly in line with Quarter 2, and is well into the best quartile nationally.

Year: 2009/10	Q1	Q2	Q3	Q4
Current	26.38	22.79	20.00	N/A
Local Target	N/A	N/A	N/A	N/A
Last Reported	14.60	14.60	14.60	
Benchmark	N/A	N/A	6.70	
Current Quartile	N/A	N/A	Best	

The current estimate is based on unvalidated current data. This CAA indicator has a complex cumulative target measured by data collection. Quartile shows the position of the current estimate within the 2008/09 dataset for all relevant LAs in England. Benchmark is the 75th percentile in the same data.

Unit: % • Polarity: High • BFC Lead: Tony Dwyer

ACTIONS IN SUPPORT OF MTO 9		<u>Due Date</u>	<u>Owner</u>	<u>Comments</u>
9.1	Modernise services for vulnerable adults and older people by reducing reliance on residential care and improving access to community-based services.			
9.1.1	Successfully implement the transfer of responsibility for the social care of adults with a learning disability from the NHS to the local authority and develop an appropriate redistribution formula.	Mar 2010	ASCH	✓ <i>A proposal will be put to the PCT Board in January.</i>
9.1.2	Implement the commissioning strategies for people with dementia and people with a sensory impairment.	Mar 2010	ASCH	✓ <i>Multi-agency strategy group meets bi-monthly to implement the agreed action plan for delivery.</i>
9.2	Increase the number of people having direct control of the budgets for their care.			
9.2.1	Review the workforce implications of the TASC pilot to ensure the workforce are appropriately developed and trained to deliver services effectively and develop a flexible framework to deliver the required outcomes.	Mar 2010	ASCH	✓ <i>The pilot commenced in July. In addition, information from other LAs has been reviewed to determine the likely implications of the personalisation agenda.</i>
9.2.2	Develop a pilot for transforming social care to test out resource allocation system and develop new ways of working.	May 2009	ASCH	✓ <i>The pilot was launched in July and has been receiving referrals since August. The pilot is on target to move to the evaluation phase by March.</i>
9.2.3	Ensure that appropriate policies and procedures (including the charging policy) are reviewed to ensure they reflect the requirements of the personalisation agenda.	Mar 2010	ASCH	✓ <i>The draft Fairer Contributions Guidance has been approved by the Executive Member for consultation.</i>
9.2.4	Develop resource allocation system to model impact of individual budgets on pilot group of clients receiving care.	Aug 2009	ASCH	✓ <i>Draft model in place. Allocations now made to relevant clients on the pilot.</i>
9.3	Develop a Borough-wide strategy for older people.			
9.3.2	Implement the actions from the older people's strategy.	Mar 2010	ASCH CPS CXO ECC	✓ <i>ASCH: Key tasks being developed for the whole strategy. CPS: Proceeding satisfactorily. CXO: Work is ongoing.</i>
9.4	Provide advice and support to vulnerable people to help maintain them in their own homes.			
9.4.1	Work with housing colleagues to develop an accommodation strategy for older people.	Sep 2009	ASCH	✓ <i>Housing strategy complete. Next step is for Older People vision.</i>
9.4.2	Explore the use of community TV as an alternative means of getting information to people about the support available.	Jul 2009	ASCH	✓ <i>Future topics to include support for victims of stroke.</i>

9.5 Provide support for carers by working with statutory and voluntary partners.				
9.5.1	Refresh the strategy for carers, working with partners and carers.	Apr 2009	ASCH	✓ Completed.
9.5.2	Implement the recommendations from the Members' working group on carers.	Jan 2010	ASCH	✓ Discussions underway with Age Concern regarding a creche-type service for older people.
9.5.3	Develop robust, practical and accurate data collection processes across a wide range of groups, produce advice and information in a range of appropriate formats, and use all communication channels to disseminate.	Mar 2010	ASCH	✓ It is anticipated that the new IAS system will collect data required, plus ongoing discussions with voluntary sector to agree data collection and dissemination of information and advice.
OPERATIONAL RISKS TO MTO 9			Owner	Progress on Mitigation Actions
9.1	TASC pilot too short to consider all the workforce implications. Mitigation: Review the workforce implications of the learning disabilities review. Review arrangements in other local authorities.		ASCH	Continuing to liaise with other LAs and with the personal facilitators. Revised/New Risk: None.
PRIORITY FIVE: VALUE FOR MONEY				
Medium-Term Objective 10: Be accountable and provide excellent value for money.				
ACTIONS IN SUPPORT OF MTO 10				
		<u>Due Date</u>	<u>Owner</u>	<u>Comments</u>
10.8	Implement all appropriate actions to ensure staff are in place with the right skills and capacity to deliver service outcomes and maximise service efficiency.			
10.8.1	Implement the actions due in 2009/10 in each departmental workforce plan.	Mar 2010	ASCH CPS CXO CYPL ECC	✓ CPS: Workforce planning actions being implemented in accordance with the programme. CXO: Ongoing. ECC: In progress. Managers continue to make preparations for employees retiring. A programme on customer service training started in Quarter 3 and continues into Quarter 4. ECC has delivered a programme of training courses to employees on safeguarding. Several more managers attended the Management Development Centre and drew up development programmes with their managers following the event.
OPERATIONAL RISKS TO MTO 10			Owner	Progress on Mitigation Actions
10.21	Expertise/availability of staff to undertake review of recruitment and retention. Mitigation: Early identification of challenging recruitment areas. Workforce planning to be implemented across Social Care & Learning. Engage colleagues with the LA/workforce as appropriate.		CYPL ASCH	Workforce planning session run to the SLG. Secondary returners course in operation since October. Revised/New Risk: None.
PRIORITY SIX: SUSTAIN ECONOMIC PROSPERITY				
Medium-Term Objective 12: Promote workforce skills				
ACTIONS IN SUPPORT OF MTO 12				
		<u>Due Date</u>	<u>Owner</u>	<u>Comments</u>
12.1	Contribute to the development of an appropriately skilled workforce through adult and community learning.			
12.1.1	Continue to ensure that employment opportunities exist for vulnerable people and hard-to-reach groups.	Mar 2010	ASCH	✓ Work is being undertaken to achieve National Indicator NI 146 targets.