

# Performance Monitoring Report

for

# Adult Social Care & Health

First Quarter 2010/11 April - June 2010

Portfolio holder: Councillor Dale Birch

Director: Glyn Jones

#### **Section One: Executive Summary**

#### Introduction by the Director of Adult Social Care and Health

This Quarter has seen a range of activity as projects, initiatives and opportunities which begun in 2009/2010 coming to fruition. Personalisation and Modernisation go hand in hand as support options are developed to meet people's needs.

There can be no getting away from the financial challenges being faced by both the department and the Council. This quarter saw some Area Based Grant (ABG) reductions being proposed in Adult social care with decisions taken in Quarter two.

Traditionally, Quarter one is when all of the statutory returns are returned to the Care Quality Commission (CQC) or 'The Information Centre", I am pleased to report that all of our returns were completed on time as required.

The next quarter will prove to be even more challenging with all of the changes to the Health Service and new responsibilities for Local Authorities which are signalled in the White Paper published in July. As Director of Adult Social Care and Health, I will be ensuring that we respond to the consultation documents and keep the Executive informed of progress and the need for appropriate decision making.

#### **Adults and Commissioning**

#### Learning Disabilities

Implementation of the programme for the re-provision of the homes accommodating people who previously lived in Church Hill House hospital continues. Some of the homes have de-registered with the remainder to follow in quarter 2. Each individual concerned will then have settled accommodation via a tenancy agreement, and an individual package of support.

The Green Machine a Community Interest Company (supported by BFBC) providing green space maintenance services, employing a mix of able and disadvantaged personnel has developed a new business plan responding to the present economic climate and working towards full independence. Consideration was given to a number of options, with the following course of action agreed: Partnership in gardening enterprises with Go-Gardeners in Wokingham and for Green Machine to relocate and merge with the recycling project, expanding into re-use and festival salvage. This will be implemented by the end of 2010.

#### Mental Health

The plan following the Supporting People review of Mental Health contracts is to further develop the support provided to individuals living at Glenfield, and to other people in the community. A key vacancy (Team Manager) has now been recruited to and the person has now taken up the role, they have already started developing an action plan to formally change the service delivery. Bracknell Forest Homes have engaged in this process and have identified some addition units within Glenfield that can be converted for tenancies, this will enable increased individual/independent accommodation that can have support hours provide as required.

#### Safeguarding

Under the Mental Capacity Act, the Deprivation of Liberty Safeguards (DoLS) relate to the protection of individuals who do not have the capacity to make certain decisions for themselves. On occasions, it is in an individual's best interests to be restricted in certain ways, or to have decisions made for them (e.g. serious medical treatment) and DoLS is a process for ensuring that any such actions or decisions are undertaken properly. The Council is responsible for such decisions for people living in Care Homes in Bracknell Forest, or funded by Bracknell Forest in other areas.

Nationally referral rates for authorising the deprivation of liberty were very low, and so we have undertaken a review of compliance in Bracknell Forest, which has lead to an action plan to ensure that local homes respond appropriately.

#### Commissioning

Work continued on the development of section 75 agreements with the Primary Care Trust (PCT). A Memorandum of Understanding on intermediate care and a Service Level Agreement (SLA) between the providers has been agreed. The process for developing a section 75 for Community Team for People with Learning Disabilities was presented and agreed at the Health and Social Care strategic board. The new arrangements for community meals continue to be developed. The preparatory work for the implementation of a jobs and homes pilot (formerly Public Service Agreement 16) has taken place. A strategy to develop options which help people to regain or retain their independence is being developed (Prevention Strategy).

#### Personalisation

Following the evaluation of the pilot, further developments have been made to the Resource Allocation System and the Supported Self Assessment Questionnaire to make them fit for purpose for rollout. The Evaluation Report has been agreed by the board along with a series of recommendations to embed personalisation across the department. An Information, Advice and Advocacy strategy has been developed and approved by the Board and Department Management Team (DMT). The Quarter one reporting to the Department of Health (DoH) has been completed and all national milestones have been met.

#### Other

The jobs and homes pilot addresses the provision of long term employment and settled accommodation for ex-offenders, care leavers, adults with learning disabilities and people with mental ill-health. We successfully bid for regional funding from the Innovations Fund to support this work (£50K), and detailed planning has commenced.

#### **Older People and Long Term Conditions**

#### Downside Resource Centre

The consultation on Downside Day Centre was thorough and inclusive, enabling people who attend the service, their carers, other people who use day services, other carers, care managers and the Downside Staff Team to rate the current service, identify issues they felt were important in the delivery of day activities and express their views regarding the centre's future. This was achieved through a series of public meetings and the use of a questionnaire. While the return rate on the latter was reasonable at just over 25%, for those who use Downside, 92% of questionnaires were returned. The responses will be used to shape the development of future community support.

The consultation concluded in mid-May and the Executive accepted the recommendation that the centre be re-provided. The current service which consists of sessions at the Open Learning Centre and Sandhurst Day Centre, along with various group excursions will conclude on 1st September.

#### Community Support & Wellbeing

The Dementia team has given notice to some people whose packages of care are deemed to be stable in order to provide short-term work with people leaving hospital and/or assessed as needing residential care, people on Section 17 leave from psychiatric hospitals, and people with dementia needing end of life care.

#### Heathlands Day Centre

The Capital Bid was successful and it is hoped that the work to reconfigure the building's interior will go out to tender in late July.

Meetings have taken place with Age Concern to agree a day support pathway for people with dementia. Once agreed this will ensure that people with complex dementia are transferred and attend Heathlands leaving spaces available at Age Concern for people with non-complex needs.

#### Heathlands Residential Home

Following submission of the AQAA, Heathlands received an unannounced inspection visit from CQC and were delighted to once again receive an excellent rating with particular focus being placed on the very positive feedback from people who use the service and their families. Some of the kitchen flooring has recently been replaced; further work will be carried out during 2011/12.

Plans are in progress to identify a pool of volunteers to provide support for activities.

In June staff and residents held a successful bring and buy sale which raised £300 for the resident's amenity fund, which will be used to fund activities and outings for the residents.

#### **Business Support Team**

The Business Support Team Manager assumed the responsibility for supervising Front Desk staff, this has increased consistency of direction and support for the business function within Older People and Long Term Conditions (OPLTC).

#### Older People and Long-term Conditions

The team's capacity to carry out reviews has been enhanced through a short-term secondment.

Work on the single carer's self-assessment has been delayed owing to the departure of the Bracknell Forest Voluntary Action Carer Development Worker, but it is planned that discussions will continue once we are clear on which documentation will interface successfully with the new IAS data-base.

There is currently a tender process for a new Handyperson Scheme, which will impact on the way minor adaptations are carried out.

#### Community Response and Reablement

Three safeguarding workshops were held for the team. These were led by the safeguarding lead for Bracknell and senior members of Community Response and Reablement. The purpose was to remind every member of the team (including all staff at the residential homes) on the process and to do some case studies.

The workshops were found to be very useful and informative and so it was decided that they will be part of a six month rolling programme for the team. The next set of workshops will be held in the autumn.

A Social worker has been allocated as a link to Frimley Park Hospital (where most hospital referrals come from). They will receive training on the IT system used in the hospital and will be given desk space in the office at the hospital.

The falls service has been restarted. It is consultant led with input from Occupational therapy, Physiotherapy, Nursing and Support workers. The clinic is held fortnightly at Skimped Hill Health Centre. Referrals come through Community Response and Reablement.[;The service will be reviewed after three months.

The team continues to work on the action plan for enhanced intermediate care and end of life service to go live in October 2010.

The provision of intermediate care services is in the process of being reviewed and strengthened to ensure that people are given what they need and that we use our resources as effectively as possible. We aim to improve on the outcomes people can expect from our services and the time it takes to achieve these.

The SLA between Berkshire East Community Health Service and Bracknell Council has been written and presented to the Intermediate Care Partnership Board. Members of the Board have taken the SLA back to their respective organisations for scrutiny before sign off can take place.

#### Bridgewell Centre

Staff are developing a proposal and action plan for the delivery of enhanced intermediate care and end of life services. This serviceis due to be rolled out October 2010, once completed the proposal will be presented to the Executive member.

#### Emergency Duty Team (EDT)

Two Part Time Assistant Team Managers have been recruited in line with the recommendations set out in the Windsor & Maidenhead Serious Case Review.

EDT has now met all the recommendations set out in the Serious Case Review, Windsor & Maidenhead.

A Benchmarking exercises along with customer satisfaction questionnaire are currently being undertaken, this will feed into the EDT review of services.

The Project Initiation Document has been completed and circulated to all Unitaries for sign off and agreement.

#### Drugs and Alcohol Action Team (DAAT)

The Adult Substance Misuse Treatment Plan for 2010/11 was signed off by the National Treatment Agency and has been published both locally and nationally.

The development of a Berkshire East Clinical Governance Framework is underway and several documents will be presented to the Berkshire East Substance Misuse Joint Commissioning Group for final sign off. The documents are being developed in association with all partners and stakeholders involved.

An initial bid for funding from the Big Lottery Fund to continue the Alcohol Arrest Referral Project was unsuccessful. However the bid is being revised and will be resubmitted during quarter two.

The revision of the Bracknell Forest substance misuse service directory is almost complete. Once all entries are checked and verified the directory will be published.

The Family and Friends Group is now meeting twice per month in response to the needs identified by members of the group.

Two people who are in recovery are working with provider staff to establish a Narcotics Anonymous meeting in Bracknell Forest as there are currently no local meetings.

#### **Performance and Resources**

Information and Communications Technology (ICT)

The implementation of the IAS system has been in place and working for the last few months. We are addressing issues with reporting which we are confident can be resolved with the proposed solution we will be rolling out shortly.

The planning work has started on introducing the next phase of the personalisation agenda.

#### Finance

With the start of the new financial year, a significant amount of time was devoted to setting up new budgets and updating monitoring papers. The expenditure reductions agreed for the 2010-11 base budget are being reviewed to ensure they are on target for implementation, together with checking the original cost increase assumptions to determine whether these are still valid. The delayed closure of Downside will create a financial pressure, but at this stage it is expected the additional cost can be met from within the overall resources of the Department. An assessment of whether any other significant budget risks exist is also being undertaken in an attempt to quantify potential amounts, their likelihood to occur and the probable timing. The 2009-10 accounts were also finalised and are subject to external audit review. The year end performance was a £1.653m under spend and arose mainly from a combination of reduced expenditure on care needs, improve contract prices, additional income and planned expenditure reductions that were required to contribution to the Council's inyear savings programme.

In addition to the normal routine monitoring work, a high level of activity has been devoted to assessing the implications for the Department from the in-year grant reductions announced by the Government during May and June. The direct impact was fairly minimal, but to help manage the Council's overall savings requirement, where many costs are committed through external contracts and staffing, so will be complex to achieve and require the following of due processes, options for cost reductions are being identified.

Work has also been ongoing around the extension of self directed support, where in particular, more work on the Resource Allocation System has been undertaken in the light of the outcomes from the personalisation pilot. Further systems set-up and validation activities have been completed around the new Adult Social Care IT system.

#### Human Resources

Further work has been undertaken in preparation for the Vetting and Barring Scheme. The introduction of the scheme has been delayed although there is an expectation that this will still be implemented in some form.

There has been some significant work activity in supporting the Council's job evaluation review project.

There has been support for the redundancies procedures with the closure of Downside and the reduction in the ABG.

#### Performance and Governance

The team have supported the Department in the completion of the self assessment process for Adult Social Care, and a key achievement in the last quarter has been the successful completion and submission of end of year returns all within statutory timescales.

There have been challenges around reporting from the IAS system and there is a workstream in place to resolve this. Support has been sought from suppliers Liquid Logic and report providers Igneous to move this forward.

The Council has worked with Berkshire East NHS on the development of performance reporting from the new performance IT systems in both organisations. The first reports for 2009/10 Quarter 4 and 2010/11 Quarter 1 have now been run off the system and the information is currently being validated for data quality.

Summary of Equality Impact Assessments
No Equality Impact Assessments were published this quarter.

#### **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. Adult Social Care & Health Service Plan for 2010/11 contains 53 detailed actions to be completed in support of the 13 Medium-Term Objectives.

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 1 ( $\checkmark$ ), with none currently causing concern (\*).

#### Section Three: Resources

#### **Staffing**

The work continued in preparation for the Vetting and Barring scheme. Further presentations have been held during the period only for the introduction to the scheme being put on hold pending a central government review. There is still an expectation that the scheme will be introduced but the coverage is set to significantly reduce.

The support with corporate activities has continued during the period. This includes the significant workload around the introduction of a new job evaluation scheme and the review of existing HR policies and procedures.

Due to a reduction in the ABG, the HR team have been involved in supporting the impact on staffing within the department. Although the direct impact on staff within the department has been limited, this has still involved the implementation of the redundancy procedure. This has been worked alongside the programme to close Downside where the team have been working to support management through the redundancy procedures. This will include a number of staff being redeployed through the department.

Work has commenced in establishing a programme of work to incorporate the recommendations of The Social Work Task Force. Amongst the 15 recommendations arising from this work includes the expectation for employees to undertake a health check of the current workforce. The preparation fro this will be established during quarter 2.

#### **Budget**

See Annex C for more detailed information on:

Revenue Budget

Annex C1 Summary financial position

Annex C2 Budget virements Annex C3 Budget variances

Capital Budget

Annex C4 Summary financial position and scheme status and target

#### Revenue

#### Current approved budget

The cash budget approved by the Council for the current financial year totalled £23.688m with £2.379m of recharges from other Departments and accounting adjustments.

There have been a number of changes to the cash budget this period:

- Additional S28a savings on budgets previously funded by the Primary Care Trust relating to people with Learning Disabilities -£0.330m
- One-off redundancy funding for Look In £0.025m

- Centralisation of transport budgets to the Integrated Transport Unit -£0.129m
- Share of £0.050m grant savings transferred to CYPL -£0.015m
- Adjustment to travel plan budgets with CYPL -£0.013m

In addition, a number of self balancing housekeeping virements, internal to ASCH have been made and these relate to:

- Revised grant notifications that require adjustments to expenditure and income profiles;
- Changes in anticipated spend against the former Section 28a;
- Changes in Chief Officer management responsibilities;
- Changes to the Devolved Staffing Budget to reflect current staffing establishments:
- Aligning various budgets to spending plans, including those where service delivery has changed from in-house to external provision or vice versa.

The final budget for the year therefore totals £25.604m, with £23.225m in cash and £2.379m in recharges and accounting adjustments.

#### Provisional outturn

At this early stage of the year, with numerous spending decisions yet to be taken or trends established, variances are only reported where they are certain, or there is the potential for a significant variance. On this basis, no variances are anticipated at this stage.

#### Capital

#### Current approved budget

The cash budget approved by the Council for the current financial year totalled £0.530m. Subsequent to this, the Executive agreed that the £0.532m unspent balance from 2009-10 be made available in the current year, making a revised total budget of £1.062m.

#### Provisional Outturn

No variances are anticipated at this stage.

#### Internal Audit Assurance

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

# **Complaints received**

There were 11 complaints received in quarter 1 from 10 separate complainants.

No. Rec'd Q1	Nature of complaints (bulleted list)	Action taken and lessons learned (bulleted list)
1	Issues relating to the Care Manager supporting the client.	Complaint upheld – Care Manager changed.
1	Complaint received regarding closure of Downside – no longer able to have a bath.	Complaint upheld – Alternative arrangements made.
1	Complaint regarding poor communication between Care Manager and client.	Complaint upheld – Communication improved.
1	Complaint regarding	Ongoing investigation.
	accommodation/placement	(the above 2 complaints were received from the same complainant on separate occasions)
1	Poor communication regarding discharge from Hospital to home.	Complaint upheld – Channels of communication improved between authorities.
1	Complaint regarding level of care received.	Not upheld – Reassessment of need provided.
1	Complaint regarding lunch time call missed by care provider.	Complaint upheld – due to human error. Contingency plans in place.
1	Concerns regarding service received by care provider.	Partially upheld – Review/monitoring of situation. By working together, services improved.
1	Regarding admission into Hospital.	Not upheld – Policies/procedures discussed/upheld.
1	Funding issues.	Ongoing investigation.
1	Placement issues.	Ongoing investigation.

#### **Compliments received**

The CR&R Team received 9 compliments in this quarter, 12 for the Older People & Long Term Conditions (7 of which were for Blue Badge applications).

The Personalisation Team received 1, as did the Team for Performance & Governance, 1 also for the Community Team for People with Learning Disabilities.

This gives a total of 24 compliments received.

#### Internal audit assurances

(Where internal audit carried out with limited or no assurance)

Service area	Issues with limited or no assurance and remedial action to be taken
[Awaited]	[Awaited]

#### Section Four: Forward Look

#### **Adults and Commissioning**

#### Learning Disabilities

The programme of reprovision of registered care homes will continue, and deregistration of all affected services will be completed on September 6th.

The Safe Place scheme will be implemented in July with the specific launch on July 22nd. This identifies "safe haven" shops and businesses in the town centres where people can go for support, should they feel at all threatened or unsafe whilst out. Staff in these places will have relevant numbers to call fro support (e.g. police, social services).

#### Autistic Spectrum Disorders

In response to the recent publication "Fulfilling and Rewarding Lives" (The National Strategy for adults with autism) a working group will be set up in July to develop a work plan towards developing a local commissioning strategy and delivery plan. These plans will be completed for approval by the end of March 2011.

#### Mental Health

Berkshire Healthcare NHS Foundation Trust has now implemented a new Patient Record IT system for the Community Mental Health Team for Older Adults, the implementation for the Community Mental Health Team (CMHT) will be commencing in November. This will continue to have implications for the Social Care records and performance reporting, plans to manage this are being continually developed and implemented. The Berkshire NHS Foundation Trust is continuing with its process change called 'Next Generation Care' (NGC) , a stake holder's event was held this month involving others for the first time in the NGC Programme. The Inpatient review under the NGC programme has developed to a stage, which now means the options will go out to public consultation in August.

#### Safeguarding

The action plan arising from the review of compliance with the DoLS will be implemented.

#### Commissionina

The full section 75 agreements will be constructed and agreement sought with both the PCT and the GP consortium ready for implementation in April 2011. The prevention strategy will be completed and work on the development of a new User led Organisation in Bracknell will be established.

The Community meals arrangement should be finalised and implemented. The new posts for the jobs and homes pilot will be recruited to and the pilot will begin.

#### Personalisation

A personalised approach to support planning with individuals is being roll out over the Summer to all community teams. Research is being undertaken in teams to inform workforce planning. The Department is confident that it will meet the national milestone for being able to offer all people supported by Adult Social Care, both new and existing people, a personal budget by October 2010.

#### **Older People and Long Term Conditions**

#### Community Support & Wellbeing

Front Desk will be realigned with a new duty function which will mean that there will be a dedicated duty section of Community Response and Reablement. The team will work with short term pieces of work, will take all safeguarding referrals, sign post people to services not provided by Bracknell Council, undertake full contact assessments (including use of FACs criteria) and refer people on to relevant services within the Council.

The Dementia Team will begin to offer intensive short-term support to people leaving hospital in order to maximise independent living and enhance individual's quality of life.

The Long-term Conditions Team will continue to support people with complex physical needs and to provide support for the Assessment Flat at Barnett Court, which despite some void periods, has proved highly successful in reducing admissions to long-term care.

#### Downside Resource Centre

As well as delivering savings, efficiencies realised will be used to develop a variety of voluntary sector activities, increase dementia day-care at Heathlands and support the establishment of a user-led service.

All of the people currently receiving a service from Downside will be supported to self-assess their needs and develop an individual support plan based on their needs and interests. A number of those attending have expressed a preference to remain at Sandhurst Day Centre following Downside's closure and we are in discussions with Sandhurst's management team to work out details.

It is expected that some of those currently accessing Downside will transfer to the expanded service at Heathlands. Indeed, some people already attend both Downside and Heathlands.

Staff at risk owing to the centre's closure have been encouraged to consider a variety of jobs available within the council and it is hoped that redundancies will be kept to a minimum.

#### Heathlands Day Centre

The internal reconfiguration will allow for a substantial increase in the number of people who can be supported each day. Removal of two interior walls, doors and glass screening and the moving of the current hair-dressing / laundry room will create a large, more open, main lounge and two further generous meeting areas on either side of the main corridor. Coupled with the music room which is being retained, this will allow the centre to offer a number of different activities according to individual interest. It is hoped that the projected work will also include a wet room with ceiling hoist which will enable the centre to better support people with complex physical needs. The planned works are due for completion in October.

Following completion of the building works, some of the funds freed up by the Downside re-provision will be used to recruit additional staffing to enable the centre's expansion.

#### Heathlands Residential Home

The home is currently undergoing some refurbishment and plans are now out to tender for the construction of two new wet rooms on the ground-floor level, which will do much to support the dignity and well-being of people with impaired mobility.

Further refurbishment of the upstairs lounge is due to be done in September by a group of volunteers from Boehringer Ingelheim who will be donating materials as well as time to enhance the home's environs.

Staff will undertake additional training this year on loss and bereavement with a special emphasis on supporting people living with the experience of dementia. It is planned that this training will be done under the new qualifications framework.

#### **Business Support Team**

The team will now be reconfigured to include administrative staff that heretofore worked with CR&R and the Community Support Teams. The expanded team will include business support staff from Bridgewell and Heathlands, as well as those employed in Front Desk. Staff will now be expected to learn one another's roles and work across the different services to ensure that business critical activities are not dependent on any one team member.

The team will continue to offer support for training administrators under the new qualifications strategy due to be implemented in September.

#### Older People and Long Term Conditions Team

OPLTC will be providing support to the newly developed Duty Team, by means of full-time occupational therapist and a part-time social worker. It is envisaged that the creation of a robust duty system will enable care managers to move people into monitoring, knowing that skilled staff will be immediately available in the event of an emergency. The new system is designed to problem-solve and staff will work for up to two weeks with individuals which should reduce revolving door referrals and free up OPLTC staff to begin working with supported self-assessment and person-centred support planning.

#### Community Response and Reablement

Multi disciplinary team meetings terms of reference will be revised and all staff will have received training and information reaffirming their roles in the reablement process. This will result in improved outcomes for people using the service and reviewing which will ensure people do not use the service longer than they should.

The team will continue to work on the action plan for enhanced intermediate care and more end of life care which will ensure that these services will go live in October 2010.

Support Workers will receive training in provision of simple items of equipment and will be working with people requiring a service in the community. They will continue to work with people at the end of life.

#### Bridgewell Centre

Vacant posts are to be advertised and filled thus reducing the need for bank and agency cover.

The medicines manager and the clinical governance lead from the PCT will be reviewing policies to ensure that the unit is compliant with clinical governance.

Current eligibility criteria for Bridgewell has been established and agreed. The criteria will be further reviewed to enable the introduction of enhanced intermediate care and end of life services.

#### Emergency Duty Team (EDT)

EDT will have access to all six unitary authority databases by the next quarter. Once completed, the unit will be the only one in the country to have access to as many databases.

The service review will reach stage 3 of the review which will lead to the creation of a cost effective, streamlined service in line with statutory responsibilities.

It is planned that the EDT management will visit 60 teams across the 6 unitary authorities by the next quarter in line with the Service Review.

#### DAAT

A training programme will be rolled out across Bracknell Forest and Berkshire East. The programme has been developed jointly with Slough and WAM to reduce duplication and achieve best value.

Provider staff will continue to work with people who attend DAAT to support the establishment of a Narcotics Anonymous meeting by identifying potential venues and attending meetings with them.

The Bracknell Forest Substance Misuse Service Directory will be published and made available to all to increase awareness of the service available and increase the number of new referrals.

A revised funding bid will be submitted to the Big Lottery Fund during quarter two.

All of the documents that make up the Berkshire East Clinical Governance Framework will be completed and signed off by the Berkshire East Substance Misuse Joint Commissioning Group by the end of quarter two.

#### **Performance and Resources**

#### **ICT**

We are continuing to work with our partners in Health to connect our IT systems together in order to help with the multi agency working across Bracknell.

#### Finance

More detailed work on projected budget monitoring variances will be undertaken for the coming quarter, ensuring spending plans are in place for all budgets and that these are being reviewed and services structure accordingly. Progress is also expected on detailed options and proposals on how the in-year savings requirements will be managed following the reductions in government grant funding.

The next quarter will also see initial workings on budget proposals for 2011-12, and these will need to take account of the much more challenging financial environment that the Department is likely to be working in.

Further developments are also planned around the Adult Social Care IT system where evaluations will be undertaken on options available to implement a mobile Financial Assessments process that will allow for people to know their likely financial

contribution to care (if required) at the end of the visit, and E-invoicing which will remove the need for paper invoices from providers, automating the payment process subject to built in validation processes. This period will also see the implementation of the new Fairer Contributions policy from August 2010, and this will result in changes in financial contributions for a number of people.

#### Human Resources

Work will centre on refocusing on the development of the adult workforce strategy, preparation for the implementation of the Vetting and Barring Scheme and reviewing implications of the Social Care Task force Report and the implications for the Health Check. The team will continue to work on supporting the modernisation agenda, the Council's job evaluation project and the jobs and homes pilot.

#### Performance and Governance

The team will continue to support the service areas across the Department in improving data quality, and continuing to develop effective performance reporting through the new IAS system.

# **Annex A: Staffing information**

# **Staffing Levels**

	Establishme nt Posts	Staffing Full Time	Staffing Part Time	Total Posts FTE	Vacant Posts	Vacancy Rate
Management Team	7	7	0	7	0	
Older People and Long Term Conditions	201	90	111	130.55		
Adults and Commissioni ng	125	66	59	84.28		
Performance & Resources	91	58	33	74.75		
Department Totals	424	221	203	296.58		

#### **Staff Turnover**

For the quarter ending	30 June 2010	6.4
For the year ending	31 March 2010	12.9

Total turnover for BFC, 2009/10: 13.31% 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	Quarter1 average per employee	Projected annual average per employee
Management Team	8	7.5	1.6	4.36
Older People and Long Term Conditions	212	342	1.61	6.4
Adults and Commissioning	106	281	2.6	10.6
Performance & Resources	93	99	1	4.2
Department Totals (Q1)	419	729.5	1.55	
Projected Totals (10/11)	419	2918		6.39

Comparator data	All employees, average days sickness absence per employee
Bracknell Forest Council 09/10	6.29 days
All sectors employers in South East 2008	7.6 days
(Source: Chartered Institute of Personnel and Development survey 2008)	

Adult Social Care and Health – There is 1 case of Long Term Sickness with 65 days in Adults and Commissioning.

There is also 3 cases of Long Term Sickness with 87 days in Performance and Resources.

# **Annex B: Financial information**

# Annex B1

	Original Cash Budget	Virements & Budget C/Fwds	NOTE	Current Approved Budget	Spend to Date %	Variance Over/(Under) Spend	Variance This Month	Variance Supporte by CMT
	£000	£000		£000	%	£000	£000	£00
ADULT SOCIAL CARE AND HEALTH DEPARTMENT								
Director	551	174	a, c	725	-44%	0	0	
-	551	174	-,-	725	-44%	0		-
CO - Adults and Commissioning	•••			•	,•	·	•	
Mental Health	1,904	-61	a, d	1,843	11%	0	0	
Learning Disability	7,656	-615	a, d, e	7,041	-91%	0	0	
Specialist Strategy	0	159	а	159	9%	0	0	
Joint Commissioning	434	3	а	437	15%	0	0	
-	9,994	-514		9,480	-64%	0	0	
CO - Older People and Long Term Conditions	0,00.	• • • • • • • • • • • • • • • • • • • •		0,.00	0170	•	•	
Long Term Conditions	2,083	-15	a, d	2,068	21%	0	0	
Older People	6,618	42	a, b, d	6,660	13%	0	0	
Intermediate Care	2,116	-138	а, с	1,978	13%	0	0	
Community Support	745	-12	а	733	21%	0	0	
Drugs Action Team	94	0	а	94	30%	0	0	
	11,656	-123		11,533	15%	0	0	
CO - Performance and Resources	,			,		·		
Leadership Team and Support	225	0		225	0%	0	0	
Information Technology Team	208	-1	а	207	17%		0	
Property and Admissions	182	0		182	8%		0	
Performance and Governance	192	-3	а	189	2%	0	0	
Finance Team	531	4	а	535	15%	0	0	
Human Resources Team	149	0		149	13%	0	0	
•	1,487	0		1,487	10%	0	0	
OTAL ASC&H DEPARTMENT CASH BUDGET	23,688	-463		23,225	-20%	0	0	
OTAL RECHARGES & ACCOUNTING ADJUSTMENTS	2,379	0		2,379	0%	0	0	
RAND TOTAL ASC&H DEPARTMENT	26,067	-463		25,604	-18%	0	0	
	26,067	-463		25,604	<u>-18%</u>	0	0	
Memorandum items: Devolved Staffing Budget				10,850		0	0	

# **Adult Social Care and Health Virements and Budget Carry Forwards**

Note	Total	Explanation
	£'000	
		DEPARTMENTAL CASH BUDGET
		House keeping virements
а	0	A number of net nil effect virements are proposed. These include resetting devolved staffing budgets, making adjustments in the light of revised grant notifications that require adjustments to expenditure and income profiles, and a range of other housekeeping adjustments to align budgets to new year spending plans.
		Structural Changes Fund
b	25	£25k one-off redundancy costs associated with closing the Look In were agreed by the Employment Committee and funding is now requested from the Structural Changes Fund.
		Inter departmental virements
С	-28	Two adjustments need to be made in respect of transfers with ASCH. A £15k deduction is due in respect of grant savings agreed in the old SCL Department for ASCH that are currently held in CYPL. There is also an adjustment required in respect of correcting initial allocations of travel plan savings, with £13k over allocated to ASCH.
d	-130	The centralisation of transport budgets to Corporate Services removes £130k from the budget.
		Corporate contingency
е	-330	The S28a Learning Disability transfer of funds from the PCT to the Council was agreed after the budget had been set and was £330k higher than anticipated, mainly as a result of receiving full funding for Waymead and other support services that were not expected to be included in the settlement.
	-463	Total
		DEPARTMENTAL NON-CASH BUDGET
	0	No changes to report
	0	Total

Adult Social Care and Health Budget Variances

No variances to report this period.

#### Annex B4

# Adult Social Care and Health Capital Monitoring 2010-11 monitoring at 30 May 2010

Cost Centre Description	Total Budget	Cash Budget	Expenditure to date	Current commitment	Amount left to	Estimated Total	Cash Budget	Key Target for 31 March	Current status of the project including changes to Cash Profile
		2010/11			Spend	Funding Required	2011/12		
						for the			
	(£'000)	(£'000)	(£'000)	(£'000)	(£'000)	year (£'000)	(£'000)		
	(2000)	(2000)	(2 000)	(2 000)	(2 000)	(2 000)	(2000)		
Schemes commenced prior to 2010/11									
ASC - Care Management Replacement Programme	327.6	280.0	32.8	0.0	247.2	280.0	47.6	Fully operational.	Core live system operational. Further modules to be updated.
Adult Social Care IT Infrastructure	69.0	50.0		0.0	50.0	50.0		In progress.	N3 Connection and CAF for Adults implementation in progres
ICT projects	396.6	330.0	32.8	0.0	297.2	330.0	66.6		
CAPITAL PROGRAMME - DEPT CONTROLLED	396.6	330.0	32.8	0.0	297.2	330.0	66.6	ı	
Ischemes h/fwd from prior year(s)]									
Percentages			8.3%	0.0%	74.9%	83.2%			
Schemes commenced 2010/11 and rolling programmes									
Improving the Care Home Environment	6.4	6.4	0.0	0.0	6.4	6.4	0.0	In progress.	Requirement investigation and prioritisation.
Carers Accommodation Strategy	335.0	335.0	0.0	0.0	335.0	335.0		Underway	Under review. Linked to Council accommodation strategy
Mental Health Grant Social Care Grant	189.2 130.1	110.0 90.0	3.1 13.6	0.0 0.0	106.9 76.4	110.0 90.0			Requirement investigation and prioritisation. Requirement investigation and prioritisation.
Improvements and capitalised repairs	4.7	4.7	0.0	0.0	4.7	4.7			Under investigation
Adult Social Services	665.4	546.1	16.8	0.0	529.3	546.1	119.3	,	3
CAPITAL PROGRAMME - DEPT CONTROLLED [current]	665.4	546.1	16.8	0.0	529.3	546.1	119.3	i	
vear schemes]	003.4	340.1	10.0	0.0	323.3	340.1	113.5		
Parameters			0.50/	0.00/	70.00/	00.40/			
Percentages			2.5%	0.0%	79.6%	82.1%			
CAPITAL PROGRAMME - DEPT CONTROLLED [all	1,062.0	876.1	49.6	0.0	826.5	876.1	185.9	,	
schemesl									
Percentages			4.7%	0.0%	77.8%	82.5%			

# **Annex C: Performance against National Indicators**

# **ASCH – National Indicators Quarter 1 2010/11**

Friday, August 6, 2010

Indicator Ref	Measure	Current Target	Previous Actual	Comments & Improvement Action	МТО
N1039	Rate of hospital admissions per 100,000 for Alcohol Related Harm (Unclear - Quarterly)			Information being validated	MTO 05 - To improve health and wellbeing within the borough
NIO40	Number of drug users recorded as being in effective treatment (More frequently than quarterly)			Information being validated	MTO 05 - To improve health and wellbeing within the borough
NI053.1	Prevalence of breastfeeding at 6-8 weeks from birth - percentage of infants being breastfed at 6-8 weeks (Quarterly)			No update available	MTO 05 - To improve health and wellbeing within the borough
NI053.2	Prevalence of breastfeeding at 6-8 weeks from birth - percentage			Information being validated	MTO 05 - To improve health and wellbeing within the

	of infants for whom breastfeeding status is recorded (Quarterly)				borough
NI113.1	Prevalence of chlamydia in under 25 year olds - Percentage of the resident population aged 15-24 accepting a test or screen for chlamydia (Quarterly)		14.6%	Information being validated	MTO 05 - To improve health and wellbeing within the borough
NI113.2	Prevalence of chlamydia in under 25 year olds - Number of positive diagnoses for chlamydia in the resident population aged 15-24 years (Quarterly)			Information being validated	MTO 05 - To improve health and wellbeing within the borough
NI123	Stopping smoking (Quarterly)			Information being validated	MTO 05 - To improve health and wellbeing within the borough
NI125	Achieving independence for older people		89.4%	The measurement of data for this indicator will commence at the	MTO 09 - To promote independence

	through rehabilitation or intermediate care (Quarterly)			start of October since independence is collated 91 days following discharge. Therefore there is no outturn to report in this quarter. It is anticipated that we will be in a position to report an outturn for Q2.	and choice for vulnerable adults and older people
NI126	Early access for women to maternity services (Unclear - Quarterly)			Information being validated	MTO 05 - To improve health and wellbeing within the borough
NI130	Social Care clients receiving Self Directed Support per 100,000 population (Quarterly)		16.0%	Due to challenges around reporting on data from IAS (the adults community care system), it has not been possible to report an outturn on this indicator for Q1. We are aiming to resolve this for Q2.	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI131	Delayed transfers of care (Quarterly)	3.8	2.4	The current outturn of 3.8 is slightly lower in performance terms than last year's outturn of 2.4. This still represents strong performance.	MTO 09 - To promote independence and choice for vulnerable adults and older people

NI135	Carers receiving needs assessment or review and a specific carer's service, or advice and information (Quarterly)		21.7%	Due to challenges around reporting on data from IAS (the adults community care system), it has not been possible to report an outturn on this indicator for Q1. We are aiming to resolve this for Q2.	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI136	People supported to live independently through social services (all adults) (Quarterly)		2,325	Due to challenges around reporting on data from IAS (the adults community care system), it has not been possible to report an outturn on this indicator for Q1. We are aiming to resolve this for Q2.	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI145	Adults with learning disabilities in settled accommodation (Quarterly)	71.9%	74.6% ,	Of the current cohort, 71.9% of people are living in settled accommodation. At this point, this figure is lower than last year's outturn due to some people becoming ordinary residents in other areas. However, on completion of the re-provisioning project (Sept 6th), this figure	MTO 09 - To promote independence and choice for vulnerable adults and older people

					is likely to increase significantly.	
NI146	Adults with learning disabilities in employment (Quarterly)	14.6%	17.29	6 .	Our current figure of 44 people being helped into employment put us ahead of our target for 2010/11 of 14.6% (based on current cohort figures). We are therefore on track to exceed target with this indicator.	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI149	Adults receiving secondary mental health services in settled accommodation (Quarterly)	86.2%	96.0%	6 _	Although this is below last year's outturn of 96%, it still represents strong performance for this indicator.	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI150	Adults receiving secondary mental health services in employment (Quarterly)	15.0%	15.09	6 _	Current performance of this indicator is in line with last year's outturn of 15%.	MTO 09 - To promote independence and choice for vulnerable adults and older people

# **Annex C: Performance against Service Plan Actions**

MTO5 - To improve health and wellb	eing wit	hin the	e borough						
Detailed Action	Due Date	Owner	Status	Last Updated	Comments				
5.1 Developing and implementing 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 well-being									
5.1.1 Refresh the Health and Well Being Strategy	30/09/2010	ASCH	<b>~</b>		Work on this is being held given the changes outlined by the new Government and the potential new role for Local Authorities in Health and Well Being. The Director is working with the Portfolio Holder, Colleagues and Health Staff to look at the implications of the Health White Paper.				
5.1.2 Work to ensure that vulnerable people can use the same facilities and services in the community as everyone else can, to help them to have a good quality of life.	31/03/2011	ASCH	>		The Development Liaison Group and the Community Capacity Group have action plans which detail developments for the current financial year				
5.1.3 Support the work of the voluntary sector; looking at new ways for voluntary sector to improve people's lives	30/09/2010	ASCH	<b>~</b>		Meetings have taken place with representatives from the voluntary sector to develop and increase choice and flexibility for people wishing to access day support activities.				
5.1.4 There will be a range of leisure, educational and social opportunities accessible to all people who are supported by Adult Social Care and Health	31/03/2011	ASCH	<b>&gt;</b>		The Development Liaison Group and the Community Capacity Group have action plans which detail developments for the current financial year				
5.1.5 Work with the NHS to make psychological therapies more available	31/12/2010	ASCH	<b>&gt;</b>		IAPT (Improving access to psychological therapies) is now providing a local service to the Bracknell community, the team are based at Church Hill House but provides the therapies in community settings. We also have a 'wellbeing' group that runs fortnightly focusing on physical and emotional wellbeing, assisting in tackling local health inequalities.				
5.2 Working with health partners to secu	re more o	outpatie	ent, diagno	stic and					

secondary health facilities in the boroug	jh						
5.2.1 Review options with the NHS Berkshire East to improve access to and increase provision of health facilities in the Borough, and improved Accident and Emergency	31/03/2011	ASCH	<b>✓</b>		Work is on going in respect of the Healthspace and further discussions are being held with Primary Care Commissioners		
5.2.2 Development of an End of Life Strategy with NHS Berkshire East	31/12/2010	ASCH	<b>✓</b>		The End of Life Strategy will form part of the overall review of Intermediate Care and Enhanced Intermediate Care. Steering group meets monthly to take this forward.		
5.7 Enabling more people to remain in the Telecare	neir own h	nomes	through the	e use of			
5.7.1 Maximise people's independence by promoting the use of assistive technology and equipment	31/07/2010	ASCH	<b>✓</b>		Two flats within a local sheltered Housing Complex have been fitted with extensive Assistive Technology which has enabled people to trial equipment in a safe environment. We have a part time worker who will assess for equipment and promote new initiatives.		
5.8 Producing an annual Joint Strategic and outcomes for Borough residents	Needs Ar	nalysis	to influenc	e LAA			
5.8.1 Ensure JSNA is refreshed annually	31/12/2010	ASCH	✓		JSNA on target for refresh by Autumn. Director chairing Bracknell group with responsibility for update.		
5.8.2 Undertake a programme of consultation with Older People which will feed into the delivery of an Older People accommodation strategy	30/09/2010	ASCH	<b>~</b>		consultation complete		
5.8.3 Implement the outcomes of transforming Community services with specific emphasis on Urgent Care, End of Life Care and Stroke Rehabilitation	31/03/2011	ASCH	<b>✓</b>		Steering group and project group meet on a monthly basis to drive forward this initiative, with an implementation date of October 2010.		
MTO7 - To seek to ensure that every	, resider	nt feels	included	and abl	e to access the services they need		
Detailed Action	Due Date	Owner	STOTIC	Last Updated	Comments		
7.10 Implementing the Bracknell Forest Partnership Community Engagement Strategy to engage with residents to shape service provision							

and develop communities				
7.10.11 Implement the actions in the Bracknell Forest Partnership Community Engagement Strategy due for completion in 2010/11 and ensure actions for future years are progressed (Adult Social Care and Health)	31/03/2011	ASCH	<b>~</b>	All actions being implemented.
7.10.3 Review the structure role and purpose of the main forums for older people	31/07/2010	ASCH	<b>✓</b>	Achieved. New OP Themed Partnership established alongside OP Forum. Additionally there is the Over 50s Forum and the work of the OP Champion
7.10.4 To make information made available to the public including all individuals currently supported and all local stakeholders about the transformation agenda and its benefits for them	30/04/2010	ASCH	~	An information pack is being developed to support the roll out of personalisation. To be published in September 2010.
7.10.5 To ensure that local people understand the changes and about personal budgets, and that many are contributing to the development of local practice	31/10/2010	ASCH	~	An Information and Advice Strategy has been approved and is in place
7.10.6 Develop a User Led Organisation which is directly contributing to the transformation to personal budgets	31/12/2010	ASCH	~	Expressions of interest have been received from two organisations to develop a User Led Organisation (ULO) ir Bracknell. The Department of Health have set a target that a ULO must be in the process of being set up by December 2010.
7.10.7 Arrangements for access to universal information and advice services are in place	31/10/2010	ASCH	✓	An Information and Advice Strategy has been approved and is in place.
7.5 Implementing a Disability Equality So and Race Equality Scheme	cheme, G	ender l	Equality Sche	eme
7.5.2 Meet the cultural needs and expectations of older people, particularly those from Black and Minority Ethnic Groups	31/03/2011	ASCH	~	Work in progress with BFVA (Minority Alliance Group) to identify hard to reach groups. Representatives to be invited to join strategy groups. This issue will also be addressed through the Older Persons Strategy.
7.5.7 Implement the Disability, Race and Gender Equality Schemes actions due for completion in 2010/11 and progress those actions due for	31/03/2011	ASCH	<b>✓</b>	Scheme actions being implemented.

Detailed Action	Due Date	Owner	Statue	Last Updated	Comments
MTO8 - To reduce crime and increase	e people	e's ser	nse of safe	ety in the	e borough
7.8.20 Improve equality monitoring to provide better nformation on access to and take up of services by different parts of the community (Adult Social Care and Health)			<b>&gt;</b>		Equality monitoring framework being developed
7.8.16 Ensure all EIA actions for 2010/11 are implemented and actions for future years progressed (Adult Social Care and Health)	31/03/2011	ASCH	<b>&gt;</b>		All actions being implemented
7.8.12 Conduct Equality Impact Assessments (EIAs) for new services, strategies and policies and review existing EIAs as part of a rolling three year programme, ensuring all actions resulting from these are built into team/business workplans (Adult Social Care and Health)	31/03/2011	ASCH	<b>&gt;</b>		On target and ongoing
7.8 Working within the Bracknell Forest P improvement in equalities and diversity in work towards attaining the 'Achieving' leventher in the control of th	n the Cou	uncil ar	nd its servi	ces, and	
conesion Strategy (Adult Social Care and Health)	31/03/2011		<b>✓</b>		All actions being implemented.
7.7 Implementing the Community Cohesic of belonging and identity as members of the control of				a sense	
7.6.1 Enhance the Council's website to create links for vulnerable people which would also help publicise events and could facilitate research into what people want to do who are supported by Adult Social Care & Health	31/12/2010	ASCH	<b>~</b>		The Information Hub will be launched in August 2010
Health) 7.6 Increasing access to services by elect	tronic me	eans			
completion in later years (Adult Social Care and Health)					

8.5 Reducing the number of people, part drugs and alcohol	icularly y	oung p	eople, abusir	ng
8.5.1 Promote smoking awareness and cessation initiatives delivered by the PCT	31/03/2011	ASCH	~	Council staff have been working with the PCT Stop Smoking Service in running evening clinics at Bracknell Leisure Centre; a weekly drop in at Bracknell College; workshops at Sandhurst Secondary School and a drop in at Rowan's Children's Centre
8.5.2 Work with the Berkshire East PCT to promote prevention and support initiatives including educational awareness of the harmful effects of substance and alcohol misuse.	31/03/2011	ASCH	<b>✓</b>	Information provided to parents in respect of substance misuse. Awareness raising sessions requested by schools will be delivered. Awareness raising session arranged at Royal Military Achedemy, Sandhurst.
8.5.3 Increase the number of drug misusing clients retained in treatment for 12 weeks or more	31/03/2011	ASCH	N/A	Figures for quarter 1 not yet available. Will be published by National Treatment Agency at the beginning of August
8.5.4 Reduce the number of clients leaving treatment in an unplanned way	31/03/2011	ASCH	N/A	Quarter 1 data not yet available. Will be published by the National Treatment Agency at the beginning of August.
8.5.5 Ensure that local services have sufficient capacity to meet local needs in terms of drug and alcohol treatment	31/03/2011	ASCH	~	Services have been commissioned to take into account the findings of the annual needs assessment.
8.5.6 Work with NHS Berkshire East to identify funding for inpatient detoxification services for residents who are dependent on alcohol	31/03/2011	ASCH	~	Funding has been identified and block contract agreed with preferred supplier.
8.9 Increasing awareness of 'safeguardi people and the wider public	ng adults	' issue:	s for vulnerak	ole
8.9.1 Review contracting arrangements to ensure that they appropriately reflect safeguarding requirements and are in line with SUI guidance	31/03/2011	ASCH	<b>✓</b>	A `Commissioning for Adult Safeguarding Group` has been established and meets quarterly. The purpose of the group is to use contracts and commissioning processes to ensure that adults are appropriately safeguarded when using services commissioned by the PCT and Unitary Authorities. A Serious Untoward Incident (SUI) Protocol has now been developed and will be presented to Safeguarding Adults Partnership Boards this year.

8.9.2 Work with CDRP colleagues to ensure that ASBO policy reflects Safeguarding issues	30/06/2010	ASCH	✓		The ASBO Policy is currently being updated and is to include safeguarding issues
8.9.3 Review the ToR and membership of Safeguarding Adults Partnership Board, giving consideration to the option of engaging an independent chair.	31/03/2011	ASCH	<b>~</b>		A safeguarding workshop for senior managers was held in March 2010. One of the aims was to look at the ToR and membership. Consideration for an independent chair will be taken following the publication of No secrets 2` later on in the year.
8.9.4 Review Care Governance Protocols	31/07/2010	ASCH	<b>✓</b>		The Care Governance Board protocols are being reviewed on Tuesday 20th July.
8.9.5 Manage/lead "Safe Place" project	31/12/2010	ASCH	✓		This scheme is being launched on Thursday 22nd July in Bracknell Town centre.
8.9.6 Implement the audit plan to ensure that the Deprivation of Liberty Safeguards are being fully implemented in Bracknell.	31/07/2010	ASCH	<b>~</b>		A scoping exercise was recently undertaken with all care homes in Bracknell to audit their knowledge and process for the Deprivation of Liberty Safeguards. A detailed plan has been developed to increase awareness within care homes and prioritise appropriate training for care home managers and staff. This will be completed by March 2011.
8.9.7 Hold Managing Authority conference	31/10/2010	ASCH	<b>✓</b>		This has not yet happened. Best Interest assessors however have visited all Bracknell care homes to audit current arrangements for Deprivation of Liberty Safeguards.
8.9.8 Lead on the implementation of the Vetting and Barring Scheme	30/11/2010	ASCH	✓		The Coalition Government is currently relooking at this scheme. It is therefore not yet ready to be implemented.
MTO9 - To promote independence a	and choic	ce for v	vulnerable	e adults	and older people
Detailed Action	Due Date	Owner	Status	Last Updated	Comments
9.1 Modernising services for vulnerable reliance on residential care and improvi services				_	
9.1.1 Create more activities for frail older people, with transport linked to the activities	31/05/2010	ASCH	✓		Implementation of the recommendations following the day Care review will lead to person centred support services

				for frail older people. Discussions have taken place with Head of Transport to link transport with services
9.1.2 Co-ordinate more effectively the schemes for providing assistance to older residents with daily chores, house and garden maintenance	30/06/2010	ASCH	<b>~</b>	People are offered a period of rehabilitation either at home or in our residential unit in the Bridgewell Centre with an aim to maximise a person's functional skills. Outcomes include the reduction in the need for residential care and packages of care. The team also includes the access point for Adult Services which reduces the need for dependence on in house services.
9.1.3 Make sure suitable housing is available for older people and that a range of different accommodation and support options are available.	31/03/2011	ASCH	<b>~</b>	Consultation questions are being developed and will be achieved in Q2.
9.1.4 Review the provision of day opportunities and work in partnership with other agencies in the voluntary and independent sector	31/10/2010	ASCH	<b>~</b>	Consultation and review of Day Services now complete discussions have taken place with the Voluntary and Independent Sector in designing service and support options.
9.4 Providing advice and support to vulnum in their own homes	nerable pe	eople to	o help mai	ntain
9.4.1 Co-ordinate a full review of EDT contract with regard to safeguarding, outcomes from Baby P enquiry and recommendations following Serious Case Reviews	31/03/2011	ASCH	~	Review of service has commenced, project group are meeting monthly and Project brief has been established with milestones agreed.
9.5 Providing support for carers through voluntary partners	working	with s	tatutory ar	nd
9.5.1 Continue to increase the rate at which carers receive assessments or reviews	31/03/2011	ASCH	<b>✓</b>	Performance has increased, during the last year. Work is on-going with local GP surgeries which will enable GP's to offer information packs and carers self assessment forms to carers presenting at the surgery.
9.5.2 Implement the Dementia Care Adviser role, following DH funding	31/03/2011	ASCH	<b>~</b>	The Dementia Care Adviser role is working with our statutory and voluntary partners, families and carers. The advisor is delivering the service following the Department of Health guidance.
9.7 Implementing the Borough-wide Stra	ategy for (	Older P	eople	

MTO10 - To be accountable and pro  Detailed Action	Due Date		value for Status	money Last Updated	Comments
9.8.6 A Fairer Contributions Policy is approved by the Council's Executive which supports Personalisation	30/06/2010		<b>✓</b>		Achieved
9.8.5 Host a provider workshop in partnership with BFVA to ensure that providers and third sector organisations are clear on how they can respond to the needs of people using personal budgets	31/10/2010	ASCH	<b>✓</b>		Completed. Workshop held in July 2010.
9.8.4 Implement a project in partnership with the Princess Royal Trust to support people to join the LETS scheme	30/04/2010	ASCH	<b>✓</b>		The Timebank Development Officer is in post and will be recruiting individuals in August.
9.8.3 That processes are in place to monitor across the whole system the impact in investment towards preventative and enabling services.		ASCH	<b>✓</b>		During roll out, people who have a period of reablement will complete a Supported Self Assessment Questionnaire before and after the period of reablement to assess the impact.
9.8.2 That all new individuals and existing people supported by Adult Social Care are offered a personal budget	31/10/2010	ASCH	<b>✓</b>		The plans for roll out are in place and all new and existing people at review will be offered a personal budget from October 2010.
9.8.1 Evaluate the personalisation pilot and develop recommendation for the roll out of personalised support across ASC	31/05/2010	ASCH	<b>✓</b>		The pilot has been evaluated, and detailed action plans for addressing the recommendations developed. These will be out to the Programme Board for approval on 29th July.
9.8 Implementing the Council's approace all people who are eligible for support from the individual budget, and to support the description of the description of the description of the description.	rom the Calle	ouncil, il, to h	to have an ave and use	d use, an e, an	
9.7.1 Promote use of supported self-directed assessments	31/03/2011		<b>✓</b>		Following the conclusion of the pilot, care managers are now being trained and Supported Self-Assessment made available to an increasing number of older people, including more than half of those using Downside.

10.4 Working effectively with partners to Borough	improve	the qu	ality of life	e in the
10.4.8 Work with NHS Berkshire East to maximise the Council's influence in shaping services, such as the Healthspace	31/03/2011	ASCH	<b>~</b>	Relevant working groups have been allocated to key managers reflecting the nature of the groups. Examples include: Transforming Community Health Services, Unscheduled Care, Intermediate Care, Delayed Discharges etc
10.4.9 Implement a joint complaints procedure with the NHS	31/07/2010	ASCH	<b>✓</b>	Bracknell Forest have published a new complaints procedure which responds to the national complaints arrangements valid from 2009/10. The complaints procedure outlines the integrated approach with health.
10.5 Implementing the priority areas of t	he Servic	e Effic	iency Stra	tegy to
deliver savings and improve service ope	eration	_		
10.5.1 Introduce new commissioning arrangements for Domiciliary Care (older people)	31/05/2010	ASCH	<b>v</b>	New commissioning arrangements are now in place
10.5.2 Conclude consultation on modernisation of day care for older people and prepare options for future	31/07/2010	ASCH	<b>~</b>	Consultation concluded recommendations are in process of implementation
10.7 Ensuring all council services provice effective use of resources	de value f	or mor	ney and m	ake
10.7.11 Record evidence that the carer's grant is used to effectively ensure equity for all of Bracknell Forest's population	31/05/2010	ASCH	<b>~</b>	Quarterly monitoring information received from BFVA which is scrutinised by Chief Officer identifying which care groups, community and hard to reach groups need to be targeted.
10.8 Ensure staff are in place with the rig	t skills	and ca	pacity to	deliver
service outcomes and maximise service	efficienc	y		
10.8.2 Review the recruitment and retention practices to ensure staff are in place with the relevant skills to deliver service outcomes	31/03/2011	ASCH	<b>~</b>	Strategies have been implemented to provide support for service areas who are experiencing difficulties in recruitment and retention.
10.8.3 Review the workforce implications of personalisation to ensure the workforce are appropriately developed and trained to deliver	31/03/2011	ASCH	<b>~</b>	The Workforce Project Group has been established to ensure employees are appropriately skilled to deliver personalised services.

services effectively					
10.8.4 Develop a specialist worker role for people who are deafblind in accordance with the guidance in LAC(2001)8 Social Care for Deafblind Children and Adults	31/03/2011	ASCH	<b>✓</b>		This action requires the co-operation of other Berkshire authorities to make it economically viable for Bracknell. The discussions with other LAs have yet to be concluded.
MTO12 - To promote workforce skill	S				
Detailed Action	Due Date	Owner	Status	Last Updated	Comments
12.1 Contributing to the development of through Adult and Community Learning		priately	skilled wo	orkforce	
12.1.1 Increase the number of lowest skilled adults, non-employed and under-employed adults to access learning, training and employability skills focussing on 50+ age group, carers, long parents, adults with mental health problems, disabilities and learning difficulties	31/03/2011	ASCH	<b>✓</b>		We have not only been working with our internal teams but also with our partners like 'Rethink', to improve and increase training and employment. We have developed a specialist role within our service that has in-depth knowledge relating to employment and training, this has had positive outcomes locally.
12.1.2 Maximise income for vulnerable people through access to employment or benefit maximisation	31/03/2011	ASCH	<b>✓</b>		Work is ongoing to develop and secure employment for all individuals through work preparation services, links with employment agencies, and the Jobs and Homes initiative. All people receiving services have a financial assessment which ensures they apply for all applicable benefits, including ILF.
12.1.3 Continue to help people with learning disability to secure employment	31/03/2011	ASCH	<b>✓</b>		As before, support to help people with learning disabilities to secure employment is ongoing through the jobs and homes pilot action plan. An example of progress is a newly developed partnership between recycling and the Green Machine creating some paid work opportunities.
12.1.4 Establish Steering Group for PSA16 Innovation Fund Project and implementation plan	30/04/2010	ASCH	<b>✓</b>		Both have been established
12.1.5 Develop Implementation Plan for IPSA16 Innovation Fund project	30/04/2010	ASCH	✓		This has been established and agreed.

# 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	Older People  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.	Older People Projections in Purchasing Plan for Older People to be updated annually  Mental Health Economic downturn could impact on numbers of residents with mental health issues and increase level of domestic abuse. Demand levels are being monitored.	Ongoing		This will be achieved by 31/3 using 08/09 figures. Indications to date are an increase in OP ongoing support.

C4	Transforming Adult Social Care	Ongoing	V	Monitoring ongoing
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	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  People with Disabilities  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  Monitoring ongoing.

Children's Services to Adult Community care Services.  Impact of transition on budgets considered at DMT as part of budget pressures discussions.		Undertaken for 09/10 budget build.
Packages of Care  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.		This is being done and reported in budget variations. Workload by ASC Management team.

# **Annex D: Operational Risk Factors**

The following table shows all the operational risk factors listed on the 2010/11 Service Plan for Adult Social Care & Health. Progress on mitigation of these factors has previously been reported with Service Plan actions and indicators as part of the quarterly data set which is attached to PMRs. Paris, the Council's new performance management software, is not yet configured to work with risks, so as an interim measure operational risk factors are reported here, in a separate annex, in Quarter 1.

Ref	Risk	Mitigation	Q3 update on	Q3				
			progress	revised				
				risk				
	PRIORITY FOUR: CREATE A BOROUGH WHERE PEOPLE ARE, AND FEEL, SAFE							
MTO 9:	MTO 9: Promote independence and choice for vulnerable adults and older people.							
9.1	TASC pilot	Review the workforce	Continuing to liaise	None.				
	too short to	implications of the learning	with other LAs and with					
	consider all	disabilities review. Review	the personal					
	the workforce	arrangements in other local	facilitators.					
	implications.	authorities.						
PRIOR	PRIORITY FIVE: VALUE FOR MONEY							
MTO 10	MTO 10: Be accountable and provide excellent value for money.							
10.21	Expertise/ava	Early identification of	Workforce planning	None.				
	ilability of	challenging recruitment	session run to the SLG.					
	staff to	areas. Workforce planning to	Secondary returners					
	undertake	be implemented across	course in operation					
	review of	Social Care & Learning.	since October.					
	recruitment	Engage colleagues with the						
	and retention.	LA/workforce as appropriate.						