

Performance Monitoring Report

for

Adult Social Care & Health

Second Quarter 2010/11 July - September 2010

Portfolio holder: Councillor Dale Birch Director: Glyn Jones

Introduction by the Director of Adult Social Care and Health

The second quarter has been another busy one in the department with a number of important developments taking place which will improve the quality of life for people within the Borough. In particular, work within Learning Disability between the department and providers to reprovide residential accommodation to supportive living.

Development work with colleagues in Health has resulted in enhancing the current Community Response and Reablement Service to increase the focus on admission avoidance and provide support at home. This enhancement went live on 1 October 2010.

This has been fully funded by NHS Berkshire East. It is anticipated that further development work will result funding to enhance end of life support being made available.

Since Quarter 1, there have been a significant number of consultation documents supporting the Health White Paper: Equity and Excellence. The department through the Director, is leading the Council's development and response and is engaging at various levels with the different stakeholders within Health. This PMR will be used in the future to keep Members informed of the developments as they occur.

The coming quarter will see the formal publication of the Care Quality Commission annual performance judgement on 25 November.

Adults and Joint Commissioning

Learning Disabilities

Implementation of the programme for the re-provision of most of the homes accommodating people who previously lived in Church Hill House hospital is now complete. All 14 of the homes have de-registered. Each individual concerned now has settled accommodation via a tenancy agreement, and an individual package of support.

The Safe Place scheme was implemented and launched in July. This identifies "safe haven" shops and businesses in the town centre and surrounding areas where people can go for support, should they feel at all threatened or unsafe whilst out. Staff in these places have relevant numbers to call for support (e.g. police, social services).

For the new business plan for the Green Machine, a Community Interest Company (supported by BFC) providing green space maintenance services is progressing with new partnerships to be in place and for full independence to be achieved by the end of the financial year.

Autistic Spectrum Disorders

In response to the recent publication "Fulfilling and Rewarding Lives" (The National Strategy for adults with autism) a working group has been set up and meeting monthly since July. The group has developed a work plan to develop a local joint

commissioning strategy and delivery plan. These plans will be completed for approval by the early part of the new financial year.

Mental Health

Following the Supporting People review of Mental Health contracts, a plan to further develop the support provided to individuals living at Glenfield, and to other people in the community. A new team manager is in post and has developed a consultation and action plan. The consultation process has now started and is due to be completed in January 2011. Bracknell Forest Homes have engaged in this process and unused office space at Glenfield has been converted into single accommodation units. This is now being used for respite care and has increased choice for individuals.

Safeguarding

The first Deprivation of Liberty Safeguards (DoLS) newsletter was sent to all Bracknell care homes, members of the Safeguarding Adults Partnership Board and all Adult Social Care & Health staff in September. This quarterly newsletter aims to provide these groups with up to date information and case studies, information about training opportunities, and an opportunity share experiences of this relatively new piece of legislation.

The four Safeguarding Adults Partnership Boards in Berkshire have agreed to commission a revision of the current Berkshire safeguarding Adults Policy & Procedures (2008). The revised and updated version will be web based and will reflect new legislation, including Mental Capacity Act (2005), Deprivation of Liberty Safeguards (2007) and the role of the Independent Safeguarding Authority (ISA). It aims to provide the public and staff working in the sector with all of the relevant knowledge in relation to safeguarding adults. The web based policy will also signpost people to particular areas of interest, and to local policies.

Joint Commissioning

The drafting of section 75 agreements for Intermediate Care and Learning Disability has continued. Recruitment of a project worker for the employment element of the Jobs and Homes (Public Service Agreement 16) pilot was successful.

The Community meals arrangements have been established and will be implemented in November. The joint commissioning team has taken on the temporary support of the Local Involvement Networks (LINks) with the Steering Groups support following the termination of the contract with the host organisation, Help and Care.

Consultation on the NHS white paper 'Equity and Excellence: Liberating the NHS' has taken place and a council response has been submitted to the Department of Health.

Personalisation

The Evaluation Report from the Personalisation Pilot was approved for publication and action plans have been developed to support the roll-out of personalised support arrangements for people supported by Adult Social Care. Following on from the end of the pilot, the Supported Self-Assessment and the Resource Allocation System have been revised and are now in use. The Information Hub - an online resource detailing the availability of support and activities - is now live on BORIS for testing by staff.

Older People and Long Term Conditions (OPLTC)

Community Support and Wellbeing

Downside Resource Centre closed on 31st August. All the people who used to attend the centre had their support plans reviewed and a number were supported to self-assess their needs and develop an individual support plan. A presentation has been prepared on the outcomes for people and was presented to the Adult Social Care Overview and Scrutiny Panel on 12th October.

As part of the centralised transport review a new bus to Heathlands meets Disability Discrimination Act requirements has been delivered and will do much to improve the journey experience of people who use the centre Monday through Sunday.

In Heathlands Residential Home, redecoration of the upstairs lounge and dining room was completed by a group of volunteers from Boeringer Ingelheim who donated materials as well as their time to very good effect. A number of the oil paintings provided by Trading Standards are now on display and the overall effect has been to create a fresh and welcoming environment.

Fundraising by staff has enabled further social activities to be provided in-house and in the community by people living in the home.

The Business Support Team now includes staff from Healthlands, Ladybank, Bridgewell, Community Response & Reablement (CR&R) and OPLTC and, apart from those based in the residential units, staff are now co-located on the Second floor of Time Square. Plans for training are in place to ensure each team member understands all roles and functions of the team.

The Dementia team recently supported a person with end-stage Dementia to fulfil their long-stated wish to die at home, which required individual staff to adjust their working hours according to this person's rapidly changing needs for a service. The team will continue to offer this level of care as required and plan to offer support to colleagues Heathlands to provide additional staffing for end of life care for residents with Dementia.

Birmingham University has contacted the team and is intending to interview members about the very high quality service they deliver.

Older People and Long Term Conditions (OPLTC)

The team supported the new joint duty Section with a full-time occupational therapist and a part-time social worker. It is hoped that the creation of a robust duty system will enable care managers to move more people into monitoring, knowing that skilled staff will be immediately available in the event of an emergency. The new system is designed to improve problem-solving with and staff working for up to two weeks with individuals which aims to reduce 'revolving door' referrals and frees up staff to begin working with supported self-assessment and person-centred support planning. Full roll-out of personalisation starts on 1st October.

The SOS service continues to go from strength to strength in supporting carers and enabling people with complex needs to remain at home.

The team will shortly be rolling out Home First, an initiative aimed at enabling people assessed as needing residential or low-level nursing care to return home before making a decision about their long-term future.

The team continues to support the use of the assessment flat at Barnett Court as a means of increasing choice and reducing admissions to long-term care.

Community Response & Reablement (CR&R)

The PCT has released monies to support the implementation of enhanced intermediate care. This has been supported through project management from the medicines advisor in Bracknell who was seconded to work on the project.

A social Worker from the team has been attached to Frimley Park hospital (where the largest numbers of Bracknell residents are admitted) with the task of working proactively to facilitate hospital discharges. This has driven down the numbers of people who have had their transfer of care delayed.

The new duty function of the team went live in August 2010. The aim is to strengthen the point of access to services for adult social care. In order to support this new duty function of the team we added additional Occupational Therapy support to work on the waiting lists for the team. These were reduced to zero from September 2010. The long term effect of this is that people are seen in a timely way thus reducing risk of further injury or trauma (and therefore reducing possible need for hospital admission or long term service).

A Memorandum of understanding is in place between the PCT and the Council which outlines the intent of both organisation to commit to the new section 75 agreement from April 2011.

Both the Bridgewell Centre and Ladybank Residential Home were successful in reregistration for the Care Quality Commission. An interim assistant unit manager has been appointed in the Bridgewell Centre from available resource.

Emergency Duty Team (EDT)

EDT now has access to all 6 unitary authorities IT systems but are waiting training date/time from Wokingham to allow EDT to go 'live'. The Service Review has now reached Stage 3 with Unitary Authorities having deadline of 14th October 2010 to sign up to preferred Service Model choice.

The management team have now visited over 60 teams in Berkshire and associated agencies. All benchmarking exercises now completed and research documented.

The team has now formed a Berkshire wide Appropriate Adult scheme for out of hours at no cost to the 6 unitary authorities it will serve.

Drugs and Alcohol Action Team (DAAT)

The training programme has now been rolled out and bookings are being taken. The programme has been developed on a Berkshire East basis with each locality having a lead area.

The narcotics anonymous meeting has now been established. Levels of attendance are quite low but this is to be expected with a new group. We will continue to support the group in any way that we can.

The new substance misuse service directory has now in final draft form for checking and will be sent to the print room to be finalised shortly.

A revised funding bid to the big lottery fund was unsuccessful. Following the announcement of the comprehensive funding review a further bid will be submitted.

Work is ongoing in respect of the Berkshire East clinical Governance Framework. The prescribing policy and file management policy have been presented to the Berkshire East Substance Misuse Joint Commissioning Group and will be signed off in November.

Performance and Resources

Information and Communications Technology (ICT)

This quarter has seen a settling in period for the new IAS system. We resolved and closed 416 calls with 17 open over the same period for the new software. This was a mixture of both incidents and service requests and has been a busy time for all concerned. The working relationship with the software supplier is continuing to improve in line with our Service delivery model.

Finance

The main activity in the last quarter has been monitoring the 2010-11 budget and making preparations for 2011-12. For the 2010-11 budget position, current information indicates that a substantial budget under spend will occur as a result of a number of factors that have resulted in both reduced spend and additional income. More information on this is set out in the Financial Summary at Annex C.

In terms of preparations for next year's budget, senior managers have been preparing options for consideration around the Council's medium term budget strategy. Despite the uncertain financial future, this work is now well advanced.

Further developments have occurred around the Adult Social Care IT system where a detailed project plan has been developed to take forward the implementation 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. The new Fairer Contributions policy was introduced from August 2010 to ensure it is compatible with changes required for Personalisation. This was introduced following widespread consultation, and has resulted in changes in financial contributions for a number of people.

Human Resources

The team have been supporting the staffing implications with the reduction in the ABG, undertaking the social work employee "Health Check", and providing support through the Council's job evaluation review project. The team have also been reviewing the CRB processes.

Performance and Governance

Challenges around reporting from the IAS system remain. We are now actively working with suppliers Liquid Logic to move this work swiftly forward. A number of returns have been successfully completed including the Blue Badge Return, and a Performance Management Information Group has been established to ensure that ASC&H is fully involved in identifying and supporting performance monitoring, improvement requirements and 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 2 (\checkmark), with none causing concern (\clubsuit).

Annex C also provides details of performance against relevant National Indicators this quarter, where data is available, as well as an update on the operational risks identified in the Service Plan.

A new Strategic Risk Register was developed during the second quarter. The new Strategic Risk Register including mitigating actions to address risks was approved by the Executive on 14 September 2010. A summary of progress on these mitigating actions will be included in the Corporate Performance Overview Report for quarter 2.

Section Three: Resources

Staffing

This quarter, with the reduction in the Area Based Grant, has resulted in the HR team being involved with a staffing reductions exercise in the department. This resulted in one post been identified as being at risk and subsequently being made redundant. This was in addition to the arrangements to close Downside which resulted in supporting redeployment activities for a number of staff and, ultimately, 14 staffing redundancies.

Work continues in preparation for the workforce health check under the Social Work Task Force. This will involve consulting with staff on issues regarding workload management, workflow, systems, healthy workplace and effective service delivery. Although this exercise follows the recommendations from the Social Work Task the information provided will supplement the previous work undertaken on the recruitment and retention of social workers in Bracknell Forest.

The adult workforce strategy is concentrating in the main through the changes resulting from the Personalisation agenda. This has included visits to Oxfordshire County Council to review some of the arrangements to support the Personal Assistants.

The support with corporate activities has continued during the period. This includes the work in support of the job evaluation review.

There is still no further development with the introduction of the Vetting and Barring Scheme. There will still be the requirement to undertake CRB checks and the process of this is being reviewed with a view to streamline the process.

Budget

See Annex B for more detailed information on:

Revenue Budget

Annex B1	Summary financial position
Annex B2	Budget virements
Annex B3	Budget variances

Capital Budget

Annex B4 Summary financial position and scheme status and target

Revenue

Current approved budget

The approved cash budget for the current financial year reported last period totalled $\pounds 25.604m$, with $\pounds 23.225m$ in cash and $\pounds 2.379m$ in recharges and accounting adjustments.

There have been a small but significant number of changes to the cash budget this period. The biggest change is in response to managing the in-year reductions in grant funding announced by the government in May and June which has resulted in

the Department needing to manage budget reductions of £0.221m. Full details of the savings were agreed by the Executive in October and included reductions on:

- Carers grant
- Mental Health
- LINks
- Stroke Strategy
- Social Care Reform Grant
- HIV/Aids
- Preserved Rights

Other budget changes agreed this period are:

- One-off allocation of £0.026m from the Structural Changes Fund to cover staff termination costs following the closure of Downside Resource Centre.
- A small number of self balancing adjustments that have been processed to ensure budgets are properly aligned to spending plans.

The current approved budget for the year therefore totals £25.410m, with £23.031m in cash and £2.379m in recharges and accounting adjustments.

Provisional outturn

At this stage of the year, trends are beginning to become established and spending plans finalised which provides the first opportunity to predict budget variations with a degree of confidence. However, as it is still relatively early in the year, and with a number of volatile, high cost budgets being managed, changes in forecasts can not be ruled out over the coming months. At this stage, based on current information and expectations, a net under spending of £0.892m is anticipated on the following items:

- A £0.097m saving on Mental Health arising from a combination of alternative arrangements for support to drugs and alcohol related conditions together with reduced costs on residential placements.
- An £0.838m under spend on supporting people with learning disabilities. The most significant variance relates to receiving more income than expected when the budget was set. There has also been a reduction in costs as a number of changes have been made to existing care packages, including those now moved from residential to supported living arrangements. Savings are also anticipated on staffing costs as some posts have been vacant.
- Extra cost of £0.033m to enable the development of a data hub.
- Older people and long term conditions are forecast to over spend by £0.090m. £0.065m of this relates to additional in house residential care and a reduction in financial contributions from clients.
- A £0.080m under spending is forecast for Performance and Resources which arises from computer licence fees for the new Adult Services IT system being charged to the capital programme for one year only and reduced spend on buildings maintenance.

Capital

Current approved budget

The approved cash budget for the current financial year reported last period was \pounds 1.062m. Subsequent to setting the budget, new capital grants have been awarded to the Council that increase the approved budget to \pounds 1.126m. The new funding relates to:

- Transforming Adult Social Care grant £0.044m.
- Care Housing grant £0.020m.

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

No. Rec'd Q 2	Nature of complaints (bulleted list)	Action taken (bulleted list)			
1	Complaint regarding care provided by provider allocated	Complaint upheld and resolved			
1	Complaint regarding administrative errors within the finance team.	Complaint upheld and resolved			
1	Complaint regarding poor communication	Complaint upheld and resolved			
1	Complaint regarding care provided by provider allocated	Ongoing investigation			
1	Complaint concerning member of staff and poor communication	Ongoing investigation			
1	Complaint regarding administrative errors within the finance team.	Ongoing investigation			
1	Joint complaint with PCT – lack of communication	Ongoing Investigation			

Compliments Received

There were a total of 45 compliments received.

The Community Response & Reablement Team received 17 compliments in this quarter, 23 for the Older People & Long Term Conditions Team (8 of which were for Blue Badge applications).

The Personalisation Team received 1, as did the Mental Health Team, 1 also for the Community Team for People with Learning Disabilities. The Performance & Governance Team received 2.

Section Four: Forward Look

Adults and Joint Commissioning

Learning Disabilities

The programme of 'reprovision' is now complete with all relevant homes deregistered and concerned individuals receiving tailored support. From October through to December each individual will be reviewed to ensure the tailored support they are now receiving is meeting their needs in the way they wish.

A working group will be set up to work with a local charity who are re-developing some of their accommodation space. This group will work towards and plan this redevelopment in aiming to provide further adapted and affordable accommodation for people with a learning disability.

Detailed planning will commence for the move of Community Team for People with Learning Disabilities (CTPLD) from Waymead to Time Square

Autistic Spectrum Disorders

Following the publication in March "Fulfilling and Rewarding Lives" (The National Strategy for adults with autism) the government has since published Implementing 'Fulfilling and Rewarding Lives': Consultation for statutory guidance for local authorities and NHS organisations to support implementation of the autism strategy

The working group set up to develop and work towards a local joint commissioning Strategy, will also co-ordinate and complete a local consultation in response to the Government's draft statutory guidance.

Mental Health

Berkshire Healthcare NHS Foundation Trust (BHFT) 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 commence in November. Plans to manage the implications for the Electronic Social Care Record (ESCR) are being continually developed and implemented.

BHFT is continuing with 'Next Generation Care' (NGC) change programme. ASC&H will coordinate the Council's contribution to the consultation on the future location of in-patient services.

Safeguarding

Safeguarding will continue to monitor and review progress against all actions contained with the Safeguarding Adults Partnership Board Action Plan. A DoLS workshop is being planned for care providers, which will take place in February 2011.

Safeguarding continue to develop and implement safeguarding awareness e-learning tool for all relevant Council employees.

Joint Commissioning

The draft section 75 for CTPLD will be taken to DMT for approval before joint agreement is sought from the Joint Strategic Commissioning Board.

The Prevention strategy will be submitted to DMT for approval in November.

Evaluation of the Dementia Advisor post will be carried out (Bracknell is to be a case study site for national evaluation).

Personalisation

The roll out of Personal Budgets for all people new to Adult Social Care and existing people at the time of review is planned for October. This will meet the target set by the Department of Health.

The Information Hub will be live on the Council's website in November.

An information pack has been developed, to support the roll out of personal budgets - this will be printed for circulation in October.

Older People and Long Term Conditions

Community Support and Well-being

Discussions are underway with Disability Initiative, who have gained corporate sponsorship for a satellite service to be based in Bracknell Town-Centre and will be working with a local public house to provide rehabilitative day-care, two days each week.

The Dementia team is reconfiguring rotas in order to increase capacity as demand continues to exceed resources.

A customer satisfaction survey will be carried out in October and an action plan drafted to address any gaps that may be identified. All good news will be forwarded to DMT.

The team manager will be promoting the new Home First scheme with all four acute trusts and working with OPLTC and CR&R care managers to ensure that follow-on plans are in place for all people supported to return home from hospital.

A report will be compiled reviewing the first year of the assessment flat at Barnett Court and looking at ways to improve both take-up and through put, along with the forging of closer links with Housing.

The internal reconfiguration of Heathlands Day Centre is currently out to competitive tender. It is hoped that works will completed in December, when an open day will be held to re-launch the service.

A Service Specification is being developed and preliminary discussions are on-going with the PCT, who may be interested in purchasing places in the newly expanded service.

In the meantime, additional staff are being recruited and options around interfacing BFC's services with those in the voluntary sector to create a genuinely seamless dementia service are currently being explored. Some part-time staff have expressed interest in taking on the additional organiser and carer/driver posts that will be recruited to over the next few months. Specialist training for new and existing staff around supporting people living with the experience of dementia will be organised in partnership with local voluntary and third sector organisations to promote consistency and best practice.

The construction of two new wet rooms on the ground-floor level of Heathlands Residential Home is finally scheduled and work should be completed in December. This will improve bathing facilities and do much to support the dignity and well-being of people with impaired mobility.

Use of the Social Care Capital Grant has allowed the purchase of additional profiling beds to improve the safety of people living with the experience of dementia. Further capital bid monies will be used to meet new Care Quality Commission (CQC) standards around infection control through the installation of new UV hand-dryers and a specialist washing machine for towels and bedding.

Efforts will be made to recruit volunteers through BFVA interested in assisting with arts and crafts and music and drama activities.

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, with the aim that all staff will have completed the module by late January, 2011.

Older People and Long Term Conditions (OPLTC)

Following the implementation of a joint duty section with CR&R, a proposal for further reconfiguration of existing services will go to DMT in October. The aim will be to ensure that we have the right skills mix to support the roll out of Personalisation, the expertise available to support people with complex needs who may be eligible for Continuing Healthcare Funding and Home First.

In order to measure the impact of Personalisation, the team will revise an initial review of roll-out in December and will revise the annual customer satisfaction survey, due in January 2011, to reflect the change to supported self-assessment.

The team will continue to encourage supported self-assessment and the use of individual budgets at each review and workers will complete a Continuing Health Care checklist for all people where it appears the person's primary needs are around health.

Community Response & Reablement (CR&R)

Following detailed planning, enhanced intermediate care will be implemented on 1 October as the PCT had intended. To support this, additional monies have been made available by the PCT for the section 75 agreement. All activity is carefully monitored. This ensures a 24 hour 7 day service with a 2 hour response time. The first three months (until December 2010) will be a pilot period when details of times of demand and the type of service required will be logged and analysed. During the pilot, we have put in place on call OT and support workers who are supported by the on call managers. Once we have clarity for demand and service type, we will be developing enhanced intermediate care further. The team will continue to work closely with the PCT to develop End of Life services which will be supported with additional funding from PCT. This will also be piloted and evaluated with reporting streams back to senior managers in both the PCT and the council.

The Medicines Manager will work with the senior care co-ordinator in the domiciliary care team on medicines management policies and procedures in the community.

At the Bridgewell Centre, the Medicines Manager and the clinical governance lead from the PCT will continue to work on ensuring that the unit has all relevant policies in place regarding clinical governance. These policies are ones that the Council would not cover e.g. clinical issues and medicines.

Emergency Duty Team (EDT)

EDT management will facilitate child protection/child in need training specific to out of hours emergency services for the new staff at the Children's A&E department Royal Berkshire Hospital opening November 2010.

Also, the management team will work in conjunction with HR to develop organisational change management action plan in line with outcomes of the service review options.

The team has also formed a forum in conjunction with Lead Nurses & Doctors at the Royal Berkshire Hospital from paediatric departments and A&E given the new opening of the children's A&E department in November 2010. The forum plan to meet on a quarterly basis.

EDT are to have access to the RiO system.

Drugs and Alcohol Action Team (DAAT)

Due to the announcement of the comprehensive spending review in October and the potential budget cuts the DAAT will be meeting with service providers to discuss the implication of the cuts in terms of service provision.

The DAAT will be celebrating Dawali in November which will provide people, their family and friends and partner agencies to learn more about the significance of this ceremony.

There has currently not been any guidance with regards to the development of adult or young people's treatment plans from the National Treatment Agency. However work will be undertaken to revise both needs assessments to inform the joint commissioning of future services.

All three Berkshire East DAAT's will be involved in a General Practitioners Refresher Event in October. This event will seek to recruit new GP's to the Shared Care scheme in order to reduce the reliance on the Specialist and Community Prescribing services located at New Hope which would also reduce the cost of these services.

The Berkshire East Models of Care document contains all of the referral pathways, screening and assessment tools. This has recently been revised and service providers will attend sessions in November to ensure that they are all fully conversant on all of the documents are able to use them correctly to reduce errors.

DAAT managers will attend regional heat of the health and social care awards where they have been shortlisted for an award

Performance and Resources

ICT

The next phase of work to introduce Personalisation to the IAS system has started and a draft Business Case will be discussed at the next Project Board.

We are moving closer to resolving some of the issues we have experienced over the last few months in producing the management reports that are required by the business, and feel confident that we will have a working solution in the few months.

The next quarter will also see the start of two projects: E-Invoicing and Mobile Financial Assessments both will introduce good use of technology to help improve the productivity for finance staff.

Finance

On-going detailed monitoring of the 2010-11 budget will be required to ensure that appropriate measures have been implemented to ensure the Council's budget does not over spend following the in-year grant reductions and also to establish that other spending plans remain on budget. Preparations for the 2011-12 budget requirement should be finalised in advance of the public consultation on proposed changes that will be undertaken at the end of the year.

Work will also be ongoing around the extension of self directed support, where in particular, work will continue of the development and testing of the Resource Allocation System required for personalised budgets. Further systems developments will also be investigated around the new Adult Social Care IT system with e-invoicing the next key application to be assessed.

Human Resources

Key areas for HR during quarter 3 will be supporting the department through any potential staffing changes resulting from the budget reductions, and reviewing the CRB arrangements and await developments regarding the introduction of the Vetting and Barring Scheme.

The team will also be undertaking the Health Check as detailed under the Social Care Task force recommendations, continuing to support the council's job evaluation project and undertaking refocus work on the development of the adult workforce strategy.

Performance & Governance

Performance & Governance continue to work with suppliers, testing data etc to ensure requirements for year end returns can be met, further development of systems and processes to support the need to provide ad hoc reports and performance information.

The team also continue to monitor and evaluate the national performance framework in relation to performance and improvement, and work to determine the way in which this will manifest locally and to understand the impact upon the department.

Annex A: Staffing information

Staffing Levels

Section	Establish ment Posts	Staffing Full Time	Staffing Part Time	Total Posts FTE	Vacant Posts	Vacancy Rate
Management Team	7	7	0	7	0	0
Older People and Long Term Conditions	194	103	100	126.25	14	9.9
Adults and Joint Commissioning	134	102	32	94.78	1	1.04
Performance & Resources	97	57	36	78.44	3	3.68
Department Totals	439	269	168	310.47	18	5.47

Staff Turnover

For the quarter ending	30 September 2010	4.11
For the year ending	31 March 2010	12.9

Comparator Data	
Total turnover for Bracknell Forest Council 2009/10	13.31% (excluding schools)
<i>Median turnover for all employers 1 Jan to 31 Dec 2009</i>	13.5%
<i>Median turnover public services 1 Jan to 31</i> Dec 2009	8.6%

(Source: Chartered Institute of Personnel and Development Survey 2010)

Sickness Absence

Staff Sickness

Section	Total staff	Number of days sickness	Quarter 2 average per employee	2010/11 projected annual average per employee	
Directorate	8	10	1.25	4.375	
Older People and Long Term Conditions	203	511	2.51	8.4	
Adults and Joint Commissioning	134	172	1.28	6.76	
Performance & Resources	93	101	1.08	4.3	
Department Totals (Q2)	437	794	1.81		
Projected Totals (10/11)	437	3,047		5.96	

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	7.6 days
(Source: Chartered Institute of Personnel and Development survey 2008)	

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 period	Variance reported اast period
	£000	£000		£000	%	£000	£000	£00
DULT SOCIAL CARE AND HEALTH DEPARTMENT								
Director	551	139	a, b	691	-11%	0	0	
	551	139		691	-11%	0	0	
CO - Adults and Commissioning								
Mental Health	1,904	-76	а	1,828	31%	-97	-97	
Learning Disability	7,656	-633	а	7,023	-46%	-838	-838	2
Specialist Strategy	0	159		159	25%	0	0	
Joint Commissioning	434	-67	b	367	40%	33	33	3
-	9,994	-617		9,377	-26%	-902	-902	
CO - Older People and Long Term Conditions								
Long Term Conditions	2,083	11	d	2,094	46%	0	0	
Older People	6,618	-34	a, b	6,584	36%	0	0	
Intermediate Care	2,116	-1,756	c	360	61%	90	90	t –
Community Response and Reablement - Pooled Budget	0	1,583	c	1,583	44%	0	0	
Community Support	745	-12		733	38%	0	0	
Emergency Duty Team	0	35	C	35	161%	0	0	
Drugs Action Team	94	-7	b	87	-767%	0	0	
_	11,656	-180		11,476	34%	90	90	
CO - Performance and Resources								
Leadership Team and Support	225	0		225	0%	0	0	
Information Technology Team	208	-1		207	28%	-55	-55	i
Property and Admissions	182	0		182	19%	-25	-25	i
Performance and Governance	192	-3		189	6%	0	0	
Finance Team	531	4		535	39%	0	0	
Human Resources Team	149	0		149	30%	0	0	
	1,487	0		1,487	24%	-80	-80	
DTAL ASC&H DEPARTMENT CASH BUDGET	23,688	-658		23,031	7%	-892	-892	
DTAL RECHARGES & ACCOUNTING ADJUSTMENTS	2,379	0		2,379	0%	0	0	
RAND TOTAL ASC&H DEPARTMENT	26 067	-658		25 410	7%	-892	-892	
GRAND TOTAL ASC&H DEPARTMENT =	26,067	-658		25,410	7%	-892	-892	
evolved Staffing Budget				10,850		-2	-2	

Annex B2

Adult Social Care and Health Virements and Budget Carry Forwards

Note	Total	Explanation
	£'000	
		DEPARTMENTAL CASH BUDGET
	-463	Total reported last period
		In-year grant reductions
		Savings agreed as a result of in-year reductions to government grant support have now been allocated against relevant budgets.
a b	-107 -114	Savings against Area Based Grants Savings against unringfenced specific grants
		House keeping virements
с	0	A small number of net nil effect virements are proposed to align budgets to new year spending plans.
		Structural Changes Fund
d	26	The Employment Committee has agreed that redundancies arising from the closure of Downside Resource Centre would be met from the Structural Changes Fund. These have now been confirmed at £0.026m.
	-658	Total
		DEPARTMENTAL NON-CASH BUDGET
	0	No changes to report
	0	Total

Adult Social Care and Health Budget Variances

Note	Reported	Explanation
	variance	
	£'000	
		DEPARTMENTAL BUDGET
		CO - Adults and Joint Commissioning
1	-97	There are two variances forecast within Mental Health. A saving of £0.057m will be achieved through the termination of the Berkshire Joint Arrangement for the 'Cascade' service which supports those with drugs or alcohol addiction. This will now be provided at reduced cost through an East Berkshire Joint Commissioning arrangement for which BFC has the lead. A £0.040m saving is also anticipated on residential placements due to a mixture of changes in support packages and people moving to lower cost supported living arrangements due to changed support needs.
2	-838	Current forecast spend for supporting people with Learning Disabilities is for a £0.838m under spend. The main reasons for the variance include the following: 1) Continuing Health Care funding being agreed by the PCT. This has reduced costs by a net £0.467m since the start of the financial year, with 7 new funding agreements and 2 people where funding has been withdrawn. This includes all known funding decisions at this date but the Department cannot rule out significant changes in costs from CHC funding decisions that will be made later in the year.
		 2) The second significant change in costs relates to changes in the level of support to those who live in the community or in residential care. There have been complex changes for a large number of people who have been supported, including the deregistration of a number of homes and increased support within the community and current estimates are of a £0.230m reduction. 3) There is also a variance forecast on the DSB of £0.095m which is as a result of reduced costs within in house services (providing both short term residential care and non residential support). 4) People who no longer require a service, which has reduced costs by £0.046m.
		Within the cost forecast, an allowance has been made for potential future cost increases arising for example from people where responsibility has transferred from children's social care or who are currently supported by informal carers but there is a probability that this will not be sustained. This allowance is subject to change, as the costs and the precise timing of care arrangements that are put in place become confirmed.

Note	Reported	Explanation
	variance £'000	
	2000	
3	33	In order to be able to develop a single data base across the Council to hold key data, Corporate Management Team has agreed that a part time Data Hub Officer post be recruited.
		CO - Older People and Long Term Conditions
4	90	Intermediate Care budgets are forecast to over spend by £0.090m which principally relates to in house residential care. There is a forecast £0.065m over spend on the DSB that has occurred as a result of the requirement to engage additional sessional staff to cover absences arising from maternity leave, sickness or other absence. In addition contributions from residents show a reduction of £0.025m compared to the amount assumed in the budget due to a change in the financial profile of clients.
		CO - Performance and Resources
5	-80	There are 2 anticipated variances in Performance and Resources. There will be a £0.055m saving against license and maintenance fees associated with the new Integrated Adults System as the timing of the final contract results in the 2010-11 fees being charged to the capital budget when it was originally anticipated that this would be funded from revenue. The second expenditure reduction relates to the building maintenance budget, where the closure of Downside Resource Centre and strict management of the budget is expected to reduce spend by £0.025m.
	-892	Grand Total Departmental Budget
		DEPARTMENTAL NON-CASH BUDGET
	0	No variances to report
	0	Grand Total Departmental Non-Cash Budget

Annex B4

Adult Social Care and Health Capital Monitoring

2010-11 monitoring at 31 August 2010

Cost Centre Description	Total Budget (£'000)	Cash Budget 2010/11 (£'000)	Expenditure to date (£'000)	Current Commitment (£'000)	Cash Budget 2011/12 (£'000)	(Under) / Over Spend against approved budget (£'000)	Key Target for 31 March	Current status of the project including changes to Cash Profile
Schemes commenced prior to 2010/11								
ASC - Care Management Replacement Programme Adult Social Care IT Infrastructure	327.6 69.0	280.0 50.0	123.9 0.0	45.7 0.0	47.6 19.0	0.0		Core live system operational. Further modules to be implemented N3 Connection and CAF for Adults implementation in progress
ICT projects	396.6	330.0	123.9	45.7	66.6	0.0		
CAPITAL PROGRAMME - DEPT CONTROLLED [schemes b/fwd from prior year(s)]	396.6	330.0	123.9	45.7	66.6	0.0		
Percentages			31.2%	11.5%		0.0%	•	
Schemes commenced 2010/11 and rolling programmes								
Improving the Care Home Environment	6.4	6.4	0.0	0.0	0.0	0.0	In progress.	Spending plan in place.
Carers Accommodation Strategy	335.0	335.0	0.0	0.0	0.0	0.0	Underway	Under review. Linked to Council accommodation strategy
Transforming Adult Social Care Grant	44.0	44.0	0.0	0.0	0.0			Projects being evaluated
Care Housing Grant Mental Health Grant	20.0	20.0	0.0	0.0	0.0			Projects being evaluated
Social Care Grant	189.2 130.1	110.0 90.0	3.1 24.2	0.0 0.5	79.2 40.1			Spending plan in place. Spending plan in place.
Improvements and capitalised repairs	4.7	4.7	4.7	0.0	0.0			Complete.
Adult Social Services	729.4	610.1	32.1	0.5	119.3		· · · · · · · · · · · · · · · · · · ·	
					110.0		T	
CAPITAL PROGRAMME - DEPT CONTROLLED [current year schemes]	729.4	610.1	32.1	0.5	119.3	0.0		
Percentages			5.3%	0.1%		0.0%	1	
CAPITAL PROGRAMME - DEPT CONTROLLED [all schemes]	1,126.0	940.1	155.9	46.2	185.9	0.0		
Percentages			13.8%	4.1%		0.0%	1	

Page 23

Annex C: Progress on Service Plan Actions

ITO5 - To improve health and wellbeing within the 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	~		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, Community Capacity Group and the Commissioning Workstream have action plans which detail developments for the current financial year. A meeting is planned in October to look at the workstreams and make recommendations for for future developments and leads.					
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	>		Increased capacity has been developed within the voluntary sector and people are using personal budgets to access community facilities					
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	~		The Development Liaison Group and the Community Capacity Group have action plans which detail developments for the current financial year, which is the last year of the Social Care Reform Grant and the personalisation programme of work.					
5.1.5 Work with the NHS to make psychological therapies more available	31/12/2010		~		The talking therapy service is now accepting self referral; they are offering a group programme on psychological wellbeing particularly relating to work related stress. 10 week Psycho education programme for carers who have a family member experiencing a first episode of psychosis. Staff currently undertaking a mindfulness training programme and will be delivering group sessions from November. World mental health day focusing on the link between physical health and mental health and encouraging regular health checks.					
5.2 Working with health partners to secure more ou secondary health facilities in the borough	tpatient, dia	agnosti	c and							
5.2.1 Review options with the NHS Berkshire East to	31/03/2011	ASCH	~		Work is on going in respect of the Healthspace and further					

improve access to and increase provision of health facilities in the Borough, and improved Accident and Emergency					discussions are being held with Primary Care Commissioners. More detail is expected in Quarter 3
5.2.2 Development of an End of Life Strategy with NHS Berkshire East	31/12/2010	ASCH	8		Established multi agency working group has developed an end of life pathway and funding will be allocated to enable Intermediate Care Services to support end of life care and support.
5.7 Enabling more people to remain in their own ho	mes throug	h the u	se of T	elecare	
5.7.1 Maximise people's independence by promoting the use of assistive technology and equipment	31/07/2010	ASCH	~		Two flats within a local sheltered Housing Complex have been fitted with extensive Assistive Technolgy, this continues to be a popular resource which promotes independence. This service enables people the opportunity of experiencing sheltered housing to assit with decision making.
5.8 Producing an annual Joint Strategic Needs Anal outcomes for Borough residents	lysis to influ	uence L	_AA and	d	
5.8.1 Ensure JSNA is refreshed annually	31/12/2010	ASCH	V		JSNA on target for refresh by Autumn. Director chairing Bracknell group with responsibility for update. testing
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	~		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	8		Steering group and project group meet on a monthly basis to drive forward this initiative, with an implementaion date of October 2010. Enhanced Intermediate care go live date 1st october 2010.
MTO7 - To seek to ensure that every re	esident f	eels i	ncluc	led and	able to access the services they need
Detailed Action	Due Date	Owner	Status	Last Updated	Comments
7.10 Implementing the Bracknell Forest Partnership to engage with residents to shape service provisior	Communit	y Enga	gement	t Strategy	
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	~		All actions being implemented.
7.10.3 Review the structure role and purpose of the main forums for older people	31/07/2010	ASCH	~		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 has been developed and will be available to people to support the roll out of personal budgets. This will complement the DVD that is available. The Information Hub is live on BORIS for testing. People will be able to access the hub via the internet in October.
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. The Council has recently completed an ADASS survey on the development of the Resource Allocation System which included collecting the views of people who have been through the personalisation process and have personalised support arrangements in place.
7.10.6 Develop a User Led Organisation which is directly contributing to the transformation to personal budgets	31/12/2010	ASCH	~	The Department of Health have set a target that a ULO must be in the process of being set up by December 2010. New Support Horizons have been chosen to support the development of a ULO in Bracknell.
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 Scheme, Gen Equality Scheme	der Equalit	y Sche	me and	Race
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 and Older Peoples Partnership Board.
7.5.7 Implement the Disability, Race and Gender Equality Schemes actions due for completion in 2010/11 and progress those actions due for completion in later years (Adult Social Care and Health)	31/03/2011	ASCH	~	Scheme actions being implemented.
7.6 Increasing access to services by electronic mea	ns			
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	~	The Council's website is currently being revised - this will include information regarding Adult Social Care and Health.
7.7 Implementing the Community Cohesion Strategy belonging and identity as members of their commu		ople a	sense	of
7.7.11 Implement actions in 'All of us' Community cohesion Strategy (Adult Social Care and Health)	31/03/2011	ASCH	~	All actions being implemented.

7.8 Working within the Bracknell Forest Partnership to show continuous improvement n equalities and diversity in the Council and its services, and work towards attaining he 'Achieving' level of the Equality Framework										
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	>		On target and ongoing					
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	>		All actions being implemented					
7.8.20 Improve equality monitoring to provide better information on access to and take up of services by different parts of the community (Adult Social Care and Health)	31/03/2011	ASCH	~		Equality monitoring framework being developed					
MTO8 - To reduce crime and increase	people's	sens	se of s	safety i	n the borough					
Detailed Action	Due Date	Owner	Status	Last Updated	Comments					
8.5 Reducing the number of people, particularly you alcohol					J					
8.5.1 Promote smoking awareness and cessation					Council staff have been working with the PCT Stop Smoking					
initiatives delivered by the PCT	31/03/2011	ASCH	~		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					
initiatives delivered by the PCT 8.5.2 Work with the Berkshire East PCT to promote	31/03/2011 31/03/2011				weekly drop in at Bracknell College; workshops at Sandhurst					
initiatives delivered by the PCT 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		ASCH	× × ×		weekly drop in at Bracknell College; workshops at Sandhurst Secondary School and a drop in at Rowan's Children's Centre 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. Increased involvement with FSA has					
initiatives delivered by the PCT 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. 8.5.3 Increase the number of drug misusing clients	31/03/2011 31/03/2011	ASCH ASCH	✓ ✓		weekly drop in at Bracknell College; workshops at Sandhurst Secondary School and a drop in at Rowan's Children's Centre 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. Increased involvement with FSA has improved awareness within schools 132 people in effective treatment in quarter 1 which equates to					

to meet local needs in terms of drug and alcohol treatment				findings of the annual needs assessment. Needs assessment to be reviewed based on data from 2009/10
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. Placements have been made and there have been successful completions. 26 places available for financial year with additional funding if capcity is reached.
8.9 Increasing awareness of 'safeguarding adults' is the wider public	sues for vu	ulnerab	le peop	le and
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	~	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 has been 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> This work is still in progress.
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	~	The membership of the Safeguarding Adults Partnership Board has been scrutinised and is now attended by representatives of The DWP and Berkshire Care Association.
8.9.4 Review Care Governance Protocols	31/07/2010	ASCH	~	The Care Governance Board protocols have now been reviewed and revised. care Providers within Bracknell Forest and others who we commission are now aware. of the process
8.9.5 Manage/lead "Safe Place" project	31/12/2010	ASCH	~	The Safe Place Scheme was successfully launched late July and is now running. Well over 100 local shops and community facilities have signed up to the scheme in the town centre and outlying areas.
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	~	The first DoLS Newletter has now been sent to Bracknell Forest care home providers along with the Bracknell Forest Guidance for receiving DoLS appliocations and a DoLS poster for information.
8.9.7 Hold Managing Authority conference	31/10/2010	ASCH	\checkmark	An DoLS workshop/event is being planned for February 2011.
8.9.8 Lead on the implementation of the Vetting and Barring Scheme	30/11/2010	ASCH	~	The Coalitiion Government is currently relooking at this scheme. It is therefore not yet ready to be implemented.

MTO9 - To promote independence and	l choice	for vı	ulnera	able ad	ults and older people					
Detailed Action	Due Date				Comments					
9.1 Modernising services for vulnerable adults and older people by reducing reliance on residential care and improving access to community based services										
9.1.1 Create more activities for frail older people, with transport linked to the activities	31/05/2010	ASCH	~		Older people have received funding to enable them to purchase subscriptions to Keep mobile enabling independent use of transport which has supported increase use of community services and activities.					
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	~		The voluntary sector with the supprot of grant funding from the council provide a housework, shopping and maintenance service. Future opportunities will be available through the Time Banking scheme and the roll out of personalisation.					
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	>		Consultation questions are being developed and will be achieved in Q2. Questionnaires will be distributed throughout Bracknell Forest and at a multitude of venues.					
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	~		Partnership working and increased funding to the voluntary sector has enabled an increase in day provision, which has been received positively by people who have attended Downside in the past.					
9.4 Providing advice and support to vulnerable peo own homes	ple to help	maintai	in them	in their						
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	~		An options paper describing 3 EDTmodels of delivery has been developed and the project lead is awaiting feedback from all unitaries on their preferred option which will be written into a final paper for agreement.					
9.5 Providing support for carers through working w partners	ith statutor	y and v	oluntar	ſУ						
9.5.1 Continue to increase the rate at which carers receive assessments or reviews	31/03/2011	ASCH	~		A selection of GP surgeries have agreed to pilot the issuing of information packs and carers self assessments to known carers and newly identified carers in their surgery. A self addressed envelope is provided directing the self assessments to Adult Social Care for action. It is anticipated this will increase the amount of carers receiving an assessment or review.					
9.5.2 Implement the Dementia Care Adviser role, following DH funding	31/03/2011	ASCH	~		The Dementia Care Advisor Role is working with our statutory and voluntary partners, families and carers. The advisor is					

				delivering the service following the Department of Heath guidance, ie, working with people who have been newly diagnosed with dementia, who do not yet have involvement from any other professionals in relation to this. Funding for this role ends in March 2011 and, with the 25% carryover, it is estimated that we can continue to fund the post until June 2011. Marilyn Kemp is currently in negotiations with The Alzheimer's Society, the PCT and BHFT to try to secure shared funding to enable the post to continue. This may mean that the job description will need to change slightly to ensure that it meets the requirements of all Partners involved in funding the post.
9.7 Implementing the Borough-wide Strategy for Ol	der People			
9.7.1 Promote use of supported self-directed assessments	31/03/2011	ASCH	~	Care managers have received training and roll out of personalisation planned for the 1st October will ensure that staff promote and offer supported self-directed assements to all who access Adult Social Care and their carers.
and to support from the Council, to have and use, a support the development of community based opp 9.8.1 Evaluate the personalisation pilot and develop recommendation for the roll out of personalised suppor across ASC	ortunities	_		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.
9.8.2 That all new individuals and existing people supported by Adult Social Care are offered a personal budget	31/10/2010	ASCH	~	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.
9.8.3 That processes are in place to monitor across the whole system the impact in investment towards preventative and enabling services.	e 31/10/2010	ASCH	~	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. This will be reviewed in November.
				The Timebank Development Officer is in post and has begun to
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	~	recruit individuals. A campaign to attract staff to the scheme will be launched on BORIS in October.

9.8.6 A Fairer Contributions Policy is approved by the	30/06/2010		~		Achieved.
Council's Executive which supports Personalisation			•		
MTO10 - To be accountable and provide	de excell	ent v	alue f	or mon	еу
Detailed Action	Due Date	Owner	Status	Last Updated	Comments
10.4 Working effectively with partners to improve the	e quality of	f life in	the Bo	ough	
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	~		Relevant working groups have been allocated to key managers reflecting the nature of the groups. Examples include: Transforming Community Health Services, Unscheduled Care, Inetermediate Care, Delayed Discharges etc
10.4.9 Implement a joint complaints procedure with the NHS	31/07/2010	ASCH	~		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 the Service savings and improve service operation	Efficiency S	Strategy	/ to deli	ver	
10.5.1 Introduce new commissioning arrangements for Domiciliary Care (older people)	31/05/2010	ASCH	~		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	~		Consultation concluded recommendations are in process of implementation
10.7 Ensuring all council services provide value for resources	money and	l make	effectiv	e use of	
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	~		Quarterly monitoring informaiton 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 right skills an outcomes and maximise service efficiency	d capacity	to deliv	/er serv	vice	
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	~		Strategies have been implemented to provide support for service areas who are experiencing difficulties in recruitment and retention. Currently reviewing the recruitment incentives available for headteacher recruitment.
10.8.3 Review the workforce implications of personalisation to ensure the workforce are appropriately developed and trained to deliver services effectively	31/03/2011	ASCH	~		The Workforce Workstream has been established to ensure employees are appropriately skilled to deliver personalised services.

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 MTO12 - To promote workforce skills	31/03/2011	ASCH	~		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.				
Detailed Action	Due Date	Owner	Status	Last Updated	Comments				
12.1 Contributing to the development of an appropriately skilled workforce through Adult and Community Learning									
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	~		We have implemented the use of the Recovery Star as a method of identifying support required to enable intervals to access education, training and employment. This is used across both statutory and voluntary services. Training is being offered to assist staff in supporting individuals in maximising benefits whilst they move into paid employment.				
12.1.2 Maximise income for vulnerable people through access to employment or benefit maximisation	31/03/2011	ASCH	~		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 thay apply for all applicable benefits, including ILF.				
12.1.3 Continue to help people with learning disability to secure employment	31/03/2011	ASCH	~		Support to help people with learning disabilities to secure employment is ongoing through the jobs and homes pilot action plan. In addition an employment plan is being developed by Officers and members of the Learning Disability Partnership Board to build on the progress thus far and to also create more opportunities. The new business plan the Green Machine has developed is being implemented and should continue to maintain and create new opportunities even in a difficult economic climate.				
12.1.4 Establish Steering Group for PSA16 Innovation Fund Project and implementation plan	30/04/2010	ASCH	~		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: Progress on performance indicators Wednesday, November 10, 2010

Indicator Ref	Measure	Responsib le Officer		Current Target	Previo us Actual		Comment & Improvemen t Action	Data Validation Status	МТО
NI125	Achieving independence for older people through rehabilitation or intermediate care (Annually)	Sally Palmer	n/a	n/a	89.4%	n/a	New guidelines issued by the government show that discharges require collation from 1 October (rather than 1 July as previously indicated) - we will therefore be monitoring status from the beginning of January.	Not required	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI139	The extent to which older people receive the support they need to live independently at home (Biennially (every two years))	Mira Haynes	25	n/a	25	n/a	This indicator is measured every two years.	Not required	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI 131	Delayed Transfers of Care	Mira Haynes	4.32	n/a	2.39	6	Performance of delays continues to be strong. There are some challenges around continued reporting of this	Signed off	

							indicator due to a removal of weekly NHS updates. We are looking into how we can resolve this.		
NI145	Adults with learning disabilities in settled accommodation (Annually)	Nick Ireland	83.3%	n/a	74.61%	G	Performance for this indicator is good.	Signed off	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI 132	Waiting Times for Assessments	Glyn Jones	n/a	n/a	92.2%	n/a	We are having challenges around the reporting accurate data for this indicator and anticipate reporting in next quarter.		
NI 133	Waiting times for Services	Glyn Jones	90.2%	n/a	94.8%	G	Performance is on a par with last year and is strong.	Signed off	
NI 130	Self Directed Support	Zoe Johnstone	13.9%	30%	16%	6	Personalisation milestones have been achieved and we expect performance to improve month on month as the service is rolled out.	Signed off	
NI146	Adults with learning disabilities in employment	Nick Ireland	15.00%	14.6%	14.6%		Current performance is over targets and	Signed off	MTO 09 - To promote independence and choice for vulnerable

	(Annually)						therefore strong.		adults and older people
NI149	Adults receiving secondary mental health services in settled accommodation (Annually)	Tony Dwyer	96%	n/a	86.2%	G	This represents strong performance for this indicator.	Signed off	MTO 09 - To promote independence and choice for vulnerable adults and older people
NI150	Adults receiving secondary mental health services in employment (Annually)	Tony Dwyer	19%	n/a	15%	6	Current performance of this indicator is in better than last year's outturn of 15% and represents good performance.	Signed off	MTO 09 - To promote independence and choice for vulnerable adults and older people
NIO40	Number of drug users recorded as being in effective treatment (More frequently than quarterly)	Jillian Hunt	181 people		160 (July 9/10)	6	The latest data available (April 2010) shows 181 people being in effective treatment as a rolling 12 month figure. This exceeds the target of 146 people across 2010/11 by 35 people and represents good performance.	Signed Off	MTO 05 - To improve health and wellbeing within the borough

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	 <u>Older People</u> 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 <u>Mental Health</u> Economic downturn could impact on numbers of residents with mental health issues and increase level of domestic abuse. Demand levels are being monitored.	Ongoing	Monitoring demand at Performance Board and Budget Monitoring.	Demand levels appear to be broadly consistent with previously anticipated projections. Monitoring continues and no further mitigation needed.

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

	C4	Transforming Adult Social Care			
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 <u>People with Disabilities</u> • 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	Department is now rolling out total programme.	Pilot was successful Monitoring ongoing.

 Children's Services to Adult Community care Services. Impact of transition on budgets considered at DMT as part of budget pressures discussions. Packages of Care 	All information considered by CMT as part of departmental pressures.	Undertaken for 2011/12 budget build.
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 monitoring by DMT.

Annex E: 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, PARIS, is not yet configured to work with risks, so as an interim measure operational risk factors for Quarter 2 are reported here, in a separate annex.

Ref	Risk	Mitigation	Q2 update on progress	Q3 revised risk				
	PRIORITY THREE: PROMOTING HEALTH AND ACHIEVEMENT MTO 5: Improve health and well being within the Borough.							
5.1	Unable to	Ensure relevant council staff	Achieved					
-	agree priorities with partners.	are represented on key groups.						
5.2	Transforming community health services and changing provider for community health services.	Engaging with PCT process, using position and service delivery to help influence.	Part of appropriate Boards. Working Group with Berkshire Healthcare Trust as part of this.					
		OMOTING HEALTH AND ACH		0455				
		ATE A BOROUGH WHERE PE						
	ices they need.	e that every residents feels inc	cluded and able to acces	s the				
7.1	Non	Process of EIA will underpin						
	achievement of actions in 7.5.1 will restrict access to hard to reach groups.	this.						
МТО		and increase people's sense	of safety in the Borough	•				
8.1	Further delay in the implementati on of the Vetting and Barring Scheme.	The national timetable will dictate the introduction to the scheme.	This has been delayed by new government.					
8.2	Internal recruitment processes not sufficiently in place for the scheme to	Working group established to ensure processes are ready. Guidance to be shared across workforce partners.	Action remains the same.					

	operate.			
	(Relates to			
	Action 8.9.8.)			
8.3	Lack of awareness of the scheme. (Relates to Action 8.9.8.)	Communications with internal workforce managers and through Safeguarding Adults Strategy Group. Presentations to voluntary sector.		
8.4	Failure to implement safeguarding and DOLS policy could put people at risk.	Use of care governance board and Safeguarding Adults Forum to promote activities. Deliver DOLS audit.	This continues to be monitored.	
8.5	Failure of provider to deliver substance misuse services.	Regular performance and financial monitoring. Encouraging user feedback on treatment services.	Reporting shows good performance at this stage within budget.	
MTO 9	: Promote indep	pendence and choice for vulne	erable adults and older people.	
9.1	Personalisati on targets not met	Regular monitoring through Project Implementation		
9.2	Staff skills to deliver changes are present	Workforce plan identifies range and type of skills needed		
9.3	Failure to engage key stakeholders	Workshop for all providers		
PRIOR	ITY FIVE: VALU	JE FOR MONEY		
MTO 1	0: Be accountal	ble and provide excellent valu	e for money.	
10.1	10.8.2 Knowledge of where staff recruitment/re tention will become problematic	Early identification of challenging recruitment areas. Workforce Planning to be implement across the department. Engage colleagues with the LA/Workforce as appropriate. Presence at recruitment fairs for key work areas – e.g. teaching, social workers.		
10.2	10.8.2 Non recruitment or delays to key posts could impact on service efficiency. Could also potentially	Early identification of challenging recruitment areas. Work with managers to ensure recruitment campaigns are effective and targeted		

10.3	increase costs where external recruitment agencies are engaged. 10.8.3 The Personalisati on pilot does not provide enough informed data to begin to shape future workforce requirements	Continuous review of how service delivery is impacted through Personalisation. Review arrangements in other Local Authorities	
PRIOR		IN ECONOMIC PROSPERITY	
MTO 12	2: Limit the imp	act of the recession	
12.1	Economic	Continue to work with	
	downturn restricts	Breakthrough. Use PSA 16 work to create more	
	employment	opportunities	
	opportunities		