



# **Performance Monitoring Report**

for

## **Adult Social Care & Health**

**Fourth Quarter 2010/11  
January – March 2011**

Portfolio holder: Councillor Dale Birch  
Director: Glyn Jones

## Section One: Executive Summary

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### **Introduction by the Director of Adult Social Care and Health (ASC&H)**

The final quarter of the year brings together a number of initiatives that continue to ensure that we are providing positive and innovative support for people in the Borough. The agenda for Adult Social Care and Health is continually developing responding to national developments.

The department has made excellent progress in Personalisation and has seen real innovation in support people are choosing. Modernisation of systems, processes and teams continues to be a priority in responding to new initiatives and demands, as well as looking for efficiencies. This can be seen in all parts of the department. The pilot work with the PCT has demonstrated the value of Enhanced Intermediate Care in providing a speedy response to assist in avoiding admission to hospital.

The 2010/11 Service Plan has resulted in all actions completed or in progress. Although the performance landscape has changed considerably during the course of 2010/11 (no annual assessment judgement by the Care Quality Commission), the end of year returns for the extensive statistical data remain and will be returned in accordance with the timetable. We are planning to provide an 'end of year report' to capture the achievements and set out plans for 2011/12 and beyond.

Work with Health colleagues will increase in importance as we grapple with the significant health changes and their impact for the Council.

### **Adults and Joint Commissioning**

#### *Autistic Spectrum Disorders*

In response to the recent publication "Fulfilling and Rewarding Lives" (The National Strategy for adults with autism) a working group has continued to meet monthly, developing a local joint commissioning strategy and delivery plan. These plans will be completed for approval through the first quarter of the new financial year.

The working group set up to develop and work towards a local joint commissioning Strategy, has reviewed the Statutory guidance for local authorities and NHS organisations to support implementation of the autism strategy and has ensured it is incorporated into the local delivery plan.

#### *Joint Commissioning*

The Learning Disability Commissioning Strategy has been refreshed and has been presented to the Learning Disability Partnership Board.

The Prevention and Early Intervention Guide was approved and printed. It has been distributed to relevant locations in the borough and to all Members of the Council.

The Health Transition Group was set up as an executive and officer group to lead the Council's response at a strategic level and meet new duties to integrate working across health and social care. Work streams and leads for four emerging themes were identified: developing a new statutory Health and Wellbeing Board (HWB), transitioning functions of Local Involvement Networks (LINKs) to a new Local HealthWatch (LHW) organisation, Local Authority (LA) support for GP commissioning, supporting Children in transition between children's and adult social

care and communicating change. The Council has been given Early Implementer status for the development of a HWB by the Department of Health.

An evaluation of the Dementia Advisor project was completed; it was shown that following proactive advice and information for people with early stages of dementia and their families, referrals to the Community Mental Health Team for Older Adults (CMHT OA) have been avoided. Funding for the Dementia Advisor post has been secured for a further 12 months. This will enable more people with dementia to live independently for longer before the need for on going support from ASC&H.

Work began to develop the Carers' Strategy and an Advocacy Strategy to inform future commissioning.

A Commissioning Strategy for people with Autism has been developed.

### *Learning Disabilities*

Work continued with individuals living in the remaining residential homes for people with learning disabilities in Bracknell, to identify their housing and support requirements. Independent advocacy support is in place to support individuals to understand the options they have and voice their preferences.

The working group working with a local charity Crowthorne Old Age and Teens Society (COATS) continued to meet in relation to redeveloping a building in the Crowthorne area, to secure further affordable and adapted accommodation for adults with a learning disability. The project should be completed through the first quarter of the new financial year.

The new business plan for Green Machine a Community Interest Company supported by Bracknell Forest Council (BFC) providing green space maintenance services has been implemented which has ensured full independence from April 1st.

Planning has commenced and is ongoing for the move of the Community Team for People with Learning Disabilities (CTPLD) from Waymead to Time Square.

### *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 has been completed. The consultation process is now complete and the Departmental Management Team have approved the changes, although these will not be implemented until the vacant manager post is recruited too. Once the position has been recruited to they will be involved in progressing the implementation plan.

Berkshire Healthcare NHS Foundation Trust (BHFT) has now implemented a new Patient Record IT system for the Community Mental Health Team for Adults (CMHT) and CMHT OA services. Work is ongoing looking at potential integration of technologies, key developments have been made in N3 connection and this will allow LA staff were appropriate to eventually access RIO the system currently used by BHFT.

### *Personalisation*

The rollout of Personal Budgets continues across the department for everyone eligible for funding for on going community based support needs.

The i-hub has been further developed and information sessions to promote its use and to inform future development were held with staff. The i-hub has now been upgraded and includes the capability to host a register of Personal Assistants, advice and guidance notes and a log-in facility for providers to update their own records.

The Timebank has over 30 members and exchanges continue to increase. A "Skills Share" event was held for members and for people interested in joining, which sparked more exchanges. Members of the Timebank have been involved in redecorating an individual's house which has enabled the individual to move to a new property and away from an abusive relationship. Members have also been knitting blankets for Battersea Dogs Home.

Guidance on "Determining and Using Personal Budgets" has been developed and is subject to consultation.

Presentations were given at a voluntary sector event held by Bracknell Forest Voluntary Action (BVFA) and at a provider event held by Skills for Care.

#### *Safeguarding*

A Deprivation of Liberty Safeguards (DoLS) Provider event was held at Bracknell Sports Centre on 9th February. The event was attended by 42 people with representation from nine care homes. Feedback so far indicates that attendees benefited from the event and learned more about DoLS

The Revision of The Berkshire Safeguarding Adults Policy & Procedures continues. A draft web based version has been developed and was circulated for comment to the four Safeguarding Adults Partnership Boards that cover Berkshire

The Safeguarding Adults Development Worker started in January 2011 and has completed his induction. Part of his role will be to work closely with commissioned services to support them in further developing their internal safeguarding processes, compliance with Mental Capacity Act (MCA) and DoLS.

72 operational staff attended specific training aimed at developing their skills in completing assessments of capacity. The training was delivered by the Council's legal team.

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

#### *Business Support Team*

The re-organisation of the Business Support Team has gone well. Four members of the team have now completed training on taking minutes for Safeguarding meetings with one member of the team taking a lead in this role.

#### Community Response & Reablement (CR&R)

Following the pilot phases of delivery of enhanced intermediate care and end of life services, funding has been agreed for a further two years. Most referrals are to prevent admission to hospital. These are short term interventions which deal with the presenting crisis. Further work and assessment will be undertaken if necessary within a 72 hour period from the time of referral to the service.

Older People and Long Term Conditions (OPLTC) team and Community Response and Reablement (CR&R) have been reorganised. In order to improve the support offered, the duty team has been strengthened. The team will work with all hospital discharges, all new referrals and with people who are in crisis. Once the presenting

problem has been resolved, people are then referred on to either Intermediate Care services, the long term team or community based services outside the Council.

There are three social workers who are specifically assigned to the three acute trusts that serve Bracknell Forest. The process for hospital delays has been refined; numbers continue to be low for Bracknell Forest due to the proactive way people are managed by the hospital team in CR&R.

The government made "Winter Pressure" money available via the PCT early in the new year. This money was used to facilitate early hospital discharge. Additional Occupational therapy and Social work time was made available along with the ability to spot purchase beds in both residential and nursing homes so that people could be discharged while long term support solutions were worked on and implemented.

#### *Community Support and Wellbeing*

Teams were successful in recruiting to three vacant posts. Staff meet monthly with CMHT OA and this close communication improves outcomes for the people we support. The team have also ensured that the people who use our service are safe in their own homes by maintaining close links with Bracknell Forest Homes (BFH), the Age Concern Handyman other repair services.

Heathlands Day Centre (HDC) building works were completed and the re-configured building was 'opened' by Councillor Dale Birch on 9th March. The people who use the service followed-up with a celebration lunch on the 23rd. The centre's staff and manager have worked hard to create a homely and welcoming space offering three large rooms with seating and activities areas alongside a smaller room aimed at music appreciation and a shower room with adapted WC.

Heathlands Residential Home (HRH) is using a bed as a specialist Dementia Intermediate Care Bed funded through the "Winter Pressure" money with early success.

In addition, the two level access shower rooms are now complete and redecoration and refurbishment continues on a rolling basis.

Discharge teams at Frimley Park Hospital, Royal Berkshire Hospital and Wexham Park Hospital have received promotional information for "Home First" which has prompted a steady rate of referrals. "Winter Pressures" monies were used to implement a further Hospital to Home service with a good take up.

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

The draft drug and alcohol treatment strategy is out for consultation and delivery against this plan will be monitored. The new strategy incorporates the plans for both adults and young people.

The DAAT submitted a proposal to become a Payment by Results site and has been chosen as one of 8 pilot areas in the country.

Whilst funding levels have been reduced slightly, support has been revamped to ensure that this will not have an impact on frontline service delivery.

#### *Emergency Duty Team (EDT)*

EDT now have access to all six Unitary Authority data bases giving us access to all care groups within Berkshire. This is a considerable achievement and taken over 18 months with departmental and other unitary staff being involved.

Bracknell Forest (Berkshire) EDT is now the only Emergency Duty Service in the United Kingdom to have access to 12 databases are trained in their use.

Given recent case law re the European Working Directive and current studies/research into the impact of 12 hr shifts on those individuals who work night shifts, EDT undertook consultation with staff to create a rolling rota with shifts no longer than 8.5hrs. The new rolling rota has now successfully been implemented. The changes to the rota have resulted in increased staff satisfaction and a reduction in the need to use relief social workers.

#### *Older People and Long Term Conditions (OPLTC)*

As a consequence of the changes previously mentioned, the OPLTC has seen some changes. This is pivotal to the successful roll-out of Personalisation. A 'self assessment review' form has been used for people where appropriate and these have been well received and completed.

### **Performance and Resources**

#### *Finance*

Activities include monitoring the 2010-11 budget, preparation for year end closure of accounts and finalising preparations for the 2011-12 budget. Developmental work on the Adult Social Care IT system continues.

Preparations for finalising the 2010 – 11 accounts are at an advanced stage. In what has been a difficult financial year expenditure has been contained to below budget level. Additional financial support has been received from Health for Enhanced Intermediate Care, End of Life Care and Winter Pressures in this last quarter and spending plans have been developed to ensure this funding is used in an efficient manner.

The 2011-12 budget has now been agreed and monitoring of commitments and spending plans has already commenced to ensure expenditure reductions included in the budget are achieved.

The main pieces of developmental work progressed this period relate to the refinement of the Adult Social Care IT system including implementation of the mobile Financial Assessments module (planned go live in the first quarter of 2011- 12) and e-invoicing (planned go live second quarter 2011- 12).

#### *Human Resources*

The team are planning for the forthcoming employee appraisal process from April 2011 utilising the new competency based framework and continue to support managers through organisational change as required.

#### *Information and Communications Technology (ICT)*

Final issues are being resolved by LiquidLogic in the Integrated Adult System (IAS) to enable us to go live with the latest Protocol and Controcc releases, which include major changes to the Safeguarding module. All relevant information is now with LiquidLogic to commence Phase 3, the reconfiguration of IAS to meet the Personalisation agenda. This will follow through to the live system.

Projects for e-invoicing and mobile working for the Financial Assessment Team have commenced. However, work has been suspended to allow the upgrade to the latest versions of Protocol and Controcc to take place.

By the end of March the reporting environment should be in a position of acceptance by the Performance Team. They will then be able to use the embedded statutory returns to support the delivery of data to the DoH for 2010/11.

*Performance Management*

The Performance Management team have been preparing for the annual statutory returns due in at the end of May, and working with supplier LiquidLogic to further progress report testing.

The team has also been working continuously with operational teams across all care groups to ensure that data is validated and up to date prior to our return submissions.

**Summary of Equality Impact Assessments**

No Equality Impact Assessments were published this quarter.

## Section Two: Progress against Service Plan

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The ASC&H 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 4 (✓), with none causing concern (✗).

Annex C also provides details of performance against relevant National Indicators this quarter, where data is available.



## Section Three: Resources

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### 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

### Capital

#### *Current approved budget*

There is no change to the £1.126m approved cash budget for the current financial year as reported last period.

#### *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.

### Revenue

#### *Current approved budget*

The approved cash budget for the current financial year reported last period totalled £25.400m, with £23.021m in direct budget and £2.379m in recharges and accounting adjustments.

There has been a small adjustment to postage budgets as a result of a business process review. This reduces the direct budget to £23.020m.

#### *Provisional outturn*

A forecast under spend of £1.297m was reported last quarter and this has now risen by £0.294m to £1.591m. The most significant variance relates to reduced support needs for People with Learning Disabilities who are supported within the community. The changes in forecast are as follows:

- An increase of £0.158m in under spend on supporting People with Learning Disabilities. There has 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 (£0.121m) and additionally, slippage on a scheme to provide advocacy services, reducing costs by £0.030m (although these costs will be incurred in the next financial year). Savings are also anticipated on record management costs due to slippage, although again these costs will be incurred in 2011- 12 (£0.007m).

- A saving of £0.020m is expected due to People with Long Term Conditions who no longer require support in a residential setting.
- A saving of £0.028m is expected as a result of slippage on schemes provided through the stroke grant.
- A saving of £0.080m is expected as a result of increased health funding for people who receive domiciliary support from the in house Community Support Teams.
- A saving of £0.008m is expected on record management costs in Finance, due to slippage. These costs will be incurred in 2011- 12.

### **Staffing**

The adult workforce strategy continues to concentrate on the workforce changes resulting from the personalisation agenda. Through the workforce work stream it has been discussed whether we could benefit from understanding how other local authorities have managed and learnt from the progressing through the agenda.

The team has been supporting the department through a number of employee relations issues. Staff reductions have been completed in one service area. In addition, work has continued in support of the Corporate Job Evaluation review project.

A review has been undertaken of the Criminal Records Bureau (CRB) process to explore options to improve efficiency of process including potential electronic submission of information. However, due to the review of the operations of the Independent Safeguarding Authority (ISA) any potential system developments will be on hold until the operations of the CRB/Independent Safeguarding Authority (ISA) are clarified.

## Compliments and Complaints received

### Compliments Received

There were a total of 52 compliments received.

The OPLTC team received 10 compliments in this quarter, 27 for the CR&R team.

The CTPLD received 8, the Performance & Governance Team received 6 and there was 1 for CMHT.

### Complaints received

No. Rec'd Q4	Nature of complaints (bulleted list)	Action taken (bulleted list)
1	Joint complaint regarding: administrative errors within the Finance Department & Waiting period for OT equipment	Complaint partially upheld in respect of Finance and not upheld in respect of OT equipment
1	Complaint in respect of services received at Bridgewell during respite care.	Complaint partially upheld
1	Complaint in respect of services and information received from CMHT	Ongoing investigation
1	Complaint in respect of services received from CTPLD	Not upheld
1	Complaint in respect of length of time to renew a Blue Badge	Not upheld
1	Complaint in respect of services received from CMHT	Ongoing Investigation
1	Complaint received in respect of reduction in budget/services	Ongoing investigation
1	Complaint in respect of a communication	Complaint upheld
1	Complaint in respect of the assessment process for Direct Payments	Complaint upheld

## Section Four: Forward Look

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### Adults and Joint Commissioning

#### *Autistic Spectrum Disorders*

The Autistic Spectrum Disorder Commissioning Strategy will be submitted for approval.

A small group will be set up to review the Virtual Autism Team (VAT) in line with the aims and objectives of the commissioning strategy and local delivery plan.

#### *Joint Commissioning*

The refreshed Commissioning Strategy for people with Learning Disabilities will be presented to the Executive Member for approval.

The Commissioning Strategy for people with Autism will be presented to the Executive for approval.

The Health Transition Group will further maximise opportunity under the duty to integrate to identify and create new relationships, particularly with clinical and broader community partners to deliver the new agenda in the new context. Work programmes will be established to support the four existing work streams and new ones may be identified. The Council will also begin contributing to the DH support programmes and Action Learning Sets as an Early Implementer authority.

Existing LINKs must continue with statutory responsibilities and new support arrangements will be explored and put in place for the planning year.

A Section 75 Agreement with health partners to agree pooled budgets for joint services will be approved.

The data hub, developed on behalf of the Local Strategic Partnership, will be launched on 4th April. The hub will be known as StatShare.

#### *Learning Disabilities*

Headspace is a community arts project which focuses on providing sessions in art, drama and music in a safe environment. People with additional support needs, or who may be from vulnerable groups, are encouraged to join with others from the community in integrated activities. As the project is run by the local authority it is not eligible to apply for certain grant. An options appraisal will be completed to determine the most appropriate model to pursue in order to enable Headspace to be independent of the Council. The current Project Board overseeing the options appraisal and development of the business case will be reviewed to ensure appropriate membership to implement the preferred option.

**Advocacy Strategy:** The transformation of social care and the personalisation agenda set out in Putting People First noted Health and Social care bodies should provide an enabling framework to ensure people can exercise choice and control with accessible advocacy. Work has commenced an advocacy strategy to respond.

### *Mental Health*

BHFT is continuing with the 'Next Generation Care' (NGC) change programme, and has now moved onto phase 3. The public consultation period has now concluded and the Trust have issued this statement:

Both Boards have had first sight of the outcome of the public consultation and the opportunity to consider other information pertinent to a decision. Both Boards understand the unaffordability of Option 3 in the current and future economic environment. Option 2 is not supported by the clinicians as it will mean that older people will have to continue to be cared for in an environment that mixes people with functional illness and those with organic problems that is not conducive to high quality care.

On this basis the PCT has asked the Trust to progress to outline Business Case on Option 1. This will allow the detail of that option to be worked up, including exactly what and where additional community investment can be made and how the transport scheme would work.

Once this information is known, and only then will a final decision be made. Both Boards would expect that to be by June 2011.

### *Personalisation*

Guidance for staff will be approved and published to ensure a consistent approach to determining and using personal budgets.

A pilot will be established to inform the development of brokerage for people with personalised support plans. The pilot will inform the future workforce strategy and commissioning plans for independent brokerage.

The personal stories and outcomes for people with a personal budget will be refreshed and published on BORIS.

The Personalisation section of the Council's internet site will be refreshed.

### *Safeguarding*

The revised, web based Berkshire Safeguarding Adults Policy & Procedures will be launched in May/June 2011. The aim is for this to be launched during the same week across all of the six Unitary Authorities in Berkshire.

The Safeguarding Adults Annual Report will be presented to the Safeguarding Adults Partnership Board In May 2011. This will include information on all of the safeguarding arrangements in Bracknell, safeguarding partnerships with other agencies and groups as well as statistical data and analysis for the reporting year 2010/11.

An audit of operational teams compliance with MCA will be undertaken in May/June 2011. This is following the specialist training that was provided for operational teams in February 2011.

A workshop for the Department's Designated Safeguarding Managers will be held to look at the new version of the IAS Safeguarding Module and to share good practice regarding its use.

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

### *Business Support Team*

Staff will be trained in undertaking referrals and contact assessments within Front Desk to cover absence and support the Customer Liaison Officers.

Increasing skills the team will be booked on MCA training. Team members will also receive training on Autistic Spectrum Conditions and the new Carer Aware training programme in order to enhance the service to people who contact us.

The team plans to support changes due to the reform of the Blue Badges by the Department of Transport aimed at addressing an increase in applications.

### *Community Response and Reablement (CR&R)*

Following agreement of funding by the PCT for Enhanced Intermediate Care and End of Life Services, recruitment of fixed term contracts for staff is taking place.

The changing needs of the people using Intermediate Care means that separate registration is being applied for through the Care Quality Commission for the Bridgewell Centre, with all of the appropriate requirements.

### *Community Support and Wellbeing*

Work is in hand to develop a Carer's Drop-in Service at HDC. It is intended that people with dementia will be offered an assessment and helped to create a support plan that will remain on file. Carers could then book a specific day and time to drop their family member/partner at the centre in order to enable them to attend appointments and pursue leisure activities.

Heathlands will be developing a range of enhanced activities including singing for the brain, cold cookery skills and Tai Chi, over the coming months.

All staff in Community Support Team will be undertaking the Carer Aware training and will actively encourage carers to undertake a supported self-assessment in order to identify their own needs for advice and support.

The Community Support team for Dementia aims to use unallocated hours owing to cancellations to support the enhanced day-care provision at Heathlands.

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

In quarters 1 and 2 the DAAT will concentrate on developing and establishing plans in respect of Payment by Results. This will involve re-configuring and re-commissioning the current service model. A project board will be established to work alongside government departments and other pilot areas during a 6 month co-design period.

The DAAT will work with current service providers to ensure that they are involved in the development of the payment by results model and to also reduce any impact on people who use our services in terms of the changes.

### *Emergency Duty Team*

Between the 9th & 23rd of May 2011 the Emergency Duty Service will operate under the new service specification. For the purpose of the trial run EDT managers will undertake the newly created role of 'Call Facilitator's'. EDT social workers will be split into their area of specialism i.e. child care or Adult/Approved Mental Health

Professional. The purpose of the trial is to gain an insight into the benefits of operating under this model re service delivery.

All healthcare staff across the county now have a single database system called RIO. EDT have now received training on this system and it is hoped that we will go 'live' within the next month. Bracknell Forest (Berkshire) Emergency Duty Service is the first social services out of hour's department to have access to Health's database.

Key departmental staff have worked closely with our health colleagues to achieve access to this data base. RIO holds crucial information that is essential to EDT when making decisions regarding someone's care and treatment in an emergency situation outside of normal office hours.

The Emergency Duty Service is due to be inspected by OFSTED on the 11<sup>th</sup> April 2011 as part of the inspection of Slough Borough Council's inspection.

#### *Older People and Long Term Conditions (OPLTC)*

The new arrangements will be consolidated in the next quarter; alongside this is the continuing implementation of the Personalisation agenda.

On personalisation, the team will review all the interim care packages transferred from the duty team, CR&R and the hospital discharge workers. The reviews will include the Self Support Assessment Questionnaire (SSAQ) so that an individual budget can be identified and a support plan created. The reviewing officers will also complete SSAQs with their annual reviews. The aim is that next year all people in receipt of services will have a personal budget.

Funding for the Princess Royal Trust Carers Emergency Response Service worker has been agreed. The aim to complete carers' assessments in a timely fashion as well as seeking opportunities to seek "hidden" carers with link work with BFVA and GP surgeries.

The Stroke Association worker is developing a group of volunteers to support people newly diagnosed with strokes.

### **Performance and Resources**

#### *Finance*

Work will continue on closing the 2010-11 statutory accounts, including completion of relevant statutory returns that are required to be submitted.

Detailed monitoring of the 2011-12 budget will commence to ensure that the spending proposals and expenditure reductions included in the budget are achieved. An assessment of any previously unidentified significant budget risks will be carried out.

Work will continue on the extension of self directed support, and there will be further progress on e-invoicing and mobile financial assessments.

#### *Human Resources*

Key areas during quarter 1 will be to continue to support the department through any organisation changes. The team will also review the implications of the electronic CRB arrangements and continue to support the Council's job evaluation project. Staff appraisals are a key action during this quarter. The workforce strategy and response to personalisation continue to be areas of focus. The team will be working

with DMT to consider how the Social Care Healthcheck can be implemented within the department.

#### *ICT*

Key areas for the next quarter will see the IAS systems infrastructure in line for the first time and will be the foundation for all future upgrades / testing. Suspended projects will restart, mobile working will be live and Phase 3 development should be progressing.

#### *Performance Management*

Next quarter, work will commence to complete testing on the returns reports and the Business Objects universe.

Work will also commence on analysing and understanding the recently published Adult Social Care Performance Framework and its impact both on operational teams and performance management.



## Annex A: Staffing information

### Staff Turnover

Section	Establishment Posts	Staffing Full Time	Staffing Part Time	Total Posts FTE	Vacant Posts	Vacancy Rate
Management Team	8	8	0	8	0	0
Older People and Long Term Conditions	194	95	99	129.25	14	6.7
Adults and Joint Commissioning	106	76	30	94.55	10	8.6
Performance & Resources <sup>1</sup>	27	18	9	23.17	2	6.8
<b>Department Totals</b>	<b>335</b>	<b>197</b>	<b>138</b>	<b>254.97</b>	<b>26</b>	<b>7.2</b>

For the quarter ending	31 March 2011	2.7
For the year ending	31 March 2011	12.6

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

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

## Sickness Absence (to be completed in second draft)

### Staff Sickness

Section	Total staff	Number of days sickness	Quarter 4 average per employee	2010/11 projected annual average per employee
Directorate	8	1	0.12	5.43
Older People and Long Term Conditions	194	730	3.76	11.53
Adults and Joint Commissioning	106	230.5	2.17	10.22
Performance & Resources	27	12	0.44	9.68*
<b>Department Totals (Q4)</b>	<b>335</b>	<b>973.5</b>	<b>2.9</b>	
<b>Projected Totals (10/11)</b>	<b>335</b>	<b>3,626</b>		<b>10.82</b>

<i>Comparator data</i>	<i>All employees, average days sickness absence per employee</i>
Bracknell Forest Council 09/10	6.29 days
All local government employers 2009	10.7 days
All sectors employers in the south east 2009	6.0 days

In Older People and Long Term Conditions, there are 7 cases of long term sickness. This accounts for 250.5 days which is 34.5% of total sickness.

In Adults and Joint Commissioning, there are 2 cases of long term sickness. This accounts for 100 days which is 43.3 % of total sickness.

The definition of long term sickness being used is where absence totals 20+ days across a 3 month period and can be reflected in more than one period of absence.

## Annex B: Financial information

### Annex B1

ADULT SOCIAL CARE AND HEALTH DEPARTMENT - FEBRUARY 2011									
	Original Cash Budget	Virements & Budget C/Fwds	NOTE	Current Approved Budget	Spend to Date %	Variance Over/(Under) Spend	Variance This Period	NOTE	Variance Reported Last Period
	£000	£000		£000	%	£000	£000		£000
<b>ADULT SOCIAL CARE AND HEALTH DEPARTMENT</b>									
<b>Director</b>	551	139	a	690	9%	-327	-327	1	0
	<b>551</b>	<b>139</b>		<b>690</b>	<b>9%</b>	<b>-327</b>	<b>-327</b>		<b>0</b>
<b>CO - Adults and Commissioning</b>									
Mental Health	1,904	-76		1,828	94%	-106	-9	2	-97
Learning Disability	7,656	-646		7,010	56%	-1,371	-158	3	-1,213
Specialist Strategy	0	159		159	80%	0	0		0
Joint Commissioning	434	-67		367	97%	33	0		33
	<b>9,994</b>	<b>-630</b>		<b>9,364</b>	<b>65%</b>	<b>-1,444</b>	<b>-167</b>		<b>-1,277</b>
<b>CO - Older People and Long Term Conditions</b>									
Long Term Conditions	2,083	13		2,096	95%	-20	-20	4	0
Older People	6,618	-33		6,585	98%	-28	-28	5	0
Intermediate Care	2,116	-1,756		360	146%	90	0		90
Community Response and Reablement - Pooled Budget	0	1,583		1,583	83%	0	0		0
Community Support	745	-12		733	87%	-80	-80	6	0
Emergency Duty Team	0	35		35	859%	0	0		0
Drugs Action Team	94	-7		87	-141%	0	0		0
	<b>11,656</b>	<b>-177</b>		<b>11,479</b>	<b>97%</b>	<b>-38</b>	<b>-128</b>		<b>90</b>
<b>CO - Performance and Resources</b>									
Leadership Team and Support	225	0		225	0%	0	0		0
Information Technology Team	208	-1		207	86%	-55	0		-55
Property and Admissions	182	0		182	38%	-25	0		-25
Performance and Governance	192	-3		189	13%	0	0		0
Finance Team	531	4		535	95%	-38	-8	7	-30
Human Resources Team	149	0		149	83%	0	0		0
	<b>1,487</b>	<b>0</b>		<b>1,487</b>	<b>61%</b>	<b>-118</b>	<b>-8</b>		<b>-110</b>
<b>TOTAL ASC&amp;H DEPARTMENT CASH BUDGET</b>	<b>23,688</b>	<b>-668</b>		<b>23,020</b>	<b>79%</b>	<b>-1,927</b>	<b>-630</b>		<b>-1,297</b>
<b>TOTAL RECHARGES &amp; ACCOUNTING ADJUSTMENTS</b>	<b>2,379</b>	<b>0</b>		<b>2,379</b>	<b>0%</b>	<b>0</b>	<b>0</b>		<b>0</b>
<b>GRAND TOTAL ASC&amp;H DEPARTMENT</b>	<b>26,067</b>	<b>-668</b>		<b>25,399</b>	<b>72%</b>	<b>-1,927</b>	<b>-630</b>		<b>-1,297</b>
<b>Memorandum items:</b>									
Devolved Staffing Budget				10,850		-77	0		-77

Annex B2

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

Note	Total	Explanation
a	£'000	
		<b><u>DEPARTMENTAL CASH BUDGET</u></b>
	-667	Total reported last period
	-1	<u>Postage</u> Savings have been achieved on postage expenditure as a result of a service review across the Council, of which £0.001m relates to Adult Social Care and Health.
	<b>-668</b>	<b>Total</b>
		<b><u>DEPARTMENTAL NON-CASH BUDGET</u></b>
	0	No changes to report
	<b>0</b>	<b>Total</b>

## Annex B3

<b>Adult Social Care and Health Budget Variances</b>		
<b>Note</b>	<b>Reporte varianc £'000</b>	<b>Explanation</b>
		<b><u>DEPARTMENTAL BUDGET</u></b>
	-1,297	Variances supported last period.
		<b>Director</b>
1	-240	£0.240m has been received from Berkshire East PCT which is an allocation from national funding provided by the Department of Health to ease the pressure Adult Social Care budgets experience in winter. A proportion of this funding has been used on new projects but much of this additional funding has been used to fund pressures across a wide range of services within the Department, and without it the underspend would be correspondingly lower. It is part of the s256 agreement with the PCT that any unspent monies are carried forward into the next financial year and so a provision will be required from this underspend to fund future liabilities. The exact amount of the provision will be confirmed once the final expenditure figures are known.
	-87	Income and expenditure relating to the Social Care Reform Grant is included within the Director's hierarchy. The conditions of this grant and its ring fenced nature mean that any unspent grant (forecast to be £0.087m at year end) cannot be used to fund other areas of expenditure and so should be carried forward to offset future liabilities. A carry forward request for this will be made in accordance with Council procedures.
		<b><u>CO - Adults and Commissioning</u></b>
2	-9	Income and expenditure relating to the Dementia Demonstrator Pilot Site Grant is included within the Mental Health hierarchy. The conditions of this grant and its ring fenced nature mean that any unspent grant (forecast to be £0.009m at year end) cannot be used to fund other areas of expenditure and so should be carried forward to offset future liabilities. A carry forward request for this will be made in accordance with Council procedures.
3	-158	As previously reported within People with Learning Disabilities there have been complex changes for a large number of people involving the deregistration of a number of homes and increased use of support within the community. Where such support is provided it needs to be appropriate to the needs of the individual but not excessive. Due to the changed circumstances of a number of individuals there has been a reduction in the level of support required, with the forecast underspend increasing by £0.121m as a result.  In order to comply with national electronic social care record requirements a record scanning and destruction programme has commenced. Slippage on the programme for the records of People with Learning Disability has resulted in an increased underspend of £0.007m as these costs will be incurred in 2011/12. A carry forward request for this will be made in accordance with Council procedures  Slippage on the development of an advocacy scheme for People with Learning Disabilities provided by the voluntary sector has resulted in savings in the current year of £0.030m. The development of this scheme is an important part of service provision and so a carry forward request for this will be made in accordance with Council procedures.
		<b><u>CO - Older People and Long Term Conditions</u></b>
4	-20	Current forecast spend for People with Long Term Conditions in residential care has decreased by £0.020m. This is principally due to one person moving away from the area and no longer requiring support (saving £0.013m) plus a small number of other cost changes within this area which has led to a further net saving of £0.007m.
5	-28	Support to people who have had a stroke is principally provided through an agreement with the Stroke Association as well as support to a number of other voluntary sector organisations, funded by a non ring fenced grant. Currently £0.028m of the grant (which will not continue next year) is uncommitted. A carry forward of this amount will allow an extension of the support into the next financial year and a request will be made in accordance with Council procedures.
6	-80	The Community Support Teams provide domiciliary support to people who live in the community. Whilst the majority of this support is social care, they may also ensure peoples health needs are met. The cost of meeting health needs may be met by the PCT and due to the increased health needs of four people being supported this income is £0.080m more than anticipated.
		<b><u>CO - Performance and Resources</u></b>
7	-8	In order to comply with national electronic social care record requirements a record scanning and destruction programme has commenced. Slippage on the programme for the records held within Finance has resulted in an increased underspend of £0.008m as these costs will be incurred in 2011/12. a carry forward for this amount will be made in accordance with Council
	-1,927	<b>Grand Total Departmental Budget</b>
		<b><u>DEPARTMENTAL NON-CASH BUDGET</u></b>
	0	No variances to report
	0	<b>Grand Total Departmental Non-Cash Budget</b>

## Annex B4

Adult Social Care and Health Capital Monitoring								
2010-11 monitoring at 28 February 2011								
Costc	Cost Centre Description	Total Budget	Cash Budget 2010/11	Expenditure to date	Cash Budget 2011/12	(Under) / Over Spend against approved budget	Key Target for 31 March	Current status of the project including changes to Cash Profile
		(£'000)	(£'000)	(£'000)	(£'000)	(£'000)		
	<b>Schemes commenced prior to 2010/11</b>							
YS807	ASC - Care Management Replacement Programme	327.6	280.0	153.2	47.6	0.0	Fully operational.	Core live system operational. Further modules to be implemented.
YH126	Adult Social Care IT Infrastructure	69.0	50.0	5.0	19.0	0.0	In progress.	N3 Connection implementation in progress
<b>Y20G</b>	<b>ICT projects</b>	<b>396.6</b>	<b>330.0</b>	<b>158.2</b>	<b>66.6</b>	<b>0.0</b>		
	<b>CAPITAL PROGRAMME - DEPT CONTROLLED [schemes b/fwd from prior year(s)]</b>	<b>396.6</b>	<b>330.0</b>	<b>158.2</b>	<b>66.6</b>	<b>0.0</b>		
	Percentages			47.9%		0.0%		
	<b>Schemes commenced 2010/11 and rolling programmes</b>							
YS805	Improving the Care Home Environment	6.4	6.4	0.0	0.0	0.0	In progress.	Spending plan in place.
YS440	Carers Accommodation Strategy	335.0	335.0	11.0	0.0	0.0	Underway	Under review. Linked to Council accommodation strategy
YS429	Mental Health Grant	189.2	110.0	15.7	79.2	0.0	In progress.	Spending plan in place.
YS430	Social Care Grant	130.1	90.0	114.3	40.1	0.0	In progress.	Spending plan in place.
YS527	Social Care Reform Grant	43.7	43.7	0.0	0.0	0.0	In progress.	Spending plan in place.
YS528	Care Housing Grant	20.0	20.0	4.0	0.0	0.0	In progress.	Spending plan in place.
YH130	Improvements and capitalised repairs	4.7	4.7	4.7	0.0	0.0	Complete.	Complete.
	<b>Adult Social Services</b>	<b>729.2</b>	<b>609.8</b>	<b>149.7</b>	<b>119.4</b>	<b>0.0</b>		
	<b>CAPITAL PROGRAMME - DEPT CONTROLLED [current year schemes]</b>	<b>729.2</b>	<b>609.8</b>	<b>149.7</b>	<b>119.4</b>	<b>0.0</b>		
	Percentages			24.5%		0.0%		
	<b>CAPITAL PROGRAMME - DEPT CONTROLLED [all schemes]</b>	<b>1125.8</b>	<b>939.8</b>	<b>307.9</b>	<b>186.0</b>	<b>0.0</b>		
	Percentages			32.8%		0.0%		

## Annex C: Progress on Service Plan Actions

MTO5 - To improve health and wellbeing within the borough					
Detailed Action	Due Date	Owner	Status	Last Updated	Comments
<b>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</b>					
5.1.1 Refresh the Health and Well Being Strategy	30/09/2010	ASCH	✓	Q4	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 and Public 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	✓	Q4	Work continues to create capacity in the community. The Personalisation Programme Board have approached the Chief Executive of BFVA to chair the Community Capacity Building Meeting - this has been accepted.
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	✓	Q4	Increased capacity has been developed within the voluntary sector and people are using personal budgets to access community facilities. Discussions continue to develop services to deliver un met needs.
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. This action is at risk due to there being very limited funds left unallocated in the SCRG.	31/03/2011	ASCH	✓	Q4	The Commissioning for Community Capacity workstream has an action plan which details developments for the current financial year. The remaining funds in the Social Care Reform Grant have now been allocated.
5.1.5 Work with the NHS to make psychological therapies more available	31/12/2010	ASCH	✓	Q4	Staff have now undertaken training in the mindfulness programme and have been delivering group sessions in Bracknell. We have now holding regular GP forum meetings for Bracknell surgeries, we GP portal has now been developed and implemented through the NHS Trust IT systems. This should help improve communications and referral process.
<b>5.2 Working with health partners to secure more outpatient, diagnostic and secondary health facilities in the borough</b>					
5.2.1 Review options with the NHS Berkshire East to improve access to and increase provision of health	31/03/2011	ASCH	✓	Q4	Healthspace plans were submitted in Q3 and approved in Q4 and further discussions are being held with Primary Care

facilities in the Borough, and improved Accident and Emergency					Commissioners.
5.2.2 Development of an End of Life Strategy with NHS Berkshire East	31/12/2010	ASCH	✓	Q4	PCT has allocated funding to enable end of life care to be delivered through Intermediate Care Services. The region has been successful in a bid to deliver end of life care training for providers through e-learning
<b>5.7 Enabling more people to remain in their own homes through the use of Telecare</b>					
5.7.1 Maximise people's independence by promoting the use of assistive technology and equipment	31/07/2010	ASCH	✓	Q4	An assessment flat within a local sheltered housing complex has been fitted with extensive Assistive Technology and this continues to be a popular resource which promotes independence. This service affords people with high support needs the opportunity to experience sheltered housing and the advantages offered by telecare equipment for a period of up to eight weeks before making any long term decisions. Telecare equipment is also being used to support our Home First initiative, which supports people in hospital, assessed as requiring 24 hour care, to return home before committing themselves to a permanent move into residential care. Telecare is being promoted as part of Bracknell's prevention and early intervention strategy, particularly for people experiencing hearing or sight loss and for people with epilepsy, for whom the provision of telecare equipment means the individual does not require any additional support.
<b>5.8 Producing an annual Joint Strategic Needs Analysis to influence LAA and outcomes for Borough residents</b>					
5.8.1 Ensure JSNA is refreshed annually	31/12/2010	ASCH	✓	Q4	The JSNA on has been refreshed. Executive in March.
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	✓	Q4	The outcomes have been shared with the Older Peoples Themed Partnership Group and fed into the Older People Accommodation Strategy.
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	✓	Q4	Funding has been allocated to BFC to provide End of Life Care through Intermediate Care Services. Work will commence with GP's to agree a pathway for stroke Rehabilitation. BFC have agreed to fund the Stroke co-ordinator for a further 12 months through the Stroke Association.
<b>MTO7 - To seek to ensure that every resident feels included and able to access the services they need</b>					
<b>Detailed Action</b>	<b>Due Date</b>	<b>Owner</b>	<b>Status</b>	<b>Last</b>	<b>Comments</b>



				Updated	
<b>7.10 Implementing the Bracknell Forest Partnership Community Engagement Strategy to engage with residents to shape service provision and develop communities</b>					
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	✓	Q4	All actions being implemented.
7.10.3 Review the structure role and purpose of the main forums for older people	31/07/2010	ASCH	✓	Q4	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	✓	Q4	The i-hub (an online information system for people who may need some support to live independently) was launched on the internet on 8th November and received coverage in the Bracknell News. The hub has now been updated and now has the capacity to include advice and guidance and a Personal Assistant register.
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	✓	Q4	The department has an Advice and Information Strategy and a communications plan for the Personalisation Agenda. In the last quarter further presentations were given to increase the understanding about personal budgets.
7.10.6 Develop a User Led Organisation which is directly contributing to the transformation to personal budgets	31/12/2010	ASCH	✓	Q4	The Personalisation Programme Board approved the project approach to the development of ULOs and a ULO consortium in Bracknell. The ULO development worker has now left the post; New Support Horizons are advertising to fill the vacancy. Whilst in post the Development Worker met and completed "ULO readiness checklists" with 19 organisations interested in becoming ULOs. The next step is to develop a ULO Consortium.
7.10.7 Arrangements for access to universal information and advice services are in place	31/10/2010	ASCH	✓	Q4	An Information and Advice Strategy has been approved and is in place.
<b>7.5 Implementing a Disability Equality Scheme, Gender Equality Scheme and Race Equality Scheme</b>					
7.5.2 Meet the cultural needs and expectations of older people, particularly those from Black and Minority Ethnic Groups	31/03/2011	ASCH	✓	Q4	This issue is being addressed through the Older Persons Strategy and Older Peoples Themed Partnership Board. A representative for the minority alliance group is attending both meetings and will feed into the plan.
7.5.7 Implement the Disability, Race and Gender Equality Schemes actions due for completion in	31/03/2011	ASCH	✓	Q4	Scheme actions being implemented.

2010/11 and progress those actions due for completion in later years (Adult Social Care and Health) Q4					
<b>7.6 Increasing access to services by electronic means</b>					
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	✓	Q4	The Council's website is currently being revised - this will include information regarding Adult Social Care and Health.
<b>7.7 Implementing the Community Cohesion Strategy to give people a sense of belonging and identity as members of their community</b>					
7.7.11 Implement actions in 'All of us' Community cohesion Strategy (Adult Social Care and Health)	31/03/2011	ASCH	✓	Q4	All actions being implemented.
<b>7.8 Working within the Bracknell Forest Partnership to show continuous improvement in equalities and diversity in the Council and its services, and work towards attaining the 'Achieving' level of the Equality Framework</b>					
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	✓	Q4	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	✓	Q4	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	✓	Q4	Equality monitoring framework being developed.
<b>MTO8 - To reduce crime and increase people's sense of safety in the borough</b>					
<b>Detailed Action</b>	<b>Due Date</b>	<b>Owner</b>	<b>Status</b>	<b>Last Updated</b>	<b>Comments</b>
<b>8.5 Reducing the number of people, particularly young people, abusing drugs and alcohol</b>					
8.5.1 Promote smoking awareness and cessation initiatives delivered by the PCT	31/03/2011	ASCH	✓	Q4	Council staff continue to work with the PCT Stop Smoking Service. The JSNA recommends targeting quitters after 3 months to ensure sustained behaviour change.

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	✓	Q4	Information session delivered to St Johns Ambulance and Young People
8.5.3 Increase the number of drug misusing clients retained in treatment for 12 weeks or more	31/03/2011	ASCH	✓	Q4	There were 139 individuals in effective treatment at the end of October which equates to 82%
8.5.4 Reduce the number of clients leaving treatment in an unplanned way	31/03/2011	ASCH	✓	Q4	43% of clients left treatment in a planned way. The percentage of planned exits naturally reduces throughout the year and this action is still on target.
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	✓	Q4	Individual needs are still being met with low waiting times for entry into treatment. The needs assessment has been reviewed and will be used to plan and commission services.
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	✓	Q4	Placements continue to be made for residents of Berkshire East. Funding has been confirmed for 2011/12.
<b>8.9 Increasing awareness of 'safeguarding adults' issues for vulnerable people and the wider public</b>					
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	✓	Q4	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. This group will be reporting its progress to the Berkshire East Safeguarding Chairs and Leads Group in January 2011. A Serious Untoward Incident (SUI) Protocol has now been developed and has been presented to Safeguarding Adults Partnership Boards this year. Action achieved.
8.9.2 Work with CDRP colleagues to ensure that ASBO policy reflects Safeguarding issues	30/06/2010	ASCH	✓	Q4	The ASBO Strategy has been updated and references the involvement of safeguarding within the ASB Working Group. The strategy is due to be further updated in May 2011. Action therefore achieved.
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	✓	Q4	There has been no change from the previous quarter.
8.9.4 Review Care Governance Protocols	31/07/2010	ASCH	✓	Q4	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. Feedback from Providers suggests that they pleased with the increased transparency in the Council's monitoring arrangements.
8.9.5 Manage/lead "Safe Place" project	31/12/2010	ASCH	✓	Q4	The review of the Safe Place Scheme has now been completed with feedback from those involved confirming it is a good initiative and they felt safer knowing the scheme was available. It was also found that where people needed help local shops provided this. There are a significant number of shops within the town centre and surrounding neighbourhoods that are part of the 'Safe Place' scheme and these are all open from between 8.00am and 5.30pm. No further shops need to be approached to sign up to the scheme. However, it has been identified that the scheme would be further enhanced if particular venues that are open into the evening sign up to the scheme. Work is underway to progress this.
8.9.6 Implement the departmental audit plan to ensure that the Deprivation of Liberty Safeguards are being fully implemented in Bracknell.	31/07/2010	ASCH	✓	Q4	The second DoLS newsletter has now been sent to providers with details of the upcoming Providers Event planned for February 2011.
8.9.7 Hold Managing Authority conference	31/10/2010	ASCH	✓	Q4	A DoLS workshop/event is being planned for February 2011. This has been advertised in the December DoLS newsletter.
8.9.8 Lead on the implementation of the Vetting and Barring Scheme	30/11/2010	ASCH	✓	Q4	The Coalition Government is currently relooking at this scheme. It is therefore not yet ready to be implemented. Latest is that the review of the Vetting and Barring scheme is expected in the New Year
<b>MTO9 - To promote independence and choice for vulnerable adults and older people</b>					
<b>Detailed Action</b>	<b>Due Date</b>	<b>Owner</b>	<b>Status</b>	<b>Last Updated</b>	<b>Comments</b>
<b>9.1 Modernising services for vulnerable adults and older people by reducing reliance on residential care and improving access to community based services</b>					
9.1.1 Create more activities for frail older people, with transport linked to the activities	31/05/2010	ASCH	✓	Q4	Action achieved
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	✓	Q4	Increasing numbers of people are being supported to self-assess their needs and use an Individual Budget to pay for flexible support arrangements. At the same time, we are extending the Age Concern Handyman Scheme, which along with Green Machine, a social care enterprise, provides support for house and garden maintenance for older people and those with long-

					term conditions. Action achieved. Thirteen fewer people have required residential care over the course of the year which indicates that our efforts to support people to remain in the community have achieved considerable success.
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	✓	Q4	These issues will be addressed through the OP Accommodation Strategy.
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	✓	Q4	Building work is being carried out in order to expand day provision for people living with dementia. The expanded service will work with BFVA and Berkshire Healthcare Trust to provide additional activities and a carer's drop-in service. Capital grant monies have been provided to Sandhurst Day Centre to enable them to construct a disabled WC and shower room so they can support people who use wheelchairs. Action achieved. Building works were completed at Sandhurst and Heathlands and the latter now offers a range of new activities including arts and crafts sessions provided by volunteers. Space is being offered to a support group for people under sixty-five diagnosed with early-onset dementia. Heathlands, along with all local voluntary sector day activities providers, will be meeting together to develop their services over the coming year to provide for the needs of personal budget-holders.
<b>9.4 Providing advice and support to vulnerable people to help maintain them in their own homes</b>					
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	✓	Q4	Unitary Authorities have agreed further work to be completed on option 3 of the presented EDT review proposals. The existing SLA has been extended for a further 6 months to enable further work to be undertaken. The recommendations of the Serious Case review have been implemented.
<b>9.5 Providing support for carers through working with statutory and voluntary partners</b>					
9.5.1 Continue to increase the rate at which carers receive assessments or reviews	31/03/2011	ASCH	✓	Q4	Work is being carried out in partnership with The Princess Royal Trust, to provide formal assessments / self-assessments and reviews for carers who have expressed interest in accessing the Carers Emergency Respite Service. Bracknell has purchased Carer Aware e-training, which will be customised to reflect local services and delivered to health and social care staff and

					voluntary and private sector provider agencies to ensure that carers are identified and referred for a supported self-assessment of their needs. Carers also participated in a one-day workshop on Carers and Personalisation sponsored by the DH and more than 120 carers attended the recent Carer's Lunch and joined in a question and answer session with ASCH and local voluntary groups that focussed on a range of available support services.
9.5.2 Implement the Dementia Care Adviser role, following DH funding	31/03/2011	ASCH	✓	Q4	The Dementia Care Advisor Role is working with our statutory and voluntary partners, families and carers the funding for this role was due to end in March 2011. We have been successful in securing further funding for the next year; this gives us time to continue to develop a longer term strategy for funding this role. We have also been able to purchase a laptop computer to enhance the level of information that can be provided at remote clinics.
<b>9.7 Implementing the Borough-wide Strategy for Older People</b>					
9.7.1 Promote use of supported self-directed assessments	31/03/2011	ASCH	✓	Q4	Along with those newly referred to ASCH, people undergoing unscheduled re-assessments are also being encouraged to complete a supported self-assessment and look at more creative and flexible means of meeting their care needs. Over the next few months, all people receiving scheduled reviews will be encouraged to do the same and look at ways in which an Individual Budget might help them achieve their desired outcomes. Along with all new referrals, all people who currently receive traditional services are being supported to self-assess their needs and look at the outcomes they wish to achieve. People are encouraged to take an active role in planning their support and seeking funding.
<b>9.8 Implementing the Council's approach to personalisation by supporting all people who are eligible for support from the Council, to have and use, an individual budget, and to support from the Council, to have and use, an individual budget, and to support the development of community based opportunities</b>					
9.8.1 Evaluate the personalisation pilot and develop recommendation for the roll out of personalised support across ASC	31/05/2010	ASCH	✓	Q4	Roll out continues: the policy and staff guidance have been agreed. Performance in this area exceeds the "shadow" target. IAS configuration to meet the requirements of the personalised approach is in progress.

9.8.2 That all new individuals and existing people supported by Adult Social Care are offered a personal budget	31/10/2010	ASCH	✓	Q4	From October 2010 teams have been working with people in a personalised way. Following review, everyone who is eligible will have a personal budget. Following a period of reablement everyone new to the department, with ongoing support needs, will have a personal budget.
9.8.3 That processes are in place to monitor across the whole system the impact in investment towards preventative and enabling services.	31/10/2010	ASCH	✓	Q4	In order to assess the impact of reablement including Advanced Intermediate Care an individuals support needs at the beginning of the reablement process are compared to the amount of personal budget for people with ongoing support needs. A Prevention and Early Intervention Guide has been published and distributed around the borough. The guide will be evaluated in Spring and updated to include strategic intentions in Autumn.
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	✓	Q4	32 people are now either members of the Timebank or in the process of completing their membership and people are beginning to make exchanges. Phase 1 of the project is now being evaluated. A skills share event was held in March to recruit new members and to encourage exchanges.
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	✓	Q4	Completed. Workshop held in July 2010.
9.8.6 A Fairer Contributions Policy is approved by the Council's Executive which supports Personalisation	30/06/2010	ASCH	✓		Achieved.
<b>MTO10 - To be accountable and provide excellent value for money</b>					
<b>Detailed Action</b>	<b>Due Date</b>	<b>Owner</b>	<b>Status</b>	<b>Last Updated</b>	<b>Comments</b>
<b>10.4 Working effectively with partners to improve the quality of life in the Borough</b>					
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	✓	Q4	Health space plans developed and submitted and approved - March 2011. Enhanced Intermediate care has been developed and funded by PCT.
10.4.9 Implement a joint complaints procedure with the NHS	31/07/2010	ASCH	✓	Q4	Bracknell Forest have published a complaints procedure which responds to the national complaints arrangements valid from 2009/10. The complaints procedure outlines the integrated approach with health. Action achieved.
<b>10.5 Implementing the priority areas of the Service Efficiency Strategy to deliver savings and improve service operation</b>					



10.5.1 Introduce new commissioning arrangements for Domiciliary Care (older people)	31/05/2010	ASCH	✓	Q4	New commissioning arrangements are now in place. Action achieved.
10.5.2 Conclude consultation on modernisation of day care for older people and prepare options for future	31/07/2010	ASCH	✓	Q4	Consultation concluded recommendations are in process of implementation.
<b>10.7 Ensuring all council services provide value for money and make effective use of resources</b>					
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	✓	Q4	Data parameters have been agreed and the performance team are liaising with BFVA over data collation and supply. Data is being monitored to ensure equity of service.
<b>10.8 Ensure staff are in place with the right skills and capacity to deliver service outcomes and maximise service efficiency</b>					
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	✓	Q4	Strategies have been implemented to provide support for service areas that 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 services effectively	31/03/2011	ASCH	✓	Q4	The Workforce Workstream continues to review the implications of the personalisation agenda to ensure employees have the relevant skills to provide effective service delivery.
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	✓	Q4	This action requires the co-operation of other Berkshire authorities to make it economically viable for Bracknell. The sensory needs service is under review and action requires a joint approach with other authorities. Bracknell Forest is considering becoming the lead commissioner on behalf Berkshire LAs commissioning the Sensory Needs Service in order to expedite negotiations.
<b>MTO12 - To promote workforce skills</b>					
<b>Detailed Action</b>	<b>Due Date</b>	<b>Owner</b>	<b>Status</b>	<b>Last Updated</b>	<b>Comments</b>
<b>12.1 Contributing to the development of an appropriately skilled workforce through Adult and Community Learning</b>					
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, lone parents, adults with mental health problems, disabilities and learning difficulties	31/03/2011	ASCH	✓	Q4	We have implemented the use of the Recovery Star as a method of identifying support required to enable individuals to access education, training and employment. This is used across both statutory and voluntary services. Training has been offered to assist staff in supporting individuals in maximising benefits whilst they move into paid employment. The Recovery Star is being








					successfully used on a routine basis within our services now.
12.1.2 Maximise income for vulnerable people through access to employment or benefit maximisation	31/03/2011	ASCH	✓	Q4	The Council has enabled a number of work placements for individuals who wish to use such an opportunity to try out various options and develop their work related skills. These are proving successful. One individual with a learning disability is being supported to set up a microenterprise. Breakthrough, the supported employment service for people with LD is expanding options to support individuals with other support needs.
12.1.3 Continue to help people with learning disability to secure employment	31/03/2011	ASCH	✓	Q4	Support to help people with learning disabilities to secure and retain employment is ongoing through the jobs and homes pilot action plan. The employment plan developed by Officers and members of the Learning Disability Partnership Board is being implemented supporting creation and retention of work opportunities: This includes Breakthrough (in-house supported employment service) working with Life Long Learning developing a Café at Brackenhale open learning Centre. This will give adult learners and people with learning disabilities the chance to attain real experience of working in a small business while accessing relevant training at the centre such as health and safety, business skills and other related training. The Green Machine (GM) business plan has been implemented with GM being independent from April 1st. Professional links with Breakthrough are in place to ensure paid, voluntary and training opportunities for people with learning disabilities will be provided.
12.1.4 Establish Steering Group for PSA16 Innovation Fund Project and implementation plan	30/04/2010	ASCH	✓	Q4	Both remain in operation.
12.1.5 Develop Implementation Plan for IPSA16 Innovation Fund project	30/04/2010	ASCH	✓	Q4	This is under implementation





## Annex C: Progress on performance indicators


(please note that figures below are may change as final year-end validations are being done on indicators following draft of this document)

Indicator Ref	Measure	Responsible Officer	Current Actual	Current Target	Previous Year Actual		Comment & Improvement Action	Data Validation Status
NI125	Achieving independence for older people through rehabilitation or intermediate care (Annually)	Sally Palmer	91.4%	N/A	89.37%		The year end position of this indicator shows strong performance with the outturn of 91.43% exceeding last year's performance of 89.37%. This reflects the enhanced services being provided through intermediate care.	Validated
NI 131	Delayed Transfers of Care	Mira Haynes	2.5	< 15	2.39		Performance of delays continues to be strong. This is calculated using DH information which is limited in that it provides totals of acute and non-acute delays. Investigations into N3 access are continuing.	Validated

NI145	Adults with learning disabilities in settled accommodation	Nick Ireland	80.41%	N/A	75.61%		Of 296 people with Learning Disabilities of working age who are known to us, there are 244 people in settled accommodation. This is a good outturn which exceeds 2009/10 performance and our target.	Validated
NI 132	Waiting Times for Assessments	Glyn Jones	90.0%	N/A	92.2%		This represents good performance. Based on 2009/10 data, it should place Bracknell above both the England average and our comparator group average.	Validated
NI 133	Waiting times for Services	Glyn Jones	96%	N/A	94.8%		This represents good performance. Based on 2009/10 data, it should place Bracknell above both the England average and our comparator group average.	Validated

NI 130	Self Directed Support	Zoe Johnstone	23.85% (60 – 70% estimated when measured against ADASS definition)	30%	16%		Our performance against national targets is progressively improving with the current outturn at 23.85%. However, using the ADASS definition, our performance is closer to 60 - 70%. From October 2010 teams have been working with people in a personalised way. Following review, everyone who is eligible will have a personal budget. Also, following a period of reablement everyone new to the department, with ongoing support needs, will have a personal budget.	Validated
NI146	Adults with learning disabilities in employment	Nick Ireland	15.54%	N/A	17.19%		Of 296 people with Learning Disabilities of working age who are known to us, there are 46 people in employment. This is a good outturn which exceeds our target. The actual number of people being helped into employment has increased from 44 to 46 from last year, although an increase in the Learning Disabilities cohort for reasons of demographics has meant a decrease in the percentage of this indicator, which is not due to a drop off in performance.	Validated

NI 135	Carers assessments/services	Mira Haynes	24.55% (using 2009/10 denominator)	22%	21.0%		This is a good outturn which exceeds both last year's performance and our target for this year. The performance reflects increasing carers support provided across all of our care groups throughout the year and also within partner organisations.	Validated
NI 136	People being helped to live Independently	Glyn Jones	Shadow target - 4682.1 (2569 people), actual outturn - 3601.71 (1,967 people)	N/A	Shadow target - 5,758.82 (3,100 people), actual outturn - 4,256 (2,326 people)		The focus of support in Adult Social Care is to enable people to remain in their own homes for as long as possible. Performance against targets for NI 136 - People Being Helped to Live Independently - has been challenging. This is due to a change in definition after Bracknell had set and agreed our local targets with GOSE. This meant that the original target was unachievable but there was no room to renegotiate.	Validated
NI149	Adults receiving secondary mental health services in settled accommodation (Annually)	Tony Dwyer	90%	N/A	96%		Although this is slightly below last year's outturn of 96%, it nevertheless represents strong performance for this indicator.	Validated
NI150	Adults receiving secondary mental health services in employment (Annually)	Tony Dwyer	14%	N/A	13%		This outturn represents good performance and is an increase on 2009/10.	Validated

NI040	Number of drug users recorded as being in effective treatment (More frequently than quarterly)	Jillian Hunt	154 people	146 people	172 people		Current performance is exceeding target by 8 people so this represents good performance.	Validated
NI 127	User reported measure of respect and dignity in their treatment	Glyn Jones	18.34 (or 76.41%)	N/A	N/A	N/A	This indicator is based on the answers to a combination of questions in the Adult Social Care Survey which cover the 8 domains which relate to quality of life. The maximum score for this indicator is 24 which puts our performance at 76.41%. We are awaiting performance benchmarks nationally and within our comparator group, which should be available in Q2 2011/12.	Validated