

# QUARTERLY SERVICE REPORT

# ADULT SOCIAL CARE AND HEALTH

Q1 2014-15 April – June 2014

Portfolio holder: Councillor Dale Birch

Director: Glyn Jones

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### **Section 1: Director's Commentary**

There was significant activity in the first quarter of the year, with a major focus for the Department being the passing of the Care Act. This will lead to significant changes in the requirements for Adult Social Care, phased-in in two stages – legislative reforms in April 2015, and funding reforms in April 2016. The legislative changes see the Care Act replacing all previous social care legislation, and as such there is a lot to absorb. The early stages of work involve working through the Act, and assessing what this Council needs to do to meet the requirements of it.

The workforce strategy for Adult Social Care and Health, which commenced in the last quarter of 2013/14, saw progress in the first quarter of this year. Operational staff in Adult Social Care and Health are undertaking a programme of work to underpin the strategy. Taking account of

- more personalised ways of working,
- the requirements of the Better Care Fund and
- · the Care Act.

applying a "Lean" approach will inform changes to the business processes, or "pathways". Based on the principle of ensuring that each person's experience should be as timely and smooth as possible, and using these "pathways", the work will determine the skills and competencies that staff need, and how those staff are best deployed to support people in the most appropriate ways. This in turn will inform the training and development needs of the workforce.

Following Executive approval in February, the Council introduced Fixed Civil Penalties of £50 for household failing to tell the Council without good reason of a change in circumstances leading to overpayments of up to £500. To the end of the first quarter, 28 civil penalties were issued, which suggests that the scheme is meeting its objective of encouraging people to report relevant changes of circumstances.

The department continues to work with the CCG and health providers on establishing the Better Care Fund in shadow form for this year, in readiness for its formal implementation next April.

Delivery against actions in the Service Plan is looking very strong. Of 64 actions, 3 have been completed as at the end of the quarter, and 59 are expected to be completed on time. Two actions are delayed as follows:

6.11.3 Develop a reporting and monitoring methodology to report on the actions within the Better Care Fund.

Discussions are on-going with the CCG about the format and content of the reporting and monitoring methodology.

11.2.10 Ensure the local workforce is appropriately trained to identify substance misuse issues in order to offer information and advice. .

No training sessions have been delivered in guarter 1.

There are 5 indicators in quarter 1 with a current status of red as follows:

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

This is expressed as a percentage of the number of people receiving services. The figure at the end of quarter 1 was 7.3%, with a current target of 9.3%. The target for the end of the year is 37%.

There are no concerns about reaching the year end target at this stage; this figure is cumulative in nature, and it is expected that this will be achieved.

OF2a.1 (Permanent admissions to residential or nursing care per 100,000 population 65 or over)

The target was for 1.7 admissions per 100,000 population, and the actual figure was 2.7. This represents 2 admissions in the quarter. As the numbers involved are so small, particularly on a quarter by quarter basis, this does not yet represent a matter for concern.

OF2c.1 (Delayed transfers of care – total delayed transfers per 100,000 population) OF2c.2 (Delayed transfers of care – total delayed transfers attributable to social care per 100,000 population

The target for all delays was 8, compared to a performance of 11.4; the target for delays attributable to social care was 5, compared to a performance of 7.4.

The delays attributable to social care were predominantly caused by the domiciliary care agencies struggling to recruit new staff, which made it more difficult to place new care packages with them.

Indicator NI 178 (number of household nights in B&B across the guarter)

Despite the housing service preventing 9% more households becoming homeless in than the previous year there has been an overall increase in the number of households that the council has accepted a homeless duty towards compared to the previous year. The Council will continue to purchase temporary to permanent properties in 2014/15 to assist with managing this pressure. Although the costs of providing temporary accommodation for homeless households are forecast to exceed budget, this has not manifested itself as a net overspend due to income received from temporary to permanent properties offsetting the additional costs.

Every quarter the department reviews its risks, in the light of events, and also in the light of management action taken, and updates its risk register accordingly. Following this quarter's review, there has been one new risk added, which is in respect of the potential impact of the introduction of the Care Act. Mitigating management actions have been put in place to manage this risk. Two risks have been closed; firstly, risks arising from changes in benefits legislation, as these changes are now embedded; and secondly, risks arising from a change in the cost share across Berkshire authorities for sexual health contracts, from a risk share to a cost per case basis; financial modelling suggests the change will be small, and is more likely to be of benefit to this Council. The changes have been reflected in the Public Health budget.

There is a statutory complaints process for Adult Social Care, as part of which compliments are also recorded, which culminates in an Annual Report. For this reason the numbers of complaints and compliments are recorded, and reported, separately for

Adult Social Care and for Housing, with Housing complaints dealt with via the Corporate Complaints process. In addition, there is a separate, statutory, process for Public Health complaints.

In the first quarter Adult Social Care received 5 new complaints, of which 2 were upheld, one was upheld and 2 were ongoing. This compares to the previous quarter of which 2 were not upheld, one was upheld and 2 were ongoing. There were 16 compliments received, which compares to 35 compliments received in the previous quarter.

In Housing, there was 1 new complaint received, at stage 2. This was partially upheld. There was additionally a complaint to the Local Government Ombudsman, this was not upheld. This compares to last quarter when there were 4 new complaints received, 2 at stage 2, 1 at stage 3 and 1 at stage 4, of which 2 were not upheld, 1 was upheld and 1 was ongoing. There were 6 compliments in the quarter the same as the previous quarter.

No complaints have yet been made in respect of Public Health.

# **Section 2: Department Indicator Performance**

Ind Ref	Short Description	Previous Figure Q4 2013/14	Current figure Q1 2014/15	Current Target	Current Status	Comparison with same period in previous year
ASCHH	All Sections - Quarterly					
NI135	Carers receiving needs assessment or review and a specific carer's service, or advice and information (Quarterly)	36.9%	7.3%	9.3%	B	<b>3</b>
OF2a.1	Permanent admissions to residential or nursing care per 100,000 population 18-64 (Quarterly)	4.1	2.7	1.7	R	<b>3</b>
OF2a.2	Permanent admissions to residential or nursing care per 100,000 population 65 or over (Quarterly)	596.50	53.60	160.80	G	7
L172	Timeliness of financial assessments (Quarterly)	97.20%	95.60%	95.00%	G	$\Rightarrow$
L214	Delayed transfers of care (delayed bed days) from hospital per 100,000 population (Quarterly)	~	62.5	87.7	G	~
Commu	ınity Mental Health Team - Quar	terly				
OF1f	Proportion of adults in contact with secondary mental health services in paid employment (Quarterly)	14.0%	Data not yet available	13.0%		
OF1h	Proportion of adults in contact with secondary mental health services living independently, with or without support (Quarterly)	77.7%	Data not yet available	84.0%		
Commu	ınity Response and Reablement	- Quarterly				
OF2c.1	Delayed transfers of care - total delayed transfers per 100,000 population (Quarterly)	5.5	11.4	8.0	R	7
OF2c.2	Delayed transfers of care - delayed transfers attributable to social care per 100,000 population (Quarterly)	2.1	7.4	5.0	R	7
L135.1	Percentage of enhanced Intermediate Care Referrals seen within 2 hours (quarterly)	99.30	99.10	95.00	G	$\Rightarrow$
L135.2	Occupational Therapy (OT) assessments that were completed within 28 days of the first contact (Quarterly)	95.1%	99.1%	90.0%	<b>G</b>	71
Commu	ınity Team for People with Learr	ning Disabilit	ies - Quarte	erly		
OF1e	Adults with learning disabilities in paid employment (Quarterly)	17.1%	16.0%	15.0%	G	$\Rightarrow$
OF1g	Adults with learning disabilities who live in their own home or with their family (Quarterly)	87.3%	87.4%	85.0%	<b>6</b>	$\Rightarrow$
Housin	g - Benefits - Quarterly					

NI181	Time taken to process Housing Benefit or Council Tax Benefit new claims and change events (Quarterly)	8.0	6.0	10.0	G	7
L033	Percentage of customers receiving the correct amount of benefit (Sample basis) (Quarterly)	96.6%	98.9%	97.0%	<b>G</b>	$\Rightarrow$
L177	Average time from when customer first seen to receipt of benefit payment (Quarterly)	6	4.75	10	G	71
Housir	ng – Forestcare – Quarterly					
L030	Number of lifelines installed (Quarterly)	134	149	130	<b>G</b>	7
L031	Percentage of lifeline calls handled in 60 seconds (Quarterly)	97.18%	97.06%	97.50%	<b>G</b>	$\Rightarrow$
L180	Time taken for Forestcare customers to receive the service from enquiry to installation (Quarterly)	9	8	12	G	71
Housir	ng – Options – Quarterly					
NI155	Number of affordable homes delivered (gross) (Quarterly)	131	9	9	G	7
L178	Number of household nights in B&B across the quarter (Quarterly)	1,005	1,884	1,650	R	7
L179	The percentage of homeless or potentially homeless customers who the council helped to keep their home or find another one (Quarterly)	89.77%	83.33%	90.0%	A	7
Emerg	ency Duty Service – Quarterly					
L199	Emergency Duty Service calls answered within 2 minutes (Quarterly)	~	Data not yet available			
Public	Health – Quarterly					
L215	Delivery rate of NHS health checks	~	702	400	<b>6</b>	77
L216	Smoking cessation delivery rate of successful 4 week quitters	297	Data not available until Q2	159		
L217	Smoking quit success rate	73.3%	Data not available until Q2	60.0%		
L218	Completion rate of specialist weight management treatment programme	~	66	50	G	7

Note: Key indicators are identified by shading

Traffic Lights		Comparison with same period in previous year		
		Identifies direction of travel compared to same point in previous year		
		Performance has improved	7	

Between 5% and 10% of target	Performance Sustained	$\Rightarrow$
More than 10% from target	Performance has declined	<b>4</b>

The following are annual indicators that are not being reported this quarter:

Ind Ref	Short Description
OF1a	Social care related quality of life (Adult Social Care Survey) (Annually)
OF1b	Proportion of people who use services who have control over their daily life (Adult Social Care Survey) (Annually)
OF1c.1	Proportion of social care clients receiving Self Directed Support (Annually)
OF1c.2	Proportion of social care clients receiving Direct Payments (Annually)
OF1d	Carer reported quality of life (Biennially)
OF2b	Proportion of older people who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (Annually)
OF2d	Outcome of short-term services: sequel to service
OF3a	Overall satisfaction of people who use the service with their care and support (Adult Social Care Survey) (Annually)
OF3b	Overall satisfaction of carers with social services (Adult Social Care Survey) (Biennially)
OF3c	Proportion of carers who have been included or consulted in discussion about the person they care for (Biennially)
OF3d	Proportion of people who use services or carers who find it easy to find information about services (Annually)
OF4a	Proportion of people who use services who feel safe (Adult Social Care Survey) (Annually)
OF4b	Proportion of people who use services who say that those services have made them feel safe and secure (Adult Social Care Survey) (Annually)
L032	Number of benefits prosecutions and sanctions per 1000 caseload (Annually)
L213	Satisfaction rates for calls to Emergency Duty Service (Annually)
L219	Purchase and dissemination of flu vaccination vouchers to people in priority groups (Annually)
NI155	Number of affordable homes delivered (gross) (Annually)

# **Section 3: Compliments & Complaints**

#### **Compliments Received**

Twenty-two compliments were received by the Department during the quarter which were distributed as follows:

#### Adult Social Care Compliments

16 compliments were received in Adult Social Care which consisted of:

Team	Number
Community Response & Reablement (CR&R)	8 compliments
Drug & Alcohol	2 compliments
Safeguarding	1 compliment
Older People & Long Term Conditions	1 compliment
Finance (Older People)	4 compliments (of which 3 were for the Financial Assessment team)

#### Housing Compliments

6 compliments were received in Housing.

#### **Complaints Received**

There were a total of seven complaints received in the Department during the quarter.

Adult Social Care Complaints

Five complaints were received this quarter in Adult Social Care.

Stage	activity in date activity year to date		Outcome of total complaints activity year to date
Statutory Procedure	5	5	2 Upheld, 1 Partially Upheld, 2 ongoing (still within time).
Local Government Ombudsman	0	0	Not applicable

#### **Nature of complaints/ Actions taken/ Lessons learnt:**

The nature of the five complaints received in quarter 1 in Adult Social Care was as follows:

- Concerning standard of service received 2 complaints
- Concerning access to services 2 complaints
- Concerning standard of communication 1 complaint

There are regular meetings within Adult Social Care to ensure learning from complaints is disseminated and acted on. The data is collated as the year progresses and is reported annually within the Complaints Report for Adult Social Care. *Housing Complaints* 

Two complaints were received in quarter 1 in Housing.

Stage	New complaints activity in quarter 1	Complaints activity year to date	Outcome of total complaints activity year to date
New Stage 2	1	1	1 partially upheld
New Stage 3	0	0	0
New Stage 4	0	0	0
Local Government Ombudsman	1	1	1 not upheld

#### Nature of complaints/ Actions taken/ Lessons learnt:

The nature of the two complaints received in quarter 1 in Housing was as follows:

Regarding the complaint at stage 2:

Housing Strategy & Needs – 1 complaint;

Regarding the LGO complaint:

Housing Strategy & Needs / Benefits – 1 complaint

There were no common issues concerning the complaints raised. One complaint was due to the implementation of welfare reforms, which had been done correctly based on the information received.

# **Section 4: People**

#### **Staffing Levels**

	Total	Total Sta	ff in Post	Total	Vacant	Vacancy
	Staff in Posts	Full Time	Part Time	Posts FTE	Posts	Rate
DMT	14	12	2	13	1	6.67
Older People & Long Term Conditions	204	76	128	113.38	32	13.56
Adults & Joint Commissioning	99	63	36	82.12	16	13.91
Performance & Resources	29	22	7	25.82	0	0
Housing	79	51	28	58.09	8	9.20
Public Health Shared	8	5	3	6.09	1	11.11
Public Health Local	5	5	0	5	0	0
Department Totals	438	234	204	303.5	58	11.62

#### **Staff Turnover**

For the quarter ending	30 June 2014	1.81%
For the year ending	1 Jul 2013 – 30 June 2014	7.35%

Total voluntary turnover for BFC, 2013/14: 12.64%

Average UK voluntary turnover 2012: 10.6%

Average Public Sector voluntary turnover 2013: 8.1%

(Source: XPertHR Staff Turnover Rates and Cost Survey 2013)

#### **HR Comments**

Staff turnover has gone down this quarter from 2.36% to 1.81%. The lower turnover rate reflects the vacancies that were held for those staff at risk of redundancy. Those vacancies were filled during this period.

#### **Staff Sickness**

Section	Total staff	Number of days sickness	Quarter 1 average per employee	2014/15 annual average per employee
DMT / PAs	14	30.5	2.2	8.7
OP&LTC	204	571.5	2.8	11.2
A&JC	99	129	1.3	5.2
P&R	29	5.5	0.2	0.8
Housing	79	86	1.1	4.4
Public Health: Shared	8	1.5	0.2	0.8
Public Health: Local	5	0	0	0
Department Totals (Q1)	438	824	1.87	_
Projected Totals (14/15)	438	2986.5		6.77

Comparator data	All employees, average days sickness absence per employee
Bracknell Forest Council 13/14	5.50 days
All local government employers 2012	9.0 days
All South East Employers 2012	8.7 days

(Source: Chartered Institute of Personnel and Development Absence Management survey 2013)

Note: 20 working days or more are classed as long term sick.

#### Comments:

There are seven cases of long term sickness. Of these cases, two have now returned to work, four have not yet returned but are being monitored by OH and one has left the organisation.

# **Section 5: Progress against Medium Term Objectives and Key Actions**

Progress has been monitored against the sub-actions supporting the Key Actions contained in the Adult Social Care, Health & Housing Service Plan for 2014 - 15. This contains 64 detailed actions in support of 6 Medium Term Objectives. Annex A provides detailed information on progress against each of these actions:

Overall, 3 actions were completed at the end of Quarter 1 (B), while 59 actions are on schedule (G) and 2 were causing concern (B) and (B).

The 2 actions that are causing concern are:

Ref	Action		Progress
6.11.3	Develop a reporting and monitoring methodology to report on the actions within the Better Care Fund	A	Discussions are on-going with the CCG about the format and content of the reporting and monitoring methodology.
11.2.10	Ensure the local workforce is appropriately trained to identify substance misuse issues in order to offer information and advice	A	No training sessions have been delivered in quarter 1.

#### **Section 6: Money**

#### **Revenue Budget**

The cash budget for the department is £32.278m, and a breakdown of this is attached in Annex B (Budget Monitoring). The forecast outturn in the latest budget monitoring is £32.227m, a balanced budget.

The current forecast is based on current commitments plus any known changes that will arise prior to the year end. The significant risks that may impact on this reported position are outlined below:

#### CCG Funding and Recruitment

There are a number of projects funded by the CCG or previously by the PCT that continue without formalised funding arrangements, particularly as in most cases they support staff costs. The risk to the Council is that if funding is stopped there are potential redundancy liabilities if staff have been employed on permanent contracts.

#### **Capital Budget**

The approved capital budget for the department is £4.5m and it is projected to spend £4.5m by the year end. A detailed list of schemes together with their approved budget and forecast spend is available in Annex B (Virements and Budget Carry Forwards).

#### **Section 7: Forward Look**

#### **ADULT SOCIAL CARE**

#### **Cross Cutting**

#### **Better Care Fund**

The requirements of the Better Care Fund nationally are evolving, particularly around the performance element of the money, and this will impact on the work required by the Council and the CCG in the following quarter. A revised template for completing will be received by the Council in late July, and will need submitting to the Health and Well Being Board for sign-off during September. The template contains the financial plans for the spending of the money, and the expected performance outcomes that will be achieved.

#### **Care Act**

With the publication of the Care Act, the new responsibilities will be analysed over the course of quarter 2, and a program of work set in place to ensure the Department is ready to meet the requirements for the first phase of the Act in April 2015.

#### **Carers**

Work will be undertaken within workforce strategy to review current carers assessments:

- to examine support and implications for carers in light of the Care Act.
- following the carers conference on 24th July there will be a three month consultation, ending 23rd October, to inform the development of the joint commissioning strategy for carers.

#### **Independent Living Fund**

In response to the Independent Living Fund (ILF) transfer joint reviews with individuals and the ILF will take place and be ongoing.

#### **Assistive Technology**

As an additional strand to raising awareness of assistive technology (AT) and maximising opportunities for people to utilise AT to support them plans will be developed to enable the local community and in particular people eligible for support to access the assessment AT flat at Bridgwell.

#### **Older People & Long Term Conditions**

#### **Community Response & Reablement**

The service will be working on delivering a robust pathway for people who fall regularly, working with the Frimley Park Hospital system and our colleagues in public health. This will build on the successful Falls Clinic and prevention programme that the service has already been operating since April 2013.

#### **Older People & Long Term Conditions**

With our partners in Bracknell Forest Homes and BFC Housing work will progress on the development of the service specification for the Clement House extra care housing scheme.

Further development of the integrated care teams to support people with long term conditions will be taken forward in partnership with our health partners.

A dementia forum is to be held in July to better support people with dementia living in the community and following evaluation the concept will be taken forward into a further workshop in the late autumn.

#### **Sensory Needs Service**

The care pathway for sensory needs will be reviewed and taken forward into the workforce strategy.

#### **Drug & Alcohol Action Team**

A local evaluation of Payment by Results is underway and will be completed during quarter 2. The evaluation will contain recommendations on the future commissioning of drug and alcohol services.

The Adults Substance Misuse Needs Assessment will be completed and presented to AMT/DMT for agreement and will then be published on the Bracknell Forest website.

#### **Emergency Duty Service**

Looking forward into quarter 2, EDS will:

- Revise procedures around referral process due to increase in referrals
- Produce a business case to DMT to increase child care practitioner DSB due to increase in referrals and implementation of new legislation - The Single Service Framework.

#### **Adults & Joint Commissioning**

#### **Learning Disabilities**

The action plan to implement the priorities identified in the joint Learning Disability strategy will be finalised and ratified by the Learning Disability Partnership Board through the 2nd quarter.

Work will continue with the Housing Associations to ensure properties will be accessible and adapted to needs so that when available people are able to move in and live with the people of their choosing.

Given the completion of the Rapid Response pilot a review of the pilot service will be developed over the 2nd quarter.

#### **Autistic Spectrum Disorders**

The consultation to inform development of an ASD joint commissioning strategy will commence and will run from the 2nd quarter.

Work will continue with the Housing Associations to ensure properties will be accessible and adapted to needs so that when available people are able to move in and live with the people of their choosing.

#### **Joint Commissioning**

A partnership approach, between the Council and the Clinical Commissioning Group, to prevention and self-care will be presented for approval to the Better Care Fund Board.

The Quality Assurance Framework will be piloted and consulted upon with providers before being adopted in September.

A Community Support Strategy is in development to ensure that people's support needs at home and in the community are developed and meet the requirements of the Care Act and the Better Care Fund.

#### **Mental Health**

Work continues looking at models of service for modernising the current mental health day services. This will go through a tender process in July 2014 and the new service will start in December this year.

#### **Dementia Services**

A forum for staff working with people with dementia will be held in July. The aim of the session is to raise awareness and enable a better understanding of dementia, and the impact on people with dementia and their carers. The emphasis of the day will be on better supporting people with dementia to live well in the community.

#### Performance & Resources

IT

With the implementation of the Care Act, RIE and LAS work programme there will be pressure on the IT Team to ensure the LAS is fit for purpose to meet the expected business processes within timescales as agreed. There is also the need to upgrade the LAS reporting functionality due to a withdrawal of support for the current product.

Developments are taking place on the EDS system with implementation expected in the next quarter.

#### HR

The human resources team will support the director, chief officers, heads of service and team leaders as necessary to fulfil the requirement to manage staff in accordance with employment law and the policies of the Council. When Organisational Change is necessary HR will support the lead officer to ensure staff are treated in accordance with the Organisational Change Protocol.

On a wider note, if necessary, the team will provide support to corporate HR in the tendering process for a replacement for the HR database.

Support to chief officer: housing will continue in the final phase of the housing and benefits reorganisation.

#### **Business Intelligence**

Work continues with the finance and brokerage teams to ensure that for all people supported they have a primary support reason recorded on LAS.

In conjunction with the IT team and corporate IT, the reporting tools that the team uses to extract data from LAS will be upgraded, there will also be the introduction of a new data warehouse, which will mean that all existing reports will need to be rewritten.

#### **Finance**

Forward Look July to September 2014

- Develop and implement monitoring arrangements for the Better Care Fund, to be completed by end August.
- As part of the 2015/16 budget process support the directorate in developing options to deliver the savings target set for the department. This will also include the identification of any service pressures, ongoing.
- Develop the financial analysis of the impact of the Care Act on the department; ongoing for the remainder of the year.
- Develop the reporting process around debt management and integrate into monthly financial reporting; complete by end of September.

- Enhance the financial reporting of the Public Health (Shared) Team; complete by the end of September.
- Complete testing and implement ETMS; system is due to go live by 18<sup>th</sup> August.

#### **PUBLIC HEALTH**

Quarter 2 will see the Public Health team continue to develop work streams across three key domains:

#### Public Health Intelligence

The team will continue to develop the new, web-based Joint Strategic Needs Assessment (JSNA). In quarter two, there will be a specific focus on incorporating the findings of the recent Public Health Survey of Bracknell Forest residents and ensuring that this data is informing how a wide range of work streams are delivered. For example, the survey data will be used to guide the targeting of initiatives related to alcohol harm reduction and MMR uptake.

#### Health Protection

In quarter two the public health team will undertake work related to childhood immunisation such as MMR, as well as make an early start in preparing for the 2014/15 promotion of influenza vaccination. In addition, the heat wave plan has now been finalised and, if required, the Public Health team will work with council and NHS colleagues to ensure the right actions and communications are put in place.

#### Health Improvement

Work to develop health improvement services aimed at specific groups will continue. This includes stop smoking programmes for people with mental health conditions and those embarking on elective surgery as well as self management programmes for those at high risk of diabetes and alcohol harm reduction advice for people using adult social care services. In addition, following the review of sexual health services in Quarter 1, the team will roll out a new targeted outreach contraception programme as well improve the availability of information on local sexual health services for residents. Finally, work will be undertaken to extend the availability of mental well-being support for children and young people.

#### **HOUSING**

During the quarter an open evening event will be held to promote the Council's and other partners' low cost home ownership options.

The purchase of properties to provide temporary accommodation for homeless households will be complete by the end of the quarter.

There will be three low cost home ownership properties completed at the Forest Road development and they will be offered for sale by Affinity Sutton housing association. In addition a four-bedroom wheelchair accessible affordable rented house will be completed on the Parks development.

The Abritas system which provides the BFC My Choice choice based letting system provides a version of the system to run specifically on mobile phones. That part of the system will go live during the quarter.

The Housing service will continue to advertise for properties it can lease so as to provide temporary accommodation for homeless households.

The redesigned housing service will go live from the new reception facility during the quarter. To date the service has operated a filter desk at the front of main reception to ensure customers are seen as quickly as possible and that as much work is completed with customers as possible when they attend Time Square. During the quarter the filter desk will be removed and an automated kiosk system will be installed and customers will take tickets to direct them to the appropriate officer.

It is intended to report to Executive during the quarter to seek authority to dispose of the Coopers Hill site to Thames valley Housing association subject to planning permission for the proposed development. The proposal is to develop 122 units of shared ownership accommodation and a youth arts centre on the ground floor. As can be imagined this is a complex scheme which is aimed at delivering affordable housing and a state of art, arts facilities for young people at minimal cost to the Council.

The next stage in the implementation of the Council's older persons' accommodation and support services strategy will take place during the quarter. It is intended to report to Executive to seek authority to enter into contract with Bracknell Forest Homes to swap assets so as to offer improved facilities and services to older people.

#### **Benefits**

The benefit service will establish the properties that will be classified as exempt for housing benefit purposes. These are properties where there is considerable support provided by the landlord to enable the tenant to live independently in the property. They are classified as exempt from the Universal credit regime where the housing element of universal credit will be paid direct to the tenant. Tenants of exempt accommodation will continue to have housing benefit paid direct from the council to the landlord.

#### **Forestcare**

Forestcare will look to upgrade its current calls monitoring system during the quarter. The upgrade will provide greater functionality and additional services to customers and it is hoped the costs of the upgrade can be contained within the existing revenue budget due to savings on maintenance.

Forestcare will host a tea party for its customers at Easthampstead Park conference centre during the quarter. The purpose of the tea party is to provide an opportunity for vulnerable lonely older people to meet and also other services to attend the event so as to federate and market a number of relevant services. Forestcare is well placed to identify older people who are lonely due to the regular contact it has with them and the birthday calls it makes to customers to wish them happy birthday whilst at the same time checking the functionally of the lifeline systems.

# **Annex A: Progress on Key Actions**

MTO 1: Re-generate B	racknell	Town	Centr	е
Sub-Action	Due Date			Comments
1.9 Implement an Accombuildings used by the Co		Strate	gy to r	ationalise the number of
1.9.12 Implement flexible and mobile working principles across all town centre offices	31/03/2015	ASCHH	B	This has now been implemented in Adult Social Care, Health & Housing.
1.9.7 Relocate ASCHH to final positions in Time Square	31/03/2015	ASCHH	B	Teams have now been relocated to their final locations within Time Square.
MTO 4: Support our ye	ounger r	esider	nts to	maximise their potential
Sub-Action	Due Date	Owner	Status	Comments
4.3 Increase opportunitie community based schem		ng peo	ple in (	our youth clubs and
4.3.6 Work with Thames Valley Housing to develop proposals for the Coopers Hill site to facilitate the provision of a new youth club	30/09/2014	ASCHH	G	Design proposals going through pre-application proposal and scheme viability being tested.
MTO 6: Support Oppo	rtunities	for H	ealth a	and Wellbeing
Sub-Action	Due Date			Comments
6.2 Support the Health an involved in delivering he		_		
6.2.1 Develop clarity in the respective roles of partners within the Health and Wellbeing Board	30/09/2014	ASCHH	G	Paper presented to HWB, supplemented by workshop planned for Q2, subject to availability of partner.
6.3 Continue to support t	he devel	pmen	of a lo	ocal Healthwatch to provide
local patients with a voic	e.			
6.3.1 Monitor local Healthwatch and conduct regular reviews against the agreed contractual outcomes	31/03/2015	ASCHH	G	Quarterly meetings have been agreed.
6.8 Support health and w	ellbeing	hroug	n Publi	c Health.
6.8.1 Conduct a comprehensive programme aimed at improving self-care across the population, including completion of a new set of web-based self care resources in collaboration with clinical leads and community groups	31/03/2015	ASCHH	G	A new, whole system approach to self-care has been designed in collaboration with colleagues in Adult Social Care, CCG and Primary Care. This approach has been approved as a key initiative within the Bracknell Forest Better Care Fund programme. To supplement this work, a unique and locally tailored self-care guide has been produced. The guide is hosted on the JSNA website and features information on conditions, self-care and local services. The

				guide is brought to life by
				animations that give key messages.
6.8.2 Maximise the take-up of key health improvement programmes across the population. These will include health checks, smoking cessation and weight management	31/03/2015	ASCHH	G	Performance in relation to key health improvement services has exceeded the targets that were set. In relation to Health Checks, the uptake rate (74%) was the highest in Berkshire, as was the improvement in delivery rate which has surpassed 10% of the eligible population (the national target). The stop smoking quit success rate (70%) was one of the highest in the country and the number of successful quitters reached 763 people (105% of the target). Early indications are that the high success and delivery rates have continued in Quarter 1. A new weight management programme has been commissioned featuring an expanded system of referral aimed at maximising uptake. This has already led to a rise in new starters from an average of 5 per month to 20 per month which has continued throughout Quarter 1.
6.8.3 Deliver a range of programmes aimed at improving mental health in the local population, including: at least one mental health first aid course delivered per quarter; a report that 'maps' assessed social isolation and loneliness across the borough that can be used as the basis for targeted outreach work	30/06/2014	ASCHH	G	Mental health first aid courses continue to be run, including specialist sessions for those who work with young people. The mapping of social isolation as part of the Public Health Survey has been completed, including ward-level analyses. Along with an analysis of additional data collected from users of the local befriending scheme, this data is currently informing a review of our services aimed at tackling social isolation.
6.8.4 Carry out specific and collaborative assessments of the services including a full consultation exercise and review of Public Health services for children	31/03/2015	ASCHH	<u>©</u>	A comprehensive review of sexual health services, including a health needs assessment, stakeholder consultation and financial analysis, has been completed. This has informed the recommissioning of sexual health services as well as a planned expansion of these services, including the introduction of a new targeted outreach programme. Children's public health services have also been reviewed in anticipation of the transfer of responsibility for Health Visiting services in 2015. A particular focus has been on initiatives aimed at improving psychological well-being and

			preventing mental ill-health among
			children and young people.
6.8.5 Improve Public Health work on health intelligence and insight including: a quarterly review of the Joint Strategic Needs Assessment with the addition of at least five new or updated chapters per quarter; annual delivery of the Public Health survey with a sample of 1,800 residents; annual review and reissue of CCG and Ward profiles; quarterly bulletin on key Public Health Intelligence issues; annual review of report detailing key commissioning implications of local health data	30/11/2014	ASCHH	All 'intelligence and insight' projects have been successfully completed, including the redesign of the JSNA, the Public Health Survey and Ward profiles. This programme of intelligence and insight work in Bracknell Forest, centred around the new JSNA, has been highlighted as an example of best practice and will be featured at the national Public Health England Conference in September 2014.
6.8.6 Produce an annual report mapping uptake and attitudes to MMR and Flu immunisation take-up  6.9 Support people who		rugs ar	Data on uptake and attitudes to both flu and MMR vaccinations has been collected and mapped across the borough. This has revealed key differences between electoral wards, which in turn will allow targeted promotional campaigns aimed at increasing uptake.  nd/or alcohol to recover by
providing appropriate int			•
6.9.1 Evaluate the effectiveness of the Payment by Results project by monitoring successful delivery of outcomes, and using findings to inform future commissioning plans	31/03/2015	ASCHH	The evaluation is now complete and has been out for consultation to Adult Management Team and service providers. A report is being prepared for DMT in order for them to agree to the recommendations contained within the evaluation.
6.9.2 Train social care staff to be able to identify problematic drinking and deliver brief alcohol interventions to people using social care services and refer people into specialist services as required	31/03/2015	ASCHH	Forty-nine social care practitioners have undertaken the training with two further sessions planned at this time.
6.9.3 Monitor the number of adults and young people entering treatment who misuse mephedrone and go on to successfully complete treatment	31/03/2015		August 2014.
on improving local health			ical Commissioning Group to focus ur residents.
6.10.1 Work with the CCG, Public Health and other Council Departments to improve health outcomes for residents through relevant strategies and plans	31/03/2015	ASCHH	Range of activity undertaken; new Public Health plan for year, transfer of 0-5s commissioning later in year. Focus on integration and joint plans. PH survey results available Q2.

7.1 Secure preventative and early intervention measures to ensure residents have the maximum choices to allow them to live longer in their own homes.				
Sub-Action	Due Date			Comments
MTO 7: Support our o		vulne	rable	residents
6.11.4 Extend the use of Electronic Monitoring for support provided to individuals outside their home	31/03/2015		0	The priority is to have the finance manager successfully implemented before focussing on rolling out emonitoring further.
tendering 6.11.3 Develop a reporting and monitoring methodology to report on the actions within the Better Care Fund	31/03/2015	ASCHH	A	Discussions are on-going with the CCG about the format and content of the reporting and monitoring methodology.
6.11.2 Implement the changes to the Electronic Social Care Record identified as required to make the system fit for purpose as the alternative to re-	31/03/2015	ASCHH	G	Contract Standing Order Waiver form was prepared for sign off by the Chief Executive.
quality of people's lives a 6.11.1 Investigate the feasibility of developing and implementing self-service performance reports to support managers so that they can make more informed decisions	and supp	ort and		-
6.10.6 Ensure the development of Better Care Plans are undertaken to meet key timescales and local needs  6.11 Ensure that IT syste	31/12/2014		G be dev	in Q1. Guidance being revised and services being developed to meet local need. Change in national policy signalled at very end of Q1.
6.10.5 Review out of hours intermediate care cover and develop a process whereby this cover will assist in 7 day working.	31/03/2015	ASCHH	G	Work in progress and a bid will be made for extra staff to deliver this through the Better Care Fund.  All plans/timetables have been met
unplanned acute admissions. 6.10.4 Work with the Acute Trust in order to deliver 7 day working so that delays for people in hospital awaiting social care are minimised.	31/03/2015	ASCHH	6	Partnership working with BHFT to agree implementation. An initial meeting is scheduled for 11/07/14.
6.10.3 Work in partnership with the Bracknell and Ascot Clinical Commissioning Group and Bracknell Healthcare Foundation Trust to build on an integrated service for adults with long term conditions to improve health and reduce		ASCHH	В	The service has been evaluated and awaiting outcome and next steps. Workshop planned for 10.07.14
6.10.2 Work with the CCG to help shape current and future service provision through Better Care Fund plans.	31/03/2015	ASCHH	G	Range of developments coming to Boards for approval and reviews undertaken of existing support.

7.1.1 Develop a plan for implementation of the Care Bill	31/10/2014	ASCHH	G	A program board has been established, including senior officers from the department and Corporate services.
7.1.10 Review of Governance processes to ensure that intermediate care services are safe and correspond to best practice	31/03/2015	ASCHH	G	Review underway through the Bridgewell improvement plan.
7.1.2 Review the range and nature of support services provided by Forestcare for vulnerable people by redesigning the service	31/03/2015	ASCHH	6	Redesign of services underway and bids made for funding so as to extend range of services that can be provided for customers.
7.1.3 Develop a specification and tender for the extra care required for 65 households at Clement House	31/03/2015	ASCHH	<u></u>	Work has been continuing, in partnership with Bracknell Forest Homes, to develop a service specification and tender for the care and support for Clement House extra care facility. Once a model of care and support has been agreed between the partners, market testing will be undertaken to enable the provider market to prepare for the forthcoming tender.
7.1.4 Work with the Acute Sector, voluntary sector and provider colleagues for appropriate and timely discharge from hospital which includes early supported discharge.	31/03/2015	ASCHH	<b>(</b>	Attendance at monthly Urgent Care Boards and operational groups across 3 Acute Trusts is facilitating this project.
7.1.5 Refresh the "Helping you to stay independent" Guide maintaining a focus on people who fund their own support and giving people information within a form to enable them to stay independent for as long as possible	31/01/2015	ASCHH	6	The current guide was published in January 2014, the refresh being due in January 2015. An enhanced programme for prevention and early, in partnership with the NHS, will be presented to the Better care Fund Programme Board in July.
7.1.6 Refresh the Carers' Strategy to ensure that services and support for carers reflects their needs.	31/12/2014	ASCHH	<b>G</b>	The conference to launch the consultation is planned for 24th July and invitations have been sent to carers and other stakeholders.
7.1.7 Implement the revised Quality Assurance Framework with all providers to ensure robust monitoring of commissioned services to improve the quality of support for people	30/09/2014	ASCHH	0	The Quality Assurance Framework is in draft form and is being piloted with five providers.
7.1.8 Evaluate and review local mental health services including Common Point of Entry, looking at strengths and risks and areas for development in order to ensure that the Mental Health needs of	31/10/2014	ASCHH	G	The evaluation has been commissioned and has now taken place, the final report is now being drafted.

the local population are being met				
7.1.9 Promote dementia friendly communities that understand how to help people living with dementia, to improve the support and understanding for individuals in the local community	28/02/2015	ASCHH	6	Bracknell Forest Council is in the process of commissioning a service to be responsible for setting up and co-ordinating a Dementia Action Alliance. The Alliance will encourage and support the local community and organisations across Bracknell Forest to take practical actions to enable people to live well with dementia.
7.4 Continue to modernis delivery of that support.	se suppoi	rt and i	nclude	new ways of enabling the
7.4.1 Work in partnership with health & voluntary sector to further develop and expand support for carers in need who are not known to ASCHH	31/03/2015	ASCHH	6	Berkshire Carers Services has been commissioned to work on identifying carers not known to ASCHH. They have, and will continue, to provide information to GP surgeries and local community centres and raise awareness of this hard to reach group of people. Results of a survey and gap analysis is being produced which will enable us to examine what actions we need to take. We are also working closer with Children's Services to adopt a whole family approach to support.
7.4.2 Provide support and training through a range of partners to enable carers to return to paid or voluntary work	31/03/2015	ASCHH	<u> </u>	The development work which will be undertaken by the Carers Forum, and BFVA's Befriending Scheme will provide an opportunity for volunteering from current and ex carers. Working closely and building up links with the Open Learning Centre enables us to continue to signpost people to college courses. In order to support confidence building and self development educative courses are available, as an example we are currently offering moving and handling and first aid courses.
7.4.3 Re-tender the current 'Rethink' contract to modernise support service provision	31/03/2015	ASCHH	0	The specification has now been completed and has been published on the south east business portal; the Last Date for Expressing Interest is 21/07/2014.
7.4.4 Develop solutions within the Controcc finance system that allow people to use their support hours in a more flexible way	31/01/2015	ASCHH	0	This action has not yet started. It is hoped that this will be completed by Sep 14.
7.4.5 Implement the new Learning Disability strategy, and develop an action plan	31/03/2015	ASCHH	<b>©</b>	Work has been underway to develop an action plan to respond to the key priorities identified within the strategy.

7.4.6 Implement the new Learning Disability Joint Commissioning Strategy which will include: meeting the Winterbourne requirements; further develop housing options for people with learning disabilities; review the Rapid Response pilot	31/03/2015	ASCHH	0	Housing: work is underway with Housing Associations to increase the availability of suitable accommodation. This work includes a new build project. Winterbourne: A range of work has been undertaken in response to the Concordat. This includes an revision to the review and planning processes to ensure that these are as comprehensive as possible. Rapid Response to people in crisis, with the intention of preventing avoidable hospital admission, has been piloted. The analysis of outcomes will inform future plans.
7.4.7 Develop a new Joint Autism Commissioning Strategy in response to new national requirements	31/03/2015	ASCHH	G	A small group has been formed to develop a consultation plan and materials to help with the strategy development.
	cnocialic	t accor	nmoda	•
	•			ation for older people which
•	io ne sup	housed	บนเรเต	le residential and nursing
care.	1	1		
7.5.1 Support development of Clement house extra care scheme and develop proposals for additional extra care housing provision for older people	31/03/2015	ASCHH	0	Clement House development issues are addressed within the Council where necessary. The planning consent for Warfield includes a 65 extra care affordable housing scheme.
7.5.2 Undertake a procurement process for provision of medical support at the Bridgewell Centre	31/12/2014	ASCHH	G	Awaiting Intermediate Care Commissioning strategy which will inform on-going medical support needed.
7.6 With partners develo	p a cultur	e that o	does n	ot tolerate abuse, and in
<u>-</u>				safeguarded against abuse.
7.6.1 Work with statutory partners to identify which model of Multi-Agency Safeguarding Hub (MASH) would best meet local needs so that local residents are further safeguarded against abuse	31/03/2015		6	Discussions are ongoing with Thames Valley Police regarding the development of a MASH for Bracknell Forest.
7.6.2 Undertake a review of the Bracknell Forest Safeguarding Adults Board in light of the changes proposed in the Care Bill so that the Council meets it's statutory requirements	31/03/2015		(G)	The Care Act has received Royal Assent and the statutory guidance is currently subject to consultation. The Board will be responding to the consultation and working through implications in due course.
7.7 Target financial supp	ort to vul	nerable	nous	
7.7.1 Review the Council's support to households in the light of the claimant commitment	31/03/2015	ASCHH	<u>o</u>	Contact has been made with DWP and in principle agreement reached for BFC and Job Centre Plus staff to job shadow so as to better understand the support to provide to customers.
7.7.2 Establish the homes that should be exempt from the	30/06/2014	ASCHH	G	Work has begun on determining exempt properties and some

housing element provision of Universal credit				properties have been determined as exempt. This will be on going.
	eople thr	ough c	ontinu	ed provision of out of hours
services	T	1	1	
7.8.1 Monitor the number of out of hours Adult Safeguarding, Child Protection and Mental Health Act assessments to identify any trends and to make sure that there are sufficient resources	31/03/2015	ASCHH	G	The team have been monitoring the numbers of out of hours assessments, and investigating and reporting back on the increased numbers as appropriate.
MTO 10: Encourage the housing	ne provis	sion of	a ran	ge of appropriate
Sub-Action	Due Date	Owner	Status	Comments
10.1 Ensure a supply of a	affordable	home	s.	
10.1.11 Arrange the disposal of Downside for affordable housing	30/09/2014	ASCHH	<b>©</b>	Planning application for the site will be submitted early in second quarter with contracts exchanged subject to planning.
10.1.12 Review the opportunities to invest the remainder of the Council's stock transfer receipt to maximise return and affordable housing	31/03/2015	ASCHH	G	Investigation of setting up a local housing company to provide accommodation for homeless households is under way.
10.1.13 Work with partners to identify a suitable location to enable the relocation of the Bridgewell Centre	31/03/2015	ASCHH	G	Discussions continue with Bracknell Forest Homes.
10.1.2 Review the provision of the Disabled Facilities Grant	31/12/2014	ASCHH	G	Initial meeting booked on 17/07/14 with key people to agree way forward.
10.1.4 Promote and develop flexible Home Improvement Loan Schemes	31/03/2015	ASCHH	<b>6</b>	There were 5 flexible home loans awarded/completed in Q1; the value of the awarded loans was £33,557. The loans were used for home improvements including works to heating systems and bathrooms.
10.1.9 Complete work with Thames Valley Housing Authority on development of affordable homes on the Adastron/ Byways site	31/03/2015		<u> </u>	Planning application submitted with decision expected by end of second quarter.
10.2 Support people who	wish to	buy the	ir own	home.
10.2.2 Review the financial support that it provided to households to help them buy a home, including the Homebuy scheme			<u> </u>	Schemes reviewed and will be promoted in the second quarter.
MTO 11: Work with out open, transparent and money				partners to be efficient, to deliver value for

Sub-Action	Due Date	Owner	Status	Comments
11.1 ensure services use			iently a	and ICT and other
technologies to drive do	wn costs.	•		
11.1.6 Ensure IT systems are ready for any statutory and legislative changes due during 2014/15 and for the start of 2015/16	31/03/2015		G	Working with the IT supplier on a suitable solution to meet the IT system requirements for the Care Act timescales. The new Data Warehouse is now available for the LAS system and the department is reviewing the requirements for implementation.
			ave the	e opportunities to acquire
the skills and knowledge	they nee	d.		
11.2.10 Ensure the local workforce is appropriately trained to identify substance misuse issues in order to offer information and advice	31/03/2015	ASCHH	A	No training sessions have been delivered in quarter 1.
11.2.6 Implement the Pay and Workforce Strategy Action Plan	31/03/2015		<u> </u>	The Pay & Workforce Strategy is being coordinated by Corporate L&D manager for publication in Q2. Updated ASCH&H input by including Public Health, the Care Act 2014 and the Better Care Fund.
11.5 develop appropriate	and cost	t effect	ive way	s of accessing council
services				
11.5.3 Continue redesign of the housing and benefit service to maximise household income and independence	31/03/2015	ASCHH	0	Services are continually redesigned using system thinking methodology and new services rolled into new way of working.
11.7 work with partners a	and engag	ge with	local	communities in shaping
services.		-		. •
11.7.10 Contribute to the development of the outcomes set by the three Urgent Care Boards and support the delivery of services to achieve them	31/03/2015	ASCHH	G	Chief Officer: OPLTC attends Urgent Care Board meetings at 3 acute trusts on a monthly basis and co-ordinates actions.
11.7.11 Work with BHFT to establish a nursing service within the Duty Team in order to ensure that people receive a more comprehensive health and social care assessment.	31/03/2015	ASCHH	<u> </u>	A nurse has been allocated to the duty team as a pilot project, which will be evaluated in Q4.
11.7.12 Ensure the development and implementation of new reporting from IAS responds to the Zero Based Review changes and other management needs brought about by the changes	31/10/2014	ASCHH	G	System upgrades pertinent to the Zero Based Review have been implemented and the new fields can be reported upon. Upgrades to Business Objects and the installation of the new data warehouse will hopefully commence during quarter 2.
11.7.4 Continue to support the voluntary sector through the provision of core grants, to	31/03/2015	ASCHH	G	Completed and monitored on a quarterly basis.

develop its' capacity						
11.8 implement a programme of economies to reduce expenditure						
11.8.6 Develop departmental proposals to help the Council produce balanced budget in 2015/16	30/11/2014	ASCHH	G	Initial targets for glide path savings were given to departments for them to work up initial proposals over the summer.		

Status Legend	
Where the action has not yet started but should have been, or where the action has started but is behind schedule	B
Where the action has not yet started or where the action has been started but there is a possibility that it may fall behind schedule	A
Where the action has started, is not yet completed, but is on schedule	G
Where the action has been completed (regardless of whether this was on time or not)	В
Where the action is no longer applicable for whatever reason	(5)

# **Annex B: Financial Information**

ADULT SOCIAL CA	ARE HEAL	.TH & H	OU:	SING BUDG	GET MON	ITORING -	May 201	4	Ļ
	Original Cash Budget	Virements & Budget C/fwds	NOTE	Current approved cash budget	Spend to date %age	Department's Projected Outturn	Variance Over / (Under) Spend	Movement This month	TOW
	£000	£000		£000	%	£000	£000	£000	
Director	(00)	(0)	4	(05)	4000/	(05)	0.1		_
Director	(93) <b>(93)</b>	(2) ( <b>2)</b>	1	(95) <b>(95)</b>	-182% <b>-182%</b>	(95) <b>(95)</b>	0 <b>0</b>	0	+
	(55)	(-)		(5.5)		(55)			
Adults and Commissioning	4 000			4.000	400/	4 000	- 1		_
Mental Health Support with Memory	1,628 2,339	0		1,628 2,339	12% 22%	1,628 2,339	0	0	+
Cognition	2,339	U		2,339	22%	2,339	U	U	
Learning Disability	12,795	0		12,795	6%	12,795	0	0	$\dagger$
Specialist Strategy	239	0		239	16%	239	0	0	L
Joint Commissioning	573	0		573	16%	573	0	0	
Internal Services	1,118	0		1,118	12%	1,118	0	0	Ļ
	18,692	0		18,692	9%	18,692	0	0	L
Housing									
Housing Options	311	(3)		308	43%	308	0	0	Τ
Strategy & Enabling	267	Ó		267	0%	267	0	0	T
Housing Management Services	(35)	(1)		(36)	19%	-36	0	0	
Forestcare	14	0		14	-829%	14	0	0	
Supporting People	993	0		993	11%	993	0	0	
Housing Benefits Payments	103	0		103	- 5,566%	103	0	0	
Housing Benefits Admin.	199	0		199	-13%	199	0	0	T
Other	(48)	0		(48)	-2%	-48	0	0	
	1,804	(4)	2	1,800	-313%	1,800	0	0	L
Older People and Long Terr	n Conditio	ns							
Physical Support	7,601	0		7,601	14%	7,601	0	0	Τ
Internal Services	1,118	0		1,118	17%	1,118	0	0	T
CR&R - Pooled Budget	1,678	0		1,678	26%	1,678	0	0	
Emergency Duty Team	39	0		39	533%	39	0	0	
Drugs Action Team	63	0		63	-281%	63	0	0	1
	10,499	0		10,499	16%	10,499	0	0	<u> </u>
Performance and Resource	S								
IT Team	283	0		283	33%	283	0	0	Ι
Property	123	(7)		116	4%	116	0	0	
Performance	224	0		224	18%	224	0	0	$oldsymbol{\perp}$
Finance Team	547	0		547	16%	547	0	0	$\perp$
Human Resources Team	186 <b>1,363</b>	(7)	3	186 <b>1,356</b>	15% <b>19%</b>	186 <b>1,356</b>	0 <b>0</b>	0	H
				.,,,,,,		.,500			
Public Health									
Bracknell Forest Local Team	(25)	0		(25)	25%	-25	0	0	
	(25)	0		(25)	25%	(25)	0	0	
	32,240	(13)		32,227	70%	32,227	0		_

Devolved Staffing Budget			13,189	50%	13,189	0	0
Non Oosh Dadasta							
Non Cash Budgets							
Capital Charges	432	0	432	0%	432	0	0
FRS17 Adjustments	728	0	728	0%	728	0	0
Recharges	2,567	0	2,567	0%	2,567	0	0
	3,727	0	3,727		3,727	0	0

# **Virements and Budget Carry Forwards**

Note	Total £ 000	Explanation
	32,240	DEPARTMENTAL CASH BUDGET
	0	Total previously reported
	0	Budget Carry Forwards
	0	LINKS Budget into the Director Budget
		VIREMENTS
1	-2	Director Letter Headed Paper savings applied
	0	Adults and Commissioning No changes
3	-4	Housing Building Repair Contract savings applied
4	0	Older People and Long Term Conditions No changes
5	-7	Performance and Resources Building Repair Contract and Lift maintenance contract savings applied
6	0	Public Health No changes
	32,227	Total
	3,727	DEPARTMENTAL NON-CASH BUDGET
	0	Total previously reported
		VIREMENTS
7	0	
	3,727	Total
	35,954	Total

# **Budget Variances**

Note	Reported Variance over/ (under) £ 000	Explanation
		DEPARTMENTAL BUDGET
	0	Total previously reported
	0	No variances to report
	0	
	0	
	0	
	0	
	0	Grand Total Departmental Budget
		DEPARTMENTAL NON-CASH BUDGET
	0	Total previously reported
	0	No variances to report
	0	Grand Total Departmental Non-Cash Budget

# Capital Monitoring 2014/15 as at 31 May 2014

Cost Centre	Cost Centre Description	2013/14 Brought Forward*	2014/15 Budget	Virements Awaiting Approval	Total Virements	Approved Budget	Cash Budget 201 <i>4/</i> 15	Expenditure to Date	Current Commitments	Estimated Outturn 2014/15	Carry Forward 2015/16	(Under) / Over Spend	Target for Completion	Current Status of Project / Notes	Responsible Officer
		£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s			
Housing															
YP260	Enabling More Affordable Housing	81.7	92.0		0.0	173.7	173.7	0.0	0.0	173.7	0.0	0.0	2014/15	East Lodge (£82k) is still to be completed	SH
YP261	Help to Buy a Home (Cash Incentive Scheme)	473.4	300.0		0.0	773.4	773.4	0.0	0.0	773.4	0.0	0.0	2014/15	Assuming all budget will be spent this financial year	SH
YP262	Enabling More Affordable Homes ( Temp to Perm)	158.2	500.0		0.0	658.2	658.2	37.4	0.0	658.2	0.0	0.0	2014/15	Assuming all budget will be spent this financial year	SH
YP304	Mortgages for Low Cost Home Ownership Properties				0.0	351.0	351.0	0.0	0.0	351.0	0.0	0.0	2014/15	Assuming all budget will be spent this financial year	SH
YP316	BFC My Home Buy	410.2	400.0		0.0	810.2	810.2	106.2	0.0	810.2	0.0	0.0	2014/15	Assuming all budget will be spent this financial year	SH
YP440	Garth Extra Care Scheme	0.0	672.0		0.0	672.0	672.0	0.0	0.0	672.0	0.0	0.0	2014/15	Assuming all budget will be spent this financial year	SH
YP441	Rainforest Walk Scheme	0.0	50.0		0.0	50.0	50.0	0.0	0.0	50.0	0.0	0.0	2014/15	Assuming all budget will be spent this financial year	SH
	Total Housing	1,174.5	2,314.0	0.0	0.0	3,488.5	3,488.5	143.6	0.0	3,488.5	0.0	0.0			
Adult So	cial Care & Health														
YS430	Social Care	10.1	0.0		0.0	10.1	10.1	0.0	0.0	10.1	0.0	0.0	2014/15	Still £10k to be spent on capital works for the Bridgewell Centre, eg new call system and kitchen equipment and furniture	ZJ/MH
YS527	Social Care Reform Grant	0.0	0.0		0.0	0.0	0.0	22.7	0.0	0.0	0.0	-22.7	2013/14	All budget has been spent; expenditure to be moved to YS529	ZJ/MH
YS528	Care Housing Grant	15.4	0.0		0.0	15.4	15.4	0.0	0.0	15.4	0.0	0.0	2014/15	To develop extra care housing	GJ

Cost Centre	Cost Centre Description	2013/14 Brought Forward*	2014/15 Budget	Virements Awaiting Approval	Total Virements	Approved Budget	Cash Budget 2014/15	Expenditure to Date	Current Commitments	Estimated Outturn 2014/15	Carry Forward 2015/16	(Under) / Over Spend	Target for Completion	Current Status of Project / Notes	Responsible Officer
		£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s			
YS529	Community Capacity Grant	460.1	199.0		0.0	659.1	659.1	23.0	0.0	659.1	0.0	0.0	2014/15	Monies carried forward to 2014/15 will include; £150k allocated for projects to be bid on, ie for those with additional needs that can not get access to schemes such as DFG but will reduce domiciliary care costs in revenue, £10k will be allocated for office moves, furniture and equipment; £200k is allocated for adaptations to housing to meet mobility needs to keep people at home; £50k will be allocated to bids for small capital grants for external organisations.	ZJ/MH
YH126	Improving Info for Social Care (Capital Gr)	64.7	0.0		0.0	64.7	64.7	0.0	0.0	64.7	0.0	0.0	2014/15	This money relates to integrating the Social Services and Health IT Systems	ZJ/MH
YS418	ASC IT Systems Replacement	310.3	0.0		0.0	310.3	310.3	0.0	0.0	310.3	0.0	0.0	2015/16	The full budget will be carried forward to 2015/16 when the IT requirements of the Care Bill should become clear.	ZJ/MH
	Total Adult Social Care & Health	860.6	199.0	0.0	0.0	1,059.6	1,059.6	45.6	0.0	1,059.6	0.0	-22.7			
	Total ASCH&H	2,035.1	2,513.0	0.0	0.0	4,548.1	4,548.1	189.3	0.0	4,548.1	0.0	-22.7			