

# QUARTERLY SERVICE REPORT

# ADULT SOCIAL CARE, HEALTH & HOUSING

Q4 2015 - 16 January – March 2016

Portfolio holder Councillor Dale Birch

Director

John Nawrockyi

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

There was significant activity in quarter 4 with both a number of different ongoing projects and with decisions being made both by the Executive and by the Director.

In March, the Executive Member for Adult Services, Health and Housing approved the request to extend the contract for the Clement House Night Service. Clement House is an Extra Care Housing Facility which opened in May 2015. The extension will allow further statistical information to be gathered and allow time for the Department to consider the best and most cost effective way to meet the needs of the service.

Also in March, the Director approved the procurement plan for the re-tender of the 'Support with Confidence' service. The current contract with Action for People (previously the Family Resource Centre) ends on 30th September 2016. In accordance with the council's contract standing orders, this service should now go out to tender.

Also approved in March by the Director was the award of the Bracknell Forest Adult Weight Management Contract to tenderer B. This contract will ensure that residents of Bracknell Forest can access a Tier 2 Adult Weight Management service that is focused on achieving the best healthy weight outcomes for people.

It was reported during the quarter that the Volunteer Passport Scheme which was intended to generate better and easier volunteering across the borough is now up and running. The Scheme will require a volunteer to register once in order to be considered for various volunteering opportunities. The scheme will also enable volunteers to upskill or multi skill.

As reported previously concerning the Care Act, following a consultation, the Council is amended its charging policies for Adult Social Care to become compliant with new duties and powers under the Care Act. People affected by the changes have been informed of the impact on the level of their contribution to the care.

The Council is now working on refreshing its guidelines to staff and procedures around third party top-ups, deferred payments and 12 week property disregards to bring them into line with best practice.

The submission for the 2016 Better Care Fund planning template was completed and submitted to NHS England. The draft assurance ratings will be provided in April by NHS England and the final assurance ratings will be confirmed in May 2016.

The revised Workforce Strategy Project was implemented on January 18th and as reported previously, work has included the recruitment of vacant posts, developing the interface between Older People Service and Community Mental Health Team for Older Adults and briefings to the collective workforce.

Public Health are compiling a council wide Needs & Asset Analysis which will collate information on how well current services (council run or otherwise) are meeting demand. The analysis will provide a focused and in depth guide to how things may be done differently in certain areas to better meet need or increase cost effectiveness.

It is anticipated that Downshire Homes will purchase the 20 properties it is programmed to acquire by the end of May. Five of those properties will be leased to a specialist housing association to provide accommodation for people with learning disabilities and the remaining fifteen will be offered to homeless households as temporary accommodation.

Delivery against the actions in the Service Plan is looking strong. Of the 54 actions, 47 have been completed either on schedule or ahead of schedule (Blue), 1 is on target for completion at the end of May (Green), 1 is delayed (Red) and 5 are not required (N/A).

The delayed action (Red) is as follows:

6.11.1 Ensure electronic batch matching on the NHS number is completed for a person's social care record

BFC have now achieved Information Governance Statement of Compliance (IGSOC) compliancy. Therefore the network change request to configure the connection required for the PDS element (real-time link to populate NHS numbers into LAS) has been resubmitted to Vodafone.

The incompatibility issue between the HSCIC website and the secure government Public Service Network implemented at BFC has been resolved. Corporate ICT have installed the Demographics Batch Service(DBS) software from HSCIC, to provide ability to verify NHS numbers batch uploaded from LAS. However one of the DBS software components is not compatible with BFC network policy. This issue is currently being investigated by Corporate ICT.

The go live date has been rescheduled to 31 Oct 2016 to provide an achievable timescale.

The 5 actions no longer required (N/A) are as follows:

4.1.9 Extend the principles of the Symbol project to identify and develop further links across services for vulnerable adults who are also parents

There has been a change in direction for this action and more links and work in practice have been undertaken with all elements of Children's Social Care, including education.

4.3.4 Work with Thames Valley Housing to finalise plans for a residential development to underpin the modernisation of the Youth Service programme to develop a new Town Centre Youth hub

Progress with the scheme has been postponed pending work on design and viability.

6.10.3 Work with the Acute Trust and review the out of hours intermediate care services so that delays for people in hospital awaiting social care are minimised

This action is now pending future discussions to link in with the results of the Emergency Duty Services review. Feedback is expected from, Local Authorities by 30<sup>th</sup> June and the options appraisal report is being developed for the Better Care Fund.

7.5.1 Undertake a review of the operational services supporting Clement House extra care scheme

DMT decided to extend the contract for a further 12 months to enable a clearer picture to emerge regarding the care and support necessary in Clements House which could be no change or the use of Forestcare Response Service.

11.1.7 Introduce arrangements to record care accounts so that the Council can track self-funder progress towards the care cap of £72,000

The cap on care costs has now been deferred until 2020. As such this action is no longer required.

There are 5 indicators in quarter 4 with a current status of Red as follows:

NI155 - Number of affordable homes delivered (gross)
Whilst the quarterly target was missed, the annual target was achieved.

OF2c.1 - Delayed transfers of care - total delayed transfers per 100,000 of population Full year figures are not available at the moment although the forecast shows that full year target will not be met. Overall there has been a drop in performance and the service is struggling to recover from Quarter 2 where the core market was unable to offer care for up to 600 hours. This has now improved greatly and performance is also set to show improvement.

OF2c.2 - Delayed transfers of care - delayed transfers attributable to social care per 100,000 population

Please see comments for OF2c.1 above

L214 - Delayed transfers of care (delayed bed days) from hospital per 100,000 population Please see comments for OF2c.1 above

OF2a.2 – Permanent admissions to residential or nursing care per 100,000 population 65 or over

The continued pressures of older, physically frailer people being admitted into nursing care have led to a 37% increase in admissions. Also the numbers of older people needing support in residential and nursing care who are unable to continue to fund this support have increased from 3 people in 2014-15 to 9 people in 2015-16.

L179 - The percentage of homeless or potentially homeless customers who the council helped to keep their home or find another one (Quarterly)

There has been a 30% increase in accepted homelessness over the year. This will to some extent explain the reason why the homeless prevention target has not been achieved. The inability to prevent homelessness will be due to a multitude of factors but the conditions in the private rented sector mean it is increasingly difficult to secure alternative homes for households who face homelessness.

Every quarter the department reviews its risks in the light of events. A significant risk reported in the last Quarterly Service Report was in respect of the ability of the domiciliary care market for older people to meet the increased demand for services. Mitigation was to be through a mixture of demand and supply measures – developing ways of reducing demand through prevention, reablement and reviews of existing arrangements, and working with providers to boost recruitment activity on the other. Whilst this risk has not yet been formally downgraded, providers have been successful in recruiting, and the Council has therefore found it easier to source packages of care. The project to review and right-size existing arrangements has commenced, with some early, albeit small-scale, success.

There is a statutory complaints process for Adult Social Care, part of which compliments are also recorded, which culminates in an Annual Report. Therefore 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 quarter 4, Adult Social Care received 6 complaints of which 2 were upheld, 1 was partially upheld, 1 was not upheld and 2 were ongoing within timescales. This compares to quarter 3 where there were 3 complaints of which none were upheld.

There were 19 compliments received which compares to 14 compliments in the previous quarter.

In Housing, there were 4 complaints, all of which were upheld. This compares to the previous quarter when there were a total of 3 complaints in the quarter, all of which were at stage 2. Of these, 1 was upheld and 2 were partially upheld.

There were 11 compliments in Housing compared to 10 in the previous quarter.

No complaints have been made in respect of Public Health.

# **Section 2: Department Performance Indicators**

Ind Ref	Short Description	Previous Figure Q3 2015/16	Current figure Q4 2015/16	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)	29.4%	38.0%*	40.0%*	G	<b>4</b>
	Permanent admissions to residential or nursing care per 100,000 population 18-64 (Quarterly)	5.4	5.4	6.8	G	<b>4</b>
	Permanent admissions to residential or nursing care per 100,000 population 65 or over (Quarterly)	531.30	700.00	596.80	R	<b>4</b>
L172	Timeliness of financial assessments (Quarterly)	98.30%	98.00%	95.00%	G	$\Rightarrow$
	Average time to answer Emergency Duty Service calls (Quarterly)	Available Q1 16-17	Available Q1 16-17	40		
L214	Delayed transfers of care (delayed bed days) from hospital per 100,000 population (Quarterly)	1,015.5	1,047.6*	521.3	R	<b>4</b>
Commu	nity Team for Older People & Long	g Term Condi	tions - Quart	terly		
L135.1	Percentage of Enhanced Intermediate Care Referrals seen within 2 hours (quarterly)	100.00	99.00	95.00	G	$\Rightarrow$
1 135 2	Occupational Therapy (OT) assessments that were completed within 28 days of the first contact (Quarterly)	97.5%	97.7%	No target		$\Rightarrow$
OF2c.1	Delayed transfers of care - total delayed transfers per 100,000 population (Quarterly)	13.2	14.4*	8.0	R	<b>4</b>
OF2c.2	Delayed transfers of care - delayed transfers attributable to social care per 100,000 population (Quarterly)	7.3	7.7*	5.0	R	<b>4</b>
Commu	nity Team for People with Learnin	g Difficulties	- Quarterly			
	Adults with learning disabilities in paid employment (Quarterly)	16.5%	17.1%	15.0%	G	<b>4</b>
OF1g	Adults with learning disabilities who live in their own home or with their family (Quarterly)	89.0%	89.6%	85.0%	G	$\Rightarrow$
Housing	g - Benefits - Quarterly					
INI181	Time taken to process Housing Benefit or Council Tax Benefit new claims and change events (Quarterly)	8.0	Available late April 2016	9.0	G	$\Rightarrow$
	Percentage of customers receiving the correct amount of benefit (Sample basis) (Quarterly)	97.5%	Available late April 2016	98.0%	G	$\Rightarrow$
Housing	g - Forestcare - Quarterly					
11 0.30 1	Number of lifelines installed (Quarterly)	221	204	200	G	<b>4</b>

L031	Percentage of lifeline calls handled in 60 seconds (Quarterly)	96.90%	97.46%	97.50%	G	$\Rightarrow$
L180	Time taken for ForestCare customers to receive the service from enquiry to installation (Quarterly)	7	9	10	G	7
Housin	g - Options - Quarterly					
NI155	Number of affordable homes delivered (gross) (Quarterly)	16	9	10	R	7
L178	Number of household nights in B&B across the quarter (Quarterly)	2,278	1,455	1,650	G	<b>7</b>
L179	The percentage of homeless or potentially homeless customers who the council helped to keep their home or find another one (Quarterly)	71.00%	71.00%	85.00%	R	<b>4</b>
Public	Health - Quarterly					
L215	Delivery of NHS Health Checks (Quarterly)	610	Available Q1 16-17	400		
L216	Smoking cessation delivery rate of successful 4 week quitters (Quarterly)	127	Available Q1 16-17	246		
L217	Smoking quit success rate (Quarterly)	83.0%	Available Q1 16-17	60.0%		
L218	Completion rate of specialist weight management treatment programme (Quarterly)	110	173	50	G	7

Ref	Short Description	Previous figure 2014/15	Current Figure 2015/16	Current Target	Current status	Comparison with same period in previous year	
ASCH	ASCHH All Sections - Annual						
OF1c.1	Proportion of social care clients receiving Self Directed Support (Annually)	99.9%	100.0%	98.0%	G	$\Rightarrow$	
Commi	unity Support & Wellbeing - Annua	I					
OF1c.2	Proportion of social care clients receiving Direct Payments (Annually)	22.7%	22.7%			$\Rightarrow$	
Housing - Options - Annual							
NI155	Number of affordable homes delivered (gross) (Annually)	124	37	16	G	7	

Traffic Lights		Comparison with same period in previous year		
Compa	res current performance to target	Identifies direction of travel compared same point in previous quarter		
G	Achieved target or within 5% of target	Performance has improved		
Between 5% and 10% away from target		$\Rightarrow$	Performance sustained	
R	More than 10% away from target	> Performance has declined		

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

Ind Ref	Short Description	Quarter due
Of1a	Social Care-Related quality of life	Q2/3
Of1b	The proportion of people who use services who have control over their daily life	Q2/3
Of1f	Adults receiving mental health services in paid employment as a percentage of all people with mental health problems (Quarterly)	Not known
Of1h	Adults receiving mental health services living independently, with or without support as a percentage of all people with mental health problems (Quarterly)	Not known
Of2b	Achieving independence for older people through rehabilitation or intermediate care (Annual)	Q2/3
Of2d	The outcomes of short term service: sequel to service	Q2/3
Of3a	Overall satisfaction of people who use services with their care with their care and support	Q2/3
OF3d.1	The proportion of people who use services who find it easy to find information about services	Q2/3
Of3d.2	Proportion of carers who find it easy to find information about services	Q2/3
Of4a	The proportion of people who use services who feel safe	Q2/3
Of4b	The proportion of people who use services who say that those services have made them feel safe and secure	Q2/3
L213	Satisfaction rates for calls to Emergency Duty Service	Q2/3

# **Section 3: Complaints and compliments**

# **Compliments Received**

30 compliments were received by the Department during the quarter, which were distributed as follows:

# Adult Social Care Compliments

19 compliments were received in Adult Social Care which consisted of 17 for the Community team for Older People & People with Long Term Conditions and 2 for Learning Disability.

# Housing Compliments

11 compliments were received by Housing. 5 received by Forestcare and 6 by Housing. The majority of the welfare and housing compliments were from customers where the service had maximised their income so that they could avoid homelessness.

# **Complaints Received**

There were a total of 10 complaints received in the Department during the quarter, 4 in Housing and 6 in Adult Social Care. No complaints were received by Public Health.

# Adult Social Care Complaints

6 complaints were received this quarter in Adult Social Care and all were dealt with using the statutory procedures. No complaints were dealt with using corporate procedures.

Stage	New complaints activity in Q4	Complaints activity year to date	Outcome of total complaints activity year to date
Statutory Procedure	6	19	7 complaints were upheld 7 complaints were not upheld 3 complaints were partially upheld 2 ongoing within timescales
Local Government Ombudsman	1	2	1 not upheld and 1 ongoing at the time of writing the report.

# Nature of complaints/Actions taken/Lessons learnt:

Of the 6 complaints received in quarter 4, 4 were about standard of service and 2 were about communications. 4 complaints were about services provided by the team for Older People & Long Term Conditions, 1 was about Learning Disability services and 1 was about Finance services.

There were 2 learning points during the quarter the first of which was were that steps have been taken to strengthen and check people's "ordinary residence" at the time of referral, to ensure that it is known which Local Authority is responsible for carrying out any assessment. The second learning point was that a review is being carried out to ensure that invoices are clearer to people receiving support and their carers and family.

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

# Housing Complaints

4 complaints were received in this quarter for the welfare and housing service.

The following table excludes Stage 1 complaints and those complaints which are dealt with through separate appeals processes. It should also be noted that complaints which move through the different stages are recorded separately at each stage.

Stage	New complaints activity in Q4	Complaints activity year to date	Outcome of total complaints activity year to date
Stage 2	4	13	3 complaints were upheld 1 complaint was not upheld 8 complaints were partially upheld 1 complaint reply outstanding within timescale.
Stage 3	0	0	-
Stage 4	0	0	-
Local Government Ombudsman	0	2	The Local Government Ombudsman complaints were not upheld

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

2 complaints were made by customers who were unhappy with the welfare service. Both claims were very complex and the learning point was that complex issues are unlikely to be resolved via correspondence and there is a better chance that customers will understand what is required via a face to face meeting. The other two complaints were made by a letting agent.

# **Section 4: People**

# **Staffing Levels**

	Establish ment Posts	Staffing Full Time	Staffing Part Time	Total Posts FTE	Vacant Posts	Vacancy Rate
DMT / PAs	11	7	4	8.91	1	8.33
Older People & Long Term Conditions	173	87	86	123.26	16	8.46
Adults & Joint Commissioning	101	69	32	87.46	20	16.5
Performance & Resources	28	21	7	24.34	2	6.6
Housing	69	46	23	57.17	3	4.1
Public Health Shared	12	7	5	9.27	1	7.7
Public Health Local	8	8	0	8	0	0
Department Totals	402	245	157	318.41	43	9.66

# **Staff Turnover**

For the quarter ending	31 March 2016	4.08%
For the last four quarters	1 April 2015 - 31 March 2016	10.96%

Turnover – comparator data	
Total voluntary turnover for BFC, 2014/15:	13.4%
Average UK voluntary turnover 2014:	12.8%
Average Local Government England voluntary turnover 2014:	12.7%

(Source: XPertHR Staff Turnover Rates and Cost Survey 2014 and LGA Workforce Survey 2013/14)

## Comments:

A vacancy management protocol is now in place to help reduce the need for redundancies.

The vacancy panel will review all vacancies on a weekly basis to determine whether vacancies can be filled by those "at risk" of redundancy, whether the vacancy will be advertised internally or externally.

#### Staff Sickness

Section	Total staff	Number of days sickness	Quarter 4 average per employee	2015/16 annual average per employee
DMT / PAs	11	0	0	1.09
Older People & Long Term Conditions	173	555	3.21	14.16
Adults & Joint Commissioning	101	202	2	8.48
Performance & Resources	28	20	0.71	2.25
Housing	69	184	2.67	8.38
Public Health Shared	12	1	0.08	3.17
Public Health Local	8	0	0	0.88
Department Totals (Q4)	402	962	2.39	
Totals (15/16)	402	4,106		10.21

Sickness – comparator data	All employees, average days sickness absence per employee		
Bracknell Forest Council 14/15	5.2 days		
All local government employers 2014	7.9 days		
All South East Employers 2014	N/A		

(Source: Chartered Institute of Personnel and Development Absence Management survey 2014)

N.B. 20 working days or more is classed as Long Term Sick.

# **Comments:**

# Older People and Long Term Conditions

There were 5 cases of Long Term Sickness. Out of these cases, 3 returned to work and 2 people have left Bracknell Forest Council. The 3 remaining cases are being monitored by Occupational Health.

# Adults & Joint Commissioning

There were 2 cases of Long Term Sickness. One has left Bracknell Forest Council and the other is still to return.

# Housing

There were 2 cases of Long Term Sickness during quarter 4. One has returned the other is still on Long Term Sickness.

# **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 2015-16. This contains 54 actions detailed actions in support of 6 Medium Term Objectives. Annex A provides detailed information on progress against each of these actions. Overall 47 actions were completed at

the end of the quarter (B), while 1 action was on schedule (Q) and 1 action was delayed (R). 5 Actions were not required (R).

# The delayed action is:

Ref	Action	Status	Progress
6.11.1	Ensure electronic batch matching on the NHS number is completed for a person's social care record	R	BFC have now achieved Information Governance Statement of Compliance (IGSOC) compliancy. Therefore the network change request to configure the connection required for the PDS element (real-time link to populate NHS numbers into LAS) has been resubmitted to Vodafone.
			The incompatibility issue between the HSCIC website and the secure government Public Service Network implemented at BFC has been resolved. Corporate ICT have installed the Demographics Batch Service(DBS) software from HSCIC, to provide ability to verify NHS numbers batch uploaded from LAS. However one of the DBS software components is not compatible with BFC network policy. This issue is currently being investigated by Corporate ICT.

# The 5 actions that are not required are:

Ref	Action	Status	Progress
4.1.9	Extend the principles of the Symbol project to identify and develop further links across services for vulnerable adults who are also parents	(8)	There has been a change in direction for this action and more links and work in practice have been undertaken with all elements of Children's Social Care, including education.
4.3.4	Work with Thames Valley Housing to		Progress with the scheme has been
	finalise plans for a residential		postponed pending work on design

Ref	Action	Status	Progress
	development to underpin the modernisation of the Youth Service programme to develop a new Town Centre Youth hub.	NA	and viability.
7.5.1	Undertake a review of the operational services supporting Clement House extra care scheme	N.	DMT decided to extend the contract for a further 12 months to enable a clearer picture to emerge regarding the care and support necessary in Clements House.
6.10.3	Work with the Acute Trust and review the out of hours intermediate care services so that delays for people in hospital awaiting social care are minimised.	<b>(2)</b>	This action is now pending future discussions to link in with the results of the Emergency Duty Services review.
11.1.7	Introduce arrangements to record care accounts so that the Council can track self-funder progress towards the care cap of £72,000	NA	The cap on care costs has now been deferred until 2020. As such this action is no longer required.

# **Section 6: Money**

# **Revenue Budget**

The forecast is an underspend of £0.5 million as at month 11. This is an improvement in the position since the previous quarter. Some of the larger movements include:

- In Learning Disabilities there has been a reduction in forecast expenditure £288k. This has included the award of a significant amount of Continuing Healthcare funding (£120k) and a reduction in the forecast cost of care packages (£82k), with the cost of some new packages of care being less than had been expected. The balance generally relates to budgets that were being held in anticipation of costs that are now not expected to materialise during the financial year.
- In Physical Support there has been a favourable movement of 193k. The primary reason for this is Winter Pressure funding received from the NHS.
- In Director there has been a favourable movement of £84k. This includes reductions in grants and donations (£37k) and a recharge for support provided to the Berkshire Public Health shared team (£31k). There is also a forecast saving on the training budget (£16k).

# **Capital Budget**

Capital expenditure at the end of month 11 is £3.7 million against a budget of £5.3 million. The department is likely to request a carry forward of the underspend. Taking this into account, the Department is likely to be requesting a capital budget roll forward to the next financial year of £1.2 million.

# **Section 7: Forward Look**

# **ADULT SOCIAL CARE**

### **Service Wide**

#### Carers

The new carers' contract has been awarded to SIGNAL. Regular monitoring meetings will be held to ensure that services are being robustly delivered to support carers with signposting, advice, information and the development of community groups.

# **Older People & Long Term Conditions**

# **Community Team for Older People & Long Term Conditions**

The new team structure is operational and there will be a team building event in May which is to build commitment to a shared vision and a shared purpose. The closure of Heathlands will take place on Friday 29<sup>th</sup> April and people will continue to be monitored in their new placements.

# **Drug & Alcohol Action Team**

There has still been no decision with regards to the new services. During quarter 1 a report will be prepared for DMT detailing the options in respect of moving forward in terms of the service delivery model.

# **Emergency Duty Services**

The team will continue to deliver the service for adult and children services for Berkshire to the old specification until such time an agreement is reached to deliver to the new model and specification. The model is to be agreed by 30<sup>th</sup> June.

# **Adults & Joint Commissioning**

# **Learning Disabilities and Autistic Spectrum Disorder**

The Learning Disability and Autistic Spectrum Disorder teams will continue to focus on individual outcomes. Elevate and Breakthrough will work in partnership to offer advanced employment opportunity services for adults of all ages.

# **Joint Commissioning**

The draft assurance ratings for the Better Care Fund planning template will be provided on 6 April by NHS England and the final assurance ratings will be confirmed by 13 May 2016.

A consultant with specific expertise in Falls and Care Homes who has been commissioned through Public Health will carry out a pilot and the work of the Prevention and Self-Care programme will continue "to improve health and reduce the need for unplanned care" with ongoing public promotion campaigns. The Carers need research project will be completed within Q1 2016-17.

#### Mental Health & Dementia

A new Dementia Action Alliance co-ordinator who has been appointed will continue to promote the Dementia Action Alliance within Bracknell Forest and aim to recruit new members. An evaluation of local day care services has been conducted and will be presented at the Dementia Partnership Board to discuss the outcome and identify any necessary actions.

# Safeguarding

The updated 'Berkshire Multi-Agency Adult Safeguarding Policy and Procedures' have been launched by the Pan Berkshire Multi-agency Safeguarding leads; these will enable better safeguarding of adults at risk of abuse throughout Berkshire and will encourage the continuous development of best practice in adult safeguarding.

Work has been completed on the LAS safeguarding module to ensure that it is Care Act compliant and meets the requirements for the Safeguarding Adults Collection data.

#### Performance & Resources

# IT

The team are working with Corporate IT to progress the NHS spine connection for the electronic matching of the NHS number. See update on action 6.11.1 for further details on this.

#### HR

Work on the re-provision of services at Heathlands will continue until the end of April 2016 when the unit closes. HR assistance is being provided to employees for redeployment and/or redundancy. Work will continue with management to assist with meeting any other HR issues that arise due to the Council's need to make savings.

# **Business Intelligence**

The team will begin the final preparations for submission of the Adult Social Care Annual Returns which are due in at the end of May. It is expected that some other tasks will be reprioritised to ensure that this goes smoothly.

# **Finance**

In the first quarter of 2016 -17, the budget will be re-profiled to take into account items that were not known at budget build, such as social care provider uplifts, Public Health grant and the Better Care Fund plan. In addition, the re-profiling will be required to take account of the new management structure in Older People and Long Term Conditions.

#### **PUBLIC HEALTH**

In Quarter 1 the public health will focus on three key activities: Procurement, Health Improvement through the Year of Self Care Programme and Needs & Asset Analysis for the wider council.

Procurement activities in Q1 will focus primarily on commissioning Health Visitor Services. These services provide support to mothers of children from birth for up to 4 years. Local authorities took over responsibility for Health Visitor Services in Oct 2015 and the contract represents our single largest investment. A new service will be in place by 1<sup>st</sup> January Quarterly Service Report – Adult Social Care, Health & Housing – 2015/16 Quarter 4

based largely on the existing service specification (which consultation and outcome data indicate is meeting need well).

The Year of Self Care themes in quarter 1 will include physical activity and carer support. To date, the programme has surpassed all expectations in relation to the level of engagement from residents, organisations and businesses. The Year of Self Care will move to a new, dedicated website during Quarter 1 in order to better support the growth of the programme.

Finally, the Public Health team will compile a council wide Needs & Asset Analysis that aims to collate information on how well current services (council run or otherwise) are meeting demand. Based on information in the JSNA, the Public Health Survey, the Residents Survey and numerous other information sources, this analysis will provide a focused and in depth guide to how things may be done differently in certain areas to better meet need or increase cost effectiveness.

# **HOUSING**

# **Housing Strategy and Options**

The tender process to procure housing related support for older people did not deliver a viable provider. In the short term welfare and housing caseworkers will be recruited on fixed term contracts to provide housing related support to older people whilst the approach and requirements of service are reviewed.

The service will arrange the letting of the fifteen properties purchased by Downshire Homes. In addition five Downshire Homes properties will be leased to Advance housing association to provide accommodation for people with learning disabilities.

A report will be presented to the Executive at the end of the quarter to revise the council's allocations policy. Subject to consultation the proposals are to increase residency requirements from one year to four years, enable families where children are taken into care to remain on the housing register, and formalise approaches to applications to move for work requirements and also allocations from members and ex- members of the armed forces.

The draft housing strategy will be considered prior to consultation

#### **Welfare Service**

The service will undertake the work to make the subsidy claim for housing benefit for 2015/16. The claim is expected to be in the region of £33 million.

There will be additional work to provide advice to customers affected by welfare reform changes. In addition the Council's website will need to be revised to reflect the changes.

# **Forestcare**

As reported previously, Forestcare is changing the direction of the service it offers from call handling to emergency personal care and response. Staff have been consulted on changes in their job descriptions so that they will provide emergency personal care. Following receipt of funding from the Better Care Fund, a registered manager has been recruited and during the quarter they led on work so that Forest care can be registered with the Care Quality Commission to provide emergency personal care to customers where a response service is provided.

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

MTO 4: Support our ye	ounger r	esider	nts to	maximise their potential
Sub-Action	Due Date			Comments
	-		-	intervention and support
4.1.9 Extend the principles of the Symbol project to identify and develop further links across services for vulnerable adults who are also parents	31/03/2016			There has been a change in direction for this action and more links and work in practice have been undertaken with all elements of Children's Social Care, including education.
•	s for you	ng peo	ple in o	our youth clubs and community
4.3.4 Work with Thames Valley Housing to finalise plans for a residential development to	31/03/2016	ASCHH	NA NA	Progress with the scheme has been postponed pending work on design and viability.
	and youn	g peop	le are i	nealth, safety and well being identified and are included in appropriate
4.7.3 Enhance the emotional health and wellbeing of children and young people at tier 2 in partnership with schools and other providers.				Action complete. Feedback from the service remains excellent and uptake continues to grow. A concurrent drop in referrals to secondary care CAMHS has been observed.
MTO 6: Support Oppo	rtunities	for He	ealth a	nd Wellbeing
Sub-Action	Due Date	Owner	Status	Comments
6.2 Support the Health ar involved in delivering he		_		<u> </u>
6.2.1 Implement the review of the Health & Wellbeing Board	31/03/2016			Action complete. The Stakeholder Forum is in place. There are 2 projects ongoing which are Child and Adolescent Mental Health Services and the development of Primary Care in the borough.
6.2.2 Increase liaison with NHS England to further develop GP and primary care services in the borough	31/03/2016	ASCHH	В	Action complete. Work for 2015-16 is complete although the action is ongoing for 2016-17 since NHS England are not able to resource this at present. Liaison will continue into the new financial year.
6.2.4 Work with partners to improve Child and Adolescent Mental Health Services (CAMHS) provision	31/03/2016			Action complete. Agreed elements of the transformation plan are being delivered which include the East Berks Anti-stigma campaign, focus groups, parents pack, Xenzone sessions and counselling service recruitment.
6.3 Continue to support t	ne devel	opment	t of a lo	ocal Healthwatch to provide

local patients with a voice								
6.3.1 Conduct regular reviews against the agreed contractual outcomes for local Healthwatch	31/03/2016			Action complete. Monitoring continues and the reports are available on the website.				
	6.8 Support health and wellbeing through Public Health							
6.8.1 Conduct a comprehensive programme aimed at improving self-care across the population, including development of a web-based self-care guide and a new programme for those with prediabetes	31/03/2016	ASCHH	В	Action complete. The Mental Health (Feb) and Healthy Ageing (Mar) campaigns included a number of initiatives with high engagement from residents. The Feb campaign has been cited as an example of national best practice by the LGA.				
6.8.2 Maximise the uptake of key health improvement programmes across the population, including health checks, smoking cessation and weight management	31/03/2016	ASCHH	В	Action complete. All procurement exercises have been completed on time. Uptake and results of services remain above target.				
6.8.3 Deliver a range of programmes aimed at improving well-being among local older people, including a Community Falls Prevention Programme, a Strength & Balance Programme and Befriending Services	31/03/2016	ASCHH	В	Action complete. Uptake and satisfaction remain high. The service in care homes is now underway. Procurement of a new contract from falls prevention has been completed on schedule.				
6.8.4 Carry out specific and collaborative assessments of the services including a full needs assessment in relation to drugs and alcohol	31/03/2016	ASCHH	В	Action complete. Public Health have completed an analysis for the CCG of outcome and benchmarking data in order to inform their commissioning plans for 2016/17 onwards.				
6.9 Support people who appropriate interventions		rugs ar	nd/or a	Icohol to recover by providing				
6.9.1 Provide drug and alcohol misuse awareness raising to new employees and existing staff	31/03/2016	ASCHH	В	Action complete. 3 training sessions were delivered in quarter 4.				
6.9.3 Consider the findings from the DAAT Young People's Service Review to plan future service provision	31/03/2016	ASCHH	В	This action is now completed ahead of schedule.				
6.9.4 Consider the recommendations arising from the Children Young People & Learning Overview & Scrutiny Panel (O&S) working group	31/03/2016	ASCHH	В	This action is now completed ahead of schedule.				
6.9.5 Undertake a cost comparison analysis of the current DAAT service	31/03/2016	ASCHH	В	Action has been completed ahead of schedule.				
6.9.6 Monitor the number of older people being referred to treatment for alcohol misuse	31/03/2016	ASCHH	B	A total of 28 people aged 55 and over entered treatment during 2015/15 compared to 37 in the previous year. However as the total number of people in treatment was lower in 2015/16 than the previous year (405 people versus 443 people), the actual percentage of				

				older people in treatment rose from 8.3% to 9.4% of the total treatment
6.10 Support the Brackneimproving local health se				mmissioning Group to focus on
6.10.1 Work with the CCG to implement the Better Care Fund Plan	31/03/2016			Action complete: The submission for the 2016 Better Care Fund planning template was completed and submitted to NHS England. The draft assurance ratings will be provided on 6 April by NHS England and the final assurance ratings will be confirmed by 13 May 2016.  As part of the existing 2015/16 BCF process, the quarterly return to NHS England was completed by the end of February 2016 for Quarter 3.  8 of the 9 Better Care Fund schemes are now operational. 1 outstanding action is the completion of the Respiratory Failure Scheme Integrated Respiratory Service.
6.10.2 Work in partnership with the CCG and Bracknell Healthcare Foundation Trust (BHFT) to build on an integrated service for adults with long term conditions	31/03/2016	ASCHH	В	Action is now complete and the service is in place.
6.10.3 Work with the Acute Trust and review the out of hours intermediate care services so that delays for people in hospital awaiting social care are minimised	31/03/2016	ASCHH	NA NA	This action is now pending future discussions to link in with the results of the Emergency Duty Services review. Feedback is expected from Local Authorities by 30 <sup>th</sup> June and the options appraisal report is being developed for the Better Care Fund.
6.10.4 Further develop the integrated care teams with the CCG and BHFT to support people with complex care needs	31/03/2016			Action complete. The in-house service went live on 18 January and includes staff from Bracknell Healthare Foundation Trust.
6.11 Ensure that IT syste people's lives and support				eloped to improve the quality of ess decisions
6.11.1 Ensure electronic batch matching on the NHS number is completed for a person's social care record	31/03/2016	ASCHH	®	BFC have now achieved Information Governance Statement of Compliance (IGSOC) compliancy. Therefore the network change request to configure the connection required for the PDS element (real-time link to populate NHS numbers into LAS) has been resubmitted to Vodafone.
				The incompatibility issue between the HSCIC website and the secure government Public Service Network

				implemented at BFC has been resolved. Corporate ICT have installed the Demographics Batch Service(DBS) software from HSCIC, to provide ability to verify NHS numbers batch uploaded from LAS. However one of the DBS software components is not compatible with BFC network policy. This issue is currently being investigated by Corporate ICT.
MTO 7: Support our o	der and	vulne	rable ı	residents
Sub-Action	Due Date	Owner	Status	Comments
				measures to ensure residents e longer in their own homes
7.1.1 Review the range and nature of support services provided by Forestcare for vulnerable people	31/03/2016	ASCHH	В	Action completed ahead of schedule. A new range of services has been introduced.
7.1.2 Refresh the Helping you to stay independent Guide	31/03/2016	ASCHH	В	Action complete. The "Helping You Stay Independent Guide" for 2016/17 will be published in April 2016.
7.1.3 Review implemented winter pressures plans	31/08/2015	ASCHH	В	Action complete. Following review of 2014/15 plans, the plans for 2015/16 have been developed to respond to the anticipated increase in demand through winter.
7.1.4 Deliver a self-care programme raising awareness of self-care and self-management of long-term conditions and managing the use of A&E services	31/03/2016	ASCHH	В	Action complete. The Choose Better campaign continues to progress. The Prevention and Self-Care Steering Group decided in January that promotion of this campaign will include a leaflet and fridge magnet mailing to every household in Bracknell Forest.
7.4 Continue to modernis delivery of that support	se suppor	t and i	nclude	new ways of enabling the
7.4.1 Introduce the Spectrum Star to people supported by the Autistic Spectrum Disorder (ASD) team and the agencies who support them	31/03/2016	ASCHH	В	Action completed ahead of deadline.
7.4.2 Introduce a new review package for people with ASD and Learning Disabilities (LD) that incorporates an updated Direct Payments review and Service review	31/03/2016	ASCHH	В	Action completed ahead of schedule.
7.4.3 Introduce the Life Star to the people supported by the LD team and the agencies that support them	31/03/2016	ASCHH	В	Action completed ahead of deadline.
7.4.4 Develop and publish the Sensory Needs Strategy	31/03/2016	ASCHH	В	Action complete. Strategy now approved by the Executive. Publication will be in April 2016.

7.4.5 Refresh the Advocacy strategy and commissioned services subject to evaluation of the impact of the Care Act	31/03/2016	ASCHH	В	Action complete. The refresh of the Advocacy Joint Commissioning Strategy 2016-2021 has been completed and the new strategy was approved by the Executive on Tuesday 8 March 2016.
7.4.6 Aim to promote Healthy Lifestyles for people including reducing incidents of smoking amongst people supported by the Community Mental Health Team (CMHT)	31/03/2016	ASCHH	В	Action complete. The number of people who smoke and have been offered a referral to smoking cessation services has now risen to 164.
7.4.7 Establish a Dementia Action Alliance to promote dementia friendly communities	31/03/2016			Action complete. The Dementia Action Alliance Co-ordinator will start on 5th April 2016.
				tion for older people which will
enable more people to be	e support	ed outs	side re	sidential and nursing care
7.5.1 Undertake a review of the operational services supporting Clement House extra care scheme	31/03/2016	ASCHH	NA)	DMT decided to extend the contract for a further 12 months to enable a clearer picture to emerge regarding the care and support necessary in Clements House which could be no change or the use of Forestcare Response Service.
7.6 With partners develo	o a cultur	e that o	does n	ot tolerate abuse, and in which
older and more vulnerab				The state of the s
7.6.1 Embed statutory safeguarding requirements within operational practice	31/03/2016			Action completed. However, changes to the Care Act Statutory guidance will entail some further development.
7.6.2 Lead the Bracknell Forest Safeguarding Adults Partnership Boards development plan taking into account the boards statutory footing	31/03/2016	ASCHH	В	Action complete. Work has been completed on the LAS Safeguarding module to ensure that it is Care Act compliant and meets the requirements for the Safeguarding Adults Collection data. Awareness sessions for staff have been held.
7.7 Target financial supp	ort to vul	nerable	house	eholds
7.7.1 Review the Councils support to households in light of the claimant commitment / universal credit implementation	31/03/2016			Action complete. New partnership agreement with DWP set up for 2016-17.
7.7.2 Retender supporting people contracts to provide housing related support to vulnerable people	31/03/2016	ASCHH	В	Action complete. Retendering of contact did not deliver a new service provider and so in the short term the service will be provided by the Council pending a decision on long term delivery model.
7.7.3 Review Social Fund and Discretionary Housing Payment policy to target support to the most vulnerable people	31/03/2016	ASCHH	В	Scheme has been amended via Executive Member decision.
7.7.4 Review local council tax benefit scheme to ensure it provides an affordable scheme for the Council and customers	31/03/2016	ASCHH	В	Action complete. Scheme has been amended as part of introduction of new scheme.
7.7.5 Continue redesign of the housing and benefit service to maximise household income and independence	31/03/2016	ASCHH	В	Action complete. The service redesign is complete.
policy to target support to the most vulnerable people 7.7.4 Review local council tax benefit scheme to ensure it provides an affordable scheme for the Council and customers 7.7.5 Continue redesign of the housing and benefit service to maximise household income	31/03/2016	ASCHH	В	Executive Member decision.  Action complete. Scheme has beer amended as part of introduction of scheme.  Action complete. The service rede

7.8 Support vulnerable peservices	eople thre	ough c	ontinue	ed provision of out of hours
7.8.1 Consult on the Emergency Duty Service (EDS) Joint Review	31/03/2016	ASCHH	В	Action complete. Berkshire directors met on 6th April and have agreed to give a formal response on June 30th 2016 as to whether they wish to continue under the current model or the proposed one.
MTO 10: Encourage th	e provis	ion of	a ran	ge of appropriate housing
Sub-Action	Due Date	Owner	Status	Comments
10.1 Ensure a supply of a	affordable	home	S	
10.1.10 Produce Homeless Strategy	31/03/2016	ASCHH	В	Action complete.
10.1.11 Secure additional temporary accommodation for homeless households	31/03/2016	ASCHH	В	Action complete.
10.1.14 Support Housing and Planning for the off-site provision of affordable homes from the TRL site in Bracknell Town Centre	31/05/2015		<b>6</b>	Meetings between TVHA and Planning Department are ongoing and the title issue is being resolved.
10.1.15 Investigate establishing a Local Housing Company	31/03/2016	ASCHH	В	Action complete.
10.1.8 Review Disabled Facilities Grant process in order to meet the requirements of the Better Care Fund	31/03/2016	ASCHH	В	Action complete. This continues to be monitored through Better Care Fund steering group.
10.1.9 Produce Housing Strategy	31/03/2016	ASCHH	В	Action complete. Draft of housing strategy available.
MTO 11: Work with ou	r comm	unities	and p	partners to be efficient,
open, transparent and	easy to	acces	s and	to deliver value for money
Sub-Action	Due Date	Owner	Status	Comments
	resource	es effic	iently a	and ICT and other technologies
to drive down costs  11.1.4 Ensure IT systems are ready for any statutory and legislative changes	31/03/2016	ASCHH	В	Action complete. Testing completed and system upgraded 24th March ready for the statutory return report generation.
11.1.7 Introduce arrangements to record care accounts so that the Council can track self-funder progress towards the care cap of £72,000	31/03/2016			The cap on care costs has now been deferred until 2020. As such this action is no longer required.
		nbers h	ave the	e opportunities to acquire the
skills and knowledge the	y need		1	Action complete. The revised structure
11.2.8 Deliver a workforce that is fit for purpose under the new legislation of the Care Act 2014	31/03/2016	ASCHH	В	Action complete. The revised structure for ASC to support personalised ways of working was implemented on 18 January 2016.
11.7 Work with partners a	and enga	ge with	local	communities in shaping

services				
11.7.10 Work with partners to implement Carers Commissioning Strategy, ensuring impact of Care Act is incorporated into the delivery plan	31/03/2016	ASCHH	В	Action complete. The Action plan was agreed with the lead agencies identified at the Carers Commissioning Strategy on the 4th April 2016.
11.7.2 Continue to support the voluntary sector through the provision of core grants	31/03/2016	ASCHH	В	Action completed ahead of schedule. The completed grants have been completed and are being monitored.
11.7.7 Work in partnership with the Elevate Project through Breakthrough Employment Service in order to support young people with additional needs into employment	31/03/2016	ASCHH	В	Action complete. Elevate and Breakthrough will work in partnership to offer advanced employment opportunity services for adults of all ages.
11.7.9 Contribute to the development of the outcomes set by the three Urgent Care Boards and support the delivery of services to achieve them	31/03/2016	ASCHH	В	Action complete. The services developed to support the winter plans ceased on 31 March 2016.

# **Annex B: Financial Information**

ADULT SOCIAL CARE HEALTH	& HOUSING	BUDGET	MONITORI	NG - FEBR	<b>UARY 2016</b>	
	Original Cash Budget	Virements & Budget C/fwds	Current approved cash budget	Department's Projected Outturn	Variance Over / (Under) Spend	Movement This month
	£000	£000	£000	£000	£000	£000
Director	(118)	154	36	(332)	(368)	(84
	(118)	154	36	(332)		(84
Adults and Commissioning						
Mental Health	1,795	(3)	1,792	1,813	21	(6
Support with Memory Cognition	2,341	1,401	3,742	4,049	307	95
Learning Disability	13,117	(185)	12,932	12,074	(858)	(288
Specialist Strategy	243	8	251	344	93	0
Joint Commissioning	604	2	606	549	(57)	10
Internal Services	940		890	788	(102)	(74
	19,040	1,173	20,213	19,617	(596)	(263
Housing		_				
Housing Options	348	(20)	328	455	127	(14
Strategy & Enabling	270		222	188	(34)	0
Housing Management Services	(37)	(3)	(40)	(73)		0
Forestcare	15	3	18	89	71	0
Supporting People	991		1,024	994	(30)	0
Housing Benefits Payments	108	0	108	(98)	(206)	85
Housing Benefits Administration	471		543	656	113	0
Other	(48)	66	18	10	(8)	(3
	2,118	103	2,221	2,221	0	68
Older People and Long Term Conditions						
Physical Support	7,938	(1,147)	6,791	7,011	220	(193
Heathlands	1,131	(3)	1,128	1,303	175	36
Community Response and Reablement - Pooled Budget	1,903	(269)	1,634	1,623	(11)	(11
Emergency Duty Team	54	4	58	54	(4)	0
Drugs Action Team	4	· 1	5	5	0	0
Drago Action Tourn	11,030	(1,414)	9,616	9,996	380	(168
Performance and Resources						
Information Technology Team	278	0	278	289	11	(4
	103	• 0	103	77	(26)	7
Property Performance	210		211	182	(29)	0
Finance Team	554		556	451	(105)	(5
	190		191	178	(103)	(5
Human Resources Team	1,335	4	1,339	1,177	(162)	(7
Public Health						
Bracknell Forest Local Team	(19)	107	88	88	0	0
	(19)	107	88	88	0	0
TOTAL ASCHH	33,386	127	33,513	32,767	(746)	(454
Memorandum item: Devolved Staffing Budget			14,696	14,699	3	(6:
Non Cash Budgets						
Capital Charges	344	-18	326	326	0	0
IAS19 Adjustments	692	0	692	692	0	0
Recharges	2,794	0	2,794	2,794	0	0
	3,830	-18	3,812	3,812	0	0
		-10	3,012	3,012		

# **Capital Budget**

Cost Centre Description	Approved	Cash Budget	Expenditure	Estimated	Carry	(Under)/	Current Status
	Budget		to Date	Outturn		Over Spend	
					2016/17		
	£'000	£'000	£'000	£'000	£'000	£'000	
HOUSING							
Enabling more affordable housing	173.7	173.7	72.0	72.0	0.0	101.7	Santa Catalina (£72k) completed. £100k to be vired
							to Temp to Perm
Help to buy a home (cash incentive scheme)	300.4	300.4	227.0	227.0	73.4	0.0	Four cases complete
Enabling more affordable homes (temp to perm)	1,699.6	1,699.6	1,764.3	1,767.3	34.0	-101.7	Six properties purchased to date.
Mortgages for low cost home ownership	218.8	218.8	0.0	0.0	218.8	0.0	Budget to be carried forward.
properties							
BFC My Home Buy	452.7	452.7	210.7	210.7	242.0	0.0	One property has been completed.
Amber House	500.0	500.0	500.0	500.0	0.0		Complete.
Choice based letting system	30.0	30.0	30.0	30.0	0.0	0.0	
Tenterton Guest House	850.0	850.0	834.5	835.0	15.0	0.0	
TOTAL HOUSING	4,225.2	4,225.2	3,638.5	3,642.0	583.2	-0.0	
Percentages			86.1%	86.2%		0.0%	
ADULT SOCIAL CARE							
Care housing grant	15.4	15.4	0.0	0.0		0.0	
Community capacity grant	351.7	351.7	45.8	45.8	305.9	0.0	£10k agreed to fund Forestcare, up to £50k for
							equipment if required
Older person accommodation strategy	400.0	400.0	10.5	400.0	0.0		Project unlikely to proceed
Improving information for social care	39.2	39.2	0.0	0.0	39.2	0.0	Integrating health and social care IT - budget to be carried forward.
IT systems replacement	258.6	258.6	50.2	50.2	208.4	0.0	Budget held for potential costs of interoperability.
TOTAL ADULT SOCIAL CARE	1,064.9	1,064.9	106.5	496.0	568.9	0.0	
Percentages			10.0%	46.6%		0.0%	
TOTAL CAPITAL PROGRAMME	5,290.1	5,290.1	3,745.0	4,138.0	1,152.1	-0.0	]
Percentages			70.8%	78.2%		0.0%	