

TO: THE EXECUTIVE
18 OCTOBER 2011

**MODERNISATION OLDER PEOPLE'S SERVICES
Director of Adult Social Care and Health**

1 PURPOSE OF REPORT

- 1.1 The purpose of this report is to seek the Executive's approval to a wide range of measures intended to improve support for older people in the Borough.
- 1.2 The recommendations are wide ranging and many of them involve significant consultation at this stage, whether with people currently receiving support or staff involved in delivery or in some cases, both. In relation to recommendations 2.1 and 2.2, a report will be brought back to the Executive for a decision once consultation is concluded.
- 1.3 The Executive are reminded that even if all of the recommendations are accepted after consultation, people will still continue to receive a service. The report is not about cutting the level of support to older people, but about providing it in different ways as well as seeking more efficient and effective working within the department.
- 1.4 This report is structured with a short summary supporting each recommendation in Section 3, Reasons for Recommendations, with further detail contained in separate Annexes to this report. Supporting Information will include sections on Finance, Human Resources as well as the national overview of policy direction.

2 RECOMMENDATIONS

The Executive is asked to agree to:-

- 2.1 **consult on the future of 'In House' Home Support for people with long term conditions with a view to the independent sector providing this support;**
- 2.2 **consult on the future of Ladybank Older Persons Home with a view to re-providing long term care;**
- 2.3 **establish ways in which (working with partners) residential intermediate care is enhanced and in time relocated to more suitable accommodation;**
- 2.4 **consult with staff in Community Response and Reablement on proposals to enhance capacity in terms of new rosters and use of technology;**
- 2.5 **locate the Home Care Dementia Team at Heathlands Day Centre and consult on new managerial arrangements;**
- 2.6 **work with the Independent Sector on the introduction of electronic monitoring for domiciliary providers;**
- 2.7 **work with Wokingham Borough Council with a view to evaluating opportunities to provide the Sensory Needs Service from within Bracknell Forest Council Community Teams;**

2.8 develop proposals to enhance Community Response and Reablement and Falls Service via funding from the PCT; and

2.9 develop appropriate housing options with partners to ensure that the Older Persons Accommodation Strategy is implemented providing a range of accommodation across the Borough.

3 REASONS FOR RECOMMENDATIONS

3.1 Consult on the future of 'In House' Home Support for people with long term conditions with a view to the independent sector providing this support

3.1.1 The current service was established following a restructure of Home Care in 2007. The service has coped with changing demand as a consequence of several factors:-

- demand for directly provided care is falling as a consequence of Personalisation
- service is costly in comparison with that commissioned by the Independent Sector
- Independent Sector are more able to meet the support needs through domiciliary care

3.1.2 The service was set up in order to work with people with complex needs until their condition stabilises and then transfer to agencies. This has not always happened and there are 9 people who the team supports on an ongoing basis. The additional hours are spent with people who receive temporary support.

3.1.3 If the proposal is accepted, it would result in 187 hours per week required to be commissioned from the independent sector.

3.1.4 Annexe 1 to the report contains further detailed information to support this recommendation.

3.1.5 Once the consultation is concluded, a further report detailing the proposed way forward will be brought to the Executive for approval.

3.2 Consult on the future of Ladybank Older Persons Home with a view to re-providing long term care

3.2.1 Ladybank was originally built in the mid 1970s as a purpose built home for older people, situated in the Birch Hill area of the Borough. Since this time, various changes have been made and it is currently registered for 42 places with the Care Quality Commission (CQC). The home has two distinct services operating from the premises. The first is Ladybank and that comprises of 23 places and the second is the Bridgewell Centre, which has 19 places. This recommendation only affects Ladybank.

3.2.2 Of the 42 places, 19 are designated for use as Intermediate Care, called the Bridgewell Centre, which together with Community Intermediate Care, is known as Community Response and Reablement, and is delivered through joint funding with the PCT via a Section 75 agreement. This service is not affected by this recommendation but by recommendation 2.3.

- 3.2.3 Whilst Ladybank was rated as 2 star by CQC (ratings now discontinued), the home is coming to the end of its 'useful' life environmentally and physically. The home was built at a time when the spacial standards were different and newly registered services have larger rooms and en-suite toilets. There is the real prospect of major capital expenditure to replace the boilers amongst other things, in the very near future. Costs associated with this would exceed £0.6m.
- 3.2.4 The department has been increasingly successful in supporting people in their own homes. Initiatives, such as Home First and Enhanced Intermediate Care, have resulted in a drop in the number of people being admitted into long term residential care throughout the Borough. Ladybank has been operating with a number of vacant beds since mid 2010 and as at 1 October 2011, the home was operating at less than 50% occupancy with only 11 of the 23 places are occupied. Residents are being accommodated in two of the three units.
- 3.2.5 The proposed developments of Extra Care Sheltered Housing, which was approved by the Executive in September, will further reduce the demand for places. There is capacity in the private sector to accommodate both current and future residents if the proposal was subsequently agreed following consultation.
- 3.2.6 It is important to recognise that this proposal is not as a consequence of the care or support being offered by the staff within the home, far from it. However, it is recognised how sensitive the proposal itself is and the impact on the people who live at Ladybank and their relatives is not underestimated.
- 3.2.7 Subject to the agreement of the proposal to consult on the future of Ladybank, a named member of staff within the department will act as a focal point for residents and their families to discuss options and future plans during the consultation. A separate consultation arrangement will be in place for staff.
- 3.2.8 Annexe 2 to the report contains further detailed information to support this recommendation.
- 3.2.9 Once the consultation is concluded, a further report detailing the proposed way forward will be brought to the Executive for approval.
- 3.3 Establish ways in which (working with partners) residential intermediate care is enhanced and in time relocated to more suitable accommodation
- 3.3.1 Following on from Section 3.2, it follows that there will be a need to relocate the residential intermediate care service – The Bridgewell Centre at some point in the future. The service is different, in that people who are supported are using the service for a time limited period (usually up to 6 weeks), before, in the main, returning home.
- 3.3.2 The service is highly regarded by both the PCT and the Bracknell Forest and Ascot Clinical Commissioning Group and is one in which there is the potential for further investment by partners.
- 3.3.3 In the light of the proposal at 3.2, this recommendation seeks permission to work with partners to review the accommodation required and how it may be established in the future.
- 3.3.4 Once this work is complete, a further report will be prepared for the Executive in order to determine the way forward.

3.4 Consult with staff in Community Response and Reablement on proposals to enhance capacity in terms of new rosters and use of technology

- 3.4.1 This recommendation recognises the limitation of the current arrangements and proposes consultation with staff on new ways of working to enhance the capacity of the service within the existing 'pooled' budget with the PCT.
- 3.4.2 This element of Intermediate Care is directly delivered by 26 Intermediate Care Support Workers. They provide a rehabilitation programme of up to 6 weeks that enable people to regain their daily living skills and confidence. As a consequence, this helps the individual maintain their independence, health and well being and supports them to remain safely and securely in their own home in many cases without ongoing support from the department.
- 3.4.3 Within the service, the frequency, duration and timings of visits by the Intermediate Care Support Workers can alter as people recover and the support required is varied. These changes are a fundamental part of the assessment process.
- 3.4.4 The current Intermediate Care Service deploys its workforce using a static roster that requires manual inputs of all the changes that take place. Annual leave and sickness is manually recorded. Paper timesheets are completed by Community Support staff and these are checked by the Care-coordinators. Currently producing and providing management information is fragmented, time consuming, and there are concerns regarding accuracy. Work is currently underway on developing the IAS system to run reports on performance of all elements of this service. Lone working is dealt with by a "buddy" system which has been introduced as the service does not utilise Forestcare.
- 3.4.5 The roster patterns need to change to enable the same service to be available each day of the week. At the current time, there is a reduced service at the weekend, which can limit accessibility and lengthens the time people are supported by the service. The proposed roster patterns will address the availability of staff throughout the week enabling the service to increase its capacity and shorten length of time people need support.
- 3.4.6 It is intended to supplement this by utilising technology to underpin service improvements. An electronic monitoring system can improve the co ordination and operational efficiency of the service through managing the availability, allocation and location of the Intermediate Care Support Workers as they work on their shift patterns. In increasing the flexibility in the utilisation of productive time this will evidence improved value for money.
- 3.4.7 The system captures real time activity and this is the key to service improvement and provides evidence that the service is delivering timely and quality interventions outcomes around independence, choice and quality of life. The system also provides for an improved lone working system which supports staff safety
- 3.4.8 If approved, a period of statutory consultation will begin with staff and the department will consider a date for implementation as it may be necessary to procure a system via tender.
- 3.4.9 Annexe 3 to the report contains further detailed information to support this recommendation.

3.5 Locate the Home Care Dementia Team at Heathlands Day Centre and consult on new managerial arrangements

3.5.1 With the proposal to cease providing the Long Term Conditions Community Support Team (Section 3.1), there is the need to further consider the management of Home Care Dementia Team and its location.

3.5.2 With the increased capacity brought about by recent improvements to Heathlands Day Centre and new Carer's Drop-In Scheme, there is now the opportunity to relocate the Community Support and Wellbeing Dementia Team within offices at the Day Centre. This will facilitate a fully integrated dementia provider service in one location. Along with providing an easily accessible service for people with memory problems and their carers.

3.5.3 This offers the opportunity for efficiencies through the use of a single Manager across three services, with each having a dedicated Assistant Manager responsible for day-to-day running of the services.

3.5.4 There is a further advantage in that any unallocated hours available within Home Care can be readily utilised by the other two services, thus enhancing provision and reducing reliance on agency carers.

3.5.5 Annexe 4 to the report contains further detailed information to support this recommendation.

3.6 Work with the Independent Sector on the introduction of electronic monitoring for domiciliary providers

3.6.1 This recommendation proposes working up an appropriate model of electronic monitoring which can be consulted on with Domiciliary Care Providers. A business case will be developed for approval.

3.6.2 An electronic monitoring system across Adult Social Care will effectively monitor and record, reliability, timeliness, consistency and flexibility of domiciliary care services being commissioned by Bracknell Forest. It will also ensure that service providers are accurately paid for the services they provide. There are benefits for providers around process cost reductions and a record of agency hours employees have actually worked.

3.6.3 In addition to this, there are significant benefits to the individual in the monitoring of support and accurate billing. As real time activity is captured, it assures that people either receive their full quota of care or pay only for that which is delivered. It would also mean that they are no longer expected to sign timesheets of Care Workers to verify duration of attendance, which can be seen as intimidating by some people. Electronic monitoring can also support people with a personal budget, again through transparency of care delivered.

3.6.4 For the Council, the benefit would be that it will pay for what is actually delivered and be certain that the care has been delivered in line with the support plans. It would support auditing and reduce a large number of queries and complaints. There would be independent performance management information in relation to all services provided and paid for by Adult Social Care. The streamlining of the invoicing system would remove the need for checking of invoices to be authorised, thereby supporting accurate and expedient payments to providers and speedier billing to service users. The business case will also look at potential savings.

- 3.6.5 There are a number of options for procurement and implementing electronic monitoring. If approved, these will be developed into a business case and options appraisal. It would need to be positioned within in the Transformation Agenda and be a partnership approach with providers, and through contractual procedures.
- 3.6.6 Annexe 5 to the report contains further detailed information to support this recommendation.
- 3.7 Work with Wokingham Borough Council with a view to evaluating opportunities to provide the Sensory Needs Service from within Bracknell Forest Council Community Teams
- 3.7.1 At Local Government Reorganisation, the Sensory Needs Service was hosted by Wokingham on behalf of all six unitary authorities. Over the last 3 years, two authorities have now decided to provide the service directly.
- 3.7.2 The service was transferred to Optalis, an independent trading company set up by Wokingham Borough Council as a wholly owned subsidiary.
- 3.7.3 The purpose of this recommendation is to look at whether it would be more cost effective to provide this service in house within our community team structure. This is consistent with our Sensory Needs Strategy and would require the development of an appropriate business case for approval.
- 3.7.4 If this recommendation is supported, it would offer an opportunity to consult with people experiencing sensory loss to shape future services to local need, as highlighted in the Independent Review of Berkshire Sensory Needs. Additionally, it could allow for better prevention and early intervention through local needs analysis, along with the opportunity to develop third- sector provision.
- 3.7.5 If this recommendation is supported, a detailed business case will be developed for a future Executive Member decision.
- 3.8 Develop proposals to enhance Community Response and Reablement and Falls Service via funding from the PCT
- 3.8.1 Following a pilot, the Community Response and Reablement Team have been commissioned to provide a 24/7 service with a two hour response time with the aim of preventing hospital admission, facilitating timely and appropriate hospital discharge – especially out of hours, and to provide end of life care for people who wish to die at home.
- 3.8.2 With the additional funding, the team now provide occupational therapy out of hours until 10.00 at night and all day at weekends. Following an assessment, people referred are offered community or residential based reablement, or equipment.
- 3.8.3 If a person is referred for end of life services, community support is provided immediately regardless of the time the person is referred. A typical care provision is four calls a day with two Support Workers.
- 3.8.4 To support this development, the team has been reorganised into a Crisis and Assessment Duty Team which includes all hospital Social Work and an Intermediate Care Team.

- 3.8.5 Further work is needed to ensure robust out of hours working including on call management support, increased capacity in both community and residential intermediate care services and strengthened assessment provision at the point of entry.
- 3.8.6 Successful completion of this work will result in a whole system approach to everybody who is in need of reablement services with timely and appropriate interventions.
- 3.8.7 There are potential benefits to the commissioning bodies in terms of reductions in acute admission, residential and nursing care and long term support.
- 3.8.8 Proposals will be developed to enhance the service if funding is available from the PCT.
- 3.9 Develop appropriate housing options with partners to ensure that the Older Persons Accommodation Strategy is implemented providing a range of accommodation across the Borough
- 3.9.1 The Council, following consultation, have developed an Older People's Accommodation Strategy. The Executive approved the disposal of land to enable extra care sheltered housing to be built on the Garth site. This recommendation supports the care component for that scheme.
- 3.9.2 Older people want a range of housing options across tenures and within both accommodation and non-accommodation based services and Extra Care Housing.
- 3.9.3 Older people want to remain in home ownership wherever possible and have access to the best available opportunities and options for securing and remaining safely in the home of their choice.
- 3.9.4 A Project Group has been established to take forward this exciting extra care development, chaired by the Director of Adult Social Care & Health. Having good housing based options is fundamental to the provision of Adult Social Care.

4 ALTERNATIVE OPTIONS CONSIDERED

- 4.1 In the current climate, doing nothing is not an option and will be costly for the Council.

5 SUPPORTING INFORMATION

Consultation Processes

- 5.1 The Council intends to follow the Cabinet Office's guidelines on consultation due to the proposed service changes. This means, in particular, those people who are affected by recommendation 2.1 and 2.2, subject to approval by the Executive, this would start after 18 October. A consultation plan is being drawn up and will consist of both written information and meetings with individuals affected.
- 5.2 Staff who may be affected by the internal management changes outlined in 2.3, 2.4 and 2.5 will be consulted in line with the Change Management Protocol. Subject to approval, this would commence after 18 October.

5.3 The table below summaries the consultations and the timetable thereafter.

Resident Consultation Time Periods

| | Consultation Starts | Consultation Ends | Result of Consultation |
|---------|---------------------|-------------------|------------------------------------|
| Rec 2.1 | 19 October 2011 | 18 January 2012 | Report to Executive |
| Rec 2.2 | 19 October 2011 | 18 January 2012 | Report to Executive |
| Rec 2.4 | 19 October 2011 | 30 November 2011 | Report to DMT/ Executive Member |
| Rec 2.5 | 19 October 2011 | 30 November 2011 | Report to DMT/ Executive Member |
| Rec 2.6 | 19 October 2011 | Ongoing | Report to Executive |
| Rec 2.7 | 19 October 2011 | Ongoing | Report to DMT/ Executive Member |

Staffing Implications

- 5.4 As a consequence of the modernisation of the services, there will be reductions in management, care posts. Due to the tight timescales, the staff consultation process will run concurrently with public consultation periods. A 13 week consultation period will be followed for service changes involving staff. Staffing changes will follow the Council's Organisational Change Management Protocol if recommendations are approved. A clear consultation programme will be planned to ensure all staff are engaged in the process and the Council's existing policies and procedures followed, and will include trade union representatives.
- 5.5 Staff are considered to be a valuable resource, and every effort will be made to endorse the Council's approach to avoid redundancies. Should redundancies be necessary the Council's policy on Redundancy Handling and Redeployment of staff will be followed subject to approval by Employment Committee.
- 5.6 The Council will comply with all appropriate employment legislation that relates to the rights of employees affected by organisation change in particular the Employment Rights Act 1996 and the Trade Union Reform and Employment Rights Act 1993 and the Collective Redundancies and Transfer of Undertakings (protection of Employment) (Amendment) Regulations 1995 and 1999.
- 5.7 If approved 3 separate consultation periods are envisaged namely; 13 week consultation period from 19th October 2011 – 13th January 2012 for staff who will be placed at risk of redundancy. A six week consultation period will commence on 19th October 2011 – 30th November 2011 for staff who will undertake a new working pattern (roster) and a 6 week consultation period from 19th October – 16th November 2011 for staff who will move location. Meetings will be scheduled with staff and the Trade Unions. Arrangements for discussion at the Local Joint Consultative Committee and Employment Sub Committee will be undertaken.
- 5.8 **In House Home Support**
- The time frame for staff consultation will be 13 weeks with a total of 19 staff affected. The process would commence on 19 October 2011 in conjunction with trade union representatives. Redeployment opportunities within the Council will be sought for all staff and the outcome of the consultation process will be reported to the Executive for a decision on the way forward.

5.9 **Ladybank**

In line with the public consultation period, the time frame for staff consultation will be 13 weeks with a total of 21 permanent staff affected and 9 relief staff being possible. The process subject to approval would commence on 19 October 2011 in conjunction with trade union representatives. Redeployment opportunities within the Council will be sought for all staff. The outcome of the consultation process will be reported to the Executive for a decision on the way forward.

5.10 **New rosters and use of technology**

Consultation with Intermediate Care Co ordinators Support Workers in Community Response and Reablement on new ways of working will commence on 19 October 2011. The new ways of working will include a change in roster patterns and the introduction of technology to underpin service improvements. A detailed staff information pack will be provided outlining the proposals and individual meetings with staff arranged. It is proposed that staff will commence the new roster on the same date.

Representations made during consultation will be given due consideration before any final decisions regarding roster changes are implemented. The current policy on Lone Working will be considered in conjunction with any changes. The outcome of the consultation process will be reported to the Executive Member for a decision.

5.11 **Locate the Home Care Dementia Team at Heathlands Day Centre**

The time frame regarding the proposal to relocate the Community Support & Wellbeing Dementia Team to the Heathlands Elderly Persons Home is 4 weeks commencing on 19th October 2011. Fifteen staff would be affected. A re-evaluation of the existing Registered Manager's post would be undertaken as part of this process of change.

Trade Union representatives will be invited to attend individual staff meetings and the outcome of the consultation process will be reported to the Executive Member for a decision.

Financial Analysis

- 5.12 There are significant financial savings arising out of this set of proposals. However, the service being provided to people is either being maintained at its current level, or improved. These proposals therefore represent considerable efficiency gains. The savings are analysed as follows:

'In House' Home Support for people with long term conditions provided by the independent sector

- 5.13 The 2011-12 budget for the CSW Long-term Conditions Team is £324,820, with an expected out-turn of £266,918, owing to PCT and client contributions. The management cost for the service is £48,000.
- 5.14 Spot-purchasing of 187 hours per week at current costs of £14.40 per hour would cost £140,779 per annum. This figure will reduce as the number of people employing personal assistants rises and the PCT purchases services on behalf of those in

receipt of CHC funding. If accepted, this proposal will achieve savings in the region of £220,000 per annum.

- 5.15 The costs of project managing the change will be met from existing budgets. The costs of the redundancies potentially arising from this proposal would be applied to be met from the Structural Changes Fund. There is a pay back period of less than a year.

Re-providing Ladybank Older Persons' home

- 5.16 The proposal to recommissioning the residential care provided at Ladybank will produce savings of approximately £275,000 in revenue per annum, and one off savings in cost avoidance of capital expenditure of approximately £600,000.
- 5.17 The unit cost of a bed at Ladybank this year, due to the very low occupancy figures, is about £916 per week, almost exactly double the normal price paid in the independent sector of £458.74 per week. The unit cost has been rising significantly as occupancy falls. Residential homes are businesses with significant fixed costs, and lower marginal variable costs – lower occupancy does not translate into lower running costs.
- 5.18 There would be significant one-off costs in re-providing the service at Ladybank. Some of these, for example, the dual running cost while alternative support arrangements are put in place, and the project management cost, will be met from within existing budgets.
- 5.19 The costs of the redundancies potentially arising from this proposal would be applied to be met from the Structural Changes Fund. There is a pay back period of about a year.
- 5.20 The savings have been calculated on the basis that the care model currently provided, i.e. residential care, is replicated going forward. However, as indicated in the Background section, the Council is placing less emphasis on residential care within its care model, and the re-provision of Ladybank is part of this process. Over time, the residential model will be part replaced by Extra Care, and this has the potential to produce some small additional savings in the longer term.

Enhance capacity in Community Response and Reablement by using new rosters and use of technology

- 5.21 This proposal is cost neutral. However, there are efficiency gains to be made by improving productivity and capacity, and thus enhancing the service provided.

Locate the Home Care Dementia Team at Heathlands Day Centre

- 5.22 This proposal is cost neutral. There are minor, one-off, relocation costs that can be met from within existing budgets.

Introduction of electronic monitoring for domiciliary providers

- 5.23 There is a clear financial benefit as we would have confidence that we are only paying for care that is actually delivered, as opposed to that which is commissioned, or self reported by providers as having been delivered.

- 5.24 This would create efficiencies, although the extent to which these are cashable savings is unclear. Evidence from other authorities is that cashable savings can be made, but the extent of these would depend upon how much we are currently paying for care that is not delivered, and which continue to not be delivered following implementation of electronic monitoring. Electronic monitoring removes an incentive to non delivery.
- 5.25 Unless and until electronic monitoring is implemented, cashable savings cannot be quantified, and there would be financial risks in taking a budget saving at this stage.
- 5.26 The cost of a system for Bracknell Forest would be established through a tender process.

Provide the Sensory Needs Service from within Bracknell Forest Council Community Teams

- 5.27 The forecast cost of purchasing this service from Wokingham District Council next year is £127k. It is estimated that this service can be provided internally for a cost of £94k. This would therefore represent a saving of £33k.
- 5.28 The pan Berkshire joint agreements provides that where an authority withdraws from a Joint Agreement it will bear the exit costs of that withdrawal. In practice, this means that the Council might need to pay the redundancy costs of staff within the Wokingham Sensory Needs Service. It is likely that TUPE will apply, and that therefore there will not be any redundancy costs.

6 ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS

Borough Solicitor

- 6.1 This project would require a comprehensive consultation and a robust EIA prior to any final decisions being formulated and determined.

Borough Treasurer

- 6.2 The proposals outlined above have the potential to provide significant savings, which are summarised in the table below

| | Annual Revenue Savings | Cost Avoidance |
|--|---------------------------|----------------|
| Re-provide In House Home Support | 220,000 | 0 |
| Re-provide Ladybank | 275,000 | 600,000 |
| Introduce New Rosters in CR&R | Non cashable efficiencies | 0 |
| Relocate Home Care Dementia | 0 | 0 |
| Introduce E Monitoring | Non cashable efficiencies | 0 |
| Provide Sensory Needs Service In House | 33000 | |
| Total | 528,000 | 600,000 |

If there are any redundancies as a consequence of these proposals, these will be paid for by the restructuring fund.

Equalities Impact Assessment

- 6.3 See attachments.

Strategic Risk Management Issues

- 6.4 The survey of Ladybank Older Persons Home has identified major work which needs to be undertaken specifically heating and replacement lift there is a risk that further deterioration may cause a failure of these critical services. This could lead to non compliance with Care Quality Commission regulations.
- 6.5 There are risks associated with the changes in terms of staffing and continuing to run services. However, the costs of no changes to the Council would be very significant and would require mitigating action elsewhere.

Borough Human Resources Manager

- 6.6 All processes will be managed under the Council's Protocol for the Management of Organisation Change, Redundancy Handling and Redeployment of Staff. The advice from Human Resources is contained under Staffing Implications. The department has recognised the significant potential difficulties associated with this project and is planning to meet the needs accordingly. There are extensive consultation programmes in place to ensure all staff are engaged in the various aspects of this complex modernisation process. HR representation will be part of the Project Board.

Head of Communications and Marketing

- 6.7 A member of the Communications and Marketing Team has been invited to sit on the Programme Board. A comprehensive Communications Strategy is to be created to ensure that a joined-up and clear plan is implemented. The Communication Strategy's aim is to ensure all relevant parties are openly communicated with during and after the consultation period. As Director of Adult Social Care & Health, alongside the Executive Member for Adult Social Care, Health & Housing, have been identified as spokespeople for the Modernisation Programme.

7 CONSULTATION

Principal Groups Consulted

- 7.1 None at this stage. Consultation details are set out in this report.

Method of Consultation

- 7.2 N/A

Representations Received

- 7.3 N/A

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