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DATE: 13 January 2011

To: Members of the
**ADULT AND COMMUNITY POLICY DEVELOPMENT AND SCRUTINY
COMMITTEE**

Councillor Judi Ellis (Chairman)

Councillor Roger Charsley (Vice-Chairman)

Councillors Reg Adams, Ruth Bennett, Peter Fookes, William Huntington-Thresher,
Diana MacMull, Charles Rideout and Diane Smith

Non-Voting Co-opted Members

Dr Angela Bhan, Bromley Primary Care Trust

Angela Clayton-Turner, Bromley Mental Health Forum

Richard Lane, Learning Disability Forum

Leslie Marks, Bromley Council on Ageing

Keith Marshall, Disability Voice Bromley

Lynne Powrie, Carers Bromley

Gill Rose, Bromley Federation of Housing Associations

A meeting of the Adult and Community Policy Development and Scrutiny Committee
will be held at Civic Centre on **TUESDAY 25 JANUARY 2011 AT 6.45 PM**

***PLEASE NOTE EARLIER
START TIME***

MARK BOWEN

Director of Legal, Democratic and
Customer Services.

*Copies of the documents referred to below can be obtained from
<http://sharepoint.bromley.gov.uk>*

A G E N D A

PART 1 AGENDA

Note for Members: Members are reminded that Officer contact details are shown on each report and Members are welcome to raise questions in advance of the meeting.

STANDARD ITEMS

- 1 APOLOGIES FOR ABSENCE AND NOTIFICATION OF ALTERNATE MEMBERS**
- 2 DECLARATIONS OF INTEREST**

3 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING

To hear questions to the Committee received in writing by the Legal, Democratic and Customer Services Department by 5pm on Wednesday 19th January 2011.

4 MINUTES OF THE MEETING OF ADULT AND COMMUNITY SERVICES PDS COMMITTEE MEETING HELD ON 2 NOVEMBER 2010 (Pages 5 - 24)

5 MATTERS ARISING FROM PREVIOUS MEETINGS (Pages 25 - 30)

6 PRESENTATION: BBA SELF ADVOCACY PROJECTS

PORTFOLIO HOLDER PRESENTATION AND DECISIONS

7 QUESTIONS TO THE ADULT AND COMMUNITY PORTFOLIO HOLDER FROM MEMBERS OF THE PUBLIC AND COUNCILLORS ATTENDING THE MEETING

To hear questions to the Adult and Community Portfolio Holder received in writing by the Legal, Democratic and Customer Services Department by 5pm on Wednesday 19th January 2011 and to respond.

8 PORTFOLIO HOLDER DECISIONS TAKEN SINCE THE LAST MEETING (Pages 31 - 38)

9 PRE-DECISION SCRUTINY OF ADULT AND COMMUNITY PORTFOLIO REPORTS

The Adult and Community Portfolio Holder to present scheduled reports for pre-decision scrutiny on matters where he is minded to make decisions.

a SUPPORTING INDEPENDENCE IN BROMLEY: PROMOTING TECHNOLOGY_(Pages 39 - 66)

b PORTFOLIO PRIORITIES AND PERFORMANCE FRAMEWORK FOR 2011- 2012_(Pages 67 - 72)

c BUDGET MONITORING 2010-2011_(Pages 73 - 80)

d CAPITAL PROGRAMME MONITORING - 2ND QUARTER 2010/11_(Pages 81 - 86)

e DRAFT 2011/12 BUDGET

To follow

f PERSONAL BUDGETS AND CONTRIBUTIONS POLICY CONSULTATION (Pages 87 - 118)

g CLOSURE OF ADULT SOCIAL CARE RECEPTION SERVICES_(Pages 119 - 122)

h COMMISSIONING ARRANGEMENTS FOR SUPPORTED LIVING FOR PEOPLE WITH LEARNING DISABILITIES: SCHEME A_(Pages 123 - 126)

- i **COMMISSIONING ARRANGEMENTS FOR SUPPORTED LIVING FOR PEOPLE WITH LEARNING DISABILITIES: SCHEME B**_(Pages 127 - 132)
- j **SERVICES FOR PEOPLE WITH VISUAL IMPAIRMENT**_(Pages 133 - 138)

HEALTH SCRUTINY ITEMS

- 10 **UPDATE FROM SOUTH LONDON NHS TRUST**
- 11 **UPDATE ON THE HEALTH WHITE PAPER**

POLICY DEVELOPMENT AND OTHER ITEMS

- 12 **RESTRUCTURE -CARE MANAGEMENT AND ASSESSMENT TEAMS IN ADULT AND COMMUNITY SERVICES** (Pages 139 - 144)
- 13 **QUALITY MONITORING IN CARE HOMES** (Pages 145 - 154)
- 14 **UPDATE FROM THE MOBILITY FORUM** (Pages 155 - 158)
- 15 **COMMISSIONING OF SUBSTANCE MISUSE TREATMENT SERVICES ANNUAL REPORT 2010** (Pages 159 - 166)
- 16 **INTERNAL AUDIT VALUE FOR MONEY REPORTING PILOT** (Pages 167 - 170)
- 17 **WORK PROGRAMME** (Pages 171 - 176)
- 18 **LOCAL GOVERNMENT ACT 1972 AS AMENDED BY THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) (VARIATION) ORDER 2006 AND THE FREEDOM OF INFORMATION ACT 2000**

The Chairman to move that the Press and public be excluded during consideration of the items of business listed below as it is likely in view of the nature of the business to be transacted or the nature of the proceedings that if members of the Press and public were present there would be disclosure to them of exempt information.

Items of Business

Schedule 12A Description

- 19 **PRE-DECISION SCRUTINY OF EXEMPT (PART 2) ADULT AND COMMUNITY PORTFOLIO REPORTS**
 - a **CLOSURE OF ADULT SOCIAL CARE RECEPTION SERVICES** (Pages 177 - 182) Information relating to any individual.

- | | | |
|----------|---|---|
| b | COMMISSIONING ARRANGEMENTS FOR SUPPORTED LIVING FOR PEOPLE WITH LEARNING DISABILITIES: SCHEME A
(Pages 183 - 188) | Information relating to the financial or business affairs of any particular person (including the authority holding that information) |
| c | COMMISSIONING ARRANGEMENTS FOR SUPPORTED LIVING FOR PEOPLE WITH LEARNING DISABILITIES: SCHEME B
(Pages 189 - 194) | Information relating to the financial or business affairs of any particular person (including the authority holding that information) |

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ADULT AND COMMUNITY POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Minutes of the meeting held on 2 November 2010

Present:

Councillor Judi Ellis (Chairman)
Councillor Roger Charsley (Vice-Chairman)
Councillors Ruth Bennett, Peter Fookes,
William Huntington-Thresher, Diana MacMull,
Charles Rideout and Diane Smith

Dr Angela Bhan, Angela Clayton-Turner, Leslie Marks and
Lynne Powrie

Also Present:

Councillor Graham Arthur and Councillor Catherine
Rideout

50 APOLOGIES FOR ABSENCE AND NOTIFICATION OF ALTERNATE MEMBERS

Apologies were received from Councillor Reg Adams, Mr Richard Lane, Mr Keith Marshall and Mrs Gill Rose.

Councillor William Huntington-Thresher and Councillor Ruth Bennett tendered apologies for lateness.

51 DECLARATIONS OF INTEREST

Councillor Roger Charsley declared a personal interest as a Member of Bromley Autistic Trust and a Member of SLAM. Councillor William Huntington-Thresher declared a personal interest as the Council appointed representative on the Board of Affinity Sutton. In relation to Agenda item 11 (Minute no 64), Mrs Leslie Marks declared a personal interest as a Trustee of Bromley Mind.

52 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING

Questions were received from four Members of the Public and these are attached at **Appendix A**.

53 MINUTES OF THE MEETING OF ADULT AND COMMUNITY SERVICES PDS COMMITTEE MEETING HELD ON 21 SEPTEMBER 2010

RESOLVED that the minutes of the meeting held on 21st September 2010 be agreed.

**54 MATTERS ARISING FROM PREVIOUS MEETINGS
Report LDCS10191**

The Committee considered a report updating Members on recommendations from previous meetings.

The Chairman reported that the issue of pressure ulcers had been covered in great detail at the Health Care Working Group.

The Committee also requested that Ms Hall provide feedback as to how the issues that had been publicly raised by clinicians had been resolved.

The Committee agreed that it would be helpful to have a written report from the Health Care Working Group. It was also agreed that the link to the Health, Social Care and Housing Partnership Group would be circulated to all Members of the Committee. The Chairman suggested that it would also be helpful to have a diary page outlining all the Partnership meetings that had taken place since the previous meeting.

RESOLVED that progress on recommendations be previous meetings be noted.

55 QUESTIONS TO THE ADULT AND COMMUNITY PORTFOLIO HOLDER FROM MEMBERS OF THE PUBLIC AND COUNCILLORS ATTENDING THE MEETING

No questions were received.

56 PORTFOLIO HOLDER DECISIONS TAKEN SINCE THE LAST MEETING

The Committee noted decisions taken by the Portfolio Holder since the last meeting.

57 PRE-DECISION SCRUTINY OF ADULT AND COMMUNITY PORTFOLIO REPORTS

The Portfolio Holder informed the Committee that he had recently attended the Adult Information Day which had been a good example of how well internal partnerships could work. The Portfolio Holder had also attended the very successful Diversity Day which had been hosted at the Civic Centre.

Since the last meeting the Portfolio Holder had also attended the Carers AGM and the Mencap AGM.

The Portfolio Holder had recently attended the opening of a supported living scheme for people with learning disabilities in Mottingham. The Landlords Forum had also been a very well attended event.

The week after the meeting the Portfolio Holder would be visiting the 60 Extra Care housing units at Meadow Court, Bromley Common. The Portfolio Holder also reported that funding had now been secured for an additional 60 units.

Finally, the Portfolio Holder highlighted that the Health White Paper was beginning to have an impact and it was suggested that the Committee should receive an update on how the proposals were progressing.

58 PRE-PAID CARDS FOR DIRECT PAYMENTS RECIPIENTS Report ACS10064

The Portfolio Holder introduced a report outlining the proposed development of a pre-paid card in Bromley. The pre-paid card provided an effective mechanism for assisting recipients of Direct Payments in managing their budget and purchasing social care services.

The Portfolio Holder suggested that it would be helpful to have a demonstration of how the cards work and asked that something be provided at the Portfolio Planning Day.

The Programme Manager, Supporting Independence in Bromley (SIB), introduced the report and highlighted that the pre paid cards would assist LBB Officers in tracking and auditing the way in which direct payments were spent. The cards would simplify the auditing process for the Care Management Team.

The Committee explored a number of issues arising from the use of pre-paid cards. A couple of Members expressed concerns regarding the appropriate use of the cards. The Programme Manager, SIB, provided assurances that the auditing process would identify if the cards were being used for inappropriate spending. Paper statements would be issued once a month to help individuals manage their spending and Officers would be able to follow trends in expenditure. Certain elements of the card could be switched off in order to limit the opportunities for individuals to use the card inappropriately. The Programme Manager SIB highlighted that this would have to be managed carefully as there were a number of implications surrounding switching off elements of the card.

Officers confirmed that the pre-paid card would look different from and distinctive to other payment cards that service users may possess.

The Committee explored a number of safeguarding issues and sought assurances that adequate security arrangements were in place to protect

service users. The Programme Manager SIB stressed that the pre-paid cards were similar to standard credit card with a PIN number in that if service users gave their PIN to other people the card could be used. Banks would be insuring the card to protect against possibilities of cloning and fraud. In order to maintain security and safeguard individuals, it would be possible to issue a second card for a relative or carer to use. Any users of the cards would have to sign a standard security agreement that would be in place; this would set out the expected security standards to be adopted and Officers would monitor appropriate use of the card.

The Committee considered the set up arrangements for the cards and Officers confirmed that accounts could be set up in service user's homes. A Member suggested that as an incentive the cards should be provided free of charge. Following discussion, it was suggested that in order to manage the limited resources available sponsorship for the cards could be pursued. Officers agreed that they would investigate this possibility and report back to the Committee.

A Member also raised the issue of the charges for the card. The Director ACS explained that the 1% transaction charge to service users was only for **agreed cash advances**, not for general use of the cards. There was also a 1% charge for providers but this was a standard charge.

A Co-opted Member sought assurances that service users would be given the choice of whether they wanted to use the pre paid cards. The Programme Manager SIB reported that service users would be provided with choice, but that it was hoped that the cards would be the default option for individuals who would struggle to manage money.

The Director ACS stressed that the purpose of the cards was to promote independence and limit bureaucracy.

RESOLVED that the development of a pre-paid card for use by Direct Payment recipients be agreed.

**A) ADULT AND COMMUNITY SERVICES PORTFOLIO PLAN MID-YEAR PERFORMANCE REPORT 2010/11
Report ACS10067**

The Portfolio Holder introduced a report providing the PDS Committee with progress on the Portfolio Plan priorities for 2010 and an outline of the Care Quality Commission (CQC) framework for rating Adult Social Care performance. Development of the 2011/12 Portfolio Plan would commence with the Portfolio Holder's planning conference which was due to be held on 23rd November 2010 and information from this event would be incorporated into the draft plan for presentation to the Committee in the spring.

The Portfolio Holder reported to the Committee that targets were largely being met. The outcomes from the mid-year performance review had been positive and the Care Quality Commission had noted good areas of progress.

The Director ACS reported that there had been significant progress on the work around assessments and reviews, an area in which the committee had previously expressed concern. Real improvement had been seen in this area and performance monitoring had proven to be beneficial.

The Chairman acknowledged that there appeared to be an improvement in the speed and quality of assessments and acknowledged that ACS continued to demonstrate to PDS that performance targets were used to good effect to inform and improve the business with managers “owning” performance in their service areas.

The Co-opted Members on the Committee commented that the voluntary services they represented found the targets in place useful and that the annual review of targets helped with negotiations that took place with the Local Authority.

The Committee noted that where the Department had not met targets, it was largely down to circumstances beyond the control of the Local Authority, a clear example of this was the Foyer Scheme.

Members considered services that were provided to people recovering from mental health difficulties. The Committee also considered the services available to individuals on the autistic spectrum. The Director ACS suggested that a detailed report should be presented to the Committee in the new year as the department’s response to the recent guidance from the Department of Health 'Fulfilling and rewarding lives': - guidance for local authorities and NHS organisations to support implementation of the autism strategy.

A Member asked whether grants received by the Department would come to an end and whether this would cause any problems in the delivery of services. The Director ACS reported that there was still uncertainty surrounding what would happen to the grants. Officers suspected that grants were likely to be rolled together and once further information was known Officers would provide a report to Members.

The Portfolio Holder reported that Bromley was a successful Borough in terms of providing employment opportunities for people with learning disabilities. The Entry to Employment Initiative had been Borough-wide and the Portfolio Holder was pleased that the Local Authority had been able to deliver this in partnership with the PCT. The Portfolio Holder also reported that he was disappointed that the Local Authority had missed the target regarding the Foyer Scheme.

REOLVED that the Portfolio Holder be recommended to note the areas of strength and the areas requiring further improvement.

59 HOUSING AND RESIDENTIAL SERVICES 2010/2011
PERFORMANCE REPORT
Report ACS10063

The Portfolio Holder introduced a half year overview of the performance of Housing and Residential Services against the key objectives and targets for 2010/11, together with a summary of the priorities for the remainder of the year.

The Assistant Director (Housing and Residential Services) and the Head of Housing Need introduced the report and outlined the progress that had been made during the first half of the year.

The Assistant Director (Housing and Residential Services) outlined the work that was being undertaken as part of the Fraud Initiative, funding for this work had been received from the Department for Communities and Local Government. Members were asked to report any tenancies that they were concerned about.

There had been a 30% reduction in the number of available lettings during the first half of the year and there was now London-wide competition for temporary accommodation.

A Members asked whether the Council would be pro-active in managing any rising rents charged by Housing Associations and the Assistant Director (Housing and Residential Services) suggested that Officers present a detailed report to the Committee once further information had been gathered.

Members of the Committee stressed the need to ensure that the housing supply was maximised. The Assistant Director (Housing and Residential Services) reported that 46 empty properties had now been brought back into use through direct action (the target had been 20 properties).

The Committee considered the possibility of bringing some of the properties in Bromley North Village back into use. The Assistant Director (Housing and Residential Services) reported that a mail out had been undertaken a few months before the meeting of the Committee and a very low response had been received. Officers would continue to pursue this.

The Committee were told that the Local Authority ran an initiative which supported people who under-occupy properties to move to smaller properties by providing practical support to them to bid for properties and with the actual moving. The Head of Housing Need agreed to email all Members of the Committee with the half-yearly update setting out statistics surrounding the number of people who have been supported through this initiative.

The Director ACS reported that Officers were reviewing the feasibility of including more work on and investment in bringing back in to use empty properties as part of the Portfolio Plan. The Chairman suggested that it would

be helpful to have a report back to the Committee regardless of the outcome of the feasibility review.

RESOLVED that the Portfolio Holder be recommended to agree the actions being taken to meet the range of housing duties and needs in Bromley and to deal with increased pressures on the service resulting from the recession.

**60 BROMLEY HOMESEEKERS - ALLOCATIONS SCHEME
REVIEW
Report ACS10068**

The Portfolio Holder introduced a report advising Members of the outcomes of the consultation on the review of the Housing Allocations Scheme and presenting the finalised scheme for consideration.

The Portfolio Holder reported that currently 37% of applications were being received from out of Borough and the new allocation scheme would assist local people making applications

The Head of Housing Need reported that the target for implementation of the new scheme was April 2011 but that this was dependant on having a software development in place. .

Officers explained that with the new policy service users expectations could be better managed and it would be easier to explain the system to users. Currently around 30% of those who submitted applications for housing were not eligible and the new system was designed to improve support and signposting to service users in accessing the housing services and options for which they were eligible and to help meet their housing needs.

The Director ACS confirmed that the process would not be implemented until the Department knew that Auto Banding was working and was able to support the new allocations scheme.

A Member expressed concern regarding the re-banding and the pressure that it could place on the Department. The Head of Housing Needs explained that the new policy was dependant on the automatic banding process to ensure the re-registration and the system ran efficiently and the re-registration process should see quite a number of households not renew their application as they had moved and/or resolved their housing need and not de-registered or no longer wished to pursue the housing register as an option.

The Committee considered the bands that current and ex-Members of the armed forces would be placed in. Officers explained that if there was a housing need they would go though the Housing Options Team if there were medical reasons why they needed housing a medical assessment would be undertaken. It was stressed that they would certainly not be disadvantaged.

The Portfolio Holder thanked Officers for the work they had undertaken throughout the review and for the work that was being undertaken to implement the policy.

RESOLVED that the Portfolio Holder be recommended to agree the revised draft scheme and note that the adoption will happen following implementation of the necessary amendments to the IT system supporting “Bromley Homeseekers” and that a review will take place in year 2 in order to assess the success of the changes in managing expectations and reducing time assessing applications.

**A) PROPOSED DEVELOPMENTS FOR INTERMEDIATE CARE SERVICES
Report ACS10066**

The Portfolio Holder introduced a report seeking agreement to the development of a targeted hospital admission avoidance service and seeking Members' comments on the proposal to reduce the number of hospital based intermediate care beds.

A Member expressed concern surrounding the increased travel times for the two CARTs teams. Officers provided assurances that the additional time implications of travelling to patients homes had been taken into consideration throughout the development of the proposals.

Dr Angela Bhan highlighted that the proposals were focused on managing patients expectations around the length of stay in hospital and that they should be viewed in the context of re-ablement and giving people independence.

In response to a question, Officers confirmed that services would be provided seven days a week and that the hours of the service were approximately 7am to 7pm. There would be a dedicated Care Manager available at the hospital. Services at Urgent Care Centres would have to be reviewed and GPs would be able to refer directly to the service.

A Member highlighted that without partnership work with other Boroughs, residents of the Borough who attended hospitals in neighbouring Boroughs (for example Lewisham Hospital) would not be covered by the proposals.

Another Co-opted Member highlighted that most people would welcome the chance not to remain in hospital for long periods but sought assurances that there was an acknowledgement that for some people this was not the right approach and they may need to remain in hospital. Officers provide these assurances.

The Portfolio Holder reported that that patients would have to be considered on a case-by-case basis. The Committee acknowledged that the proposals would have to be considered sensitively as closure or reductions in hospital beds could cause anxiety amongst patients.

RESOLVED that the Portfolio Holder be recommended to agree to the development of a targeted hospital admissions avoidance service and note the launch of a formal consultation by the PCT on the reduction in the number of hospital based intermediate care beds.

**61 CHANGES TO THE TAXICARD SCHEME AND TFL TAXICARD FUNDING REDISTRIBUTION
Report ACS10061**

Officers provided an overview of the operation of the Taxicard scheme in Bromley. A higher than anticipated increase in the number of Taxicard trips taken throughout London during 2010/11 had resulted in significant projected overspends of the cumulative Taxicard budget. A number of measures to bring spend within budget had been proposed by London Councils and these would be considered at the Transport and Environment Committee (TEC) on 11th November 2010 with a view to implement the approved measures by 1st January 2011.

An update to the report was tabled and this outlined further information that had been received from London Councils. The changes that would affect Bromley were highlighted including:

- an increase of 50p in the charge to £2.50;
- ending double swiping for longer trips
- a reduction of £1 in the minimum subsidy to £8.30

Together these changes would result in an increase in cost to the user of between 50p to £1.50.

The Committee was reminded that if no action was taken, the budget for Bromley would be spent by 27th February 2011 and no further trips could be taken.

The Portfolio Holder highlighted that this was a TfL pan-London scheme and this meant there were limitations on how it could be operated. The opportunity for the Committee to consider the proposals had been secured by the Portfolio Holder for the Environment who was the Council's representative on London Council's Transport and Environment Committee.

The Chairman noted that London Council's had stated that they planned to use underspends elsewhere to cover overspends.

The Committee considered the impact that the end of double swiping would have on the residents of Bromley. Following discussion the Portfolio Holder was asked to lobby TfL and the London Council's Transport and Environment Committee regarding the ending of double swiping. Members felt that residents of Bromley would be disproportionately affected by this proposals as Bromley was the largest Borough.

RESOLVED that (1) the Portfolio Holder be recommended to agree to the recommendations from London Councils on measures to offset the projected overspend; namely:

- **Increase the minimum customer contribution from £2.00 to £2.50**
- **Reduction in maximum borough subsidy by £1 per trip**
- **End double swiping for longer trips.**

(2) that the Portfolio be asked to lobby TfL and the London Council's Transport and Environment Committee regarding the ending of double swiping

**62 BUDGET MONITORING 2010/2011
Report ACS10065**

The Committee considered a report outlining the budget monitoring position for the Adult and Community Portfolio based on expenditure and activity levels up to 31st August 2010.

The Portfolio Holder highlighted that at the last meeting an increase in the overspend had been anticipated and this report reflected that increase. The Portfolio Holder expressed hope that the figures for September would demonstrate an improvement in the overspend.

The Committee recognised that it was difficult to reduce costs when more people needing care were coming forward.

RESOLVED that the Portfolio Holder be recommended to note that a projected overspend of £598,000 is forecast on the controllable budget for the Adult and Community Portfolio as at 31st August 2010.

63 VERBAL UPDATE FROM THE HEALTH CHECK WORKING GROUP

The Chairman provided a verbal update from the Health Care Working Group which had met on 28th October 2010. The Working Group had been disappointed that the Chief Executive of South London Healthcare NHS Trust had been unable to attend the meeting despite adequate notice, but he would be invited to a future meeting of the Working Group.

The Working Group had asked for clarity between the services provided at A&E and those provided at Urgent Care Centres and Ms Hall had agreed to provide further information to the Working Group.

Ms Hall had provided assurances that the Trust was working towards filling staff vacancies and were looking to attract the highest calibre of staff.

There had been a great deal of discussion surrounding pressure ulcers. Levels of pressure ulcers had been unacceptably high; however the Trust had undertaken work on this issue and in September and October there had been

no instances of grade 4 ulcers. The Trust was now working on grade 3 ulcers. The Chairman reported that the Working Group had asked for information regarding where people who attended hospital with pressure ulcers had come from.

The Working Group was informed about the patient transport service which was currently going through a contract tendering process.

Ms Hall had also provided assurances that the Trust was reviewing food and nutrition across the three sites and the Trust Board had set up a Sub-group to monitor this issue.

The next meeting of the Working Group would take place on Wednesday 1st December and London Ambulance Service had been invited to attend.

64 QUALITY OF DOMICILIARY CARE SERVICES
Report ACS10062

The Committee received an update on the work undertaken to monitor the quality of domiciliary care services provided in the Borough by internal and external providers.

The Strategic Manager for Procurement and Contract Compliance reported that this was the second report presented to the Committee on domiciliary care services. The Council was constantly monitoring external providers and was seeking to achieve continuous improvement from providers.

The Chairman highlighted that it would have been helpful to have the number of complaints received included in the report rather than the percentages. The Committee were informed that 46 formal complaints had been received but that the Department also collected information on informal complaints that were received over the telephone and resolved on the day of complaint.

The Committee heard that feedback was sought from services users during the contract compliance process and that findings were fed to the Care Quality Commission (CQC) and that the Department would not hesitate to report serious concerns to the CQC.

RESOLVED that the report be noted.

65 WORK PROGRAMME
Report LDCS1092

The Committee considered its work programme for 2010/2011. Members noted that the Drug Action Team Annual report would be considered at the next meeting in January 2011 and that there would also be an update on the Health White Paper. At the meeting in March 2011 the Committee would receive the presentation given to the Accommodation and Care for Older People Reference Group and the report reviewing services to individuals on the Autistic Spectrum would be considered.

RESOLVED that the work programme for 2010/2011 be approved.

**66 LOCAL GOVERNMENT ACT 1972 AS AMENDED BY THE
LOCAL GOVERNMENT (ACCESS TO INFORMATION)
(VARIATION) ORDER 2006 AND THE FREEDOM OF
INFORMATION ACT 2000**

RESOLVED that the Press and public be excluded during consideration of the items of business listed below as it is likely in view of the nature of the business to be transacted or the nature of the proceedings that if members of the Press and public were present there would be disclosure to them of exempt information.

**67 EXEMPT PORTFOLIO HOLDER DECISIONS TAKEN SINCE
THE LAST MEETING**

The Committee noted Exempt (Part 2) decisions taken since the last meeting on 21st September 2010.

The Meeting ended at 10.05 pm

Chairman

Minute Annex

Adult and Community PDS Committee 2nd November 2010

Questions from Ms Jean Stout, Chairman, Community Care Protection Group

1. The rationale stated in para.1 of this report for the proposal to halve the Orpington Hospital IC beds is 'the recent reviews of ICS'.

Please list:-

- (a) These 'reviews' with author and date;
- (b) The evidence of reduced need supporting this reduction in bed numbers.

Reply

(a) *The reviews are:*

Acute Bed Utilisation and Capacity of Care Nearer to Home in Bromley – Report of Findings, The Balance of Care Group, 2008.

The Care Quality Commission (CQC) Annual Performance Assessment for 2008/09 (Outcome 1 – Improved health and well-being) which confirms Bromley's comparative performance against other local authorities and CQC's views on the focus of intermediate care services within Bromley.

(b) *The evidence is provided in the above documents.*

The Bed Utilisation survey showed that at the point of admission, 35% of those admitted to Orpington might have received their care in their own home. This compared to just 5% of those admitted to Elmwood.

The survey also showed that on the day of care, 70% of service users at Orpington could have received their care in their own home. The comparative figure for Elmwood was 47%. Overall 62% of people within Intermediate care beds on the day of the survey were assessed as suitable to receive intermediate care within their own home.

2. **Bromley PCT controls admission of patients to the ICS, whether home or bed-based, and the PACE Service. ICS was designated to provide intervention to avoid admission to Acute services, as well as rehabilitation and recovery after Acute Care.**

Why have more patients not been referred to avoid Acute admissions?

Reply

Admission to the Intermediate Care service is managed by managers within the Intermediate Care Service, one of whom is a PCT employee and the other an LBB ACS manager. Admissions are subject to service users meeting PCT/LBB agreed criteria.

When Intermediate Care services were introduced there was an emphasis on supporting earlier discharge from acute care. Over time Intermediate care has also been seen as useful in providing an intervention that can avoid the need for an acute admission. The balance between admission avoidance and supporting discharge is constantly kept under review and over the last 3 years there has been an increase in the numbers referred to avoid hospital admissions. There was also a significant increase in 2009/10 in the number of people being referred to community based intermediate care supported by the introduction of the PACE service.

- 3. The 'Bed Utilisation Survey' took place over 1 July day. These results are not a reliable indicator of long-term needs during pressurised periods. BPCT controls the admissions and length of stay of patients in the Unit.**

Why did they admit and retain patients who did not need the service?

Reply

The survey does not identify significant numbers of patients who did not need the service at all. Rather, it identifies patients who could have received their service in potential alternative care settings - whether they were currently available or not – instead of residential care settings such as Orpington hospital.

Questions from Ms Susan Sulis Secretary, Community Care Protection Group

- 1. Bed-based IC is essential for those patients who lack the home environment, facilities, or support to enable them to undergo rehabilitation.**

Are members satisfied that the results of the Bed Utilisation Survey over 1 day in summer provides adequate evidence of a permanent major reduction in need?

Reply

The report does not state that there will be a major reduction in need for Intermediate Care services, but that by further developing and investing in community based intermediate care services, there is a need for fewer intermediate care beds in the whole system. The findings from the Bed Utilisation Survey provide the evidence for this and the CQC Annual Performance Assessment for 2008/09 (Outcome 1 – Improved health and well-being) confirms Bromley's comparative performance against other local authorities.

- 2. The provision of IC beds has enabled Bromley hospitals to reduce A&E waits and large-scale cancellation of elective surgery.**

With cuts of 25% predicted, are Members confident that closure of 20 NHS IC beds will not risk additional costs for ACS at a time when services are under enormous pressure?

Reply

The proposals identified in the report will continue to contribute to the reduction in demand for hospital beds by avoiding admissions where possible. The proposed reduction in the number of intermediate care beds will enable additional investment in community based services to allow for any increase in demand for these services.

In the challenging financial circumstances that we face in the coming years it will be even more important that the maximum benefit is being achieved for service users from investments in services such as intermediate care.

- 3. Will Members ask for a detailed report with supporting data and future demographic trends, to ensure that a reduction in bed-based IC does not impact adversely on patient care, and contribute to greater pressure and costs for the ACS Homecare Service?**

Reply

Members will expect robust performance monitoring of the reconfigured intermediate care services, including a detailed evaluation of the service and its impacts after 6 months to be presented to the Policy Development and Scrutiny Committee.

Questions from Mr David Mott

Is this Committee aware that elderly patients admitted to PRUH and QEH may be transferred post surgery to QMS if there are bed capacity issues and that there will be no Critical Care Unit at QMS just Critical Care Support?

Reply

Thank you for your question. The Committee is interested in the issues that you have raised and as you know we have asked the Trust to come to the next meeting on 25th January 2011 to provide a health care update, including any issues in relation to post operative care.

Supplementary Question:

You state in an email sent to me on 29th October that the duty of the Trust is to notify this Committee of any service changes they intend to make and that it has fulfilled its duties regarding this.

Can you explain why this Committee was not informed during the verbal update given by the Trust representative at the last PDS meeting of imminent proposed service changes – the closure of A&E and Maternity at Queen Mary's the day after the PDS meeting – this would impact on Bromley patients – medically fit patients would be moved to Queen Mary's from 26th October and Ortho-Geriatrics from 27th October.

The Chairman responded that it was unfortunate that the date of the press release was the day after the last meeting (22nd September 2010). The Trust had informed the Committee of the proposed changes via the press release that had been issued. The chairman highlighted that the Trust did not have to inform the Committee before it publically issued information. The Committee regularly received press releases and could also received briefings from the Trust as and when necessary.

APoH consultation states that Elective Surgery be transferred to QMS in order to separate Planned and Emergency surgery thereby negating cross infection and yet we are now told that only non-complex cases will be dealt with at QMS – can the Committee tell the public how this complies with APoH ?

Reply

Thank you for your question as you know the Committee is interested in the issues that you have raised and has asked the Trust to report on any service implications in relation to post operative care at the next meeting on 25th January 2011. The Health Care Working Group raised these issues with the Trust at its last meeting on 28th October 2010 and Ms Jennie Hall agreed to provide a report to this Committee in January 2011 when she next attends.

Supplementary Question:

In a question I asked at the 27th July PDS meeting you stated that Ms Jennie Hall, Director of Nursing, attends every Committee meeting and has made herself available to respond to any issues that may arise that do not form part of the published agenda. I was informed on 29th October that Ms Hall would not be attending again until January 2011. Can the committee tell me why the answer you gave me has now changed – I also understand that the Chief Executive of the Trust is obliged to attend at least twice a year – can you tell me how many times he has attended during the last year please?

The Chairman confirmed that the Chief Executive had not attended a Committee meeting this year but that he had delegated this duty to Ms Jennie Hall. The Chairman agreed that it was important to hear from the Chief

Executive, especially as a number of health issues had emerged. The Chairman explained that as there was not a health based issue on the Committees agenda for this meeting Ms Hall had not attended.

Will this Committee ensure that the Trust guarantees that beds in the Stroke Unit are 'ring-fenced' solely for Stroke patients and that if there is a capacity crisis and there are available beds on the Stroke Unit they will not be used for emergency or planned admissions, barring, understandably, a major incident?

Reply

Thank you for your question as you know the Committee is interested in the issues that you have raised and has asked the Trust to report on any service implications in relation to stroke care at the next meeting on 25th January 2011.

As previously stated as the Committee has no powers to instruct the Trust as to the way in which they chose to deliver services all your questions have been passed to the Trust for them to respond directly to you.

Supplementary Question:

Your email of 29th October states that the remit of this Committee is to hear from the Trust about service implications arising from APoH in relation to post-operative and stroke care. My understanding of the Health and Social Care Act 2001 is that this Committee has much wider powers. Could you please explain to me what these powers are?

The Chairman responded that the Committee's main health scrutiny powers were

- To review and scrutinise the planning, provision and operation of health services in the area*
- To require officers of local NHS bodies to attend meetings and answer questions*
- To make reports and recommendations to local NHS bodies and expect a response within 28 days*
- To set up joint health scrutiny committees with other local authorities and delegate powers to another local authority*

Government guidance stated that:

"It is not the role of committees to performance manage the NHS. Other organisations exist to perform this role."

If there was another body set up to deal with formal complaints the committee should not look to duplicate that role and again should not get involved in the day to day activities.

The chairman clarified that APOH was an area that the Committee reviewed but the Health Scrutiny Powers were not limited to this as Health Scrutiny had been in existence for longer than the APOH proposals.

Questions from Mr Tom Williams

SLHT is outsourcing to four private providers - we now know that the Rapid Surgical contract was not subject to competitive tendering- were the other three provider contracts subject to competitive tendering?

Reply

SLHT have not been scheduled to attend this as Ms Hall provided an update to the Committee at its last meeting on 21st September and is due to attend the next meeting on 25th January 2011.

The question has been passed directly to the Trust for them to respond directly to you. SLHT have agreed to outline to the Committee the response that is sent to you at the next meeting on 25th January 2011.

South London Healthcare NHS Trust
Frognal Avenue
Sidcup
Kent
DA14 6LT

Tel: 0208 302 2678

Email: boardsecretary.slh@nhs.net

www.slh.nhs.uk

17th December 2010

Mr. D Mott
30 Red Cedars Road
Orpington
Kent
BR6 0BX

Dear Mr Mott

Re: Questions for PDS meeting 2nd November 2010

I understand you recently submitted three questions the London Borough of Bromley Adult and Community Services Policy Development and Scrutiny (PDS) Committee who in their response referred your questions to South London Healthcare NHS Trust.

Please be advised of the Trust response to the questions that you submitted that are as follows:

Is this Committee aware that elderly patients admitted to PRUH and QEH may be transferred post surgery to QMS if there are bed capacity issues and that there will be no Critical Care Unit at QMS just Critical Care Support?

The Trust understands that the Committee is aware that elderly patients admitted to PRUH and QEH may be transferred post surgery to QMS if there are bed capacity issues and that the committee is also aware that there will be no Critical Care Unit at QMS just Critical Care Support. The sub-acute unit at QM is a new development which should improve the care of this group of patients.

APoH consultation states that Elective Surgery be transferred to QMS in order to separate Planned and Emergency surgery thereby negating cross infection and yet we are now told that only non-complex cases will be dealt with at QMS – can the committee tell the public how this complies with APoH ?

70 to 80% of inpatients will be treated initially at Queen Mary's, Sidcup. As the experience of the unit grows the Trust expects that the percentage of patients that can be treated at QM will increase. The Trust is considering whether it should plan for the introduction of Intensive Care on the QM site at some point in the future.

Will this committee ensure that the Trust guarantees that beds in the Stroke Unit are 'ring-fenced' solely for Stroke patients and that if there is a capacity crisis and there are available beds on the Stroke Unit they will not be used for emergency or planned admissions, barring, understandably, a major incident

Yes, the Trust will undertake to "ring fence" beds in the Hyper Acute Stroke Unit.

Yours sincerely

A handwritten signature in black ink, appearing to read 'M. Weaver', written over a horizontal line.

Mr. Michael Weaver
Trust Board Secretary

michael.weaver@nhs.net

Agenda Item 5

Report No.
LDCS11008

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: Adult and Community PDS Committee

Date: 25th January 2011

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **MATTERS ARISING FROM PREVIOUS MEETINGS**

Contact Officer: Philippa Stone, Democratic Services and Scrutiny Officer
Tel: 020 8313 4871 E-mail: philippa.stone@bromley.gov.uk

Chief Officer: Mark Bowen, Director of Legal, Democratic and Customer Services

Ward: N/A

1. Reason for report

- 1.1 This report updates Members on recommendations from previous meetings which continue to be "live".

2. **RECOMMENDATION(S)**

- 2.1 The Committee is asked to note the progress on recommendations made at previous meetings.

Corporate Policy

1. Policy Status: Existing policy. "Building a Better Bromley"
 2. BBB Priority: Excellent Council.
-

Financial

1. Cost of proposal: No cost
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: Democratic Services
 4. Total current budget for this head: £476,706
 5. Source of funding: Existing Budget
-

Staff

1. Number of staff (current and additional): There are 14 posts in the Democratic Services team (11.89 fte, of which 10 fte are dedicated to committee support).
 2. If from existing staff resources, number of staff hours: Maintaining the matters arising report takes less than an hour per meeting.
-

Legal

1. Legal Requirement: No statutory requirement or Government guidance.
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Current Membership of the A&C PDS Committee (16 Members including Co-opted Members)
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

<u>Minute Number/Title</u>	<u>Decision</u>	<u>Update</u>	<u>Action</u>	<u>Completion Date</u>
24th February 2010				
92. Timeliness of Assessments and Reviews	<p>That data covering the number of referrals from 2006 to 2009 be provided.</p> <p>That an update report be provided to the Committee in 12 months.</p>		Assistant Director Care Services	29 March 2011
27th July 2010				
27. BLUE BADGE UPDATE	<p>That an update on discretionary Blue Badges be provided to the Committee in January 2010.</p> <p>The Chairman suggested that the issue be referred to Environmental Services for review</p>	Environmental Services are considering this issue actively as a budget option, timescale this autumn.	Assistant Director (Environmental Services) Customer And Support Services Division	<p>29 March 2011</p> <p>Autumn 2010 (to report to this Committee in January 2011)</p>
2nd November 2010				
52. Questions to the Committee	Questions submitted to the Committee regarding services at South London Healthcare Trust were forwarded to the Trust for response.	Questions forwarded to South London Healthcare Trust from the Committee will be handled under Freedom of Information procedures. A response was sent to Mr Mott on 17 th December 2010.	Democratic Services Officer/ South London Healthcare Trust	17 th December 2010

<u>Minute Number/Title</u>	<u>Decision</u>	<u>Update</u>	<u>Action</u>	<u>Completion Date</u>
54. Matters Arising from Previous Meetings	<p>It was agreed that the link to the Health Social Care and Housing Partnership Board would be circulated to all Members.</p> <p>It would be helpful to have a diary page outlining all the partnership meetings that had taken place since the previous meeting.</p>	<p>A link was circulated to all Members following the meeting held on 2nd November.</p> <p>A list of the Partnership meetings is appended to this report.</p>	Democratic and Scrutiny Officer	<p>5th November 2010</p> <p>25th January 2010</p>
57(a) Pre-paid Cards for Direct Payments Recipients	It was suggested that in order to manage the limited resources available, sponsorship for the cards could be pursued.		Programme Manager, Supporting Independence in Bromley	29 March 2011

Diary of Health Social Care and Housing Partnership Meetings

Adult and Community PDS Meeting: 2nd November 2010

3rd November – Lead Officers Meeting
8th November – Physical Disability Sensory Impairment Partnership Group
15th November – Health Social Care and Housing Partnership Board
8th December – Mental Health Partnership Group
13th December – Older People Mental Health Partnership Group
13th December – Staying Healthy Partnership Group
12th January – Older People Partnership Group

Adult and Community PDS Meeting: 25th January 2011

31st January - Health Social Care and Housing Partnership Board
4th February – Learning Disability Partnership Group
7th February – Carers Partnership Group
21st February - Physical Disability Sensory Impairment Partnership Group
23rd February - Mental Health Partnership Group
14th March - Older People Mental Health Partnership Group

Adult and Community PDS Meeting: 29th March 2011

4th April - Health Social Care and Housing Partnership Board
13th April - Older People Partnership Group
6th May - Learning Disability Partnership Group
9th May - Carers Partnership Group
16th May - Physical Disability Sensory Impairment Partnership Group
18th May - Mental Health Partnership Group
13th June - Older People Partnership Group

13th July - Older People Partnership Group
22nd July - Learning Disability Partnership Group
25th July - Carers Partnership Group

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Agenda Item 8

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

The Portfolio Holder for Adult and Community, Councillor Graham Arthur has made the following executive decision:

PRE PAID CARD FOR DIRECT PAYMENT RECIPIENTS

Reference Report:

Pre Paid Cards for Direct Payment Recipients

Decision:

That the development of a pre-paid card for use by Direct Payments recipients be agreed.

Reasons:

The Supporting Independence in Bromley programme is supported by the Building a Better Bromley key aim Supporting Independence and is the Key theme within the Adult and Community Portfolio Plan for 2009/10. The programme is in line with national developments to transform social care and is supported by specific three year funding through the "social care reform grant". The funding supports the vision as laid down in "Our Health, Our Care our Say and "Putting People first" December 2007. The pre-paid card provides an effective mechanism for assisting recipients of Direct Payments to manage their budget and purchasing of social care services.

The proposed decision was scrutinised by the Adult and community PDS Committee on 2nd November 2010 and the Committee supported the proposal.

.....
Councillor Graham Arthur
Portfolio Holder for Adult and Community

Mark Bowen
Director of Legal, Democratic and Customer Services
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 4 Nov 2010
Implementation Date (subject to call-in): 11 Nov 2010
Decision Reference: A&C10015

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

The Portfolio Holder for Adult and Community, Councillor Graham Arthur has made the following executive decision:

ADULT AND COMMUNITY PORTFOLIO PLAN MID-YEAR PERFORMANCE REPORT 2010/11

Reference Report:

Portfolio Plan Mid-Year Performance

Decision:

That the areas of strength and the areas requiring further improvement be noted.

Reasons:

The Adult and Community 2010/2011 Portfolio Plan reflects the council's agreed vision for 'Building a Better Bromley' 2009-2012 and the priority areas confirmed by key stakeholders at the annual Portfolio holder's Planning conference held in November 2009. The Supporting Independence in Bromley programme is about changing the way care, support and services are delivered to people in Bromley. It is changing the way social services engage with people who need support.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 2nd November 2010 and the Committee supported the proposal.

.....
Councillor Graham Arthur
Portfolio Holder for Adult and Community

Mark Bowen
Director of Legal, Democratic and Customer Services
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 4 Nov 2010
Implementation Date (subject to call-in): 11 Nov 2010
Decision Reference: A&C10016

LONDON BOROUGH OF BROMLEY
STATEMENT OF EXECUTIVE DECISION

The Portfolio Holder for Adult and Community, Councillor Graham Arthur has made the following executive decision:

HOUSING AND RESIDENTIAL SERVICES MID YEAR PERFORMANCE

Reference Report:

Housing and Residential Services

Decision:

That the actions being taken, as detailed throughout the report, to meet the range of housing duties and needs in Bromley and to deal with increased pressures on the service resulting from the recession be agreed.

Reasons:

The objectives and work to increase the supply of affordable housing assists in achieving targets in Building a Better Bromley as well as the achievement of other corporate priorities and targets for example, Residential Home Reprovision, Learning Development supported Living Initiative and Town Centre Regeneration.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 2nd November 2010 and the Committee supported the proposal.

.....
Councillor Graham Arthur
Portfolio Holder for Adult and Community

Mark Bowen
Director of Legal, Democratic and Customer Services
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 4 Nov 2010
Implementation Date (subject to call-in): 11 Nov 2010
Decision Reference: A&C10017

LONDON BOROUGH OF BROMLEY
STATEMENT OF EXECUTIVE DECISION

The Portfolio Holder for Adult and Community, Councillor Graham Arthur has made the following executive decision:

HOUSING ALLOCATIONS SCHEME REVIEW

Reference Report:
Allocations Scheme Review

Decision:

That the revised draft Housing Allocations Scheme be agreed.

Reasons:

The purpose of the policy review is to ensure that the policy adopted and operated by the London borough of Bromley and its partner RSLs is fit for purpose, meeting all statutory and good practice requirements and reflecting local priorities and pressures in order to make best use of all available stock to meet housing need.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 2nd November 2010 and the Committee supported the proposal.

.....
Councillor Graham Arthur
Portfolio Holder for Adult and Community

Mark Bowen
Director of Legal, Democratic and Customer Services
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 4 Nov 2010
Implementation Date (subject to call-in): 11 Nov 2010
Decision Reference: A&C10018

LONDON BOROUGH OF BROMLEY
STATEMENT OF EXECUTIVE DECISION

The Portfolio Holder for Adult and Community, Councillor Graham Arthur has made the following executive decision:

PROPOSED DEVELOPMENTS IN INTERMEDIATE CARE SERVICES

Reference Report:
Intermediate Care

Decision:

That the development of a targeted hospital admission avoidance service be agreed.

Reasons:

Intermediate care services have been provided in Bromley since the late 1990s and have been effective in supporting people to regain function and independence following a spell in hospital or a crisis at home. Services are jointly commissioned and funded by London Borough of Bromley and Bromley Primary care Trust. Recent reviews of intermediate care services suggests that greater effectiveness could be achieved by focusing on avoiding hospital admissions and a reconfiguration of resources to support more people at home rather than in residential settings.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 2nd November 2010 and the Committee supported the proposal.

.....
Councillor Graham Arthur
Portfolio Holder for Adult and Community

Mark Bowen
Director of Legal, Democratic and Customer Services
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 4 Nov 2010
Implementation Date (subject to call-in): 11 Nov 2010
Decision Reference: A&C10019

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

The Portfolio Holder for Adult and Community, Councillor Graham Arthur has made the following executive decision:

CHANGES TO THE TAXICARD SCHEME AND TFL TAXI CARD FUNDING REDISTRIBUTION

Reference Report:

Changes to the Taxicard Scheme

Decision:

- (1) That the recommendations from London councils on measures to offset the projected overspend be agreed; namely:
 - Increase the minimum customer contribution from £2.00 to £2.50
 - End double swiping for longer trips
- (2) That the Portfolio Holder for the Environment be asked to lobby London Council's regarding the end of double swiping for longer trips.

Reasons:

A higher than anticipated increase in the number of Taxicard trips taken throughout London during 2010/11 has resulted in significant projected overspends of the cumulative Taxicard budget. A number of measures to bring spend within budget have been proposed by London Councils which will be considered at the Transport and Environment committee (TEC) on 11th November 2010, with a view to implement approved measures by 1st December 2010.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 2nd November 2010 and the Committee supported the proposal.

.....
Councillor Graham Arthur
Portfolio Holder for Adult and Community

Mark Bowen
Director of Legal, Democratic and Customer Services
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 4 Nov 2010
Implementation Date (subject to call-in): 11 Nov 2010
Decision Reference: A&C10020

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

The Portfolio Holder for Adult and Community, Councillor Graham Arthur has made the following executive decision:

CHANGES TO THE TAXICARD SCHEME AND TFL TAXI CARD FUNDING REDISTRIBUTION

Reference Report:

Changes to the Taxicard Scheme

Decision:

- (3) That this decision replace decision ACS10020.
- (4) That the recommendations from London councils on measures to offset the projected overspend be agreed; namely:
 - Increase the minimum customer contribution from £2.00 to £2.50
 - Reduce the maximum trip subsidy to £8.30
 - End double swiping for longer trips.
- (5) That the Portfolio Holder for the Environment be asked to lobby London Council's regarding the end of double swiping for longer trips.

Reasons:

A higher than anticipated increase in the number of Taxicard trips taken throughout London during 2010/11 has resulted in significant projected overspends of the cumulative Taxicard budget. A number of measures to bring spend within budget have been proposed by London Councils which will be considered at the Transport and Environment committee (TEC) on 11th November 2010, with a view to implement approved measures by 1st January 2011.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 2nd November 2010 and the Committee supported the proposal.

.....
Councillor Graham Arthur
Portfolio Holder for Adult and Community

Mark Bowen
Director of Legal, Democratic and Customer Services
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 8 Nov 2010
Implementation Date (subject to call-in): 15 Nov 2010
Decision Reference: A&C10020A

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Report No.
ACS 11002

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: Adult and Community Portfolio Holder

Date: For pre-decision scrutiny by the Adult and Community PDS committee on 25 January 2011

Decision Type: Non-Urgent Executive Non-Key

Title: SUPPORTING INDEPENDENCE: PROMOTING TECHNOLOGY

Contact Officer: Kirsty Armstrong, Project Manager (Universal Services)
Tel: 020 8461 7612 E-mail: kirsty.armstrong@bromley.gov.uk

Chief Officer: Terry Rich, Director of Adult and Community Services

Ward: N/A

1. Reason for report

The report updates the PDS on progress towards achieving a web-based information, advice and guidance system, as part of the Supporting Independence Programme, and outlines the joint work with Bromley Libraries and the Field Studies Centre to utilise Future Jobs Fund candidates to support this work.

2. **RECOMMENDATION(S)**

1. The PDS note and comment upon the developments outlined in the report.
2. The Portfolio Holder endorses the overall strategy of delivering information, advice and guidance via a web-based portal and through Bromley's libraries.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
-

Financial

1. Cost of proposal: N/A
 2. Ongoing costs: N/A. Dependent on outcome of trial.
 3. Budget head/performance centre: Transforming Social Care
 4. Total current budget for this head: £2.5 m over three years
 5. Source of funding: Social Care Reform Grant
-

Staff

1. Number of staff (current and additional): 15 additional staff, funded through Future Jobs Fund
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: Non-statutory - Government guidance. Grant conditions required to secure Social Care Reform Grant as above. Transforming Adult Social Care, LAC (DH (2009) 15th March 2009. Putting People First 10th December 2007
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Central Library, Bromley had 9,140 weekly visits according to the October 2009 survey; in total, libraries had 27,220 visits. Website has been developed both for residents and service providers within the borough, and for those looking to source services within the borough.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 A key component of the Supporting Independence in Bromley Programme has been the development of universal information, advice and guidance aimed at signposting people who may not be eligible for Council-funded services towards other solutions to meet their needs. This is part of what is called the 'universal offer' and aims to ensure that people are offered advice that will help to prevent an early acceleration of needs into the critical and substantial categories of need.
- 3.2 The SIB Programme has consulted upon and developed an Information, Guidance and Advice strategy, and this is attached at Appendix 1.
- 3.3 One of the recommendations within the strategy is for a website to provide information, advice and guidance on available services, and allows users to self-assess their own social care needs. Following a review of available software packages, OLM has been selected as the best solution for Bromley. An initial plan to work with another software developer did not proceed due to technical and cost issues. OLM currently provide Bromley's social care client information system and are well placed to work with the Council to roll out the web-based IAG system.
- 3.4 The website will provide an information, advice and guidance 'portal', including directory of care services and products available, self-assessment questionnaires, a personal budget calculator, and, in time, will have the capability to provide individual personal budget statements, citizen accounts, user ratings and review facilities. The system is currently under development, and, over the coming months, its functionality will expand with the following milestones:

January 2011:

- Basic website (information, advice and guidance only) in place; user acceptance testing through working group and through libraries to assess effectiveness prior to launch.

March 2011:

- Enhancements to information, advice and guidance, to include events pages, and service guides; improvements to 'search' function.
- Site feedback – users can provide views on their experience of using the website, and can rate services used.
- MyAccount – users can save a personal calendar of events.
- Self-Assessment Questionnaires and resource allocation system– users can complete and submit to the Council a self-assessment questionnaire.

June 2011 – ongoing enhancements, with new developments including:

- Site feedback enhancements – users can submit 'stories' about services for publication following approval; users and providers can submit events for publication.
- Support planning – users can download a Support Plan template for submission.

September 2011 – ongoing enhancements, with new developments including:

- Client Personal Budget statement – statements can be sent to MyAccount, where they can be viewed as a PDF.

- e-Commerce/e-Market – links to e-Commerce/e-Market to allow users to purchase services on-line.

- 3.5 It is recognised that a proportion of the social care target audience will need support to use the website. This is despite the increasing coverage and usage of the Web as a source of information on Council services: research indicates that usage of the Council’s main website has increased from 27% in 2005 to 52% in November 2009, with 29% of residents rating the Council’s website as the most useful source of Council information. However, while 96% of under 60s reported home-based web access, this fell to 49% for over 60s.
- 3.6 As a result, it is planned that access to the information, advice and guidance for social care will be available through Bromley’s libraries. The website will be accessible within libraries and, as with the Department’s ‘Homeseekers’ choice-based lettings housing allocation system, library staff will be able to assist customers gaining access to the system from the public access computer terminals within their local library.
- 3.7 As well as free access to the web, Bromley libraries also provide tutorials on computer and web usage. The 2009 Public Library Users Survey indicates that 30% of library users are over 65; of these, 90% have been using the library for more than three years. Between April 2009 and March 2010, 861 people attended computer sessions aimed at older people (the Silver Surfer, and Older and Bolder groups).
- 3.8 In partnership with Bromley Libraries and the Field Studies Centre, the SIB programme is utilising Future Jobs Fund candidates to provide support to those accessing Council websites, and to carry out research into how web access can be promoted in future. The Future Jobs Fund is a project to provide young people aged 18-25 who are long-term unemployed with a six-month work placement, although graduates are fast-tracked onto the project. The candidates are paid at minimum wage; these costs are met by central government and the Council meets training and support costs. Initial indications are that the scheme is working well; as yet, there is limited monitoring information available, but its impact is being monitored. The libraries are tracking the number of people assisted by Future Jobs Fund candidates, as well as the kind of queries asked, in order to develop future support plans.
- 3.9 The scheme has been advertised in the local press and a communications plan is in place to promote it alongside the launch of the new web-based information, advice and guidance system; the scheme may be rolled out to the one-stop shops at Cotmandene and Mottingham.

4. POLICY IMPLICATIONS

Information, advice and guidance is a key part of the Supporting Independence Programme, and supports the overall Building a Better Bromley criteria of Supporting Independence.

5. FINANCIAL IMPLICATIONS

The website has been purchased on a trial basis, at an initial cost of £85k for the first year, funded from the Transforming Social Care Capital budget for 2010/11.

Future Jobs Fund candidates are paid for by the Future Jobs Fund project, and costs are met by Central Government. There is a small cost of approximately £1,500, associated with the training programme, which provides additional training in social care issues, and this is being funded from within the overall Transforming Social Care budget for 2010/11.

Non-Applicable Sections:	Personnel
Background Documents: (Access via Contact Officer)	N/A

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Supporting Independence

A strategy for information, advice and guidance for Adult and Community Services, London Borough of Bromley

Information, advice and advocacy are essential for all adults and their relatives and carers, who need, or may need, services and support in order to lead their lives.

Improvement and Development Agency, 2009

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Foreword by the Director of Adult and Community Services, London Borough of Bromley

Information, advice and guidance is paramount in the provision of services for adults with social care needs. We have developed our strategy to ensure that those who meet eligibility criteria, those who don't meet eligibility criteria (under Fair Access to Care), and those who self-fund, are able to access timely and accurate information, advice and guidance that is provided in an appropriate format and setting. Ultimately, we want to ensure that people can make informed choices to support their lives.

To achieve this, we have adopted a 'universal' system to the provision of information, advice and guidance, which will support people who are traditionally excluded from the social care system, such as those who fund their own care, or who do not meet statutory eligibility criteria. Self funders, particularly older people, account for a significant proportion of service users; currently, this is estimated to be 35%, and this figure is expected to rise.

We want to ensure that we provide information, advice and guidance to help both those funded by the Council and self-funders to know what services are available, and what will most appropriately meet their needs. To this end, we have been working on the Bromley 'model' for the provision of these support services, contracting

with specialist organisations who we feel are best placed to support the needs of service users, and developing partnerships with other public organisations as well as voluntary and community sector groups. We are also developing and enhancing in-house provision of information, advice and guidance, through our call centre, Bromley Social Services Direct, and through our new website, *Bromley MyLife*. Through these systems, we will ensure that people are correctly signposted to organisations best suited to meet their needs, as and when they require support.

Through this approach, we will ensure that people have a range of support choices that facilitate decision-making and enable them to find their own solutions, so that they can remain independent within the community.

Terry Rich, Director

Introduction: an Information, Advice and Guidance Strategy

The development of the strategy is part of the three-year national personalisation programme, which is managed within the Supporting Independence in Bromley programme. This was formed to establish a more personalised system of support that is more responsive to the needs both of those who use services, and carers.

The programme is designed to promote the independence, health and wellbeing of service users and carers by focusing on prevention, early intervention, enablement and high-quality, personally tailored services. It was established that the programme's success depended on ensuring that people with social care needs were able to access information, advice and guidance to assess their needs, to secure and manage services, and to make the most of their own and public funds to meet their needs in the most effective manner.

This is in accordance with Department of Health (DoH) requirements, which state that:

- § All citizens can easily find locally relevant, quality information and advice about care and support needs
- § Information is available through a range of channels and formats
- § Provision of information, advice and guidance moves from development for separate initiatives to a single, coherent service strategy.

Using ADASS definitions:

- § **Information** is defined as “the open and accessible supply of material deemed to be of interest to a particular population. This can be either passively available or actively distributed”.

This is interpreted in Bromley as when **a person knows their needs, and is able to seek out and to extract relevant information for their needs. Organisations may specifically target individuals if their information is pertinent.**

- § **Advice** “offers guidance and direction on a particular course of action which needs to be undertaken in order to realise a need, access a service or realise individual entitlements”.

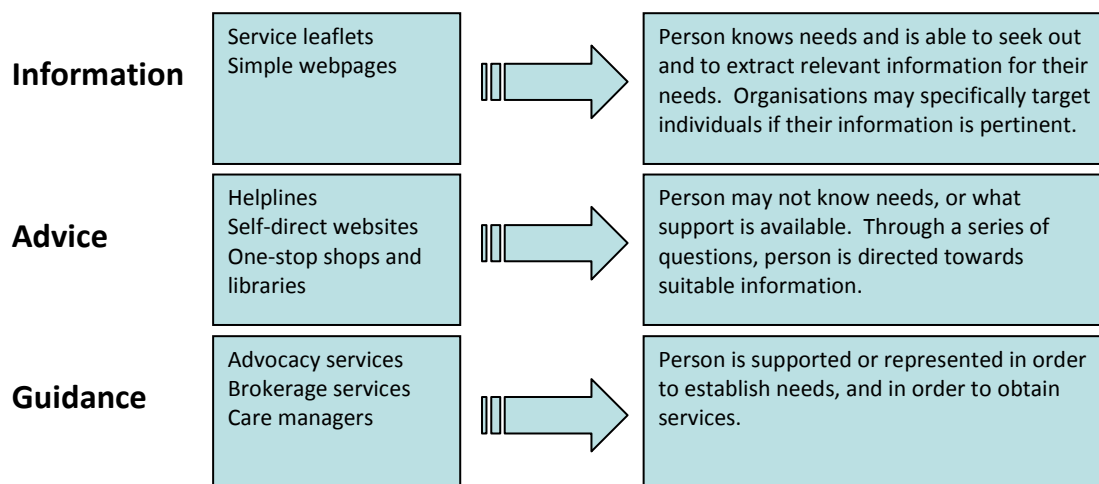
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This is interpreted as when a **person may not know their needs, or what support is available. Through a series of questions, they are directed towards suitable information.**

§ **Guidance** is “the provision of support and encouragement, or representation of individuals’ views, needs or rights. It is fundamental that advocacy recognises the centrality of the service user”.

This is interpreted as when a **person is supported or represented in order to establish their needs, and in order to obtain services.**

In Bromley, this is viewed as a three-level approach to supporting people’s IAG needs, depicted below.



Provision of Information, Advice and Guidance: the Bromley model

The Council provides information about core services, and outsources for the provision of specialist information, advice and guidance. Tracing the ‘user journey’, and consulting with prospective and current care service users, we have tested and improved the IAG model.

Information: the universal approach

Information is available for all residents; however, it is static – that is, people need to know what they are looking for, and they need to understand their needs. At present, the Council and a range of specialist organisations, many part-funded by the Council, take responsibility for producing service information for the public.

The priority here is to ensure that there is a broad range of information available, which is tailored according to the appropriate audience. While this means there are overlaps in the information available, it promotes a level of choice for the public, who can go to a range of organisations and outlets and find the information that they need. Where organisations are reporting on services that are provided by others, protocols have been developed so that any service changes are communicated between organisations, to ensure accuracy.

Advice: the universal approach

The Council acts as a hub for all residents, directing them as appropriate to the organisation best suited to meet their needs. It does this through two main mechanisms:

- **Bromley Social Services Direct** – BSSD is a phone line, and is an initial point of contact to find out about care options. They are supported by care managers, who can carry out over-the-phone initial assessments to establish whether callers meet FACS criteria.

BSSD also provides information and advice to residents who do not meet the eligibility criteria, and can signpost to a wide range of resources for further support.

- **Bromley MyLife (currently under development)** – this is the Council’s interactive social care website. It incorporates a searchable web-based directory of all social care services available to the community, including details on all services and organisations across the statutory, community and private sectors.

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There are user forms, frequently asked questions pages, and user journeys; residents also have the facility to provide feedback on their experience of services, which they can 'rate'. Residents can view other users' comments. By filling in simple on-line questionnaires, residents will receive instant advice on the kind of care they may need. If residents wish to provide contact details, this information will be sent to the relevant care team, who can then contact them to discuss care needs further.

Similarly, the organisations with whom the Council contracts to provide advice will signpost residents to the most relevant organisation to meet their needs.

In addition, the Council provides signposting to services and service providers at its libraries, which are located around the borough, and at its two community one-stop shops, located in Cotmandene and Mottingham. Similarly, the organisations that the Council contracts with for the provision of information, advice and guidance provide a range of locations for the delivery of services, dependent on perceived need and uptake.

Guidance: the universal offer

Where residents are not entitled to care through the Council, because they do not meet financial criteria or FACS criteria, but they still wish to receive care services, they can use either information provided by BSSD or information on the website to source the most suitable package.

If residents do not wish to source this care themselves, then they can use the brokerage services, funded by the Council. These are in place for older people through Age Concern and for people with learning disabilities through Mencap.

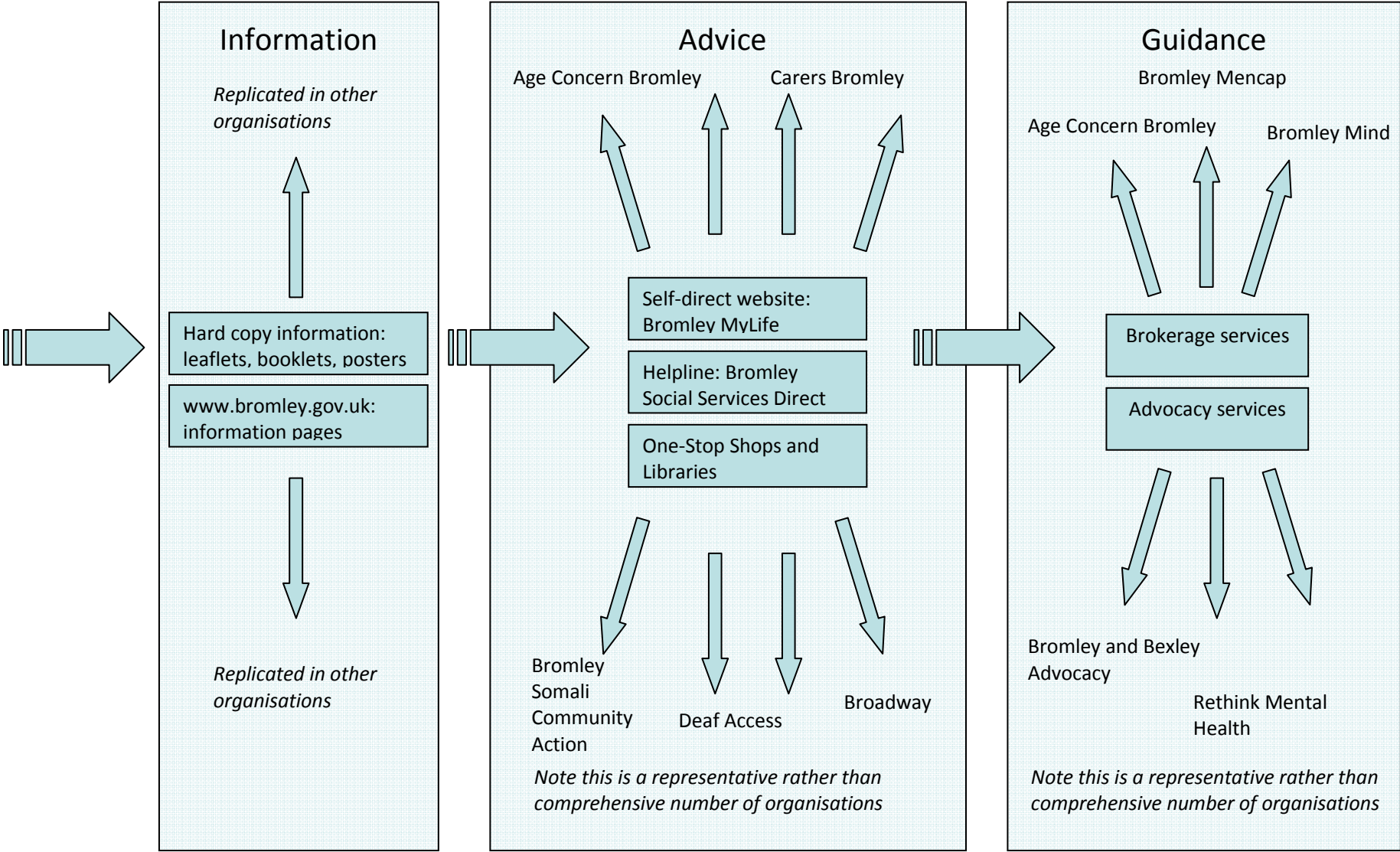
Additionally, the Council holds contracts with a number of organisations who provide advocacy support to those residents who do not meet eligibility criteria, for a number of support issues, including legal and consumer support, for example.

Guidance: the targeted offer

Where residents are entitled to care through the Council, after an initial contact assessment, they will be referred for reablement; throughout the time that a resident remains within the care of the Council, the Council's care management staff will provide information, advice and guidance.

All residents entitled to care through the Council are eligible for a personal budget, which can be used to buy care and support services. Where a resident opts for a personal budget, guidance is provided through an independent advocacy service, funded by the Council.

Information, Advice and Guidance: the Bromley model



Strategic objectives

The vision of the strategy is that **“Information, advice and guidance in Bromley is timely, accurate, and provided in an appropriate format and setting, so that people can make informed choices to support their lives”**.

The landmark Putting People First concordat outlined a shared vision to provide a personalised adult social care system. Local Authorities have the lead role in the delivery of personalised services, accompanied by a requirement for authentic partnership working with the local PCT, other statutory agencies, third and private sector providers, users and carers, and the wider local community.

Through shared contracts with both public organisations (including Oxleas and the PCT) as well as voluntary and community sector organisations, the Council has adopted a partnership approach to the provision of information, advice and guidance that maximises specialist knowledge of organisations to the benefit of the public. The Council contracts for a wide range of needs, including those not traditionally within the remit of council services, such as those services supporting stroke sufferers, and people with HIV or Aids, which again demonstrates the partnership approach to the provision of support to the public.

Through a series of consultations with the public and workshops with key information, advice and guidance providers, plans for future development have been drawn up.

Key to this is the newly formed **Bromley Advice and Information Network (BAIN)**, chaired and managed by Community Links, whose membership includes all those organisations who have a role in the provision of information, advice and guidance to the public (not just those currently commissioned by the Council).

1. People can access information, advice and guidance when they need it

- The Council signposts people, through BSSD, the web portal, libraries and community one-stop shops, to relevant organisations; similarly, organisations signpost between each other and the Council, if people come to them directly, as appropriate.

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- Organisations meet regularly, through BAIN, to ensure they are fully aware of the services provided by each other.

2. People can be assured that the information, advice and guidance they receive is accurate and up to date

- The Council and organisations funded by the Council to provide information, advice and guidance are accredited with a chosen quality standard for communications, as part of a joint approach to training.
- All organisations providing information, advice and guidance meet regularly, as part of BAIN, to ensure awareness of changes in services.
- There are protocols in place to ensure there is shared knowledge of changes in information and details for organisations: all organisations take responsibility for ensuring that they inform others of changes

3. People are able to access information, advice and guidance from a range of locations

- The Council uses libraries as a repository for information, advice and guidance. The libraries are located throughout the borough and are hubs for community access to social care information; they have supported access to a range of on-line information and advice. Residents are guided and supported by designated library staff, and, for a trial period, by Future Job Fund employees. Libraries also have the full range of leaflets and booklets on services, as well as details of voluntary and community sector organisations.
- Through contracts with voluntary and community sector organisations, the Council ensures that there is wide coverage of services across the borough, and actively supports branch development.

4. People are able to access information, advice and guidance in all appropriate formats

- The Council works with voluntary and community sector organisations through the Bromley Information and Advice Network to ensure that best practice regarding formats for service user groups is disseminated.
- Upon request, the Council will ensure that information, advice and guidance is available in a range of different formats, such as Braille, large print and audio, and has contracts with, for example, Kent Association for the Blind for the provision of audio information.

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- The Council is working within libraries to promote web access to services, and is offering a range of training programmes free of charge to the community to increase web understanding.
- The Council's contracts with voluntary and community sector organisations are for a wide variety of provision: from home visits, to phone-lines, and from drop-in centres to web-based information.

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Action Plan

Action	Detail	Strategic objectives	Costs	Progress to date
Purchase of an 'advice' website	As part of its commitment to a strategic approach to the provision of information, advice and guidance, the Council will purchase an 'advice' website that supports the work of BSSD, and is used by all organisations involved in the dissemination of information, advice and guidance in the borough as a means of effective signposting. Further, it will provide users with a means of self-assessing needs, and with managing personal budgets and other services.	Meets all strategic objectives	£60k annually, plus internal upkeep. Initial (two-year) funding will be met from SIB budgets. Website's impact will be measured in order to determine where savings are being made, and where future funding will therefore come from.	OLM product in process of procurement; product will be implemented in three phases. Planned implementation and launch for end of year.
Support for use of website	The Council provides support to public to encourage the use of Council websites, initially through libraries. Research indicates that, while use of the main Council website has greatly increased (Up 25% from 2005, to 52% in November 2009), users are not well aware of what it can be used to accomplish; similarly, while home access stands at 96% for those under 60, it drops to 49% for those over 60.	Meets all strategic objectives	Limited costs currently – the Council is using the Future Jobs Fund (a government- funded scheme to provide work and experience to those aged 18-25 who are out of work) to provide support in libraries. Budget has been used to provide a supplementary day's training specifically in Adult Social Care and facilitating decision-making to candidates, at a cost of £500 per day.	Tranche One (five candidates) of the Future Jobs Fund recruited and trained; currently working in Central Library, Bromley. Scheme's success to be reviewed (monitoring in place); consideration to be given to providing support in other libraries and in the one-stop shops at Cotmandene and Mottingham. Communications plan in place for promotion of scheme and website.

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Ongoing contract review	The Council continues to review closely the effectiveness of current contracts for the provision of information, advice and guidance, maintaining the emphasis on the provision of choice of organisations for people to access, but streamlining contracts where overlap, following review, is not deemed productive.	Meets objectives 1, (mainly) 3 and 4	Potential savings, dependent on review outcomes	Contracts currently providing information, advice and guidance services reviewed; findings passed to commissioners for follow-up. Commissioners to review further, and to report changes. “Baseline” of current contract performance to be established (limited information available at present), so that the impact of the website and other developments can be tracked.
Community Links – relaunch of Bromley Advice and Information Network	The Council, through Community Links, organises and supports Bromley Advice and Information Network, as an avenue for sharing best practice, for developing signposting protocols, and for developing joint service promotion initiatives; that the network develops a ‘brand’ identity in order to promote services	Meets objective 2 (mainly)	No costs as this is already part of the remit of Community Links; potential non-cashable savings (efficiencies), dependent on impact	Meeting established with Community Links to plan future progress, following input from other organisations. Effect of network to be reviewed against impact on current information, advice and guidance contracts.
Joint training initiatives organised with public, voluntary and community sector organisations currently tasked with providing information, advice and guidance	Joint training initiatives are organised as part of the drive to promote quality standards in the provision of information, advice and guidance	Meets objective 2 (mainly)	Limited costs; training programme is being considered, in conjunction with ACS Communications Team	Work carried out with the ACS communications lead to investigate quality standards accreditations. Training schemes to be rolled out through the Bromley Information and Advice Network.

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<p>Consultation is carried out regularly with the public</p>	<p>Consultation is carried out with the public to ascertain information, advice and guidance needs, and specifically the likely impact of a self-direct website on potential user groups</p>	<p>Meets all objectives</p>	<p>Costs can be contained by joining up with events and other consultation opportunities.</p>	<p>Questionnaires used at Adult Information Day; further questionnaires provided to libraries and to one-stop shops for dissemination. ACS to be kept up to date with detailed research carried out corporately into website usage.</p>
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Annex 1: Current contractual arrangements

To an extent, all service providers will provide an element of information, advice and guidance to residents; the selection of contracts looks at either those organisations specifically contracted to provide information, advice and guidance, or those organisations whose key output is information, advice and guidance (such as Citizens Advice Bureau). While there are some contracts where this distinction is not clear, the majority included have an overall emphasis on information, advice and guidance.

Please note that these figures do not include:

- Core provision such as day services and domiciliary care (note, however, that the day care services provided by BME organisations were deemed to be focused on the provision of information, advice and guidance; as a result, these contracts have been included);
- Job support initiatives;
- User group funding (self advocacy);
- Tenancy (floating) support (except in the case where these services are 'universally' available; i.e. service users do not meet FACS criteria);
- Contracts procured solely on behalf of the PCT;
- Contracts where, although there is a strong emphasis on information, advice and guidance, the remit is significantly wider; examples include:

Kent Association for the Blind	16164	PDSI (SI)	Services for the blind	01/04/2006-31/03/2011
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Contracts with a focus on information, advice and guidance

Total: **£1,293,694.00**

Name	Ref no	Core group	Service details	Dates
Advocacy First	025218	Older people	Advocacy services	01/04/2010-31/03/2011

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Age Concern	016094	Older people, carers	Strategic partnership	01/04/2010-31/03/2017
Age Concern	016093	Older people, carers	Support planning and brokerage	01/04/2007-31/03/2011
Bexley and Bromley Advocacy	022351	Learning disabilities	Bromley Sparks (self advocacy group)	01/04/2010-31/03/2011
Bexley and Bromley Advocacy	022353	Learning disabilities	Bromley advocacy worker	01/04/2008-31/03/2011
Bexley and Bromley Advocacy	022352	Learning disabilities	Speaking up group	01/04/2010-31.03.2011
Body and Soul	18087	HIV/Aids: Health	People living with and affected by HIV/Aids	01/04/2008-31/03/2009
Broadway	025420	Mental Health	Welfare benefits service	01/04/2010-31/03/2013
Bromley Asian Cultural Association	016773	BME	Day care for Asian older people (Carers' Grant)	01/04/2008-31/03/2011
Bromley Somali Community Association	022345	BME	Information and support - drop-in centre	01/02/2010-31/01/2011
Bromley Mencap	018092	Learning disabilities	Core funding	01/04/2009-31/03/2012
Bromley Mencap	018084	Learning disabilities	Provision of a brokerage service	01/12/2008-31/01/2011
Bromley Mind	TBC	Mental Health	Core funding	TBC
Carers Bromley	025663	Carers	Provision of services for carers in Bromley	01/04/2010-31/03/2017
Citizens Advice Bureau	017680	Universal	For the provision of general advice	01/11/2008-31/10/211
Citizens Advice Bureau	016561	Universal	Independent housing advice forum	01/03/2009-31/10/2011
Deaf Access	018088	PDSI (SI)	Provision of services for people with hearing impairments	01/04/2009-31/03/2012
Inspire	016223	Service users	Provision of community-based direct payments support services	01/01/2008-31/01/2011
The Junction	018367	HIV/Aids: Health	Bromley positive family space	01/04/2009-31/03/2012

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Pineapple Club	016173	BME	Ethnic community project	01/06/2006-30/09/2010
Pineapple Club	016170	BME	Day care for Afro-Caribbean adults core funding – older people	01/04/2006-31/03/2011
Rethink Mental Health	025419	Mental Health	Advocacy services	01/04/2010-31/03/2013
Somali Well Women Project	016776	BME	Day care for Somali older women (Carers' Grant)	01/04/2008-31/03/2011
Stroke Association	018080	Stroke: Health	Support services for families and carers affected by stroke	
Terrence Higgins Trust	018086	HIV/Aids: Health	People living with and affected by HIV/Aids	01/04/2009-31/03/2012

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Information, Advice and Guidance by designation

Total spent on information, advice and guidance: £507,925.00

Total spent on advice: £419,473.00

Total spent on guidance: £366,296.00

Name	Ref no	Core group	Service details	Dates
Advocacy First	025218	GUIDANCE	Advocacy services for older people	01/04/2010-31/03/2011
Age Concern	016094	IAG	Strategic partnership	01/04/2010-31/03/2017
Age Concern	016093	GUIDANCE	Support planning and brokerage	01/04/2007-31/03/2011
Bexley and Bromley Advocacy	022351	GUIDANCE	Bromley Sparks (self advocacy group)	01/04/2010-31/03/2011
Bexley and Bromley Advocacy	022353	GUIDANCE	Bromley advocacy worker	01/04/2008-31/03/2011
Bexley and Bromley Advocacy	022352	GUIDANCE	Speaking up group	01/04/2010-31.03.2011
Body and Soul	18087	ADVICE	People living with and affected by HIV/Aids	01/04/2008-31/03/2009
Broadway	025420	ADVICE	Welfare benefits service	01/04/2010-31/03/2013
Bromley Asian Cultural Association	016773	ADVICE	Day care for Asian older people (Carers' Grant)	01/04/2008-31/03/2011
Bromley Mencap	018092	IAG	Core funding	01/04/2009-31/03/2012
Bromley Mencap	018084	GUIDANCE	Provision of a brokerage service	01/12/2008-31/01/2011
Bromley Mind	TBC	IAG	Core funding	TBC
Bromley Somali Community Association	022345	ADVICE	Information and support - drop-in centre	01/02/2010-31/01/2011
Carers Bromley	025663	IAG	Provision of services for carers in Bromley	01/04/2010-31/03/2017
Citizens Advice Bureau	017680	ADVICE	For the provision of general advice	01/11/2008-31/10/211

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Citizens Advice Bureau	016561	ADVICE	Independent housing advice forum	01/03/2009-31/10/2011
Deaf Access	018088	IAG	Provision of services for people with hearing impairments	01/04/2009-31/03/2012
Inspire	016223	GUIDANCE	Provision of community-based direct payments support services	01/01/2008-31/01/2011
The Junction	018367	ADVICE	Bromley positive family space	01/04/2009-31/03/2012
Pineapple Club	016173	IAG	Ethnic community project	01/06/2006-30/09/2010
Pineapple Club	016170	ADVICE	Day care for Afro-Caribbean adults core funding – older people	01/04/2006-31/03/2011
Rethink Mental Health	025419	GUIDANCE	Advocacy services	01/04/2010-31/03/2013
Somali Well Women Project	016776	ADVICE	Day care for Somali older women (Carers' Grant)	01/04/2008-31/03/2011
Stroke Association	018080	ADVICE	Support services for families and carers affected by stroke	
Terrence Higgins Trust	018086	ADVICE	People living with and affected by HIV/Aids	01/04/2009-31/03/2012

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Annex 2: IAG workshop details

Summary of workshop outcomes

Overall, there were three main themes to the discussion, all dominated by emphasis on quality assurance and the promotion of choice; these were:

- Formats
- Points of access
- Joined- up approach (developing a joined-up approach to information management and provision)

It was agreed generally that, as people have rounded lives, we need information covering a wide range of subjects; however, groups also felt that there was a danger of ‘information overload’ – that therefore information needed to be targeted appropriately. This stressed the need for effective signposting between organisations, which was a recurring theme throughout the four discussions.

There was also consideration given to evaluating success of IAG:

- Use of mystery shopping should be explored
- We could use questions on websites, such as ‘where did you hear about us?’

Formats

Issues	Solutions proposed
Choice of options is important (e.g. website, face-to-face, paper-based).	Maintain level of choice and different models for provision, in accordance with client group needs.
Easy-read options should be in place.	
We need to adopt a standard approach to quality assurance (develop universal ‘good practice’ standards). This must include committing to using no acronyms!	BAIN (Bromley Advice and Information Network) is working to drive up quality. Organisations use a range of standards, including Plain English, quality legal standards, Crystal Marks, etc – could we adopt a shared approach, where feasible?
Websites are frequently inappropriate for the visually impaired.	BrowseAloud access needs to be included in web requirements/standards.
Use of technology generally needs to be considered.	Tracking website usage is important, to understand who is accessing them.

Points of access

Issues	Solutions proposed
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Key 'gatekeepers' include GPs and the Council (BSSD and website) – health is a primary point of access. Note GPs suffer from 'information overload'.	One-stop shops could be shared, as the drive is to cut home visiting; can organisations get to outreach centres?
We need to link effectively between boroughs.	
Information tends to be focused on those already known to the statutory and/or third sector organisations .	We need to advertise and market our services, using free avenues, such as street furniture; we could also target cafes and supermarkets, as appropriate.
We need to avoid people asking for help when they are in crisis – i.e. preventative IAG.	
We need to have clear out-of-office protocols.	

A joined up approach

Issues	Solutions proposed
Strategic partners have a good relationship, but referrals between organisations are not being carried out appropriately; this is because of a lack of knowledge.	Joint training could be carried out between organisations.
Partner websites and outreach points often provide out-of-date information – people update their own data but do not pass the information on. There is no structured method to communicate changes. There is duplication (of lists, databases, etc) occurring.	Websites need to be linked – note, however, that skill sets in different organisations are not always adequate for web work. Should we have in place a six-monthly 'is your information up to date?' questionnaire (who would coordinate this?) Leaflets (and other information) should be kept generic where possible so that they do not go out of date – note that there was a query about why no direct contact details were provided on the Council's website: this is to ensure that information does not go out of date. National bodies – more appropriate to give up-to-date information.
There is a lack of information about key services, such as day centres.	Newsletters provide an opportunity to work together and to share information

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	– this should be used (suggestion of a central repository – extranet? – for newsletters).
Unwritten protocols exist between agencies for signposting.	

Report No.
ACS11003

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: Adult & Community Services Portfolio Holder

Date: For Pre-Decision Scrutiny at the Adult and Community PDS Committee meeting held on 25 January 2011

Decision Type: Non-Urgent Executive Non-Key

Title: PORTFOLIO PRIORITIES AND PERFORMANCE FRAMEWORK FOR 2011- 2012

Contact Officer: Helen Stewart Information Systems and Performance Manager ,
Tel: 020 8313-4110 E-mail: helen.stewart@bromley.gov.uk

Chief Officer: Terry Rich Director of Adult & Community Services

Ward: All

1. REASON FOR REPORT

To update members on the emerging priorities for 2011-12 from this years Portfolio Planning Day and in the context of the proposed new performance assessment framework for adult social care recently announced by the Government.

2. RECOMMENDATION(S)

The PDS Committee is asked to consider and comment on the report;

1. Note the areas of priorities resulting from the Portfolio Planning Conference.
2. Note the proposed Outcomes Based Assessment framework currently under consultation by the Government
3. Note the outcome of the Annual Performance Assessment for Adult Social Care 2009/10, - Performing Well.

Corporate Policy

1. Policy Status: Existing policy. Building a Better Bromley
 2. BBB Priority: Excellent Council. Supporting Independence
-

Financial

1. Cost of proposal: No cost No additional cost arises.
 2. Ongoing costs: N/A. Non Recurring cost
 3. Budget head/performance centre: Adult and Community Services
 4. Total current budget for this head: £96.4m (2010.11 Budget
 5. Source of funding: Current Budget
-

Staff

1. Number of staff (current and additional): 799 full time equivalent posts (as per 2010/11 budget)
 2. If from existing staff resources, number of staff hours: ?
-

Legal

1. Legal Requirement: Statutory requirement. Both adult Social care and Housing needs Service is governed by legislation (NHS Community Care Act 1990 and Housing act 1996 and Homelessness Act 2002)
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Approx 8,500 receiving services in social care with approximately 6700 people on the Housing Register across the Portfolio. Housing Advice Options work with in excess of 4,000 households each year who are experiencing a variety of household difficulties. Approximately 2,000 people are supported by the Home Improvement Agency annually.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

3.1 This year's Portfolio Planning day built on previous year's themes of supporting independence, and choice and control by considering the opportunities to continue to deliver these outcomes within a much tighter financial situation. As in previous years, the vast majority of last years Portfolio priorities will be achieved and at this years Planning day, ACS staff with the portfolio Holder, representatives from voluntary and community groups and service considered three key issues to continue effective planning for the future;

- If the overall amount of resource is reduced how will current service provider in all sectors respond?
- What are the potential risks and how will they be managed?
- What are the practicalities of making this all happen?

3.2 As outlined in the recent Portfolio Planning Day newsletter ([Portfolio Plan 2010 Feedback Newsletter](#)) the key priorities emerging from the day include:

- Development of local neighbourhood networks (i.e. face book "my street"), building on an example that Community Links has been involved with locally.
- Voluntary sector leadership in making changes with business transition support from all partners, including the Council.
- Market of good ideas sharing skill resources, including the development of micro providers, ensuring that people with care needs are able to contribute.
- Carers changing expectations via a full and open dialogue with carers around shifting the balance.
- Developing the role of service users, providing opportunities for service users to assess their own needs and constructing their own support plans
- Prevention and safeguarding, ensuring we maintain people's well being.

3.3 As announced by the Government on November 16th 2010, their vision for a modern system of social care is built on seven principles,([A Vision for Adult Social Care](#)) which are :

- **Prevention:** empowered people and strong communities will work together to maintain independence. Where the state is needed, it supports communities and helps people to retain and regain independence.
- **Personalisation:** individuals not institutions take control of their care. Personal budgets, preferably as direct payments, are provided to all eligible people. Information about care and support is available for all local people, regardless of whether or not they fund their own care.
- **Partnership:** care and support delivered in a partnership between individuals, communities, the voluntary and private sectors, the NHS and councils - including wider support services, such as housing.
- **Plurality:** the variety of people's needs is matched by diverse service provision, with a broad market of high quality service providers.
- **Protection:** there are sensible safeguards against the risk of abuse or neglect. Risk is no longer an excuse to limit people's freedom.
- **Productivity:** greater local accountability will drive improvements and innovation to deliver higher productivity and high quality care and support services. A focus on publishing information about agreed quality outcomes will support transparency and accountability.
- **People:** we can draw on a workforce who can provide care and support with skill, compassion and imagination, and who are given the freedom and support to do so. We need the whole workforce, including care workers, nurses, occupational therapists,

physiotherapists and social workers, alongside carers and the people who use services, to lead the changes set out here

- 3.4 Over the coming months these seven principles which are inline with our local priorities across social care and housing will be worked up into the draft portfolio plan for stakeholders to consider before the final plan is agreed by the Portfolio Holder for next year. The draft plan will be presented at the PDS meeting in 29th March 2011 with the aim of achieving final sign off by the meeting in June 2011.
- 3.5 The Government also announced on the 16th November 2010 new proposals to change the adult social care outcomes framework ([Transparency In Outcomes: a framework for adult social care](#)). The 2011/12 portfolio plan will take account these changes in that the future social care performance will be measured against 4 outcomes and local councils will be responsible for producing a public annual report of performance against these areas:
- Promoting personalisation and enhancing quality of life for people with care and support needs;
 - Preventing deterioration, delaying dependency and supporting recovery;
 - Ensuring a positive experience of care and support;
 - Protecting from avoidable harm and caring in a safe environment;
- 3.6 The consultation with Councils on the proposed framework continues until February 2011, with the new framework being implemented from April 2011, and Appendix 1 provides a full analysis of:
- the adult social care outcomes supporting the above domains;
 - the proposed measures and data sources;
 - the proposed collection timetable;
- 3.7 The requirement to survey and gain service user feedback has increased with the revised outcomes framework, with the Annual Adult Social Care Survey for 2010 / 11 having been expanded to cover all client groups and refocused on accessing their views and the impact that the transformation agenda (Supporting Independence in Bromley) has had.
- 3.8 These proposals are very new. However, Bromley is well positioned to meet the requirement to annually report on performance against the new framework, given the regular performance reporting and annual reports already developed and available to elected members and the public. These include for example, the complaints, safeguarding, quality of domiciliary and care homes reports as well as the overarching performance reports on the portfolio priorities. Work is now underway to develop Bromley's Adult Social Care annual performance report as outlined in the new proposals for the current performance year (2010 / 2011).
- 3.9 Additionally, although CQC will no longer be publishing annual performance ratings for adult social care in the future, in it's final year 2009 / 2010 Bromley's adult social care services are recognised as "Performing well". (For full performance report please access [Bromley's Annual Performance Report 2009-2010](#)).
- 3.10 The CQC performance assessment has recognised a significant range of strengths across all service areas in 2009/2010 which support the department's own assessment of performance, including:
- Improved performance in the speed of assessments and reviews. Service user reviews as well as carer assessments and reviews are above that of comparators.

- Significant progress in safeguarding, with quality assurance mechanisms in place which show improved consistency in practice. Communication with staff and awareness of safeguarding is improved and competency based training for staff has been implemented as planned.
- More timely services for people in Bromley when transferring from hospital than in comparator councils, and an increase in community based intermediate care options.
- Improved uptake of self directed support.
- Demonstrable learning from service user and carer complaints.
- Well established brokerage systems for people who are not eligible for care under Council criteria.
- Improved mechanisms for engagement with stakeholders and improved engagement with third sector organisations.
- Continuing help for people with disabilities into employment, with performance comparable with last year.

3.11 The Care Quality Commission has also identified some key areas for development which will be addressed within the portfolio plan including:

- Improve the completion rate of safeguarding investigations and continue to embed a systematic process for gathering people's views and experiences of the safeguarding process.
- Continue to develop and expand the re-ablement and intermediate care services as planned and ensure effective co-ordination.
- Continue the work of the mobility forum and demonstrate how views are acted upon.
- Implement a systematic outcomes framework based on people's experiences to demonstrate the effectiveness of personalisation to support choice and independence.

4. FINANCIAL IMPLICATIONS

4.1 The Four Year Financial Forecast gives an overview of the key service and financial pressures facing the Council and identifies in detail the cost pressures facing the Adult and Community Services department. As part of the Portfolio Planning process linkages are made with the Financial Forecast to ensure that any additional cost pressure or savings that arise are taken into account.

5. PERSONNEL IMPLICATIONS

5.1 There are no legal implications directly arising from this report. Any legal implications arising from the implementation of the various actions contained within the plan will be reported to the PDS Committee.

Non-Applicable Sections:	Policy & Legal Considerations

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Report No.
ACS11008

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: Adult & Community Portfolio Holder

Date: For Pre-decision Scrutiny by the Adult & Community PDS Committee on 25th January 2011

Decision Type: Non-Urgent Executive Key

Title: **BUDGET MONITORING 2010/11 - ADULT & COMMUNITY SERVICES**

Contact Officer: Tracey Pearson, Interim Head of Finance,
Tel: 020 8461 7806 E-mail: tracey.pearson@bromley.gov.uk

Chief Officer: Terry Rich, Director of Adult & Community Services

Ward: Borough Wide

1. Reason for report

This report provides the budget monitoring position for the Adult and Community Portfolio, based on expenditure and activity levels up to 30th November 2010.

RECOMMENDATION(S)

The Portfolio Holder is requested to note that a projected overspend of £192,000 is forecast on the controllable budget for the Adult and Community Portfolio as at 30th November.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Excellent Council.
-

Financial

1. Cost of proposal: N/A
 2. Ongoing costs: Recurring cost.
 3. Budget head/performance centre: All Adult & Community Services Portfolio Budgets
 4. Total current budget for this head: £96.4M
 5. Source of funding: Existing revenue budgets
-

Staff

1. Number of staff (current and additional): 798 fte's
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: Statutory requirement. The statutory duties relating to financial reporting are covered within the Local Government Act 1972; the Local Government Finance Act 1998; the Accounts and Audit Regulations 1996; the Local Government Act 2000; and the Local Government Act 2002.
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): The 2010/11 budget reflects the financial impact of the Council's strategies, service plans etc. which impact on all of the Council's customers (including council tax payers) and users of the services.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

3. CHIEF OFFICER'S COMMENTS

- 3.1 At the end of November there was an overall improvement in the projected outturn, however pressures both in year and in relation to the full year effect rolling forward into next year remain, particularly in the area of physical disabilities where there are still substantial cost pressures from unavoidable demand in which is leading to significant risk in spend in future years.
- 3.2 The impact of reablement on the cost of ongoing care packages for older people and of robust reviewing of current high cost packages for clients with physical disabilities are delivering some savings. These will be tracked over the coming months and should begin to impact on both in year but more crucially on future year costs.
- 3.3 Through identifying in year savings across other divisions, the department has been successful in addressing the underlying budget position and through the approaches mentioned earlier, remains on course to achieve it's aim of minimizing any projected overspend in the current year and reducing the impact of current commitments in 2011/12.

4. POLICY IMPLICATIONS

- 4.1 The Resources Portfolio Plan for 2010/11 includes the aim of effective monitoring and control of expenditure within budget and includes the target that each service department will spend within its own budget.
- 4.2 Bromley's Best Value Performance Plan "Making a Difference" refers to the Council's intention to remain amongst the lowest Council Tax levels in outer London and the importance of greater focus on priorities.
- 4.3 The four year financial forecast report highlights the financial pressures facing the Council. It remains imperative that strict budgetary control continues to be exercised in 2010/11 to minimise the risk of compounding financial pressures in future years.
- 4.4 Chief Officers and Departmental Heads of Finance are continuing to place emphasis on the need for strict compliance with the Council's budgetary control and monitoring arrangements.

5. FINANCIAL IMPLICATIONS

- 5.1 The 2010/11 projected outturn is shown in Appendix 1 and includes a forecast of projected expenditure for each division, compared to the latest approved budget, with an explanation of any variations. The projections are based on expenditure and activity levels up to November 2010 and show a projected overspend of £192,000 on the "controllable" budget. The final column in Appendix 1 (a) shows the full year impact of any overspends in this financial year which are expected to follow through into next year. Appendix 2 shows the make up of the latest approved budget for the Portfolio.
- 5.2 Costs attributable to individual services have been classified as "controllable" and "non-controllable" in Appendix 1. Budget holders have full responsibility for those budgets classified as "controllable" as any variations relate to those factors over which the budget holder has, in general, direct control. "Non-controllable" budgets are those which are managed outside of individual budget holder's service and, as such, cannot be directly influenced by the budget holder in the shorter term. These include, for example, building maintenance costs and property rents which are managed by the Property Division but are allocated within individual departmental/portfolio budgets to reflect the full cost of the service. As such, any variations arising are shown as "non-controllable" within services but "controllable" within the Resources Portfolio.

Other examples include cross departmental recharges and capital financing costs. This approach, which is reflected in financial monitoring reports to budget holders, should ensure clearer accountability by identifying variations within the service that controls financial performance. Members should specifically refer to the “controllable” budget variations relating to portfolios in considering financial performance.

5.3 The main pressures arise in the Care Services division, where an overspend of £836,000 is currently forecast, which can be analysed as follows;

	£'000
Residential and Nursing Care for Older People	-257
Domiciliary Care for Older People	610
Domiciliary and Residential care for Clients with Physical Disabilities	387
Total Assessment & Care Management	740
Aids-HIV Grant	-45
Learning Disabilities Day Services	-31
Direct Services - Homecare & Meals Service	172
Total Care Services	836

It is anticipated that the overspend on Assessment and Care Management will have a full year effect of around £500k in 2011/12, despite taking account of savings from reablement and through the continuation of management action to review high cost packages, maximize income from health and by maintaining tighter eligibility criteria.

5.4 There has been action to reduce spend in other areas of the department and projected underspends in other divisions total £644,000, which can be summarised as follows;

	£'000
Mental Health Services	-177
Procurement & Contract Compliance - Contract Savings	-150
Other	-55
Total Commissioning & Partnerships Division	-382
Housing Division - Residential Services	-100
Strategic Support Services - Vacancies and departmental running expenses	-162
Projected net underspend	-644

5.5 A further explanation of all variations can be found in appendix 1 (b).

Non-Applicable Sections:	Legal, Personnel, Customer Impact
Background Documents: (Access via Contact Officer)	2010/11 Budget Monitoring files within Adult & Community Services Finance Section

2009/10 Actuals £'000	Division Service Areas	2010/11 Original Budget £'000	2010/11 Latest Approved £'000	2010/11 Projection £'000	Variation £'000	Notes	Variation Last Reported £'000	Full Year Effect £'000
	Care Services							
1	AIDS-HIV Grant	0	0	-45	-45	1	-45	0
30,016	Assessment and Care Management	33,640	33,675	34,415	740	2	716	998
8,116	Direct Services	3,305	4,177	4,349	172	3	161	0
1,671	Learning Disabilities Care Management	1,603	2,072	2,072	0		0	0
2,170	Learning Disabilities Day Services	2,119	2,118	2,087	-31	4	-31	0
1,235	Learning Disabilities Housing & Support	1,244	1,396	1,396	0		0	0
43,209		41,911	43,438	44,274	836		801	998
	Commissioning and Partnerships - ACS Portfolio							
2,732	Commissioning and Partnerships	2,606	2,730	2,739	9		9	0
334	Drugs and Alcohol	236	338	313	-25		-5	0
13,517	Learning Disabilities Services	14,734	14,984	14,945	-39	5	-30	600
4,736	Mental Health Services	4,839	4,840	4,663	-177	6	-96	-162
221	Procurement & Contracts Compliance	5,850	5,623	5,473	-150	7	-117	0
21,540		28,265	28,515	28,133	-382		-239	438
	Housing and Residential Services							
-6	Enabling Activities	-17	-17	-17	0		0	0
-1,133	Housing Benefits	-115	-116	-116	0		0	0
852	Housing Needs	909	1,251	1,251	0		0	0
344	Housing Strategy & Development	338	92	92	0		0	0
1,427	Residential Services	1,406	1,319	1,219	-100	8	-100	0
1,484		2,521	2,529	2,429	-100		-100	0
	Strategic Support Services							
7,584	Concessionary Fares	8,597	8,597	8,582	-15	9	-15	0
815	Customer Services	895	871	774	-97	10	-97	0
1,560	Performance & Information	1,619	1,517	1,467	-50	11	-50	0
202	Quality Assurance	199	198	198	0		0	0
10,161		11,310	11,183	11,021	-162		-162	0
76,394	TOTAL CONTROLLABLE FOR ADULTS AND COM	84,007	85,665	85,857	192		300	1,436
1,619	TOTAL NON CONTROLLABLE	727	684	694	10		10	0
9,779	TOTAL EXCLUDED RECHARGES	10,004	10,076	10,076	0		0	0
87,792	PORTFOLIO TOTAL	94,738	96,425	96,627	202		310	1,436

ACS11008

REASONS FOR VARIATIONS**1. AIDS/HIV Grant - Cr £45k**

Some delays in confirming service developments in 2010/11 resulted in a small under-commitment. The resultant underspend is being utilised to offset domiciliary care costs within services for people with physical disabilities.

2. Assessment & Care Management - £ 740k

The variation can be analysed as follows:-

	November	October
	£'000	£'000
(a) Domiciliary care & direct payments for older people	610	596
(b) Residential/Nursing care and respite for older people	(257)	(264)
(c) Domiciliary care & direct payments for clients with physical disabilities	263	246
(d) Residential care and respite for clients with physical disabilities	124	138
	740	716

- (a) Expenditure on domiciliary care is increasing as more older people are maintained in their own homes rather than placed in residential care. The overspend is currently projected to be £710k, which includes the estimated impact of reablement as the number of new clients referred to the service increases. The service helps clients to do more for themselves, which results in lower individual package costs.

Management action around increased use of independent sector providers, the rigorous application of eligibility criteria and regular reviews aimed at reducing long-term reliance on care services, will also assist in reducing cost pressures by a further £100k, meaning that the net overspend is projected to be £610k.

- (b) A projected net underspend of £257k in the residential, nursing and respite care budgets partially offsets the overspend on domiciliary care. This is based on numbers in placements at the end of November. Although there are actions to contain the overspend, the pressure on the older people's budget will continue into 2011/12 and a projected overspend of £646k is forecast, based on activity to the end of November. It is anticipated that successful reablement and tighter eligibility criteria will reduce this to £498k.

- (c) Despite additional funding of £200k in the 2010/11 budget, the latest projections for clients with physical disabilities indicate that there will be a projected overspend of £320k in the cost of domiciliary care as a result of an ongoing increase in referrals.

Action is being taken to contain spend through a number of measures. A comprehensive review of all current care packages is being undertaken, including ensuring that contributions from health are received and utilising the benefits of the new re-ablement service with the aim of maximising independence and where appropriate, reducing on-going reliance on paid carers. This work is expected to reduce costs by £57k for the remainder of the year, leaving a net overspend of £263k.

- (d) The budget for residential and respite care for people with physical disabilities is expected to be overspent by £124k, a reduction of £14k since last month, but offset by an increase in domiciliary care, as a result of a switch in one client package.

Although measures are being taken to contain expenditure, the full year effect on the budget for people with physical disabilities is expected to be £600k in 2011/12. It is anticipated that this will reduce by £100k to £500k as the management action put in place this year becomes established practice. However it should be noted that the forecast figures do not take account of additional costs as a result of increased client numbers.

3. Direct Services - £172k

The In-House Homecare service is charged out on an hourly rate to Assessment & Care Management, based on the number of hours that it provides. Care management hold the budget to pay for the In-House service, so if the number of hours provided is below the budgeted level then fixed overheads are not fully recovered and an overspend will result in the service. The number of hours currently provided continues to be below the budgeted level and an overspend of £141k is projected.

The meals service is projected to overspend by £31k due to a fall in the number of meals being sold. The projection for the remainder of the year is based on current levels.

4. Learning Disabilities Day Services - Cr £31k

An underspend of £31k is forecast, mainly as a result of two vacant LD posts within the Commissioning & Partnerships division which are part-funded by the PCT through the Pooled budget.

5. Learning Disabilities Services - Cr £39k

There are still ongoing pressures on the LD budget, mainly due to clients coming through Transition. However after taking into account the additional cost of new and expected clients this year and the full year effect of clients placed in 2009/10, latest projections indicate that there will be a small underspend of £39k.

Although there is a small underspend, the full year effect of the clients placed in-year is forecast to be £620k, partially offset by an anticipated full year underspend of £20k in domiciliary care.

6. Mental Health Services - Cr £177k

There is a reduction in expenditure of £96k forecast for the remainder of the year as a result of client movements to date which have resulted in more cost effective placements.

In addition a saving of £81k has arisen from the extension/retendering of contracts for Advocacy, Day Services, Benefits Advice and the Mental Health Strategic Partnership.

7. Procurement & Contract Compliance - Cr £150k

The savings achieved as a result of in-year changes to some supporting people contracts have increased by £33k to £79k. In addition, a one-off saving of £71k has been achieved in year due to a reduction in the hours provided at one of the schemes.

8. Residential Services - Cr £100k

It is anticipated that the review of the allocation of the budget and tight application of eligibility criteria and what works will be covered for private sector renewals, will produce savings of £100k this year, which will help to alleviate some of the pressures on the departmental budget.

9. Concessionary Fares - Cr £15k

A saving of £15k has been identified on the cost of agency staff.

10. Customer Services - Cr £97k

An underspend is projected as a result of vacancies within the management support, business support and customer services teams. In addition, further savings totalling £50k have been identified within departmental office expenses.

11. Performance and Information - Cr £50k

Savings have been identified within the Learning and Development budget to assist with containing the departmental pressures.

	£'000
Vacant post frozen	-20
Training put on hold	-15
Recruitment and retention budget	-15
	<u>-50</u>

LATEST APPROVED BUDGET 2010/11		
ACS11008 Appendix		
		Adult & Community Services Portfolio
BUDGET VARIATIONS		£'000
2010/11 Original Budget		94,631
Transfer of Drugs & Alcohol from Public Protection & Safety Portfolio		108
Revised Original Budget		94,739
Carry forwards from 2009/10:-		
<u>Agreed by Executive on 21/07/10</u>		
Housing Overcrowding Pathfinder Grant (ACS)		
- Expenditure	}	116
- Grant Income	}	Cr 116
Social Care Reform (ACS)		
- Expenditure	}	416
- Grant Income	}	Cr 416
Stroke Care Grant (ACS)		
- Expenditure	}	126
- Grant Income	}	Cr 126
LD Revenue Campus Closure Grant (ACS)		
- Expenditure	}	39
- Grant Income	}	Cr 39
Total Carry forwards		0
General		
Review of Management & Overhead Costs	Cr	350
Contract price inflation over 2.3%		
Single Status		1,074
<u>Agreed by Executive on 21 July 2010:</u>		
Learning Disabilities Service		660
Physical Disabilities Service		200
Learning Disabilities Campus Closure Programme:-		
- grant related expenditure	}	8,374
- grant income	}	Cr 8,374
Total General		1,584
Grants included within Central Contingency Sum		
<u>Agreed by Executive on 26th May 2010:-</u>		
Mental Health Capacity Act		135
Additional Carers Grant		77
<u>Agreed by Executive on 21st July 2010:-</u>		
Familiarisation costs of new statutory guidance on social housing allocations (ABG)		1
Total Grants		213
Budget Transfers / Other:		
Repairs and Maintenance inflation and savings adjustments	Cr	43
Adjustments re DAT transfer from PPS Portfolio		222
In-year grant reductions	Cr	196
LD Post Adjustment	Cr	15
Multi Function Device (MFD's) savings adjustments ~ Photocopiers/paper	Cr	78
Total Budget Transfers / Other:	Cr	111
Total Variations		1,686
2010/11 Latest Approved Budget		96,425

Report No.
DR10110

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

<Please select>

Decision Maker: Adult & Community Services Portfolio Holder

Date: For pre-decision scrutiny by the Adult & Community Services PDS Committee on 25th January 2011

Decision Type: Non-Urgent Non-Executive Non-Key

Title: CAPITAL PROGRAMME MONITORING - 2nd QUARTER 2010/11

Contact Officer: Martin Reeves, Group Accountant (Technical)
Tel: 020 8313 4291 E-mail: martin.reeves@bromley.gov.uk

Chief Officer: Director of Resources

Ward: All

1. Reason for report

On 3rd November 2010, following scrutiny by the Executive and Resources PDS Committee on 27th October, the Executive received a report summarising the current position on capital expenditure and receipts following the 2nd quarter of 2010/11. The Executive agreed a revised Capital Programme for the four year period 2010/11 to 2013/14 and this report highlights changes agreed by the Executive in respect of the Capital Programme for the Adult & Community Services Portfolio. The revised programme for this portfolio is set out in Appendix A.

2. **RECOMMENDATION(S)**

The Portfolio Holder is asked to note and confirm the report.

Corporate Policy

1. Policy Status: Existing policy. Capital Programme monitoring and review is part of the planning and review process for all services. The capital review process requires Chief Officers to ensure that bids for capital investment provide value for money and match Council plans and priorities.
 2. BBB Priority: Excellent Council.
-

Financial

1. Cost of proposal: Estimated cost Net additional cost of £379k
 2. Ongoing costs: Non-recurring cost.
 3. Budget head/performance centre: N/A (Capital Programme)
 4. Total current budget for this head: £Total £19.3m for Adult & Community Services Portfolio over four years 2010/11 to 2013/14
 5. Source of funding: Capital grants, capital receipts and revenue contributions
-

Staff

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: No statutory requirement or Government guidance.
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): N/A
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

Capital Monitoring – variations reported to the Executive on 3rd November 2010

3.1 A revised Capital Programme was approved by the Executive on 3rd November, following a detailed monitoring exercise carried out after the 2nd quarter of 2010/11. Further information is provided in paragraphs 3.2 and 3.3 and the revised Programme for the Adult & Community Services Portfolio is attached as Appendix A. A summary of the variations agreed by the Executive is set out below.

	2010/11 Estimate £000	2011/12 Estimate £000	2012/13 Estimate £000	2013/14 Estimate £000	TOTAL £000
Approved Programme (Executive 21/7/10)	9,547	7,245	1,080	1,080	18,952
London private sector renewal schemes (see para 3.2)	619	-	-	-	619
Reduction in government grant allocation – Disabled Facilities Grants (see para 3.3)	-60	-60	-60	-60	-240
Scheme rephasing	35	-35	-	-	-
Revised ACS Capital Programme	10,141	7,150	1,020	1,020	19,331

3.2 London private sector renewal schemes (additional external funding £619k in 2010/11)

The current approved programme included £1,667,000 for various externally funded London Private Sector Renewal schemes, mainly consisting of a loan scheme and the Handyman scheme. In 2010/11, we will receive an additional £619,000 as a result of under-spending in other parts of the sub regional programme, and in recognition of our success in delivering our part of the programme locally. The Executive agreed the inclusion of a further £619,000 in the Capital Programme.

3.3 Reductions in government grant allocation for play facilities in parks (reduction of £595k)

Notification had been received of a reduction of £60k per annum in government support for Disabled facilities Grants (from £770k pa to £710k pa) and the Executive agreed that the budget be reduced accordingly.

3.4 Scheme Rephasing

The estimated spending profile of capital schemes was examined and revised, as a result of which a total of £35k has been rephased from 2011/12 into 2010/11.

4. POLICY IMPLICATIONS

4.1 Capital Programme monitoring and review is part of the planning and review process for all services. The capital review process requires Chief Officers to ensure that bids for capital investment provide value for money and match Council plans and priorities.

5. FINANCIAL IMPLICATIONS

5.1 These were reported in full to the Executive on 3rd November 2010. The Capital Programme for the Adult & Community Services Portfolio 2010/11 to 2013/14 has increased by £379k since July as a result of variations approved by the Executive as set out in the table in paragraph 3.1.

Non-Applicable Sections:	Legal and Personnel Implications
Background Documents: (Access Contact Officer)	Departmental monitoring returns October 2010. Approved Capital Programme (Executive 03/11/10).

ADULT & COMMUNITY SERVICES PORTFOLIO - APPROVED CAPITAL PROGRAMME as at 3rd NOVEMBER 2010

Capital Scheme/Project	Total Approved Estimate	Actual to 31.3.10	Estimate 2010/2011	Estimate 2011/2012	Estimate 2012/2013	Estimate 2013/2014	Responsible Officer	Remarks
	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's		
SOCIAL SERVICES								
Care Standards Act 2000 Requirements - general	500	187	223	90			Lorna Blackwood	
Learning Disability Day Centre	2310	767	796	747			Lorna Blackwood	Capital receipt £2.54m
Improving Information Management	136	49	87				Helen Stewart	Government grant
Care Homes - improvements to environment for older people	290	269	21				Lorna Blackwood	100% government grant
PCT Learning Disability reprovion programme	8879	907	4389	3583			Colin Lusted	Fully funded by PCT
Care Home reprovion - decanting costs	1500	450	652	398			Lorna Blackwood	To be met from capital receipts from disposal of homes
Social care grant	558	0	558				Lorna Blackwood	100% government grant
Mental health grant	331	0	331				Lorna Blackwood	100% government grant
Social Care IT Infrastructure	233	0	233				Helen Stewart	100% government grant
Supporting Independence - Extra Care Housing	20	0	20				Lorna Blackwood	100% government grant
Transforming Social care	145	0	145				Jean Penney	100% government grant
Feasibility Studies	40	0	10	10	10	10	Tracey Pearson	
TOTAL SOCIAL SERVICES	14942	2629	7465	4828	10	10		
HOUSING								
Shared ownership housing - Bromley NHS PCT project	320	64	256				Graham Mackenzie	100% Learning Disability Development Fund
Housing Provision - approved expenditure proposals	657	457	200				David Gibson	
Housing Provision - unallocated	220	0	220				David Gibson	Reinvestment of housing capital receipts; subject to reduction re pooling
Payment in Lieu Fund - unallocated	3745	2043	390	1312			David Gibson	Expenditure subject to cash receipts from Affordable Housing Policy
London private sector renewal schemes	2286	1667	619				Martin Parsons	100% external funding
Renovation Grants - Disabled Facilities	6144	2123	991	1010	1010	1010	Martin Parsons	60% Govt grant capped at £690k in 09/10 & £770k in 10/11; £300k pa revenue cont. Net overspend £19k in 09/10 - 10/11 budget reduced
TOTAL HOUSING	13372	6354	2676	2322	1010	1010		
TOTAL ADULT & COMMUNITY SERVICES PORTFOLIO	28314	8983	10141	7150	1020	1020		

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Report No.
ACS 11006

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult & Community Portfolio Holder

Date: For Pre-Decision Scrutiny at the Adult and Community PDS Committee meeting held on 25th January 2011

Decision Type: Non-Urgent Executive Non-Key

Title: PERSONAL BUDGETS AND CONTRIBUTIONS POLICY CONSULTATION

Contact Officer: Angela Buchanan, Head of Programme Management (LD)
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Chief Officer: Terry Rich, Director of Adult & Community Services

Ward: BOROUGHWIDE

1. Reason for report

The purpose of this report is to consult with the Adult & Community PDS on the proposed changes to the Personal Budget and Contributions policy for Adult Social Care services from 2011 onwards as resolved by the LB Bromley Executive Committee in December. It also updates the PDS members on the consultation being undertaken with the wider stakeholder groups.

2. **RECOMMENDATIONS**

1. That PDS comment on the revised Personal Budget and Contributions policy including the:
 - Inclusion within the calculation of Personal Budgets of the full range of services provided to support people remain at home, including day care;
 - Introduction of charging and removal of subsidies from holiday breaks, laundry and shopping services;
 - New charge rates for personal care visits and directly employed personal assistants;
 - Increased charges for Carelink (community alarm), Telecare and other assisted technology equipment;
 - Introduction of standard rates for disability related expenditure disregards when calculating personal contributions;
 - Introduction of a charge for ineligible service users who use day services.
2. That PDS note the consultation being undertaken with the wider stakeholder groups
3. That the Portfolio Holder considers the views of the PDS alongside the outcome of consultation prior to deciding on the adoption of the revised Personal Budget and Contributions Policy in March 2011 and prior to any changes being implemented.

Corporate Policy

1. Policy Status: N/A.
 2. BBB Priority: Supporting Independence.
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Financial

1. Cost of proposal: N/A
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: Care Services
 4. Total current budget for this head: £3,718k (total budget for non-residential care charges)
 5. Source of funding: N/A
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Staff

1. Number of staff (current and additional):
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is not applicable.
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 3000
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 In December the Executive were asked to approve the consultation on the revised Personal Budget and Contributions policy. It was also resolved that the Adult and Community PDS Committee be consulted and the results of the consultation be considered by the Adult & Community Portfolio Holder prior to the introduction of a revised policy by April 2011. The December Executive report provides the detailed context for proposed changes to the policy this has been attached at appendix A for reference.

3.1.1 The main revisions included in policy are:

- Inclusion within the calculation of Personal Budgets of the full range of services provided to support people remain at home, including day care;
- Removal of subsidies from holiday breaks, laundry and shopping services;
- New charge rates for personal care visits and directly employed personal assistants;
- Increased charges for Carelink (community alarm), Telecare and other assisted technology equipment;
- Introduction of standard rates for disability related expenditure disregards when calculating personal contributions;
- Introduction of a charge for ineligible service users who use day services.

3.1.2 An information fact sheet and consultation response form has been developed to provide information on the proposed changes to the Personal Budget and Contributions policy. These are attached for reference at appendix B and C. The proposed revisions to this policy are threefold: firstly to explain what services will be included as part of the personal budget calculation (i.e. services that are considered to meet adult social care needs); secondly, to simplify the charging structures for a range of services (i.e. personal care visits) and allowances (disability related expenditure) and lastly to increase the charges levied for some services.

3.1.3 The proposals are also designed to increase the contributions made by service users to the overall cost of social care services and therefore to assist in setting a sustainable budget for future years.

3.14 PDS members are asked to consider the questions asked in the consultation response form in appendix C. The issues are summarised below:

- In order to calculate a personal budget, agreement as to what services and unit cost are included within a personal budget.

Do you agree that the services listed in section A Q2 of the consultation response form should be included as part of the personal budget calculation?

- Some services (shopping, laundry and holiday breaks) will no longer be considered core services included as part of the personal budget calculation. The proposal in the consultation is to remove the current subsidies for these services: anyone who wants to continue using them will be expected to access and pay for them independently at the full price charged by the provider of the service.

Do you agree with this proposal?

- All services included within the personal budget calculation will be considered as part of the financial assessment, this means that a person may have to pay a charge if they have services arranged by the Council or their contribution will be deducted from their direct payment if they organise their own care. See section B questions 1 – 4 in the consultation response form.

Do you agree that it is fair to include these areas as part of the financial assessment?

- The financial assessment includes disability related expenditure (DRE) disregard which makes an allowance for eligible service users who has additional expense due to their disability. Currently the DRE disregard is individually calculated and varies considerably from a low of £1 per week up to £99 in some cases with the average at £20. It is proposed to introduce 3 standard rates based on benefit levels. Whilst some would experience a lower disregard, hence have a higher contribution to make it means that the service user would not need to produce receipts as evidence of the extra costs. The proposed rates are:
 - **£5 per week** where the service user is in receipt of the lower rate of Disability Living Allowance or Attendance Allowance,
 - **£10 per week** where the service user is in receipt of the middle rate of Disability Living Allowance and,
 - **£15 per week** where the service user is receiving the middle or higher rate of Disability Living Allowance or Attendance Allowance.

Do you agree that a flat rate would be a fairer, simpler and more consistent way of allowing for the extra costs of having a disability?

- Whilst the Council continues to ensure access to services for people not receiving a personal budget it is proposed that for people using day services whose social care needs do not qualify for the council's support will be expected to pay £10 per session for using this service.

Do you agree that it is fair to charge people whose social care needs do not qualify for the council's support?

3.1.5 The financial implications of these proposals are included in section 5.3 of this report and the impact of all the proposals on service users are being assessed as part of the equality impact assessment as described in section 3.4 of this report.

3.2 Consultation

3.2.1 A detailed consultation plan has been developed to ensure that a broad range of stakeholders have the opportunity to contribute to the consultation on the proposed policy changes.

3.2.2 A web page has been developed as part of the main Bromley website, to provide information on all the consultation documents including a frequently asked questions sheet.

3.2.3 During December partner agencies and providers received a request to participate in the consultation exercise. Stakeholder meetings have been arranged for service users who have a learning disability and providers of older people's day services. The Learning Disability Partnership Board has requested a session at the February meeting.

3.2.4 Over 3000 service user consultation letters were sent out during January with plain speak versions being used where appropriate. Bromley Social Services Direct is providing additional support during the consultation period to any service users who may have concerns about what the changes may mean to them.

3.2.5 The consultation period is due to end on the 28th February 2011. During this process approximately 3750 stakeholders will have been asked to take part.

3.3 Decision Making

3.3.1 At the end of the consultation period all received responses will be collated and the analysis will be presented to the ACS DMT for consideration. This will then inform the revised Personal Budget and Contributions policy which will be presented for approval to the Portfolio Holder on the 18th March 2011. A summary of the consultation responses will be included as part of the Portfolio Holder's report.

3.4 Implementation of the Changes

3.4.1 An equality impact assessment will be undertaken prior to implementation of the agreed proposals to assess the impact of the changes on current and potential service users. This will include contributions from a range of stakeholders to ensure that issues and risks are identified and actions are put in place to minimise. This information will be presented to the Portfolio Holder as part of the decision making process.

3.4.2 There are a small number of organisations that will continue to receive funding from ACS to enable them to provide a range of preventative services that will fall outside the proposed policy changes. In the main the funding is used to cover the cost of premises, this then enables the organisations to provide a range of support services such as advice, information and lunch clubs where participants are often already making a direct contribution.

3.4.3 All agreed changes will be implemented from May 2011 in many cases they will take effect from this date, for changes requiring more detailed work with individual service users these will be phased in during the year.

3.4.4 A clear information strategy has been put in place to ensure that all current service users are informed about the agreed changes prior to implementation in May 2011. This information will include details on how to request a community care assessment or review of needs and how to appeal against the charge that has been levied. Information will also be made available in the revised Personal Budget and Contributions policy which will be available on the website in April 2011.

3.4.5 All current eligible service users will also be subject to a revised financial assessment which will calculate how much a person can afford to pay towards their support costs.

4. POLICY IMPLICATIONS

4.1 Personal budgets are central to the Supporting Independence in Bromley programme which is a key priority within the Adult & Community Portfolio Plan and central to the Building a Better Bromley priority of Promoting Independence. The current Fairer Charging Policy will be revised to reflect the agreed changes and will be available on the Bromley website in April 2011.

5. FINANCIAL IMPLICATIONS

5.1 These changes both address the need to provide an actual cost against all service elements contained within Personal Budgets and also seek to increase, where feasible the contributions levied through charges from service users towards the costs of their care services.

5.2 The contributions policy is aimed at ensuring that regardless of how a service user decides to purchase their care, either through a managed service or via a direct payment, there is not a disincentive to service users accessing personal budgets by having a more favourable regime for one or other. This means that we will need to realign our direct payments and domiciliary

care charges so that our half hourly and hourly rates are set at the same level as set out in Executive Report in Appendix A.

5.3 The table below provides the financial implications of the proposals outlined in this report:-

	Budget 2011/12 Full Yr £'000
<u>Additional Income</u>	
Reducing Direct Payment rate for Personal Assistants (£11.00 ph)	-130
Charging for Double Handed Care (16.20 1/2 hour, £28.00 ph)	-150
Supplement for evenings (£1 and £2)	-65
Charging for Day Care & Transport	-50
Standard rate DRE of £15	-140
Community Alarm Service (£5 pw monitoring, £7.50 pw full response)	-45
	<u>-580</u>
<u>Loss of Income</u>	
Increasing Direct Payment half hour rate to £8.10	265
Reducing charging for domiciliary care (£16.20 hr to £14 hr)	100
	<u>365</u>
Net Additional Income (estimated)	<u><u>-215</u></u>
<u>Full Cost Recovery</u>	
Estimated Savings from full cost recovery (shopping/laundry etc.)	-100
Day care charge for non eligible users	-50
	<u><u>-150</u></u>
TOTAL ESTIMATED SAVINGS	<u><u><u>-365</u></u></u>

- 5.4 The table above shows that the financial implications of increasing the amount within a Direct Payment for a half hour of care from £7.04 to £8.10 is £265k p.a. offset by £130k p.a. by reducing the amount allowed for Personal Assistants from £14.10 to £11.00 per hour.
- 5.5 The current charge for domiciliary care for non-Direct Payment users is £16.20 per hour and has been based on the average cost of an hour of care taking account of all contracted providers, including the in-house service's unit cost, and allowing for the variations on the cost of evenings and weekends. Analysis of current prices charged by the Council's contracted providers, together with the impact of a reduction in the volume of care provided by the in-house service has resulted in a need to adjust the rates charged and the sums allowed for within Direct Payments for domiciliary care.
- 5.6 The proposals align the charges made with the sums allowed for within Personal Budgets consistent with that allocated within a Direct Payment. This has the effect of maintaining the same charge for a half hour of domiciliary care as present (£8.10/half hour) whilst reducing the rate for care delivered in full hours from £16.20 to £14.00. As with Direct Payments, an increase in the charge for care delivered at evenings or weekends will be applied at £1 per half hour and £2 per full hour of care.
- 5.7 Also included in the table above are the anticipated savings arising from the introduction of charges or full cost recovery of services provided to non-eligible service users, including day centres, shopping and housework services.
- 5.8 Any additional income that will be generated from telecare is included within the Community Alarm figures in the table above.

5.9 The proposed rates for charging in 2011/12 are based on current prices and therefore an annual increase for inflation will need to be added.

6. LEGAL IMPLICATIONS

6.1 Fairer Charging Contributions Guidance is issued under Section 7 of the Local Authority Social Services Act 1970.

6.2 This document provides guidance on how both the chargeable amount of a personal budget, and the actual contribution made by the personal budget holder, might be calculated. The chargeable amount is the maximum possible contribution a person can be asked to make to their personal budget, subject to their available income and savings. The calculation of the actual amount to be paid begins with a means test which determines the income and savings available to make a contribution. This part of the process is covered in the original Fairer Charging guidance and remains unchanged. Thus this guidance does not introduce any changes to the way councils undertake financial assessments, or how they treat the income or savings of personal budget holders.

6.3 The Department of Health's latest guidance on Direct Payments states that:-

“the direct payments legislation provides that it must be equivalent to the council's estimate of the reasonable cost of securing the provision of the service concerned, subject to any contribution from the recipient”

Thus the system for determining the amount of service required to meet social care needs should not be different for Direct Payments to that used for Personal Budgets.

6.4 Councils should consult as necessary on any proposed changes to their existing charging policy in accordance with the Fairer Charging guidance. Councils might wish to allocate a member of staff to be responsible for consultation to meet local user and carer groups and to seek their views.

6.5 In the Dept of Health 2010 guidance “Prioritising need in the context of Putting People First :a whole system approach to eligibility for social care” Councils are enjoined to use the eligibility framework set out in the guidance to specify their own eligibility criteria and in setting these to take account of their own resources, local expectations and local costs. These criteria may be reviewed in line with the Council's usual budget cycle and reviews may be brought forward if there are major or unexpected changes including those with significant resource consequences. The guidance draws a distinction between “presenting needs” and “eligible needs”. Eligibility criteria therefore describe the full range of eligible needs that will be met by the Council, taking its resources into account.

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	Executive Report 8 th December 2010 PERSONAL BUDGETS AND CONTRIBUTIONS Policy

Appendix A Full Executive Report 8th December 2010

Appendix B Consultation Information Fact Sheet

Appendix C Consultation Response Form

Decision Maker: Executive

Date: 8th December 2010

Decision Type: Non-Urgent Non-Executive Non-Key

Title: PERSONAL BUDGETS AND CONTRIBUTIONS

Contact Officer: Lesley Moore, Executive Assistant
David Roberts, Assistant Director Care Services
Tel: 020 8313 E-mail: @bromley.gov.uk

Chief Officer: Terry Rich, Director of Adult & Community Services

Ward: BOROUGHWIDE

1. Reason for report

To outline the proposed Personal Budget and personal contributions policy for Adult Social Care and to approve consultation on changes to fees and charges for Adult Social Care services from 2011 onwards.

2. **RECOMMENDATIONS**

1. That consultation with service users, their families and carers and with stakeholders on a revised Personal Budget and Contributions policy be approved
2. That the variations listed in the appendix in charges for adult care services and personal contributions rates towards Personal Budgets be approved for consultation.
3. That consultation includes the introduction of a charge for day care which would be included within the personal budget for eligible service users and levied directly of the attendee for non eligible users.
4. That consultation includes the introduction of full cost recovery from the non-eligible recipient of social care/support services and that such charges are collected by the service provider.
5. That consultation on future contributions rates includes the replacement of the current variable level of Disability Related Expenditure disregard with standard rates set between £5 and £15 per week.
6. That the results of the consultation be considered by the Adult & Community Portfolio Holder and AC PDS prior to the introduction of a revised Personal Budget and contributions policy by April 2011.

Corporate Policy

1. Policy Status: N/A.
 2. BBB Priority: Supporting Independence.
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Financial

1. Cost of proposal: N/A
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: Care Services
 4. Total current budget for this head: £(total budget for non-residential care charges)
 5. Source of funding: N/A
-

Staff

1. Number of staff (current and additional):
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 2000?
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 Social Care services are provided to vulnerable adults within the community who meet the Council's eligibility criteria and following an assessment of need. Traditionally following that assessment the Council arranged for services to be provided – often through the provision of a home care service – either directly delivered or from a contracted provider.
- 3.2 In addition some services have been provided free of charge to social care service users whether or not they formally meet the Council's eligibility criteria. Such services include a place at a day centre, or domestic support or help with shopping provided via a voluntary sector organisations.
- 3.3 Recent developments in adult social care means that in future people will have a personal/individual budget to support their care needs, some of which can be taken as a Direct Payment.

Personal Budgets

- 3.4 A personal budget is an upfront allocation of social care resources to a person who is eligible for support. Following an assessment of their need for non-residential social services (“needs assessment”), a person who the council consider eligible for support will be allocated an amount of money necessary to meet their needs. A Personal Budget is, in effect, the monetary value of the care purchased by ACS from its contractors to meet the assessed eligible care needs of an individual.
- 3.5 Whereas in the past an older person assessed as having critical or substantial personal care needs would be assessed as requiring perhaps 3 home care visits a day, a Care Link alarm service and two afternoon sessions at a day centre, today the equivalent cost of delivering that package of care or services would be allocated as a Personal Budget.
- 3.6 Whilst all care packages or support plans will have a monetary value – i.e. will be described as a Personal Budget, not everyone will want to assume full responsibility for managing that budget directly. A service user may elect to ask the Council to continue to manage their care arrangements much as has traditionally happened, or may elect to take full control and take their Personal Budget as a direct payment. Some may chose a combination of the two.

3.7 Options for Service Users

Managed Services

- 3.7.1 Many people will elect to have the Council arrange the service in the same way as previously with the user receiving services in lieu of their personal budget. In such circumstances a care manager will design a support plan with the service user and purchase a range of services from contractors to meet the service user's needs.
- 3.7.2 The service user's income will be assessed in accordance with the Fairer Charging criteria and a charge or contribution levied from the service user to offset a proportion of the costs of the care package.

Direct Payment

- 3.7.3 However it is anticipated that increasingly people will elect to exercise more choice and control, opting to make their own care arrangements by purchasing care themselves using their personal budget which they receive as a Direct Payment.

- 3.7.4 In such circumstances the service user will receive their Direct Payment into a bespoke bank account, in many instances utilising a pre-loaded Payment card. This will be used by the service user to purchase services to meet their assessed need. The Direct Payment will be paid net of the assessed charge or contribution due from the service user following an assessment of their income in accordance with the Fairer Charging criteria.

Part Managed/Part Direct Payment

- 3.7.5 It will also be possible to mix managed services for part of the Personal Budget with a Direct Payment for others.
- 3.7.6 An example of this may be that same person deciding to take their personal care hours as a Direct Payment and to arrange a Personal Assistant to provide that care, whilst opting to receive the day care and alarm service as part of a managed service – i.e. continuing to receive the services from the Council or from a council funded provider in a traditional manner.
- 3.7.7 In such instances a single financial assessment is undertaken and the Direct Payment element will be paid net of the charge or contribution due.

3.8 How a Personal Budget is calculated

- 3.8.1 The Personal Budget entitlement is calculated following an assessment of needs. A potential service user must qualify for Council funded support because they fall within the Council's eligibility criteria – i.e. they have been assessed as having critical and/or substantial personal social care need.
- 3.8.2 That assessment which is undertaken by a professional member of ACS staff together with the service user (and their carer/family) will determine the amount of care inputs that will be required to meet those care needs. The value of those care inputs (e.g. domiciliary care visits, day centre placements, "telecare" equipment) will form the basis of the personal budget.
- 3.8.3 It is proposed that the calculation of a Personal Budget will be based on a number of factors:
- The number of standard episodes of personal care required to meet personal care needs (based on an episode being a half hour from an approved/contracted care provider)
 - The number of non-standard episodes of personal care required to meet personal care needs (where due to more complex care requirements an hour of care is required rather than a half hour)
 - The number of episodes of care where two carers are required to safely deliver care (e.g. where a service user is confined to a bed and can only be moved with two care workers)
 - A supplement to cover the additional costs where episodes of care are required at high cost times (evening/weekends/bank holidays)
 - The actual cost of a commissioned "supported living service"
 - The number of day care sessions required to meet assessed needs at one of a range of standard rates.
 - The number of episodes of non-residential respite care required at a range of standard rates.
 - The actual cost of other standard services required to meet assessed – e.g. Community Alarms.

- The cost of any additional bespoke services required as alternatives or to supplement those listed above.

3.8.4 These measures will simplify care planning so that service users and carers will be able to see the connection between the social care needs and the service purchased to meet them. Increased transparency will support choice and control by the user, lead to better information and advice to prospective users and promote consistency and equity.

3.8.5 However in circumstances where a service user elects to exercise choice and control and to purchase alternative service models that result in lower costs, the Personal Budget will be calculated to reflect the actual costs of providing that care. The increasingly common example of this is where a Personal Assistant is employed rather than contractor care hours. In these circumstances the Personal Budget requirement will be reduced significantly.

3.8.6 Appendix 2 provides a number of examples of what will be given to service users in their personal budget.

3.9 Subsidised services

3.9.1 Until now service users, including those who do not meet the criteria for substantial or critical need, have been able to access laundry services partly subsidised by the Council and shopping services and holiday breaks wholly subsidised by the Council. It is proposed that these subsidies be removed and that service users will be signposted to providers who will recover the full cost of the service from the user. The current subsidy for laundry services is £3.95 and £5.40 for shopping. A similar approach is proposed for users of day services who do not meet the Council's eligibility criteria for supported social care. This is set out in paragraphs 4.4.5 – 4.4.6 below.

4. CURRENT CHARGING POLICY

4.1 In 2003, the Government issued guidance for setting charges for non-residential social care services. That guidance sought to ensure that people who use services are treated fairly and are not asked to make a contribution towards their care that will leave them in financial difficulty or hardship.

4.2 A number of principles were established by that guidance including:-

- § *Service users must be left with enough disposable income to allow them a 'reasonable' standard of living allowance, no less than 25% above the basic level of income support (£65.45 per week) or equivalent. This means that service users must be left with £81.81 per week after any charges have been levied.*
- § *Charges for individual services that make up a package of care need to be considered together and not in isolation.*
- § *Flat rate charges for some single services are acceptable but only where the charge is 'small' and the service is considered as a substitute for ordinary living costs (e.g. home meals services or transport) rather than a care service.*

4.3 The Governments 'Putting People First' programme for the Transformation of Adult Social Care requires changes to our existing Charging policy because in the future, people receiving adult social care will have a personal/individual budget to support their needs.

Assessing a service user's charge or contribution

4.4. Charges are calculated in line with the Fairer Charging guidance issued by the Department of Health in 2003 and modified by the guidance on Contributions Policy issued in 2009.

4.5 In assessing the charge or contribution that a service user makes towards the cost of their care, there is a calculation based on the numbers of home care hours delivered and a standard rate applied. This was then assessed against the income of the service user and their ability to pay.

4.6 Proposed Changes to our Charging Policy

4.6.1 Following the needs assessment and calculation of how much the personal budget might be (the indicative amount) the council will undertake an assessment of the person's financial circumstances in accordance with the guidance on Fairer Charging Policies to work out what the person's maximum contribution will be in accordance with the Fairer Contributions guidance. If the financial assessment shows that the person has enough income or savings to contribute to their personal budget, the council will tell them what the actual contribution will be. The Contribution Policy differs from our current Charging policy as we will no longer apply a standard charge for home care, the key factor will be the number of episodes of personal care provided together with the value of other service elements within the personal budget.

4.6.2 The 2003 Fairer Charging guidance left Council's able to provide some services free of charge. With the advent of personal budgets and the right of service users to exercise choice and control over where they purchase their care, those free services need to be costed so that the monetary value is able to be included within the Personal Budget calculation and taken as a Direct Payment where requested. An example of this within Bromley has been Day Care where service users have not until now been charged for attendance at a day centre.

4.6.3 It is now proposed that a personal budget component will be included to cover day care and that this sum should be included within the calculation for the individual's personal financial contribution. However it is currently the case that day centres that are contracted for by the Council provide places for people with critical and substantial needs (eligible service users) and others. It is proposed that for non eligible service users, a charge should be levied by the day care provider for that service and that there is an equivalent sum deducted from the contract price for that centre corresponding to the numbers of non-eligible service users attending that centre.

4.6.4 The charge for the non-eligible service user will need to reflect that a less intensive service is being delivered within a day centre than for those with critical and substantial need and therefore the charge will be proportionately less than that included within a Personal Budget. In the case of older people day care it is proposed to consult on a £10 fee being levied by providers for attendance of a non-eligible service user.

5. DISABILITY RELATED EXPENDITURE

5.1 In addition to the various allowances that are taken into account in assessing a service user's charge, people with specific expenses in excess of 'standard' living costs may receive a further reduction in their charge for 'disability related expenses'. (These may include incontinence laundry costs or costs to address a sensory impairment, for example). Provision for this kind of expense is included in the government guidance.

5.2 The DRE has been calculated on a case by case basis in Bromley, whilst in other authorities a standard rate is applied. Currently the average DRE allowed amounts to £20/week but varies significantly. It is proposed to introduce standard rates of DRE disregards and it is proposed that these be set at between £5 and £15 per week.

- 5.3 It is estimated that 1,065 people currently benefit from a DRE disregard, and of these 450 will be affected by between £0.08 and £99 per week.

6. CONSULTATION

- 6.1 It is proposed to consult on these changes in line with the consultation standards set out in the Bromley Compact. The consultation commences with the publication of this report to the Executive which outlines the main areas for change.
- 6.2 A full outline of the proposed policy framework and how it is intended to operate will be sent to all stakeholders in December.
- 6.3 Current service users, their families and carers will be consulted through a questionnaire which will be sent out in early January.
- 6.4 In addition other stakeholders, including partner agencies, voluntary sector organisations and “XbyX” (Experts by Experience group) will be consulted with specific meetings for affected groups arranged as appropriate.
- 6.5 The proposals will also be subject to scrutiny by the Adult & Community PDS Committee at its meeting at the end of January 2011 prior to the Portfolio Holder coming to a final decision at the end of the consultation period in early March.
- 6.6 It is anticipated that, subject to any changes being made as a result of the consultation, the new policy will be implemented for the commencement of the 2011/12 financial year.

7. POLICY IMPLICATIONS

- 7.1 Personal budgets are central to the Supporting Independence in Bromley programme which is a key priority within the Adult & Community Portfolio Plan and central to the Building a Better Bromley priority of Promoting Independence.

8. FINANCIAL IMPLICATIONS

- 8.1 These changes both address the need to provide an actual cost against all service elements contained within Personal Budgets and also seek to increase, where feasible the contributions levied through charges from service users towards the costs of their care services.
- 8.2 The contributions policy is aimed at ensuring that regardless of how a service user decides to purchase their care, either through a managed service or via a direct payment, there is not a disincentive to service users accessing personal budgets by having a more favourable regime for one or other. This means that we will need to realign our direct payments and domiciliary care charges so that our half hourly and hourly rates are set at the same level as set out in Appendix 1.

8.3 The table below provides the financial implications of the proposals outlined in this report:-

	Budget 2011/12 Full Yr £'000
<u>Additional Income</u>	
Reducing Direct Payment rate for Personal Assistants (£11.00 ph)	-130
Charging for Double Handed Care (16.20 1/2 hour, £26.00 ph)	-150
Supplement for evenings (£1 and £2)	-65
Charging for Day Care & Transport	-50
Flat rate DRE of £15	-140
Community Alarm Service (£5 pw monitoring, £7.50 pw full response)	-45
	<u>-580</u>
<u>Loss of Income</u>	
Increasing Direct Payment half hour rate to £8.10	265
Reducing charging for domiciliary care (£16.20 hr to £14 hr)	100
	<u>365</u>
Net Additional Income (estimated)	<u>-215</u>
<u>Full Cost Recovery</u>	
Estimated Savings from full cost recovery (shopping/laundry etc.)	-100
Day care charge for non eligible users	-50
	<u>-150</u>
TOTAL ESTIMATED SAVINGS	<u>-365</u>

- 8.4 At present recipients of a Direct Payment are allocated £14.10 per hour to cover the cost of purchasing domiciliary care. This does not take into account variations in the cost of care delivered in units of less than an hour, additional costs of care at evenings or weekends, or the reduced costs of care being purchased through employing Personal Assistants. The revised rates proposed in this report provide for these variables.
- 8.5 The table above shows that the financial implications of increasing the amount within a Direct Payment for a half hour of care from £7.04 to £8.10 is £265,000 p.a. offset £100,000 p.a. by reducing the amount allowed for an hour of domiciliary care from £16.20 to £14.00 an hour and a further £130,000 p.a. by reducing the amount allowed for Personal Assistants from £14.10 to £11.00 per hour.
- 8.6 The current charge for domiciliary care for non-Direct Payment users is £16.20 per hour and has been based on the average cost of an hour of care taking account of all contracted providers, including the in-house service's unit cost, and allowing for the variations on the cost of evenings and weekends. Analysis of current prices charged by the Council's contracted providers, together with the impact of a reduction in the volume of care provided by the in-house service has resulted in a need to adjust the rates charged and the sums allowed for within Direct Payments for domiciliary care.
- 8.7 The proposals within this report align the charges made with the sums allowed for within Personal Budgets consistent with that allocated within a Direct Payment. This has the effect of maintaining the same charge for a half hour of domiciliary care as present (£8.10/half hour) whilst reducing the rate for care delivered in full hours from £16.20 to £14.00. As with Direct Payments, an increase in the charge for care delivered at evenings or weekends will be applied or at £1 per half hour and £2 per full hour of care.

- 8.8 Also included in the table above are the anticipated savings arising from the introduction of charges or full cost recovery of services provided to non-eligible service users, including day centres, shopping and housework services, as described in paragraphs 3.9 and 4.6.4. above.
- 8.9 Any additional income that will be generated from telecare is included within the Community Alarm figures in the table above.
- 8.10 The proposed rates for charging in 2011/12 are based on current prices and therefore an annual increase for inflation will need to be added to all the figures in Appendix 1.
- 8.11 Appendix 2 gives some examples of how service users will be affected by the proposed changes to our existing Charging Policy.

9. LEGAL IMPLICATIONS

- 9.1 Fairer Charging Contributions Guidance is issued under Section 7 of the Local Authority Social Services Act 1970.
- 9.2 This document provides guidance on how both the chargeable amount of a personal budget, and the actual contribution made by the personal budget holder, might be calculated. The chargeable amount is the maximum possible contribution a person can be asked to make to their personal budget, subject to their available income and savings. The calculation of the actual amount to be paid begins with a means test which determines the income and savings available to make a contribution. This part of the process is covered in the original Fairer Charging guidance and remains unchanged. Thus this guidance does not introduce any changes to the way councils undertake financial assessments, or how they treat the income or savings of personal budget holders.
- 9.3 The Department of Health’s latest guidance on Direct Payments states that:-

 “the direct payments legislation provides that it must be equivalent to the council’s estimate of the reasonable cost of securing the provision of the service concerned, subject to any contribution from the recipient”

 Thus the system for determining the amount of service required to meet social care needs should not be different for Direct Payments to that used for Personal Budgets.”
- 9.4 Councils should consult as necessary on any proposed changes to their existing charging policy in accordance with the Fairer Charging guidance. Councils might wish to allocate a member of staff to be responsible for consultation to meet local user and carer groups and to seek their views.

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	

Appendix 1 Specific Personal Budget/Charging rates

Current Charge			Proposed Personal Budget Rate		
Home Care (hourly charge)	£16.20		Personal care episode (1/2 hour)	£8.10	
			Personal care episode (1 hour)	£14.00	
Home care (double handed)	£16.20		Personal care episode (double handed)	£16.20 (1/2 hr) £28.00 (1 hr)	
Home care evenings/weekends			Personal care episode (evening/weekend supplement)	£1.00 (1/2 hr) £2.00 (1hr)	
Direct Payment /Personal Assistant	£14.08		Personal Care episode (Personal Assistant)	£11.00/hr	
Day Care	NIL		Day care – general (frail OP) incl. Transport	£18.00	
			Day care – specialist (dementia/LD) Transport	£40.00	
			Specialist Day placements LD/PD/MH	Actual contracted cost	
Supported Living package	Full cost		Supported Living package	Full cost	
Care link – monitoring	£3.72		Care link – monitoring	£5/wk	
Care link – full response	£7.18		Care link – full response	£7.50/wk	
Telecare/Assisted Technology monitoring	£1.91		Telecare/Assisted Technology monitoring	£2.50/wk	

The proposed rates for charging in 2011/12 are based on current prices and therefore an annual increase for inflation will need to be added to all the figures.

Appendix 2

How a Personal Budget and contribution is calculated:

Example 1

Mr A is 85 lives alone and needs assistance in getting up washing and dressing and in getting to bed at night. He also requires oversight during the day and help with preparing food.

His daughter provides daily midday support at weekends and 3 days a week.

Current cost of services calculated as follows:

2 x ½ hour personal care daily @ £8.10/½ hr	113.40
2 x day centre sessions @ £18 each	0.00
Care Link monitoring	<u>3.72</u>
	<u>117.12</u>

His personal budget is calculated as follows:

2 x ½ hour personal care daily @ £8.10/½ hr	113.40
4 x weekend supplements @ £1	4.00
2 x day centre sessions @ £18 each	36.00
Care Link monitoring	<u>5.00</u>
	<u>158.40</u>

Charging calculation under the current Fairer Charging Policy:

State Retirement Pension	132.60
Attendance Allowance	<u>47.80</u>
Total Income	180.40

Deduct Income Support Threshold	165.75
Deduct Disability Related Expenditure	<u>5.46</u>
Income available for charging	<u>9.19</u>

Previous Assessed maximum charge £9.19

Contribution calculation under the proposed Fairer Contributions Policy:

State Retirement Pension	132.60
Attendance Allowance	<u>47.80</u>
Total Income	180.40

Deduct Income Support Threshold	165.75
Deduct Disability Related Expenditure	<u>5.00</u>
Income available for contribution	<u>9.65</u>

Revised Assessed maximum contribution £9.65

Example 3

Mrs C is 80 lives alone and receives 14 1 hour visits of care a week double handed and has the carelink full response service. Mrs C has over £23,250 in savings.

Current cost of services calculated as follows:

14 x 1 hour personal care (double handed)	226.80
Care Link monitoring and response	<u>7.18</u>
	233.98

Her personal budget is calculated as follows:

14 x 1 hour personal care (double handed)	364.00
4 x weekend supplements @ £2 each	8.00
Care Link monitoring and response	<u>7.50</u>
	379.58

Charge under the current Fairer Charging Policy £233.98

Revised Personal Budget contribution £379.18

(Full cost payer as service user has above capital limit)

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CONSULTATION FACT SHEET

Proposed Changes to Bromley's Personal Budget and Personal Contributions Policy for Adult Social Care December 2010

1. Current Charging Policy

Bromley Council currently charges people who use adult social care services to help them live at home according to their ability to pay. The council uses government guidance issued in 2003 to ensure that the charges are fair and that the contributions it asks people to pay do not leave them in financial hardship. The government guidance states that local authorities must ensure that the charges they set are reasonable:

- People who are financially assessed to contribute to the cost of their services must be left with enough disposable income to give them a reasonable standard of living. The government sets this minimum living allowance as 25% more than the basic level of income support (£65.45) per week or equivalent income. This means everyone must be left with at least £81.81 per week to live on after the charges have been worked out.
- Council charges take account of all the costs of individual services the person receives as part of their care package
- Councils can set separate flat rate charges for some services when the charge is small and can be considered as equivalent to ordinary living costs such as home meals services or transport.

2. Why do we need to change things?

For the first time, from April 2011 people will be able to see how much they have to spend or contribute themselves towards their support – this will be known as a personal budget. The Council wants views on their new charging policy which in the current tough financial climate may result in increases for some, is fairer for everyone so that everyone can see:-

- how their personal budget is calculated;
- the real costs of the support they need

The council's last major review of charges for community care services was implemented in 2007. Increases in charges since then have been related to the rate of inflation and increases in state benefits. Currently approximately one – third of people getting our help do not have to pay for the support they receive, one third pay a charge based on their ability to pay and one-third have enough money to pay the full cost of the care they receive.

The current financial climate means that Bromley, like all other councils, has to look at ways to save money and do things better. At the same time we are changing the way we deliver social care support to people who are eligible for our help.

This means making tough decisions about how the council can fund the social care needs of a growing older population who may require more support. It means we have to ensure that charges remain fair whatever choices people make about how their support needs are met.

This requires some changes to our charging policy to remove anomalies and ensure that everyone who has enough income contributes fairly to the cost of the help they receive.

Personal Budgets

The Government and Council are introducing Personal Budgets which are the new way of delivering social care. If you qualify for council funding for your social care support you can find out how much money will be spent on meeting your needs (known as your Personal Budget). The aim of Personal Budgets is to give people who qualify for council funding more control over the way they use their Personal Budget to meet their needs.

In the past if you had been assessed as needing critical or substantial level of personal care you would be assessed as requiring perhaps 3 home care visits a day, a Carelink alarm service and two afternoon sessions at a day centre. Today the equivalent cost of delivering that package of care or services would be allocated as a Personal Budget.

You will find out how much money will be spent on you (called the Personal Budget) and can then choose if you would like to take on full responsibility for managing that budget directly. A service user may elect to ask the Council to continue to manage their care arrangements much as has traditionally happened, or may elect to take full control and take their Personal Budget as a direct payment. Some may choose a combination of the two.

How will a personal budget be calculated?

It is proposed that the calculation of a Personal Budget will be based on a number of factors:

- The number of standard episodes of personal care required to meet personal care needs (based on an episode being a half hour from an approved/contracted care provider)
- The number of non-standard episodes of personal care required to meet personal care needs (where due to more complex care requirements an hour of care is required rather than a half hour)
- The number of episodes of care where two carers are required to safely deliver care (e.g. where a service user is confined to a bed and can only be moved with two care workers)
- A supplement to cover the additional costs where episodes of care are required at high cost times (evening/weekends/bank holidays)
- The actual cost of a commissioned “supported living service”
- The number of day care sessions required to meet assessed needs at one of a range of standard rates.
- The number of episodes of non-residential respite care required at a range of standard rates.
- The actual cost of other standard services required to meet assessed e.g. Community Alarms.
- The cost of any additional bespoke services required as alternatives or to supplement those listed above.

These measures will simplify care planning so that service users and carers will be able to see the connection between the social care needs and the service purchased to meet them. However, in circumstances where a service user elects to exercise choice and control and to purchase alternative service models that result

in lower costs, the Personal Budget will be calculated to reflect the actual costs of providing that care. The increasingly common example of this is where a Personal Assistant is employed rather than contractor care hours. In these circumstances the Personal Budget requirement will be reduced significantly.

3. The Consultation

We will be asking as many people as possible what they think about our proposed changes. This includes service users, carers, partner agencies, members of voluntary groups and service providers.

4. The Proposed Changes to the Charging Policy

a) Removing the subsidy on holiday breaks, laundry and shopping services

Until now service users, including those who do not meet the council eligibility criteria for need, have been able to access laundry services partly subsidised by and shopping services and holiday breaks wholly subsidised by the Council. It is proposed that these subsidies be removed and that all service users will be signposted to providers of these services who will recover the full cost of the service from the user.

b) Removing the subsidy on day care services

It is currently the case that day centres that are managed directly or indirectly by Council provide places for people with critical and substantial needs (eligible service users) and others. Until now this service has had a nil cost to the service user, it is proposed that a charge per session be made from 2011 onwards

It is also proposed that service users who have needs which do not qualify them for council funding will need to pay for using day care services. This charge will be levied by the organisation that the council has contracted to run this service.

	Current Charge	Proposed Charge
Day care – general (frail OP) incl. Transport	Nil	£18 per session
Day care – specialist (dementia/LD) Transport	Nil	£40 per session
Specialist Day placements LD/PD/MH	Nil	Actual cost per session
Day care - ineligible persons	Nil	£10 per session

c) Standard Charge for Homecare

We are proposing to change the way we charge homecare. Rather than applying a standard charge, the new charge will be based on the amount of time that home care is used and whether two carers are required.

	Current Charge	Proposed Charge
Home Care (hourly charge)	£16.20	£14.00
Home Care (half hourly charge)	£8.10	£8.10
Home care (double handed hourly charge)	£16.20	£28
Home care (double handed half hourly charge)	£8.10	£16.20

d) Homecare Weekend and Evening Rates

It is proposed that for homecare hours which are required at the weekend and during week day evening's additional charges will be applied (this will be added to the standard rates charged per half or per hour).

		Current Charge	Proposed Charge
Homecare Weekend & Evenings	½ hour	N/A	£1.00
	1 hour	N/A	£2.00

e) Carelink and Assisted Technology Equipment

It is proposed to increase the charges for both Carelink monitoring and the full response service the table bellows details the charges:

	Current Charge	Proposed Charge
Carelink monitoring	£3.72 per week	£5.00 per week
Carelink full response service	£7.18 per week	£7.50 per week

It is also proposed that the charge for assisted technology equipment be increased from £1.91 per week to £2.50 per week.

f) Supported Living Package

No changes are proposed in relation to supported living packages these will continue to be charged at full cost.

g) Direct Payments Personal Assistant Rates

It is proposed that the hourly rate paid as part of the Direct Payment (for the employment of a personal assistant) be reduced from £14.08 to £11.00 per hour.

h) Disability Related Expenses

People who have additional living expenses in excess of 'standard' living costs may receive a further reduction in their charge for 'disability related expenses'. (These may include, for example, incontinence laundry costs or costs to address a sensory impairment,). In Bromley we have calculated Disability Related Expenses (DRE) on an individual case by case basis;; in other authorities a standard rate is applied. The council is proposing to introduce standard rates of DRE disregard which would be set at:

- **£5 per week** where the service user is in receipt of the lower rate of Disability Living Allowance or Attendance Allowance,
- **£10 per week** where the service user is in receipt of the middle rate of Disability Living Allowance and,
- **£15 per week** where the service user is receiving the middle or higher rate of Disability Living Allowance or Attendance Allowance.

5. Your Feedback

How do you feel about these proposed changes? If you would like to comment on the changes, please complete the feedback form. Further information can be accessed at <http://www.bromley.gov.uk/socialcareandhealth>

If you would like to speak to someone please call Emma Maton on 0208 461 7579. If you require this information in another language or format please also call Emma Maton on 0208 461 7579. Please return this feedback form to emma.maton@bromley.gov.uk by the 28th February 2011.

6. What happens next?

Once we have gathered your feedback, a report will be presented to the Portfolio Holder to make a final decision. The decision will be made and a new charging policy will be in place for the new financial year.

ACS 11006

Appendix C

Changes to the Charging Policy Feedback Form

Context

This feedback form asks for your views on changes that the Council is proposing to make to the charges it makes towards the cost of adult social care services.

In the future everyone who is eligible to receive help to meet their social care needs will be allocated a **Personal Budget**. This will include the cost of all the services that the Council will fund to support you, less the contribution that you will be assessed to pay.

You will have the choice of continuing to receive services arranged by the Council or to take your Personal Budget as a **Direct Payment** to enable you to organise your own care.

The Council has reviewed the current charges it makes in light of the need to include the costs of all services within Personal Budgets. The changes that we are proposing include introducing new charges for some services and increasing other services where we already make a charge.

You can find more information at <http://www.bromley.gov.uk/socialcareandhealth> or if you would like to speak to someone please call Emma Maton on 0208 461 7579. If you require this information in another language or format please also call Emma Maton on 0208 461 7579. Please return this feedback form to emma.maton@bromley.gov.uk by the 28th February 2011.

A. Introducing Personal Budgets (fact sheet page 2)

Q1 You may already know that the Council is introducing personal budgets which offer service users the option to arrange for their own care needs. This means that rather than arranging care for you, the Council allows you to take control and gives you the money instead, in what is known as a 'direct payment'. Would you like more information about this?

Yes **No**

If you have ticked "yes" please give your name and address at the end of this form so that someone from Bromley Council can contact you.

Q2 We are proposing that the calculation for a personal budget would include the costs for a range of services that will meet person's assessed eligible need. The following services being considered are:

- Personal Care (including 2 carer support and evenings & weekends)
- Personal Assistants
- Non Residential Respite
- Assisted Technology Equipment
- Supported Living
- Carelink
- Day care including Transport

Do you agree that these services should be included as part of the personal budget calculation?

Yes **No** **Don't know/ not sure**

If you have answered no to the question above, can you please state which service(s) and your reasons why not?

Your Views 

Q3 We are proposing that the following services will not be included as part of the personal budget:

- Shopping
- Laundry
- Holiday Breaks

This means that the Council is proposing to remove the current subsidies for these services: anyone who wants to continue using them will be expected to access and pay for them independently at the full price charged by the provider of the service. Do you agree with this proposal?

Yes **No** **Don't know/ not sure**

If you have answered no to the question above, can you please state which service(s) and your reasons why not?

Your Views 

B. Changes to Service User Contributions (fact sheet page 4)

If a person is assessed as being eligible for support for their social care needs they will have a personal budget calculated to meet these needs. Everyone allocated a Personal Budget will then have a financial assessment to work out what they can afford to pay towards meeting the cost of their social care needs.

Q1. The following areas will be included within a personal budget and will therefore be part of the financial assessment:

- New rates for ½ hour and 1 hour personal care visits
- Introduction of an additional charge for where a second carer is required for personal care visits.
- A supplement for evening and weekend personal care visits

This means that you may have to pay a charge if you have services arranged by the Council or your contribution will be deducted from your direct payment if you organise your own care. Do you agree that it is fair to include these areas as part of the financial assessment?

Yes

No

Don't know/ not sure

If you have answered no to the question above, can you please state which area(s) you disagree with and your reasons why?

Your Views 

Q2. Directly employed personal assistants will be calculated as part of a personal budget and will therefore be part of the financial assessment. This means a contribution may be deducted from the amount you receive as a Direct Payment.

Do you agree that it is fair to include these services as part of the financial assessment?

Yes

No

Don't know/ not sure

If you have answered no to the question above, can you please state which area(s) you disagree with and your reasons why?


Your Views 

Q3. Day centres and transport will be calculated as part of a personal budget and will therefore be part of the financial assessment, which means a charge may be applied.

Do you agree that it is fair to include these services as part of the financial assessment?

Yes **No** **Don't know/ not sure**

If you have answered no to the question above, can you please state which area(s) you disagree with and your reasons why?

Your Views 

Q4. Carelink (community alarm), Telecare and other assisted technology equipment will be calculated as part of a personal budget and will therefore be part of the financial assessment, which means a charge may be applied.

Do you agree that it is fair to include these services as part of the financial assessment?

Yes **No** **Don't know/ not sure**

If you have answered no to the question above, can you please state which area(s) you disagree with and your reasons why?

Your Views 

Q5. We are planning to introduce standard amounts for disability related expenses; do you agree that a flat rate would be a fairer, simpler and more consistent way of allowing for the extra costs of having a disability? This means you would not have to give us receipts as evidence of the extra costs.

Yes **No** **Don't know/ not sure**

Your Views 

C. People ineligible for Council funding (fact sheet page 3)

Whilst the Council continues to ensure access to services for people not receiving a personal budget it is proposed that for people using day services whose social care needs do not qualify for the council's support will be expected to pay £10 per session for using this service.

Do you agree that it is fair to charge people whose social care needs do not qualify for the council's support?

Yes **No** **Don't know/ not sure**

Your Views 

Do you think that the proposed amount is fair? If you do not please state the amount you think is?

Yes **No** **Don't know/ not sure**

Your Views 

D. Final Thoughts

Q9 You may have written various comments in the 'your views' boxes on this feedback form, but if there is one key message about these proposals that you would like to give to Bromley's Councillors please tell us here.

Your Views 

E. About you

Q1 Are you: (please tick as many as apply)

Receiving home care, day care, or direct payment

Part of an organisation working with people in Bromley

A carer of someone receiving social care from the Council

A member of the public

Q2 Are you:

Male

Female

Q3 Please tell us your age:

18 – 50	51 – 64	65 – 74	75 and over
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Q.4 Please can you tell us what services you are currently using? Please tick as many that apply.

Direct Payment

Direct Payment – to employ a personal assistant

Home care

Shopping

Laundry

Holiday Breaks

Day Care

Carelink

Telecare or other assisted technology equipment

Other (please state)

If you would like more information on Personal Budgets and Direct Payments please provide your full address details including postcode, or if you prefer, an email address. Your details will not be used for any other purpose than to send you this information.

Name:

Address:

Postcode:

Telephone:

Email:

Please return this feedback form to emma.maton@bromley.gov.uk by the **28th February 2011**.

Many thanks for taking the time to give us your views

Report No.
ACS11005

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: Adult & Community Services Portfolio Holder

Date: For pre-decision scrutiny by the Adult & Community PDS Committee on 25 January 2011

Decision Type: Non-Urgent Executive Non-Key

Title: CLOSURE OF ADULT SOCIAL CARE RECEPTIONS

Contact Officer: Anne Watts , Assistant Director - Strategy and Performance
Tel: 020 8313-4110 E-mail: anne.watts@bromley.gov.uk

Chief Officer: Terry Rich Director of Adult and Community Services

Ward: N/A

1. REASON FOR REPORT

This report sets out proposals to close adult social care reception services at The Walnuts and Yeoman House area offices. The proposal to close these services, with effect from 4 April 2011, follows a number of changes, which have had a significant impact on the demand for reception services. These include the relocation of children's social care teams from The Walnuts and Yeoman House to the Old Town Hall. The majority of callers by far, are for children's social care and housing services and it is now proposed to manage these services differently.

This report identifies the impact of these proposals on service users, and the financial implications of the proposed changes, including savings and overall redundancy costs.

2. RECOMMENDATION(S)

The PDS Committee are asked to:

- 2.1** Comment on the proposed closure of Adult Social Care receptions at The Walnuts and Yeoman House area offices.

The Portfolio Holder is asked to:

- 2.2** Agree the proposed closure of Adult Social Care receptions at The Walnuts and Yeoman House area offices. This is subject to consideration of the breakdown of redundancy costs, which are presented as a part 2 item on this agenda.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Excellent Council.
-

Financial

1. Cost of proposal: Estimated cost savings and costs contained in part 2 report
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: ACS Customer Services
 4. Total current budget for this head: £209k
 5. Source of funding: Adult & Community Services Revenue Budgets
-

Staff

1. Number of staff (current and additional): 9 FTE posts, inc 2 currently vacant
 2. If from existing staff resources, number of staff hours: 324 per week
-

Legal

1. Legal Requirement: No statutory requirement or Government guidance.
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): less than 10 a day
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 The adult social care receptions are located at Yeoman House, Penge and The Walnuts, Orpington. There is also a housing and children's social care reception at Joseph Lancaster Hall, Civic Centre. The function of the adult social care receptions is to receive visitors to the area offices; handle enquiries from face-to-face callers; book meeting rooms and process internal and external post.

3.2 Following the relocation of children's' social care teams from Yeoman House and The Walnuts to the Old Town Hall it is evident that the provision of reception services to adult social care teams is no longer an efficient use of limited resources. It is therefore proposed to close the receptions at Yeoman House and The Walnuts and to transfer staff to the Children & Young Peoples' department to provide reception services to the children's social care teams currently located in the Old Town Hall.

3.3 Because of the relocation of children's social care teams to a central location, there is also no longer a need to operate a petty cash service from these two offices.

3.4 Equality Impact Assessment

An assessment of the impact of the closure of receptions on customers, service users, and other staff has been carried out and alternative arrangements can be provided, which will mitigate any impact on service users.

Consultation is currently being undertaken with service user representatives, through the various partnership groups, who have been invited to comment on these alternative arrangements.

3.4.1 The majority of service user visits are related to children's social care, who will continue to manage face-to-face reception services for these callers in the Old Town Hall; and housing services who will take over the management of reception services in Joseph Lancaster Hall.

3.4.2 Children & Young People and Adult & Community Services departments currently share petty cash services at Joseph Lancaster Hall and responsibility for children's social care petty cash will remain with the Children & Young People's department wef April 2011, as part of the proposed changes.

3.4.3 Adult social care receptions have experienced a significant and continued reduction in the number of enquiries from face-to-face callers.

Daily average of personal callers in 2010			
	Housing related	Care Services	Freedom Passes
March to May	3	12.5	5.5
June to August	1.5	9	Less than 1
Sept to Nov	2	7	Less than 1

3.4.4 The majority of adult social care callers (over 95%), already make contact through Bromley Social Services Direct (BSSD), and for the period September to November 2010, a daily average of 111 calls were answered by this service.

Therefore, a telephone link at both The Walnuts and Yeoman House offices will provide equivalent direct access to a wide range of council services including housing benefits, housing advice, Bromley Social Services Direct, Freedom Passes, council tax, and adult social care staff in both Yeoman House and The Walnuts. Telephone links are currently working successfully from a number of locations including the central library, Civic Centre and Anerley Town Hall.

- 3.4.5 Enquiries will also be handled by library staff at the new library in The Walnuts, as well as the existing library services in Anerley and Penge, and elsewhere in the borough, which already provide a wide range of information and advice on Council services to personal callers. Libraries also have longer opening hours than those currently provided by adult social care reception services.
- 3.4.6 A report elsewhere on this agenda provides further information on a scheme to use Future Jobs Fund candidates in Bromley libraries, employed to provide support to certain groups (in particular older people) to enable them to access the Council's website, which will also be of benefit to anyone who may have previously visited the area offices for information.
- 3.4.7 Alternative arrangements for the payment of allowances made through the appointee service to a very small number of service users will be implemented by March 2011, which means that these service users will benefit from developments in electronic banking, and local arrangements with banks and other cashier's services. This is a positive development which enables people to use mainstream services to support their independence and no one will be adversely affected by this change.
- 3.5 The number of personal callers has reduced significantly with the centralisation of children's social care, as few adult social care service users visit the area offices. The introduction of the voice recognition system by the council, and the replacement process for freedom passes being managed by London Councils has reduced numbers still further. There are now alternative means of maintaining a similar level of contact without the need to provide adult social care reception services in future.

4. FINANCIAL IMPLICATIONS

- 4.1 The proposals contained within this report will achieve savings of £50,000 in 2011/12 and £150,000 per annum from 2012/13.
- 4.2 Further information relating to the financial implications of these proposals is contained in Part 2 of this agenda.

5. PERSONNEL IMPLICATIONS

- 5.1 Further information is contained in Part 2 of this agenda.

Non-Applicable Sections:	Policy & Legal Considerations
Background Documents: (Access via Contact Officer)	

Report No.
ACS 11009

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult and Community Portfolio Holder

Date: For pre-scrutiny by Adult and Community Policy Development and Scrutiny Committee on 25th January 2011

Decision Type: Non-Urgent Executive Non-Key

Title: COMMISSIONING ARRANGEMENTS FOR PEOPLE WITH LEARNING DISABILITIES: SCHEME A

Contact Officer: Lorna Blackwood, Assistant Director Commissioning and Partnerships
Tel: 020 8313 4612 E-mail: lorna.blackwood@bromley.gov.uk

Chief Officer: Terry Rich, Director of Adult and community Services

Ward: Boroughwide

1. **Reason for report**

The report sets out proposals for the provision of living support services at Padua Road as part of the supported living programme for people with learning disabilities and makes recommendations for the award of a support contract for one year from April 2011. A further report on Part 2 of this agenda sets out the full financial implications of the proposal.

2. **RECOMMENDATION(S)**

The Portfolio Holder is asked to agree to the award of a contract for one year from 1st April 2011 to Family Mosaic for support to 8 service users at Padua Road.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
-

Financial

1. Cost of proposal: Estimated cost See report on Part 2 of this agenda
 2. Ongoing costs: Recurring cost. There will be a recurring cost in future years. However the current proposal is for one year only.
 3. Budget head/performance centre: ACS Commissioning and Partnerships, Learning disability services
 4. Total current budget for this head: £20,174,000
 5. Source of funding: LBB Adult and Community Services
-

Staff

1. Number of staff (current and additional): n/a
 2. If from existing staff resources, number of staff hours: n/a
-

Legal

1. Legal Requirement: No statutory requirement or Government guidance.
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 8
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 Padua Road in Penge is a new build development comprising of 8 two bedroom flats. The two ground floor flats are fully wheelchair accessible and are adapted to the needs of clients with complex needs. The property is owned and managed by Affinity Sutton and the Council has the right to nominate tenants with learning disabilities to the scheme.
- 3.2 Padua Road will operate as a service for young adults with learning disabilities entering Adult Services through Transition from Children and Young People services. The primary referral route for those entering the scheme is young people leaving residential educational establishments moving back into the Borough. The scheme is designed to support them to develop independent living skills whilst at Padua Road that will enable them to move in the future to other accommodation with a significantly reduced level of support. As service users develop these skills the level of support they receive at Padua Road will reduce accordingly. This will require a different service model to be developed with the support provider which will allow for a flexible approach to the level of service for each client.
- 3.3 At the same time the personalisation agenda calls for services that are developed in line with clients receiving personal budgets. This requires a new approach to the procurement and commissioning process as traditional fixed price contracts are less appropriate within this context for supported living schemes. Future contracts need to allow for clients in supported living schemes to use at least part of their personal budgets more flexibly and to have more choice in who provides their support.
- 3.4 Padua Road opened in September 2010 and support for the first cohort of service users has been purchased on a spot contract basis for a trial period whilst the service users settle in. This has enabled care managers and commissioners to test out the proposed model of support. Their future personal budgets will be finalised once the results of the current consultation on personal budgets and contributions policy is known. Some reviews of existing support plans have already been carried out resulting in reductions of support needed immediately. There have also been some reductions in support needed due to implementation of assistive technology.
- 3.5 During the coming year it is proposed that the early indications of the success of the re-ablement model in increasing client independence and reducing support hour requirements be tested further before a support provider is appointed longer term.
- 3.6 Negotiations have been undertaken with Family Mosaic under the auspices of the joint Supporting People framework which the Council operates in conjunction with Lewisham and Southwark. Family Mosaic has demonstrated its technical ability and undergone rigorous benchmarking of costs through the selection process for the Framework and has tendered on several occasions for contracts within the PCT learning disability programme. In independent tendering Family Mosaic have scored highly on both cost and quality tests. They are also providing a similar service in a learning disability scheme in Southwark.
- 3.7 It is therefore proposed that Family Mosaic be appointed to provide support to the service users at Padua Road for a period of one year from 1st April 2011 during which time the Council will work with them to develop the core with flexible support model required for Padua Road. Family Mosaic will be required to work towards a 10% efficiency target and to identify cost effective ways of delivering support which lessens the reliance on the Council's funding (e.g. informal support, involvement of carers, volunteers).

4. POLICY IMPLICATIONS

- 4.1 The proposals support the Council's priority to support independence for people with learning disabilities.

5. FINANCIAL IMPLICATIONS

- 5.1 The financial implications are set out in the report on Part 2 of this agenda.

6. LEGAL IMPLICATIONS

- 6.1 The Adult and Community Portfolio Holder agreed to the arrangements for the joint Supporting People Framework in April 2010. The Council's Head of Corporate Procurement has been consulted and agreed that this procurement route was acceptable and would not contravene EU Procurement regulations.
- 6.2 The Council's Head of Corporate Procurement has been consulted and agreed that this procurement route was acceptable and would not contravene EU Procurement regulations.
- 6.3 The London Boroughs of Lewisham and Southwark have been defined as the Principal Contracting Authorities (PCAs) for the joint Framework agreement. The framework agreement includes an access agreement to enable the other participating authorities to access the arrangements. The London Boroughs Lambeth and Bromley are accessing the framework as Secondary Contracting Authorities (SCAs).
- 6.4 The authorities have developed a common Supporting People contract to reduce bureaucracy and to provide greater clarity for providers. This contract will be used for all support services called off from the framework agreement. Use of this document will reduce the time and resources required to complete contract award negotiations.
- 6.5 Each approved provider has entered into a framework agreement with each PCA, as well as an access agreement with each SCA. This formalises the legal arrangements between the selected providers and the individual authorities, so that services can be called off from the framework agreement.

Non-Applicable Sections:	Personnel implications
Background Documents: (Access via Contact Officer)	[Title of document and date]

Report No.
ACS11011

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: ADULT AND COMMUNITY PORTFOLIO HOLDER

Date: Pre-decision scrutiny by Adult and Community Policy Development and Scrutiny Committee on 25th January 2011

Decision Type: Non-Urgent Executive Key

Title: COMMISSIONING ARRANGEMENTS FOR SUPPORT SERVICES FOR PEOPLE WITH LEARNING DISABILITIES: SCHEME B

Contact Officer: Wendy Norman, Strategic Manager, Procurement and Contract Compliance
Tel: 020 8313 4212 E-mail: wendy.norman@bromley.gov.uk

Chief Officer: Terry Rich, Director of Adult and Community Services

Ward: Boroughwide

1. Reason for report

The Council's Contract with Elizabeth Fitzroy Support to provide a support service to people with learning disabilities at two locations in Bromley ends on 31st March 2011. This report outlines the provision of support services for people with learning disabilities by Elizabeth Fitzroy Support and requests a waiver of Contract Procedure Rule 13.1 to enable the Council to enter into a further Contract with Elizabeth Fitzroy Support. The full financial implications of the proposals are set out in a report on Part 2 of this agenda.

2. RECOMMENDATION(S)

- 2.1 The Portfolio Holder is asked to grant a waiver under Contract Procedure Rule 13.1 for the need for competitive tendering to allow officers to award a contract for support services for people with learning disabilities to Elizabeth Fitzroy Support with effect from 1st April 2011.
- 2.2 The proposed length of the Contract is one year with the potential to extend for a further period up to but not exceeding one year. The extension to be agreed by the Director of Adult and Community services in consultation with the Adult and Community Portfolio Holder.
- 2.3 The Contract will include a break clause which will enable the Council to withdraw from the Contract earlier should a review of funding become necessary.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
-

Financial

1. Cost of proposal: Estimated cost Set out in report on Part 2 of this agenda
 2. Ongoing costs: Recurring cost. If option to extend is implemented+
 3. Budget head/performance centre: Supporting People Services
 4. Total current budget for this head: £5.4m
 5. Source of funding: LBB ACS budget
-

Staff

1. Number of staff (current and additional): Support staff are employed by the Contracted Organisation to provide the Support Services. A Contract Compliance Officer will monitor the Contract.
 2. If from existing staff resources, number of staff hours: Regular contract monitoring takes place - estimated annual hours 30.
-

Legal

1. Legal Requirement: Non-statutory - Government guidance.
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 12 service users at any one time are supported by the Contracted Organisation
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 The Supporting People programme funds housing related support to people who need assistance to continue to live independently and to enable them to acquire the skills to move into their own accommodation and sustain their tenancies. The programme covers a wide range of client groups, the majority of whom are adults, and is therefore managed through Adult and Community services.
- 3.2 This contract benefits single adults with learning disabilities. They are supported whilst living in one of two houses sited in Derwent Road, Penge. The Contract provides short term accommodation based housing related support to the service users to assist them with the skills needed to move on to other accommodation suitable to their needs, live independently in the community, obtain and manage welfare benefits and to support them towards education, training or employment. The contract within these two schemes is based on a standard supporting living contract as the service users have much lower level needs than those in schemes such as Padua Road (elsewhere on this agenda).
- 3.3 The service has been delivered in partnership with Elizabeth Fitzroy Support since 2003. During this time Elizabeth Fitzroy has gained good specialist and local knowledge, effective links with other providers and local learning disability services. They have built up significant knowledge of the people who are receiving the service and have demonstrated their ability to support people to live more independently. During the last Quality Assessment Framework (QAF) report, Elizabeth Fitzroy Support showed that they were very strong in the area of service user involvement including the following activities:
- There has been full service user involvement in the recent staff recruitment from advert production to interviewing.
 - service users are now involved with disability awareness training.
 - Participation in the local forum is ongoing and one service user attends the National Forum.
 - One matter addressed was service user feeding back they were unhappy about the performance of some agency staff. They then worked with Elizabeth Fitzroy Support Director to create an evaluation form to feedback on staff performance. All concerned are going to meet in the future to review the effectiveness of the form.
 - A new booklet promoting the service has been produced with assistance from a service User and it includes interviews from other residents to show the role of Elizabeth Fitzroy Support.
- 3.5 The service has the capacity for 12 service users sited over the two houses. The majority of service users stay in the service for less than two years before they move on to accommodation more suited to their needs.
- 3.6 The Supporting People Team has closely monitored the service provided by Elizabeth Fitzroy Support at the two schemes since the programme commenced and has noted continuous improvement across all areas of the Quality Assessment Framework (QAF) and there is every expectation that these improvements will continue. Overall Officers consider that the quality of service delivered by Elizabeth Fitzroy Support is high and sufficient to hold a contract. The most recent validated QAF score is shown in the table below:

Quality Assessment Framework Objective	Grade
Assessment & Support Planning	B
Security, Health & Safety	B
Safeguarding & Protection from Abuse	A
Fair Access, Diversity & Inclusion	B
Client Involvement & Empowerment	B
Overall Score	B

- 3.7 The current contract with Elizabeth Fitzroy Support expires on 31st March 2011.
- 3.8 The Joint Local Authority Framework Agreement has provided partner boroughs with bench marking data on costs and quality for Supporting People services. Elizabeth Fitzroy Support was not accepted onto the Framework as a provider for accommodation based services. The reason for the exclusion was a high hourly rate, which was higher than the current rate charged to the London Borough of Bromley.
- 3.9 The expected outcome from using the Framework to award a new contract is to ensure that value for money could be achieved. The current hourly rate for providing the service is very competitive and when compared to the prices quoted by other providers for the Framework it shows that if the Council were to tender the service via the Framework, there would be a significant increase in cost. A comparison between the Framework prices and the current hourly rate charged by Elizabeth Fitzroy Support for the service are shown in the report on Part 2 of this agenda.
- 3.10 Officers held detailed discussions with Elizabeth Fitzroy Support who agreed that they would be willing to enter into a new contract to provide the service at substantially the same terms and conditions as the current contract.
- 3.11 Elizabeth Fitzroy also held a minimal contract to deliver floating support to one user who lives in an RSL property with an assured tenancy. This contract ends on 31st January 2011. Elizabeth Fitzroy confirmed that they would be willing to absorb the 5 hours floating support currently provided to a service user resident in a property in Thicket Road within the supported accommodation service. This will result in a small efficiency saving.

4. POLICY IMPLICATIONS

The service to be delivered through this contract will support the priority outcomes in the Commissioning Plan for Supporting Independence 2010/11, the Learning Disability Strategy Delivery Plan 2009/2011, the Government's Valuing People Now – A 3 Year Strategy for People with Learning Disabilities, published in January 2009 and is designed to meet the Council's objective to support independence, especially for people with learning disabilities.

5. FINANCIAL IMPLICATIONS

- 5.1 The financial implications of the proposals outlined in this report are set out in the report on Part 2 of this agenda.

6. LEGAL IMPLICATIONS

- 6.1 The Council's procurement rules allow for formal tendering requirements to be waived subject to compliance with the Regulations. Rule 13.1 states that a Chief Officer may exercise such Exemption or Waiver subject to the following:

Chief Officer in agreement with the Director of Legal, Democratic and Customer services and Director of Resources and following approval of the relevant Portfolio Holder, with a report of the use made of this exemption being made to Audit Sub Committee on a bi-annual basis.

7. PERSONNEL IMPLICATIONS

There are no personnel implications for the Council arising out of this recommendation.

Non-Applicable Sections:	[List non-applicable sections here]
Background Documents: (Access via Contact Officer)	[Title of document and date]

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Report No.
ACS 11004

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: Adult and Community Portfolio Holder

Date: For pre-decision scrutiny by Adult and Community Policy Development and Scrutiny Committee on 25th January 2011

Decision Type: Non-Urgent Executive Non-Key

Title: SERVICES FOR PEOPLE WITH VISUAL IMPAIRMENTS

Contact Officer: Rebecca Jarvis, Joint Strategic Commissioning Manager (Older People and Adults with Complex Health and Social Care Needs)
Tel: 020 8313 4198 E-mail: rebecca.jarvis@bromley.gov.uk

Chief Officer: Terry Rich, Director of Adult and Community Services

Ward: Boroughwide

1. Reason for report

The contract with Kent Association for the Blind for provision of rehabilitation and support services to people with visual impairments expires on 31st March 2011 with no option to extend. The report proposes a short term contract in 2011/12 to enable the effects of the personalisation agenda on the service to be assessed.

2. **RECOMMENDATION(S)**

The Portfolio Holder is asked to waive the requirements for competitive bids pursuant to Contract Procedure Rule 13.1 and approve the proposal to negotiate a new contract with the current provider for the provision of services to people with visual impairments for a period of one year from 1st April 2011 to 31st March 2012. The Portfolio Holder is also asked to agree to the consultation on the proposal that small items of equipment and talking books will no longer be provided free of charge to people with visual impairment.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
-

Financial

1. Cost of proposal: Estimated cost £114,614 p.a. excluding the cost of equipment and Talking Books
 2. Ongoing costs: Recurring cost. £114,614 p.a.excluding the cost of equipment and Talking Books
 3. Budget head/performance centre: Services for People with Physical Disabilities, Kent Association for the Blind
 4. Total current budget for this head: £137,370
 5. Source of funding: LBB Adult and Community Services revenue budget
-

Staff

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 743 people were referred to KAB from July 2009 - June 2010.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments:

3. COMMENTARY

Background

- 3.1 The current contract was negotiated with Kent Association for the Blind (KAB) in 2006 and expires on 31st March 2011.
- 3.2 The value of the contract is £114,614 per year. The main element of the contract is the provision of specialist statutory assessments for people with visual impairments and to maintain the registers for people who are blind and partially sighted. These are statutory requirements which are carried out by KAB on behalf of the London Borough of Bromley. In addition, KAB provides:
- Specialist information, advice and guidance
 - Rehabilitation programmes to support people to manage their sight-loss within their home, thus preventing or delaying the need for more acute social care services
 - Emotional support
 - Mobility training to support people to get around safely
 - Information and advice about provision of low-level equipment, including demonstrations at the Sight Centre

Demand

- 3.3 From July 2009 to June 2010, 743 people accessed services provided by KAB.
- 3.4 Information from Projecting Older People Populations Information (POPPI) predicts that from 2010 to 2015 the numbers of people aged 65 and over with a moderate or severe visual impairment in Bromley will increase from 4686 to 5086 (8.5%). The Projected Adult Needs and Service Information (PANSI) predicts that the number of people under 65 with a serious visual impairment in Bromley will remain fairly stable at 125.

Quality

- 3.5 KAB has a good reputation and excellent links with other organisations in the Borough. For example, the South London Healthcare Trust holds the low vision clinic on site at the KAB premises on Blyth Road (the Bromley Sight Centre) which provides a smooth pathway from diagnosis to support services and is recognised as an area of good practice. KAB also works closely with Age Concern Bromley, especially around coordinating information and benefits advice. Age Concern Bromley holds an outreach service at KAB for benefits advice.
- 3.6 A telephone survey was carried out in August and September 2010 to seek views of people who had recently had contact with KAB. 17 people were randomly selected from the list of recent service-users and contacted about their experience of KAB. The feedback was extremely positive with most people commenting on the professionalism of staff and the quality of the information they received. Many people commented that KAB has provided them with the support they need to live independently in their own homes, with no further support from statutory services.

Value for money

- 3.7 The contract with KAB is £114,614 per year. In 2010/11 KAB is contributing an additional £88k to services in Bromley.
- 3.8 The main function under the contract is to provide specialist statutory assessments and rehabilitation for people with visual impairment who meet Fair Access to Care criteria. The rehabilitation programmes can range from simple programmes of 2 to 3 visits to set up lighting

and learn how to use low vision aids, to intensive programmes of mobility training or daily living skills training over a number of weeks.

- 3.9 Over the past year, KAB carried out assessments and rehabilitation programmes for 375 people. The assessment and rehabilitation team also provide an information, advice and guidance service which was used by an additional 329 people in the past year.
- 3.10 In addition to the contracted activities, KAB provides added value in the form of a strong volunteer group which coordinates peer support, befriending services, supporting people with correspondence, transport etc.

The Local Market

- 3.11 Kent Association for the Blind is the only organisation in the Borough with the level of specialist skills and experience, infrastructure and local knowledge required to provide the wide range of support services to people with visual impairments. The organisation has demonstrated excellent value for money under the current contractual arrangements and is fully embedded in the care pathway for visual impairment.
- 3.12 In neighbouring Boroughs many of the functions provided by KAB are carried out by in-house social care teams. This means that the local market is extremely limited and there would be no advantage to be gained through a competitive procurement process.
- 3.13 The alternative would be to bring the service in-house but there would be a significant training implication for care managers to carry out the specialist assessments, and the rehabilitation elements would still need to be commissioned separately. We would also lose the specialist knowledge and expertise of the organisation, and the added value of working with a voluntary organisation.

Proposal

- 3.14 It is proposed to negotiate a new contract with Kent Association for the Blind for a period of one year. This will allow time to assess the impact of the Personalisation Agenda and the changes in care management pathways following the restructure which is due to be implemented from April 2011.
- 3.15 The Council has also previously provided equipment and talking books free of charge to people with visual impairment through the contract with KAB. It is proposed that in future small items of equipment, such as portable lamps, talking clocks and talking books will no longer be provided free but that people will be signposted to the free talking books service provided in the borough's libraries and to other providers of talking books such as the national Calibre service and to the equipment provided by the British Wireless for the Blind Fund. KAB might also wish to continue to provide small equipment and talking books on a charged for basis. It is proposed that consultation on these changes be carried out alongside the consultation on personal budgets and contributions policy reported elsewhere on this agenda and the results reported to the Portfolio Holder in March.

4. POLICY IMPLICATIONS

- 4.1 Support services for people with Visual Impairments support the priority outcomes in the Older People Strategy 2008-2013, Independence and Choice for Older People in Bromley. The services also support the Putting People First agenda by providing rehabilitation to people with visual impairment to maximise functioning and live independently.

5. FINANCIAL IMPLICATIONS

- 5.1 The annual cost of the contract with Kent Association for the Blind is £114,614 excluding the cost of equipment and talking books. Negotiations are underway with KAB to reduce the cost of the main contract. The new contract will not exceed the current value.
- 5.2 Contract procedure rule 13.1 allows for a waiver of the requirement for competitive bids, subject to the relevant approval being obtained.

6. LEGAL IMPLICATIONS

- 6.1 The Council has a duty under section 47 of the NHS and Community Care Act (1990) to carry out an assessment of need for community care services which includes people with sensory impairment. If this function was not provided by an external organisation, it would need to be provided for in-house.
- 6.2 The Council has a duty under section 29 of the National Assistance Act 1948 to maintain registers of people with disabilities. For visual impairment there are two registers: Blind and Partially Sighted. If this function was not provided by an external organisation, it would need to be provided for in-house.
- 6.2 This is a waiver of the need for competitive tendering and in accordance with contract procurement rule 13.1 the Director of Legal and Democratic Services and Director of Resources have indicated their agreement to the proposed contract negotiation as achieving best value for the Council. Given the value of the proposed contract it is necessary for the Portfolio Holder to also approve the contract. A note of the exercise of the waiver will be reported to the Audit Sub Committee. The service is a Part B service under Schedule 3 to the Public Procurement Regulations 2006 and not subject to the full EU procurement regime and we are looking at a modest award/extension to enable us to evaluate options for future procurement.

Non-Applicable Sections:	Personnel
Background Documents: (Access via Contact Officer)	

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Report No.
ACS 11007

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: **Adult and Community PDS Committee**

Date: **25th January 2011**

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **RESTRUCTURE –CARE MANAGEMENT AND ASSESSMENT
TEAMS IN ADULT AND COMMUNITY SERVICES**

Contact Officer: David Roberts , Assistant Director - Care Services
Tel: 020 8313-4197 E-mail: david.roberts@bromley.gov.uk

Chief Officer: Terry Rich - Director - Adult and Community Services

Ward: Borough- wide

1. Reason for report

This report outlines the impact on people requiring services from the Department of the restructure of the care management and assessment teams for adults with a physical disability and older people which was agreed by the Executive on 8th December 2010. This structure is designed to improve the response to service users and is based on the Customer Journey agreed by the Portfolio Holder on 21st September 2010.

2. **RECOMMENDATION(S)**

The PDS is asked to:

- (a) consider the impact of the agreed proposals for restructuring within the Care Management and Assessment Teams,
- (b) consider how the changes resulting from these proposals should be reported to PDS so that they can assess whether the objectives have been achieved.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Excellent Council.
-

Financial

1. Cost of proposal: Estimated cost Estimated one-off cost resulting in ongoing savings of £39k per annum
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: Assessment and Care Management
 4. Total current budget for this head: £5,128k Staffing costs
 5. Source of funding: Funding for one-off costs agreed by Executive on 8th December 2010.
-

Staff

1. Number of staff (current and additional): 120 approx
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Borough-wide services to Bromley residents, currently over 10,000 people receive social care services.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 The Supporting Independence in Bromley programme aims to promote independence of adults and older people with a disability through greater use of short-term rehabilitation coupled with service user choice and control for those people who meet the eligibility criteria, together with advice and support to enable use of mainstream services for those who do not.
- 3.2 This approach is consistent with the requirements of the recent Government guidance on the transformation of adult social care (LAC (DH) 2009 1) and the 2010 White Paper on the NHS.
- 3.3 Proposals for an outline structure of the care management and assessment teams were agreed by the Portfolio Holder on 21st September 2010 based on a Customer Journey, attached as Appendix 2. This incorporated the Reablement Service which had been reported to this PDS Committee on 29th September 2009.
- 3.4 This outline structure has been developed further and has now been agreed by the Executive, at their meeting of 8th December 2010. The current structure and the agreed new structure are set out in Appendix 1. Whilst there are efficiencies and a reduction on the number of management posts, there are the same number of front line staff in the new structure as were in the previous structure.
- 3.5 These changes were subject to full consultation with staff, Trade Union and Departmental Representatives and Staff Side Secretary in line with the Council's procedures on managing change in the workforce.

Short Term Intervention

- 3.6 People are usually referred to the Department at a time of real difficulty and require a swift response. The Council's Customer Contact Centre provides an effective universal service giving advice and guidance to those who can meet their needs from mainstream services and transferring those who need assessment and specialist services to the appropriate team. This service includes a dedicated team for those with social care needs, Bromley Social Services Direct (BSSD). This restructure enhances BSSD with additional staff to increase the level of advice and guidance given to enable people to access mainstream services and reduce the number unnecessarily going through a full assessment.
- 3.7 The Care Management team based at the Princess Royal University Hospital will continue to assess in-patients and arrange for services for those needing them on transfer from hospital, with many people being transferred directly to the Reablement Team described below.
- 3.8 A Reablement Team will give a combination of assessment and personal assistance to those who would usually be provided with domiciliary care. This active service will promote independence and assist people to regain confidence, including those with high levels of need. As a result it is anticipated that fewer people will require on-going personal care services. But for those who do, it will determine the exact level of Council funded assistance that is needed.
- 3.9 Intermediate Care will be strengthened and will work alongside the Reablement, Hospital and Contact and Assessment Teams to provide specialist rehabilitation to enable people to continue to live at home.

Complex Care

- 3.11 Some of people referred to the Department have complex and variable needs which require a flexible service, regular contact and interventions. Usually this is associated with complex health needs. This service will include specialist staff such as Stroke Care Co-ordinators and the Consultant Lead Practitioners so that people received assessments and reviews by staff with the relevant specialist knowledge. It is also intended that work will progress with the emerging Bromley Healthcare to develop an integrated service with District Nurses and other community NHS staff working alongside care management staff. Through these developments it is believed that we will be better placed to meet complex needs in a more cost effective manner avoiding duplication of effort and resources.
- 3.12 There will be two Complex Care Teams based in the East and the West of the borough to maximise joint work with the GPs and the community NHS staff in Bromley Healthcare. These teams will be based in the existing offices in Orpington and Penge.
- 3.13 A Review and Brokerage Team will carry out the support planning for those with complex care needs and also the annual reviews for those receiving a funded service. This team will support the increased use of Direct Payments and seek innovative ways of meeting needs so that there is a wider range of services available to all.
- 3.14 Whilst Adult Safeguarding will remain the responsibility of all teams, the complex care teams will be responsible for those cases requiring detailed assessment and those with complex issues requiring a longer term intervention.

4. POLICY IMPLICATIONS

Promoting the Independence of Adults and Older People is one of the key objectives set out in the Council's strategy "Building a Better Bromley". Promoting choice, personalisation and Independence is the overall aim of the ACS Portfolio Plan. The new structure will improve performance on these objectives as well as those set out in the Government's White Paper "Equity and excellence: Liberating the NHS", in particular building partnership and integration with NHS community services.

- 4.2 Progress on the Supporting Independence in Bromley Programme (SIB) was reported to PDS on 24th February 2010. Reablement is a key component of this programme both to ensure that people have as much independence as possible, and also to reduce spend. A swift response to need with an active programme to restore confidence and function will result in higher levels of self-care and lower demands on the budget which will avoid the need for additional service cuts given the reduction in revenue support to the Council from the Government.
- 4.3 It is forecast that as many as 1,500 people each year would benefit from the combination of assessment and rehabilitation provided by Reablement. Embedding this service into the care management structure will maximise the impact of the service which needs good communication between all staff working with each individual.

5. FINANCIAL IMPLICATIONS

- 5.1 The proposed restructure of the care management and assessment teams will achieve ongoing savings of £39k per annum.
- 5.2 The financial implications relating to these proposals were reported in detail in a Part II report to the Executive on 8th December 2010.

Non-Applicable Sections:	Legal, Personnel
Background Documents: (Access via Contact Officer)	<p>Transforming Adult Social Care Local Authority Circular(DH) (2009) 1</p> <p>White Paper “Equity and excellence: Liberating the NHS” 2010</p> <p>“Assessment and Re-ablement Service” report to A&C PDS 29th September 2009</p> <p>“Supporting Independence in Bromley Programme - Changes to Care Management Arrangements” Report to A&C PDS and A&C Portfolio Holder 21st Sept 2010</p> <p>“Proposed Restructure – Care Management and Assessment” Report to Executive 8th December 2010</p>

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Report No.
ACS11001

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: **Adult and Community Services Performance Development and Scrutiny Committee**

Date: 25th January 2011

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **QUALITY MONITORING IN CARE HOMES**

Contact Officer: Wendy Norman, Strategic Manager, Procurement and Contract Compliance
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Chief Officer: Terry Rich, Director of Adult and Community Services

Ward: Boroughwide

1. Reason for report

This report informs Members of the work undertaken to monitor the quality of service provided in residential and nursing homes for adults in the borough.

2. **RECOMMENDATION(S)**

2.1 Members are asked to note and comment on the report.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Excellent Council.
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Financial

1. Cost of proposal: No cost
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: Residential and Nursing Care for Older People and Adult Services
 4. Total current budget for this head: £34m
 5. Source of funding: L.B.Bromley Adult and Community Service Budgets
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Staff

1. Number of staff (current and additional): n/a
 2. If from existing staff resources, number of staff hours: 1 FTE contract compliance officer
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Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is not applicable.
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 1000
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments:

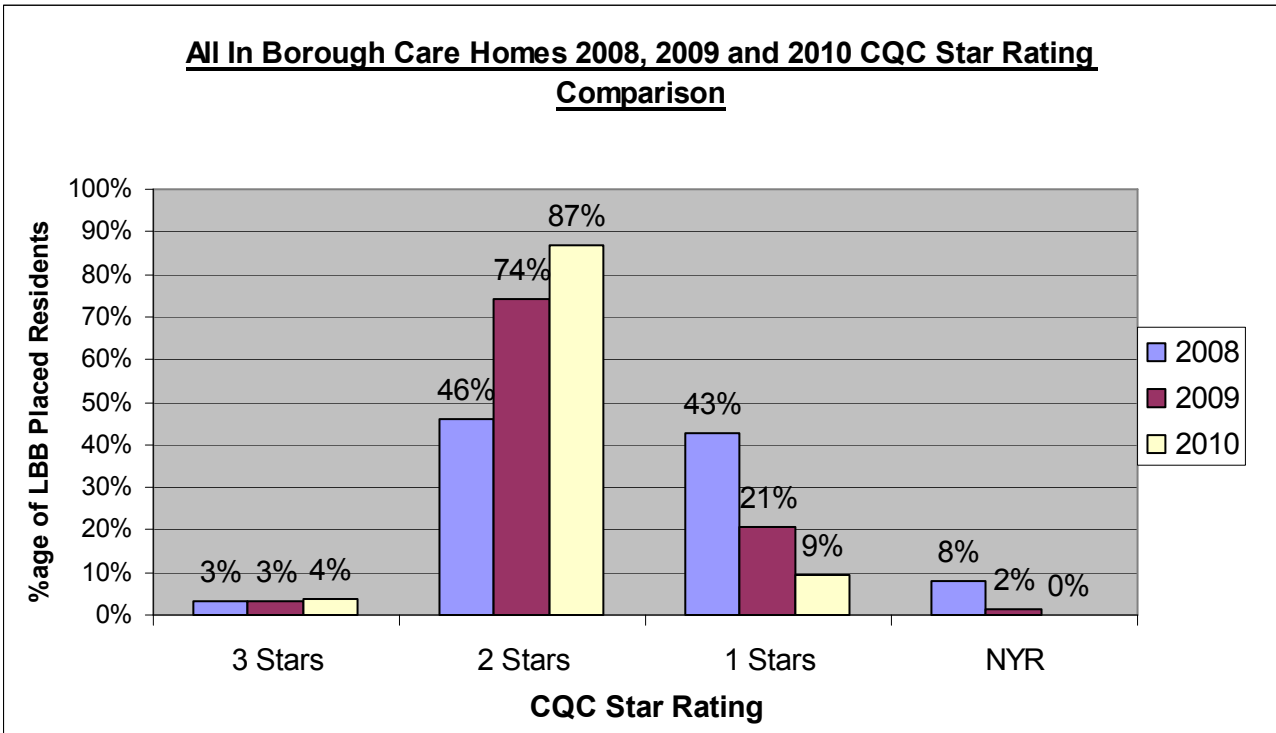
3. COMMENTARY

- 3.1 Adult and Community Policy Development and Scrutiny Committee receives regular updates covering the arrangements for monitoring contracts and progress made to raise standards in care homes within the borough for older people, people with learning disabilities, mental health needs and physical disabilities.
- 3.2 The number of new adult residential care placements made is reducing as people opt for independent living with support in line with the personalisation agenda. Service developments both in accommodation and support have been implemented for each client group which has helped to achieve these aspirations. As a result the Council places on average 300 older people in nursing and residential homes each year.
- 3.3 In order to secure best value the Council has a number of block contracts with homes in the borough. However individuals make their own choice about where they wish to live and consequently the Council has a large number of spot contracts with providers, both in Bromley and in other parts of the country. In addition there are fewer care homes for adults in Bromley than for older people, meaning that many placements are made out of borough.
- 3.4 The number of permanent placements by client group and contract type are shown in the table below.

Client Group	Spot Contracts	Block Contracts
Older People	574	206
People with Learning Disabilities	210	9 (in house registered service)
People with Mental health needs	56	36 (through access to PCT block contracts)
People with physical disabilities	32	0

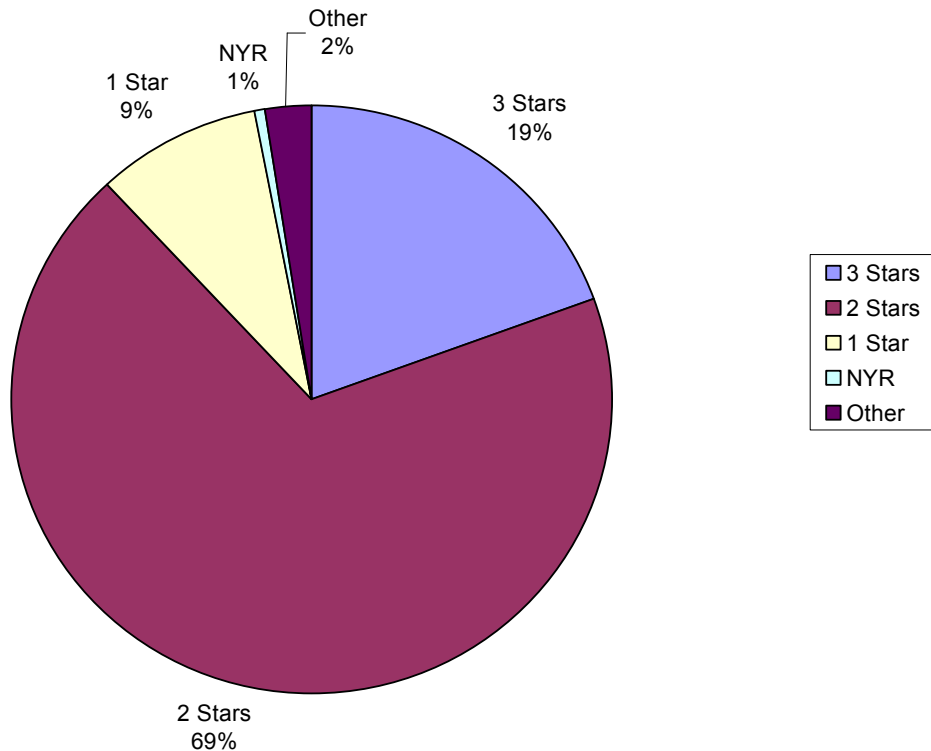
- 3.5 Individuals are entitled to move into a home of their choice; however everyone considering a permanent move to residential care is encouraged to consider the Care Quality Commission (CQC) star ratings of the home and to read the latest reports about individual homes which are available on the CQC public website. A brief description of the standards for each of the star ratings can be found in Appendix 4.
- 3.6 In February 2010 Members endorsed the Department's practice not to make placements in homes rated as nil or one star unless this is a deliberate and informed choice by the service user. The Council undertakes enhanced review activity of residents who are placed in nil or one star homes ensuring that they receive six monthly reviews. In the 2010 annual report we reported that CQC had published concerns that some Councils continued to purchase a significant proportion of residential and nursing home care from providers that have been rated "poor" (0 star) or "adequate"(1 star) by CQC. This indicated that in 2008/09 Bromley had made 32% of placements in poor or adequate homes. By comparison in 2009/10 this percentage showed a marked reduction from 22.2% in December 2009 down to 11.4% in September 2010.
- 3.7 During 2010 the number of one star homes in Bromley reduced from 13 to 12 and the number of Council supported service users residing in one star homes reduced from 139 to 59. Further performance information about Bromley homes is included in the Appendix 1.

All In Borough Care Homes 2008, 2009 and 2010 CQC Star Rating Comparison



3.8 Of the 421 out of borough placements in adult and older peoples residential and nursing homes, only 37 residents are currently placed in one star rated accommodation (comprising 27 different homes). None are placed in zero rated homes. This is illustrated in the following chart. The star rating is shown as “Other” where for example a home is located in Scotland where the rating system does not apply or where people are in residential colleges inspected by Ofsted rather than CQC.

No of out of borough placements by CQC star rating



3.9 During 2010 the contract compliance officer devised a quality monitoring questionnaire for all out of borough placements in one star rated homes. Questionnaires were sent out to the relevant local authority for each one star home in order to gather feedback on the quality of care

provided in the homes. The information gathered supplements the knowledge gained from the regular individual reviews that are carried out by care management to ensure that residents continue to be safely placed and well cared for.

New rating system – replacement of National Minimum Standards

- 3.10 During 2010 CQC announced they would be abolishing the star rating system. In addition their programme of inspections ceased between July and October 2010 to allow the regulator time to prepare for the new regulations. This means that providers last published star ratings will remain in place until the CQC introduce a replacement for the system. CQC will be undertaking a consultation during early 2011 and it is expected that the new rating system will be introduced in May 2011.
- 3.11 From 1st October 2010 care standards were amended to take into account the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These new regulations replaced the long standing National Minimum Standards, part of the Care Standards Act 2000.
- 3.12 The new regulations detail the key care standards which CQC call the ‘essential standards of quality and safety’. These consist of 28 regulations (and associated outcomes) that are set out in the new legislation. For each regulation, there is an associated outcome – the experiences CQC expect people to have as a result of the care they receive.
- 3.13 To check providers’ compliance with the essential standards, CQC aim to focus on the 16 regulations (out of the 28) that come within Part 4 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 – these are the ones that most directly relate to the quality and safety of care and include:
- *Care and welfare of people who use services*
 - *Assessing and monitoring the quality of service provision*
 - *Safeguarding people who use services from abuse*
 - *Cleanliness and infection control*
 - *Management of medicines*
 - *Meeting nutritional needs*
 - *Safety and suitability of premises*
 - *Safety, availability and suitability of equipment*
 - *Respecting and involving people who use services*
 - *Consent to care and treatment*
 - *Complaints*
 - *Records*
 - *Requirements relating to workers*
 - *Staffing*
 - *Supporting workers*
 - *Cooperating with other providers*

Quality monitoring

- 3.14 Whilst the Care Quality Commission remains the regulatory authority for registered care services, the London Borough of Bromley also has an obligation to ensure quality is maintained in all registered care homes in the borough. In order to incorporate recent changes to the care regulations (mentioned above) the Councils Contract Compliance Officer has devised a care home quality assessment framework (QAF) to replace the previous monitoring tool.

3.15 Providers are asked to self assess themselves against each key regulation by providing written statements to evidence compliance. These statements will then be followed up in the form of a desktop review and through a schedule of contract monitoring inspections to each premises. The care home QAF was recently piloted by two residential and two in nursing homes with the full roll out expected to take place in 2011. All in borough providers who contract with the council will be expected to participate.

3.16 The CQC star rating system is also used extensively by the Contract Compliance team to inform which areas they focus monitoring activities on. The Council's role in monitoring quality extends to all care homes in the borough, not just those with which it holds a contract. 25% of monitoring visits which took place in 2010/11 were to one star homes. Management information used to monitor performance includes:

- Safeguarding alerts
- Complaints
- Regulation 16/18 reports (also copied to CQC – reports of death, serious injury, hospital admission, outbreak of disease, medication errors etc.) – previously Regulation 37.
- Information from other stakeholders, e.g. Care Managers, Carers, Health Professionals
- Observations made during training courses.
- Results from customer satisfaction surveys
- Information supplied by Members, following visits.
- Regular maintenance and fire safety reports.

3.17 Areas of concern raised during monitoring and addressed by homes during 2010 are outlined briefly below.

The biggest improvement on the previous visit to one home was the quality of activities that took place. Residents in the main lounge were stimulated and this created a good atmosphere for all.

Activities coordinator in one home has focused on including residents with dementia who have previously had behavioural issues. This has significantly improved the number of incident reports being received

One home has now joined LBB's training consortium and as a result the majority of mandatory training is now up to date.

A number of training sessions were put on for carers of one home to improve their communication and customer care skills (as a result of a number of issues in this area), particularly for those staff members with differing cultural backgrounds. As a result staff now interact significantly better with residents and visitors which has created a better atmosphere at the home

One organisation has no limit on their training budget which allows the home manager to book any training that staff require.

A staffing restructure has been implemented to ensure greater support for care staff. A Senior Carer is now in place on each shift, to supervise care staff and assist Nurses. A Clinical Development Nurse post has been created to support and advise Nurses with clinical issues at each of the organisations' Bromley based homes.

A keyworker system has been implemented. Each staff member has been allocated three residents to work with. Care, daily living and activities will be more person centred as a result.

The organisation's medication policy has been amended to ensure that newly qualified Nurses successfully complete medication competency tests before commencing administering medication.

New catering company has been introduced with significantly improved feedback. Menu design has considered residents dietary requirement and aims to provide nutritious meals. A choice of meal is now offered to residents at each sitting.

Picture menus have been implemented to assist residents with dementia to choose the meals they desire.

The environmental improvements to the main lounge and the creation of the first floor lounge has greatly improved the environment for residents and eased congestion on the ground floor.

New carpets have been laid in communal areas which has significantly improved the environment for residents with dementia. New furniture has also been ordered

A staff feedback form has been implemented to allow information to be passed on to relatives following short term respite which highlights any issues during the respite stay.

The home's website is becoming increasingly interactive. The home are working towards allowing relatives to be able to log in and check on their relatives progress on a daily basis.

Following CQC requirements, one home has worked hard to significantly improve their care plans in terms of layout, detail and frequency of updates.

Residents are involved in the recruitment of new staff and often sit on the interview panel, even for senior management positions.

A particularly positive aspect of the service is that the home imposes no specific routines on resident's daily lives and this allows residents to choose the lifestyle they wish.

Several homes are currently working towards, or have completed the Gold Standards Framework, an end of life care accreditation scheme supported by St Christopher's Hospice.

Member visits

- 3.18 Members have highlighted the importance of undertaking visits to care homes at ACS PDS. A rota for visits has since been circulated to all Members and in addition Members have been provided with a form which prompts comments and observations. During 2010 Members visited 7 homes in Bromley, 2 for adults with learning disabilities and 5 for older people. The observations made during the visits were passed back to the contracts team and were followed up during subsequent contact with the homes.

Safeguarding

- 3.19 When safeguarding referrals are made the Care Management teams instigate the Council's safeguarding procedures. Monitoring officers can be involved in safeguarding investigations and always follow up on learning points or action plans at the conclusion of each case. The Council's safeguarding manager meets regularly with a joint agency group of the Council, CQC and health commissioners to exchange information and share any concerns about local homes.

This ensures that any potential issues are picked up and factored into monitoring and training programmes early.

- 3.20 The Council has received 75 referrals about safeguarding in care homes during 2010/11 to date, 1 of which relates to an out of borough home. It is important to note that referrals are not always substantiated upon investigation. Of the investigations completed to date 20% have been substantiated. 3 referrals related to one star homes. The number of referrals has decreased by 32% compared with the same period in 2009/10. The Council continues to expend a great effort to ensure that all local providers are able to access training to ensure that the local multi agency procedures are used effectively. Data analysis shows that 33% of the referrals were related to paid care staff, others being related to problems with family members, or between service users.
- 3.21 During 2010 the Council suspended new placements to 2 homes following safeguarding alerts. In the first case, Burrows House the provider completed an action plan and instigated changes to the procedure for assessing new clients. The council is now making new placements to the home and the contract compliance officer is undertaking an enhanced level of monitoring to ensure that improvements are maintained. The second home, Waratah House is in London Borough of Croydon. Ongoing action in respect of this home is being taken in partnership with the CQC and Croydon Council.
- 3.22 The Safeguarding team regularly attend the Council's Care Home forums in order to ensure that providers are kept up to date with changing requirements, such as the changes to the vetting and barring scheme. Providers are now represented on the Adult Safeguarding Board which ensures that provider issues are considered as part of this multi agency approach.

Mental Capacity Act – Deprivation of Liberty

- 3.23 The Mental Capacity Act 2005 is legislation which enables and authorises professional care staff, health service staff and families to take decisions on behalf of vulnerable adults who are unable to decide for themselves. All decisions have to be taken in the individuals 'best interests' by the person most involved in that area of the individuals 'care and treatment'.
- 3.24 The Deprivation of Liberty safeguards (DOLS) were later attached to the Mental Capacity Act, again covering individuals lacking capacity to make particular decisions and residing in care homes or hospitals, where the care and treatment regime imposes such excessive restrictions on them that they amount to a deprivation of liberty in accordance with the Human Rights legislation.
- 3.25 The Government gave a lead role to the Local Authority to educate and raise standards in these two related areas. A programme of detailed training has been made available to all statutory, private and voluntary agencies in Bromley. Over one thousand training places have been offered in the past two years. Although most of this training has been arranged centrally there have also been many sessions arranged in local care homes and hospital settings. Informal telephone support and visits to offices and work places have also been offered.
- 3.26 The outcome of these efforts has been that professional staff are now thinking closely about a vulnerable person's decision making abilities, and are now more explicitly taking responsibility for 'best interests' decisions for those who cannot act for themselves. Care homes have been provided with screening tools, and draft procedures, to enable them to reflect more carefully on whether their care regime for a particular individual might amount to a possible deprivation of liberty.

- 3.27 During 2010 the Department of Health monitored the number of DOLS referrals nationally and to date the number in Bromley is lower than elsewhere. Whilst the Council is confident in the volume and quality of training delivered in the borough, the lead officer for DOLS will be making visits to care homes during 2011 in order to observe how the training is being put into practice and to provide on the spot guidance.

Joint working to improve standards

- 3.28 A joint Council and PCT Health Support for care homes group meets regularly to focus on health related support to care homes. Work this year has concentrated this year on the avoidance of hospital admissions and ensuring that medication handling and distribution is improved.
- 3.29 The Council hosts a Provider Forum which works to improve on quality and consistency of care in homes and to promote and share good practice. Membership of the forum is extended to all local care homes and relevant health professionals. The forum has an annual work plan which focussed in 2010 on improving the experience of users being admitted and discharged from hospital, moving and handling, and the provision of activities for people with dementia

Training

- 3.30 The Council helps to assist in raising the standards of training for the care homes through offering membership of a training consortium where providers can pool their available training funds and purchase places on training programmes. Courses are run throughout the year to address identified training needs. The Council, as a purchaser of social services from the private/ independent sector, is committed to working in partnership with local providers to ensure adequate provision is made for training and that providers can access a comprehensive training programme. The Council will continue to work with providers to ensure that the courses provided are timely and assist providers in balancing the competing demands of delivering care and ensuring that staff receive both induction and refresher training.
- 3.31 The training courses provided for care home managers and their staff address the requirements of the new regulations replacing National Minimum Standards (see para 3.11). These standards include requirements about the competence of the workforce including their suitability, experience and qualifications.
- 3.32 There are 79 care homes in Bromley. Currently 41 homes are members of the care home training consortium which is an increase of 3 since last year. One third of the one star homes are now members of the consortium, making one star homes 10% of the total membership. Homes that are not members of the consortium are responsible for ensuring that their staff are adequately trained and the monitoring officer follows this up by scrutinising training records.
- 3.33 The training programme offered 37 different courses during 2010. The bulk of these are the core training courses; first aid, food hygiene, health and safety and moving and handling. The remaining courses provide valuable learning opportunities for care staff to gain additional skills and knowledge to help them carry out their duties. These include dignity in care, dementia, diet and nutrition, safe administration of medicines, report writing and infection control.
- 3.34 The programme is regularly updated and reviewed to include training on new legislation. The Council also works with the PCT to identify opportunities for joint health and social care training. Many of the homes are funding themselves to achieve the national Gold Standard Framework for delivering improvement to care at the end of life.

- 3.35 Staff attending training courses are expected to complete a test demonstrating that the learning experience has been successful before receiving certification of attendance. The consortium administrator works closely with trainers in order to identify any areas of training which require further attention.
- 3.36 Business continuity planning continues to be high on the agenda for providers. Plans have been tested recently by severe winter weather conditions. Lessons are learned every time the plans are put into action and are discussed at the Care Home Forum. During 2011 the Fire Service will be running a seminar on evacuation plans and procedures in Care Homes.

Care home re-provision programme

- 3.37 The Council’s care home closure programme continued during 2010. Three of the Council’s original six homes have now closed with Manorfields the latest to close in July 10. The movement of residents from Isard House is now well underway with an anticipated closure expected in spring 2011. Belle Grove and Kingswood House will follow and are due to close by April 2012.

4. POLICY IMPLICATIONS

- 4.1 National and local policies expect that continuous improvement be achieved in the quality of care delivered in residential and nursing homes serving the local community.

5. LEGAL IMPLICATIONS

- 5.1 Under Section 21 of the National Assistance Act 1948 the Council has a duty to provide or arrange for residential accommodation for persons who by reason of age, illness, disability or any other circumstances are in need of care and attention not otherwise available to them.
- 5.2 Once a person has been assessed as being in need of such care the Council must have regard to the National Assistance Act 1948 (Choice of Accommodation) Direction 1992 which are intended to give clients a choice over where they receive such care arranged or provided by the Council. Such choice has to reflect both the costs of such accommodation as well as its availability.

Non-Applicable Sections:	Financial implications. Personnel Implications
Background Documents: (Access via Contact Officer)	An overview of the Social Care Market in England 2008-09 – Care Quality Commission December 2010 ACS09053 Quality Monitoring in Adult Care Homes ACS 08190 Quality Monitoring in Residential Care and Nursing homes

Report No.
LDCS11019

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: **Adult and Community Policy Development and Scrutiny Committee**

Date: 25th January 2011

Decision Type: Non-Urgent Executive Non-Key

Title: **BROMLEY MOBILITY FORUM - PROGRESS REPORT**

Contact Officer: Leslie Marks, Chairman, Bromley Mobility Forum
Philippa Stone, Democratic Services Officer
Tel: 020 8313 4871 E-mail: philippa.stone@bromley.gov.uk

Chief Officer: Mark Bowen, Director Legal, Democratic and Customer Services

Ward: Boroughwide

1. Reason for report

In April 2010 the Adult and Community Policy Development and Scrutiny Committee agreed to the setting up of the Bromley Mobility Forum, initially for one year. This report from the Chairman of the Forum updates Members on progress to date.

2. RECOMMENDATION(S)

The Policy Development and Scrutiny Committee is asked to note and comment on the progress of the Bromley Mobility Forum.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
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Financial

1. Cost of proposal: Estimated cost £6,000
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: ACS Commissioning and Partnerships
 4. Total current budget for this head: £6,000
 5. Source of funding: LBB Adult and Community Services
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Staff

1. Number of staff (current and additional): n/a
 2. If from existing staff resources, number of staff hours: n/a
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Legal

1. Legal Requirement: No statutory requirement or Government guidance.
 2. Call-in: Call-in is not applicable.
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected):
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 On 14th April 2010 the Adult and Community Policy Development and Scrutiny Committee endorsed the recommendations from the Transport Reference Group, including the establishment of a Bromley Mobility Forum, initially time limited for one year, with a focused work programme and clear Terms of Reference outlining a future business plan and clear exit strategy.

3.2 The Forum is chaired by Leslie Marks and is hosted and administered by Community Links Bromley. Membership consists of:

Two nominated representatives from each of the following independent voluntary sector forums:

Carers Forum
Mental Health Forum
Learning Disability Forum
Disability Voice
Council on Ageing
Children and Families Forum
Bromley BME Network

and one representative from each of the following:

Experts by Experience
Bromley Sparks
Leonard Cheshire
Bromley LINK
Bromley Borough Forum of Older People
Youth Action Team
LBB Adult and Community Services
LBB Children and Young People
LBB Environmental Services

3.3 The Forum has adopted the following Mission Statement:

“To improve the quality of life and support the independence of all people within the London Borough of Bromley experiencing difficulty with mobility and/or accessing transport.”

3.4 It's scope is to constantly review and make recommendations to improve the access and facilities for people with mobility problems, into, around and out of the Borough of Bromley and to develop co-ordinated, inclusive and united strategies to address mobility issues.

3.5 The Forum aims to:

- make Bromley a more accessible Borough for people with mobility problems in which to live, work, visit, socialise and study;
- promote independence and increase social inclusion for people with mobility problems;
- ensure that Bromley residents are aware of the Forum and that its role is promoted in all relevant media;

- make recommendations for consideration by relevant thematic partnership Boards and committees to assist them in formulating policy and in carrying out their powers and functions in the field of accessible transport. All necessary information to be made available to the Forum, to enable such recommendations to be made;
- act as an advisory/consultative body on all accessible transport issues within the borough;
- act as an advisory/consultative body on any proposed changes to transport provision;
- act as an advisory/consultative body on other planning issues, such as with TFL with a view to ensuring that the concerns of people with mobility problems are fully addressed and enabling full disability access;
- participate in the drafting, monitoring and review of the Council's local development plan as directed by the Mayor of London and any other proposals from Bromley Council or other third party, which impinges on the quality of access/mobility;

3.6 The Forum met twice in 2010. As a first step, the Forum is planning a survey of the experiences on Bromley buses of people with mobility problems and is planning to gather some experiential evidence. A trial in November of the Passenger Experience Form indicated the need to make some adjustments and this has been done. The survey will be launched during January and results assessed in March.

3.7 The Forum has also commented on the draft of the recently published Guide to Accessible transport in Bromley and on the proposed changes to the Taxicard scheme for the remainder of 2010/11. Members expressed concern at the suspension of double swiping which it was considered would have an adverse effect on Bromley users given the size of the borough, and questions were raised as to why individuals could not use their allowance as and when they wanted. Members of the Forum will have an opportunity to comment on proposals for the Taxicard scheme from April 2011 onwards when they are considered by the Council.

3.8 Members of the Forum have also identified a number of priorities for the work programme including the redevelopment of Bromley South station, Dial a Ride, street furniture which poses obstacles for people with visual impairments and disability awareness training for public transport staff.

4. POLICY IMPLICATIONS

4.1 The Bromley mobility Forum supports the Council's priority to support independence for the people of Bromley.

5. FINANCIAL IMPLICATIONS

5.1 One off funding of £6,000 has been identified in Adult and Community Services Commissioning budgets for 2010/11.

Non-Applicable Sections:	Legal and personnel implications
Background Documents: (Access via Contact Officer)	[Title of document and date]

Report No.
ACS10076

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: **Public Protection and Safety Policy Development and Scrutiny Committee**
Adult and Community Policy Development and Scrutiny Committee

Date: **14th December 2010**
25th January 2011

Decision Type: Non-Urgent Non-Executive Non-Key

TITLE: Commissioning of Substance Misuse Treatment Services Annual Report 2010

Contact Officer: Claire Lynn, Strategic Commissioner, Mental Health
claire.lynn@bromley.gov.uk
020 8313 4034

Chief Officer: Terry Rich, Director of Adult and Community Services

Ward: Borough Wide

1. Reason for report

The report is presented annually to Public Protection and Safety Policy Development and Scrutiny Committee, and from this year to the Adult and Community Policy Development and Scrutiny Committee as well, to update them on the work of the Drug Action Team in respect of substance misuse. The report covers areas of progress and activity in relation to specific aspects of performance over the last year and also identifies the priorities for the future.

2. **RECOMMENDATION**

2.1 The Policy Development and Scrutiny Committees are asked to:

- Note the performance information contained within the report, and
- Comment on the priorities for 2010/11 outlined in the report.

Corporate Policy

1. Policy Status: Existing policy: Public Protection and Safety Portfolio Plan 2009/2010, Building a Better Bromley, Local Area Agreement, Community Safety Strategy 2008 - 2011
 2. BBB Priority: Safer Bromley
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Financial

1. Cost of proposal: £3,109,598
 2. Ongoing costs: £3,109,598
 3. Budget head/performance centre Drug Action Team – Budgets shared across LBB and PCT
 4. Total current budget for this head: £3,109,598
 5. Source of funding: Combination of Pooled Treatment Budgets, Partner Agency mainstream funding and Central Government Grant.
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Staff

1. Number of staff (current and additional) –2 x Substance Misuse Co-ordinators plus administrative and data support
 2. If from existing staff resources, number of staff hours – N/A
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Legal

1. Legal Requirement: No statutory requirement or Government guidance
 2. Call in: Call in is not applicable
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected) - Approximately 2000 people involved with substance misuse services at any time
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A
2. Summary of Ward Councillor's comments: N/A

3. COMMENTARY

Background

- 3.1 Substance misuse services in Bromley are commissioned by the Council and Bromley Primary Care Trust (PCT) through the Drug Action Team (DAT) for which the Council is the lead partner. The DAT partnership has representation from the local authority (children's services, adult services, and housing), health, probation, police and the voluntary sector.
- 3.2 The next few years will be challenging in terms of planning, development and delivery of local treatment services. The impact of the phased reduction in the Pooled Treatment Budget (PTB) allocation from the Department of Health and the Home Office (30 % cut in the baseline between 2007 and 2011) has resulted in a review of local treatment provision which maintains progress by aiming services at the hard to reach groups within the local substance misusing population through improved service commissioning and delivery arrangements that deliver good outcomes for service users and best value.
- 3.3 The strategic aims for substance misuse services are developed annually through the partnership planning process and with the National Treatment Agency. This takes place in November of each year with a needs assessment being updated annually in April. This report includes data for the financial year 2009/10 with details of activity between November 2009 and November 2010. The overarching aim was to increase the number of people in treatment through improving access and the pathway through treatment. The specific priorities for last year are detailed below with the activity that has been undertaken this year to address these.

Continuous improvement in number of people in treatment

- 3.4 The overall number of people in effective treatment (i.e. people retained in treatment for twelve weeks or more and successfully discharged) increased to 820 in 2009/10, an 11.5% increase on the 2008/09 figure (735). This has been achieved mainly by increasing the number of problematic drug users moving into structured treatment (problematic drug users are defined as those using heroin and crack).
- 3.5 The Drug Intervention Programme (DIP) identifies Class A drug misusing offenders as they enter the criminal justice system, putting into action a range of interventions to deal with their behaviour, getting them 'out of crime and into treatment' and other support. The programme is funded through a ring fenced grant from the Home Office. Arrest referral workers work at the police station and the court to engage offenders into treatment.
- 3.6 Overall for 2009/10 the number of DIP referrals has decreased by 18% to 249, compared to 305 in the previous year. Data from the police and providers suggests that this is due to a reduction in the number of arrests at Bromley Police Station. During this year action has been taken to increase the number of referrals from probation into structured treatment through a weekly satellite clinic at Orpington probation office and to improve engagement in Police Station custody suites.
- 3.7 One of the most significant factors in providing effective treatment is the timeliness of people being assessed and entering into appropriate treatment and our objective is to triage (assess and refer to service) all clients within 6 weeks of referral by the Arrest Referral workers. Performance in respect of triaging clients within 6 weeks of referral has increased by 6% compared to the same period last year and now stands at 40%. This is slightly lower than the London and national averages. Although more needs to be done to increase the number of clients triaged within 6 weeks, all of those clients who have been triaged within 6 weeks have also started treatment within the 6 weeks.

- 3.8 There has been a 6% reduction in the number of clients already in treatment at the time of DIP referral which suggests that people who are in treatment are less likely to reoffend.
- 3.9 Between April and August 2009 there were significant issues with people waiting to start treatment with exceptionally high waiting times being given. The system was not resilient enough to allow for individuals in treatment to move through the treatment system. The blockage resulted in difficulties for getting new people into treatment as required. A Substitute Prescribing Service was piloted in 2009 which reduced the waiting list from 48 clients in September 09 to nil in October 09. This service has now been commissioned on a permanent basis. An additional “shared care” worker has also been appointed to boost the capacity within community prescribing ensuring that there is no waiting list for treatment services.

Young people

- 3.10 Nationally alcohol and cannabis are by far the most prevalent drugs of choice in the overall under 18's population. Nationally 56% of young people who use drugs report cannabis as their main drug and trends in Bromley are in line with the national trends. Cannabis use amongst young people who use drugs in Bromley was 57% in 2009/10, a 6% decrease from the previous year. The numbers of young people in drug treatment for the year 2009/10 is 221, with new presentations in the year reported as 164. This represents an increase on the previous year which was reported as 144 in treatment with 107 new presentations. Alcohol is the second most reported primary drug for young people who use drugs at 41%, an increase of 10% which is significantly higher than the London average. A full alcohol needs assessment has been completed to establish a more accurate picture of alcohol misuse by young people and to identify how services can be reconfigured to meet the need.

A focus on outcomes for service users in line with the recovery agenda.

- 3.11 All treatment providers have specific outcome targets included in their contracts based on the Treatment Outcome Profile (TOP) devised by the National Treatment Agency. The purpose of specifying treatment outcomes is to ensure that the care pathway extends to recovery and community integration, engaging individuals in training and employment. All service users should have an individualised, written care plan that covers their substance use, physical and psychological health, criminal involvement and offending and recovery and reintegration needs. The Aftercare programme was re-launched in quarter 2 of 09/10 with individuals attending on a weekly basis. The DAT team is now working with providers to obtain accurate data on actual outcomes for service users.

Redesign of the treatment system with improvements in pathways and access.

- 3.12 One of the partnership's priorities is a re-design of the treatment system to ensure that individuals can access appropriate treatment quickly and for the shortest period of time, both of which deliver the most positive outcomes. Services have been reviewed and service users and stakeholders have been consulted to look at the current pattern of service and how people move through the system to produce a model of provision prior to services being tendered. The model improves both the access for individuals as well as the pathway, ensuring that there are approximate timeframes for each stage. Services will be re tendered within the existing financial envelope.
- 3.13 The number of people entering treatment within the 18 - 25 year old range in Bromley is lower than expected the tendering of the new contracts will ensure that this group is provided for in services which best meets their needs.

Implement Clinical Governance Framework in line with NICE Guidance and the 2007 UK Clinical Guidelines.

- 3.14 A Clinical Governance Framework has been developed which has been implemented by all providers and is monitored through a regular audit process. The Clinical governance protocols set up a formalised mechanism through which clinical practice and associated developments can be measured, reviewed and monitored in all areas of the partnership's activities.
- 3.15 Further work on drug related deaths is underway through the clinical audit process, safeguarding and through the annual suicide audit.

Increase the level of service user and carer involvement

- 3.16 Service user involvement is being developed, with a draft service user and carer involvement strategy having been drafted and the establishment of the forum linking into the Drug Reference Groups. The recently tendering for services involved service user representatives in the evaluation of the tenders. Carer involvement has been taken forward through the contract with Carers Bromley which supports the development of carer involvement and also provides representation on the Drug Reference Groups.
- 3.17 To focus on the impact substance misuse can have on the development and achievement of young people, Carers Bromley deliver packages to young people whose parents have substance misuse problems. This service provides young people with advice, information, support and activities to prevent children and young people falling into inappropriate caring roles. Carers Bromley also signposts parents to substance misuse services where appropriate.

Develop a Communications Strategy

- 3.18 Communication plays a key role in addressing the harm caused by substance misuse with a clear message that particularly young people need credible information about the risks posed by drugs; parents need information to build their knowledge and develop the confidence to address substance misuse issues within the family. In addition to information about access to services and support that is available across the borough, multi agency events have been facilitated with services across the PCT and the Council to deliver messages around links between drugs, alcohol, sexual health and crime. A Communications Strategy and Action plan has been developed and integrated into the treatment plan to ensure that appropriate messages and resources are delivered.

4 Priorities for 2010/11

- 4.1 The priorities reflect the Council's view that the misuse of illicit drugs and alcohol is damaging to the individual, to the community in which they live and work and a direct contributor to crime, anti-social behaviour, poor health and detrimental to life opportunities. The priorities for Bromley for 2010/11 are:
 - 4.2 To counter the spread of drugs and to take rigorous enforcement actions both against dealers and drug users through focused action on disrupting drug markets and tackling all drug and alcohol related crime to ensure Bromley continues to be a safer, stronger and vibrant community.
 - 4.3 Drug users will be identified and directed into appropriate treatment to break the cycle of addiction and appropriate harm minimisation interventions will be provided for people where complete abstinence is not yet possible.

- 4.4 To ensure that particularly young people understand the health, social and legal consequences of drug and alcohol misuse.
- 4.5 To deliver these services ensuring positive outcomes for service users efficiently and effectively delivering value for money.
- 4.6 These priorities will be delivered through the following:
- Working with partners in community safety to ensure that access to treatment is offered to support enforcement action
 - Working with partners to provide improved access to treatment
 - Using outcome information to ensure that the treatment system delivers appropriate outcomes for individuals
 - Ensuring assertive follow-up of all people provided with drug treatment services to test out the success of treatment following completion of treatment
 - Using the procurement process to deliver value for money in service provision
 - Increasing the level of education and information on the health, social and legal consequences of drug and alcohol misuse.
- 4.7 Specific actions to deliver the above will be detailed in the next year's treatment plan which is currently being drafted.

5 FINANCIAL IMPLICATIONS

- 5.1 The table below sets down the amounts and sources of funding available to the DAT for 2009/10.

Budget	Banked by	Amount £	Used for
Pooled treatment budget (DH and Home Office grant)	PCT	1,347,255	Drug misuse treatment, ranging from the provision of advice, counselling and support to more complex medical interventions such as detoxification and substitute prescribing. This pooled treatment budget remains ring fenced.
Adult and Community Services	LBB	227,500	Funding allocated to meet needs of those requiring long term interventions following the completion of detoxification. For example provision of care management, day programmes or significant residential treatment.
Young People' Partnership Grant	LBB	237,763	Funding for Young People's Treatment Service, as well as other YP focussed services to support delivery
PCT Mainstream	PCT	532,000 505,811	Drugs Alcohol
Drug Intervention Programme (Home Office grant)	LBB	259,269	Funding for a DIP staff and other Criminal Justice specific posts. In addition an allocation for specialist prescribing
Total		3,109,598	

6. POLICY IMPLICATIONS

- 6.1 The priorities for substance misuse support the Council's Building a Better Bromley priority to build a safer and stronger community in the borough. It also supports the aims of promoting independence by seeking to break dependency on drugs and the harm that arises from their abuse.

Non-Applicable Sections:	Personnel implications, Legal implications
Background Documents:	N/A

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Report No.
LDCS11009

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult and Community PDS Committee

Date: 25th January 2011

Decision Type: Non-Urgent Non-Executive Non-Key

Title: INTERNAL AUDIT VALUE FOR MONEY REPORTING PILOT

Contact Officer: Graham Walton, Democratic Services Manager
Tel: 020 8461 7743 E-mail: graham.walton@bromley.gov.uk

Chief Officer: Mark Bowen, Director of Legal, Democratic and Customer Services

Ward: N/A

1. Reason for report

- 1.1 The Audit Sub-Committee at its meeting on 16th September 2010 approved an approach to Value for Money (VfM) reporting by Internal Audit. In developing this approach, the Sub-Committee considered pilot VfM work on Building Control and Adult and Community Services and requested that these be reported to the relevant Committees for consideration.

2. **RECOMMENDATION(S)**

Members are requested to note the approach to Value for Money reporting endorsed by the Audit Sub-Committee and consider in particular the pilot work on Adult and Community Services.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Excellent Council.
-

Financial

1. Cost of proposal: N/A
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: Internal Audit
 4. Total current budget for this head: £587,520 (including the benefit fraud partnership costs)
 5. Source of funding: N/A
-

Staff

1. Number of staff (current and additional): 10fte
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: No statutory requirement or Government guidance. (Accounts and Audit Regs 2006.)
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 180 Chief Officers, Head Teachers/Governors and other heads of service.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 The Audit Sub-Committee received a series of reports at its meetings on 23rd March, 10th June and 16th September 2010 setting out an approach being developed by Internal Audit to Value for Money (VfM) reporting. The concluding report to the September meeting is attached as Appendix 1. This includes an update on pilot work carried out in two areas – Building Control and Adult and Community Services. The Sub-Committee approved the VFM approach and methodology and referred these pilots to the relevant Committees for their consideration – Improvement and Efficiency Sub-Committee for the involvement of the Organisational Improvement Team, Development Control and Renewal and Recreation PDS for Building Control and Adult and Community PDS for Homecare.
- 3.2 The VfM methodology includes a scoring matrix to be used by Internal Audit in the course of their audit work for reviewing VfM risks and controls, with a rating of 1-4 (4 being the best score.) This is set out in detail in section 3 of the 16th September report – the Sub-Committee approved this with the addition of a row in the matrix for the name or source of the benchmark. Where lower scores are recorded the matter is referred to the Organisational Improvement Team who will assist the service concerned. It should be noted that a low score does not necessarily indicate a service offering poor VfM, but it may indicate that there are not robust systems in place to substantiate good VfM.
- 3.3 The references to the work on Homecare are at pages 10-11 of the attached report and appendices A, B, C and G (the other appendices have been omitted).
- 3.4 The draft minute of the Audit Sub-Committee's meeting on 16th September is set out below -

20 INTERNAL AUDIT AND VALUE FOR MONEY REPORTING Report DR10076

The Sub-Committee had received reports on Value for Money (VfM) reporting at its previous meetings on 23rd March and 10th June 2010, and had called for these to be referred to the Improvement and Efficiency Sub-Committee. The Sub-Committee received a further update covering the work carried out in two pilot areas (Building Control and Homecare), benchmarking sites, the practicality of using this data and referral to the Organisational Improvement Team.

The report suggested a number of ways that VfM could be achieved; these were listed at paragraph 3.6, and Members proposed that a further point could be added to this list – asking fundamental questions, and seeking radically different ways of providing services. The Sub-Committee emphasised the importance of enabling managers to review their services; Internal Audit would be working with the Organisational Improvement Team to ensure that guidance would be available for this.

RESOLVED that

- (1) The report on Internal Audit's VfM approach to the case studies be noted and the suggested methodology to be adopted be agreed, including the scoring rating and the referral process to the Organisational Improvement Team.
- (2) It is noted that Internal Audit are currently reviewing the wider remit issues around VFM work and will report back as appropriate.
- (3) The reporting requirements to this Sub-Committee on VfM work undertaken for audits completed be agreed.
- (4) The VfM control matrix be amended with the addition of a row for the name or source of the benchmark.
- (5) The pilot VfM work on Building Control be referred to the Development Control Committee and the Renewal and Recreation Committee for consideration.

- (6) The pilot VfM work on Home Care be referred to the Adult and Community PDS Committee for consideration.

4. FINANCIAL IMPLICATIONS

- 4.1 The additional work involved in undertaking VfM assessments will be contained within the existing Audit budget. All VfM studies may result in efficiency and economy savings.

Non-Applicable Sections:	Policy, Legal, Personnel – see attached report.
Background Documents: (Access via Contact Officer)	See attached report. Reports to Audit Sub-Committee on 23 rd March and 10 th June 2010 – “Internal Audit and Value for Money Reporting”

Report No.
LDCS11007

London Borough of Bromley

Agenda
Item No.

PART 1 - PUBLIC

Decision Maker: Adult and Community PDS Committee

Date: 25th January 2011

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **ADULT AND COMMUNITY PDS WORK PROGRAMME
2010/2011**

Contact Officer: Philippa Stone, Scrutiny Co-ordinator
Tel: 020 8313 4871 E-mail: philippa.stone@bromley.gov.uk

Chief Officer: Mark Bowen, Director of Legal, Democratic and Customer Services

Ward: N/A

1. Reason for report

- 1.1 This report provides the Committee with an opportunity to review its work programme and make any necessary adjustments.

2. **RECOMMENDATION(S)**

- 2.1 The Committee is asked to consider its work programme and schedule of meetings and indicate any changes that it wishes to make.

Corporate Policy

1. Policy Status: Existing policy. As part of the Excellent Council stream within Building a Better Bromley, PDS Committees should plan and prioritise their workload to achieve the most effective outcomes.
 2. BBB Priority: Excellent Council.
-

Financial

1. Cost of proposal: No cost
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: Democratic Services
 4. Total current budget for this head: £504,640 (controllable budget)
 5. Source of funding: Existing budgets
-

Staff

1. Number of staff (current and additional): There are 14 posts in the Democratic Services Team (11.89 fte, of which 10 fte are dedicated to committee support).
 2. If from existing staff resources, number of staff hours: Maintaining the Committee's work programme takes less than an hour per meeting.
-

Legal

1. Legal Requirement: No statutory requirement or Government guidance.
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): This report is intended primarily for Members of this Committee to use in controlling their on-going work.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 The Committee's 2009/10 Work Programme to date is attached at **Appendix A**.
- 3.2 The Committee is asked at each meeting to consider its Work Programme and review its workload in accordance with the process outlined at Section 7 of the Scrutiny Toolkit. All PDS Committees are also recommended to monitor the Council's Forward Plan of Key Decisions for their portfolios and to use it for identifying issues for consideration in advance of executive decisions being made. The Forward Plan issued on 17th December 2010 includes key decisions related to the Adult and Community Portfolio and the next Forward Plan will be published on 17th January 2011.
- 3.3 In approving the work programme Members will need to be satisfied that priority issues are being addressed; that there is an appropriate balance between the Committee's key roles of (i) holding the Executive to account, (ii) policy development and review, and (iii) external scrutiny of local health services; and that the programme is realistic in terms of Member time and officer support capacity.

Non-Applicable Sections:	Policy/Financial/Legal/Personnel
Background Documents: (Access via Contact Officer)	Previous work programme reports

A&C PDS Committee – Work Programme 2010/2011**22 June 2010**

Appointment and Review of Co-opted Members
 Supporting Independence in Bromley Update
 Annual Monitoring Report on Adult & Community Services - Complaints 09/10
 Housing and Residential Services 2009/10 Annual Report
 Community Links Bromley Contract
 SLHT Update on A Picture of Health
 Budget Closedown 2009/10
 Matters Arising/Work Programme

27 July 2010

Presentation: Age Concern Bromley Care Brokerage
 Bromley Safeguarding Adults Board 2009/10 Annual Report
 Update from Co-opted Members
 Blue Badge Update
 Budget Monitoring 2010/11
 Matters Arising/Work Programme

21 September 2010

Supporting Independence in Bromley Update
 Update from the Accommodation and Care for Adults Reference Group
 Commissioning Arrangements for Women's Refuges
 Changes to In-house Home Care Services and Direction of Travel
 Budget Monitoring 2010/11
 Capital Programme
 Matters Arising/Work Programme

2 November 2010

Supporting Independence in Bromley Update
 Adult and Community Services Mid-year Performance Report
 Housing and Residential Services Mid-year Performance Report
 Allocations Policy and Banding Review - results of formal consultation and decision on amendments to policy
 Update on Quality of Domiciliary Care
 Financial Forecast 2011/12-2014/15
 Budget Monitoring 2010/11
 Matters Arising/Work Programme

25 January 2011

Supporting Independence in Bromley: Promoting Technology
 Presentation: BBA Self Advocacy Projects
 Contract Monitoring of Care Homes – Annual Report
 Commissioning Arrangements for Supported Living for People with Learning Disabilities
 Closure of Adult Social Care Reception Services*
 Reorganisation of Care Services
 Contract Award for Services for Visual Impairment*
 Budget Monitoring 2010/11
 Potential Budget Savings
 Capital Programme
 Matters Arising/Work Programme
 Performance Assessment Report 2009/10

Update from the Mobility Forum
Update from South London NHS Trust
Drug Action Team Annual Report
Update on the Health White Paper

22nd March 2011 (Joint with PPS PDS)

SLAM Update

29 March 2011

Supporting Independence in Bromley Update
Presentation from Bromley and Bexley Advocacy Project
Draft Portfolio Plan
Empty Properties – Outcome of Feasibility Review
Budget Monitoring 2010/11
Capital Programme
Blue Badge Update
Thyme Out and Branching Out Update
Contract Award for Flexible Support for Mental Health Services*
Autism Report (Title TBC)
Presentation on Accommodation and Care for Older People
Matters Arising/Work Programme

* Part 2 (Exempt) Report

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Agenda Item 19a

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of the Local Government Act 1972.

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Agenda Item 19b

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of the Local Government Act 1972.

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Agenda Item 19c

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of the Local Government Act 1972.

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