BROMLEY CIVIC CENTRE, STOCKWELL CLOSE, BROMLEY BRI 3UH



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To: Members of the

ADULT AND COMMUNITY POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Councillor Judi Ellis (Chairman)
Councillor Roger Charsley (Vice-Chairman)
Councillors Ruth Bennett, Peter Fookes, Julian Grainger, William Huntington-Thresher, Tom Papworth, Catherine Rideout and Charles Rideout

Non-Voting Co-opted Members

1 x Learning Disability Representative (vacancy)
Babul Ali, Bromley Federation of Housing Associations
Angela Clayton-Turner, Bromley Mental Health Forum
Leslie Marks, Bromley Council on Ageing
Keith Marshall, Disability Voice Bromley
Lynne Powrie, Carers Bromley

A meeting of the Adult and Community Policy Development and Scrutiny Committee will be held at Civic Centre on **TUESDAY 26 JULY 2011 AT 7.00 PM**

MARK BOWEN
Director of Resources

Copies of the documents referred to below can be obtained from www.bromley.gov.uk/meetings

AGENDA

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 Democratic Services Team by 5pm on 20th July 2011 and to respond.

4 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 Democratic Services Team by 5pm on 20th July 2011 and to respond.

- 5 MINUTES OF THE MEETING OF ADULT AND COMMUNITY SERVICES PDS COMMITTEE MEETING HELD ON 14 JUNE 2011 (Pages 5 18)
- 6 MATTERS ARISING FROM PREVIOUS MEETINGS (Pages 19 24)
- 7 **CO-OPTED MEMBERS TO THE A&C PDS COMMITTEE: UPDATE** (Pages 25 28)

HOLDING THE PORTFOLIO HOLDER TO ACCOUNT

- **PORTFOLIO HOLDER DECISIONS TAKEN SINCE THE LAST MEETING** (Pages 29 38)
- 9 PRE-DECISION SCRUTINY OF ADULT AND COMMUNITY PORTFOLIO REPORTS

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

- a IMPLEMENTING "FULFILLING AND REWARDING LIVES" A COMMISSIONING PLAN FOR ADULTS WITH AUTISM IN BROMLEY (Pages 39 54)
- b THE PROVISION OF EQUIPMENT AND TALKING BOOKS FOR VISUALLY IMPAIRED PEOPLE (Pages 55 60)
- c PROPOSED CHANGES TO OLDER PEOPLE'S MENTAL HEALTH IN-PATIENT SERVICES WITHIN OXLEAS NHS TRUST (Pages 61 - 68)
- **d BUDGET MONITORING 2011/12** (Pages 69 76)

POLICY DEVELOPMENT AND OTHER ITEMS

- 10 THIRD SECTOR SCRUTINY: ADVOCACY FOR ALL (Pages 77 84)
- 11 BROMLEY SAFEGUARDING ADULTS BOARD 2010/11 ANNUAL REPORT (Pages 85 130)

12 SCRUTINY OF A BUDGET AREA: COMMISSIONING

This report will be to follow.

- 13 CONTRACTING ACTIVITY IN ADULT AND COMMUNITY SERVICES 2011-12 (Pages 131 140)
- **14 WORK PROGRAMME 2011-2012** (Pages 141 146)
- 15 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.

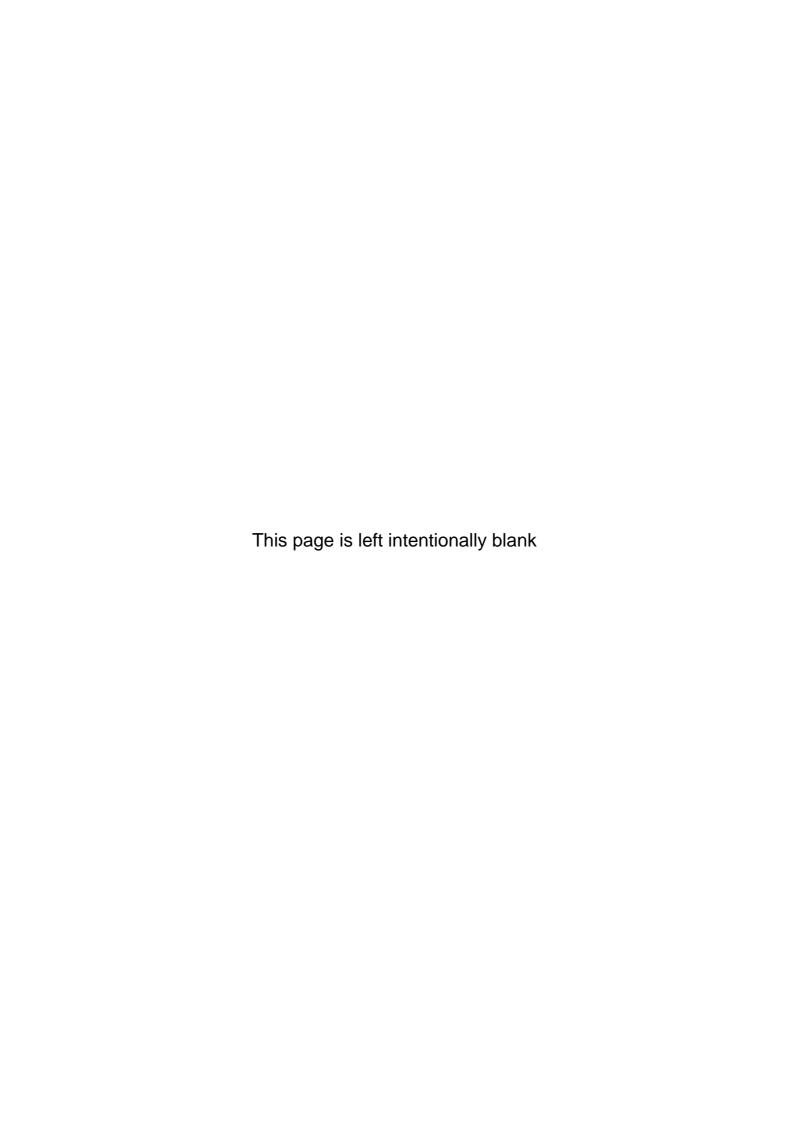
Items of Business

Schedule 12A Description

- 16 EXEMPT MINUTES OF THE ADULT AND COMMUNITY SERVICES PDS COMMITTEE MEETING HELD ON 14 JUNE 2011 (Pages 147 148)
- 17 EXEMPT PORTFOLIO HOLDER DECISIONS TAKEN SINCE THE LAST MEETING (Pages 149 - 152)

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 at 7.00 pm on 14 June 2011

Present:

Councillor Judi Ellis (Chairman)
Councillor Roger Charsley (Vice-Chairman)
Councillors Ruth Bennett, Peter Fookes, Julian Grainger,
William Huntington-Thresher, Tom Papworth,
Catherine Rideout and Charles Rideout

Babul Ali, Brebner Anderson, Angela Clayton-Turner and Leslie Marks

Also Present:

Councillor Robert Evans, Adult and Community Portfolio Holder

1 APOLOGIES FOR ABSENCE AND NOTIFICATION OF ALTERNATE MEMBERS

Apologies were received from Lynne Powrie and from Keith Marshall, who was replaced by Brebner Anderson. Councillor William Huntington-Thresher submitted apologies for lateness. Councillor Diane Smith, the new Executive Assistant, was also unable to attend the meeting.

2 APPOINTMENT OF CO-OPTED MEMBERS TO THE ADULT AND COMMUNITY PDS COMMITTEE

Report RES11042

The Committee considered a report summarising the proposed Co-opted Membership Appointments for 2011-12. The Chairman reported that following the winding up of the Learning Disability Forum, Richard Lane would not be re-appointed to the Committee. She had approached Bexley and Bromley Advocacy Project and Mencap to see if a suitable person with learning disabilities would be willing to take on the role, and Mr Lane had offered to provide support to the representative.

The Chairman thanked current and past Co-opted Members for their service on the Committee, and encouraged those Members without alternates to nominate suitable substitutes.

RESOLVED that the following representatives be appointed to the Committee as non-voting Co-opted Members for 2011-12 -

- Bromley Housing Federation Mr Babul Ali;
- Bromley Mental Health Forum Mrs Angela Clayton-Turner;

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- Bromley Council on Ageing Mrs Leslie Marks, (alternate Maureen Falloon);
- Disability Voice Bromley Mr Keith Marshall, (alternate: Brebner Anderson);
- Carers Bromley Mrs Lynn Powrie, (alternate Maureen Falloon);
- Learning disabilities Appointment deferred (alternate Vivienne Lester).

3 DECLARATIONS OF INTEREST

Councillor Judi Ellis declared that her father was resident in a care home in Bromley.

Councillor Ruth Bennett declared in relation to agenda item 13 that she worked for borough MPs and may have been involved in forwarding complaints from constituents to the Council.

Babul Ali declared in relation to agenda item 11b that he worked for A2 Dominion which owned properties in the borough affected by the proposals.

Councillor Ruth Bennett declared a personal interest during consideration of agenda item 8 as both of her parents had suffered strokes.

Councillor William Huntington-Thresher declared a personal interest during the consideration of agenda item 11b as the Council's representative on the Board of Broomleigh.

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

One question to the Committee had been received from Mrs Susan Sulis Secretary of the Community Care Protection Group relating to MissionCare Residential and Nursing Homes in Bromley. The question and response are attached at Appendix A.

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

Two questions had been received from Susan Sulis, Secretary of the Community Care Protection Group relating to the Winterbourne View care home in Bristol run by Castlebeck. The questions and responses are attached at Appendix A.

The Chairman reported that Mrs Sulis had also contacted her about two care homes in Bromley, St Raphael's and Lauriston House, in view of the financial difficulties being experienced by their owner, Southern Cross. She would ensure that these homes were considered by the Accommodation and Care for Older People Reference Group.

The Director of Adult and Community Services emphasised to the Committee that there were no Bromley residents in any of Castlebeck's homes.

6 MINUTES OF THE MEETING OF ADULT AND COMMUNITY SERVICES PDS COMMITTEE MEETING HELD ON 29 MARCH 2011 AND THE JOINT MEETING WITH PUBLIC PROTECTION AND SAFETY COMMITTEE HELD ON 4TH APRIL 2011

RESOLVED that

- (1) Subject to the correction of the word "wither" to "with" in minute 91, the minutes of the meeting held on 29th March 2011 be confirmed.
- (2) Consideration of the minutes of the joint meeting with Public Protection and Safety Committee held on 4th April 2011 be deferred to the next meeting.

7 MATTERS ARISING FROM PREVIOUS MEETINGS Report RES11032

The Committee considered a report providing an update on the progress made on matters outstanding from previous meetings -

Minute 91: Matters Arising: Angela Clayton-Turner stated that there were difficulties in booking respite care in advance for people with severe dementia. The Director confirmed that respite had been identified as a priority and his officers would be working on this issue. The Committee was due to consider a Dementia strategy at its meeting on 27th September.

Minute 92: Update: Thyme Out and Branching Out: The Chairman suggested that the Branching Out scheme be referred to the Shadow Health and Wellbeing Board.

Minute 96 (A): Supporting Independence in Bromley Phase 3: Angela Clayton-Turner asked whether officers had considered the role of carers yet. The Director responded that Jean Penney was now looking at this, and added that the My Life web portal included a section on carers which would address the issues raised.

Minute 97: Budget Monitoring 2010/11: The Chairman sought assurances that the Meals Service would remain in-budget in future, and requested that this item continue to be monitored through the "Matters Arising" report. The Director informed the Committee that options would be considered in the coming year and a report would come forward to the Portfolio Holder.

RESOLVED that the progress made on matters outstanding from previous meetings be noted.

8 STROKE SERVICES IN BROMLEY Report RES11041

The Committee considered a report introduced by Dr Angela Bhan providing an analysis of the results of the 2010 CQC Review of Stroke Services in South East London. Dr Bhan explained that she was still joint Director of Public Health for Bromley but was also managing Director of the new Business Support Unit.

The review had been compiled by the South London Cardiac and Stroke Network, and focused on the pathway of care from the point where stroke patients prepare to leave hospital through to long term care and support in the community.

The Chairman welcomed the provision of a Hyper Acute Stroke Unit in Bromley at the Princess Royal University Hospital, which commenced a phased opening in January 2011 and was expected to be fully operational in October. Dr Bhan confirmed that there was closer cooperation between health and social care, assisted by the Health and Wellbeing Board. Members noted that the review had called for improved information for patients and carers, and were assured that information was improving. The Director pointed out that Stroke information figured prominently in the new My Life web portal.

Councillor Julian Grainger commented that the report did not contain the usual financial, policy, legal and customer impact summaries that Council reports required. Dr Bhan offered to send details of the outcomes and mortality rates to Members, and the Chairman suggested that in future where there were reports impacting on joint services the Council report template should be completed in full.

Councillor Ruth Bennett declared a personal interest during consideration of this item as both of her parents had suffered strokes.

RESOLVED that:

- (1) The progress made since the CQC review be noted.
- (2) Further local work on reviewing all aspects of stroke and stroke services in Bromley, from primary and secondary prevention to management and rehabilitation be supported.
- (3) A further report on progress be made in six months.
- 9 QUALITY, INNOVATION, PRODUCTIVITY AND PREVENTION (QIPP) PROGRAMME UPDATE
 Report RES11046

The Committee considered a report providing an update on the Bromley features of the South East London Quality, Innovation, Productivity and Prevention (QIPP) Programme, which replaced the old PCT Commissioning

Strategy Plan. The purpose of the programme was to identify how health services could be redesigned to achieve improved quality and increased efficiency. The Report was introduced by Dr Angela Bhan, who summarised the current QIPP schemes – the Muscular-skeletal Clinical Assessment and Treatment Service, Gynaecology and Dermatology assessment and intermediate community services, Admissions Avoidance, Chronic Obstructive Pulmonary Disease (COPD) community service, specialist Neuro-rehabilitation service and Ophthalmology Primary Eyecare Assessment and Referral Service (PEARS), as well as improvement opportunities in long term conditions (LTC), Maternity and Mental Health.

The Chairman informed the Committee that the Health Sub-Committee would look at urgent care centres and the impact of the closure of the A&E at Queen Mary's Hospital.

RESOLVED that the update be noted.

10 PORTFOLIO HOLDER DECISIONS TAKEN SINCE THE LAST MEETING

The Committee noted the decisions taken by Councillor Graham Arthur, the former Portfolio Holder, since the last meeting held on 29th March 2011. The Chairman thanked him, and his Executive Assistant Councillor Catherine Rideout, for their work with the Committee, and welcomed the new Portfolio Holder, Councillor Robert Evans, who stated that he was looking forward to his new role and working with the Committee.

11 PRE-DECISION SCRUTINY OF ADULT AND COMMUNITY PORTFOLIO REPORTS

The Committee considered the following reports relating to proposed decisions by the Adult and Community Portfolio Holder -

A) ADULT AND COMMUNITY PORTFOLIO PLAN 2011/12 Report ACS11030

On 29th March 2011 the Committee had considered the draft Portfolio Plan. Following the Committee's comments and further consultation, the Plan had now been updated and was presented for the Committee's views before it was approved.

Councillor Julian Grainger requested that targets be expressed not just as percentages, but also as real numbers, and with baseline measures. He also referred to the indicator for new visitors to the My Life web portal (page 21) – officers confirmed that this was designed to provide better advice and information, and that it would be possible to monitor its use.

Questioned by Councillor Peter Fookes, officers confirmed that the indicator at page 17 for percentage of people leaving re-ablement having no ongoing care package was a local target. Councillor Fookes referred to efforts to

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return people with learning disabilities to supported living placements within the borough, suggesting that progress was slow, but officers confirmed that the programme was very successful. Leslie Marks supported this, stating that the project had been well conducted and that as a result of careful evaluation people had only been moved where this would lead to better outcomes. Councillor Fookes also commented that the indicator at page 25 for the proportion of people who use services who feel safe should always be 100% - the Chairman agreed that this was the ultimate target.

Councillor William Huntington-Thresher noted that there were still targets waiting to be confirmed or where figures were awaited. He suggested that Members be alerted when these were available.

In relation to the targets for Jobmatch and Job Carve, (page 52), the Portfolio Holder agreed to encourage all Council departments to commit to at least one placement each year.

It was confirmed that the bid to the HCA for funding to bring 50 empty homes back into use had been submitted.

With respect to travel training for people with learning disabilities (page 62), training had started in January 2011 and funding had been extended until September 2011. Four people had completed the course and were independent; six were in training with three so far expected to become independent travellers. The Portfolio Holder added that travel training for younger people was important and he was aware that special schools were putting this in place. Councillor William Huntington-Thresher suggested that feedback from these schemes was passed to the travel operators through the Transport Liaison Group, whose next meeting was in November.

RESOLVED that the Portfolio Holder be recommended to agree the final Portfolio Plan for 2011/12, taking into account the Committee's comments.

B) HOUSING RELATED SUPPORT FOR OLDER PEOPLE - TRANSITIONAL ARRANGEMENTS

Report ACS11025

The report advised Members of developments in the transitional arrangements for housing related support since November 2009, and the work undertaken in relation to the transition from block accommodation-based contracts for sheltered housing in favour of targeted floating support for older clients with an assessed need for housing support, delivering major savings.

Concerns were raised about whether residents would feel secure with floating support rather than a warden, and would fear losing someone on hand to do odd-jobs. It was emphasised that there had been extensive discussions with landlords and providers, assessments had been carried out where it was proposed to implement changes and there were other services available to deal with odd jobs. The Committee sought some explanation of the various

support approaches - definitions of terms such as concierge service would be circulated and included in the minutes (Appendix B).

Councillor William Huntington-Thresher declared an interest during the consideration of this item as the Council's representative on the Board of Broomleigh.

RESOLVED that

- (1) The transitional arrangements put in place for accommodation based support for older people and the approaches to minimise the impact on individuals be noted.
- (2) The establishment of a needs based approach delivered through floating support be supported.
- (3) The Portfolio Holder be recommended to approve the proposed expansion of the existing floating support service in 2011/12 to cover the requirements in sheltered housing and to inform the demands of future commissioning.

C) SHORT BREAK SERVICE (RESPITE) FOR PEOPLE WITH LEARNING DISABILITIES

Report ACS11029

The report setting out proposals for a new integrated short break (respite) service for adults with learning disabilities to be located at 118 Widmore Road, Bromley. The proposal involved the transfer of ownership of 118 Widmore Road from Bromley PCT to Bromley Council, and the allocation of funds from the learning disability re-provision capital programme for the purchase and refurbishment of 118 Widmore Road. It was confirmed that the proposals would result in a more flexible service.

RESOLVED that the Portfolio Holder be recommended to agree the proposals for the integrated short break service for people with learning disabilities and recommend to the Executive the transfer of ownership of 118 Widmore Road from Bromley PCT to London Borough of Bromley, subject to confirmation by the PCT, and the allocation of £1m from the learning disability capital fund towards its purchase and refurbishment.

D) HOUSING AND RESIDENTIAL SERVICES: 2010/11 PERFORMANCE REPORT

Report ACS11027

The Portfolio Holder introduced a report providing an overview of the performance of Housing and Residential Services against the key objectives and targets for 2010/11. The report also set out the key drivers for future performance, including the increase in those presenting as homeless since the start of the recession, the reduced supply of available properties and changes to housing benefit. It was confirmed that the Empty Homes bid to the

HCA was an expression of interest for 50 properties per annum. Detailed housing advice casework was being provided to 4,000 households per annum, nearly all of which originated from within the borough. It was recognised that there was a need to manage the expectations of those in the lower priority bands. It was confirmed that where statutorily accepted homeless people were found accommodation in the private sector the Council still retained its statutory duties to them to provide a permanent tenancy unless they actually stated they accepted the property was a discharge of the Council's statutory duty. Consequently the focus on prevention, options and alternatives to homeless applications was particularly important.

Councillor Tom Papworth referred to the issue of developers seeking to reduce their commitments to provide affordable housing due to the change in market conditions which made their schemes less viable. He suggested that while the Council might want to resist such moves, there was a danger that schemes might not proceed and housing targets would be missed.

The Chairman encouraged Members to spend some time in the Housing service in Joseph Lancaster Hall to observe the variety and complexity of the cases being considered.

As this was the last occasion on which Martin Parsons, Head of Residential Services, was appearing before the Committee, the Chairman thanked him for his service and wished him well in retirement.

RESOLVED that performance against key objectives and targets in the 2010/11 Portfolio Plan be noted and the Portfolio Holder be recommended to agree the proposed priorities for 2011/12 as set out in paragraphs 1.30 and 1.31 of the report.

12 OUTTURN REPORT 2010/11 - ADULT & COMMUNITY SERVICES

Report ACS11026

The Committee considered a report providing the final outturn position for Adult and Community Services for 2010/11. The final outturn for the 'controllable' element of the budget in 2010/11 was a £277,000 underspend. Although some budgets were very volatile, with good information it was possible to maintain close control of cost pressures. At its meeting on 22nd June 2011 the Executive would be requested to approve carry forward requests relating to unspent grant income for those grant-funded projects and initiatives which would continue in 2011/12.

RESOLVED that

- (1) The final outturn position for Adult and Community Services for 2010/11, with an underspend of £277,000, be noted.
- (2) The proposal to request the Executive to agree net carry forwards totalling £809,000, including a required change in accounting

requirements to address 'technical accounting' changes in 2010/11, be noted.

13 ANNUAL REPORT ON ADULT & COMMUNITY SERVICES COMPLAINTS RECEIVED APRIL 2010 TO MARCH 2011 Report ACS11024

The Committee considered a report providing Members with an overview of the main issues raised and lessons learnt from the annual report on Adult and Community Services complaints received April 2010 to March 2011. Officers informed the Committee that the report referred to formal complaints, defined as an expression of dissatisfaction that required a formal response, as opposed to low-key informal complaints that were easily resolved within 48 hours as part of normal business or requests for service.

Councillor Charles Rideout referred to the importance of learning from complaints, and asked why more ombudsman complaints were not dealt with at an earlier stage. The Director reported that ombudsman cases tended to be complex and might involve complainants who were unwilling to settle cases.

The Chairman noted the value of electronic monitoring of care worker arrival and departure times, and recommended that this be specified in all new contracts. She sought assurances that the complaints referring to missed calls for domiciliary care did not all relate to the same providers or locations – this would be covered in more depth in a report to the Committee's November meeting. She also commented on the use by one agency of the International English Language Testing System (IELTS), and requested that the Committee be given access to the test.

The Committee noted that the complaint relating to Mencap referred to Royal Mencap, and not Bromley Mencap.

RESOLVED that the annual complaints report be noted.

14 UPDATE FROM BROMLEY MOBILITY FORUM Report RES11035

The Committee considered a report providing Members with an update on the progress made by the Bromley Mobility Forum in the past year. The prioritised work programme had included a Passenger Experience Survey and a proposal for involvement in the planning of the redevelopment of Bromley South Station. Other workstreams included work to ensure that Bromley Council and other Bodies had received comments on mobility related proposals – she highlighted the proposals to charge blue badge holders for using Council car parks, where the consultation had appeared to be limited initially to Disability Voice.

Leslie Marks had chaired the Forum and she introduced the report. She reported that the Passenger Experience Survey, whilst reporting some examples of very poor experiences, showed that on the whole people were

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satisfied with local transport. They were intending to repeat the survey in a few months.

She reported that it had been difficult to liaise with the Police – the Chairman offered to provide contact details for the specialist Disability Police Officer.

The Chairman thanked Leslie Marks and her colleagues for their work on the Forum.

RESOLVED that the update be noted.

15 MOTION FROM COUNCIL: NHS REFORMS Report RES11033

At the meeting on 11th April 2011, Councillors Peter Fookes and Katherine Bance had moved the following motion -

"This Council calls on the Coalition Government to abandon its proposed reforms to the NHS and to ensure that under the next proposals that in the interests of patients, costs and accountability that local councils have a major role in the future of health care delivery."

After brief discussion Council had agreed to defer consideration of the matter to this PDS Committee meeting when it was hoped more detail would be available on the proposals and implications. The Chairman agreed that it was important to clarify the role of local authorities in the new system, but as the Government's response to the NHS Future Forum had only just been announced, it was considered that further consideration should be deferred to the next meeting.

RESOLVED that consideration of the motion be deferred.

16 WORK PROGRAMME 2011/2012

Report RES11034

The Committee considered its work programme for 2011/2012.

RESOLVED that

- (1) The work programme and schedule of meetings for 2011/12 be noted.
- (2) A Health Scrutiny Sub-Committee be established with the same membership as the PDS Committee, plus additional representation for Bromley LINk and Older People, to meet on a bi-annual basis to review health scrutiny issues.
- (3) The Accommodation with Care for Older People Reference Group be reappointed with the following membership –

Councillor Ruth Bennett

Councillor Charles Rideout Angela Clayton-Turner Leslie Marks Ray Clay Ken Keepen Marion Purll

17 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 was 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.

- 18 PRE DECISION SCRUTINY OF PART 2 (EXEMPT) PORTFOLIO HOLDER REPORTS
- A) CONTRACTUAL ARRANGEMENTS FOR SERVICES FOR PEOPLE WITH A LEARNING DISABILITY AT SWINGFIELD COURT, BROMLEY

The Committee considered and supported proposals to extend by one year the care contracts with Avenues Trust for support services to people with a learning disability at Swingfield Court and 213 Widmore Road.

B) CONTRACT FOR SUPPLY OF COMMUNITY EQUIPMENT AND MINOR ADAPTIONS

The Committee considered and supported the recommendations in the report to negotiate a new 9 months contract with the current providers pending completion of a major options appraisal for the service.

The Meeting ended at 10.26 pm

Chairman

Appendix A

4. QUESTIONS TO THE COMMITTEE FROM MEMBERS OF THE PUBLIC

From Susan Sulis, Secretary, Community Care Protection Group (CCPG) -

1. MISSIONCARE RESIDENTIAL AND NURSING HOMES IN BROMLEY

Some MissionCare homes have a history of abuse and neglect, and most have not been inspected by the Regulator for 3 years.

How many visits to each home have been made by (i) Care Managers and (ii) Contract Staff, to ensure compliance with National Care Standards, and the Council's Contract terms?

Reply:

The questioner is not accurate in alleging a history of 'abuse and neglect' in Mission Care homes. There were a number of instances in 2006-7 when there were concerns over the quality of care in some Mission Care homes. These matters were resolved.

All Mission Care homes are visited by the Council's Contract Compliance officer at least once a year. Between 2008 and 2011, 28 visits have been made to Mission Care homes. Care managers regularly visit the homes as part of individual service user reviews and would highlight any issues of concern to the Contract Compliance Officer. The Council has no current concerns over the quality of care in Mission Care homes.

5. QUESTIONS TO THE PORTFOLIO HOLDER FROM MEMBERS OF THE PUBLIC

From Susan Sulis, Secretary, Community Care Protection Group (CCPG)

1. <u>CARE QUALITY COMMISSION FAILURE TO PROTECT RESIDENTS OF CASTLEBECK'S WINTERBO</u>URNE VIEW

In view of the CQC's gross incompetence demonstrated by the Panorama programme, the public can have no confidence in them as a regulator, and therefore grave concerns about standards of care in Bromley's care homes.

What additional action does the Council intend to take to ensure that residents are safe-guarded?

Reply:

Everyone who saw the Panorama programme would have been appalled by the horrific abuse inflicted upon the residents at Winterbourne View.

I can confirm that there were no Bromley residents at Winterbourne View and further that there are no Bromley residents in any other Castlebeck establishment.

It is not for the Council to comment on the questioner's view of the Care Quality Commission. However, the Council does liaise closely with CQC when issues of concern are raised about standards of care in homes in Bromley.

Whilst the CQC is the regulatory authority for registered care services, the Council is also committed to ensuring that quality is maintained in all registered care homes in the borough and carries out a programme of regular monitoring. Monitoring extends to all care homes in the borough, not just those with which the Council holds a contract. Priority is given to homes rated by CQC as one star – 25% of monitoring visited which took place in 2010/11 were to one star homes. A Quality Assurance Framework has been developed and is being rolled out during 2011 to all providers who contract with the Council.

Following the Panorama programme, in addition to the regular monitoring that the Department undertakes, a series of additional visits to LD residential units was instituted to add further reassurance that residents are safe and well cared for.

2. <u>BROMLEY COUNCIL CONTRACTS FOR LEARNING DISABILITY, DEMENTIA AND NURSING CARE</u>

Will the Council carry out their own inspections of all Homes contracted to provide this type of care for the Council, and publish reports on the Council's website?

Reply:

The Council's monitoring arrangements are set out in the answer to Question 1. The Adult and Community Policy Development and Scrutiny Committee receive an annual report on care home quality – the last report was published in February 2011.

Appendix B

11 (B) HOUSING RELATED SUPPORT FOR OLDER PEOPLE - TRANSITIONAL ARRANGEMENTS

DEFINITIONS

ENHANCED HOUSING MANAGEMENT - All landlords have a responsibility for housing management — the management of tenancies and of the premises. Enhanced Housing Management relates to supported housing where vulnerable people live and describes additional activities undertaken by the landlord to assist their tenants maintain their tenancy. This may include security, such as controlling access of the premises and facilitating and monitoring site visits from contractors and other visitors/professionals. It may also include arranging aids and adaptations, health and safety risk assessments of property and facilitation of some housing services.

CONCIERGE – This describes a role that is often created by landlords to carry out enhanced housing management activities. It can be either a full time or a part time post, depending on the local arrangements and requirements and it establishes an on-site presence at key times. Typical activities undertaken may also include:

- Manage daily contact with all tenants / residents
- In the event of illness, ensure liaison with the appropriate agencies and relatives etc
- Arranging and co-ordinating regular tenant / resident meetings.
- Co-ordinating any tenant / resident activities which are integral to the communal facilities such as crime prevention talks, support surgeries, customer surveys.

The concierge may also undertake some 'handyperson' activities as part of property maintenance.

FLOATING SUPPORT – This is to assist people to maintain independence, advising, assisting or, if necessary, acting on their behalf in communications with various services and organisations. It may include such things as assistance with benefit claims, form filling and making referrals. Floating support is not tied to the accommodation; there is an expectation that the support will be to meet defined needs and once these have been fulfilled the support will 'float off' to respond to others support needs.

Agenda Item 6

Report No. RES11069

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult and Community PDS Committee

Date: 26th July 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.
- 2. BBB Priority: Excellent Council.

Financial

- 1. Cost of proposal: No cost
- 2. Ongoing costs: N/A.
- 3. Budget head/performance centre: Democratice Services
- 4. Total current budget for this head: £344,054
- 5. Source of funding: Existing 2011/2012 Budget

Staff

- 1. Number of staff (current and additional): There are 10 posts (9.22 fte) in the Democratic Services team.
- 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. This report does not involve an executive decision

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

Appendix A

Minute Number/Title	<u>Decision</u>	<u>Update</u>	Action	Completion Date	
29 th March 2011					
89. Questions from Members of the Public Attending the Meeting.	That Bromley MyTime be asked to respond to the issues raised by Mrs Sulis.	A response from Bromley MyTime to Mrs Sulis's questions was awaiting and would be forwarded as soon as it was received. An email has been sent to the Chief Executive of Bromley MyTime. No response had been received as of 14 th July.	Democratic Services Officer		
96(A) Supporting Independence in Bromley	The Portfolio Holder suggested that it would be beneficial for the Committee to receive a presentation on a service user around how their lives had changed as a result of the Supporting Independence in Bromley Programme.				
14 th June 2011					
2. Appointment of Co-opted Members to the Adult and Community PDS Committee	That efforts continue to appoint t a suitable Learning Disability representative to sit on the Committee		Chairman Democratic Services Officer		
7. Matters Arising	Minute 97: Budget Monitoring – The Chairman requested that the issue of the Meals Service continued to be monitored through the matters arising report.	An item on the Meals Service will be considered by the Committee at its meeting in September.	Head of ACS Finance	27 September 2011	

Minute Number/Title	Decision	<u>Update</u>	Action	Completion Date
8. Stroke Services in Bromley	That a further report on progress be presented in six months.	The update has been added to the Committee's work programme for January 2012.	Democratic Services Officer	31 st January 2012
11(A) Portfolio Plan 2011/12	That Members be alerted when targets are confirmed.			
11(B) Housing Related Support for Older People – Transitional Arrangements	That definitions of terms would be circulated and included in the minutes.	The Definitions were added to the minutes circulated.	Democratic Services Officer	1 st July 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

Adult and Community PDS Meeting: 14th June 2011

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

Adult and Community PDS Meeting: 26th July 2011

- 1st August Health Social Care and Housing Partnership Board
- 5th September Physical Disability Sensory Impairment Partnership Group
- 12th September Older People Mental Health Partnership Group
- 12th September Staying Healthy Partnership Group
- 14th September Mental Health Partnership Group

Adult and Community PDS Meeting: 27th September 2011

- 3rd October Health Social Care and Housing Partnership Board
- 12th October Older People Mental Health Partnership Group
- 31st October Carers Partnership Group

Adult and Community PDS Meeting: 1st November 2011

- 4th November Learning Disability Partnership Group
- 7th November Health Social Care and Housing Partnership Board
- 21st November Physical Disability Sensory Impairment Partnership Group
- 7th December Mental Health Partnership Group
- 12th December Older People Mental Health Partnership Group

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Agenda Item 7

Report No. RES11060

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult and Community PDS Committee

Date: 26th July 2011

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

Title: APPOINTMENT OF CO-OPTED MEMBERS TO THE A&C PDS

COMMITTEE 2011/12

Contact Officer: Philippa Stone, Democratic Services Officer

Tel: 020 8313 4871 E-mail: philippa.stone@bromley.gov.uk

Chief Officer: Mark Bowen, Director of Resources

Ward: All

1. Reason for report

Following a review of the positions available for Co-opted Members sitting on the Adult and Community PDS Committee an invitation has been extended to Bromley LINK to nominate a representative to sit on the Committee and fully participate in meetings.

2. RECOMMENDATION(S)

- 2.1 That the following A&C PDS Co-opted Membership appointments be made to the A&C PDS Committee for 2011/12 without voting rights:
 - Richard Lane as Bromley LINk Representative.

Corporate Policy

- Policy Status: Existing policy. Co-opted Membership at relevant PDS Committees is encouraged given the added value that Co-opted Membership can bring to a PDS Committee's work
- 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: £302,390
- 5. Source of funding: Existing 2011/12 budget.

Staff

- 1. Number of staff (current and additional): There are 10 posts (9.22 fte) in the Democratic Services Team.
- 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. This report does not involve an executive decision.

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): This report is intended primarily for Members of this Committee

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 London Borough of Bromley Procedure Rules (within the Constitution) state that "Policy Development and Scrutiny Committees are empowered to appoint non-voting co-optees on such terms and conditions as they consider appropriate." [LBB Constitution 2011, Page 101]
- 3.2 Following a review of the Membership of the Adult and Community PDS Committee there Chairman requested that an invitation be extended to Bromley LINK to nominate a representative to attend meetings and speak on behalf of the organisation. It was felt that with the rapid reforms that are now shaping the health and social care agenda, Bromley LINk could bring some valuable expertise to the Committee.
- 3.3 Co-opted Members bring their own area of interest and expertise to the work of a PDS Committee. Co-opted Members often represent the interests of key groups within a Portfolio and co-option to a Committee can ensure that their views are taken into account when issues are considered. They broaden the spectrum of involvement in the PDS process and make the intrusion of party politics into scrutiny proceedings more difficult.
- 3.4 Co-opted Members are bound by the Members Code of Conduct and are therefore expected to declare both personal and prejudicial interests and excuse themselves from parts of meetings where a conflict of interest arises.

Non-Applicable Sections:	Policy, Financial, Legal and Personnel
Background Documents: (Access via Contact Officer)	None

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Agenda Item 8

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

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

ADULT AND COMMUNITY PORTFOLIO PLAN 2011/12

Reference Report:

ADULT AND COMMUNITY PORTFOLIO PLAN, 14/06/2011 Adult and Community Policy Development and Scrutiny Committee

Decision:

That the Adult and Community Portfolio Plan for 2011/12 be agreed, subject to -

- (i) inclusion of the remaining targets and targets being expressed as real numbers with base line measures wherever possible; and
- (ii) an amended target relating to Jobmatch and Job Carve to encourage all Council departments to commit to at least one placement each year.

Reasons:

The Portfolio Plan reflects the priorities of 'Building a Better Bromley' and includes the main LPSA actions of the Local Area agreement as they relate to the Adult and Community Portfolio.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 14th June 2011 and the Committee supported the proposal.

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Councillor Robert Evans
Portfolio Holder for Adult and Community

Mark Bowen
Director of Resources
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 21 June 2011

Implementation Date (subject to call-in): 28 June 2011

Decision Reference: ACS11015

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

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

HOUSING RELATED SUPPORT FOR OLDER PEOPLE - TRANSITIONAL ARRANGEMENTS

Reference Report:

HOUSING RELATED SUPPORT FOR OLDER PEOPLE - TRANSITIONAL ARRANGEMENTS, 14/06/2011 Adult and Community Policy Development and Scrutiny Committee

Decision:

That the proposed expansion of the existing floating support service in 2011/12 to cover the requirements in sheltered housing and to inform the demands of future commissioning be approved.

Reasons:

Housing-related support services are designed to meet the Council's objective to support independence, particularly for vulnerable people, and to avoid people having to move into residential care. It is proposed that services move away from block accommodation based contracts for sheltered housing in favour of targeted floating support for those older clients with an assessed need for housing related support.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 14th June 2011 and the Committee supported the proposal.

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Councillor Robert Evans
Portfolio Holder for Adult and Community

Mark Bowen
Director of Resources
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 21 June 2011

Implementation Date (subject to call-in): 28 June 2011

Decision Reference: ACS11016

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

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

SHORT BREAK SERVICE (RESPITE) FOR PEOPLE WITH LEARNING DISABILITIES

Reference Report:

SHORT BREAK SERVICE (RESPITE) FOR PEOPLE WITH LEARNING DISABILITIES, 14/06/2011 Adult and Community Policy Development and Scrutiny Committee

Decision:

That the proposals for the integrated short break service for people with learning disabilities be agreed.

That the transfer of ownership of 118 Widmore Road from Bromley PCT to London Borough of Bromley be recommended to the Council's Executive, subject to confirmation by the PCT.

That the allocation of £1m from the learning disability capital fund towards the purchase and refurbishment of 118 Widmore Road be recommended to the Council's Executive.

Reasons:

A projected increase in the number of people with learning disabilities coming through transition and those currently living with older carers indicates there will be a continuing demand for building-based respite services in the short to medium term while alternative forms of respite are developed.

Building based short break (respite) services for adults with learning disabilities are currently provided from two locations – 3 Tugmutton Close, Farnborough and 44 Bromley Road, Beckenham. In view of the need to move the service based at Tugmutton Close, the limitations of the Bromley Road building and the inefficiencies of managing two separate services, options for the provision of an integrated service to relate both existing services have been developed.

This proposal supports the Council's Building a Better Bromley priority to support independence by providing respite breaks for service users' families and carers.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 14th June 2011 and the Committee supported the proposal.

Councillor Robert Evans Portfolio Holder for Adult and Community

Mark Bowen Director of Resources Bromley Civic Centre Stockwell Close Bromley BR1 3UH

Date of Decision: 21 June 2011

Implementation Date (subject to call-in): 28 June 2011 Decision Reference: ACS11017

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

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

HOUSING AND RESIDENTIAL SERVICES: 2010/11 PERFORMANCE REPORT

Reference Report:

HOUSING AND RESIDENTIAL SERVICES: 2010/11 PERFORMANCE REPORT, 14/06/2011 Adult and Community Policy Development and Scrutiny Committee

Decision:

That the proposed priorities for 2011/12 to meet the range of housing duties and needs in Bromley and to deal with increased pressures on the service resulting from the recession, as set out in paragraphs 1.30 and 1.31 of the report, be agreed.

Reasons:

The objectives and work priorities for 2011/12 have been formulated to meet the Council's statutory duties, Building a Better Bromley priorities and good practice.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 14th June 2011 and the Committee supported the proposal.

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Councillor Robert Evans
Portfolio Holder for Adult and Community

Mark Bowen
Director of Resources
Bromley Civic Centre
Stockwell Close
Bromley BR1 3UH

Date of Decision: 21 June 2011

Implementation Date (subject to call-in): 28 June 2011

Decision Reference: ACS11018

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

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

CONTRACTUAL ARRANGEMENTS FOR SERVICES FOR PEOPLE WITH A LEARNING DISABILITY AT SWINGFIELD COURT, BROMLEY

Reference Report:

CONTRACTUAL ARRANGEMENTS FOR SERVICES FOR PEOPLE WITH A LEARNING DISABILITY AT SWINGFIELD COURT, BROMLEY, 14/06/2011 Adult and Community Policy Development and Scrutiny Committee (Exempt)

Decision:

That the care contracts with Avenues Trust for support services to people with a learning disability at Swingfield Court be extended for 1 year until 21st June 2012, and at 213 Widmore Road for 1 year until 19th July 2012, the remaining extension periods for both contracts to be agreed by the Director of Adult and Community Services in consultation with the Adult and Community Portfolio Holder.

Reasons:

On 17th June 2009, Executive agreed the award of care contracts to Avenues Trust for the provision of support services to people with a learning disability at Swingfield Court from 22nd June 2009, and at 213 Widmore Road from 20th July 2011. Both contracts were for a period of 2 years with the option to extend annually up to a maximum period of five years from the Commencement Date.

The Avenues Trust is currently providing care and support services to a satisfactory standard within both properties, and is delivering a service consistent with the objective in Building a Better Bromley to support vulnerable people to live independently. The service provided will ensure compliance with the requirement by the Department of Health to re-provide services for everyone with a learning disability living in NHS Campus accommodation. Extending these contracts will also allow the Council to align the end dates with other contracts awarded under the re-provision programme.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 14th June 2011 and the Committee supported the proposal.

Councillor Robert Evans
Portfolio Holder for Adult and Community

Mark Bowen
Director of Resources

Bromley Civic Centre Stockwell Close Bromley BR1 3UH

Date of Decision: 21 June 2011

Implementation Date (subject to call-in): 28 June 2011

Decision Reference: ACS11019

LONDON BOROUGH OF BROMLEY

STATEMENT OF EXECUTIVE DECISION

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

CONTRACT FOR SUPPLY OF COMMUNITY EQUIPMENT AND MINOR ADAPTATIONS

Reference Report:

CONTRACT FOR SUPPLY OF COMMUNITY EQUIPMENT AND MINOR ADAPT IONS, 14/06/2011 Adult and Community Policy Development and Scrutiny Committee (Exempt)

Decision:

The requirements for competitive bids be waived pursuant to Contract Procedure Rule 13.1, and the proposal to negotiate a new 9 month contract (with break clause which can be exercised on service of one months notice) with the current providers and within the existing budgets be approved for:

- the supply of loan equipment to the in-house equipment store awarded to nine providers;
- the provision of the minor adaptations service awarded to Jarman Ltd and Draper Ltd.

Reasons:

The Integrated Community Equipment Service, jointly funded by the Bromley PCT, currently provides loan equipment to Bromley residents, and the Minor Adaptations Service works to deliver and fit the adaptations that enable people to remain living independently in their own homes for longer.

As part of the Supporting Independence in Bromley programme it has been proposed to implement a 'retail model' for the supply of simple items of equipment, and an appraisal of all potential service delivery mechanisms is currently being carried out to inform the decision about the future shape of the service. During the interim period, the Council will need to continue to provide the majority of equipment from the inhouse store, together with a minor adaptations service. This equipment is currently purchased via a framework of nine suppliers, and the current contract is due to expire on 3rd July 2011. Two contractors, Jarman Ltd and Draper Ltd, currently provide the minor adaptations service and their contracts are due to expire on 30th June 2011.

The proposed decision was scrutinised by the Adult and Community PDS Committee on 14th June 2011 and the Committee supported the proposal.

Councillor Robert Evans Portfolio Holder for Adult and Community

Mark Bowen Director of Resources Bromley Civic Centre Stockwell Close Bromley BR1 3UH

Date of Decision: 21 June 2011

Implementation Date (subject to call-in): 28 June 2011 Decision Reference: ACS11020

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Report No. ACS 11040

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult and Community Portfolio Holder

Date: For Pre-Decision Scrutiny at the Adult and Community PDS Committee

on 26th July 2011

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

Title: IMPLEMENTING "FULFILLING AND REWARDING LIVES" - A

COMMISSIONING PLAN FOR ADULTS WITH AUTISM IN

BROMLEY

Contact Officer: Andrew Royle, Strategic Commissioner, Learning Disabilities

Tel: 020 8461 7601 E-mail: andrew.royle@bromley.gov.uk

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

Ward: All

1. Reason for report

- 1.1 In December 2010, the Secretary of State issued statutory guidance to local authorities, NHS bodies and NHS foundation trusts with regard to meeting the requirements of the Autism Act 2009.
- 1.2 Local authorities are required to develop local commissioning plans for services for adults with autism, and review them annually. This plan should reflect the output of the Joint Strategic Needs Assessment (JSNA) and all other relevant data around prevalence.
- 1.3 This report updates the Adult and Community Portfolio Holder on the requirements and implications of the statutory guidance and proposes that a draft commissioning plan be released for consultation.

2. RECOMMENDATION(S)

PDS members are requested to:

2.1 Note and comment on the draft strategy

The Portfolio Holder is requested to:

- 2.2 Consider comments of PDS and agree to the release of the draft commissioning plan for consultation.
- 2.2 refer the draft commissioning plan to the Children and Young People (CYP) Policy Development and Scrutiny Committee for their consideration in light of the links with transitional arrangements for young people.

2.3	agree that following consultation the final commissioning plan be prepared for agreement by both the Adult and Community Portfolio Holder and Children and Young People Portfolio Holder in November 2011.

Corporate Policy

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

Financial

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

<u>Staff</u>

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

<u>Legal</u>

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

Customer Impact

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

Ward Councillor Views

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

3. COMMENTARY

3.1 Autism is a lifelong developmental disability, sometimes referred to as Autistic Spectrum Disorder (ASD) or Autistic Spectrum Condition (ASC).

The main areas of difficulty experienced by all people with autism are:

- communicating socially, particularly using and understanding facial expressions, tone of voice and abstract language;
- recognising or understanding other people's emotions and feelings, and expressing their own, making it more difficult to fit in socially; and
- difficulty in assimilating information and contextualising it as needed in daily life
- understanding and predicting other people's behaviour, making sense of abstract ideas, and imagining situations outside their immediate daily routine.

Other related features can include: love of routines and rules, aversion to change, and sensory sensitivity (for example a dislike of loud noises).

- 3.2 Around half of people with autism also have a learning disability (sometimes known as 'low-functioning' autism), while the rest do not (so-called 'high-functioning' autism, which includes Asperger's Syndrome).
- 3.3 In Bromley, there are an estimated 1062 people with moderate/severe learning disabilities, and 6250 with mild/moderate learning disabilities. The number of people with moderate or severe learning disabilities are expected to rise by around 80 by 2025, with the largest increases in the 25-34 and 55-64 age groups
- 3.4 There are no local sources of information that record incidence and prevalence of autism in adults in Bromley. Estimates based on those used in the national autism strategy indicate that prevalence is higher among men (1.8%) than among women (0.2%). A recent Health study across Bromley & Lewisham on 4-8 year olds confirmed a 2% prevalence rate. Recent referral rates through Bromley NHS for diagnosis of autism in adults were as follows:

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2008/2009 - 7 referrals/ assessments
2009/2010 - 5 referrals / assessments
2010/2011 - 17 referrals / assessments
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In order to better understand the overall numbers of people with autism in Bromley it is proposed that further work be carried out as part of the joint Strategic Needs assessment during 2012.

3.5 In 2009 the government published the Autism Act which was the first piece of legislation specifically dealing with the needs of adults with autism. The ultimate outcome sought for adults with autism is the vision set out in the government's strategy for adults with autism "Fulfilling and Rewarding Lives":

'All adults with autism are able to live fulfilling and rewarding lives within a society that accepts and understands them. They can get a diagnosis and access support if they need it, and they can depend on mainstream public services to treat them fairly as individuals, helping them make the most of their talents.'

3.6 In December 2010, the Secretary of State issued statutory guidance to local authorities, NHS bodies and NHS foundation trusts with regard to meeting the requirements of the Act.

- 3.7 The Autism Act required that the guidance should cover the following:
 - 1. The provision of relevant services for the purpose of diagnosing autistic spectrum conditions in adults
 - 2. The identification of adults with autism
 - 3. The assessment of the needs of adults with autism for relevant services
 - 4. Planning in relation to the provision of relevant services to people with autism as they move from being children to adults
 - 5. Other planning in relation to the provision of relevant services to adults with autism
 - 6. The training of staff who provide relevant services to adults with autism
 - 7. Local arrangements for leadership in relation to the provision of relevant services to adults with autism.
- 3.8 In particular, the guidance sets out how health and social care services can:
 - improve the way they identify the needs of adults with autism, and
 - incorporate those identified needs more effectively into local service planning and commissioning, so that adults with autism and their carers are better able to make relevant choices about their care.
- 3.9 The statutory guidance is to be treated as if it were guidance issued under section 7 of the Local Authority Social Services Act 1970. This means that local authorities and NHS bodies must follow the relevant sections or provide a good reason why they are not (one example might be because they can prove they are providing an equivalent or better alternative). If they do not follow the guidance and cannot provide a good reason, they may be liable to judicial review. Lack of sufficient resource would not necessarily constitute a good reason.
- 3.10 One of the underlying principles of the guidance is to avoid new burdens or extra requirements that health and social care professionals must meet. Instead, the emphasis is on making sure existing policies are followed. It is important to note that the guidance reinforces that diagnosis of autism is **not** a guarantee of support or services but that it is a reason for assessment of needs. Access to publicly funded care services is still based on meeting the Council's eligibility criteria (which in Bromley are substantial and critical need).
- 3.11 Though the guidance provides direction, the ultimate aim is that local areas apply it to reflect local needs, existing strengths in service provision and the landscape they work in. To support local authorities with meeting the requirements of the statutory guidance, the Department of Health has published an 'Essential Quality Outcomes for Local Self-assessment Framework' which has been used to prepare the draft commissioning plan for Bromley.
- 3.12 The draft commissioning plan (attached) sets out the current position in Bromley with regard to support and services for people with autism and suggests a number of proposed actions which address any identified gaps in provision. Through consultation the effectiveness of current services and the information advice and guidance offering available to people with autism in the Borough will be tested.
- 3.13 The draft commissioning plan is specifically aimed at adults as required by the legislation. However officers in ACS are working in partnership with children's services in order to address the requirements young people moving from childhood to adulthood.
- 3.14 There is no additional funding available to local authorities to implement the requirements of the Autism Act and additional resources would not be required to deliver the proposals in the draft commissioning plan.

4. POLICY IMPLICATIONS

This report is presented to PDS as part of its scrutiny overview role in relation to policy development within ACS.

5. FINANCIAL IMPLICATIONS

There are no additional resource implications arising from the Autism Act. The actions proposed in the draft commissioning plan can be met within existing resources.

6. LEGAL IMPLICATIONS

TBA

Non-	Personnel implications
Applicable	
Sections:	
Background	Fulfilling and rewarding lives: the strategy for adults with autism in England.
Documents: (Access via	http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance
Contact Officer)	Implementing Fulfilling and Rewarding lives: Statutory Guidance.
,	http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance

REWARDING AND FULFILLING LIVES

A DRAFT COMMISSIONING PLAN FOR ADULTS WITH AUTISM IN BROMLEY

JULY 2011

Introduction

In 2009 the government published the Autism Act which was the first piece of legislation specifically dealing with the needs of adults with autism. The ultimate outcome sought for adults with autism is the vision set out in the government's strategy for adults with autism "Fulfilling and Rewarding Lives":

'All adults with autism are able to live fulfilling and rewarding lives within a society that accepts and understands them. They can get a diagnosis and access support if they need it, and they can depend on mainstream public services to treat them fairly as individuals, helping them make the most of their talents.'

In December 2010, the Secretary of State issued statutory guidance to local authorities, NHS bodies and NHS foundation trusts with regard to meeting the requirements of the Act. Though the guidance provides direction, the ultimate aim is that local areas apply it to reflect local needs, existing strengths in service provision and the landscape they work in. To support local authorities with meeting the requirements of the statutory guidance, the Department of Health has published an 'Essential Quality Outcomes for Local Self-assessment Framework' which has been used during the preparation of the draft plan for Bromley.

Autism

Autism is a lifelong developmental disability, sometimes referred to as Autistic Spectrum Disorder (ASD) or Autistic Spectrum Condition (ASC).

The main areas of difficulty experienced by all people with autism are:

- communicating socially, particularly using and understanding facial expressions, tone of voice and abstract language;
- recognising or understanding other people's emotions and feelings, and expressing their own, making it more difficult to fit in socially; and
- difficulty in assimilating information and contextualising it as needed in daily life
- understanding and predicting other people's behaviour, making sense of abstract ideas, and imagining situations outside their immediate daily routine.

Other related features can include: love of routines and rules, aversion to change, and sensory sensitivity (for example a dislike of loud noises).

Around half of people with autism also have a learning disability (sometimes known as 'low-functioning' autism), while the rest do not (so-called 'high-functioning' autism, which includes Asperger's Syndrome).

In Bromley, there are an estimated 1062 people with moderate/severe learning disabilities, and 6250 with mild/moderate learning disabilities. The number of people with moderate or severe learning disabilities are expected to rise by around 80 by 2025, with the largest increases in the 25-34 and 55-64 age groups

There are no local sources of information that record incidence and prevalence of autism in adults in Bromley. For this reason, estimates based on those used in the national autism strategy have been used. These estimates indicate that prevalence is higher among men (1.8%) than among women (0.2%). A recent Health study across Bromley & Lewisham on 4-8 year olds confirmed a 2% prevalence rate.

As noted in Objective 1, commissioning plans should be informed by robust local needs assessments. In Bromley it is proposed that a needs assessment will be carried out in conjunction with the director of public health during 2012.

Commissioning Plan:

This draft commissioning plan for adults with autism in Bromley is our response to the guidance and we are seeking the views of people in Bromley about how the needs of people with autism in Bromley are being met. It is structured around the seven key objectives identified in the statutory guidance:

- 1. Autism services should be commissioned as part of a well planned system. The autism needs assessment should inform the commissioning plan. All organisations should have a responsibility to collect information on needs (as required) and to feed this into the needs assessment.
- 2. People with autism and their carers will be engaged in the development of the commissioning plan.
- 3. Autism should be recognised by the decision making bodies in the Borough as an important matter. There should be a clear pathway for reporting and decision making.
- 4. An accessible pathway for diagnosis and assessment for people with autism should be in place.
- 5. People with autism should have access to trained and skilled assessment to help find out what they need. If eligible they should have access to personalised support. If not they should have access to preventative support, signposting and information.
- 6. Where possible people with autism and their families should be able to have their needs met in services that everybody uses.
- 7. Transitions from childhood to adulthood should be smooth and well co-ordinated.

OBJECTIVE 1

Autism services should be commissioned as part of a well planned system. The autism needs assessment should inform the commissioning plan. All organisations should have a responsibility to collect information on needs (as required) and to feed this into the needs assessment.

A commissioning plan looks at how many people with autism there are, what they need and what they say about what they want. Then it looks at how much money there is and decides what are the most important things to do first. A commissioning plan should be produced every year. This commissioning plan should fit with other plans and strategies for Learning Disabilities, Mental Health, and Housing etc.

There is not enough accurate information about the numbers of people with autism. We need to collect better quality information locally and to use national information.

What we propose to do -

This draft strategy will ensure that our other plans and strategies integrate and support the delivery against the statutory guidance. For example our learning disability design specification for supported living services is being reviewed in order to ensure that commissioned properties will be accessible to people with autism.

To have a better understanding of the overall numbers of people with autism in Bromley, it is proposed that data should be gathered as part of the Joint Strategic Needs Assessment in 2012.

OBJECTIVE 2

People with autism and their carers will be engaged in the development of the commissioning plan.

What we propose to do -

The views of people with autism and carers will be sought in the development of this plan and its implementation.

We will use the Autism Standing Forum; Mental Health Partnership Group; Transition Operational and Strategy Groups as well as the Learning Disability Partnership Board, Experts by Experience and the LINk in the stakeholder consultation and ongoing engagement.

OBJECTIVE 3

Autism should be recognised by the decision making bodies in the Borough as an important matter. There should be a clear pathway for reporting and decision making.

What we are doing now -

As required under the Statutory Guidance we have identified the Council's Strategic Commissioner for Learning Disabilities as having responsibility for lead commissioning of community care services for adults with autism in the borough.

NHS Bromley has identified their Commissioner, Mental Health and Learning Disabilities as their lead for autism.

What we propose to do -

The Learning Disability Partnership Board (see objective 1) will report to the to the Health and Well Being Board on how we are delivering the support for people with autism.

Lead officers for autism will report to their respective governance bodies within their organisations on a joint basis to ensure that actions and outcomes between health and social care are coordinated and complementary.

OBJECTIVE 4

An accessible pathway for diagnosis for people with autism should be in place.

A pathway means that people in Bromley will know where to go to get a diagnosis of autism.

The National Institute for Health and Clinical Excellence (NICE) clinical guideline for adults with autism is scheduled to be published in June 2012. In order to be ready for the guidance, NHS bodies and NHS Foundation Trusts that commission or provide diagnostic and assessment services should be reviewing existing best practice with a view to establishing how it can be adopted. This is not yet under way in Bromley. It is proposed that this work should be led by the Transition Strategy Group which includes representatives from Children and Young People Services (CYP) and health and social care professionals in order to assess the potential impact of this on services in Bromley.

Once the NICE clinical guideline is published, NHS bodies and NHS Foundation Trusts that commission or provide diagnostic and assessment services will be expected to review their diagnostic processes and services against NICE's best practice guidance. The aim of this is to make the diagnostic process more accessible and consistent.

What we are doing now -

We are reviewing existing best practice with a view to establishing how the NICE guidelines will impact locally. This work is led by the Transition Strategy Group which includes representatives from CYP and health and social care professionals.

Currently Bromley PCT Commission's Autism Diagnostic Services for adults from the South London and Maudsley (SLAM) NHS Foundation Trust. Referrals to this service are tertiary, and have therefore been screened by local secondary services (Oxleas) prior to referral. The service at SLAM offers a diagnostic assessment. In some cases further support though outpatient / day-care / inpatient can be accessed or recommendations are made back to the local referring team.

What we propose to do -

We are currently discussing further development of the care pathway locally, including skills development, in order that some diagnostic assessment can take place locally within secondary care. These plans will continue to be developed over the coming year.

NHS Bromley will develop a diagnostic pathway in line with the statutory guidance. Health and social care staff will help to develop this. This will help local people to get a diagnosis if they want one.

This will be measured against the NICE guidance due to be published in 2012.

OBJECTIVE 5

People with autism should have access to trained and skilled assessment to help find out what they need. If eligible they should have access to personalised support. If not they should have access to preventative support, signposting and information.

If people with autism have FACS eligible needs (i.e. they are eligible for social care support) they should be able to have:

- skilled and knowledgeable social work assessment,
- a personalised support plan
- trained personal assistants (if necessary),
- support to manage personal budgets.

Other supports might also be useful to people with autism:

- · befriending and mentoring,
- group support,
- brokerage, and
- advocacy.

Carers of people with autism should be able to have support and information to meet their own needs.

What we are doing now -

We are developing a support planning process that will support eligible people with autism in being able to access the services they require to meet their needs.

For people who do not meet our eligibility criteria there are a number of organisations who we signpost people to in order that they may be supported in living full lives within the community:

Bromley Mencap have been commissioned to provide a brokerage service that aims to provide information, signposting and direct assistance to ensure that adults with learning disabilities who live in the borough have easy access to information and advice to enable them to make informed choices and assist them to maintain independence and community involvement.

Burgess Autistic Trust's (BAT) Family Service provides free information and support to families whose child, aged 18 years or younger, has been diagnosed with an Autistic Spectrum Disorder (ASD). Their Outreach Service is a free support service for young people and adults aged 18 and over with ASD running regular social groups and activities, offering young people and adults with ASD the opportunity to meet others and enjoy the benefits of social contact.

BAT provides a range of ASD specific training including a Family Service Workshops for families and carers, bespoke training for partner or public sector organisations who work with people with ASD, and an annual conference on topical, ASD-related subjects

Advocacy for All's Advocacy for Autism project began in 2004 and was initially funded by BILD and since then various charitable trusts. Working across Bromley and Bexley the project was the first autism specific advocacy project in England. They work with people with autism and Aspergers syndrome aged 18+ - (there is no upper age limit). The project is available to all people with autism regardless of whether, or not, they are FACS eligible. Trained volunteer advocates add value to the project.

Young people with Autism and Aspergers syndrome (age 14-18) receive advocacy support from Advocacy for All's Children in Need funded project.

What we propose to do -

We will look at what other Councils are doing and see where we can work together with them or share good practice.

We will ensure that information, advice and guidance provision for those people who do not meet FACS eligibility criteria are clearly accessible for people with ASD.

OBJECTIVE 6

Where possible people with autism and their families should be able to have their needs met in services that everybody uses.

The focus of the statutory guidance is to ensure that people with autism have the same access to mainstream services – housing, education, training, leisure activities – as the rest of the population.

Autism is very different for different people. Some people will always need very specialist supports. Other people will be able to use ordinary services. All services should meet autistic needs within their service rather than send people to a specialist service to do the job for them. All support services should have training and development for their staff to be able to work well with people with autism. They should be providing training and development for their staff.

The guidance assumes that everyone who comes into contact with people with autism have had, as a minimum, awareness training, and, where appropriate, specialist training. There is no set timescale for compliance with this requirement and awareness training can be

incorporated into mainstream equality training. It is not anticipated that this will require additional resources.

What we are doing now -

Via joint teams with health providers, support is provided for people with autism who have an assessed need and are eligible under the Council's criteria for support. This is usually through existing mental health or learning disability teams and services.

We have updated our specification requirements to ensure that providers of commissioned services provide autism training for their staff.

What we propose to do -

We will liaise with providers of mainstream services including Bromley MyTime, Bromley Adult Education College, registered social landlords etc to identify the ways in which they can make their services more accessible to people with autism.

Through support mechanisms like our Training Consortium we will enable providers to access training around autism.

We will evaluate the current equality/ disability awareness training provided by the Council's Learning and Development service to ensure that it is meeting the requirements of the guidance.

We will provide training to non-care staff where appropriate (e.g. receptionists, housing staff).

We will investigate opportunities for joint training with our cluster boroughs and health partners, including GP's.

OBJECTIVE 7

Transition from childhood to adulthood should be smooth and well co-ordinated.

Transition from childhood to adulthood for young people with autism can be difficult. Existing children's to adults' transitions systems should be developed to fully meet the needs of people with autism. Where they are eligible for support from the Council, people with autism should be able to have their needs met in the most suitable service, for example in the mental health, older peoples' or substance misuse services.

What we are doing now -

The Council's new Transition Strategy being jointly developed by Adult & Children Services with health input will help to support young people moving from childhood to adulthood and specifically references young people with autism.

Closer joint working between Adult & Children Services has been developed at all levels in order to best manage the transition between services.

We have commissioned a Transition Family Support Service to work with specific families going through transition with an aim to improving access to high-quality, timely information during transition.

Transition services in Bromley, whose recent performance has been rated as Development Stage 3 are building on established and newly developed practice to ensure a smooth care pathway for young people going through transition. In line with the guidance, an advocacy service has, following review earlier this year, been re-commissioned to deliver family support to identified cohorts of individuals coming through the transition process. This did not require additional resources.

What we propose to do -

We will engage with mental health, older peoples' and substance misuse services in order to identify any specific issues relating to supporting people with autism in those services.

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Report No. ACS11036

London Borough of Bromley

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 26th July 2011

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

Title: THE PROVISION OF EQUIPMENT AND TALKING BOOKS FOR

VISUALLY IMPAIRED PEOPLE

Contact Officer: Silvio Giannotta, Commissioning Officer

Tel: 020 8313 7722 E-mail: silvio.giannotta@bromley.gov.uk

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

Ward: Boroughwide

1. Reason for report

1.1 Following Portfolio Holder agreement (ACS 11004) to a consultation on changes to the provision of equipment and talking books, this report sets out the outcome of the consultation exercise and recommendations for the future provision of the service.

2. RECOMMENDATION

- 2.1 The Adult and Community Services Portfolio Holder approves the proposed changes to the provision of equipment and talking books for visually impaired people. Namely;
 - Items of equipment as listed in para 3.3 below are provided free of charge to eligible service users who meet critical/substantial needs under Fair Access to Care services criteria
 - Additional items of equipment not listed can be provided free of charge in exceptional cases, should these be deemed vital in maintaining the service user's safety and/or independence
 - The withdrawal of Council subsidy from the RNIB Talking Books service, with new and existing users directed to alternate providers including free local library services and free national providers

Corporate Policy

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

Financial

- 1. Cost of proposal: Estimated cost £9,770
- 2. Ongoing costs: Recurring cost. 9,770
- 3. Budget head/performance centre: Care Services Budget, Assessment and Care Management
- 4. Total current budget for this head: ££9,770
- 5. Source of funding: ACS Portfolio

<u>Staff</u>

- 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: Statutory requirement.
- 2. Call-in: Call-in is applicable

Customer Impact

 Estimated number of users/beneficiaries (current and projected): Approximately 120 Talking Books users and 500 service users who received equipment issued by KAB within the past 24 months

Ward Councillor Views

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

3. COMMENTARY

- 3.1 The Council currently funds a wide range of equipment for people with a visual impairment who meet the eligibility criteria i.e. assessed as having a critical or substantial need. Some of the equipment provided is vital in helping people remain safe and independent at home, whereas some could be considered "non-essential" for which it would be reasonable to expect people to pay for themselves. Talking books have been provided to people registered blind/partially sighted in Bromley, the service is provided by Royal National Institute of Blind people (RNIB) with an annual subscription charge of £82 per user, funded by the Council.
- 3.2 Kent Association for Blind (KAB) are funded by the Council to provide specialist statutory assessments for people with visual impairments and issue items of equipment to those assessed as requiring these. They are also responsible for administering the talking books service.
- 3.3 The budget for the provision of equipment and talking books has been overspent for the past 2 years and measures to control costs are necessary to ensure future spend is contained within the available budgets. Report ACS 11004 set out the Council's intention to consult with service users on proposed changes to the provision of equipment and talking books for visually impaired people.
- 3.4 Almost 600 consultation documents were issued to people provided with equipment by KAB and talking books subscribers, with a total of 155 responses received. An equalities impact assessment of the proposed changes was also completed.

Summary of Consultation Responses:

Equipment

3.5 Of the respondents 90% agreed that the following designated items of equipment should be provided free of charge to those who meet the eligibility criteria:

Daily Living	Mobility Aids
Liquid level indicator	Symbol cane
Boil alert	Long cane
Oven shelf guard	Wooden walking stick
Cooking basket	Guide cane
Dycem	Aluminium walking stick
Vegetable holder	Replacement cane tip

3.6 Other items of equipment which have previously been provided free of charge can in future be purchased by service users using their own funds. Only in exceptional circumstances will KAB be able to provide non listed items free of charge, and only where these have been assessed as vital in ensuring the safety and independence of the service user.

Talking Books

- 3.7 The consultation sought views on the proposal to withdraw Council subsidy from the RNIB Talking Books service as free or cheaper alternatives had been identified. Annual subscription cost to the RNIB service is £82 per user and as of August 2010, 128 people were receiving a wholly subsidised service.
- 3.8 35% of respondents agreed with the proposal, 42% disagreed and the remaining 23% were unsure or did not comment. The reasons for disagreeing with the proposal was due to the perceived superior quality of the service, the wider range and selection of books available and the increased functionality of the of the RNIB service.

- 3.9 As part of the consultation process council officers also attended a demonstration of talking books audio playing equipment with a small group of visually impaired service users. It was clear from the demonstrations the RNIB daisy player has additional functionalities, however the alternatives demonstrated (Calibre and British Wireless for Blind Fund) were accessible to those with a visual impairment.
- 3.10 Given the availability of alternatives and the need to manage increasing demand by ensuring that available funds are targeted at the most vulnerable, it is proposed that the Council will cease subsidising the RNIB talking books service, with new and existing users signposted and supported to access the alternatives available. Service users wishing to continue receiving the RNIB talking books service may do so at their own expense.

Equalities Impact Assessment

- 3.11 The EIA identified instances where visually impaired people may potentially be adversely impacted from the change in policy. These are clearly set out in the EIA and a series of actions have been agreed to mitigate these. Below is a summary of the main issues and actions taken to mitigate these:
 - There may be occasions where individuals will require a piece of equipment not listed to remain safe and independent in their own homes. In these exceptional circumstances, discretion will be given to issue items outside of the list free of charge provided they have been assessed as vital in maintaining safety/independence
 - Physical access to library buildings to mitigate the potential issue whereby some visually impaired residents may be unable to access library buildings, a home library service will be available to deliver books to their homes on a monthly basis
 - The consultation identified a lack of responses from the BME residents, it is therefore proposed to raise awareness through BME representative groups, by providing information and presentations on services available to visually impaired people
 - To address accessibility issues with the online library books service, KAB staff receive training in supporting people to access the service

4. POLICY IMPLICATIONS

4.1 The recommendations from this report supports the Council's objectives in the Building a Better Bromley 2020 Vision, in particular Supporting Independence; whereby people with a visual impairment, are supported to remain safe and independent in their homes for longer.

5. FINANCIAL IMPLICATIONS

5.1 The budget currently includes the combined costs of talking books and equipment for visually impaired people. Over the past two years, spend has outgrown the available budget. Below is a table of costs:

Year	Budget	Actual Spend	Equipment/talking books split (%)
09/10	£9,550	£16,381	36% equipment 64% talking books
10/11	£9,770	£15,716	47% equipment 53% talking books

5.2 By limiting the type of equipment which can be provided free of charge to the list set out in para 3.5 above and by ceasing to subsidise the talking books service, future spend will be contained within available budgets.

6. LEGAL IMPLICATIONS

- 6.1 The Community Care (delayed discharges) Act 2003 states any qualifying service of a description prescribed in the regulations is to be free of charge to the person to whom it is provided. The qualifying services are defined in Regulation 3 of The Community Care (Delayed Discharges etc.) Act (Qualifying Services) (England) Regulations 2003 as intermediate care and community equipment (aids and minor adaptations) services. Some of the items of equipment currently provided free of charge to people with visual impairments by the Council could be considered non-specialist ordinary household items which do not fall within the definition of Community Equipment and for which it may be reasonable for people to purchase for themselves.
- 6.2 Under s.7 Public Libraries and Museums Act 1964, a local authority is under a duty to provide a comprehensive and efficient library service for all persons desiring to make use thereof. The existing provision by library services is efficient and comprehensive, reasonable adjustments have been made to ensure the Bromley Library service is accessible to those with a visual impairment, this includes waiving all fees to those with a registered visual impairment, the provision of a home library service for housebound service users and the ability to reserve books from within the extensive library audio books stock, furthermore if there is particular demand for an audio book not available from the library stock, consideration will be given to purchasing this.
- 6.3 The Equality Act 2010 s149 (1) places a duty on a public authority in the exercise of its functions, must have due regard to the need to eliminate discrimination and advance equality of opportunity between persons who share relevant protected characteristics and persons who do not share it By implementing the steps outlined above the Council is making reasonable adjustments to ensure disabled residents are not placed at a substantial disadvantage compared to non-disabled residents.

Non-Applicable Sections:	Personnel Implications
Background Documents: (Access via Contact Officer)	Equalities Impact Assessment

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Agenda Item 9c

Report No. ACS11034

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult and Community Performance Development and Scutiny

Committee - 26th July 2011

Date: 26th July 2011

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

Title: PROPOSED CHANGES TO OLDER PEOPLE'S MENTAL

HEALTH IN-PATIENT SERVICES WITHIN OXLEAS NHS

TRUST

Contact Officer: Claire Lynn, Strategic Commissioner Mental Health and Substance Misuse

Tel: 020 8313 4034 Tel No E-mail: claire.lynn@bromley.gov.uk

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

Ward: All wards

1. Reason for report

To provide an opportunity for members of the Policy Development and Scrutiny Committee to comment on proposals received from Oxleas NHS Trust on proposed changes to in patient services for older people with mental ill health in Bromley.

2. RECOMMENDATION

Members are invited to comment on the proposals.

Corporate Policy

- 1. Policy Status: Existing policy. supporting Bromley residents to meet their health and social care needs through access to local services
- 2. BBB Priority: <please select>.

Financial

- 1. Cost of proposal: No cost Commissioned and funded by Bromley PCT
- 2. Ongoing costs: <please select>.
- 3. Budget head/performance centre: N/A
- 4. Total current budget for this head: £N/A
- 5. Source of funding:

Staff

- 1. Number of staff (current and additional): N/A staff emplyed by Oxleas NHS Trust
- 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): Currently 44 in-patient beds are provided for Bromley residents as part of the older peoples' mental health service

Ward Councillor Views

- 1. Have Ward Councillors been asked for comments? <please select>
- 2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 In-patient services for older people with Dementia and organic mental health problems are currently provided by the Oxleas NHS Trust at Green Parks House in Scadbury (Older Adults) and Cator (Dementia) wards.
- 3.2 Oxleas NHS Trust also provides similar services to the residents of Greenwich and Bexley from sites at Queen Mary's Sidcup and Queen Elizabeth Woolwich. The Trust are proposing to reconfigure these services in the light of changing usage of in-patient beds which will result in the closure of Cator ward.
- 3.3 Over the past few years, the use of inpatient beds for older people with mental ill health has reduced considerably as more people are cared for in their own homes, supported by an increased level of resource in community older people mental health services and through social care services. This has meant that older people inpatient wards frequently have empty beds with an average occupancy rate of around 70%. There are currently four wards at Green Parks House providing a total of 93 beds. These are divided into three wards (49 beds) for those of working age (one of which is a triage ward) and two for older people (44 beds). The older peoples wards are divided into one ward for functional illness (depression, anxiety, psychosis etc) and the other for those problems associated with organic illness such as dementia. Two years ago there were regular occupancy levels at Green Parks House of over 130% against a government target of 92% and a recommended 87% by the Royal College of Psychiatrists.
- 3.4 Commissioners supported Oxleas NHS Trust in introducing a number of developments to reduce this pressure including establishing an Early Intervention Team, a Crisis and Home Treatment Team and a day treatment service. Greater emphasis was placed on reducing delayed discharges and maintaining throughput from in-patient wards, which is managed in part through the Demand Management Panel. More recently the Trust also introduced a triage ward which appears to have had a significant impact on reducing demand for in-patient services. The result has been a reduction in occupancy levels to between 92% to 100% for adults and a steady reduction in occupancy levels to below 65% over a six month period for older people's beds.
- 3.5 Oxleas NHS have considered this under occupancy on a trust wide basis to improve the quality of care and to make more effective use of resources. They are proposing to reorganise services to create a centre of excellence in the care of people with dementia at the Woodlands Unit and two further specialist wards for older people with other mental health problems at Green Parks House, Princess Royal University Hospital, Bromley and at Oxleas House, Queen Elizabeth Hospital, Greenwich. In this process, the overall number of beds will be reduced to meet the lower level of demand. Oxleas Trust report that this pattern in under-occupancy for older people's beds is replicated across Bromley, Bexley and Greenwich. The Trust also suggested that a reduction in beds would enable it to meet the national efficiency savings in 2011/2012. Funding is rarely released through the partial closure of wards because of the economics of staffing a ward. However, funding can be released for reinvestment through the closure of a full ward. This would not be possible within one borough but could be achieved if an Oxleas wide approach is taken.
- 3.6 The proposals submitted by Oxleas to the Council and the PCT are attached at Appendix One.

4. POLICY IMPLICATIONS

The report is presented to this committee as part of their role in scrutinising health services.

5. FINANCIAL IMPLICATIONS

The proposals will realise some savings to Oxleas NHS Trust. Oxleas are discussing with the PCTs and local authorities in Bromley, Bexley and Greenwich how these resources will be used to meet local priorities for services to people with dementia.

6. PERSONNEL IMPLICATIONS

There are no personnel implications for the Council as all staff are employed by Oxleas NHS Trust

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

OXLEAS NHS FOUNDATION TRUST

Title:	Proposed changes to older people's mental health inpatient services: briefing
From:	Helen Smith, Deputy Chief Executive, Oxleas NHS Foundation Trust
	Estelle Frost, Service Director, Older Person's services, Oxleas NHS Foundation Trust

1. Introduction

The trust is developing proposals to reconfigure older people's mental health inpatient services in Bexley, Bromley and Greenwich. Current inpatient provision is as follows:

	Dementia beds	Other MH beds	
Bexley: Woodlands Unit	Camden ward: 14 Leyton ward:		
Bromley: Green Parks House	Cator ward: 22	Scadbury ward: 22	
Greenwich: Oxleas House	Shepherdle	as ward: 19	

Over the past few years, the use of acute older adult inpatient beds has reduced considerably as more people are cared for in their own homes, supported by an increased level of resource in our community older people mental health services. This has meant that our older people inpatient wards frequently have empty beds – we calculate that the average occupancy rate is now only around 70% and on any day, we have the equivalent of a ward of empty beds across the trust. Table 1 below details bed occupancy borough by borough for each of the last 12 months

TABLE 1: <u>Acute older adult inpatient use: average ward occupancy (excluding leave) levels for each borough April 2010 – March 2011</u>

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Bex	80%	72%	77%	79%	63%	62%	61%	82%	76%	84%	70%	54%
Bro	93%	92%	92%	96%	86%	78%	74%	72%	64%	63%	57%	64%
Gre	68%	71%	58%	73%	85%	89%	79%	67%	79%	77%	58%	70%

Table 2 below details Bromley's Occupied Bed Days for the last year for this client group.

TABLE 2: Bromley PCT acute older adult Occupied Bed Days (excluding leave), April 2010 – March 2011

Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
1180	1198	1111	1116	983	947	914	854	784	774	683	838

The community provision of older adult services in Bromley is detailed below.

Community provision of older adult services

	Average caseload	Average no. referrals/ month
CMHT East	280	9
CMHT West	286	15
Bridgeways Day Hospital	45	9
Bridgeways community assessment & therapy team	95	93
Older adults OT service	50	10
Memory Clinic	1060	63

2. Quality Improvements

The reduced occupancy gives us an opportunity both to improve the quality of care we offer and to make more effective use of resources. We are proposing to reorganise our services to create a centre of excellence in the care of people with dementia at the Woodlands Unit, QMS, and two further specialist wards for older people with other mental health problems at Green Parks House, PRUH, Bromley and at Oxleas House, QEH, Greenwich. In this process, the overall number of beds will be reduced to meet the lower level of demand.

The changes will mean that some patients and carers have to travel further to receive inpatient care; however, there will be the following benefits:

- Inpatient services will be more specialised and deliver better outcomes and patient satisfaction;
- Men and women will be cared for in separate accommodation to ensure safety, privacy and dignity;
- The staff skill mix will be enhanced to ensure full multi disciplinary input;
- We will improve the provision of therapeutic groups and activities on the wards
- A new post will take responsibility for ensuring a smooth pathway for patients from admission through to discharge.
- Elimination of double bedrooms, all patients will have a private bedroom, many with ensuite facilities.

3. Service changes

It is proposed to:

- Close Cator ward in Bromley, leading to a reduction of 22 beds
- Reconfigure the two wards in the Woodlands (31 beds) into specialist dementia wards
- Refurbish Leyton ward (Woodlands) to ensure full female/male separation
- Reconfigure the remaining two wards across Oxleas House and GPH (41 beds in total) into functional mental health beds
- Identify a small number of beds in GPH for triage; patients will be admitted for assessment to determine which ward is most appropriate
- Capital investment in the wards where necessary to ensure a high quality environment

4. Mitigating the impact of increased travel

There were 66 admissions of Bromley residents to Cator ward last year (2010/11); in the future, these patients would have to travel to the QMS site for inpatient care.

There are a number of bus routes to QMS and there is a bus terminus on the site. There is also onsite parking.

We have reconfigured our volunteer service in the trust and placed it within the older adults directorate in anticipation of these changes, and will look to extend our volunteer driver service.

SLHT have already moved to a model of service delivery based over 3 sites and many Oxleas patients will be used to using Queen Mary's and Queen Elizabeth hospitals to receive treatment for physical health conditions.

5. Impact on staff

We have begun the process of talking to staff about the changes and will be launching a formal staff consultation process in due course. We are hopeful that all affected staff will be found suitable roles within the trust, as we know their skills and experience will assist the development of the new model.

6. Involvement of patients, carers and other stakeholders

We will be working with patients and their families, our governors and partner organisations to ensure that this development takes place smoothly and that the changes deliver inpatient services in the way patients want.

We are setting up a stakeholder reference group open to any partner organisation, to provide regular feedback and to incorporate a wide range of views in our planning. The first meeting of the steering group is Friday 17 June 2011, at 10.00am (venue tbc).

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Agenda Item 9d

Report No. ACS11037

London Borough of Bromley

Agenda Item No.

PART 1 - PUBLIC

Decision Maker: Adult & Community Services Policy Development & Scrutiny

Committee

Date: 26 July 2011

Decision Type: Non-Urgent Executive Key

Title: BUDGET MONITORING 2011/12

Contact Officer: Lesley Moore, Deputy Finance Director,

Tel: 020 8461 4633 E-mail: lesley.moore@bromley.gov.uk

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

Ward: Borough Wide

1. Reason for report

This report provides the first budget monitoring position for 2011/12 which is primarily based on any overspends/under spends in 2010/11 that follow through into 2011/12 where no additional funding has been set aside in the 2011/12 budget. The report also highlights significant variations arising in this financial year based on activity up to May 2011.

2. RECOMMENDATIONS

- 2.1 Note that a projected overspend of £60,000 is forecast on the first budget monitoring report for 2011/12 based on information as at May 2011.
- 2.2 Note that Executive is being asked to approve the carry forward requests in Appendix 2.

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: Adult and Community Services Portfolio
- 4. Total current budget for this head: £101.9m
- 5. Source of funding: ACS Approved Budget

<u>Staff</u>

- 1. Number of staff (current and additional): 712 fte's
- 2. If from existing staff resources, number of staff hours:

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

Estimated number of users/beneficiaries (current and projected): The 2011/12 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: Council wide

3. POLICY IMPLICATIONS

- 3.1 The Resources Portfolio Plan for 2011/12 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.
- 3.2 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.
- 3.3 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 2011/12 to minimise the risk of compounding financial pressures in future years.
- 3.4 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.

4. FINANCIAL IMPLICATIONS

- 4.1 A detailed breakdown of the Latest Approved Budgets and Projected Outturn by service area is shown in Appendix 1.
- 4.2 The first significant variation identified this year relates to Bed and Breakfast and temporary accommodation placements. There has been a marked increase in the number of households presenting with housing needs, particularly those faced with imminent homelessness, mainly due to rent or mortgage arrears or the loss of private rented sector accommodation. Since December 2010 there has been an increase of 16% in numbers requiring temporary accommodation and 29% for B&B placements.

There is also a reduced number of properties available for temporary and bed and breakfast accommodation, which means that there is greater competition between other London boroughs for available units. As a result there is an increase in the use of more expensive nightly paid accommodation, meaning that additional cost pressures of around £60,000 are currently forecast.

4.3 Costs attributable to individual services have been classified as "controllable" and "non-controllable" 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.

Non-Applicable	Legal, Personnel, Customer Impact
Sections:	
Background	2011/12 Budget Monitoring files within Adult &
Documents:	Community Services Finance Section
(Access via Contact	
Officer)	

ACS 11037 Adults and Community Services Budget Monitoring Summary - May 2011

2009/10 Actuals	Division Service Areas	2010/11 Original Budget	2010/11 Latest Approved	2010/11 Projection		Notes	Variation Last Reported	Full Year Effect
£'000	Care Services	£'000	£'000	£'000	£'000		£'000	£'000
-88	AIDS-HIV Grant	190	190	190	0		0	0
31,031	Assessment and Care Management	32,346	32,332	32,332	0	1	0	0
7,892	Direct Services	5,099	5,099	5,099	0		0	0
2,056	Learning Disabilities Care Management	2,230	2,230	2,230	0		0	0
2,036	Learning Disabilities Day Services	2,030	2,030	2,030	0		0	0
1,412	Learning Disabilities Housing & Suppport	1,317	1,317	1,317	0		0	0
44,339		43,212	43,198	43,198	0		0	0
2,729	Commissioning and Partnerships - ACS Portfolio Commissioning and Partnerships	2,435	2,435	2,435	0		0	0
275	Drugs and Alcohol	256	256	256	0		0	0
14,841	Learning Disabilities Services	16,195	16,195	16,195	0	2	0	0
4,547	Mental Health Services	5,124	5,124	5,124	0		0	0
0	PCT Funding (Social Care & Health)	0	0	0	0		0	0
5,267	Procurement & Contracts Compliance	5,185	5,199	5,199	0		0	0
27,659		29,195	29,209	29,209	0		0	0
-5	Housing and Residential Services Enabling Activities	-18	-18	-18	0		0	0
-1,607	Housing Benefits	64	64	64	0		0	0
1,587	Housing Needs	1,173	1,173	1,233	60	3	0	0
111	Housing Strategy & Development	92	92	92	0		0	0
1,311	Residential Services	998	998	998	0		0	0
1,397		2,309	2,309	2,369	60		0	0
8,574	Strategic Support Services Concessionary Fares	8,776	8,776	8,776	0		0	0
728	Customer Services	542	542	542	0		0	0
1,300	Performance & Information	1,543	1,551	1,551	0		0	0
197	Quality Assurance	199	191	191	0		0	0
0	Transforming Social Care	0	0	0	0		0	0
10,799		11,060	11,060	11,060	0		0	0
			0	0-00-				
	TOTAL CONTROLLABLE FOR ADULTS AND CON	85,776	85,776	85,836	60		0	0
11,165	TOTAL NON CONTROLLABLE	1,381	6,931		0		0	0
9,775	TOTAL EXCLUDED RECHARGES	9,214	9,214	9,214	0		0	0
105,134	PORTFOLIO TOTAL	96,371	101,921	101,981	60		0	0

Reconciliation of latest approved budget

£'000

Original budget 2011/12

96,371

Supplementary estimate for capital accounting adjustment relating to Government Grants Deferred

Latest Approved Budget for 2011/12

5,550 101,921

NOTES AND EARLY WARNINGS

1. Assessment & Care Management - Older People's Domiciliary Care / Clients with Physical Disabilities

At the end of 2010/11 there was an overspend of £446k on residential and domiciliary care for older people. Although projections for the full year, based on activity at the end of March show that there is ongoing pressure on the domiciliary care budget, it is assumed that the savings of £300k from reablement, built into the 2011/12 budget will be achieved. It is anticipated that there will be reduced spend on residential and nursing placements, which along with the rigorous application of tighter eligibility criteria should keep spend within budget.

The outcome of reablement will be closely monitored during the year.

In 2010/11 there was an overspend of £352k on the budgets for residential, domiciliary care and direct payments for people with physical disabilities, due to increased demand. Ongoing pressure will continue in 2011/12 and funding of £600k has been allocated from the new Social Care and Health grant (S256 via the PCT) to cover the anticipated full year effect of the overspend.

2. Learning Disabilities Services

After taking into account the £1,239k received for growth and the full year effect of 2010/11 activity on residential and domiciliary care, expenditure in 2011/12 is expected to be within budget.

3. Housing Needs - Temporary Accommodation - £60k

Since the onset of the recession there has been a marked increase in the number of households presenting in housing need, particularly those faced with imminent homelessness. This is mainly due to rent and mortgage arrears and the loss of private rented sector accommodation. There has been an increase of 16% in numbers requiring temporary accommodation and an increase of 29% for B&B placements since December 2010.

There is also a reduction in the number of properties available for temporary accommodation and for bed and breakfast accommodation, where there is competition between other London boroughs for available units. This means an increase in the use of more expensive nightly paid accommodation and increased demand for accommodation.

As a result of the foregoing, a projected overspend of £60k is anticipated on the temporary accommodation budget, based on current and forecast placement numbers.

Officers continue to focus on preventing homelessness and diversion to alternative housing options and a number of initiatives are in place, or under consideration. The initiatives will not reduce the projected overspend, only contain it, but budgets will be monitored closely during the year and further updates given.

CARRY FORWARD REQUESTS	£	£	Appendix 2
Adults & Community Services			
4. Choice Based Lettings - contribution towards auto banding		15,000	
Grants that would not have to be repaid 5. Learning Disability Campus Reprovision Transitional Care Staffing (e.g. time limited night wakes) Client Furniture (means tested purchase plus Removals & Storage) Programme Related costs - Management & Legal & HR engagement Access workers & care management Costs associated with remaining Campus operation Respite reconfiguration - associated costs	81,893 27,500 126,300 38,400 176,200 8,500	458,793	
6. Housing Overcrowding Pathfinder Implement new Allocation System/contribution towards Hsg Register		92,517	
7. New Homelessness Maintenance and Extension of Money & Debt Advice Surgeries Houses in Multiple Occupation - Inspection & Regulation Tenancy Sustainment/Negotiator Incentives and Deposits to Landlords Introduction/Development of Incentive Schemes	15,000 10,000 40,000 40,000 45,000	g tr d s	Housing Benefit Migration Grant - When the grant was iven it was for the period up to March 2012 and was ne Coalition Government's offer to London Boroughs to leal with the negative effects of the reductions in HB to tave off the potential for more homelessness due to enants getting less HB.
8. Stroke Care Fund 2 Stroke Co-ordinators to work in care management teams to develop competencies in meeting needs of stroke patients being discharged from hospital. Fund contract with Stroke Association to provide support to families & carers of people with strokes. Contract ends Nov 2011	67,000 23,144	90,144	
Resources Contribution to Earmarked Reserves		-791,454	
NET TOTAL	<u> </u>	15,000	

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Report No. ACS 11039

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult and Community Services Performance Development

and Scrutiny Committee

Date: 26th July 2011

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

Title: ADVOCACY FOR ALL

Contact Officer: Carol Fletcher, Procurement Officer

Tel: 020 8461 7681 E-mail: carol.fletcher@bromley.gov.uk

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

Ward: Boroughwide

1. Reason for report

This report advises Members of the services commissioned from Advocacy for All to provide services to clients in the borough and of the cost of each contract. The report also details projects undertaken by Advocacy for All that are not funded by the London Borough of Bromley. Members requested this information at a previous Performance Development & Scrutiny Committee meeting. A representative of Advocacy for All will be attending the meeting to answer questions.

2. RECOMMENDATION

Members are asked to note the services commissioned from Advocacy for All.

Corporate Policy

- 1. Policy Status: N/A.
- 2. BBB Priority: Excellent Council. Supporting Independence

Financial

- 1. Cost of proposal: Estimated cost £177,100 per annum
- 2. Ongoing costs: Recurring cost. £177,100 per annu,
- 3. Budget head/performance centre: Learning Disability, Care Services Budget
- 4. Total current budget for this head: £119,000 plus contributions from Carers Grant and the PCT Reprovision Budget
- 5. Source of funding: Existing revenue budget 819 900 2006

Staff

- 1. Number of staff (current and additional): N/A Staff are employed by the contracted organisation to provide the Services concerned.
- 2. If from existing staff resources, number of staff hours: N/A

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): 350 approx. across all the projects.

Ward Councillor Views

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

3. COMMENTARY

Background:

- 3.1 Advocacy for All, formerly Bexley and Bromley Advocacy, was formed in 1995 as a citizen advocacy project for people with a learning disability. In 2005 they were the first organisation in England to start an advocacy project aimed at people with Autism and Asperger's Syndrome who live primarily in the London boroughs of Bexley and Bromley but also across other areas. Today Advocacy for All works with a diverse group of service users including people who may have learning disabilities, physical disabilities, sensory impairments and mental health issues and cover a variety of issues.
- The organisation is governed by a board of 9 trustees. They have 24 permanent members of staff and approx. 60 volunteers who undertake a variety of roles. All staff have enhanced Criminal Records Bureau disclosures and attend mandatory training courses including safeguarding.
- 3.3 Advocacy for All considers that the provision of "Advice, Information and Guidance" is very separate from advocacy. Their advocates are not support workers and believe that to be totally independent, the advocates must not have any other role in a person's life.
- 3.4 The organisation not only provides a number of projects solely in Bromley but also across boroughs. They have a proven track record of developing innovative projects for people with a learning disability and securing funding from a wide variety of funders.

LBB Funded Projects:

3.5 Advocacy for All have a robust monitoring system and this helps to ensure that all the projects funded by the London Borough of Bromley fully comply with the terms of the relevant contracts and that the services are only available to people funded by the Council unless the contract states otherwise.

Bromley Advocacy Worker:

- 3.6 This post was originally funded via Learning Disability Development fund monies but has been funded by Adult & Community Services since 2008/9. The contract requires the Advocacy Worker to provide short term crisis advocacy to service users referred to the service with a wide range of issues which are often complex and involve legal matters e.g. housing, safeguarding, benefit enquiries. The Advocacy Worker must ensure that the service provided is meaningful and appropriate for each individual service user and that any information given is provided in a format accessible for each user. In addition, the Advocacy Worker is expected to complete all relevant / requested reports, assist with risk assessments and obtain feedback from users of the service.
- 3.7 The latest monitoring information confirms that during the financial year 1.4.2010 to 31.3.2011, a total of 54 service users received support from the Advocacy Worker. With these 54 clients, the Advocacy Worker dealt with 95 issues, the majority of these related to housing (a total of 31) followed by behaviour (13) and disputes with services (10). At the end of the financial year 18 cases had been closed and 36 remained ongoing. The Advocacy Worker together with all Advocacy for All colleagues worked with the Council's Supporting Independence team to familiarise themselves with the personalisation agenda in Bromley to improve choice and opportunities for people with a learning disability living in Bromley.

Bromley Sparks:

- 3.8 The government's white papers "Valuing people" and "Our Health, Our Care, Our Say" underlined the role of voluntary sector organisations in providing independent advocacy and support for people who have a learning disability to ensure they are able to express their views and ensure that they are fully involved in decision making. This contract was set up to promote independence and achieve the outcomes of the white papers for people who do not meet the Council's Fair Access to Care (FAC) eligibility criteria. Under the terms of the contract, funding was made available to support Bromley Sparks to provide self advocacy groups which meet and undertake meaningful activities within the community, to support and socialise with each other and other local or national self advocacy groups and to provide representation on a number of forums, committees and sub-groups including the Learning Disability Partnership Board, Bromley LINk and the Disability Independent Advisory Group for the Metropolitan Police.
- 3.9 Bromley Sparks currently has a membership of approximately 120 members and run a number of groups within Sparks e.g. Committee; Independent Living; men's, women's & children's groups; easy read, news and office teams and healthy lifestyles. The easy read group provides paid work for people with a learning disability and produces easy read materials for the Council including partnership board minutes. The group have obtained additional funding from Trust for London, EXCEL Care and members raise money through their easy read work to pay for the rent on their own offices in Community House. They now provide a drop-in where people can share their concerns, experience and learn new skills.
- 3.10 In addition to the above during the financial year 2010-11, members of Bromley Sparks consulted on the new Bromley "MyLife" website, attended a Police consultation day at the Ripley Arts Centre, became involved in the planning the launch of "Speaking Up Together" incorporating the Sparks AGM, attended the social care charging consultation meeting run by Bromley LINk and Bromley Mencap, and the Easy Read team completed the easy read form for the social care charging consultation. Members have joined the Go4it exercise project and actively encourage people to independently access exercise as part of their daily routine.

Speaking Up Group:

- 3.11 This contract started in January 2007 and was aimed specifically at people returning to the borough or moving into supported living either from either the family home or residential care. The funding provides for the salary cost of one sessional worker who works for 12 hours per month & facilitates 2 meetings per month. The main objective of the group is to improve social networks for people with learning disabilities and promote community inclusion; and to help people gain in confidence & self esteem and become more independent and less reliant on statutory day services.
- 3.12 The group currently has a membership of 40 people. Members are able to voice their opinions and communicate these to relevant services and organisations. Members represent the group at the Bromley LINk learning Disability Task Group and Coordinating Group and the Partnership Board. The group is looking to increase its profile and has written a new action plan for the group with new ideas on how to promote the group. In addition, in conjunction with Bromley Sparks, members of the group are in the process of creating short sessions on self advocacy which they hope to deliver to other groups such as the Shaw Trust, Bromley College and Jobmatch. Members are also trying out new venues for social events to encourage members to travel to new places and develop new friendships as well as encouraging each other to host social events in their homes where space and consideration of other tenants allow.

Person Centred Planning (PCP) Co-ordinator:

3.13 Person Centred Planning (PCP) is an approach designed to assist people to plan their lives and support. It is used as a life planning model to enable individuals with disabilities or requiring support to increase their personal self-determination and improve their own independence. Person Centred Planning was adopted as government policy in the UK through the "Valuing People" White Paper in 2001 and the follow up to this Paper "Valuing People Now" in 2009. It is promoted as a key method for delivering the personalisation objectives of the governments "Putting People First" guidance for social care. The role of the PCP Co-ordinator is to:

- S Provide support directly to people with a learning disability
- s oversee the development and implementation of PCP's across all providers in the borough
- s ensure that PCPs are effectively co-ordinated
- s provide training to enable people to lead on completing their own PCPs
- § have a key role in monitoring outcomes of the PCP's and ensuring that they are progressed
- maintain recording systems to capture needs arising from individual PCP's and ensuring that the data is collated and utilised to inform future commissioning plans.

In addition, under the terms of the Agreement, Advocacy for All provide the following services:

- § Publicise and promote PCP's throughout the year
- S Provide representation on the Commissioning Programme Board
- S Provide office accommodation and management support for the Co-ordinator post.
- 3.14 The latest monitoring information from Advocacy for All (1st Jan 11 to 31st March 11) indicates that there are currently 83 person centred plans underway the majority of which relate to people within the PCT Re-provision programme. To date the PCP Co-ordinator has worked with service users and staff to complete 80 PCP's.
- 3.15 In addition Advocacy for All have developed 32 support plans for people who are currently living in or looking to move supported living schemes within Bromley.
- 3.16 The PCP Co-ordinator has also arranged PCP training courses. The numbers attended include 175 people completing PCP Awareness training and 75 people completing PCP Facilitator training. Attendees include representatives from Council departments, Bromley PCT, schools, private providers, family members, people with a learning disability and third sector providers. It has also been agreed with the Council's In-house service managers that the Co-ordinator would provide 1:1 support sessions for trained facilitators to run alongside team meetings and also to provide drop-in sessions with private support providers. However, monitoring information suggests that the take up of these facilities has been low within both groups.
- 3.17 The PCP Co-ordinator is currently exploring ways in which monitoring could be improved and undertaken to help inform future service provision within Bromley.

Bromley PCT Re-provision Advocacy Project:

- 3.18 This project was set up to provide an advocacy service for people moving from NHS residential accommodation to community based supporting living accommodation. Due to the complex disabilities of some of these clients and where they lack the capacity to make decisions around their move, the Project has been working with the Independent Mental Capacity Advocate. The Project provides advocacy services post move up to the service user's 6 monthly review.
- 3.19 **Young Advisors** funded by LBB on a consultancy basis (by Children and Young People Services)

3.20 This project provides training and support to a group of young disabled people to act as advisers to the Council, become fully involved in tendering processes, grant applications, recruitment and undertake consultation on respite, schools and other activities.

Non LBB Funded projects:

3.21 **Advocacy Services**: These are commissioned on an hourly rate by local authorities and provides an advocacy service for people who meet the relevant authorities FAC's criteria and who live within supported living or residential accommodation. A large part of the work includes supporting people through safeguarding adult procedures.

Advocacy for People with Autism and Asperger's Syndrome (Bromley/Bexley):

3.22 This project is funded via Three Guineas Trust and provides 1:1 advocacy for people with Autism and Asperger's in a way that meets their individual needs. The project aims to identify gaps in provision for people particularly those with Asperger's Syndrome who do not fit into any client group criteria and helps support people to access a diagnosis. The funding helps Advocacy for All ensure that people are receiving support in accordance with the Autism Act.

Outreach & Disabled Parents Project: (Bromley/Bexley)

3.23 This project is funded by Comic Relief and Mrs Smith and Mount Foundation. It supports parents with a learning, physical and / or sensory disability with their parenting skills and supports them through any safeguarding children and children in need procedures. The project provides funding for advocacy services to support people who do not meet FAC's criteria's. The aim of the funding is to reduce isolation and promote inclusion.

Young People's Advocacy Project: (Bromley / Bexley)

3.24 The project is funded by Children in Need and provides advocacy support for young people with a learning disability aged 14 plus and aims to ensure that their views are listened to as they face the transition into adulthood. The project also aims to encourage peer support for young people.

Speaking up Together: (Bexley / Bromley)

3.25 This project is funded by the Big Lottery and aims to bring together all speaking up groups to become a bigger voice for people with a learning disability both locally and nationally. In addition the project helps service users develop a website and promotes inclusion within the local community.

Bexley Speaking up Group:

3.26 The group is funded by LB Bexley and currently has a membership of approx. 42 members. The group aims to promote independence for people who do not meet the Council's FAC's criteria and improve confidence and self esteem. The group encourage peer support. All subjects for discussions are determined by members.

Speaking up in Schools: (Bromley/ Bexley)

3.27 The project is funded by individual schools and supports young people in 5 special needs schools to establish and run their own self advocacy groups and supports young people with a wide range of learning, physical and communication difficulties.

Relevant Persons Representative (RPR):

3.28 The project is funded by LB Bexley and provides funding for a relevant persons representative for people who have Deprivation of Liberty Orders under the Mental Capacity Act.

- 3.29 Advocacy for All also provide 2 different services currently funded by London Councils. Negotiations are currently taking place with the relevant Local Authorities relating to future funding of the projects.
 - 1) Self directed Support Advocacy for Disabled People: (Bromley / Bexley) currently funded until August 2011. The main activities of the project are to:

Support disabled people who need advocacy support to access benefit entitlements;

Promote the take up of direct payments & individualised budgets

Provide advocacy through the personalisation agenda.

2) Healthy Lifestyles for People with a Learning Disability: (Bromley / Bexley/ Greenwich / Croydon/ Merton/ Wandsworth). The key activities under the scope of this agreement are:

Developing and promoting a healthy lifestyle;

Work with statutory and voluntary agencies to promote health;

Support users to develop their project;

Monthly healthy lifestyle groups;

Buddying system to support people access mainstream sport & leisure facilities;

Providing support and information in an accessible way on health related issues;

Accessible website (www.advocate4health.org.uk).

4. POLICY IMPLICATIONS

The services provided by Advocacy for All are designed to meet the Council's objective to support independence, particularly for vulnerable people.

5. FINANCIAL IMPLICATIONS

The annual cost of the projects detailed in paragraphs 3.3 to 3.20 are detailed in the table below.

Project Name	Cost in 2011/12
Full Time Advocacy Worker	£47,703
Bromley Sparks	£20,000
Speaking Up Group	£20,246
PCP Co-ordinator Post	£51,049
Bromley PCT Re-provision Advocacy Project	£38,102
Total Cost per Annum	£177,100

6. LEGAL IMPLICATIONS

The government's white papers "Valuing people" and "Our Health, Our Care, Our Say" underlined the role of voluntary sector organisations in providing independent advocacy and support for people who have a learning disability to ensure they are able to express their views and ensure that they are fully involved in decision making. The contracts with Advocacy for All help the Council to fulfil its obligations to provide independent advocacy support to people with a learning disability.

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

Report No. ACS11038

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: ADULT & COMMUNITY POLICY DEVELOPMENT & SCRUTINY

COMMITTEE

Date: 26th July 2011

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

Title: BROMLEY SAFEGUARDING ADULTS BOARD ANNUAL

REPORT 2010/11

Contact Officer: Susannah Simpson, Adult Safeguarding Manager

Tel: 020 8461 7822 E-mail: susannah.simpson@bromley.gov.uk

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

Ward: Boroughwide

1. Reason for report

This report provides members with an overview of the main issues raised from the Bromley Safeguarding Adults Board (BSAB) annual report (**Appendix 1**). The BSAB annual report outlines the work of the Board including oversight of joint action to safeguard adults.

2. RECOMMENDATION(S)

PDS Committee Members are asked to:

1. Comment on the contents of the Bromley Safeguarding Adults Board Annual Report 2010/11.

Corporate Policy

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

Financial

- 1. Cost of proposal: No cost
- 2. Ongoing costs: Recurring cost.
- 3. Budget head/performance centre: Aileen Stamate Quality Assurance Manager, Strategy & Performance
- 4. Total current budget for this head: £BSAB funding comes from the partner organisations and is deployed on objectives set by the BSAB. LBB will contribute £19K to the BSAB budget for 2011/12. BSAB services receive support from the Adult Safeguarding Manager (jointly funded by LBB and the PCT), and support staff The cost of staffing to LBB for this service totals £95K
- 5. Source of funding: The cost of BSAB work is contained within current allocated LBB budgets and commitments from partner organisations agreed for 2011/12.

<u>Staff</u>

- 1. Number of staff (current and additional): 2.75 FTE allocated to strategic support for safeguarding adults in Bromley;
- 2. If from existing staff resources, number of staff hours: 99 per week

Legal

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

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 523 safeguarding referrals investigated under the adult safeguarding procedures during 2010/11.

Ward Councillor Views

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

3. COMMENTARY

- 3.1 The Bromley Safeguarding Adults Board (BSAB) has been responsible since 2008 for the coordination and development of work to safeguard vulnerable adults from abuse and neglect in accordance with Department of Health guidance "No Secrets". The local authority is required to act as 'lead agency', holding partner agencies accountable, whilst emphasising the responsibility of all agencies to work in partnership to plan, implement and monitor adult safeguarding work.
- 3.2 The recent "Statement of Government Policy on Adult Safeguarding" (May 2011), confirms that following public consultation on "No Secrets" and the recommendations of the "Review of Adult Social care Law" by the Law Commission (May 2011), the government intends to seek to legislate for Safeguarding Adults Boards, making existing Boards statutory. BSAB welcomes this development as well as the promotion of personalised services and outcomes presented in the Government's "A Vision for Adult Social Care; Capable Communities and Active Citizens". In line with these developments, BSAB is committed to ensuring that services offer safety and choice and emphasise that people should be protected when unable to protect themselves, but this should not be at the cost of peoples' rights to make decisions about how they live their lives.
- 3.3 The BSAB Annual report gives an overview of the work undertaken by the Board to raise awareness of adult safeguarding, drive improvements in multi-agency work and learn from experience to improve outcomes for service users.
- 3.4 Since 2008 adult safeguarding referrals have increased as a result of awareness raising and the development of performance standards by the Board. Adult safeguarding referrals increased 18 % from 443 in 2009/10 to 523 in 2010/11; fortunately, only a very small number of concerns were serious, making it crucial that the limited resources of all agencies are coordinated and used effectively to manage significant risks. Abuse was substantiated or partially substantiated in 174 (40%) instances which is in line with other local authorities.
- 3.5 The Metropolitan Police in Bromley are fully engaged in the work of the Board and now have a dedicated resource to respond to crime against vulnerable people. There has been a significant increase in the number of adult safeguarding cases where there has been police involvement. The increase has been from 43 cases in 2009/10 to 106 cases in 2010/11.
- 3.6 BSAB recognises the importance of all partners in the protection of people in vulnerable situations and during the year welcomed the London Fire Service as a partner on the Board. Following a house fire in Bromley involving a vulnerable person, BSAB worked with the Borough Fire Commander through training for health and social care staff in identifying fire risks. A referral system has also been developed and this has resulted in 132 vulnerable people benefiting from home safety visits from London Fire Service.
- 3.7 BSAB holds all partners accountable for their safeguarding work and last year received from South London Healthcare NHS trust details of progress on the implementation of the action plan to improve staff awareness of adult safeguarding following the Care Quality Commission report of the September 2010 unannounced visit. By April 2011 63% of Trust front line staff had achieved competence in recognising and reporting abuse.
- 3.8 During 2010/11 BSAB were pleased to receive evidence from an external review which states that the work of the Board is effective in preventing abuse and ensuring that when concerns arise they are dealt with appropriately. In line with this, in November 2010 the Care Quality Commission rated adult safeguarding services in Bromley as "performing well".

3.9 Since the external review BSAB have directed further developments including:

The implementation of the Adult Safeguarding Prevention Strategy 2011-14, developed with the involvement of service users and informal carers. The objectives of the prevention strategy will be used to drive the Board's work over the next three years. These are: to further improve awareness about how to spot the signs of abuse and when to report it to the lead agency; to ensure all services that are commissioned, regulated or accredited by BSAB partners adhere to the highest standards of safety for service users; to promote consistent safeguarding practice across agencies, underpinned by robust performance information and quality assurance systems; to support vulnerable adults to maximise their independence and quality of life by encouraging them to take control of their situation and to safeguard vulnerable adults who may lack the ability to make a decision that will safeguard themselves or others from harm.

The implementation of a comprehensive training strategy to help partners ensure all staff and volunteers in the Bromley health and social care workforce can deliver their safeguarding role effectively. The strategy is underpinned by the Board's competence framework which specifies the knowledge and skills required by staff. Staff are expected to prevent abuse through respect for individual rights and personal dignity; recognise and report abuse and understand whistle blowing. 789 staff from across the partnership received this training. The Board requires all adult safeguarding investigations to be undertaken by staff with the correct skill levels; during 2010/11, performance monitoring confirmed this has been achieved for 100% of investigations. In order to continue to achieve this standard, 69 staff were trained in adult safeguarding investigations and additional 36 staff were trained in interviewing vulnerable service users.

The first BSAB annual conference in June 2010, with the theme 'Prevention through Partnership'. The conference, attended by 127 people across partner organisations, aimed to improve outcomes for vulnerable people by enhancing knowledge of services available including Safer Bromley Partnership initiatives. The conference was very positively evaluated by delegates. BSAB will hold a further conference in September 2011.

3.10 The full BSAB 2011/12 work plan is at Appendix 1 of the annual report. The Board's priorities for 2011/12 are to:

Implement 'Safeguarding adults in London, Policy and Procedures' across the Bromley adult safeguarding partnership in June 2011;

Commission an external agency to maximise the collection of feedback from service users and their advocates, about their experience of the safeguarding process to develop actions to make further improvements to practice and

Audit health and social care settings to ensure awareness.

Ensure awareness and compliance with the principles of the Mental Capacity Act 2005 Deprivation of Liberty Safeguards.

The Board will also review our alert, referral and triage arrangements to ensure that safeguarding resources are used to greatest effect.

Members should note a guide to the scrutiny of adult safeguarding has been produced by I&DeA (Implementation and Development Agency). Members Scrutiny Guide

FINANCIAL IMPLICATIONS

None.

Non-Applicable Sections:	Policy, legal, personnel
Background Documents: (Access via Contact	No Secrets
Officer)	Statement of Government Policy on Adult Safeguarding
	Adult Social Care Law Report
	Adult Social Care, Capable Communities and Active Citizens

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Bromley Safeguarding Adults Board

Annual Report

2010/2011

Bromley is a place where adult safeguarding is everybody's business







FOREWORD

Terry Rich, Chair of Bromley Safeguarding Adults Board

Welcome to the 3rd Bromley Safeguarding Adults Board (BSAB) Annual Report.

This year, the Board has overseen the response of local agencies to over 500 concerns about the potential ill treatment of vulnerable people in Bromley. Fortunately, only a very small proportion of concerns involve serious abuse of vulnerable people; this makes it crucial that agencies work together to make a proportionate response and deploy resources efficiently.

We are pleased to have received evidence from an external review which states that the work of the Board is effective in preventing abuse and ensuring that when concerns arise they are dealt with appropriately.

With the input of service users and informal carers, the Board has produced a new BSAB Preventative Strategy 2011-14, which promotes the message 'Bromley is a place where adult safeguarding is everybody's business'. The strategy will drive our work plan and answer the challenge of keeping vulnerable people safe, whilst also respecting their right to make their own decisions.

The Board recognises the importance of all partners in the protection of vulnerable people, so is pleased to welcome the London Fire Brigade as a BSAB partner this year. The Metropolitan Police in Bromley are fully engaged in the work of the Board, and now have a dedicated resource to respond to crime against vulnerable people.

The Board holds local partners accountable for their safeguarding work and ensures that when concerns are raised there is robust action to achieve improvement. The Board has received from South London Healthcare NHS Trust details of progress on the implementation of the action plan to improve staff awareness of adult safeguarding following the Care Quality Commission report of the September 2010 unannounced visit.

The Board will be adopting new London-wide adult safeguarding procedures in June 2011, which we believe will further contribute to the development of consistent safeguarding practice. We will need to continue to be mindful of using our resources to best effect, ensuring that we focus on significant risks, where our intervention is required to assure the safety vulnerable adults.

I hope you will find this report useful, and work with the Board to maintain an excellent adult safeguarding service in Bromley.

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1. Adult Safeguarding Arrangements in Bromley

Introduction

Bromley Safeguarding Adults Board (BSAB) has been responsible since 2008 for the local development and coordination of work to safeguard vulnerable adults in accordance with government guidance ('No Secrets', Department of Health, 2000). For the benefit of the Board's partner organisations and the general public, this report explains how agencies have worked together in Bromley during the past year to improve the safety of vulnerable people.

The 'Statement of Government Policy on Adult Safeguarding', (*Department of Health, May 2011*), confirms that following the public consultation on 'No Secrets' during 2008/9 and the review of adult social care law (*Law Commission, May 2011*), the government intends to seek to legislate for Safeguarding Adults Boards. BSAB fully supports this proposal which would further reassure the local community that agencies are accountable for their work to protect vulnerable adults.

The Board has welcomed 'A Vision for Adult Social Care: capable communities and active citizens', (*Department of Health, November 2010*), which promotes personalised services and outcomes. BSAB continues to emphasise that people should be protected when they are unable to protect themselves, but this should not be at the cost of a person's right to make decisions about how they live their life.

Report Summary

The report explains the Board's role and governance, highlighting key BSAB achievements:

- Confirmation, through external review, that Bromley has performed 'well' in adult safeguarding, with improved operational and strategic arrangements
- Development of BSAB Prevention Strategy 2011-14
- Action to reduce the risk of fire for vulnerable people
- The first BSAB conference with the theme 'prevention through partnership'
- Delivery of a comprehensive adult safeguarding training programme

There is an account of the Board's continued strategic and operational development in:

- Performance management
- Quality assurance and lessons learnt
- Awareness raising
- Inter-agency protocols and procedures
- Mental Capacity Act Deprivation of Liberty Safeguards

The report includes:

Safer Bromley Partnership achievements that contribute to adult safeguarding



- Safeguarding adults referral and outcome data analysis
- BSAB work plan 2011/12
- BSAB financial statement 2010/11

Bromley Safeguarding Adults Board (BSAB)

As lead agency for adult safeguarding, Bromley Council is required to ensure that all local agencies work together as partners to jointly plan, implement and monitor work to protect vulnerable adults. The Board holds all agencies to account and ensures when concerns arise, (for example as a result of external inspection), about the quality of a service or the level of staff awareness of adult safeguarding, regular reports are received on the implementation of action plans. The Board, chaired by Mr Terry Rich Director of Bromley Council Adult and Community Services, met three times during 2010/11. Membership is reviewed annually so representation of all key agencies and groups advocating for service users and their informal carers is ensured.

The Board has an executive which met five times in 2010/11, membership is senior managers from:

- Bromley Primary Care NHS Trust
- South London Healthcare NHS Trust
- Oxleas NHS Foundation Trust
- The London Borough of Bromley Adult and Community Services Division
- Metropolitan Police Service Bromley Borough

The chairs of the Board's sub groups are also members of the executive, which is responsible for driving strategic aims and overseeing the achievement of the BSAB work plan.

Board sub groups coordinate and undertake specific tasks from the work plan and address emerging priorities identified by the Board; the sub groups are:

- Training and Awareness
- Policy, Procedures and Protocols
- Performance, Audit and Quality
- Mental Capacity Local Implementation Network

Board accountability and governance: Oversight of the work of the Board is provided by the portfolio holder and Councillor Roger Charsley, Adult and Community Services Policy Development and Scrutiny Committee. BSAB annual reports are presented to the Bromley Council Adult and Community Policy Development and Scrutiny Committee, the Bromley Council Public Protection and Safety Policy Development and Scrutiny Committee and the Health, Social Care and Housing Partnership Board.



Support to the Board: Bromley Council, with a contribution from Bromley Primary Care Trust, provides dedicated officer capacity to support the Board in strategic development, professional advice, work plan delivery and the administration of its work. The close integration of all Bromley statutory partners in adult safeguarding work is demonstrated by the joint contributions made to the BSAB budget. This is used to promote the Board's objectives across the Borough through publicity, production of multi-agency procedures and training in the skills and knowledge required to meet the Board's safeguarding competences. The BSAB financial statement is attached. (Appendix 2)

More information about BSAB can be found at: www.bromley.gov.uk/adultsafeguarding

2. Bromley Safeguarding Adults Board key achievements 2010/11

Confirmation, through external review, of improved operational and strategic adult safeguarding arrangements

During 2010/11, BSAB commissioned an independent review, from the Government Office for London, to validate the impact on practice standards of the Board's improvement planning framework.

The review included:

- Interviews with the portfolio holder, senior managers in Adult and Community Services, BSAB partners and adult safeguarding specialists to evaluate engagement and responsibilities within the safeguarding arena
- Assessment of strategic business and policy documents
- Overview of performance management and quality assurance systems and the analysis and use of data collected
- Evaluation of the performance of BSAB to determine its effectiveness in driving strategic planning, robust partnership engagement and promoting continuous development in adult safeguarding
- Audit of ten recent adult safeguarding cases
- Examination of BSAB adult safeguarding competences and the training programme
- Five events, for thirty staff, to clarify practitioner understanding and staff opinion on the quality of training, inter-agency work and professional support.

The conclusion of the independent review was: 'quality assurance and performance monitoring processes were robust and effective in driving improvement.'

Key areas of strength were highlighted:

- Significant progress in safeguarding, both strategically and operationally; increasingly robust interface between the two
- Increasingly effective quality assurance systems
- Stronger partner engagement on Bromley Safeguarding Adults Board
- Emerging performance management culture across the partnership
- Enhanced police engagement and performance at operational level
- Consistency of safeguarding practice is improving
- Frontline staff feel well supported by line managers/safeguarding specialists
- Training is consistent, regular and valued by frontline staff
- Shared/good understanding of principles underpinning safeguarding practice

The last Care Quality Commission rating of the adult safeguarding service, in December 2010, reported Bromley was performing 'well'. (Bromley: Annual performance assessment 2009/10, Care Quality Commission Dec 2010).



Development of BSAB Prevention Strategy 2011-14

The Board has produced a new BSAB Safeguarding Adults Prevention Strategy 2011-2014'. Six events were held with service users and informal carers and there was consultation with partner organisations in its development. BSAB has a vision:

'Bromley is place where preventing abuse and neglect is everybody's business.'

The Board's mission is to:

- Promote a well informed local community that will act as 'good neighbours', notice signs of abuse or neglect and report
- Ensure quality services are commissioned, regulated and accredited that provide well trained staff and can ensure vulnerable adults are safeguarded
- Ensure that everyone receives a consistent, high quality safeguarding service which is robustly managed and outcome focused, underpinned by multi-agency cooperation and continual learning

The objectives of the prevention strategy will be used to drive the Board's work over the next three years. These are:

- Awareness: continue to improve awareness about how to spot the signs of abuse and when to report it to the lead agency.
- Services: ensure all services that are commissioned, regulated or accredited by the BSAB partners adhere to the highest standards of safety for service users.
- Practice: continue to promote consistent safeguarding practice across agencies, underpinned by robust quality assurance and scrutiny mechanisms and reliable, timely performance information.
- Choice: continue to support vulnerable adults to maximise their independence and quality of life by encouraging them to take control of their situation, including positive risk taking.
- Capacity: continue to safeguard vulnerable adults who may lack the ability to make decisions that will safeguard themselves or others.

The Board has used these objectives to plan work for 2011/12. (See Appendix 1, BSAB work plan 2011/12).

Reducing the risk of fire for vulnerable people

Following a local house fire involving a vulnerable person receiving a domiciliary care service, the Borough Fire Commander and the Board agreed action was required to ensure health and social care staff were aware of fire



risks, such as smoking in bed and the added risk of fire to vulnerable people with disabilities, or those who have a very cluttered home.

As a result, the Board welcomed the London Fire Service as a partner and, in addition, arranged training for 65 health and social care staff in identifying fire risks and ensuring a referral system for vulnerable people. This has resulted in 132 vulnerable people benefiting from priority home safety visits.

The first BSAB annual conference

The Board organised the first BSAB annual conference, with the theme 'Protection through Partnership', in June 2010. The conference, attended by 127 people across partner organisations, aimed to improve outcomes for vulnerable people by enhancing delegates' knowledge of local services, including Safer Bromley Partnership initiatives. The BSAB Chair introduced expert speakers covering the national perspective on adult safeguarding, the Bromley Metropolitan Police Service response to abuse and how users of personalised services from Supporting Independence in Bromley initiatives will be safeguarded. In addition, there were workshops to exchange information on:

- Effective responses to domestic violence
- Self-neglect when should we intervene?
- Protection from rogue traders
- Safeguarding vulnerable adults from financial abuse

The conference was very positively evaluated by delegates. 100% of respondents said that they would recommend the conference to others and it had met their objectives in attending the conference. BSAB will hold a further conference in September 2011.

Delivery of BSAB training programme

The Board has a comprehensive training strategy to help partners ensure all staff and volunteers in the Bromley health and social care workforce are able to deliver their safeguarding role effectively. The strategy is underpinned by the BSAB competence framework. This specifies the skills and knowledge required by staff to prevent abuse, such as respect for individual rights and personal dignity, to recognise and report abuse, to investigate abuse and manage adult safeguarding work. Courses are evaluated and quality monitored; when necessary changes have been implemented to improve the delivery of appropriate skills and knowledge.

In 2010/11, multi-agency training was commissioned on a quarterly basis and adjusted during the year to reflect identified training needs. There was targeted marketing of training opportunities to partner agencies and in-house staff.

Courses delivered during 2010/11 included:

 Financial Abuse prevention and detection. This course was commissioned and provided in 2010/11 to 18 staff from the BSAB partnership (including 6 police officers) in response to prevalence data. Staff who have completed



the course will advise team colleagues on investigation and protection planning in cases where financial abuse is alleged.

- Level 1: skills and knowledge of abuse prevention, recognising abuse and reporting abuse. 789 staff received this training. This course included staff duty to report abuse, including whistle-blowing, the majority of participants were from private and voluntary care homes.
- Level 2 /3: skills and knowledge of the safeguarding process including multi agency strategy, investigation, risk assessment, protection planning and review. For the 69 staff who received this training, this course assisted them to achieve BSAB competence in adult safeguarding case work and case management. The Board requires that all adult safeguarding investigations are undertaken by staff with the appropriate skills and level of competence; performance monitoring has confirmed this has been achieved for 100% of investigations.
- Level 4: skills and knowledge in interviewing vulnerable service users and achieving best evidence processes. This specialist course gave staff the opportunity to develop skills in interviewing service users who have communication problems. There were 36 staff who received this training.
- Level 5: skills and knowledge for managers of staff undertaking safeguarding investigations. This course ensured that managers are competent in supervising and supporting staff undertaking adult safeguarding work; 9 staff received this training.

Partners have reported to the Board their progress in implementing their training plans for staff and volunteers:

- Oxleas NHS Foundation Trust undertook an audit in 2010 to gauge the level of adult safeguarding awareness amongst clinical staff; it showed that 70% of staff in community settings, and 89% of staff in in-patient settings reported they had a good level of understanding of adult safeguarding and how to raise an alert. Staff in Oxleas NHS Foundation Trust use an elearning package to achieve competence in awareness and the Trust has achieved a 74% take up rate in Bromley by relevant staff.
- South London Healthcare NHS Trust has developed a rigorous plan to ensure that staff across their sites are aware of adult safeguarding issues.
 By April 2011 63% of front line staff had achieved competence in recognising and reporting abuse.
- Bromley Primary Care Trust has established a community provider unit which will operate from April 2011 as Bromley Healthcare. Staff in Bromley Healthcare will be well placed to recognise abuse and neglect with 89% achieving this level of competence.

The BSAB competence framework has been reviewed for the commissioning of the 2011/12 safeguarding training programme to take account of the changes in the delivery of social care. New Personalisation and Risk workshops for the social care workforce will be delivered in 2011/12.



A project has taken place to evaluate e-learning products and procurement methods, in terms of value for money. Three products have been selected for detailed evaluation and feedback. The preferred model will be demonstrated to the care home and domiciliary care agency provider forums in June 2011, with the aim of recruiting selected providers to undertake pilots, to confirm that it will achieve staff competence as effectively as face-to-face training.

During the year, there have been specific training events, some of which are listed below:

- Five adult safeguarding awareness sessions delivered by adult safeguarding specialists for Police Rapid Response Teams covering over 150 officers
- Eight team briefings for 95 staff undertaking safeguarding investigations were held on the lessons learnt from adult safeguarding audits, and actions required to improve practice
- An adult safeguarding information stand was provided at the Supporting Independence in Bromley Adult Information Day, 29th September 2010
- Forty day activities staff, working with people with learning disabilities, were briefed on adult safeguarding and preventing doorstep crime



3. Strategic and operational developments

Performance management and quality assurance:

BSAB has continued to drive improvement through its performance management and quality assurance framework.

Performance Management:

The Board has considered which areas of performance are most likely to improve outcomes for service users. It decided to continue to use its current inter-agency performance indicators as outlined below, which ensure a prompt multi-agency plan to investigate concerns, and a rapid response from the Metropolitan Police Service to requests for advice from safeguarding professionals.

- The Board set an increased target of 90% for a multi-agency strategy discussion or meeting occurring within 5 working days of referral in 2010/11. (The 2009/10 target was 65%). The target is important in ensuring consistent early planning of the conduct of an investigation, including consideration of police involvement in the case. Monitoring of this target within Adult and Community Services has driven improved performance in this area to an average of 87% cases in 2010/11.
- BSAB has an inter-agency protocol which states there will be a response within 3 working days by Metropolitan Police Bromley Public Protection desk, to requests for advice from safeguarding professionals. This response time was set by the Board to ensure a clear standard for this key area of in inter-agency work. Monitoring by the Bromley Police Public Protection desk has ensured that health and social care professionals receive an appropriate and timely response to requests for advice. This target has been consistently achieved in respect of the 65 cases referred by adult safeguarding professionals during the year.
- The Board has a competence framework to ensure that staff have the skills and knowledge required to undertake safeguarding tasks. It monitors investigations and ensured during 2010/11 that 100% were undertaken by staff who met the required BSAB competence standard.

Quality Assurance

BSAB seeks to guarantee service quality both in preventative work and in safeguarding investigations. BSAB has a quality assurance framework, including case work audits and is proactive in responding to new issues as they arise. Learning from case reviews is used to make local improvements to inter-agency work.

Safeguarding casework audits - The Board oversees a programme of safeguarding casework audits to monitor and develop safeguarding practice. Detailed reports are presented to the Performance, Audit and Quality sub



group. During 2010/11 three adult safeguarding audits have been held covering a total of 35 cases. Safeguarding cases were selected at random from recently completed cases and examined by professionals not involved in the conduct of the case. Performance was assessed against standards derived from BSAB multi-agency procedures covering all stages of the safeguarding process, the quality of multi-agency work and the outcome for the service user.

A peer audit was held in conjunction with Greenwich Council, which provided the opportunity to learn from the comparison of casework practice across both boroughs.

Casework audits routinely consider whether the appropriate services have been offered to service users. Bromley has a good range of services to support vulnerable service users, including projects such as the Safer Bromley Van and the Domestic Violence One Stop Shop.

Findings from 2010/11 safeguarding audits show that Bromley partners have ensured improvement in practice in terms of record keeping and compliance with Board multi-agency procedures.

The audits have identified more consistent practice: this was measured by an increase in the appropriate involvement of independent advocates from 67% in the May audit to 83% in the August audit. Cases examined demonstrated consistency of practice through the high level, (over 80%), of cases where there was involvement from Consultant Lead Practitioners, who act as safeguarding specialists.

The external review of adult safeguarding included a detailed examination of 10 cases. The review confirmed the improvement in safeguarding practice already identified through the BSAB audit process.

Two main areas for improving the conduct of safeguarding cases have been identified:

- Ensuring there is always consideration of the benefits of involving an independent advocate in safeguarding cases
- Ensuring that when appropriate the service user's mental capacity and decision making ability is recorded

Safeguarding professionals have received additional guidance on these issues and these key messages will be reinforced through training.

Professionals have a procedure to use if there are problems with inter-agency work and the opportunity to directly raise issues of concern to the Board through a practitioner representative on the Board.

Safe services - The Board received regular reports from the Adult Safeguarding Manager, who leads a multi-agency group co-ordinating action to ensure the safety of care homes and nursing homes. The group met five



times during 2010/11. Action was taken under adult safeguarding procedures to ensure the safety of residents in one establishment. Where issues are identified in safeguarding investigations that require providers to implement action to make improvements this is overseen by the commissioning team.

As the lead commissioner of domiciliary care and care home provision, the Council has a quality assurance framework for providers to ensure the dignity and safety of service users. Monitoring visits have take place throughout the year based on size of contract and risk-rating.

Provider Forums are supported to promote good practice and plan local training activities. The care home forum has an annual work plan which focussed in 2010/11 on training staff to improve the experience of users being admitted and discharged from hospital, moving and handling, and the provision of activities for people with dementia.

The Metropolitan Police Vulnerable Adults Officer has attended the Domiciliary Care Provider Forum following difficulties in obtaining clear evidence when there had been allegations of crime, to explain the importance of accurate record keeping by domiciliary care agency staff to assist police with gathering accurate information.

The Board has received a report from South London Healthcare NHS Trust, on action taken to address moderate concerns in respect of adult safeguarding awareness amongst staff reported by the CQC (following the unannounced visit to hospital sites in September 2010).

Service User Perspective - In 2009 the Board developed a process to identify service users who may be able to give feedback on their experience of the adult safeguarding process. The Board has received information from six service users.

Concerns were identified by two service users:

- 'I was not informed after the meeting which is something that could be done better'
- 'I was not informed about what was going on'

Staff who undertake safeguarding investigations have been reminded of the importance of clear and timely communication with service users in team briefings.

An external agency will be commissioned in 2011/12 to systematically obtain independent feedback from service users which will be used to drive improvements.

Service users have also reported positive experiences:

• Safety was managed very well, Police were involved and this helped a lot



- I felt much safer having spoken to someone apart from my daughter about the situation
- The care manager listened to my views and worked hard to get things done quickly

Learning from case review and actions to make improvements

The Board has been proactive in responding to emerging issues in order to develop safeguarding practice. Examples of how Bromley developments to multi-agency adult safeguarding have been driven by the Board's analysis of local inter-agency issues include:

- Following the collapse of a criminal trial, the Board ensured a case review involving a voluntary agency, the Metropolitan Police Service, Adult and Community Services and the Crown Prosecution Service. The case concerned a paid carer who had allegedly stolen from a vulnerable person with dementia. The review identified that the alleged victim's memory problems had not been fully taken into account in preparation for the trial. As a consequence, the Metropolitan Police Service has reviewed their investigation teams and has established a Vulnerable Adults Team which will operate in Bromley from April 2011. This will supplement the single point of contact for adult safeguarding issues and provide a more skilled and dedicated team to investigate allegations of crime.
- The Board received a report on 22 cases where the London Ambulance Service had raised a concern about the lack of support for a service user, but following an agreed protocol, safeguarding procedures were not invoked because there was no clear allegation of abuse or neglect. In all instances there had been an appropriate multi-agency assessment of the individual's needs and where necessary a support plan had been arranged. The Board was reassured that vulnerable service users who did not meet the safeguarding threshold were receiving appropriate support.
- A safeguarding investigation in a nursing home found that the home should improve the process for obtaining specialist advice on nutrition. The Bromley PCT Dietician service agreed to arrange training sessions in the home to improve practice in this area.

The Board received regular feedback from practitioners on the progress of inter-agency work, examples included:

- A practitioner reported a case to the Board where Adult and Community Services, staff from a private domiciliary care agency and the Metropolitan Police Service had worked effectively to prevent further abuse of a vulnerable older person by her ex-partner.
- A case manager reported a case of potential serious self neglect where the London Ambulance Service had raised concerns about a person who appeared to be in poor health and was refusing to go to hospital. Adult and Community Services worked with the Metropolitan Police Safer



Neighbourhood team to ensure the cooperation of the individual and his admission to hospital for treatment.

 Ten cases have been presented by adult safeguarding professionals to the Performance Audit and Quality sub group to explain inter-agency safeguarding practice and to highlight cases where there were lessons to be learned. Practitioners have reported on the use of a risk assessment tool which has proved to be effective in the small number of cases where there are on-gong risks of abuse or neglect.

Raising awareness of adult safeguarding

The BSAB 2008-11 Strategy had clear objectives in terms of raising awareness of abuse and neglect and how to report it across the general public, vulnerable people and staff and volunteers.

The Board has continued to implement its communication and engagement strategy to promote awareness of abuse and how to report it. The Board's new preventative strategy 2011-14 promotes the message:

'Bromley is a place where preventing abuse and neglect is everybody's business'

All partners share a responsibility to make sure service users and the wider community are well informed. The BSAB Newsletter has extended its distribution through Community Links to smaller voluntary organisations and community groups during 2010/11. The Board has begun to use the Community Links Newsletter as an additional means of publicising its work.

Three talks have been given to community groups about how to recognise and report adult safeguarding concerns. These emphasised the importance of speaking to a trusted friend or community leader and explaining how referrals can be made. Talks were given to:

- Crystal Palace Oasis Club
- Bromley Asian cultural association
- Orpington Chinese association

Inter-agency Protocols and Procedures

The Board had an objective in its 2008-11 strategy to develop safeguarding policies, protocols and procedures and ensure that these are updated in line with national guidance, new London wide guidance, new legislation and learning from case reviews and audit.

The Board's Policy, Procedures and Protocols sub group has ensured delivery of this area of the BSAB work plan. In 2010/11, the sub group has contributed to and commented on the development of ten new or revised local policies and protocols which support effective partnership working to safeguard adults at risk:. Work has included:



- Development, with Supporting Independence in Bromley, of the 'Positive Risk Taking Policy', which was approved by BSAB in May 2011, and will be used to ensure service users arranging and purchasing their own care are safeguarded.
- Response to drafts of 'Protecting Adults at Risk: London multi-agency policy and procedures to safeguard adults at risk'.
- Production of a 'gap analysis' and oversight of update of local multi-agency 'toolkit' in preparation for the implementation of these procedures in June 2011.
- Advice on the development of the adult safeguarding procedures of two local voluntary organisations, Carers Bromley and Issues of the Heart and two housing associations: Affinity Sutton and Keniston. These procedures were then approved by the group.
- Developed a protocol to ensure any problems between agencies are flagged to managers for resolution and escalated to the Board if necessary. (It has not been necessary to invoke this protocol in 2010/11.)

Mental Capacity Act - Deprivation of Liberty Safeguards

The Board oversees the implementation of multi-agency work to ensure that people who may lack mental capacity benefit from the safeguards provided by the Mental Capacity Act 2005 and the Deprivation of Liberty safeguards (DOLS).

The Mental Capacity Act 2005 sets out the framework to enable professional care staff, health service staff and families to lawfully make decisions on behalf of vulnerable adults who are unable to do so. All such decisions have to be taken in the individual's best interests.

The Deprivation of Liberty safeguards (DOLS) came into force during 2009. These legal safeguards cover individuals lacking capacity to make particular decisions who are in a .care home or hospital. DOLS should be used when the care and treatment regime of an individual imposes such excessive restrictions on them, that they amount to a 'deprivation of liberty', in accordance with Human Rights legislation.

The process in Bromley for Deprivation of Liberty Safeguarding is robust with the officer for Deprivation of Liberty Safeguards and Mental Capacity, who has been in post since 2008, providing continuity of service, a valuable point of contact as well as an important monitoring role.

Activity on Deprivation of Liberty Safeguards referrals is submitted quarterly to the Department of Health. Comparison with neighbouring boroughs are shown in detail below.



Deprivation of Liberty Safeguards Referrals comparison with near neighbours for 2010/11

	Referrals
Bromley	10
Greenwich	13
Lewisham	8
Lambeth	47
Bexley	68

The Department of Health has questioned the comparatively low number of DOLS referrals in Bromley. The Board has received details of work undertaken to ensure legal responsibilities were being discharged, as follows:

- All new contracts issued for residential support detail the expectations of the Council on the provider around the legislation. The Care Homes forum has been used to disseminate information.
- Work has also been undertaken to review the possible reasons for lower DOLS activity levels in Bromley. In early 2009, all the care homes and hospitals in Bromley were visited, or managers seen by the officer for Deprivation of Liberty Safeguards and Mental Capacity, to explain imminent implementation of DOLS procedures. This identified the possible numbers of people to whom the DOLS may apply, which returned substantially lower numbers than the Department of Health estimates.
- Contact with care homes has been maintained: a survey of care homes regarding training needs was carried out; as a result some homes have been visited to provide Mental Capacity Act and DOLS training on site. The officer for Deprivation of Liberty Safeguards and Mental Capacity has spoken to and visited colleagues in other boroughs to carry out case comparisons, and has confirmed practice in Bromley is consistent with other areas.

Given the above, it is probable that provider staff are addressing aspects of the care regime which could contribute to a situation where an individual would be deprived of their liberty. The officer for Deprivation of Liberty Safeguards and Mental Capacity continues to visit individual hospitals and care homes to monitor the implementation of this legislation.

In January 2011, the number of DOLS referrals and approvals increased, partly due to ongoing work in raising awareness, and partly a natural fluctuation of activity which has been seen in other London Boroughs. Currently, there are four Bromley service users subject to Deprivation of Liberty Safeguards.



Bromley Deprivation of Liberty Referrals and Authorisations

Quarter	Referrals	Authorisations
Apr -Jun 10	4	0
July-Oct 10	1	0
Oct-Dec 10	2	2
Jan 11– to date	3	3
TOTAL	10	5

The Board has planned an audit during 2011/12 to gain information on the understanding of mental capacity issues and DOLS across a selection of health and social care settings. The audit findings will be used to make recommendations about further local work.

Training on the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards

The Board oversees a training strategy for health and social care staff to ensure:

- All staff can demonstrate compliance with the principles of the Mental Capacity Act (MCA), when working with people who may lack capacity
- Staff making decisions about long term care or serious health treatment understand their duties under the Act
- Staff can recognise and report potential deprivations of liberty
- Staff understand how to assess and document a person's mental capacity and understanding around particular decisions
- Specified staff are able to assess potential deprivations of liberty and make recommendations about authorisation of such situations

During 2010/11, training across all partner organisations has been delivered to a total of 353 staff. This has comprised:

- Introduction to the Mental Capacity Act: 10 courses, 190 staff trained
- Deprivation of Liberty safeguards: 10 courses, 76 staff trained
- Mental Capacity Act: Decision Makers: 10 courses, 87 staff trained

The safety of those who lack mental capacity has been promoted by the delivery of a programme of awareness raising visits to health and social care staff groups, service providers and hospitals, 24 visits were undertaken during the year.

Safer Bromley Partnership Achievements

The Board aims to improve the safety of vulnerable people by close links (strategically and operationally) with the Safer Bromley Partnership, which has these aims:

- Reduction of crime and fear of crime
- Building respect in communities and reduction of anti-social behaviour
- Reduction of the harm caused by illegal drugs



Members of the Safer Bromley Partnership (SBP) include: Metropolitan Police Bromley, London Borough of Bromley, London Fire and Rescue Authority, Bromley Primary Care Trust, Offender Management Service, registered social landlords, Bromley Race Equality Commission, Community Links and Bromley Magistrates Court. The Partnership has a Community Engagement Forum to assist in achieving its objectives.

The Safer Bromley Partnership has a three year strategy and an annual work plan, which includes targeted initiatives to reduce crime against vulnerable people these include:

- People with learning disabilities have developed a project plan to deliver training to their peers on safety in the use of public transport. A full report was given to the December BSAB meeting.
- The Domestic Violence 'One Stop Shop' which provides advice from a police officer, a local solicitor, Bromley Homeless Families Unit, Bromley Womens Aid and Victim Support. This service is promoted widely has assisted 459 residents during 2010/11.
- The Safer Bromley Van provides additional security locks, spy-holes etc
- Action against rogue traders, through proactive checking of builders and traders. During 2010/11, 10 rogue trader days took place.
- There were 56 rapid response interventions against rogue traders, resulting in savings of £580,000 for consumers.
- There were 73 talks and events to encourage the active participation of Bromley residents in the identification of rogue traders/distraction burglars.
- All trading standards staff have received training and achieved competence in recognising and reporting abuse and neglect.

4. Safeguarding adults referral and outcome data

Summary analysis of referral and outcome data:

The Board's multi-agency procedures set out the circumstances in which a safeguarding referral should be made and how it should be responded to by partner organisations. These procedures seek to ensure the involvement of the vulnerable adult throughout the process, police investigation of possible crimes and a proportionate response to each concern. A data set is completed for all referrals in line with the requirements of the Department of Health.

In 2010/11, there has been an increase in cases investigated through the safeguarding procedures; this confirms the trend since BSAB was established in 2008. This is due to the Board's work in promoting greater consistency in the reporting and recording of safeguarding concerns across the partnership.

The most important aspect of safeguarding work is to ensure good outcomes for the service user. This statistical report includes information on the outcomes of investigations in terms of whether the abuse or neglect was substantiated or not. The Board has clarified the reasons why cases are not substantiated; the reasons for this can include: a lack of clear evidence, situations where there is conflict between family members, and denial of any abuse or neglect taking place by the service user.

The report includes details of measures put in place to ensure service users are protected. In many instances, they are protected through a change in their care arrangements or living circumstances. The report also details the outcomes for the person who was alleged to have caused the harm, including action taken by the police. This year there has been a significant increase in cases where there has been police action as a result of improved inter-agency work.

Key Headlines:

- An increase in the overall number of referrals investigated through the Bromley Safeguarding Adults Multi-Agency Procedures from 443 in 2009/10 to 523 in 2010/11. This is an increase of 18% in referrals from 2009/10. The highest rate of increase this year related to people aged 18-65 with mental health needs.
- 232 (44%) referrals were made by social care staff with a further 114 (22%) made by health care staff. This is in line with last year's equivalent figures of 47% and 21%, highlighting the importance of ensuring that staff in contact with vulnerable adults meet BSAB competences in recognising and reporting abuse.
- As in previous years, 361, over two thirds, of all referrals relate to older people over 65. Of these, 153 (42%) concerned people aged 75-84, and a further 145 (40%) concerned people aged over 85.



- The most common abuse category is physical abuse, followed by financial abuse, which are respectively 231 (44%) and 118 (23%) of total referrals.
- 246, almost half of the alleged abuse reported during the year took place in the vulnerable person's own home, including supported accommodation.
- Of concluded cases this year, 174 (40%) have been substantiated or partially substantiated (40% last year). Benchmarking reported to the Board indicates this is comparable with other outer London authorities.
- The Board welcomes the significant increase in the number of cases where there is police action as a reflection of improved operational practice. The increase has been from 43 cases in 2009/10 to 106 cases in 2010/11.

Analysis of adult safeguarding referral data 2010/11

Referral rate: Chart 1 below shows that there has been an increase in the number of safeguarding referrals since 2008. There has been a further 18% increase from 443 in 2009/10 to 523 in 2010/11. Of referrals during the year, 22 concerned service users funded by Bromley Council, but living out of the borough. 247 of those referred for adult safeguarding concerns were already known to adult and community services.

The Board recognises the increase in referrals is due both to its work raising awareness of what was previously a hidden issue and improved data capture. Partner organisations in Bromley have responded to the challenge of meeting high standards in terms of the multi-agency response to each safeguarding referral. Statutory partners have identified operational leads who are responsible for ensuring each partner implements safeguarding procedures effectively.

The Board seeks to ensure consistency in terms of the multi-agency response to each referral through its performance standard of a strategy meeting or discussion within five working days of referral. The Metropolitan Police and Adult and Community Services have identified professionals who undertake key roles in coordinating the response to each referral.

In the 55 instances where there have been repeat referrals about the same service user, there has been consideration of whether this is due to inadequate safeguarding arrangements. No situations have been identified where service users have come to serious harm as a result of inadequate safeguarding arrangements.

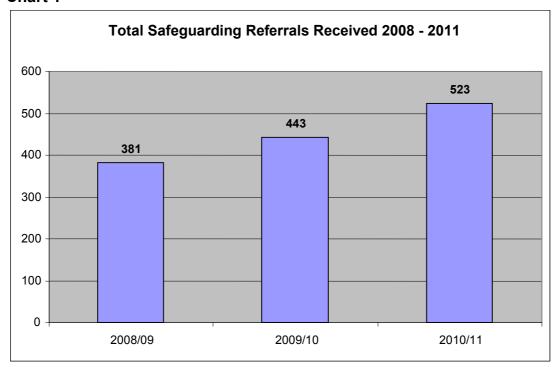
Repeat abuse can occur in communal living settings such as care homes, and the person alleged to have caused the harm can be another vulnerable adult.



Work has been done with care home providers to ensure that there is early reporting of such incidents and a protection plan is developed.

In most cases the needs of the person who allegedly caused the harm are reassessed to clarify how they can be supported without compromising the safety of other residents.

Chart 1



Service user groups: Chart 2 shows the distribution of referrals amongst key groups of vulnerable people. As is to be expected in Bromley, older people over 65 continue to provide the largest proportion of people subject to a safeguarding referral.

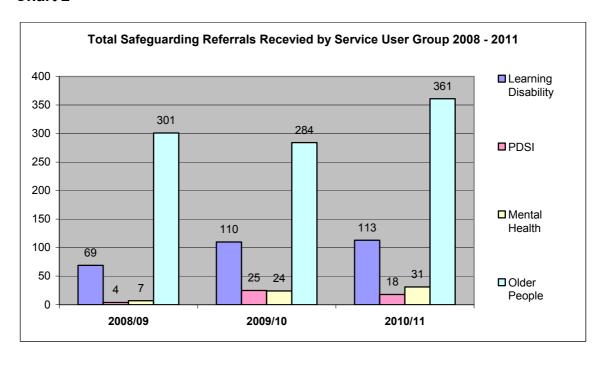
In total, 381 (73%) of referrals were about people over 65 and of these153 (42%) concerned people aged 75-84; and a further 145 (40%) concerned people aged over 85.

The figures for other service users including those with mental health needs relate only to people aged 18-65.

The largest increase in referrals this year has been in people age 18-65 with mental health problems. The Board has received a report this year from Oxleas NHS Foundation Trust accounting for their approach to ensure adult safeguarding.



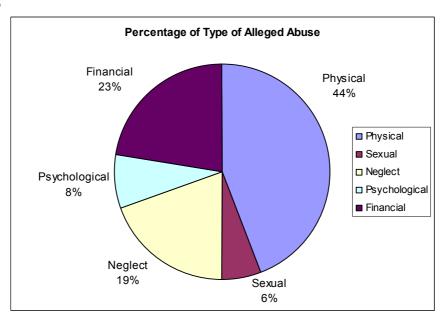
Chart 2



Type of alleged abuse: Chart 3 shows the categories of abuse reported. Allegations of physical abuse continue to be the most prevalent and include physical signs, such as the unexplained bruising of a service user who is unable to explain how the injury occurred.

This year the Board arranged specialist training for police officers and adult safeguarding staff, in responding effectively to safeguarding concerns regarding financial abuse, which is the second most common type of abuse reported.

Chart 3





Source of Referral: Chart 4 shows the source of referrals and highlights the fact that only 12 (2%) referrals were made by service users themselves. This can be due to communication problems and disabilities, as well as fear or reluctance to report concerns. Social care and health staff in total have made 346 (66%) safeguarding referrals, (68% 2009/10). The Board holds partners responsible for achieving targets to ensure the competence of these workers in recognising and reporting abuse.

It is also crucial friends, family, neighbours and the general community, who play a vital role in ensuring the safety of vulnerable people, can easily access information on making referrals. The Board's Communication Strategy aims to achieve this.

Chart 4

Source of Referral 20010/11	No of Referrals	%
Social Care Staff (Care Workers)	232	45%
Health Care Staff	114	22%
Family Member	65	12%
Other	34	7%
Housing	24	5%
Education Establishment	16	3%
Police	13	2%
Self Referral	12	2%
Friend/Neighbour	11	2%
Other Service User	1	0%
Care Quality Commission	1	0%
Total	523	100.0%

Chart 5 shows a breakdown of referrals by health staff and llustrates the involvement of a wide range of health professionals in the safeguarding process.

Chart 5

London Ambulance Service	26	23%
Dr (GP)	8	7%
Primary care staff	24	21%
District Nurses	11	10%
Oxleas	23	20%
Hospitals	22	19%
Total	114	100%

The largest proportion of adult safeguarding referrals from health staff received in 2010/11 were from the London Ambulance Service (LAS).



The LAS has a process for making referrals regarding vulnerable people to Bromley Council Adult Community Services. In accordance with a protocol agreed by BSAB in June 2009, 26 of these LAS vulnerable adults referrals met the threshold for investigation under the BSAB multi-agency procedures.

A further 160 referrals from LAS were dealt with as community care assessments. The Board have received a report that confirmed service users referred by LAS who did not meet the threshold for adult safeguarding, had an appropriate community care assessment of their needs, and where appropriate, a care package arranged.

Chart 6 gives information on the ethnicity of the subject of safeguarding referrals. The Board has an Equalities Impact Assessment and continues to collect data about the age, sex and ethnic background of service users. The Board oversees an action plan in response to this assessment, which seeks to ensure information is collected in order that any adverse impact of the procedures can be identified.

Chart 6 Ethnicity information for all referrals 2010/11

	No of Referrals	%
White British	393	76%
Information Not Yet Obtained	53	10%
Caribbean	18	3%
Any Other White Background	14	3%
Refused to Say	12	2%
White Irish	9	2%
African	9	2%
Any Other Asian Background	5	1%
Any Other Ethnic Background	3	1%
White Asian	2	0%
Indian	2	0%
White/Black Caribbean	1	0%
Pakistani	1	0%
Any Other Black Background	1	0%
Total	523	100.0%

Person alleged to have caused harm: Chart 7 illustrates the relationship between the person alleged to have caused harm and the vulnerable person. Partners and other family members together account for the alleged cause of 180 (35%) allegations across the different types of abuse. This illustrates vulnerable people are most at risk from those closest to them.



The Board seeks to ensure all Safer Bromley Partnership initiatives to reduce and respond to domestic violence can be accessed appropriately by vulnerable people through its competence framework and communication strategy.

In 143 (27%) referrals in 2010/11, the person alleged to have caused harm was a health or care worker. This includes allegations of neglect in care services

In 48 (9%) referrals the person who was alleged to have caused harm was another vulnerable adult. The Board seeks to ensure service users are protected whilst in services, by providers recognising possible risks and seeking support when there are concerns about the behaviour of a service user.

Chart 7

Relationship of person alleged to have caused harm for all referrals 2010/11

	No of Referrals	%
Other Family Member	118	23%
Social Care Staff	117	22%
Not Known	64	12%
Partner	62	12%
Other Vulnerable Adult	48	9%
Neighbour/Friend	33	6%
Other	32	6%
Healthcare Worker	26	5%
Other Professional	10	2%
Stranger	10	2%
Volunteer/Befriender	3	1%
Total	523	100.0%

Location of alleged abuse: Chart 8 shows the location of alleged abuse; with the service users own home being the most likely location. Care homes and nursing homes together account for 138 (27%) of referrals; a lower proportion than the 32% recorded last year. The Board seeks to ensure high quality services that promote dignity and respect for the individual through the accountability of service providers and commissioners.

Referrals are monitored by the Adult Safeguarding Team to identify any concerns about service providers. The Adult Safeguarding Manager leads the Care Services Group to ensure emerging issues about the safety or quality of services used by vulnerable people are responded to effectively and there is specialist health and social care professional input into investigations. This group receives reports from commissioners of services who oversee any action plan developed by the service to ensure the safety of residents.



Independent providers of social care are represented on the Board in recognition of their role in preventing and identifying abuse and neglect. Whistle-blowing is specifically mentioned in guidance to health and social care staff.

Chart 8

Location of alleged abuse for all referrals 2010/11

	No of Referrals	%
Own Home	211	40%
Care Home with Nursing	71	13%
Care Home	67	13%
Home of person alleged to have caused harm	40	8%
Supported Accommodation	35	7%
Other	30	6%
Not Known	18	3%
Public Place	14	3%
Acute Hospital	11	2%
Mental Health Inpatient Setting	9	2%
Other Health Setting (Including Hospice)	6	1%
Education/Training/Workplace Establishment	6	1%
Day Centre/Service	5	1%
Total	523	100%

Outcome of all closed referrals 2010/11 (including 52 referrals received in 2009/10) by service user group: Chart 9 shows that overall in 2010/11, 40% of concluded safeguarding referrals were either fully or partially substantiated, which is consistent with last year. The Board has received information which confirms this data is in line with comparable local authority areas.

Chart 9
Analysis of outcome data 2010/11

	Older People	Mental Health	Physical Disabilities Sensory Impairment	Learning Disabilities	Total	%
Unsubstantiated	124	0	4	40	168	39%
Substantiated	93	5	4	41	143	33%
Inconclusive	61	3	3	25	92	21%
Partially Substantiated	21	1	6	3	31	7%
Total	299	9	17	109	434	100%



Specific Outcomes - Service Users

Chart 10 shows data on outcomes for service users was collected from 434 concluded cases in accordance with Department of Health abuse of vulnerable adults (AVA) reporting requirements. Outcomes are collected from cases whether abuse is substantiated or not, and each case may have more than one outcome.

The most common outcomes following safeguarding referral are: a community care assessment (190 cases), increased monitoring (93 cases), and no further action (59 cases). There has been an increase or change of care in 39 cases.

To protect vulnerable adults, 48 service users have moved address, restriction of access by an alleged perpetrator has occurred in 23 cases. 16 service users have had specific legal measures placed upon them to protect their finances and a further 8 have had help with managing finances.

Referral to independent advocacy has been reported in only 8 cases, the Board is seeking to increase the number of service users benefiting from independent advocates through training and performance monitoring.

Chart 10
Outcomes for Service Users

	Older People	Physical Disabilities Sensory Impairment	Learning Disability	Mental Health	Total
Community Care Assessment & Services	146	9	35	0	190
Increased Monitoring	55	4	28	6	93
No Further Action	39	0	19	1	59
Vulnerable Adult removed from property or service	34	1	13	0	48
Moved to increase / Different Care	29	1	7	2	39
Restriction/management of access to alleged perpetrator	10	0	10	3	23
Referral to Counselling /Training	3	4	11	2	20
Application to change appointee-ship	8	2	2	0	12
Referral to advocacy scheme	6	0	1	1	8
Management of access to finances	5	0	2	1	8
Other	4	1	2	1	8
Application to Court of Protection	3	0	0	0	3
Civil Action	0	0	1	0	1
Guardianship/Use of Mental Health act	0	0	0	0	0
Review of Self-Directed Support (IB)	0	0	0	0	0
Referral to MARAC	0	0	0	0	0
Total	342	22	131	17	512



Specific outcomes – person alleged to have caused harm

Chart 11 shows the outcomes for the person alleged to have caused harm which were collected from 434 cases concluded during 2010/11 in accordance with the requirements of the Department of Health. Each case may have more than one outcome. The most common outcome for the person alleged to have caused harm is 'no further action', which was the outcome in 186 cases and relates to the fact that abuse is not substantiated in a high proportion of cases.

It is significant there has been police action in 106 cases (an increase from 43 cases last year) and police prosecution/caution in 13 cases (an increase from 2 cases last year).

In 20 cases, the person alleged to have caused harm was removed from the property (a decline from 25 cases last year). In 26 cases, there was disciplinary action against a staff member (an increase from 20 cases last year).

Chart 11
Outcomes for person alleged to have caused harm

	Older People	Physical Disabilities Sensory Impairment	Learning Disability	Mental Health	Total
No Further Action	143	2	39	2	186
Police Action	64	5	34	3	106
Management of access to the Vulnerable Adult	22	1	15	6	44
Counselling/Training/Treatment	19	5	6	0	30
Disciplinary Action	15	1	10	0	26
Removal from property or service	16	1	2	1	20
Action by Care Quality Commission	17	0	1	0	18
Community Care Assessment	15	1	1	1	18
Continued Monitoring	13	0	4	0	17
Criminal Prosecution / Formal Caution	9	0	3	1	13
Not Known	5	0	3	0	8
Exoneration	0	2	5	0	7
Referred to PoVA List / ISA**	1	0	1	0	2
Action by Contract Compliance	1	0	1	0	2
Referral to MAPPA	0	0	1	0	1
Action under Mental Health Act	0	0	0	1	1
Total	340	18	126	15	499

^{**}Referral to Protection of Vulnerable Adults list run by Independent Safeguarding Authority for consideration of barring from work with vulnerable adults.



5. BSAB work plan 2011/12

The work plan for the next three years will build on the five objectives agreed by partners and service users in the new BSAB Safeguarding Adults Strategy 2011-14:

- 1. **Awareness:** continue to improve awareness of the signs of abuse and neglect and know how to report concerns.
- 2. **Services:** ensure all services adhere to the highest standards of safety for service users.
- 3. **Practice:** promote consistent safeguarding practice by robust quality assurance and performance information.
- 4. **Choice:** encourage vulnerable people to take control of their situations.
- 5. **Capacity:** Safeguard vulnerable adults who lack the ability to make decisions that would protect them from harm.

Significant tasks from the 2011/12 work plan are:

- Implementation of 'Safeguarding adults in London, Policy and Procedures' across the Bromley adult safeguarding partnership in June 2011. This will require all partners to be aware of the new procedures and updating of local protocols for practitioners.
- Commissioning an external agency to maximise the collection of feedback from service users and their advocates, about their experience of the safeguarding process. The evidence gained will be used to develop actions to make improvements to practice.
- Audit of health and social care settings to determine awareness of Mental Capacity Act 2005 principles, and compliance with the Deprivation of Liberty Safeguards, and to make recommendations to improve outcomes for service users.

The BSAB work plan 2011/12 is attached (Appendix 1)



6. Appendices

Appendix 1: BSAB work plan 2011/12

Appendix 2: Analysis of Safeguarding Spend 2010/11

Appendix 1

AWARENESS

In 2011/12 the Board will continue to raise awareness through the Bromley council website, the Newsletter, factsheets, leaflets and posters to ensure community awareness of how to recognise and report abuse. The Board will use the 2011 BSAB conference to explore current trends in adult safeguarding and will ensure that partner organisations and the wider community. Know how to report concerns appropriately.

OBJECTIVE 1 Continue to improve awareness about how to spot the signs of abuse and when to report it to the Lead Agency **Priorities:**

- 1.1 Promote the role of the community in safeguarding vulnerable adults, including those at risk of severe self-neglect.
- 1.2 Minimise the risk to vulnerable adults who privately buy care services, through a marketing campaign targeted at the independent sector.
- 1.3 Ensure accessible, effective safeguarding material and guidance is available to the general public to support them in their safeguarding role.

Task	Desired Outcome	By whom	By when	Overseen by
Mail out to 40+ faith groups and 30+ small community groups.	Increase community knowledge of adult safeguarding	Safeguarding Adults Coordinator	30.09.11	T&A Sub-group
Ensure service users and their families/advocates are well informed through new social care website 'My Life', on how to reduce risks when purchasing their own care, and the use of accredited providers who meet agreed standards in prevention, recognition and reporting of abuse and neglect is promoted.	People can access quality assured information, advice and guidance that meets the needs of all people in the community.	Supporting Independence in Bromley	30/04/2011	T&A Sub-group
Raise awareness of hate crime, 'scams' and rogue traders, abuse and neglect and how to report it amongst service users their informal carers, the general public and staff groups.	Community safety is improved through engagement with the council and other agencies to reduce harassment and risks to people in situations of ongoing vulnerability.	Safer Bromley Partnerships/BSAB Partners/ Conference Sub-Group	Newsletter 30.04.11 Conference 22.09.11	T&A Sub-group

SERVICES

Partners comply with local and national safeguarding guidance and relevant and guidance to prevent the abuse or neglect of vulnerable adults using directly provided services, services commissioned by a partner organisation or a service purchased by a vulnerable adult.

OBJECTIVE 2: Ensure all services that are commissioned, regulated or accredited by the BSAB partners adhere to the highest standards of safety for service users

Priorities:

- 2.1 Ensure each partner is able to demonstrate the quality of the service it endorses, and that emerging safeguarding issues are reported to the BSAB for oversight.
- 2.2 Continue to promote and review the provider training programme as the wider health and social care workforce changes in line with the Supporting Independence in Bromley Programme
- 2.3 Continue successfully engaging with endorsed providers to ensure services are developed that meet the current and future needs of vulnerable adults.

Activity	Desired Outcome	By whom	By when	Overseen by
NHS guidance, (Safeguarding adults: the role of NHS commissioners; Department of Health, Mar 2011) is used to evaluate current commissioning arrangements.	Service users are safe in the services commissioned on their behalf.	Oxleas, Bromley PCT commissioners, South London Healthcare Trust.	31.03.12	PPP Sub-group
Review allocation of training places to providers in line with changes in health and social care workforce to ensure vulnerable people are safeguarded	with them whether as a result of	Commissioners of health and social care in all partner organisations.	30.09.11	T&A Sub-group
Monitor safeguarding alerts arising from concerns about neglect or abuse by a provider or directly purchased care and make recommendations for action to commissioners.	Lessons are learnt from safeguarding investigations and service users benefit from improved services.	Adult Safeguarding manager/Care homes review Group/Commissioners of services/ supporting Independence in Bromley	Ongoing	PAQ Sub-group

PRACTICE

It is the policy of the Bromley Safeguarding Adults Board to drive continuous improvements in the standard and consistency of safeguarding practice in its overview of safeguarding activity. It is supported to deliver this objective in the scrutiny role of the Performance Audit and Quality Sub-group, the Adult Safeguarding Manager as lead professional for safeguarding practice, the specialist safeguarding leads within the statutory partner agencies and consultant lead practitioners to monitor and promote effective safeguarding practice within lead agency teams. The process of continuous improvement and review is also reflected in the Boards Safeguarding Training strategy and the Safeguarding Competence framework which ensures that the workforce is trained to agreed practice standards. Learning from casework is also incorporated into the annual review of the required competences and the content of the annual training plan to ensure developing needs are met.

OBJECTIVE 3 Continue to promote consistent safeguarding practice across agencies underpinned by robust quality assurance & scrutiny mechanisms & reliable, timely performance information.

Priorities:

- 3.1 Ensure learning from quality audits is embedded into safeguarding practice and leads to improves outcomes for vulnerable adults
- 3.2 Demonstrate how risks to vulnerable adults are being reduced by good practice captured through an embedded BSAB performance outcomes framework and a developed scrutiny function.

3.3 Ensure all safeguarding legislation, learning from national enquiries and national health NHS guidance for this year is applied to

Activity	Desired Outcome	By whom	By when	Overseen by
Partners report on implementation improvement plans following safeguarding audits.	BSAB safeguarding practice standards are reviewed and action taken to address any problems identified.	All nartners	Regular reports to PAQ subgroup	PAQ Sub-group
Develop and implement an improved process for service user/advocate feedback.	partner performance and improve	Adult Safeguarding Manager/local service user and advocacy groups.	30.09.11	PAQ Sub-group
Support Implementation of London multi- agency policy and procedures by production and publication of local toolkit for professionals	and proportionate response to	Adult Safeguarding Manager All partners.	30.06.11	PPP Sub-group

CHOICE

Ensuring that people know about making the right choice about delivery of their care and are informed about making safe choices. The Board will ensure that people who are the most vulnerable members of the community have access to those services which will keep them safe, Community Safety, Safer Neighbourhood Teams, Trading Standards and the Home Fire Safety Initiative. In situations where a service user lacks the ability to make a decision that will keep themselves or theirs safe from significant harm, we will ensure that the delivery of services conforms to the highest standards of care. Through an effective strategy the Board will promote activities which enable people to exercise choice and make informed decisions about the risks they choose to take.

OBJECTIVE 4 Continue to support vulnerable adults to maximise their independence & quality of life by encouraging them to take control of their situations, including positive risk taking Priorities:

- 4.1 Minimise the risk of abuse, particularly financial abuse, to vulnerable people who choose to privately buy their own care services, by continuing to work with established, well-placed organisations within the borough.
- 4.2 Ensure vulnerable adults who are eligible for Council-funded services, particularly those who choose to receive some or all of that care via a direct payment, are provided with guidance about how to safeguard themselves.
- 4.3 Empower vulnerable adults to take control of their lives by ensuring that the positive risk taking policy is embedded into working practice.

Activity	Desired Outcome	By whom	By when	Overseen by
Ensure that effective systems are put in place to ensure safeguarding standards are met in accredited services/registered personal assistants.	People can access safe services and support.	LBB Contracts and commissioning/care providers	31.10.11	PPP Sub Group
Ensure Bromley 'My Life' website includes accessible information for service users, families and informal carers on preventing abuse.	People can access quality assured information, advice and guidance that meets the needs of all people in the community.	LBB Adult and Community Services	30.04.11	T and A Sub group
Check through audit that positive risk taking policy is being used by practitioners and report back to BSAB.	Vulnerable people are empowered to express their wishes, to exercise control over their lives and supported to manage risks.	LBB Adult and Community Services	30.09.11	PAQ Sub Group

CAPACITY

The Board will continue to promote the core principles of the Mental Capacity Act and ensure that they are incorporated into all its processes, and reflected in the practice standards of practitioners, that care providers and clinical staff in health settings are compliant with the Deprivation of Liberty of Safeguards and that families of adults who lack the capacity to make a decision that will safeguard them from harm, are aware of the legislative framework to ensure the safety of all concerned.

OBJECTIVE 5 Continue to safeguard vulnerable adults who lack the ability to make a decision that will safeguard themselves or others from significant harm.

Priorities:

- 5.1 Minimise the risk to vulnerable adults who lack capacity in homes rated as 'adequate' through a targeted training programme
- 5.2 Reduce the risk to vulnerable adults who may lack ability to make decisions by ensuring that adult safeguarding work is fully compliant with the principles of the Mental Capacity Act.
- 5.3 Continue to safeguard vulnerable adults using commissioned services by ensuring that contracts contain adequate reference to the Mental Capacity Act and the Deprivation of Liberty Safeguards.

Activity	Desired Outcome	By whom	By when	Overseen by
Training in the core principles of the Mental Capacity Act and Deprivation of Liberty Safeguards is delivered to those care homes assessed as 'adequate' by the Care Quality Commission.	People who may lack mental capacity are treated with respect and dignity and their rights are upheld.	Mental Capacity Act Lead/private care homes	30.11.11	MCA LIN
	No vulnerable person is subject to an illegal deprivation of liberty	All NHS Partners, private care homes, mental capacity act lead, quality assurance manager, clinical governance leads	30.11.11	MCA LIN/ PAQ Subgroup
Ensure all contracts for commissioned services contain clauses requiring compliance with Mental Capacity Act and Deprivation of Liberty Safeguards	The rights of service users who may lack mental capacity are upheld.	All NHS Partners, London Borough of Bromley.	30.04.12	MCA LIN/ PAQ Subgroup

Appendix 2

BROMLEY SAFEGUARDING ADULTS BOARD BUDGET OUTTURN REPORT

Description	Revised Budget	Total Outturn	Variance
	£	£	£
EXPENDITURE			
Publicity & Awareness	1,410	•	264
Publicity & Awareness Contingency	1,500		(1,500)
Training Strategy	29,000	•	(6,060)
Training Room Hire	2,000	•	640
Purchase of E-Learning System	7,500		(7,500)
Training Contingency	2,500		(2,500)
Professional Subscriptions	225	_	749
BSAB Conference Expenditure	3,500		(114)
Serious Care Reviews	0	0	0
Total Expenditure	47,635	31,614	(16,021)
INCOME			
Balance Bfwd	(16,305)	(16,305)	0
Donations	0	0	0
Contributions from Met Police	(5,000)	(5,000)	0
Contributions from Oxleas NHS Trust	(5,000)	(5,000)	0
Contributions from South London Health Trust	(5,000)	(5,000)	0
Contributions from Bromley Primary Care Trust	(8,000)	(8,000)	0
Contributions from LBB	(8,500)	(8,500)	0
Contributions from LBB - Training Grant	0	(325)	(325)
Total	(47,805)	(48,130)	(325)
Balance Cfwd	(170)	(16,516)	(16,346)

Report No. ACS 11035

London Borough of Bromley

PART 1 - PUBLIC

<Please select>

Decision Maker: Adult and Community Services Performance Development

and Scrutiny Committee

Date: 26th July 2011

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

Title: CONTRACTING ACTIVITY IN ADULT AND COMMUNITY

SERVICES 2011-12

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 ServicesType name here

Ward:

1. Reason for report

Policy Development and Scrutiny (PDS) Committees are reviewing the Contract Registers and contractual activity of all portfolios. This report outlines current contractual activity in Adult and Community Services and sets out plans for activities to be undertaken in 2011

2. RECOMMENDATION

Members are asked to note and comment on this report.

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: 750
- 4. Total current budget for this head: £62m
- 5. Source of funding:

<u>Staff</u>

- 1. Number of staff (current and additional): 15 in Procurement and Contract Compliance Teams
- 2. If from existing staff resources, number of staff hours:

Legal

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

Customer Impact

 Estimated number of users/beneficiaries (current and projected): 10,000 service users who benefit from services procured by ACS

Ward Councillor Views

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

3. COMMENTARY

- 3.1 The Executive and Resources Policy Development and Scrutiny (PDS) Committee has recommended that the PDS committee for each Portfolio reviews the contracts register associated with that portfolio.
- 3.2 The ACS department spends £34m per annum (gross of client contribution and Funded Nursing Care) on Spot contracts for clients in residential or nursing care placements and £27.5m per annum on contracts which have been tendered. The contracts register holds all the information on our tendered contracts with Care First holding the information about our spot placements.
- 3.3 Our current contracts register shows that there are 146 individual ACS contracts. The annual value is £30.8m and the total contract value is £153m. The individual contract values range from less than £1k to £27m. Appendix 1 is an extract from the register which shows contracting activity planned for the rest of 2011.
- 3.4 Forty one contracts expire during the next six months. These include a number of significant contract awards which will be reported to the Portfolio Holder. Project plans are in place to ensure that pre-tender planning and procurement processes will be completed on time and reported as required.
- 3.5 Several framework agreements are being developed during 2011-12. Putting these agreements in place will ensure that the department is able to call on quality services from chosen providers at guaranteed prices. Our experience of using framework agreements in the Supporting People programme is that very cost effective contracts can be achieved through both putting the framework in place and through mini competition when services are called off from the framework. The frameworks are listed below and the timelines for their award are set out in Appendix 2.
 - § Extra Care Housing. Procurement Strategy agreed by Executive 6.4.11
 - S Domiciliary Care. Procurement strategy reported to Executive 20.7.11
 - § Flexible Support Services for People with Learning Disabilities. To be reported to Executive 7.9.11
- 3.6 Commissioners are currently reviewing respite services for older people and Advocacy Services. The outcomes of these reviews will be considered by the department and recommendations for procurement strategies will be reported to the Portfolio Holder or Executive as appropriate. Procurement activities will then be carried out by the Procurement Team.
- 3.7 Other key contracts which will be subject to further work during 2011-12 are;
 - § Equipment and aids to daily living
 - § Support to people in receipt of direct payments
 - § Preparation for the formation of Healthwatch as a successor to the LINK.
- 3.8 A key activity every financial year is to ensure that inflationary increases on all contracts are managed within budget. During 2009-10 and 2010-11 officers undertook were able to hold the average inflation rates negotiated with contractors to below the Council's budgeted inflation rate, thus making a considerable contribution towards the departmental efficiency targets.

- 3.9 The contracts team has developed and adopted a work plan based on work arising from all contracts due to expire during the next 3 years. It also outlines the strategy to be adopted for commissioning, the responsible commissioner and key milestones. A traffic light mechanism is used to assess the current status of each project and any projects with red status are reported to fortnightly divisional management team meetings and quarterly to the ACS Departmental Management Team. Commissioners and Procurement and Contract Compliance staff implement recovery plans for projects with red status alerts in order to ensure that the department operates within financial regulations.
- 3.10 The Contract Compliance team is responsible for ensuring that all contracts are monitored. The level of monitoring undertaken is decided on the basis of a risk assessment which takes into account the vulnerability of users, previous performance, complaints, safeguarding issues raised and contract value. Monitoring is proportionate to the size of the contract and risk, therefore ensuring that resources are allocated appropriately. The team is also responsible for ensuring that regular performance information is received, analysed and reported to relevant commissioners and making regular visits to services to ensure that they are delivering high quality services at best value. The team also facilitates regular provider forums in order to engage with the supplier market.
- 3.11 The ACS Procurement and Contract Compliance Team has taken a leading role for the Council on the implementation of e-procurement after being selected by Corporate Procurement to run a pilot project. We are working on behalf of the borough with a pan London group working with Capital Ambition which is procuring a web portal that facilitates web based procurement activity. The e-tendering system will also ensure that all future tender opportunities are advertised through the Governments Contracts Finder website. E-tendering significantly reduces the officer time and resources required for procurement exercises including administering the process of getting quotations for lower value goods and services.
- 3.12 The ACS Procurement and Contract Compliance Team is working in cooperation with Corporate Procurement to look at the opportunities around joint contracting, particularly with the members of the South East London Procurement Group.

4. POLICY IMPLICATIONS

Arrangements for ensuring best value and high quality services are key to delivering the "excellent council" objective within Building a Better Bromley.

5. FINANCIAL IMPLICATIONS

- 5.1 There are 146 individual ACS contracts on the Contracts Register. The annual value is £30.8 and the total contract value is £153m.
- 5.2 There are measures in place to ensure that savings that can be made through procurement processes are identified. All new contract awards where the value exceeds current value less 25% will be considered by an Officer Procurement Board and a Member Star Chamber.

6. LEGAL IMPLICATIONS

Procurement and Contract Compliance work is carried out in accordance with the Council's Financial Regulations and Procurement Rules. Where appropriate procurement exercises are undertaken in accordance with European Union regulations.

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

			Extension	Extension		Α	nnual	
Title	Start Date	End Date	Expiry	Details	Total Value	Va	alue	Notes
A2Dominion Housing Older People	01-Apr-07	12-Jul-11	12-Jul-11	2 month ex	£ 37,96	1 £	17,522	Ceases
Home Group (Stonham) Supported Housing Ex-Offenders	01-Apr-11	31-Jul-11	31-Jul-11	Contract ex	£ 5,76	3 £	69,220	New contract awarded
Look Ahead Supported Housing Ex Offenders	01-Apr-11	31-Jul-11	31-Jul-11	Contract ex	£ 1,98	3 £	23,840	New contract awarded
Look Ahead Accom and Fltg Pregnant Teenagers	01-Apr-07	31-Aug-11	31-Aug-11	Extension	£ 340,01	7 £	36,559	New contract awarded
Look Ahead Supported Housing Young People	01-Apr-07	31-Aug-11	31-Aug-11	Further ext	£ 1,407,27	3 £	133,836	New contract awarded
Look Ahead Fitg Support Bromley Independent Scheme Young People	01-Apr-07	31-Aug-11	31-Aug-11	Extension	£ 140,83	3 £	13,394	New contract awarded
A2Dominion Supported Housing Young People		31-Aug-11		None	£ 39,03) £	93,670	New contract awarded
Catch 22Supported Accom Wiverton and Stembridge Young People	01-Apr-11	31-Aug-11		None	£ 19,53	3 £	46,887	New contract awarded
GS Laundries - Contract for the provision of laundry services	01-Jun-11	02-Sep-11			£ 7,50	£ (30,000	Negotiating new contract
Age Concern Floating Support Service Older People	01-Apr-11	30-Sep-11		No extensi	£ 30,00	£		Will cease
Information, Advice & guidance for ACS Services	01-Oct-10	30-Sep-11		No extensi	£ 85,00	£	85,000	Negotiating new contract
Community Links Bromley Core Funding and Volunteer Centre	01-Apr-11	30-Sep-11		None	£ 77,63	£	155,271	Report ACS in September
Advocacy First	01-Apr-11	30-Sep-11		None	£ 10,47	£	20,940	Advocacy review to DMT July
Community Links PA Accreditation	01-Apr-11	30-Sep-11			£ 10,00	£	20,000	Pilot project
Inspire Community Trust Advice and Support Service for Direct		30-Sep-11			£ 46,08		92,159	Report to DMT
Liberata Payroll Service for Direct Payments with Holding Accounts	02-Feb-08	30-Sep-11	30-Sep-11	Extended f	£ 47,25	£	9,750	Report to DMT
Avenues Trust support at Bourne Way, The Elms and Kings Hall Road		30-Sep-11		2 year exte	£ 832,00	£		Report to ACS
Burgess Autistic Trust - Winsford House		30-Sep-11			£ 588,86) £	92,860	Report to ACS September
Bexley and Bromley Advocacy Speaking Up Group	01-Apr-11	30-Sep-11			£ 10,00	£	10,000	,
	40.5.40	00.0	00.0 44		0 50.00		450.000	Consultation underway about future
Oakhouse Food Frozen Foods Delivery Service		30-Sep-11	30-Sep-11	Extended t		_		arrangements for meals
Citizens Advice Bureau - Independent Housing Advice Service		31-Oct-11		0 11 1	£ 60,47	_		Report to DMT July
Bromley Citizens Advice Bureau Core Funding General Advice Service		31-Oct-11		Option to e				Report to DMT July
Mission Care Intermediate Care - Older People		28-Nov-11			£ 5,080,11	_	· · · · · · · · · · · · · · · · · · ·	To be extended
Post Office Concessionary Travel - Older People		31-Dec-11		3 year exte		£		Work in progress
Support Service for families and carers affected by stroke		31-Dec-11		Option ava				Work in progress
Crime Reductions Initiative Substance Misuse	01-Apr-08	31-Dec-11	31-Dec-11	Extended f	£ 2,198,40	1 £	439,681	Work in progress
DVDACO (Describe) Version Described & Outletone Att. Co. 1	04 4 00	04 D 44	04 D 44	Futural at 1.0	0 400.00	- ^	00.040	NA/a da ita waa awaa
BYPASS (Bromley Young Persons Alcohol & Substance Misuse Service)		31-Dec-11						Work in progress
Phoenix Futures	U1-Apr-08	ა1-Dec-11	ა1-Dec-11	Extended f	£ 1,489,02) £	307,622	Work in progress

					2011								2	012			
LD Framework	April	May	June	July	August	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	July	Aug
Gateway review decision date																	
Tender period																	
Evaluation period																	
Contract award decision date																	
Framework start date																	
Extra Care Framework																	
Gateway review decision date																	
Tender period																	
Evaluation period																	
Contract award decision date																	
Framework start date																	
Mini Competitions						-											
<u> </u>																	
Domiciliary Care																	
Gateway review decision date																	
Preparation of documents						1											
Tender period								,	,								
Evaluation period													•				
Contract award decision date																	
Implementation Period																	
Framework start date																	

Agenda Item 14

Report No. RES11070

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Adult and Community PDS Committee

Date: 27th July 2011

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

Title: ADULT AND COMMUNITY PDS WORK PROGRAMME

2011/2012

Contact Officer: Philippa Stone, Democratic Services Officer

Tel: 020 8313 4871 E-mail: philippa.stone@bromley.gov.uk

Chief Officer: Mark Bowen, Director of Resources

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

- 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: £344,054
- 5. Source of funding: Existing 2011/2012 budgets

Staff

- 1. Number of staff (current and additional): There are 10 posts (9.22 fte) in the Democratic Services Team .
- 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. This report does not involve an executove decision

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 16th June 2011 includes key decisions related to the Adult and Community Portfolio and the next Forward Plan will be published on 14th July 2011.
- 3.3 The next meeting of the Accommodation and Care for Older People Reference Group will be held on 10th October at 9.30am.
- 3.5 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:	Previous work programme reports
(Access via Contact Officer)	

A&C PDS Committee – Work Programme 2011/2012

4th April 2011 (Joint with PPS PDS)

SLAM Update

14 June 2011

Appointment and Review of Co-opted Members Supporting Independence in Bromley Update

Annual Complaints Report

Adult and Community Portfolio Plan

Housing and Residential Services Annual Report

Empty Properties: Outcome of Feasibility Review

Sheltered Housing – Outcomes from Consultation

LD Contracts – Avenues Trust

Short Break Service for People with Learning Disabilities

Budget Closedown 2010/2011

Matters Arising/Work Programme

\$Stroke Services in Bromley

Health Scrutiny Sub-Committee: 19th July 2011

Update from South London Healthcare NHS Trust: Dr Chris Streather, Chief Executive

26 July 2011

Bromley Safeguarding Adults Board 2009/10 Annual Report (PDS)

Budget Monitoring 2010/11 (PH)

Matters Arising/Work Programme

Changes to the provision of small items of equipment and talking books for visually impaired people

Proposed changes to older people's mental health inpatient services within Oxleas NHS Trust (PH)

*Rewarding and Fulfilling Lives – A Strategy for Adults with Autism (PDS)

Third Sector Scrutiny: Advocacy for All (PDS)

[†]Contract Renewal 6 Monthly Update

27 September 2011

Supporting Independence in Bromley Update Review of Adult Social Care Survey (PDS) **Budget Monitoring 2010/11** Dementia Strategy

*Blue Badge Update

*Taxicard Update

Capital Programme

Matters Arising/Work Programme

*Scrutiny of a Budget Area: TBA

1 November 2011

Monitoring Direct Payments and Personal Budgeting Adult and Community Services Mid-year Performance Report Housing and Residential Services Mid-year Performance Report Update on Quality of Domiciliary Care **Budget Monitoring 2010/11**

^{\$}NHS Quality, Innovation, Productivity and Prevention (QIPP) Programme Update

^{*}Scrutiny of a Budget Area: Commissioning

Matters Arising/Work Programme *Scrutiny of a Budget Area: TBA

[†]Re-ablement Review

31 January 2012

Monitoring Direct Payments and Personal Budgeting
Public Health Update from the Portfolio Holder for Resources
Contract Monitoring of Care Homes – Annual Report

*Support Planning and Brokerage Contract for People who do not meet the Council's Eligibility
Criteria for Social Care
Budget Monitoring 2010/11
Capital Programme
Matters Arising/Work Programme
Drug Action Team Annual Report

[†]Contract Renewal 6 Monthly Update [†]Scrutiny of a Budget Area: TBA

*Stroke Services in Bromley Update

10 April 2012

Monitoring Direct Payments and Personal Budgeting Draft Portfolio Plan Budget Monitoring 2010/11 Capital Programme *Scrutiny of a Budget Area: TBA

Last Updated 13.07.11

^{*}Part 2 (Exempt) Report

[†]Item requested by Chairman/Committee Member

^{\$} Item Scheduled by NHS representatives

Agenda Item 16

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Agenda Item 17

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

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